

2 Overview of Australian hospitals

Introduction

This chapter describes the public and private hospital sectors in terms of the number of hospitals and the availability of hospital beds. Summary statistics for admitted and non-admitted patients are also presented for each sector. Information is included on the number of separations for patients and their aggregated and average length of stay, presented on the basis of the sector of the hospital and the type of hospital within the sector. Later chapters present information on the basis of characteristics of admitted patients and their hospital stays (Chapters 6 to 11).

The summary information on public and private hospitals is derived from the National Public Hospital Establishments Database and the Australian Bureau of Statistics' Private Health Establishments Collection (ABS 2001, and unpublished data). National statistics are presented for the years 1996-97 to 2000-01 and State and Territory detail is presented for 2000-01 for public hospitals and for 1999-00 for private hospitals. Information for private hospitals was not available for 2000-01 at the time of publication of this report.

Summary separation, patient day, average length of stay and average cost weight information are derived from the National Hospital Morbidity Database. National statistics for the years 1996-97 to 2000-01 and State and Territory statistics for 2000-01 are presented.

The hospital sectors and types reported in this chapter are public acute hospitals, public psychiatric hospitals, private free-standing day hospital facilities and other private hospitals. Data are also presented for all public hospitals combined, all acute hospitals (that is, excluding public psychiatric hospitals), all private hospitals and all hospitals. For confidentiality reasons, private free-standing day hospital facilities were not separately identified for Tasmania. Therefore, totals for Australia for private free-standing day hospital facilities and other private hospitals do not include Tasmania. Further information on these types of hospitals is provided in Appendix 5.

As detailed in Chapter 1, there is some variation in the scope of the National Hospital Morbidity Database among the States and Territories. There is also some variation in the way in which separations with *Newborn* care were reported and in the inclusion of periods of hospital in the home care, as described in Appendix 3. These variations should be considered when comparing States and Territories, the public and private sectors and reporting years.

Data on occasions of service for non-admitted patients in public hospitals, derived from the National Public Hospital Establishments Database, are also presented and similar data for private hospitals are provided from the Australian Bureau of Statistics' Private Health Establishments Collection.

Hospitals and hospital beds

A range of data on hospitals, available beds, expenditure and revenue are presented in Table 2.1. Over the four-year period a number of jurisdictions changed from accounting on a

cash basis to accrual accounting. A number of other changes to reporting arrangements have occurred over the period, and therefore comparisons across years must be made with care.

There were 749 public hospitals in 2000–01 compared with 748 in 1999–00. Changes in the numbers of hospitals can be due to changes in administrative or reporting arrangements and not necessarily to changes in the number of hospital campuses or buildings (see Appendix 5). Therefore, changes in the number of available beds over years is a more reliable indicator of shifts in the availability of hospital services. Nationally, bed numbers were about the same in 1999–00 and 2000–01, at about 53,000.

Recurrent expenditure increased 6.1% from 1999–00 to 2000–01 (in current price terms) for public hospitals. In constant prices (referenced to 1999–00), national expenditure was \$15,038 million in 2000–01, and represents a real increase in expenditure of 2.7% over 1999–00. (See Chapter 3 for more detail.) Data on recurrent expenditure for public hospitals for 1998–99 and earlier years in Table 2.1 is not comparable with data for 1999–00 and 2000–01 because New South Wales only included expenditure through community health program funding administered by hospitals in 1999–00 and 2000–01. Revenue for public hospitals increased by 29.1% between 1999–00 and 2000–01.

Information on the number of hospitals and hospital beds available by State and Territory is provided in Table 2.2. Data in this table are provided for both public hospitals (using 2000–01 data) and private hospitals (using 1999–00 data). Nationally, there were 1,258 hospitals. Public hospitals provided 52,591 beds (67.6% of the national total), compared with 25,246 beds provided in private hospitals (32.4% of beds nationally). New South Wales had the highest number of hospitals (391) and the Northern Territory has the lowest (5). Similarly the number of available beds in public hospitals was highest in New South Wales (17,534) and lowest in the Northern Territory (560). Nationally, there were 2.7 beds per 1,000 population, ranging from 2.2 beds per 1,000 population in the Australian Capital Territory to 3.4 beds per 1,000 population in South Australia (Table 3.2).

Box 2.1: Hospitals: 1993–94 to 2000–01

- *The number of public acute hospitals increased by 3.4%, from 702 to 726, and the number of public psychiatric hospitals decreased by 37.8%, from 37 to 23.*
- *From 1993–94 and 1999–00 the number of private hospitals increased by 15.7%, from 440 to 509. The biggest increase was for private free-standing day hospital facilities which almost doubled in number since 1993–94, from 111 to 207. The number of other private hospitals decreased from 329 to 302 (8.2%) over this period.*
- *There was a 14.2% reduction in available beds in public hospitals, resulting in a decrease from 3.4 to 2.7 beds per 1,000 population. Available beds in public acute hospitals decreased by 10.7% over this period and in public psychiatric hospitals, they decreased by 53.8%.*
- *From 1993–94 to 1999–00, the number of beds/chairs in private free-standing day hospital facilities increased by 72.4% and the number of beds in other private hospitals increased by 11.4%.*
- *In current price terms, 1993–94 to 2000–01 expenditure increased by 46.8% in the public sector (5.6% per year on average), and between 1993–94 and 1999–00, private hospital expenditure grew by 73.0% (9.6% per year on average). Revenue for the public sector increased by 45.7% (5.5% per year, on average), while private hospital revenue grew by a total of 63.7% (8.6% on average per year).*

Admitted patients by sector and hospital type

Separations

There were 6,138,398 separations reported from public and private acute and psychiatric hospitals in 2000–01 (Table 2.4), an increase of 239,594 (4.1%), compared with 1999–00 (Table 2.3). Public hospital separations decreased by 0.1% (5,208), compared with 1999–00 and there was a 12.1% (244,802) increase in the private sector.

This relatively large increase in private hospital separations is likely partly to reflect recent increases in the level of private health insurance coverage. At the end of the first three quarters in 1999–00, coverage was about 30%, but it had increased to 43% at the measurement point on 30 June 2000. This reflected the introduction of the Commonwealth Government's 'lifetime' health cover incentives from 1 July 2000. During 2000–01, coverage was measured at about 45% at each quarterly measurement point (PHIAC 2002).

The increase in private sector separations may also partly reflect increased coverage of the National Hospital Morbidity Database for 2000–01. Compared with 1999–00, coverage of the private sector increased for Victoria and Tasmania and for South Australian private free-standing day hospital facilities. For hospitals in New South Wales, Queensland, Western

Box 2.2: Admitted patients, 1993–94 to 2000–01

- Hospital separations increased by 33.2%: 17.4% in public acute hospitals and 72.9% in private hospitals.
- The increase for private hospitals between 1999–00 and 2000–01 was marked, at 12.1% compared with an average of 7.5% over the previous 6 years.
- The number of separations in public psychiatric hospitals decreased by 27.0% between 1995–96 and 2000–01.
- The number of patient days increased by 6.9%, from 21,023,901 days to 22,468,953 days. In public acute hospitals, the number of patient days decreased by 5.7%, while in private hospitals they increased markedly (31.7%).
- The number of patient days reported for public psychiatric hospitals decreased 5.2% per year on average between 1995–96 and 2000–01.
- There has been a shift from the use of public acute hospitals to private hospitals. The proportion of separations that were from public acute hospitals fell from 71.5% in 1993–94 to 62.7% in 2000–01. Similarly, in 1993–94, 75.7% of patient days were in public acute hospitals compared with 66.8% in 2000–01.
- The average length of stay decreased by 19.6%, from 4.6 days to 3.7 days. It decreased by 18.8% in public acute hospitals and by 23.9% in private hospitals.
- In 2000–01 the proportion of same day separations was 50.8% compared with 36.8% in 1993–94, an increase of 38.0%. The number of same day separations increased by 83.7% (1,420,888 separations), 58.5% in public hospitals and 133.8% in private hospitals.
- Overnight separations increased by 3.7%. There was a decrease of 4.1% for public hospitals and a marked increase, of 26.4%, for private hospitals.
- In the period 1996–97 to 1999–00 (for which information for private free-standing day hospital facilities is available separately), the number of same day separations from private hospitals other than private free-standing day hospital facilities accounted for 79.1% of the increase in same day separations in the private sector, despite the number of private free-standing day hospital facilities increasing markedly over this period, from 153 to 207.

Australia and the Australian Capital Territory there was no change in coverage, and records for two months for one non-day hospital were not included for 2000–01 for South Australia, whereas all records for those hospitals had been included for 1999–00. Excluding Victoria, Tasmania, and the South Australian private free-standing day hospital facilities (28.6% of private hospital separations for 1999–00), there was an increase of 11.6% in separations in 2000–01 compared with 1999–00. This follows increases reported from the ABS's Private Health Establishments Collection of 7.0% between 1997–98 and 1998–99 and 8.1% between 1998–99 and 1999–00 (ABS 2001).

Information on the 30 AR-DRGs with the largest changes in the number of separations in either the public or private sectors (or both) between 1999–00 and 2000–01 is included in Table 11.17. The increase in separations for private hospitals described above was reflected in increases in a range of AR-DRGs for the private sector. The AR-DRG with the greatest increase was G44C *Other colonoscopy, same day*, for which an increase of 24,668 separations was reported, 10.1% of the total increase in private sector separations. Other AR-DRGs for which relatively large increases were reported for the private sector were L61Z *Admit for renal dialysis* (an increase of 22,099 separations, or 9.0% of the total increase) and R63Z *Chemotherapy* (an increase of 21,295 separations, or 8.7% of the total increase).

The number of separations reported for public psychiatric hospitals (18,132) increased by 182 compared with 1999–00, an increase of 1.0%.

The private sector accounted for 37.0% of the 6.14 million separations (2,270,791), compared with 34.3% (2,025,989) in 1999–00. Excluding Tasmania (for which data were not available for 2000–01), private free-standing day hospital facilities accounted for 332,448 or 15.1% of private sector separations in 2000–01, compared with 278,803 or 14.1% in 1999–00.

Same day and overnight separations

The year 2000–01 saw a continuation of the recent annual increases in the proportions of admitted patients being treated on a same day basis, that is, admitted and separated on the same date.

Same day separations have been distinguished from other separations in this report to illustrate the proportions of total separations which they represent, and also to demonstrate the effect on average lengths of stay when patients receiving this type of hospital care are classified as admitted. In most countries of the Organisation for Economic Co-operation and Development (OECD), same day patients are not counted as admitted patients, and reported average lengths of stay are therefore greater than those calculated for Australia (OECD 2000).

In Australia in 2000–01, 3,117,751 separations were on a same day basis, an increase of 7.4%, compared with 1999–00, 1.3% in public hospitals and 16.8% in private hospitals. These separations comprised 50.8% of separations overall (compared with 49.2% (2,903,966) in 1999–00) and there were increases in the proportions of same day patients in both public acute hospitals (from 45.6% to 46.2%) and private hospitals (from 56.1% to 58.5%).

In contrast with the increases in same day separations, overnight separations increased by 0.9% between 1999–00 and 2000–01, from 2,994,838 to 3,020,647. Overnight separations decreased by 1.3% in public hospitals (from 2,106,309 to 2,078,876), but increased by 6.0% in the private sector (from 888,529 to 941,771). Overnight separations for private free-standing day hospital facilities were mainly from sleep centres (mainly AR-DRG E63Z *Sleep apnoea*).

There was some variation among the States and Territories in the proportion of separations that were same day separations. For public acute hospitals, New South Wales had a lower

proportion than the national average (41.0%), whereas the Australian Capital Territory (52.7%), Victoria (51.4%) and the Northern Territory (51.0%) had markedly higher proportions. In the private sector, New South Wales (61.3%) and Queensland (60.3%) reported higher proportions than average. The Australian Capital Territory (47.9%) reported lower proportions, perhaps reflecting the incomplete coverage of private free-standing day hospital facilities for this jurisdiction.

Separation rates

The age-standardised separation rate per 1,000 population decreased by 1.8% between 1999–00 and 2000–01 for public acute hospitals and increased by 9.9% for private hospitals, not adjusted for changes in coverage (Table 2.3, Figure 2.1).

Among the States and Territories, the Northern Territory reported the highest age-standardised public acute hospital separation rate in 2000–01 (360.3 per 1,000 population; Table 2.4) and Tasmania reported the lowest (144.9 per 1,000 population). Private hospital separation rates ranged from 83.1 per 1,000 population in the Australian Capital Territory (for which separations from same day facilities were not included in the database) to 139.9 per 1,000 population in Queensland. For all hospitals combined, the Northern Territory reported the highest age-standardised separation rate (360.3 per 1,000 population), despite its private hospital not being included in the database.

These rates are likely to have been affected by whether or not separate episodes of care (see Glossary) within a hospital stay were counted as individual separations, the way in which hospital stays for patients aged 9 days or less on admission (*Newborn* episodes) were counted, and the reporting of hospital in the home care (see Appendix 3 for details). The private sector in the Australian Capital Territory and Tasmania had not implemented separate episodes of care in 2000–01 and this would have had the effect of reducing the number of separations and increasing the average length of stay for these hospitals in comparison with the others. In addition, there were changes in the coverage of private hospitals, as described above, that would affect comparisons between reporting years.

The age-standardised separation rate for public psychiatric hospitals varied widely, from 0.1 per 1,000 population in Victoria, to 2.2 per 1,000 population in South Australia. This variation reflects differences in the extent to which public psychiatric services have been provided in public acute hospitals and non-hospital facilities.

Average cost weight of separations

In Table 2.4, average cost weights are presented for 2000–01 based on version 4.2 Australian Refined Diagnosis Related Group (AR-DRG) into which each separation was classified on the basis of demographic and clinical characteristics of the patient. Separations were only included where the care type was reported as *Acute*, or was not reported, or where the care type was *Newborn* and the separation had at least one qualified day. Thus separations for *Rehabilitation*, *Palliative care*, *Geriatric evaluation and management*, *Psychogeriatric care*, *Maintenance care*, *Other admitted patient care*, and *Newborn care* with no qualified days were excluded.

The average cost weight information provides a guide to the relative complexity and resource use of admissions within hospitals, with a value of 1.00 representing the theoretical average for all separations. Cost weights for 1999–00 (AR-DRG version 4.1) were used, as 2000–01 cost weights were not available at the time of publication of this report. Public sector cost weights were used for both public and private hospitals to enable comparison

between the sectors on the same basis. Data are also presented for private hospitals using private sector cost weights. (Separate private and public sector cost weights were used as they reflect the differing cost structures of the two sectors.) Further information about the AR-DRG classification and cost weights is included in Chapter 11 and Appendix 8.

Table 2.4 indicates that, within the public sector, most States and Territories had average cost weights close to the national average for public acute hospitals. The Northern Territory was the only exception, with an average cost weight of 0.78. This reflects the high proportion (32.0%) of separations in the Northern Territory that were for *Admit for renal dialysis* (AR-DRG L61Z), an AR-DRG with a relatively low cost weight (see Chapter 11).

The validity of comparisons of average cost weights is limited by differences in the extent to which each jurisdiction's acute care psychiatric services are integrated into its public hospital system. For example, in Victoria, almost all public psychiatric hospitals are now mainstreamed, and are therefore included in the public acute hospital data. Cost weights are of little use as a measure of resource requirements for these services because the relevant AR-DRGs are much less homogeneous than for other acute services.

The average cost weight for private free-standing day hospital facilities was markedly lower (0.49) than for other private hospitals (0.97), reflecting the lesser complexity and day-only nature of most admissions in these hospitals. The average cost weights for the other private hospitals ranged from 0.90 in Western Australia to 1.05 in the Australian Capital Territory.

Nationally, the average cost weight for private hospitals using private sector cost weights was 0.87 compared with 0.90 using public cost weights.

Patient days

Patient days represent the number of full or partial days stay for patients who separated from hospital during the reporting period, and represent the aggregated length of stay for all patients (see Glossary). A total of 22,468,953 patient days was reported for 2000–01, 70.0% in the public sector and 30.0% in the private sector.

There was a decrease in patient days reported for public acute hospitals (81,331 0.5%) in 2000–01, compared with 1999–00, and there was an increase reported for private hospitals (376,342, 5.9%). Patient days for public acute and private hospitals combined increased by 1.4% (295,011) and for all hospitals combined, they decreased by 0.6% (135,161).

Public psychiatric hospital patient days decreased dramatically, from 1,156,250 in 1999–00 to 726,078 in 2000–01 (37.2%). This reduction in patient days was marked for Queensland and was largely the result of the statistical discharge and readmission of long stay patients on 30 June 2000 in this State. This was done to cater for the change in the *National Health Data Dictionary* care type definition, that was effective from 1 July 2000, and would have had the effect of inflating the number of patient days reported in 1999–00 (for which those separations were reported to the National Hospital Morbidity Database) and of reducing the number of patient days reported for 2000–01. Some of this reduction in patient days overall is also likely partly to be due to the increasing practice of providing community based accommodation to former patients of public psychiatric hospitals.

The number of age-standardised patient days per 1,000 population in 2000–00 fell by 0.7% for public acute and private hospitals combined, compared with 1999–00. Public acute hospital patient days per 1,000 fell by 2.6%, with those for private hospitals increasing by 3.8%. Age standardised, patient days per 1,000 population for public psychiatric hospitals fell by 38.1%, compared with 1999–00, and patient days per 1,000 population for all hospitals combined fell by 2.7%.

Of the States and Territories, the Northern Territory reported the highest number of patient days per 1,000 population for public acute hospitals in 2000–01 (1,252.3 per 1,000 population) and Queensland reported the lowest (628.6 per 1,000 population). The highest age-standardised population rate for patient days in private hospitals was reported by Queensland (411.8 per 1,000 population). The lowest age-standardised rate for public psychiatric hospitals for 2000–01 was 4.5 patient days per 1,000 population in Victoria and the highest was 62.6 per 1,000 population in South Australia.

Age standardised, the highest rate for all hospitals combined was reported by the Northern Territory (1,252.3 per 1,000 population) and the lowest by the Australian Capital Territory (1,043.9 per 1,000 population).

Average length of stay

The average length of stay for public acute and private hospitals combined was unchanged between 1999–00 and 2000–01 (3.6 days) (Figure 2.2). For public acute hospitals, there was also no change between 1999–00 and 2000–01 (3.9 days). For private hospitals, the average length of stay was 3.0 days in 2000–01, a reduction from 3.1 days in the previous year. The average length of stay for public psychiatric hospitals decreased markedly from 64.4 days in 1999–00 to 40.0 days in 2000–01. This is consistent with the large decrease in the number of patient days reported for public psychiatric hospitals as described above. Tasmania reported the longest average length of stay for public acute hospitals (5.1 days) and the Northern Territory reported the shortest (3.3 days). For private hospitals other than free-standing day hospital facilities, Queensland reported the greatest average length of stay (3.5 days) and Western Australia reported the shortest (3.1 days). With same day separations excluded (as is the practice in most OECD countries), average lengths of stay have not reduced markedly over the last few years (Table 2.3, Figure 2.2). The average length of stay in 2000–01 was unchanged compared to 1999–00 for public acute hospitals (6.4 days respectively). For private hospitals, the average length of stay decreased from 5.9 days in 1999–00 to 5.7 days in 2000–01. The average lengths of stay are within the range of those reported for 1997 and 1998 average lengths of stay for acute care for other OECD countries (OECD 2000).

Non-admitted patients

Information on non-admitted patient occasions of service and group sessions provided by public acute and psychiatric hospitals for 2000–01 is provided in Table 2.5. Similar information from the ABS's Private Health Establishments Collection is presented for private hospitals for 1999–00 in Table 2.6 (Data for private hospitals for 2000–01 were not available at the time of publication of this report.)

Over 40 million non-admitted patient occasions of service were delivered to individuals through public acute hospitals in 2000–01 (Table 2.5). The largest group of these was *Other medical/surgical/obstetric encounters* (28.7% of the total), followed by *Pathology* (14.1%) and *Accident and emergency services* (13.5%). *Allied health* and *Community health* were also frequently provided services, together accounting for 15.6% of non-admitted patient services. These categories include services such as: physiotherapy, speech therapy, dietary advice, baby clinics, aged care assessment teams and immunisation clinics.

In addition to the services provided to individuals, 594,323 group sessions were delivered through public acute hospitals. These services include group activities conducted in the same areas against which individual non-admitted patient services are recorded.

Users of these data should note that there is considerable variation among States and Territories and between reporting years, for the way in which non-admitted patient occasions of service data are collected. For example, Victoria, Queensland, South Australia, Tasmania, the Australian Capital Territory and the Northern Territory reported that emergency department presentations that go on to be admitted are included in the counts reported to the National Public Hospitals Establishments Database. These patients are not included in the counts of non-admitted patient occasions of service reported to the National Public Hospitals Establishments Database for New South Wales and Western Australia.

Differing admission practices between the States and Territories will also lead to variation among jurisdictions in the services reported in Table 2.5. Connected with that, States and Territories may also differ in the extent to which these types of services are provided in non-hospital settings (such as community health centres), which are beyond the scope of this data collection.

Data on the number of non-admitted patient occasions of service provided through public psychiatric hospitals are also presented. A total of 365,041 services was provided in New South Wales and Queensland, the only States or Territories for which these data were supplied (Table 2.5). These services include emergency and outpatient care and outreach/community care provided to individuals or groups.

In 1999-00, private hospitals reported 1,819,600 occasions of service, ranging from 56,200 for South Australia and the Northern Territory combined, to 775,300 for Victoria. Nationally, there were 486,100 occasions of service reported for *Accident and emergency* (Table 2.6).

Table 2.1: Summary of hospitals, Australia, 1996-97 to 2000-01

	1996-97	1997-98	1998-99	1999-00	2000-01	% change ^(a)	
						Ave since 1996-97	Latest two years
Hospitals^(b)							
Public hospitals	729	760	749	748	749	0.7	0.1
Public acute hospitals	706	736	728	726	726	0.7	0.0
Public psychiatric hospitals	23	24	21	22	23	0.0	4.5
Private hospitals	472	492	502	509	n.a.	2.5	1.4
Private free-standing day hospital facilities	153	175	190	207	n.a.	10.6	8.9
Other private hospitals	319	317	312	302	n.a.	-1.8	-3.2
Public acute and private hospitals	1,178	1,228	1,230	1,235	n.a.	1.6	0.4
Total	1,201	1,252	1,251	1,257	n.a.	1.5	0.5
Available beds							
Public hospitals	56,836	55,737	53,885	52,947	52,591	-1.9	-0.7
Public acute hospitals	53,410	52,625	50,942	50,188	50,113	-1.6	-0.1
Public psychiatric hospitals	3,426	3,112	2,943	2,759	2,478	-7.8	-10.2
Private hospitals	24,129	24,439	25,206	25,246	n.a.	1.5	0.2
Private free-standing day hospital facilities	1,163	1,348	1,460	1,581	n.a.	10.8	8.3
Other private hospitals	22,966	23,091	23,746	23,665	n.a.	1.0	-0.3
Public acute and private hospitals	77,539	77,064	76,148	75,434	n.a.	-0.9	-0.9
Total	80,965	80,176	79,091	78,193	n.a.	-1.2	-1.1
Beds per 1,000 population							
Public hospitals	3.08	2.99	2.86	2.78	2.73	-3.0	-1.8
Public acute hospitals	2.90	2.83	2.70	2.63	2.60	-2.7	-1.3
Public psychiatric hospitals	0.19	0.17	0.16	0.14	0.13	-8.8	-11.2
Private hospitals	1.31	1.31	1.34	1.33	n.a.	0.4	-0.9
Private free-standing day hospital facilities	0.06	0.07	0.08	0.08	n.a.	9.5	7.1
Other private hospitals	1.25	1.24	1.26	1.24	n.a.	-0.1	-1.4
Public acute and private hospitals	4.21	4.14	4.04	3.96	n.a.	-2.0	-2.0
Total	4.39	4.31	4.20	4.10	n.a.	-2.3	-2.2
Non-admitted occasions of service^(c) ('000)							
Public acute hospitals	32,031	32,605	34,251	34,759	40,099	5.8	15.4
Other private hospitals	1,623	1,670	1,712	1,820	n.a.	3.9	6.3
Total	33,654	34,276	35,963	36,578	n.a.	2.8	1.7
Total recurrent expenditure (\$million)^(d)							
Public hospitals	12,161	13,026	13,677	14,647	15,545	6.3	6.1
Private hospitals	3,183	3,354	3,751	3,957	n.a.	7.5	5.5
Private free-standing day hospital facilities	95	122	137	163	n.a.	19.5	18.4
Other private hospitals	3,088	3,232	3,614	3,794	n.a.	7.1	5.0
Total	18,527	19,733	21,180	22,561	n.a.	6.8	6.5
Total revenue (\$million)^(d)							
Public hospitals	1,010	1,069	1,176	1,223	1,579	0.1	29.1
Private hospitals	3,493	3,662	3,959	4,204	n.a.	6.4	6.2
Private free-standing day hospital facilities	119	145	161	192	n.a.	17.1	18.7
Other private hospitals	3,374	3,517	3,798	4,012	n.a.	5.9	5.6
Total	4,503	4,731	5,135	5,427	n.a.	6.4	5.7

(a) Expenditure changes in current prices not real prices. The average since 1996-97 is the average annual change between 1996-97 and the latest available year of data: 1999-00 for private hospitals and totals, 2000-01 for public hospitals. The latest two year change is the change between the two latest available years of data: 1998-99 to 1999-00 for private hospitals and totals, 1999-00 to 2000-01 for public hospitals.

(b) Some data amended since previously reported. Apparent differences in the number of hospitals reported are, in many instances, caused by changes in administrative or reporting arrangements rather than by actual differences in the number of buildings. See Appendix 5 for further information.

(c) Excludes public psychiatric hospitals. Reporting arrangements have varied significantly across years.

(d) Current prices. For 1999-00 and 2000-01 only, New South Wales included community health program expenditure administered by hospitals. This causes discontinuity between 1998-99 and 1999-00.

Note: Source for the private hospital data is ABS 2001 and earlier editions of *Private Hospitals Australia*.

Table 2.2: Number of hospitals^(a) and available beds, by hospital sector and type, States and Territories, 1999-00 (private hospitals) and 2000-01 (public hospitals)

	NSW ^(b)	Vic ^(c)	Qld	WA	SA ^(d)	Tas	ACT ^(b)	NT ^(d)	Total
Hospitals									
Public acute hospitals	210	144	177	88	79	20	3	5	726
Public psychiatric hospitals	9	1	6	2	1	4	0	0	23
Total public hospitals	219	145	183	90	80	24	3	5	749
Private free-standing day hospital facilities ^(e)	83	50	33	13	18	4	6	0	207
Other private hospitals ^{(e)(f)}	89	86	56	28	33	10	n.p.	n.p.	362
Total private hospitals^(e)	172	136	89	41	51	14	6	0	509
Total hospitals	391	281	272	131	131	38	9	5	1,258
Available beds									
Public acute hospitals	16,488	12,137	9,418	5,163	4,600	1,063	684	560	50,113
Public psychiatric hospitals	1,046	95	549	273	488	27	..	..	2,478
Total beds available in public hospitals	17,534	12,232	9,967	5,436	5,088	1,090	684	560	52,591
Private free-standing day hospital facilities ^(e)	672	330	331	128	102	18	n.p.	0	1,581
Other private hospitals ^{(e)(f)}	6,557	6,179	5,253	2,807	2,125	744	n.p.	n.p.	23,665
Total beds available in private hospitals^(e)	7,229	6,509	5,584	2,935	2,227	762	n.p.	n.p.	25,246
Total available beds	24,763	18,741	15,551	8,371	7,315	1,852	684	560	77,837

(e) The number of hospitals reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of physical hospital buildings or campuses. See Appendix 5 for more detail.

(b) The numbers of private hospitals and available beds in *Other private hospitals* for the Australian Capital Territory are included with New South Wales.

(c) The count of public hospitals in Victoria is a count of the campuses which report data separately to the National Hospital Morbidity Database.

(d) The numbers of private hospitals and available beds in *Other private hospitals* for the Northern Territory are included with South Australia.

(e) Private hospital data are for 1999-00. Updated data will be available from the ABS or from updated tables on the Internet version of this publication.

(f) Includes private acute and private psychiatric hospitals.

.. not applicable.

n.a. not available.

Note: Source for the private hospital data is ABS 2001.

Table 2.3: Summary of separation, patient day and average length of stay statistics, by hospital type, Australia, 1996-97 to 2000-01^(a)

	1996-97	1997-98	1998-99	1999-00	2000-01	% change ^(b)	
						Ave since 1996-97	Since 1999-00
Separations ('000)							
Public hospitals ^(c)	3,642	3,770	3,860	3,873	3,868	1.5	-0.1
Public acute hospitals	3,622	3,748	3,839	3,855	3,849	1.5	-0.1
Public psychiatric hospitals ^{(d)(i)}	20	23	20	18	19	-2.9	1.0
Private hospitals	1,685	1,793	1,875	2,026	2,271	7.7	12.1
Private free-standing day hospital facilities	221	248	261	280	332 ^(g)	9.7	18.7
Other private hospitals	1,464	1,545	1,614	1,746	1,873 ^(g)	3.8	7.3
Public acute & private hospitals ^(e)	5,307	5,541	5,715	5,881	6,120	3.6	4.1
Total	5,327	5,563	5,735	5,899	6,138	3.6	4.1
Overnight separations ('000)							
Public hospitals ^(c)	2,121	2,145	2,141	2,106	2,079	-0.5	-1.3
Public acute hospitals	2,101	2,125	2,123	2,091	2,064	-0.4	-1.3
Public psychiatric hospitals ^{(d)(i)}	20	20	18	16	15	-6.5	-4.0
Private hospitals	826	840	847	889	942	3.3	6.0
Private free-standing day hospital facilities ^(f)	2	0	2	2	3 ^(g)	10.1	15.6
Other private hospitals	824	840	845	886	907 ^(g)	-0.2	2.4
Public acute & private hospitals ^(e)	2,927	2,965	2,970	2,979	3,006	0.7	0.9
Total	2,947	2,985	2,988	2,995	3,021	0.6	0.9
Same day separations ('000)							
Public hospitals ^(c)	1,521	1,625	1,719	1,767	1,789	4.1	1.3
Public acute hospitals	1,520	1,622	1,716	1,764	1,786	4.1	1.2
Public psychiatric hospitals ^{(d)(i)}	1	2	2	2	3	41.3	33.9
Private hospitals	859	953	1,028	1,137	1,329	11.5	16.8
Private free-standing day hospital facilities	220	248	260	278	330 ^(g)	9.7	18.7
Other private hospitals	640	705	769	860	966 ^(g)	8.4	12.3
Public acute & private hospitals ^(e)	2,379	2,575	2,745	2,902	3,115	7.0	7.3
Total	2,380	2,578	2,747	2,904	3,118	7.0	7.4
Same day separations as a % of total							
Public hospitals ^(c)	41.8	43.1	44.5	45.6	46.2	2.6	1.4
Public acute hospitals	42.0	43.3	44.7	45.8	46.4	2.5	1.4
Public psychiatric hospitals ^{(d)(i)}	3.9	10.6	11.3	13.3	17.6	45.5	32.6
Private hospitals	51.0	53.1	54.8	55.1	58.5	3.5	4.2
Private free-standing day hospital facilities	99.2	100.0	99.4	99.2	99.2 ^(g)	0.0	0.0
Other private hospitals	43.7	45.6	47.6	49.2	51.6 ^(g)	4.4	4.7
Public acute & private hospitals ^(e)	44.8	46.5	48.0	49.3	50.9	3.2	3.1
Total	44.7	46.3	47.9	49.2	50.8	3.3	3.2
Separations per 1,000 population^(h)							
Public hospitals ^(c)	194.2	198.2	199.8	197.4	193.9	0.0	-1.8
Public acute hospitals	193.1	197.0	198.7	196.5	193.0	0.0	-1.8
Public psychiatric hospitals ^{(d)(i)}	1.1	1.2	1.1	1.0	1.0	-3.5	0.1
Private hospitals	89.2	93.2	95.6	101.4	111.5	5.7	9.9
Private free-standing day hospital facilities	11.8	13.0	13.4	14.1	16.9 ^(g)	10.7	19.4
Other private hospitals	77.5	80.2	82.2	87.3	94.3 ^(g)	4.9	8.0
Public acute & private hospitals ^(e)	281.6	289.4	293.5	297.1	303.6	1.9	2.2
Total	282.7	290.6	294.6	298.0	304.5	1.9	2.2

(continued)

Table 2.3 (continued): Summary of separation, patient day and average length of stay statistics, by hospital type, Australia, 1996-97 to 2000-01^(a)

	1996-97	1997-98	1998-99	1999-00	2000-01	% change ^(b)	
						Ave since 1996-97	Since 1999-00
Patient days ('000)							
Public hospitals ^(c)	16,532	16,560	16,274	16,243	15,732	-1.2	-3.1
Public acute hospitals	15,181	15,152	14,989	15,087	15,006	-0.3	-0.5
Public psychiatric hospitals ^{(d)(f)}	1,350	1,409	1,285	1,156	726	-14.4	-37.2
Private hospitals	5,834	5,995	6,045	6,361	6,737	3.7	5.9
Private free-standing day hospital facilities	222	248	261	280	332 ^(g)	9.6	18.7
Other private hospitals	5,613	5,747	5,784	6,081	6,192 ^(g)	0.0	1.8
Public acute & private hospitals ^(e)	21,015	21,146	21,034	21,448	21,743	0.9	1.4
Total	22,366	22,555	22,319	22,604	22,469	0.1	-0.6
Patient days per 1,000 population^(g)							
Public hospitals ^(c)	861.7	848.8	818.2	800.3	758.5	-3.1	-5.2
Public acute hospitals	789.4	774.1	751.6	741.0	721.8	-2.2	-2.6
Public psychiatric hospitals ^{(d)(f)}	72.3	74.7	66.6	59.3	36.7	-16.5	-38.1
Private hospitals	302.0	303.8	299.5	308.0	319.8	1.4	3.8
Private free-standing day hospital facilities	11.9	13.0	13.4	14.1	16.9 ^(g)	10.7	19.4
Other private hospitals	290.2	290.9	286.1	294.0	301 ^(g)	0.8	2.4
Public acute & private hospitals ^(e)	1,089.4	1,075.9	1,049.1	1,047.0	1,039.4	-1.2	-0.7
Total	1,161.7	1,150.6	1,115.7	1,106.3	1,076.1	-1.9	-2.7
Average length of stay (days)							
Public hospitals ^(c)	4.5	4.4	4.2	4.2	4.1	-2.7	-3.0
Public acute hospitals	4.2	4.0	3.9	3.9	3.9	-1.8	-0.4
Public psychiatric hospitals ^{(d)(f)}	66.3	62.4	63.4	64.4	40.0	-11.9	-37.8
Private hospitals	3.5	3.3	3.2	3.1	3.0	-3.8	-5.5
Private free-standing day hospital facilities	1.0	1.0	1.0	1.0	1.0 ^(g)	0.0	0.0
Other private hospitals	3.8	3.7	3.6	3.5	3.3 ^(g)	-3.7	-5.1
Public acute & private hospitals ^(e)	4.0	3.8	3.7	3.6	3.6	-2.7	-2.6
Total	4.2	4.1	3.9	3.8	3.7	-3.4	-4.5
Average length of stay, excluding same day separations (days)							
Public hospitals ^(c)	7.1	7.0	6.8	6.9	6.7	-1.3	-2.4
Public acute hospitals	6.5	6.4	6.3	6.4	6.4	-0.4	0.5
Public psychiatric hospitals ^{(d)(f)}	69.0	69.7	71.4	74.1	48.4	-8.5	-34.7
Private hospitals	6.0	6.0	5.9	5.9	5.7	-1.2	-2.3
Private free-standing day hospital facilities	1.1	1.0	1.0	1.0	1.0 ^(g)	-1.5	0.0
Other private hospitals	6.0	6.0	5.9	5.9	5.8 ^(g)	-1.1	-2.2
Public acute & private hospitals ^(e)	6.4	6.3	6.2	6.2	6.2	-0.7	-0.4
Total	6.8	6.7	6.6	6.6	6.4	-1.4	-2.6

(a) For 1996-97 to 2000-01 data on separations and patient days for public patients, private patients and other categories of patients in the public and private sector are presented in Table 6.5.

(b) Annual average per cent change.

(c) Includes the Department of Veterans' Affairs hospitals.

(d) Victoria was not able to provide patient days data for public psychiatric hospital data for 407 separations in 1996-97, as leave days could not be identified.

(e) Excludes public psychiatric hospitals.

(f) Overnight separations for private free-standing day hospital facilities were mainly from sleep centres (mainly AR-DRG E63Z *Sleep apnoea*).

(g) Excludes Tasmania.

(h) Figures are rates per 1,000 directly age-standardised to the Australian population at 30 June 1991. For private hospitals, rates were derived using populations of the reporting States and Territories only, without adjustment for incomplete reporting.

(i) Caution should be used with average length of stay for public psychiatric hospitals. The figures include a small percentage of long stay patients who affect the average markedly. The median length of stay in 2000-01 was 6 days and the median length of stay excluding same day separations was 9 days.

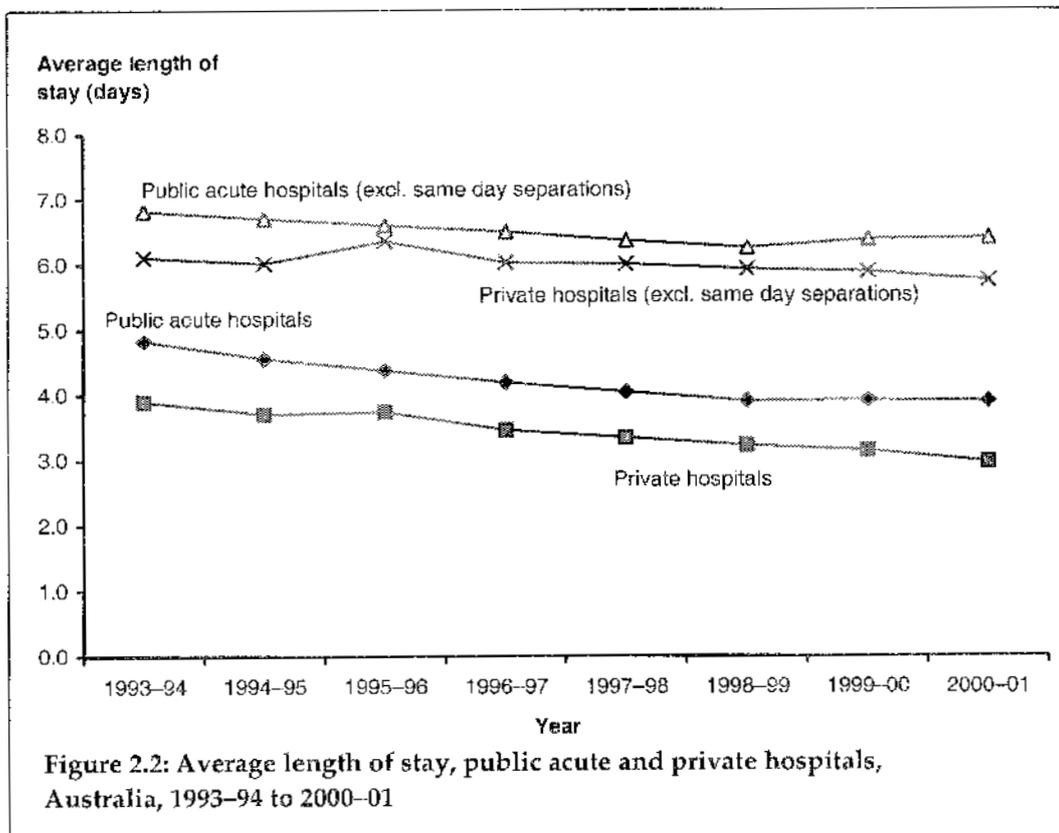
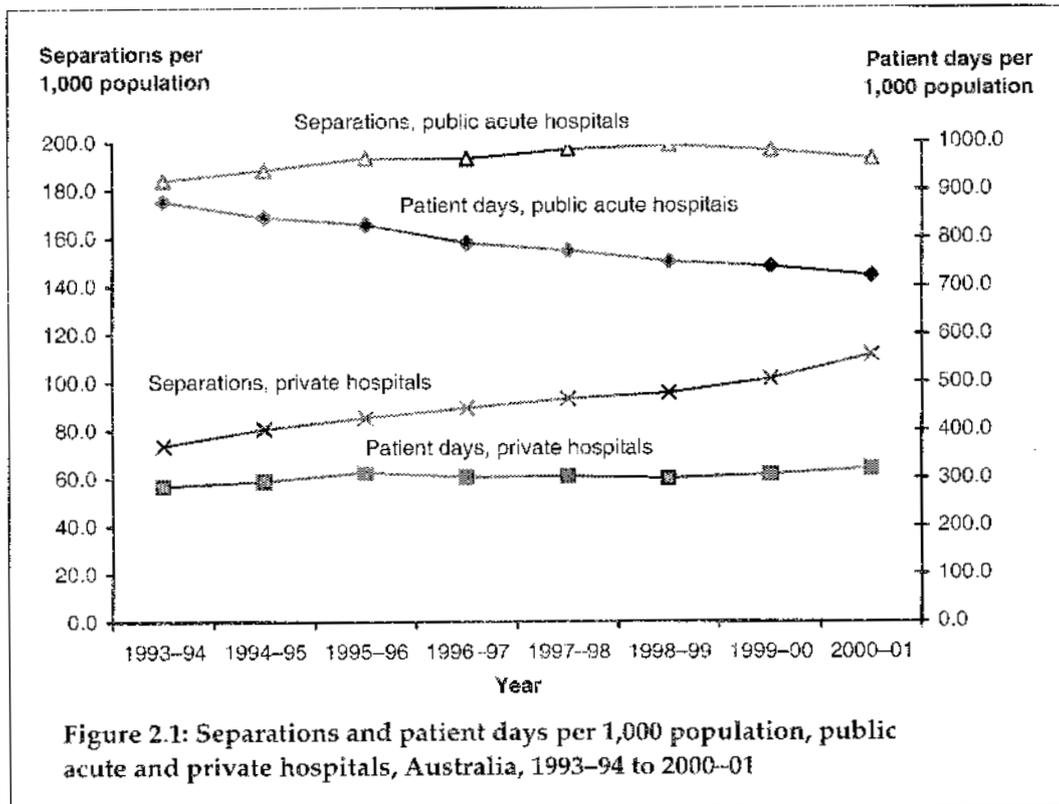


Table 2.4: Summary of separation, average cost weight, patient day and average length of stay statistics, by hospital type, States and Territories, 2000-01

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Separations									
Public hospitals	1,238,444	1,028,636	688,647	362,645	357,059	71,895	61,308	58,973	3,867,607
Public acute hospitals	1,227,593	1,026,295	687,952	359,962	353,868	71,524	61,308	58,973	3,849,475
Public psychiatric hospitals	10,851	341	695	2,683	3,191	371	..	..	18,132
Private hospitals ^(a)	639,762	580,420	526,313	250,129	184,305	65,256	24,606	n.a.	2,270,791
Private free-standing day hospital facilities	139,737	60,037	101,266	19,068	12,340	n.a.	n.a.	..	332,448 ^(b)
Other private hospitals	500,025	520,383	425,047	231,061	171,965	n.a.	24,606	n.a.	1,973,087 ^(b)
Public acute & private hospitals ^(b)	1,867,355	1,608,715	1,214,265	610,091	538,173	136,780	85,914	58,973	6,120,266
Total	1,876,206	1,609,056	1,214,960	612,774	541,364	137,151	85,914	58,973	6,138,398
Overnight separations									
Public hospitals	732,549	499,751	369,716	192,218	185,863	40,878	29,003	28,898	2,078,876
Public acute hospitals	724,565	499,414	369,031	189,597	182,908	40,514	29,003	28,898	2,063,930
Public psychiatric hospitals	7,984	337	685	2,621	2,955	364	..	..	14,946
Private hospitals ^(a)	247,633	239,376	209,083	112,263	88,956	31,651	12,809	n.a.	941,771
Private free-standing day hospital facilities ^(c)	2,727	0	3	0	0	n.a.	n.a.	..	2,730 ^(b)
Other private hospitals	244,906	239,376	209,080	112,263	88,956	n.a.	12,809	n.a.	907,390 ^(b)
Public acute & private hospitals ^(b)	972,198	738,790	578,114	301,860	271,864	72,165	41,812	28,898	3,005,701
Total	980,182	739,127	578,799	304,481	274,819	72,529	41,812	28,898	3,020,647
Same day separations									
Public hospitals	505,895	528,885	318,931	170,427	171,196	31,017	32,305	30,075	1,788,731
Public acute hospitals	503,028	528,881	318,921	170,365	170,960	31,010	32,305	30,075	1,785,545
Public psychiatric hospitals	2,867	4	10	62	236	7	..	..	3,186
Private hospitals ^(c)	392,129	341,044	317,230	137,866	95,349	33,605	11,797	n.a.	1,329,020
Private free-standing day hospital facilities	137,010	60,037	101,263	19,068	12,340	n.a.	n.a.	..	329,718 ^(b)
Other private hospitals	255,119	281,007	215,967	118,798	83,009	n.a.	11,797	n.a.	995,697 ^(b)
Public acute & private hospitals ^(b)	895,157	869,925	636,151	308,231	266,309	64,615	44,102	30,075	3,114,565
Total	898,024	869,929	636,161	308,293	266,545	64,622	44,102	30,075	3,117,751
Same day separations as a % of total									
Public hospitals	40.8	51.4	46.3	47.0	47.9	43.1	52.7	51.0	46.2
Public acute hospitals	41.0	51.4	46.4	47.3	48.3	43.4	52.7	51.0	46.4
Public psychiatric hospitals	26.4	1.2	1.4	2.3	7.4	1.9	..	..	17.6
Private hospitals ^(a)	61.3	58.8	60.3	55.1	51.7	51.5	47.9	n.a.	58.5
Private free-standing day hospital facilities	98.0	100.0	100.0	100.0	100.0	n.a.	n.a.	..	99.2 ^(b)
Other private hospitals	51.0	54.0	50.8	51.4	48.3	n.a.	47.9	n.a.	51.6 ^(b)
Public acute & private hospitals ^(b)	47.9	54.1	52.4	50.5	49.5	47.2	51.3	51.0	50.9
Total	47.8	54.1	52.4	50.3	49.2	47.1	51.3	51.0	50.8

(continued)

Table 2.4 (continued): Summary of separation, average cost weight, patient day and average length of stay statistics, by hospital type, States and Territories, 2000–01

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Separations per 1,000 population^(a)									
Public hospitals	181.7	204.5	189.4	191.4	223.1	145.7	209.4	360.3	193.9
Public acute hospitals	180.0	204.4	189.2	190.0	220.9	144.9	209.4	360.3	193.0
Public psychiatric hospitals	1.7	0.1	0.2	1.4	2.2	0.8	..	..	1.0
Private hospitals ^(a)	91.6	112.1	139.9	130.1	108.0	127.7	83.1	n.a.	111.5
Private free-standing day hospital facilities	20.2	11.6	26.9	10.0	7.0	n.a.	n.a.	..	15.9 ^(a)
Other private hospitals	71.5	100.5	113.0	120.2	101.0	n.a.	83.1	n.a.	94.3 ^(a)
Public acute & private hospitals ^(b)	271.6	316.5	329.1	320.2	328.9	272.6	292.5	360.3	303.6
Total	273.3	316.5	329.3	321.6	331.1	273.4	292.5	360.3	304.5
Average public cost weight of separations^(c)									
Public hospitals	1.06	0.96	0.97	0.93	0.99	1.11	0.96	0.78	0.99
Public acute hospitals	1.06	0.96	0.97	0.93	0.99	1.11	0.96	0.78	0.99
Public psychiatric hospitals	1.34	2.21	2.12	1.79	2.01	1.76	..	..	1.55
Private hospitals ^(a)	0.89	0.89	0.89	0.87	0.99	0.99	1.05	n.a.	0.90
Private free-standing day hospital facilities	0.51	0.42	0.49	0.46	0.71	n.a.	n.a.	..	0.49 ^(a)
Other private hospitals	1.01	0.95	0.98	0.90	1.01	n.a.	1.05	n.a.	0.97 ^(a)
Public acute & private hospitals ^(b)	1.00	0.93	0.93	0.90	0.99	1.05	0.99	0.78	0.96
Total	1.00	0.93	0.93	0.91	0.99	1.06	0.99	0.78	0.96
Average private cost weight of separations^(c)									
Private hospitals ^(a)	0.85	0.86	0.85	0.84	0.95	0.97	1.02	n.a.	0.87
Private free-standing day hospital facilities	0.89	0.91	0.88	0.87	0.83	n.a.	n.a.	..	0.89 ^(a)
Other private hospitals	0.96	0.96	0.97	0.97	0.96	n.a.	0.97	n.a.	0.97 ^(a)
Patient days									
Public hospitals	5,725,713	3,893,297	2,442,114	1,393,500	1,468,366	378,117	216,270	194,235	15,731,612
Public acute hospitals	5,320,274	3,872,218	2,332,524	1,311,121	1,393,179	365,713	216,270	194,235	15,005,534
Public psychiatric hospitals	405,439	21,079	109,590	82,379	95,187	12,404	..	..	726,078
Private hospitals ^(a)	1,788,457	1,763,463	1,581,625	724,634	585,746	213,180	80,236	n.a.	6,737,341
Private free-standing day hospital facilities	139,737	60,037	101,266	19,068	12,340	n.a.	n.a.	..	332,448 ^(a)
Other private hospitals	1,648,720	1,703,426	1,480,359	705,566	573,406	n.a.	80,236	n.a.	6,191,713 ^(a)
Public acute & private hospitals ^(b)	7,105,751	5,635,681	3,914,149	2,035,755	1,978,925	578,893	296,506	194,235	21,742,875
Total	7,514,170	5,656,760	4,023,739	2,118,134	2,074,112	591,297	296,506	194,235	22,468,953

(continued)

Table 2.4 (continued): Summary of separation, average cost weight, patient day and average length of stay statistics, by hospital type, States and Territories, 2000-01

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Patient days per 1,000 population^(a)									
Public hospitals	801.0	738.5	658.4	725.6	854.3	704.6	760.0	1,252.3	758.5
Public acute hospitals	740.6	734.0	628.6	683.3	791.7	679.3	760.0	1,252.3	721.8
Public psychiatric hospitals	60.4	4.5	29.9	42.4	62.6	25.3	..	..	36.7
Private hospitals ^(a)	247.7	327.5	411.8	374.7	320.7	398.3	283.9	n.a.	319.8
Private free-standing day hospital facilities	20.2	11.6	26.9	10.0	7.0	n.a.	n.a.	..	16.9 ^(b)
Other private hospitals	227.6	315.9	384.9	364.8	313.7	n.a.	283.9	n.a.	301.0 ^(b)
Public acute & private hospitals ^(b)	988.3	1,061.6	1,040.3	1,058.0	1,112.4	1,077.6	1,043.9	1,252.3	1,039.4
Total	1,048.7	1,066.1	1,070.2	1,100.3	1,174.9	1,102.9	1,043.9	1,252.3	1,076.1
Average length of stay (days)									
Public hospitals	4.6	3.8	3.5	3.8	4.2	5.3	3.5	3.3	4.1
Public acute hospitals	4.3	3.8	3.4	3.6	3.9	5.1	3.5	3.3	3.9
Public psychiatric hospitals ^(c)	37.4	61.8	157.7	30.7	29.8	33.4	..	..	40.0
Private hospitals ^(a)	2.8	3.0	3.0	2.9	3.2	3.3	3.3	n.a.	3.0
Private free-standing day hospital facilities	1.0	1.0	1.0	1.0	1.0	n.a.	n.a.	..	1.0 ^(d)
Other private hospitals	3.3	3.3	3.5	3.1	3.3	n.a.	3.3	n.a.	3.3 ^(e)
Public acute & private hospitals ^(b)	3.8	3.5	3.2	3.3	3.7	4.2	3.5	3.3	3.6
Total	4.0	3.5	3.3	3.5	3.8	4.3	3.5	3.3	3.7
Average length of stay, excluding same day separations (days)									
Public hospitals	7.1	6.7	5.7	6.4	7.1	8.5	6.3	5.7	6.7
Public acute hospitals	6.6	6.7	5.5	6.0	6.7	8.3	6.3	5.7	6.4
Public psychiatric hospitals ^(b)	50.4	62.5	160.0	31.4	32.1	34.1	..	..	48.4
Private hospitals ^(a)	5.6	5.9	6.0	5.2	5.5	5.7	5.3	n.a.	5.7
Private free-standing day hospital facilities	1.0	..	1.0	..	..	n.a.	n.a.	..	1.0 ^(d)
Other private hospitals	5.7	5.9	6.0	5.2	5.5	n.a.	5.3	n.a.	5.8 ^(e)
Public acute & private hospitals ^(b)	6.4	6.5	5.7	5.7	6.3	7.1	6.0	5.7	6.2
Total	6.7	6.5	5.9	5.9	6.6	7.3	6.0	5.7	6.4

(a) Includes private psychiatric hospitals. Coverage of private hospitals is incomplete for some States and Territories. See Chapter 1 for details.

(b) Excludes public psychiatric hospitals.

(c) Overnight separations for private free-standing day hospital facilities were mainly from sleep centres (mainly AR-DRG E63Z Sleep apnoea).

(d) Excludes Tasmania.

(e) Figures are directly age-standardised to the Australian population at 30 June 1991. In the Total column, the rates for private hospitals were derived using populations of the reporting States and Territories only, without adjustment for incomplete reporting. The numerator of the rate for ACT includes a substantial proportion (around 25%) of non-ACT residents, therefore the population rates for ACT are overstated.

(f) Separations for which the care type was reported as acute, or as newborn with qualified patient days, or was not reported. For further details, see Chapter 11. Public national cost weights were used for all rows under Average public cost weight of separations. Private national cost weights were used for all rows in Average private cost weight of separations.

(g) Caution should be used with average length of stay for public psychiatric hospitals. The figures include a small percentage of long stay patients who affect the average markedly. The median length of stay for Australia was 6 days and the median length of stay excluding same day separations for Australia was 9 days.

.. not applicable.

n.a. not available.

Table 2.5: Non-admitted patient occasions of service, by type of non-admitted patient care, public acute and psychiatric hospitals, States and Territories, 2000-01

Type of non-admitted patient care	NSW	Vic	Qld	WA ^(a)	SA	Tas	ACT	NT	Total ^(b)
Public acute hospitals									
Occasions of service									
Accident & emergency ^(c)	1,771,345	1,144,487	1,167,772	566,107	475,609	92,301	92,775	96,966	5,407,362
Dialysis	..	..	2,592	..	..	..	..	..	2,592
Pathology	1,949,298	696,480	2,204,664	540,715	..	184,884	30,624	55,494	5,672,159
Radiology & organ imaging	833,951	498,110	660,794	315,510	233,089	66,089	61,772	75,563	2,764,879
Endoscopy & related procedures	..	..	1,734	..	..	..	..	..	1,734
Other medical/surgical/obstetric	6,078,819	1,383,118	2,219,309	493,688	877,271	202,590	176,082	83,125	11,514,012
Mental health	933,335	824,972	86,352	137,628	16,343	1,474	5,472	..	2,005,576
Alcohol & drug	912,238	38,355	32,926	..	..	..	..	..	983,519
Dental	427,056	177,083	419,881	7,933	8,555	1,806	..	..	1,042,314
Pharmacy	675,048	344,515	748,618	178,468	..	68,760	342	6,060	2,021,811
Allied health	..	997,721	613,787	852,752	255,734	100,473	9,042	11,608	2,841,117
Community health	1,920,359	517,192	179,915	783,729	..	..	..	..	3,401,196
District nursing	98,970	338,585	58,349	146,510	..	..	..	..	642,414
Other outreach	1,109,798	4,440	121,017	97,914	419,701	30,407	15,534	..	1,798,811
Total occasions of service	16,710,217	6,965,058	8,537,710	4,120,954	2,286,302	748,784	391,653	338,816	40,099,494
Group sessions									
Other medical/surgical/obstetric	69,782	n.a.	5,039	18	5,095	n.a.	1,768	..	81,702
Mental health	29,291	n.a.	1,734	27,288	967	n.a.	2,379	..	61,659
Alcohol & drug	3,026	n.a.	..	..	0	n.a.	..	..	3,026
Allied health	..	n.a.	12,534	14,443	7,209	n.a.	1,136	..	35,322
Community health	204,078	n.a.	3,349	15,984	0	n.a.	..	..	223,411
District nursing	..	n.a.	197	1,138	0	n.a.	..	..	1,335
Other outreach	..	n.a.	8,603	747	134,450	n.a.	121	..	143,921
Total group sessions	306,177	43,938	31,456	59,627	147,721	n.a.	5,404	..	594,323
Public psychiatric hospitals									
Emergency & outpatient individual sessions	38,867	n.a.	11,000	n.a.	n.a.	n.a.	..	..	49,867
Emergency & outpatient group sessions	1,946	n.a.	1,523	n.a.	n.a.	n.a.	..	..	3,469
Outreach/community individual sessions	258,967	n.a.	42,153	n.a.	n.a.	n.a.	..	..	301,120
Outreach/community group sessions	7,105	n.a.	3,480	n.a.	n.a.	n.a.	..	..	10,585
Total services	306,885	n.a.	58,156	n.a.	n.a.	n.a.	..	..	365,041

(a) WA data for Group sessions occasions of service include H services in categories not reported here (e.g. Accident and emergency).

(b) For public psychiatric hospitals, includes only those States and Territories for which data are available

(c) Includes Accident and emergency patients that are subsequently admitted in Victoria, Queensland, South Australia, Tasmania, the Australian Capital Territory and the Northern Territory

n.a. not available.

.. not applicable.

Table 2.6: Non-admitted patient occasions of service ('000), by type of non-admitted patient care, private hospitals, States and Territories, 1999-00

Type of non-admitted patient care	NSW & ACT	Vic	QLD	SA & NT	WA	Tas	Total
Accident and emergency ^(a)	79.5	117.9	115.8	39.0	87.5	46.4	486.1
Outpatient services ^(b)	262.5	571.2	174.5	n.p.	54.3	n.p.	1,118.6
Other non-admitted services ^(c)	n.p.	n.p.	n.p.	n.p.	4.3	n.p.	105.1
Other	n.p.	n.p.	n.p.	1.7	10.7	0.0	139.8
Total	451.0	775.3	292.1	56.2	156.8	88.2	1,819.6

(a) including hospitals which do not have a formal accident and emergency unit but which treated accident and emergency patients during the year
 (b) includes *Dialysis, Radiology and organ imaging, Endoscopy, Pathology, Other Medical/Surgical/Diagnostic, Psychiatric, Alcohol and drug, Dental, Pharmacy and Allied health services*.
 (c) includes *Community health services, District nursing services and Non-medical and social services*.

n.p. not available for publication but included in totals where applicable.

Source: Australian Bureau of Statistics: Private Health Establishments Collection, unpublished data.