

4 Hospital performance indicators

Introduction

This chapter presents information on performance indicators that relate to the provision of hospital services, and some that use hospital data in assessment of the provision of other health care services. Performance indicators are defined as statistics or other units of information which reflect, directly or indirectly, the extent to which an anticipated outcome is achieved or the quality of the processes leading to that outcome (NHPC 2001).

Recently, the National Health Performance Committee (NHPC) developed a framework to report the performance of the Australian health system which has been adopted by Health Ministers (NHPC 2001). *Australian Hospital Statistics* uses this National Health Performance Framework to present performance indicator information.

This chapter describes the performance indicators presented in this chapter and elsewhere in this report, within the context of the framework. A substantial proportion of the performance indicator information in this report is included in this chapter; however, some is included elsewhere, for example for elective surgery waiting times (Chapter 5).

The performance indicators presented in this chapter include cost per casemix-adjusted separation, average salary expenditure, hospital accreditation, separation rates for selected procedures, separation rates for potentially preventable hospitalisations, average lengths of stay for a selection of AR-DRGs, relative stay indexes and emergency department waiting times.

The National Health Performance Framework

The NHPC describes the framework as a structure to guide the understanding and evaluation of the health system, facilitating consideration of how well the health system or program is performing. It has three tiers: 'Health status and outcomes', 'Determinants of health' and 'Health system performance'. Questions are posed for each tier and a number of dimensions have been identified within each. The dimensions can guide the development and selection of performance indicators such that the indicators can be used together to answer each tier's questions. Sometimes, single indicators can provide information in several dimensions of the framework.

The third tier is the most directly relevant to assessment of the provision of hospital and other health care services. It has been organised into nine dimensions: effective, appropriate, efficient, responsive, accessible, safe, continuous, capable and sustainable. The questions asked for this tier are: 'How well is the health system performing in delivering quality health actions to improve the health of all Australians?' and 'Is it the same for everyone?' The latter question underlines the focus throughout the framework on equity.

Table 4.A presents the third tier from the National Health Performance Framework (NHPC 2001). Further information on the Framework is included in Chapter 4 of *Australian Hospital Statistics 2000–01* (AIHW 2000a.)

Table 4.A: The National Health Performance Framework, Tier 3

Health system performance		
<i>How well is the health system performing in delivering quality health actions to improve the health of all Australians? Is it the same for everyone?</i>		
<i>Effective</i>	<i>Appropriate</i>	<i>Efficient</i>
Care, intervention or action achieves desired outcome.	Care/intervention/action provided is relevant to the client's needs and based on established standards.	Achieving desired results with most cost-effective use of resources.
<i>Responsive</i>	<i>Accessible</i>	<i>Safe</i>
Service provides respect for persons and is client orientated and includes respect for dignity, confidentiality, participation in choices, promptness, quality of amenities, access to social support networks, and choice of provider.	Ability of people to obtain health care at the right place and right time irrespective of income, physical location and cultural background.	The avoidance or reduction to acceptable limits of actual or potential harm from health care management or the environment in which health care is delivered.
<i>Continuous</i>	<i>Capable</i>	<i>Sustainable</i>
Ability to provide uninterrupted, coordinated care or service across programs, practitioners, organisations and levels over time.	An individual's or service's capacity to provide a health service based on skills and knowledge.	System or organisation's capacity to provide infrastructure such as workforce, facilities and equipment, and be innovative and respond to emerging needs (research, monitoring).

Source: NHPC 2001.

Performance indicators in this report

Table 4.B presents performance indicator information that is in this report (both in this chapter and elsewhere), for each of the National Health Performance Framework Tier 3 dimensions. Further information relevant to the interpretation of these performance indicator data is in the text and footnotes accompanying the tables.

Effective

There are no indicators available for effectiveness of the acute care sector. However, Tables 4.8 and 4.9 present data on potentially preventable hospitalisations (PPH), which are those conditions where hospitalisation is thought to be avoidable if timely and adequate non-hospital care is provided. Separation rates for PPHs therefore have potential as indicators of the quality or effectiveness of non-hospital care. These are presented by state and territory and Remoteness Area of usual residence.

Appropriate

Indicators of appropriateness include data on separation rates in Tables 2.4, 6.2, 7.7, 7.8, 7.11 and 7.12, presented for a range of different categories (such as Indigenous status, and area of usual residence) that relate to equity. These indicators should be interpreted taking into consideration the fact that separation rates are influenced not only by hospital system performance, but also by variation in underlying needs for hospitalisation, variation in admission and data recording practices (as noted elsewhere in this report) and variation in the availability of non-hospital services.

The separation rates for selected procedures in Tables 4.6 and 4.7 are also indicators of appropriateness. However, separation rates for some of the procedures may also be indicators of accessibility or of one or more dimensions relating to primary care. For example, separation rates for lens insertion, angioplasty, coronary artery bypass graft, knee replacement and hip replacement may also be indicators of accessibility, and the NHPC describes separation rates for myringotomy and tonsillectomy as indicators of the performance of the primary care sector (NHPC 2001). For all of these, statistics are presented by the state or territory and the Remoteness Area of usual residence of the patient, for equity considerations.

Data presented in Tables 7.11 and 7.12 on the state or territory and Remoteness Area of usual residence of the patient may also be indicators of accessibility of services, for example for the public and private sectors.

Efficient

The cost per casemix-adjusted separation statistics in Tables 4.1, 4.2 and 4.3 are indicators of efficiency, as are the statistics on average salaries (Table 4.4), average lengths of stay for selected AR-DRGs (Table 4.10) and relative stay indexes (Tables 4.1, 4.2, 4.3, 4.11, 4.12, 11.1 and 11.2). However, variation in length of stay, for example, may be a reflection of different types of service provision, such as between the public and private sectors, and thus not only an indicator of efficiency.

Table 4.B: Performance indicator information in this report, by National Health Performance Framework dimension

Table(s)	Indicator	Level(s) of care to which it relates	Presentation that relates to equity
Effective			
4.8, 4.9	Separation rates for potentially preventable hospitalisations	Primary care, Population Health	Presented by state and territory of usual residence of the patient (Table 4.8) and by Remoteness Area of usual residence (Table 4.9)
No indicators available for acute care			
Appropriate			
2.4	Separation rates	Acute care	Presented by state and territory of hospitalisation, and for the public and private sectors
6.2	Separation rates	Acute care	Presented by state and territory of hospitalisation, by admitted patient election status and funding source and for the public and private sectors
7.7, 7.8	Separation rates	Acute care	Presented by state and territory of hospital, hospital sector and Indigenous status
7.11, 7.12	Separation rates	Acute care	Presented by state and territory of usual residence of the patient (Table 7.11) and by Remoteness Area of usual residence (Table 7.12) and for the public and private sectors
4.6, 4.7	Separation rates for: myringotomy, tonsillectomy caesarean section, angioplasty, coronary artery bypass graft, hip replacement, revision of hip replacement, knee replacement, lens insertion, hysterectomy cholecystectomy, prostatectomy, appendicectomy, arthroscopy, endoscopy	Acute care	Presented by state and territory of usual residence of the patient (Table 4.6) and by Remoteness Area of usual residence (Table 4.7)

Table 4.B (continued): Performance indicator information in this report, by National Health Performance Framework dimension

Table(s)	Indicator	Level(s) of care to which it relates	Presentation that relates to equity
Efficient			
4.1, 4.2, 4.3	Cost per casemix-adjusted separation	Acute care	Presented by state and territory of hospital (Table 4.1), and by public hospital peer group (Tables 4.2 and 4.3)
4.1, 4.2, 4.3, 4.11, 4.12, 11.1, 11.2	Relative stay index	Acute care	Presented by state and territory of hospital (Table 4.1), by public hospital peer group (Tables 4.2 and 4.3) and, for the public and private sectors, by admitted patient election status and funding source (Tables 4.12, 4.13), and by MDC (Tables 11.1, 11.2)
4.4	Average salary by staffing category	Acute care	Presented by state and territory of hospital
4.10	Average length of stay for a selection of AR-DRGs	Acute care	Presented by state and territory of hospital, and for the public and private sectors
Responsive			
4.13	Emergency department waiting times (proportions waiting longer than clinically desirable)	Acute care	Presented by state and territory of hospital and by public hospital peer group
Accessible			
5.1, 5.2, 5.4, 5.5	Waiting times for elective surgery (times waited at the 50th and 90th percentiles)	Acute care	Presented as a time series (Table 5.1), by state and territory of hospital, and by public hospital peer group (Table 5.2), by surgical specialty (Table 5.4) and by indicator procedure (Table 5.5)
Safe			
10.1	Separations with adverse events	Acute care	Presented for the public and private sectors
Continuous			
6.14	Separation for patients aged over 70 years, by care type and mode of separation	Continuing care	Nil
No indicators available for acute care			
Capable			
4.5	Accreditation of hospitals and beds	Acute care	Presented by state and territory of hospital, and for the public and private sectors
Sustainable			
No indicators available for acute care			

Responsive

Statistics on the proportions of patients waiting longer than is clinically desirable for emergency department services (Table 4.13) are indicators of responsiveness, although they can also be regarded as indicators of accessibility. State and territory data can be used to consider equity.

Accessible

Times waited for elective surgery by patients at the 50th and 90th percentiles are presented as indicators of accessibility (Chapter 5). Data by surgical specialty, indicator procedure and state and territory can be used in consideration of equity.

Safe

The number of separations with external causes for adverse events (Table 10.1) is an indicator of safety. However, this indicator is under development, so should be interpreted with care. It has not been adjusted for risk in any way so, although the data are presented separately for the public and private sectors, comparisons between the sectors may not be valid.

Continuous

There are no indicators available relevant to the provision of continuous care that are specific for the acute care sector. However, this dimension will probably usually be used in assessments of how the sectors of the health care system work together, rather than individually. The separation count for patients aged over 70 years by care type and mode of separation (Table 6.14) has been identified as an indicator of continuous care relevant to the continuing care sector. It may also provide information relevant to the integration of the acute care and continuing care sectors.

Capable

Accreditation status of hospitals, beds and separations (Table 4.5) has been identified as an indicator of capability, defined by the NHPC as the capacity to provide a health service based on skills and knowledge. Accreditation of hospitals can be achieved through several different mechanisms that may measure different processes and outcomes relating to hospital service delivery. Different types of accreditation could therefore relate to different groups of dimensions of the framework.

Sustainable

There are no indicators available for sustainability, defined by the NHPC as capacity to provide infrastructure, such as workforce, facilities and equipment, and be innovative and respond to emerging needs (research, monitoring).

Cost per casemix-adjusted separation

The cost per casemix-adjusted separation is an indicator of the efficiency of the acute care sector. It has been published in *Australian Hospital Statistics* since the 1996–97 reference year, and included within frameworks of indicators by the National Health Ministers' Benchmarking Working Group (NHMBWG 1999), the Steering Committee for the Review of Commonwealth/State Service Provision (SCRCSSP 2003) and the NHPC (NHPC 2002). It is a measure of the average recurrent expenditure for each admitted patient, adjusted using AR-DRG cost weights for the relative complexity of the patient's clinical condition and for the hospital services provided. Details of the methods used in this analysis are presented in Appendix 3 of this report, and in *Australian Hospital Statistics 1999–00* (AIHW 2001a).

The calculation of these figures is sensitive to a number of deficiencies in available data. In particular:

- the proportion of recurrent expenditure that relates to admitted patients (the numerator) is estimated in different ways in different hospitals, and so is not always comparable;

- capital costs (including depreciation) are not included in numerators (see Table 3.5 for available data on depreciation, and Appendix 3 for SCRCSSP estimates of cost per casemix-adjusted separation including capital costs);
- only cost weights applicable to acute care separations are available, so these have been applied to all separations, including the 3% that were not acute (Appendix 3 includes details of the separations in this analysis, by care type, and also separate data for acute care separations only for New South Wales, Victoria, Western Australia and Tasmania);
- the proportion of patients other than public patients can vary, and the estimation of medical costs for these patients (undertaken to adjust expenditure to resemble what it would be if all patients had been public patients) is subject to error; and
- the 2001–02 AR-DRG version 4.2 cost weights were not available for this report, so the 2000–01 AR-DRG version 4.1 cost weights were used (DoHA 2002).

The scope of the analysis is hospitals that mainly provide acute care. These are the hospitals in the public hospital peer groups of *Principal referral and specialist women's and children's*, *Large hospitals*, *Medium hospitals* and *Small acute hospitals* (see Appendix 4). Excluded are small non-acute hospitals, multi-purpose services, hospices, rehabilitation hospitals, mothercraft hospitals, other non-acute hospitals, psychiatric hospitals, and hospitals in the *Unpeered and other* peer group. Also excluded are hospitals that cannot be classified due to atypical events such as being opened or closed mid-year, or for which the data is of unreasonably poor quality. This scope restriction improves the comparability of data among the jurisdictions and increases the accuracy of the analysis. The included hospitals accounted for 95.5% of separations in public acute and psychiatric hospitals in 2001–02 (Table 4.2), and 91.9% of recurrent expenditure.

The scope for 2001–02 is the same (defined in terms of peer groups) as for 1998–99 to 2000–01 but different from the scopes used for 1996–97 and 1997–98 (AIHW 1998, 1999, 2000a, 2001a, 2002a). However, a small number of hospitals can be classified to peer groups included in the analysis in some years, but to other peer groups excluded from the analysis in other years; this mainly applies to the *Small hospitals* and non-acute peer groups.

As noted in Chapter 3 the average costs reported here are based on expenditure by public hospitals in a state or territory and does not necessarily include state government contracted services with private hospitals or allow for the source of funds.

Table 4.1 shows the cost per casemix-adjusted separation for the states and territories for 2001–02. At the national level, the cost per casemix-adjusted separation was \$3,017. Large portions of the 2001–02 costs were attributed to non-medical salaries and medical labour costs; nationally these costs were \$1,598 and \$571 respectively, per casemix-adjusted separation.

The cost per casemix-adjusted separation data should be interpreted taking into consideration other factors, such as costs incurred that are beyond the control of a jurisdiction. For example, the Northern Territory has high staffing and transport costs, and treats a greater proportion of Aboriginal and Torres Strait Islander patients than other jurisdictions. Because of factors such as these, cost disabilities associated with providing the same level and standard of hospital services available elsewhere in Australia have been recognised by the Commonwealth Grants Commission.

Public hospital peer groups

Public hospital peer groups have been developed for presenting data on costs per casemix-adjusted separation. The aim was to allow more meaningful comparison of the data than comparison at the jurisdiction level would allow. The peer groups were therefore designed to explain variability in the average cost per casemix-adjusted separation. They also group hospitals into broadly similar groups in terms of their range of admitted patient activities, and their geographical location. In a minor adjustment to the methodology, the Rural, Remote, Metropolitan Area (RRMA) classification was replaced by the Australian Bureau of Statistics' Remoteness Area classification as the geographical input into the classification for 2001–02. Nineteen hospitals were affected by this change, 10 in Queensland. Further detail on the two geographic classifications, the derivation of the peer groups and the effects of the change in geographical classification is included in Appendixes 3 and 4.

For 2001–02, the dominant hospital peer group category was the *Principal referral and Specialist women's and children's* group. They accounted for 66.4% of public acute and psychiatric hospital expenditure and 64.4% of separations (Table 4.2). The cost per casemix-adjusted separation for this group was \$3,075, which is 1.9% higher than the overall average cost (\$3,017) for the hospitals in scope for this analysis.

Table 4.2 also presents a range of other statistics about the peer groups, such as the number of hospitals in each, average length of stay, relative stay index (see below and in Appendix 3), and the cost per casemix-adjusted separation at the 25th and 75th percentile. The average number of AR-DRGs (with either any or 5 or more acute separations) reported for each hospital is also presented; it provides information on the breadth of activity of each type of hospital, as measured using AR-DRGs.

Table 4.3 presents cost per casemix-adjusted separation data and other statistics by peer group for each state and territory. The cost per casemix-adjusted separation varied among the jurisdictions, for example, from \$2,875 in Queensland, to \$3,143 in Victoria for *Principal referral* hospitals.

Average salary expenditure

Average salaries paid to public hospital full-time equivalent staff by states and territories are presented in Table 4.4. They are regarded as indicators of efficiency. New South Wales does not report staffing numbers and salaries separately for registered nurses and enrolled nurses, so average salaries are presented for nurses as a single group. Their comparability may be affected by the relative proportions of registered and enrolled nurses among the jurisdictions.

The average salary for full-time equivalent *Nurses* in 2001–02 was \$56,104 nationally, an increase of 6.7% on the average salary in 2000–01. The average salary for full-time equivalent *Salaried medical officers* was \$108,705, an increase of 5.0% over the previous year.

There was some variation in the average salaries among the jurisdictions. Average salaries for nurses ranged from \$55,599 in South Australia to \$64,915 in the Northern Territory. For salaried medical officers, they ranged from \$86,540 in South Australia to \$134,326 in Victoria. However, the relatively high average salaries for Victoria may partly be the result of under-reporting of full time equivalent (FTE) staff (see Chapter 3).

Some states and territories were not able to provide data separately for *Diagnostic and allied health professionals*, *Other personal care staff* and *Domestic and other staff*. Thus, some of the variation in average salaries reported for these categories is likely to be a result of different

reporting practices. The variations in the averages are also affected by different practices in 'outsourcing' services, for example for domestic and catering functions. The degree of outsourcing of higher-paid versus lower-paid staffing functions will be a factor that affects the comparison of averages. For example, outsourcing the provision of domestic services but retaining domestic service managers to oversee the activities of the contractors would tend to result in higher average salaries for the domestic service staff.

Hospital accreditation

Hospital accreditation has been identified as an indicator of capability within the National Health Performance Framework. The indicator originally related to accreditation under the Australian Council on Healthcare Standards (ACHS) Equip program, partly because data on ACHS accreditation were the only relevant data available nationally. However, other organisations also undertake hospital accreditation, including the Australian Quality Council and the Quality Improvement Council, and hospitals can also be certified as compliant with quality standards such as ISO 9000 quality family. The data presented in Table 4.5 therefore include accreditation through ACHS Equip and other types of accreditation for public hospitals. For private hospitals, the data have been sourced from the ABS's Private Health Establishments Collection for 2000-01 and relate to accreditation by any body. Accreditation at any point in time does not assume a fixed or continuing status as accredited.

For Australia as a whole, 539 public hospitals and 47,381 public hospital beds (92% of the total) were known to be accredited in 2001-02. A total of 381 private hospitals and 24,486 private hospital beds (92% of the total) were accredited in 2000-01. The proportion of public hospital accredited beds varied by jurisdiction, from 100% in the Australian Capital Territory to 64% in the Northern Territory.

The comparability of the public hospital accreditation data among the states and territories is limited because of the voluntary nature of participation in the award schemes for hospitals in some jurisdictions.

Separation rates for selected procedures

Separation rates for 'selected' procedures have been identified as indicators of appropriateness. However, as noted above, several may also be indicators of accessibility or of the performance of the primary care sector.

Most of the procedures were originally selected as indicators of appropriateness by the NHMBWG because of the frequency with which they are undertaken, because they are often elective and discretionary, and because there are sometimes treatment alternatives available (NHMBWG 1998). ICD-10-AM codes used to define the procedures are listed in Appendix 3.

As for other separation rates, these data should be interpreted with caution, as they would reflect not only hospital system performance, but also variation in underlying needs for hospitalisation, variation in admission and data recording practices, and variation in the availability of non-hospital services. In addition, the National Hospital Morbidity Database does not include data for some private hospitals (in particular the private hospitals in the Northern Territory and other hospitals as noted in Appendix 4). This may result in underestimation of separation rates for some of the diagnoses and procedures, particularly those more common for private hospitals. The separation rates are age-standardised,

however, to take into account the different age structures of the populations of the states and territories.

Table 4.6 presents age-standardised separation rates for each procedure for the state or territory of usual residence of the patient, accompanied by the standardised separation ratio (SRR) against the national total. If the SRR is greater than 1 then the rate of the state is higher than the national average and vice versa. Also included is the 95% confidence interval of the SRR. The 95% confidence interval shows the range of values which the SRR could be expected to fall in due to chance. If the confidence interval includes 1 then the statistical evidence of a difference between jurisdictions is considered less likely (see Appendix 3).

For example, the separation rate for *Knee replacement* for residents of Queensland was 1.24 separations per 1,000 population. The SRR was 0.99 but the 95% confidence interval was 0.96–1.02, indicating that the difference was not statistically significant. The separation rate for the Australian Capital Territory was 1.45 per 1,000 population, with a SRR of 1.16 and the 95% confidence interval of 1.04–1.28, indicating the difference was statistically significant.

Table 4.7 presents similar statistics by the Remoteness Area of usual residence of the patient. For example, the rate for *Hip replacement* for residents of major cities was 0.72 separations per 1,000 population. The SRR was 0.96 and the 95% and the confidence interval was 0.95–0.97 indicating a statistically significant difference.

The number of caesarean sections is dependent on the birth rate as well as the population so the population rate is less meaningful. The number of in-hospital births has therefore been included in the tables, and the number of caesarean sections reported for separations for which in-hospital birth was reported. Comparability is, however, still complicated by potential under-identification of in-hospital births in this analysis, variation in numbers of non-hospital births, and in the age at which the mothers are giving birth. Residents of major cities (27.5 caesarean sections per 100 births) and South Australia (29.2 per 100 births) had the highest rate on this basis.

The national rate of caesarean sections per 100 in-hospital births has increased from 21.8 to 22.7 to 24.4 to 26.7 over the years from 1998-99 to 2001-02.

Separation rates for potentially preventable hospitalisations

Potentially preventable hospitalisations (PPHs) are those conditions where hospitalisation is thought to be avoidable if timely and adequate non-hospital care is provided. Separation rates for PPHs therefore have potential as indicators of the quality or effectiveness of non-hospital care. A high rate of potentially preventable hospitalisation may indicate an increased prevalence of the conditions in the community, poorer functioning of the non-hospital care system or an appropriate use of the hospital system to respond to greater need.

Three broad categories for PPHs have been used in this chapter. These have been sourced from *The Victorian Ambulatory Care Sensitive Conditions Study* (Department of Human Services Victoria 2002).

- **Vaccine-preventable.** Diseases that can be prevented with proper vaccination and include influenza, bacterial pneumonia, tetanus, measles, mumps, rubella, pertussis and polio. The conditions are considered to be preventable, rather than the hospitalisation.
- **Acute.** These conditions may not be preventable, but theoretically do not result in hospitalisation if adequate and timely non-hospital care is received. These include

dehydration/gastroenteritis, kidney infection, perforated ulcer, cellulitis, pelvic inflammatory disease, ear nose and throat infections and dental conditions.

- **Chronic.** The conditions may be preventable through behaviour modification and lifestyle change, but they can also be managed effectively through non-hospital care to prevent deterioration and hospitalisation. These conditions include diabetes, asthma, angina, hypertension, congestive heart failure and chronic obstructive pulmonary disease.

Tables 4.8 and 4.9 present the number of separations, the proportion of residents treated in hospitals outside their state of residence and the age-standardised separation rates for each PPH condition for the state or territory (Table 4.8) or Remoteness Area of usual residence of the patient (Table 4.9). These tables also include the SRR against the national total as well as the 95% confidence interval of the SRR. If the SRR is greater than 1 then the rate of the state is higher than the national average and vice versa. The 95% confidence interval shows the range of values which the SRR ratio could be expected to fall in due to chance. If the confidence interval includes 1, then the statistical evidence of a difference between jurisdictions is considered less likely (see Appendix 3).

Statistics are presented for the total PPH rate, the rates for each of the three broad PPH categories as well as individual conditions, as selected by NHPC for its report to be published late in 2003. These conditions include *Diabetes, Asthma, Angina, Congestive heart failure* and *Chronic obstructive pulmonary disease* from the chronic category, and *Dental conditions, Ear, nose and throat infections, Convulsions and epilepsy, Cellulitis* and *Dehydration* from the acute category. For vaccine-preventable conditions, only the total is presented. A full description of all conditions presented in these tables, including ICD-10-AM codes, can be found in Appendix 3.

There were 600,759 potentially preventable hospitalisations in Australia in 2001–02, which translates to a rate of 30.5 per 1,000 population. The rates ranged from 21.2 per 1,000 in the Australian Capital Territory to 42.8 per 1,000 in the Northern Territory. The separation rate for *Vaccine preventable* PPHs in the Northern Territory was 2.4 times the national rate, and the separation rate for the Australian Capital Territory was 0.6 times the national rate.

The rate for *Chronic obstructive pulmonary disease* for residents of Western Australia was 2.71 separations per 1,000 population. The SRR was 0.98 but the 95% confidence interval was 0.95–1.01, indicating that the difference was not statistically significant. The separation rate for the Northern Territory was 5.60 per 1,000 population, with a SRR of 2.02 and the 95% confidence interval of the SRR of 1.86–2.18, indicating the difference was statistically significant (Table 4.8).

Comparing Remoteness Areas, separation rates were higher for the more remote areas for each PPH. For example, the separation rate for *Ear, nose and throat infections* in major cities was 1.40 per 1,000 population, for inner regional it was 1.77, for outer regional it was 2.48, remote was 3.54 and for very remote the rate was 4.47 (Table 4.9).

Average lengths of stay for 20 selected AR-DRGs

The average length of stay for 20 selected AR-DRGs has been identified as an indicator of efficiency. The selected AR-DRGs (Table 4.10) replaces Table 4.8 from earlier editions of *Australian Hospital Statistics*, which presented average length of stay for the top 10 DRGs by volume. The selected AR-DRGs reflect a more representative range of services and will remain constant for future years.

The selected AR-DRGs were chosen on the basis of:

- homogeneity, where variation is more likely to be attributable to the hospital's performance rather than variations in the patients themselves.
- differences between jurisdictions and/or sectors.
- policy interest as evidenced by
 - inclusion of similar groups in other tables in *Australian Hospital Statistics*, e.g. indicator procedures for elective surgery waiting times
 - high volume and/or cost.
 - changes in volume over years.
- representativeness across clinical groups (MDCs) and surgical and medical AR-DRGs.

In addition, only non-complication and/or comorbidity (non-CC) AR-DRGs were chosen from groups of adjacent AR-DRGs because AR-DRGs with CCs may be relatively less homogeneous, as they potentially include a range of complications and/or comorbidities. With this, information would also not be duplicated on similar topics.

To aid the comparability between years some minor alterations were made to reflect changes that would occur with the introduction of version 5 AR-DRGs. In particular AR-DRGs I04A and I04B *Knee replacement and reattachment* were combined in anticipation of a change in AR-DRG version 5.

These data are not equivalent to the data presented in the tables in Chapter 11, or the predecessor table in *Australian Hospital Statistics 2000-01* on the top 10 DRGs, as separations with lengths of stay over 120 days are excluded and same day separations are included.

The average length of stay of the chosen AR-DRGs ranged from 14.2 days for U63B *Major Affective Disorders Age<70 W/O Catastrophic or Severe CC* to 1.6 days for G09Z *Inguinal and Femoral Hernia Procedures Age>0*. The average length of stay for E62C, *Respiratory infection or inflammations without complications*, was 3.8 days for all hospitals in Australia, 3.5 days for public hospitals and 5.2 days for private hospitals. There was some variation between states and territories with Victorian hospitals reporting an average length of stay of 3.8 days overall and Tasmanian hospitals 4.3 days.

Relative stay index

Relative stay indexes (RSIs) have been identified as indicators of efficiency. They are calculated as the actual number of patient days for separations in selected AR-DRGs, divided by the number of patient days expected (based on national figures) standardised for casemix. The adjustment for casemix (based on the AR-DRG and age of the patient for each separation) allows variation in types of services provided to be taken into account, but does not take into account other influences on length of stay, such as Indigenous status.

An RSI greater than 1 indicates that an average patient's length of stay is higher than would be expected given the casemix for the group of separations of interest. An RSI of less than 1 indicates that the length of stay was less than would have been expected.

This publication uses two methods of standardisation. The method used in most tables (Tables 4.1, 4.2, 4.3 and 4.11, and part of Table 4.12) is an indirect standardisation method, where the total observed length of stay is divided by the total expected length of stay. This is the same method used in *Australian Hospital Statistics 2000-01*. Technically an indirectly standardised rate compares a group with a standard population. The indirectly standardised

rates of different groups are not strictly comparable as the different groups have different casemixes.

In addition to the indirect method, Table 4.12 presents a directly standardised RSI. The direct method weights the separations of the group of hospitals to reflect the total casemix of Australia before calculating the ratio, thereby weighting the casemix of the groups of hospitals to a comparable basis. However, the direct standardisation method is not very suitable for groups of hospitals for which a limited range of AR-DRGs is reported, as the weighting of separations for AR-DRGs that are not reported (or are reported in small numbers) is subject to error. Therefore, presentation of the directly standardised method in the private sector in Tasmania and the Australian Capital Territory and the public sector in the Northern Territory have been suppressed. In these cells, fewer than 600 of the 639 AR-DRGs used in the national RSI analysis are represented so the RSIs may be affected by estimation of the data for missing AR-DRGs. More detail on these methods is included in Appendix 3, with a description of the number of AR-DRGs represented in each cell in Table 4.12 (Table A3.11).

Tables 4.1, 4.2 and 4.3 present RSI information for public hospitals, using the indirect method and public hospital data to calculate expected lengths of stay. For the hospitals included in the cost per casemix-adjusted separation analysis, the RSI was 0.99 overall, and ranged from 1.25 in the Northern Territory to 0.95 in Queensland (Table 4.1).

Tables 4.11 and 4.12 present RSI information using public and private sector data together to calculate expected lengths of stay. Overall, the RSI for private hospitals was 1.04 indirectly standardised and 1.08 directly standardised and the RSI for public hospitals was 0.98 indirectly standardised and 0.99 directly standardised. The difference between the sectors in the directly standardised RSI, indicates that the public sector had relatively shorter lengths of stay, according to this measure.

Table 4.12 presents RSI information for the medical, surgical and other categories of AR-DRGs (DHAC 1998, 2000a, 2000b). In the public sector, the RSI for medical AR-DRGs was 0.96 indirectly standardised and 0.96 directly standardised, while the RSI for surgical AR-DRGs was 1.02 indirectly standardised and 1.02 directly standardised. In the private sector, the RSI for medical AR-DRGs was 1.13 indirectly standardised and 1.14 directly standardised, while the RSI for surgical AR-DRGs was 0.98 indirectly standardised and 0.97 directly standardised.

Emergency department waiting times

Emergency department waiting times are regarded as indicators of responsiveness of the acute care sector (NHPC 2002). The indicator presented here is the proportion of patients presenting to public hospital emergency departments who waited longer for care than was clinically appropriate, by triage category.

The triage category indicates the urgency of the patient's need for medical and nursing care (NHDC 2001). It is usually assigned by triage nurses to patients at, or shortly after, the time of presentation to the emergency department, in response to the question 'This patient should wait for medical care no longer than...?'. The National Triage Scale has five categories that incorporate the time by which the patient should receive care:

- Resuscitation: immediate (within seconds)
- Emergency: within 10 minutes
- Urgent: within 30 minutes

- Semi-urgent: within 60 minutes
- Non-urgent: within 120 minutes.

The *National Health Data Dictionary* standard for measuring the waiting time is to subtract the time at which the patient presents at the emergency department from the time of commencement of service by a treating medical officer or nurse. The time at which the patient presents is the time at which they are registered clerically, or the time at which they are triaged, whichever occurs earlier. Patients who do not wait for care after having been registered and/or triaged are generally excluded from the data but some may have been included in the data on the number of patients seen for Queensland and the Australian Capital Territory.

There is some variation among the jurisdictions on how the waiting times are calculated, and this may slightly affect the comparability of the data. Queensland, Victoria, Western Australia and the Australian Capital Territory use the national standard method. The Northern Territory uses the time of clerical registration as the starting point, and New South Wales, Tasmania, and South Australia use the time of triage. In South Australia, patients are always triaged prior to being clerically registered.

The comparability of the data may also be influenced by variation in the coverage of the emergency department waiting times data. Table 4.13 shows that coverage of the collection (as indicated by the proportion of hospitals included) was highest for the *Principal referral and women's and children's* peer group. Data for 1 hospital in New South Wales and Victoria respectively and for 3 hospitals in Queensland were not reported to the collection. For the *Large hospital* peer group, data for 10 hospitals in Victoria and 1 hospital in Queensland and Western Australia respectively, were not reported. Data for 18 out of 112 hospitals in the *Medium hospital* peer group were reported. Hospitals that were not included may not have emergency departments or provide emergency department services.

Table 4.13 also presents estimates of the proportion of emergency department visits that were covered by the Emergency Department Waiting Times Data Collection. The Institute derived these estimates from data provided by the states and territories for the National Public Hospitals Establishments Database. The estimates were derived as:

- the number of outpatient occasions of service for *Accident and emergency* reported to the National Public Hospitals Establishments Database for hospitals reporting data to the Emergency Department Waiting Times Data Collection as a proportion of the total number of outpatient occasions of service for *Accident and emergency* reported to the National Public Hospital Establishments Database.

Based on this measure, overall coverage of the Emergency Department Waiting Times Data Collection was 64% and ranged from 42% in Western Australia to 100% in the Australian Capital Territory and the Northern Territory (Table 4.13). Further information on the *Accident and emergency* outpatient occasions of service reported to the National Public Hospitals Establishments Database and this waiting times collection is included in Appendix 3.

The comparability of the data may also be influenced by the comparability of the triage categories among the states and territories. Although the triage category is not a measure of the need for admission to hospital, the proportions of patients in each category that were admitted can be used as an indication of the comparability of the triage categorisation. The proportion of patients admitted varied from state to state, particularly for the resuscitation and emergency triage categories, but less for the semi-urgent and non-urgent categories (Table 4.13). This may indicate that the data for the former two categories are less comparable than data for the latter two categories.

The distribution of patients across triage categories among the states and territories may also provide some indication of the differences between states and territories in the types of patients that present to emergency departments. Table 4.13 shows the proportion of patients seen, by triage category and state and territory. There was very little variation among the states and territories in the proportion of patients in each triage category, with the exception of the Australian Capital Territory, which differed from the other jurisdictions fairly markedly for all triage categories except '1 - Resuscitation'.

The proportion receiving care on time varied by triage category, from 99% for resuscitation patients to 59% for semi-urgent patients. Overall, the proportion of patients receiving emergency department care within the required time was 64%, varying from 55% in South Australia to 78% in the Australian Capital Territory (Table 4.13).

Overall, for triage category '1 - Resuscitation', the proportion of patients seen on time was 99% and ranged from 98% in the *Medium hospital* peer group to 99% in the *Principal referral and women's and children's* and the *Large hospital* peer group. For triage category '5 - Non-urgent' the proportion of patients seen on time was 84% overall, and ranged from 78% in the *Principal referral and women's and children's* peer group to 93% in the *Medium hospital* peer group.

Table 4.1: Cost^(a) per casemix-adjusted separation and selected other statistics, selected public acute hospitals, ^(b) states and territories, 2001–02

Variable	NSW	Vic	Qld	WA	SA	Tas	ACT	NT ^(c)	Total
Total separations ('000) ^(d)	1,201	1,061	667	319	336	76	62	63	3,786
Acute separations ('000) ^(d)	1,175	1,028	641	314	328	75	61	63	3,685
Proportion of separations not acute (%)	2.2	3.1	3.8	1.6	2.4	1.4	1.3	1.5	2.7
Average cost weight ^(e)	1.05	0.96	0.99	0.98	1.01	1.06	0.99	0.76	1.00
Casemix-adjusted separations ('000) ^(f)	1,261	1,019	658	312	339	81	61	48	3,780
Total admitted patient days ('000) ^(d)	4,499	3,871	2,253	1,123	1,224	289	214	206	13,681
Admitted patient days for acute patients ('000) ^(d)	4,133	3,165	1,967	999	1,060	260	198	196	11,978
Proportion of bed days not acute (%)	8.1	18.2	12.7	11.1	13.4	10.2	7.8	4.7	12.4
Total recurrent expenditure (\$m)	5,287	4,307	2,406	1,399	1,175	340	303	228	15,446
Inpatient fraction ^(g)	0.69	0.72	0.74	0.69	0.81	0.72	0.74	0.77	0.72
Total admitted patient recurrent expenditure (\$m)	3,629	3,097	1,783	970	950	245	224	177	11,075
Public patient day proportion ^(h)	0.79	0.86	0.93	0.88	0.84	0.82	0.87	0.95	0.85
Newborn episodes with no qualified days ('000)	46.6	34.7	27.7	13.3	9.4	2.1	2.4	2.3	138.6
Relative stay index ⁽ⁱ⁾	1.02	0.96	0.95	1.01	0.97	0.96	1.06	1.25	0.99
Average cost data for selected hospitals									
Non-medical labour costs per casemix-adjusted separation (\$)									
Nursing	765	885	756	812	763	755	918	988	804
Diagnostic/allied health ^(j)	237	283	172	214	188	181	185	185	230
Administrative	226	230	195	255	218	177	259	247	223
Other staff	185	155	241	225	117	350	135	431	190
Superannuation	149	141	162	161	141	176	236	142	151
<i>Total non-medical labour costs</i>	1,562	1,694	1,526	1,667	1,427	1,639	1,734	1,992	1,598
Other recurrent costs per casemix-adjusted separation (\$)									
Domestic services	67	78	86	154	80	96	159	169	85
Repairs/maintenance	73	65	57	91	77	81	69	59	70
Medical supplies ^(j)	258	240	276	227	182	438	293	236	251
Drug supplies	153	144	153	176	151	142	121	189	152
Food supplies	36	36	22	19	18	30	40	34	31
Administration	181	209	135	160	82	85	281	114	170
Other	54	78	33	78	316	137	291	287	88
<i>Total other recurrent costs</i>	822	850	763	906	906	1,009	1,253	1,088	847
Total excluding medical labour costs	2,384	2,544	2,289	2,573	2,334	2,647	2,987	3,080	2,445

(continued)

Table 4.1 (continued): Cost^(a) per casemix-adjusted separation and selected other statistics, selected public acute hospitals, ^(b) States and Territories, 2001–02

Variable	NSW	Vic	Qld	WA	SA	Tas	ACT	NT ^(c)	Total
Medical labour costs per casemix-adjusted separation (\$)									
Public patients									
Salaried/sessional staff	333	422	356	411	336	289	419	544	371
VMO payments	160	73	63	121	137	98	261	54	114
Private patients (estimated) ^(k)	133	79	33	74	92	83	103	31	87
Total medical labour costs	626	574	453	607	565	470	783	629	571
Total cost per casemix-adjusted separation^(a)	3,010	3,117	2,741	3,180	2,898	3,118	3,769	3,709	3,017

(a) Excludes depreciation.

(b) Psychiatric hospitals, drug and alcohol services, mothercraft hospitals, unpeered and other, hospices, rehabilitation facilities, small non-acute hospitals and multi-purpose services are excluded from this table. The data are based on hospital establishments for which expenditure data were provided, including networks of hospitals in some jurisdictions. Some small hospitals with incomplete expenditure data were not included. See Appendix 3 for further information.

(c) These figures should be interpreted in conjunction with the consideration of cost disabilities associated with hospital service delivery in the Northern Territory (see text).

(d) From the National Hospital Morbidity Database, including same day separations and newborns with qualified days.

(e) Average cost weight from the National Hospital Morbidity Database, based on acute and unspecified separations and newborn episodes of care with qualified days, using the 2000–01 AR-DRG v 4.1 cost weights (DHA 2002). Updated versions of this table based on 2001–02 AR-DRG v 4.2 cost weights will be available on the internet when available.

(f) Casemix-adjusted separations is the product of Total separations and Average cost weight.

(g) Of the selected hospitals, only 5 very small hospitals, 3 in SA and 2 in Victoria, have had their IFRAC estimated by the HASAC ratio.

(h) Eligible public patient days as a proportion of total patient days, excluding newborns with no qualified days. Public patients defined by patient election status equal to *public*.

(i) Relative stay index based on public hospitals using the indirect method. The indirectly standardised relative stay index is not technically comparable between cells but is a comparison of the hospital group with the national average of public hospitals based on the casemix of that group. See Appendix 3 for details on the methodology.

(j) Queensland pathology services are purchased from the statewide pathology service rather than being provided by each hospital's employees; resulting in higher medical supplies costs and lower diagnostic staff costs.

(k) Estimated private patient medical costs calculated as the sum of salary/sessional and VMO payments divided by the number of public patient days multiplied by the number of private patient days. This is a notional estimate of the medical costs for all non-public patients, including private, compensable and ineligible.

Table 4.2: Cost per casemix-adjusted separation and selected other statistics, by public hospital peer group, Australia, (a)(b) 2001–02

	Separations		Average length of stay		Recurrent expenditure		Relative Stay Index ^(c)		Number of AR-DRGs		Cost per casemix-adjusted separation (\$)		
	Number of hospitals	Percent of total cost weight ('000)	Average length of stay	Average cost weight	Average length of stay (\$'000,000)	Percent of total	Relative Stay Index ^(c)	Any acute separations	5 or more acute seps	Average	Q3	Q1	
Principal referral	54	2,337.3	3.8	1.04	10,070.4	59.8	1.00	576.2	475.0	3,049	3,184	2,725	
Specialist women's & children's	10	216.7	3.1	1.10	1,115.6	6.6	1.00	366.9	237.8	3,357	3,574	3,266	
<i>Total Principal referral and Women's & children's</i>	<i>64</i>	<i>2,554.0</i>	<i>3.7</i>	<i>1.04</i>	<i>11,186.0</i>	<i>66.4</i>	<i>1.00</i>	<i>543.5</i>	<i>437.9</i>	<i>3,075</i>	<i>3,331</i>	<i>2,732</i>	
Large major cities	22	317.9	3.6	1.01	1,216.8	7.2	0.93	447.7	290.3	2,778	3,141	2,416	
Large regional & remote	20	274.2	3.2	0.92	922.2	5.5	0.95	498.7	309.3	2,800	3,031	2,559	
<i>Total Large hospitals</i>	<i>42</i>	<i>592.1</i>	<i>3.4</i>	<i>0.97</i>	<i>2,139.0</i>	<i>12.7</i>	<i>0.94</i>	<i>472.0</i>	<i>299.3</i>	<i>2,788</i>	<i>3,088</i>	<i>2,485</i>	
Medium major cities & regional group 1	31	240.7	3.4	0.90	865.8	5.1	0.99	405.3	211.7	3,092	3,322	2,703	
Medium major cities & regional group 2	72	245.6	3.4	0.81	717.7	4.3	0.99	312.4	136.7	2,726	3,050	2,410	
<i>Total Medium hospitals</i>	<i>103</i>	<i>486.3</i>	<i>3.4</i>	<i>0.85</i>	<i>1,583.5</i>	<i>9.4</i>	<i>0.99</i>	<i>340.3</i>	<i>159.3</i>	<i>2,919</i>	<i>3,149</i>	<i>2,501</i>	
Small regional acute	87	92.2	3.8	0.83	290.3	1.7	1.04	188.1	57.4	2,952	4,014	2,341	
Remote acute	47	61.1	3.0	0.78	247.2	1.5	1.02	181.0	60.0	3,348	4,095	2,349	
<i>Total Small acute hospitals</i>	<i>134</i>	<i>153.3</i>	<i>3.5</i>	<i>0.81</i>	<i>537.5</i>	<i>3.2</i>	<i>1.03</i>	<i>185.6</i>	<i>58.3</i>	<i>3,110</i>	<i>4,029</i>	<i>2,349</i>	
<i>Total hospitals in cost per casemix-adjusted separation analysis (see Table 4.1)</i>	<i>343</i>	<i>3,785.7</i>	<i>3.6</i>	<i>1.00</i>	<i>15,446.0</i>	<i>91.7</i>	<i>0.99</i>	<i>333.9</i>	<i>189.0</i>	<i>3,017</i>	<i>3,414</i>	<i>2,501</i>	
Small non-acute	111	69.4	8.8	0.86	313.3	1.9	1.14	136.1	30.8	n.a.	n.a.	n.a.	
Multi-purpose service	66	29.5	4.6	0.77	156.4	0.9	1.06	110.7	22.8	n.a.	n.a.	n.a.	
Hospice	4	2.7	18.2	1.64	39.5	0.2	2.60	17.8	5.0	n.a.	n.a.	n.a.	
Rehabilitation	6	3.4	31.6	1.97	96.5	0.6	2.28	0.5	0.0	n.a.	n.a.	n.a.	
Mothercraft	8	15.1	3.3	0.75	20.8	0.1	1.11	18.6	9.7	n.a.	n.a.	n.a.	
Other non-acute	16	24.8	10.5	0.51	165.4	1.0	1.52	43.3	9.2	n.a.	n.a.	n.a.	
<i>Total Non-acute</i>	<i>211</i>	<i>145.0</i>	<i>8.4</i>	<i>0.78</i>	<i>791.9</i>	<i>4.7</i>	<i>1.15</i>	<i>111.0</i>	<i>24.6</i>	<i>n.a.</i>	<i>n.a.</i>	<i>n.a.</i>	
Psychiatric ^(d)	19	18.3	64.2	1.88	424.0	2.5	1.35	15.6	9.3	n.a.	n.a.	n.a.	
Unpeered and other acute	110	15.1	8.8	0.65	185.3	1.1	1.17	40.2	2.8	n.a.	n.a.	n.a.	
Total peer grouped hospitals	683	3,964.1	4.1	0.99	16,847.1	100.00	1.00	216.0	107.4	n.a.	n.a.	n.a.	
<i>Teaching hospitals (excluding psychiatric)</i>	<i>60</i>	<i>2,331.6</i>	<i>3.7</i>	<i>1.05</i>	<i>10,512.5</i>	<i>62.40</i>	<i>1.00</i>	<i>509.2</i>	<i>406.8</i>	<i>3,166</i>	<i>3,520</i>	<i>2,822</i>	

(a) Expenditure data exclude depreciation.

(b) The data are based on hospital establishments for which expenditure data were provided, including networks of hospitals in some jurisdictions. Some small hospitals with incomplete expenditure data were not included. See Appendix 5 for further information.

(c) Relative stay index based on public hospitals using the indirect method. The indirectly standardised relative stay index is not technically comparable between cells but is a comparison of the hospital group with the national average of public hospitals based on the casemix of that group. See Appendix 3 for details on the methodology.

(d) Psychiatric hospitals consist of a mix of short-term acute, long term, psychogeriatric and forensic psychiatric hospitals.

Note: See Appendix 5 for the definitions of the public hospital peer groups.

n.a. Not applicable.

Table 4.3: Cost per casemix-adjusted separation and selected other statistics, by public hospital peer group^(a), states and territories, 2001–02

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Principal referral: major cities (>20,000 acute weighted separations) & regional (>16,000 acute weighted separations)									
Number of hospitals	18	15	11	3	3	2	1	1	54
Average beds per hospital	403	530	430	519	471	382	498	297	453
Separations per hospital	36,966	52,769	36,693	53,263	56,403	33,158	48,632	32,829	43,284
AR-DRGs (5+) per hospital ^(b)	481	473	433	525	529	495	545	438	475
Total expenditure (\$'000) ^(c)	3,206,543	3,299,137	1,542,374	n.p.	n.p.	284,664	n.p.	n.p.	10,070,441
Average cost weight ^(d)	1.10	0.99	1.05	1.07	1.07	1.05	0.95	0.81	1.04
Relative stay index ^(e)	1.05	0.96	0.96	n.p.	n.p.	0.95	n.p.	n.p.	1.00
Cost per separation	3,243	3,019	2,913	n.p.	n.p.	3,064	n.p.	n.p.	3,085
Cost per patient day	843	784	808	n.p.	n.p.	820	n.p.	n.p.	818
Cost per casemix-adjusted sep.	3,096	3,132	2,800	n.p.	n.p.	3,009	n.p.	n.p.	3,049
Specialist women's & children's (>10,000 acute weighted separations)									
Number of hospitals	3	1	4	1	1	0	0	0	10
Average beds per hospital	164	535	141	473	309	n.a.	n.a.	n.a.	237
Separations per hospital	17,302	53,537	11,860	33,644	30,150	n.a.	n.a.	n.a.	21,667
AR-DRGs (5+) per hospital ^(b)	223	409	157	350	321	n.a.	n.a.	n.a.	238
Total expenditure (\$'000) ^(c)	275,973	n.p.	225,583	n.p.	n.p.	n.a.	n.a.	n.a.	1,115,558
Average cost weight ^(d)	1.14	1.09	1.10	1.10	1.03	n.a.	n.a.	n.a.	1.10
Relative stay index ^(e)	1.07	n.p.	0.92	n.p.	n.p.	n.a.	n.a.	n.a.	1.00
Cost per separation	3,369	n.p.	3,783	n.p.	n.p.	n.a.	n.a.	n.a.	3,540
Cost per patient day	1,054	n.p.	1,297	n.p.	n.p.	n.a.	n.a.	n.a.	1,140
Cost per casemix-adjusted sep.	3,195	n.p.	3,486	n.p.	n.p.	n.a.	n.a.	n.a.	3,357
Total Principal referral and specialist women's & children's									
Number of hospitals	21	16	15	4	4	2	1	1	64
Average beds per hospital	369	531	353	508	431	382	498	297	419
Separations per hospital	34,157	52,817	30,070	48,359	49,840	33,158	48,632	32,829	39,906
AR-DRGs (5+) per hospital ^(b)	444	469	359	482	477	495	545	438	438
Total expenditure (\$'000) ^(c)	3,482,516	3,579,829	1,767,957	944,077	761,490	284,664	n.p.	n.p.	11,185,999
Average cost weight ^(d)	1.10	0.99	1.06	1.07	1.06	1.05	0.95	0.81	1.04
Relative stay index ^(e)	1.05	0.96	0.96	1.00	0.98	0.95	n.p.	n.p.	1.00
Cost per separation	3,252	3,047	3,004	3,221	3,068	3,064	n.p.	n.p.	3,123
Cost per patient day	856	803	851	907	820	820	n.p.	n.p.	840
Cost per casemix-adjusted sep.	3,102	3,143	2,875	3,080	2,950	3,009	n.p.	n.p.	3,075
Large major cities (>10,000 acute weighted separations)									
Number of hospitals	13	2	3	0	3	0	1	0	22
Average beds per hospital	154	79	162	n.a.	201	n.a.	162	n.a.	155
Separations per hospital	13,813	13,226	15,009	n.a.	17,961	n.a.	13,003	n.a.	14,452
AR-DRGs (5+) per hospital ^(b)	305	110	294	n.a.	336	n.a.	307	n.a.	290
Total expenditure (\$'000) ^(c)	674,293	132,975	142,920	n.a.	198,625	n.a.	n.p.	n.a.	1,216,794
Average cost weight ^(d)	1.01	0.93	1.01	n.a.	1.05	n.a.	1.14	n.a.	1.01
Relative stay index ^(e)	0.96	0.85	0.88	n.a.	0.90	n.a.	n.p.	n.a.	0.93
Cost per separation	2,655	2,818	2,257	n.a.	2,947	n.a.	n.p.	n.a.	2,709
Cost per patient day	708	1,296	713	n.a.	733	n.a.	n.p.	n.a.	758
Cost per casemix-adjusted sep.	2,734	3,266	2,249	n.a.	2,999	n.a.	n.p.	n.a.	2,778
Large regional (>8,000 acute weighted separations) & remote (>5,000 acute weighted separations)									
Number of hospitals	7	5	5	1	0	1	0	1	20
Average beds per hospital	148	130	143	105	n.a.	131	n.a.	153	139
Separations per hospital	13,033	13,628	15,089	9,949	n.a.	7,856	n.a.	21,561	13,709
AR-DRGs (5+) per hospital ^(b)	336	296	296	287	n.a.	277	n.a.	310	309
Total expenditure (\$'000) ^(c)	352,867	217,153	206,036	34,965	n.a.	n.p.	n.a.	n.p.	922,175
Average cost weight ^(d)	1.04	0.86	0.83	1.03	n.a.	1.25	n.a.	0.70	0.92
Relative stay index ^(e)	0.98	0.95	0.87	0.88	n.a.	n.p.	n.a.	n.p.	0.95
Cost per separation	2,932	2,369	1,961	2,517	n.a.	n.p.	n.a.	n.p.	2,512
Cost per patient day	809	762	701	860	n.a.	n.p.	n.a.	n.p.	785
Cost per casemix-adjusted sep.	2,930	2,811	2,374	2,498	n.a.	n.p.	n.a.	n.p.	2,800
Total Large hospitals									
Number of hospitals	20	7	8	1	3	1	1	1	42
Average beds per hospital	152	115	150	105	201	131	162	153	147
Separations per hospital	13,540	13,513	15,059	9,949	17,961	7,856	13,003	21,561	14,098
AR-DRGs (5+) per hospital ^(b)	316	243	295	287	336	277	307	310	299
Total expenditure (\$'000) ^(c)	1,027,159	350,127	348,956	34,965	198,625	n.p.	n.p.	n.p.	2,138,969
Average cost weight ^(d)	1.02	0.88	0.90	1.03	1.05	1.25	1.14	0.70	0.97
Relative stay index ^(e)	0.97	0.92	0.88	0.88	0.90	n.p.	n.p.	n.p.	0.94
Cost per separation	2,748	2,494	2,071	2,517	2,947	n.p.	n.p.	n.p.	2,618
Cost per patient day	741	876	706	860	733	n.p.	n.p.	n.p.	770
Cost per casemix-adjusted sep.	2,802	2,923	2,327	2,498	2,999	n.p.	n.p.	n.p.	2,788

(continued)

Table 4.3 (continued): Cost per casemix-adjusted separation and selected other statistics, by public hospital peer group^(a), states and territories, 2001–02

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Medium (major cities 5,000 to 10,000 and regional 5,000 to 8,000 acute weighted separations)									
Number of hospitals	12	6	1	8	4	0	0	0	31
Average beds per hospital	79	74	99	135	74	n.a.	n.a.	n.a.	93
Separations per hospital	6,675	7,550	6,413	9,378	8,472	n.a.	n.a.	n.a.	7,765
AR-DRGs (5+) per hospital ^(b)	204	218	224	211	224	n.a.	n.a.	n.a.	212
Total expenditure (\$'000) ^(c)	330,048	148,018	19,920	269,173	98,649	n.a.	n.a.	n.a.	865,808
Average cost weight ^(d)	1.05	0.82	0.92	0.82	0.81	n.a.	n.a.	n.a.	0.90
Relative stay index ^(e)	0.97	0.94	0.98	1.04	1.01	n.a.	n.a.	n.a.	0.99
Cost per separation	2,922	2,387	2,221	2,838	2,331	n.a.	n.a.	n.a.	2,693
Cost per patient day	821	816	640	754	826	n.a.	n.a.	n.a.	793
Cost per casemix-adjusted sep.	2,916	2,982	2,427	3,535	2,950	n.a.	n.a.	n.a.	3,092
Medium (major cities and regional 2,000 acute or acute weighted to 5,000 acute weighted separations)									
Number of hospitals	28	15	16	4	9	0	0	0	72
Average beds per hospital	44	46	57	47	50	n.a.	n.a.	n.a.	48
Separations per hospital	3,370	3,568	3,337	3,310	3,452	n.a.	n.a.	n.a.	3,411
AR-DRGs (5+) per hospital ^(b)	139	130	135	127	149	n.a.	n.a.	n.a.	137
Total expenditure (\$'000) ^(c)	309,050	152,908	141,568	40,419	73,741	n.a.	n.a.	n.a.	717,687
Average cost weight ^(d)	0.83	0.77	0.78	0.82	0.88	n.a.	n.a.	n.a.	0.81
Relative stay index ^(e)	1.01	1.03	0.95	1.03	0.96	n.a.	n.a.	n.a.	0.99
Cost per separation	2,338	2,206	1,680	2,598	2,055	n.a.	n.a.	n.a.	2,145
Cost per patient day	671	684	506	803	624	n.a.	n.a.	n.a.	639
Cost per casemix-adjusted sep.	2,908	2,932	2,206	3,301	2,438	n.a.	n.a.	n.a.	2,726
Total Medium hospitals									
Number of hospitals	40	21	17	12	13	0	0	0	103
Average beds per hospital	55	54	59	106	57	n.a.	n.a.	n.a.	62
Separations per hospital	4,362	4,706	3,518	7,355	4,996	n.a.	n.a.	n.a.	4,722
AR-DRGs (5+) per hospital ^(b)	158	155	140	183	172	n.a.	n.a.	n.a.	159
Total expenditure (\$'000) ^(c)	639,098	300,926	161,488	309,592	172,390	n.a.	n.a.	n.a.	1,583,495
Average cost weight ^(d)	0.93	0.80	0.80	0.82	0.84	n.a.	n.a.	n.a.	0.85
Relative stay index ^(e)	0.99	0.99	0.95	1.04	0.98	n.a.	n.a.	n.a.	0.99
Cost per separation	2,606	2,289	1,738	2,802	2,199	n.a.	n.a.	n.a.	2,416
Cost per patient day	741	741	521	760	721	n.a.	n.a.	n.a.	716
Cost per casemix-adjusted sep.	2,910	2,957	2,236	3,498	2,697	n.a.	n.a.	n.a.	2,919
Small regional acute (<2,000 acute and acute weighted separations less than 40% not acute or outlier patient days)									
Number of hospitals	34	19	18	6	8	2	0	0	87
Average beds per hospital	24	24	20	24	25	13	n.a.	n.a.	23
Separations per hospital	1,071	1,211	856	839	1,358	727	n.a.	n.a.	1,059
AR-DRGs (5+) per hospital ^(b)	60	59	47	46	80	42	n.a.	n.a.	57
Total expenditure (\$'000) ^(c)	129,471	76,516	41,581	16,349	21,466	4,940	n.a.	n.a.	290,324
Average cost weight ^(d)	0.86	0.81	0.78	0.77	0.85	0.81	n.a.	n.a.	0.83
Relative stay index ^(e)	1.06	1.08	0.95	1.01	1.01	1.04	n.a.	n.a.	1.04
Cost per separation	2,545	2,599	1,749	2,691	1,792	2,501	n.a.	n.a.	2,344
Cost per patient day	622	660	547	742	495	648	n.a.	n.a.	614
Cost per casemix-adjusted sep.	3,092	3,334	2,301	3,537	2,342	3,127	n.a.	n.a.	2,952
Remote acute (<5,000 acute weighted separations)									
Number of hospitals	2	0	20	14	7	0	0	3	47
Average beds per hospital	26	n.a.	24	23	24	n.a.	n.a.	37	24
Separations per hospital	1,200	n.a.	997	1,596	985	n.a.	n.a.	3,031	1,300
AR-DRGs (5+) per hospital ^(b)	66	n.a.	48	71	52	n.a.	n.a.	113	60
Total expenditure (\$'000) ^(c)	8,471	n.a.	86,371	94,274	20,729	n.a.	n.a.	34,539	247,188
Average cost weight ^(d)	0.7	n.a.	0.8	0.8	0.9	n.a.	n.a.	0.7	0.8
Relative stay index ^(e)	1.2	n.a.	1.0	1.0	1.0	n.a.	n.a.	1.2	1.0
Cost per separation	2,229	n.a.	2,384	2,716	2,508	n.a.	n.a.	2,730	2,573
Cost per patient day	700	n.a.	832	950	719	n.a.	n.a.	909	865
Cost per casemix-adjusted sep.	3,234	n.a.	3,202	3,467	2,843	n.a.	n.a.	3,836	3,348
Total Small acute hospitals									
Number of hospitals	36	19	38	20	15	3	0	3	134
Average beds per hospital	24	24	22	23	25	16	n.a.	37	24
Separations per hospital	1,078	1,211	930	1,369	1,184	633	n.a.	3,031	1,144
AR-DRGs (5+) per hospital ^(b)	60	59	48	64	67	34	n.a.	113	58
Total expenditure (\$'000) ^(c)	137,942	76,516	127,952	110,623	42,196	7,744	n.a.	34,539	537,512
Average cost weight ^(d)	0.85	0.81	0.76	0.79	0.88	0.80	n.a.	0.72	0.81
Relative stay index ^(e)	1.07	1.08	1.00	0.97	0.99	1.08	n.a.	1.17	1.03
Cost per separation	2,526	2,599	2,107	2,712	2,070	2,729	n.a.	2,730	2,435
Cost per patient day	626	660	700	904	580	705	n.a.	909	699
Cost per casemix-adjusted sep.	3,101	3,334	2,806	3,484	2,541	3,437	n.a.	3,836	3,110

(continued)

Table 4.3 (continued): Cost per casemix-adjusted separation and selected other statistics, by public hospital peer group^(a), states and territories, 2001–02

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Total hospitals in cost per casemix-adjusted separation analysis (Table 4.1)									
Number of hospitals	117	63	78	37	35	6	2	5	343
Average beds per hospital	118	173	107	105	98	157	330	112	124
Separations per hospital	10,268	16,849	8,547	8,622	9,599	12,678	30,818	12,696	11,037
AR-DRGs (5+) per hospital ^(b)	206	216	153	153	176	228	426	218	189
Total expenditure (\$'000) ^(c)	5,286,715	4,307,399	2,406,353	1,399,257	1,174,701	340,011	303,488	228,050	15,445,974
Average cost weight ^(d)	1.05	0.96	0.99	0.98	1.01	1.06	0.99	0.76	1.00
Relative stay index ^(e)	1.02	0.96	0.95	1.01	0.97	0.96	1.06	1.25	0.99
Cost per separation	3,021	2,918	2,675	3,040	2,828	3,227	3,629	2,783	2,926
Cost per patient day	807	800	792	863	776	848	1,044	857	810
Cost per casemix-adjusted sep.	3,010	3,117	2,741	3,180	2,898	3,118	3,769	3,709	3,017
Small non-acute (<2,000 acute and acute weighted separations more than 40% not acute or outlier patient days)									
Number of hospitals	36	11	30	6	24	4	0	0	111
Average beds per hospital	27	26	21	32	30	17	n.a.	n.a.	26
Separations per hospital	625	692	569	1,006	597	474	n.a.	n.a.	626
Total expenditure (\$'000)	109,083	48,283	61,051	33,299	53,284	8,308	n.a.	n.a.	313,308
Average length of stay	9.6	11.9	6.0	7.6	9.5	10.2	n.a.	n.a.	8.8
Multi-purpose service									
Number of hospitals	15	7	9	29	4	2	0	0	66
Average beds per hospital	22	14	22	16	35	5	n.a.	n.a.	19
Separations per hospital	299	841	660	337	800	98	n.a.	n.a.	446
Total expenditure (\$'000)	32,950	28,526	20,182	55,386	15,673	3,690	n.a.	n.a.	156,407
Average length of stay	5.1	3.7	4.6	4.4	6.2	11.5	n.a.	n.a.	4.6
Hospice									
Number of hospitals	3	0	0	0	0	0	0	0	4
Average beds per hospital	59	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	47
Separations per hospital	815	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	670
Total expenditure (\$'000)	38,859	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	39,463
Average length of stay	18.7	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	18.2
Rehabilitation									
Number of hospitals	5	0	0	0	1	0	0	0	6
Average beds per hospital	41	n.a.	n.a.	n.a.	146	n.a.	n.a.	n.a.	58
Separations per hospital	475	n.a.	n.a.	n.a.	1,043	n.a.	n.a.	n.a.	570
Total expenditure (\$'000)	73,015	n.a.	n.a.	n.a.	n.p.	n.a.	n.a.	n.a.	96,450
Average length of stay	26.0	n.a.	n.a.	n.a.	n.p.	n.a.	n.a.	n.a.	31.6
Mothercraft									
Number of hospitals	2	3	1	0	1	0	1	0	8
Average beds per hospital	34	26	40	n.a.	10	n.a.	10	n.a.	26
Separations per hospital	1,908	2,855	1,865	n.a.	903	n.a.	.	n.a.	1,894
Total expenditure (\$'000)	6,949	8,642	n.p.	n.a.	n.p.	n.a.	n.p.	n.a.	20,831
Average length of stay	4.7	2.6	n.p.	n.a.	n.p.	n.a.	n.p.	n.a.	3.3
Other non-acute									
Number of hospitals	13	2	0	0	0	0	0	0	16
Average beds per hospital	38	71	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	52
Separations per hospital	687	1,046	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	1,552
Total expenditure (\$'000)	94,577	26,396	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	165,412
Average length of stay	17.2	22.7	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	10.5
Total Non-acute									
Number of hospitals	74	23	40	36	30	7	1	0	211
Average beds per hospital	30	26	22	23	34	13	10	n.a.	27
Separations per hospital	602	1,050	622	823	649	332	.	n.a.	687
Total expenditure (\$'000)	355,433	111,848	84,273	133,124	92,967	12,601	n.p.	n.a.	791,871
Average length of stay	11.6	7.5	5.5	5.0	10.5	10.6	n.p.	n.a.	8.4

(continued)

Table 4.3 (continued): Cost per casemix-adjusted separation and selected other statistics, by public hospital peer group^(a), states and territories, 2001–02

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Psychiatric^(f)									
Number of hospitals	9	1	4	1	1	3	0	0	19
Average beds per hospital	119	95	126	257	486	13	n.a.	n.a.	129
Separations per hospital	1,363	393	115	2,170	2,836	63	n.a.	n.a.	964
Total expenditure (\$'000)	182,302	24,598	79,890	n.p.	n.p.	11,385	n.a.	n.a.	423,963
Average length of stay	61.5	67.0	413.4	n.p.	n.p.	168.6	n.a.	n.a.	64.2
Unpeered and other acute (includes hospitals with fewer than 200 separations)									
Number of hospitals	17	6	57	12	9	9	0	0	110
Average beds per hospital	12	7	3	14	12	4	n.a.	n.a.	7
Separations per hospital	113	637	47	163	451	69	n.a.	n.a.	137
Total expenditure (\$'000)	32,405	74,177	37,033	22,609	10,748	8,290	n.a.	n.a.	185,262
Cost per separation	14,121	2,078	2,719	8,279	1,660	7,620	n.a.	n.a.	4,654
Cost per patient day	535	599	478	908	232	717	n.a.	n.a.	528
Total									
Number of hospitals	217	93	179	86	75	25	3	5	683
Average beds per hospital	80	125	55	60	67	44	223	112	75
Hospital numbers reported in Table 2.2									
Separations per hospital	5,807	11,719	3,881	4,102	4,831	3,168	20,545	12,696	5,804
Total expenditure (\$'000)	5,856,856	4,518,022	2,607,549	1,605,649	1,353,545	372,287	305,113	228,050	16,847,070
Cost per separation	3,231	2,953	2,776	3,201	3,074	3,366	3,629	2,783	3,059
Cost per patient day	699	786	744	829	714	756	1044	857	749
Teaching hospitals (excluding psychiatric)									
Number of hospitals	17	14	10	6	6	3	2	2	60
Average beds per hospital	390	542	355	414	358	298	330	225	407
Separations per hospital	36,384	55,836	29,502	34,903	39,464	24,724	30,818	27,195	38,861
AR-DRGs (5+) per hospital ^(b)	446	439	327	331	427	422	426	374	407
Total expenditure (\$'000)	3,108,945	3,338,479	1,289,959	1,039,174	906,700	332,267	303,488	193,511	10,512,523
Average cost weight ^(c)	1.12	0.99	1.11	1.04	1.06	1.07	0.99	0.76	1.05
Relative stay index ^(d)	1.06	0.96	0.97	1.04	0.97	0.95	1.06	1.27	1.00
Cost per separation	3,324	3,072	3,422	3,356	3,095	3,240	3,629	2,792	3,224
Cost per patient day	876	826	941	858	810	852	1,044	849	862
Cost per casemix-adjusted sep.	3,137	3,163	3,122	3,297	3,008	3,112	3,769	3,689	3,166

(a) The data are based on hospital establishments for which expenditure data were provided, including networks of hospitals in some jurisdictions. Some small hospitals with incomplete expenditure data were not included. See Appendix 3 for further information.

(b) The number of different AR-DRGs provided by a hospital for which there were at least 5 acute separations.

(c) Expenditure data exclude depreciation.

(d) Average cost weight from the National Hospital Morbidity Database, based on acute and unspecified separations and newborn episodes of care with qualified days, using the 2000–01 AR-DRG v 4.1 cost weights (DHA 2002). Updated versions of this table based on 2001–02 AR-DRG v 4.2 cost weights will be provided on the internet when available.

(e) Relative stay index based on public hospitals using the indirect method. The indirectly standardised relative stay index is not technically comparable between cells but is a comparison of the hospital group with the national average of public hospitals based on the casemix of that group. See Appendix 3 for details on the methodology.

(f) Psychiatric hospitals consist of a mix of short-term acute, long-term, psychogeriatric and forensic psychiatric hospitals.

n.p. not published.

. . not available

n.a. not applicable.

Table 4.4: Average salary (\$) of full-time equivalent staff, ^(a) public acute and psychiatric hospitals, states and territories, 2001–02

Staffing category	NSW ^(b)	Vic ^(c)	Qld	WA	SA ^(b)	Tas ^(d)	ACT	NT	Total ^(e)
Salaried medical officers	99,032	134,326	98,428	117,318	86,540	93,740	119,645	133,349	108,705
Nurses	54,348	61,912	52,672	57,620	51,599	52,615	52,489	64,915	56,104
Other personal care staff	n.a.	n.a.	34,541	26,961	n.a.	n.a.	39,797	38,731	35,631
Diagnostic & allied health professionals	51,018	50,895	52,873	49,732	41,790	56,481	48,567	73,822	50,512
Administrative & clerical staff	44,666	44,755	38,875	41,995	31,456	38,629	43,303	43,137	41,963
Domestic & other staff	34,668	39,150	35,173	37,553	22,867	46,862	35,498	43,075	35,454
Total staff	53,344	61,607	51,543	55,727	45,380	53,335	55,651	63,531	54,774

(a) Where average full-time equivalent (FTE) staff numbers were not available, staff numbers at 30 June 2001 were used.

(b) Other personal care staff are included in *Diagnostic & allied health professionals* and *Domestic & other staff*.

(c) FTEs may be slightly under-enumerated with a corresponding overstatement of average salaries.

(d) Data for six small hospitals not included. Other personal care staff are included in *Domestic & other staff*.

(e) The totals for Other personal care staff, Diagnostic & allied health professionals and Domestic & other staff are affected by reporting arrangements noted above. n.a. not available.

Table 4.5: Number of hospitals and available beds^(a), by accreditation status, states and territories, public hospitals 2001–02, private hospitals 2000–01.

	NSW ^(b)	Vic ^(c)	Qld ^(d)	WA ^(e)	SA ^(f)	Tas	ACT ^(g)	NT ^(h)	Total
Public hospitals									
ACHS accredited hospitals	146	105	73	42	53	3	2	2	426
Other accredited hospitals	46	8	39	5	14	0	1	0	113
<i>Total accredited hospitals</i>	192	113	112	47	67	3	3	2	539
Non-accredited hospitals	26	31	69	42	13	23	0	3	207
Hospitals accredited (%)	88	78	62	53	84	12	100	40	72
<i>Total public hospitals</i>	218	144	181	89	80	26	3	5	746
ACHS accredited beds	14,729	11,073	7,774	3,247	4,366	895	660	357	43,101
Other accredited beds	1,701	174	906	1,162	327	0	10	0	4,280
<i>Total accredited beds</i>	16,430	11,247	8,680	4,409	4,693	895	670	357	47,381
Non-accredited beds	972	394	1,200	733	364	214	0	203	4,080
Beds accredited (%)	94	97	88	86	93	81	100	64	92
<i>Total available beds for admitted patients</i>	17,402	11,641	9,880	5,142	5,057	1,109	670	560	51,461
Private hospitals^{(a),(h)}									
Accredited hospitals	141	91	75	..	39	..	..	..	381
Non-accredited hospitals	43	45	15	..	14	..	..	..	135
Hospitals accredited (%)	77	67	83	..	74	..	..	..	74
<i>Total private hospitals</i>	184	136	90	41	53	12	..	..	516
Accredited beds	7,093	6,126	5,707	..	2,087	..	..	..	24,486
Non-accredited beds	503	457	250	..	157	..	..	..	1,667
Beds accredited (%)	93	93	96	..	93	..	..	..	94
<i>Total available beds for admitted patients</i>	7,596	6,583	5,957	2,926	2,244	847	..	..	26,153
Total									
Accredited hospitals	333	204	187	..	106	..	..	..	920
Non-accredited hospitals	69	76	84	..	27	..	..	..	342
Hospitals accredited (%)	83	73	69	..	80	..	..	..	73
<i>Total hospitals</i>	402	280	271	130	133	38	..	..	1,262
Accredited beds	23,523	17,373	14,387	..	6,780	..	..	..	71,867
Non-accredited beds	1,475	851	1,450	..	521	..	..	..	5,747
Beds accredited (%)	94	95	91	..	93	..	..	..	93
<i>Total available beds for admitted patients</i>	24,998	18,224	15,837	8,068	7,301	1,956	..	..	77,614

(a) Where average available beds for the year were not available, bed numbers at 30 June 2000 were used.

(b) All 46 of the *other accredited hospitals* were accredited by AQC.

(c) Of the *other accredited hospitals*, 2 were accredited using QIC and 6 were certified ISO9000 family compliant.

(d) All of the 39 *other accredited hospitals* were accredited using QIC.

(e) Of the *other accredited hospitals*, 1 was accredited using QIC and 4 were certified ISO9000 family compliant.

(f) All 14 of the *other accredited hospitals* were certified ISO9000 family compliant.

(g) One establishment was accredited by AQC. Private hospital data for Australian Capital Territory included with New South Wales.

(h) Private hospital data for the Northern Territory included with South Australia.

.. not available.

Note: Private hospital data are provided from the Australian Bureau of Statistics' Private Health Establishments Collection

Table 4.6: Separation statistics^(a) for selected procedures, by state or territory of usual residence, all hospitals, ^(b) 2001–02

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(c)
Appendicectomy									
Separations ^(d)	8,017	6,319	5,777	3,036	1,903	700	455	246	26,457
Separations not within state of residence (%)	3	1	2	1	1	1	4	4	
Separation rate ^(e)	1.22	1.31	1.57	1.56	1.28	1.50	1.36	1.11	1.36
Standardised separation rate ratio (SRR)	0.90	0.97	1.16	1.15	0.95	1.11	1.00	0.82	
95% confidence interval of SRR	0.88–0.92	0.95–0.99	1.13–1.19	1.11–1.19	0.91–0.99	1.03–1.19	0.91–1.09	0.72–0.92	
Coronary artery bypass graft									
Separations ^(d)	5,861	4,224	3,107	1,062	1,272	376	119	96	16,120
Separations not within state of residence (%)	7	1	1	1	2	6	18	100	
Separation rate ^(e)	0.86	0.85	0.88	0.60	0.76	0.73	0.47	0.82	0.82
Standardised separation rate ratio (SRR)	1.05	1.04	1.07	0.73	0.92	0.89	0.57	1.00	
95% confidence interval of SRR	1.02–1.08	1.01–1.07	1.03–1.11	0.69–0.77	0.87–0.97	0.8–0.98	0.47–0.67	0.8–1.2	
Coronary angioplasty									
Separations ^(d)	8,069	6,994	3,506	2,090	1,808	633	339	118	23,566
Separations not within state of residence (%)	10	1	1	1	1	2	5	100	
Separation rate ^(e)	1.19	1.42	0.98	1.16	1.08	1.24	1.27	0.88	1.20
Standardised separation rate ratio (SRR)	0.99	1.18	0.82	0.97	0.90	1.03	1.06	0.74	
95% confidence interval of SRR	0.97–1.01	1.15–1.21	0.79–0.85	0.93–1.01	0.86–0.94	0.95–1.11	0.95–1.17	0.61–0.87	
Caesarean section									
Separations ^(d)	20,771	14,531	13,911	7,089	5,077	1,169	885	683	64,124
Separations not within state of residence (%)	3	0	1	0	1	0	2	3	
Separation rate ^(e)	3.16	2.96	3.84	3.69	3.56	2.79	2.58	2.90	3.29
Standardised separation rate ratio (SRR)	0.96	0.90	1.17	1.12	1.08	0.85	0.78	0.88	
95% confidence interval of SRR	0.95–0.97	0.89–0.91	1.15–1.19	1.09–1.15	1.05–1.11	0.8–0.9	0.73–0.83	0.81–0.95	
In-hospital birth separations	83,059	55,063	48,318	24,355	17,365	5,007	3,914	2,793	239,918
In-hospital birth separation rate ^(e)	12.6	11.2	13.3	12.6	12.2	11.9	11.3	11.9	12.3
Separations per 100 in-hospital birth separations ^(f)	25.0	26.4	28.8	29.1	29.2	23.3	22.6	24.5	26.7
Cholecystectomy									
Separations ^(d)	15,357	11,349	8,951	4,218	4,028	1,013	671	209	45,808
Separations not within state of residence (%)	3	1	1	0	1	1	5	9	
Separation rate ^(e)	2.30	2.32	2.48	2.25	2.54	2.13	2.18	1.18	2.34
Standardised separation rate ratio (SRR)	0.98	0.99	1.06	0.96	1.09	0.91	0.93	0.51	
95% confidence interval of SRR	0.96–1	0.97–1.01	1.04–1.08	0.93–0.99	1.06–1.12	0.85–0.97	0.86–1	0.44–0.58	

(continued)

Table 4.6 (continued): Separation statistics^(a) for selected procedures, by state or territory of usual residence, all hospitals, ^(b) 2001–02

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(c)
Diagnostic gastrointestinal endoscopy									
Separations ^(d)	175,365	143,837	120,244	51,138	40,927	10,817	3,848	1,753	547,972
Separations not within state of residence (%)	3	1	1	0	0	1	5	10	
Separation rate ^(e)	26.13	29.34	33.44	27.62	25.27	21.78	13.51	11.86	27.94
Standardised separation rate ratio (SRR)	0.94	1.05	1.20	0.99	0.90	0.78	0.48	0.42	
95% confidence interval of SRR	0.94–0.94	1.04–1.06	1.19–1.21	0.98–1	0.89–0.91	0.77–0.79	0.46–0.5	0.4–0.44	
Hip replacement									
Separations ^(d)	8,704	6,995	4,005	2,514	2,507	808	372	58	25,965
Separations not within state of residence (%)	6	2	2	0	0	5	8	52	
Separation rate ^(e)	1.27	1.40	1.15	1.44	1.44	1.56	1.51	0.70	1.32
Standardised separation rate ratio (SRR)	0.96	1.06	0.87	1.09	1.09	1.18	1.15	0.53	
95% confidence interval of SRR	0.94–0.98	1.04–1.08	0.84–0.9	1.05–1.13	1.05–1.13	1.1–1.26	1.03–1.27	0.39–0.67	
Revision of hip replacement									
Separations ^(d)	1,117	839	525	318	294	105	49	11	3,258
Separations not within state of residence (%)	6	2	3	0	0	5	12	100	
Separation rate ^(e)	0.16	0.17	0.15	0.18	0.17	0.20	0.20	0.11	0.17
Proportion of Hip replacements	0.13	0.12	0.13	0.13	0.12	0.13	0.13	0.19	0.13
Standardised separation rate ratio (SRR)	0.99	1.01	0.91	1.10	1.01	1.22	1.21	0.66	
95% confidence interval of SRR	0.93–1.05	0.94–1.08	0.83–0.99	0.98–1.22	0.89–1.13	0.99–1.45	0.87–1.55	0.27–1.05	
Hysterectomy									
Separations ^(d)	10,809	7,328	6,811	4,144	3,334	1,057	636	121	34,244
Separations not within state of residence (%)	5	1	1	0	0	1	5	26	
Separation rate ^(e)	1.63	1.51	1.88	2.16	2.14	2.22	2.01	0.68	1.75
Standardised separation rate ratio (SRR)	0.93	0.86	1.07	1.23	1.22	1.27	1.15	0.39	
95% confidence interval of SRR	0.91–0.95	0.84–0.88	1.04–1.1	1.19–1.27	1.18–1.26	1.19–1.35	1.06–1.24	0.32–0.46	
Lens insertion									
Separations ^(d)	50,505	33,030	27,832	13,100	11,824	2,367	1,379	408	140,449
Separations not within state of residence (%)	3	1	2	0	0	1	4	11	
Separation rate ^(e)	7.33	6.59	8.05	7.71	6.65	4.54	6.03	5.20	7.15
Standardised separation rate ratio (SRR)	1.03	0.92	1.13	1.08	0.93	0.63	0.84	0.73	
95% confidence interval of SRR	1.02–1.04	0.91–0.93	1.12–1.14	1.06–1.1	0.91–0.95	0.6–0.66	0.8–0.88	0.66–0.8	

(continued)

Table 4.6 (continued): Separation statistics^(a) for selected procedures, by state or territory of usual residence, all hospitals, ^(b) 2001–02

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(c)
Myringotomy									
Separations ^(d)	9,041	9,069	5,232	4,330	4,449	528	398	106	33,154
Separations not within state of residence (%)	5	1	1	0	0	0	6	8	
Separation rate ^(e)	1.37	1.93	1.40	2.26	3.14	1.11	1.28	0.48	1.71
Standardised separation rate ratio (SRR)	0.80	1.13	0.82	1.32	1.84	0.65	0.75	0.28	
95% confidence interval of SRR	0.78–0.82	1.11–1.15	0.8–0.84	1.28–1.36	1.79–1.89	0.59–0.71	0.68–0.82	0.23–0.33	
Knee replacement									
Separations ^(d)	9,597	5,181	4,331	2,218	2,404	481	372	54	24,639
Separations not within state of residence (%)	6	1	2	0	0	3	6	70	
Separation rate ^(e)	1.40	1.04	1.24	1.27	1.40	0.93	1.45	0.50	1.26
Standardised separation rate ratio (SRR)	1.12	0.83	0.99	1.01	1.12	0.74	1.16	0.40	
95% confidence interval of SRR	1.1–1.14	0.81–0.85	0.96–1.02	0.97–1.05	1.08–1.16	0.67–0.81	1.04–1.28	0.29–0.51	
Prostatectomy									
Separations ^(d)	7,985	7,272	3,737	1,934	2,080	583	273	59	23,924
Separations not within state of residence (%)	5	1	1	0	0	0	7	25	
Separation rate ^(e)	1.17	1.46	1.07	1.11	1.20	1.12	1.12	0.68	1.22
Standardised separation rate ratio (SRR)	0.96	1.20	0.88	0.91	0.99	0.92	0.92	0.56	
95% confidence interval of SRR	0.94–0.98	1.17–1.23	0.85–0.91	0.87–0.95	0.95–1.03	0.85–0.99	0.81–1.03	0.42–0.7	
Arthroscopic procedures (includes arthroscopies)									
Separations ^(d)	33,159	29,353	17,796	13,526	13,650	2,294	1,612	722	112,120
Separations not within state of residence (%)	4	2	1	0	0	3	9	55	
Separation rate ^(e)	5.00	6.03	4.88	7.13	8.83	4.87	5.05	3.89	5.73
Standardised separation rate ratio (SRR)	0.87	1.05	0.85	1.24	1.54	0.85	0.88	0.68	
95% confidence interval of SRR	0.86–0.88	1.04–1.06	0.84–0.86	1.22–1.26	1.51–1.57	0.82–0.88	0.84–0.92	0.63–0.73	
Tonsillectomy									
Separations ^(d)	10,543	8,608	6,481	3,912	3,413	462	324	81	33,828
Separations not within state of residence (%)	5	1	1	0	0	0	6	22	
Separation rate ^(e)	1.61	1.82	1.73	2.01	2.39	0.99	0.98	0.36	1.74
Standardised separation rate ratio (SRR)	0.93	1.04	0.99	1.16	1.37	0.57	0.56	0.21	
95% confidence interval of SRR	0.91–0.95	1.02–1.06	0.97–1.01	1.12–1.2	1.32–1.42	0.52–0.62	0.5–0.62	0.16–0.26	

(a) The procedures and diagnoses are defined using ICD-10-AM codes in Appendix 3.

(b) Some private hospitals are not included. See Appendix 4 for details.

(c) Excludes non-residents and Unknown state of residence.

(d) Excludes multiple procedures/diagnosis for the same separation within the same group.

(e) Rate per 1,000 population was directly age-standardised to the Australian population at 30 June 2001 using December 2001 population estimates as divisors.

(f) Caesarian sections divided by separations for which in-hospital birth was reported. This is an approximate measure of the proportion of all births that are by Caesarian section, as births out of hospital are not included.

Table 4.7: Separation statistics^(a) for selected procedures, by Remoteness Area of usual residence, all hospitals, ^(b) Australia, 2001–02

	Major cities	Inner regional	Outer regional	Remote	Very remote	Australia ^(c)
Appendicectomy						
Separations ^(d)	16,610	5,953	3,073	544	256	26,457
Separation rate ^(e)	0.72	0.85	0.87	0.93	0.77	0.77
Standardised separation rate ratio (SRR)	0.94	1.11	1.14	1.21	1.00	
95% confidence interval of SRR	0.93–0.95	1.08–1.14	1.1–1.18	1.11–1.31	0.88–1.12	
Coronary artery bypass graft						
Separations ^(d)	10,562	3,670	1,607	196	65	16,120
Separation rate ^(e)	0.47	0.47	0.43	0.40	0.33	0.47
Standardised separation rate ratio (SRR)	1.01	1.00	0.93	0.86	0.71	
95% confidence interval of SRR	0.99–1.03	0.97–1.03	0.88–0.98	0.74–0.98	0.54–0.88	
Coronary angioplasty						
Separations ^(d)	16,198	4,788	2,179	277	91	23,566
Separation rate ^(e)	0.72	0.62	0.59	0.56	0.41	0.68
Standardised separation rate ratio (SRR)	1.06	0.90	0.86	0.82	0.61	
95% confidence interval of SRR	1.04–1.08	0.87–0.93	0.82–0.9	0.72–0.92	0.48–0.74	
Caesarean section						
Separations ^(d)	43,453	12,248	6,308	1,223	875	64,124
Separation rate ^(e)	1.81	2.00	1.96	2.06	2.41	1.86
Standardised separation rate ratio (SRR)	0.97	1.08	1.05	1.11	1.30	
95% confidence interval of SRR	0.96–0.98	1.06–1.1	1.02–1.08	1.05–1.17	1.21–1.39	
In-hospital birth separations	158,244	48,317	25,084	4,847	3,364	239,918
In-hospital birth separation rate ^(e)	6.5	7.9	7.8	8.3	9.2	6.9
Separations per 100 in-hospital birth separations ^(f)	27.5	25.3	25.1	25.2	26.0	26.7
Cholecystectomy						
Separations ^(d)	29,830	10,149	4,808	657	301	45,808
Separation rate ^(e)	1.30	1.40	1.35	1.23	1.14	1.33
Standardised separation rate ratio (SRR)	0.98	1.06	1.02	0.92	0.86	
95% confidence interval of SRR	0.97–0.99	1.04–1.08	0.99–1.05	0.85–0.99	0.76–0.96	
Diagnostic gastrointestinal endoscopy						
Separations ^(d)	374,507	114,399	49,972	6,119	2,309	547,972
Separation rate ^(e)	16.49	15.27	13.76	11.90	9.86	15.85
Standardised separation rate ratio (SRR)	1.04	0.96	0.87	0.75	0.62	
95% confidence interval of SRR	1.04–1.04	0.95–0.97	0.86–0.88	0.73–0.77	0.59–0.65	

(continued)

Table 4.7 (continued): Separation statistics^(a) for selected procedures, by Remoteness Area of usual residence, all hospitals, ^(b) Australia, 2001–02

	Major cities	Inner regional	Outer regional	Remote	Very remote	Australia ^(c)
Hip replacement						
Separations ^(d)	16,189	6,437	2,875	331	87	25,965
Separation rate ^(e)	0.72	0.82	0.80	0.78	0.49	0.75
Standardised separation rate ratio (SRR)	0.96	1.09	1.06	1.04	0.65	
95% confidence interval of SRR	0.95–0.97	1.06–1.12	1.02–1.1	0.93–1.15	0.51–0.79	
Revision of hip replacement						
Separations ^(d)	1,989	855	365	36	8	3,258
Separation rate ^(e)	0.09	0.11	0.10	0.08	0.04	0.09
Standardised separation rate ratio (SRR)	0.94	1.16	1.07	0.87	0.46	
95% confidence interval of SRR	0.9–0.98	1.08–1.24	0.96–1.18	0.59–1.15	0.14–0.78	
Hysterectomy						
Separations ^(d)	21,331	8,210	3,939	521	195	34,244
Separation rate ^(e)	0.94	1.14	1.09	0.93	0.72	0.99
Standardised separation rate ratio (SRR)	0.95	1.15	1.10	0.94	0.73	
95% confidence interval of SRR	0.94–0.96	1.13–1.17	1.07–1.13	0.86–1.02	0.63–0.83	
Lens insertion						
Separations ^(d)	91,636	30,667	15,513	1,610	676	140,449
Separation rate ^(e)	4.06	3.88	4.35	4.06	4.27	4.06
Standardised separation rate ratio (SRR)	1.00	0.96	1.07	1.00	1.05	
95% confidence interval of SRR	0.99–1.01	0.95–0.97	1.05–1.09	0.95–1.05	0.97–1.13	
Tonsillectomy						
Separations ^(d)	21,591	8,098	3,351	539	212	33,828
Separation rate ^(e)	0.96	1.12	0.91	0.84	0.52	0.98
Standardised separation rate ratio (SRR)	0.98	1.14	0.93	0.86	0.53	
95% confidence interval of SRR	0.97–0.99	1.12–1.16	0.9–0.96	0.79–0.93	0.46–0.6	
Myringotomy						
Separations ^(d)	22,704	6,830	2,840	546	219	33,154
Separation rate ^(e)	1.03	0.92	0.74	0.80	0.51	0.96
Standardised separation rate ratio (SRR)	1.07	0.96	0.77	0.83	0.53	
95% confidence interval of SRR	1.06–1.08	0.94–0.98	0.74–0.8	0.76–0.9	0.46–0.6	

(continued)

Table 4.7 (continued): Separation statistics^(a) for selected procedures, by Remoteness Area of usual residence, all hospitals, ^(b) Australia, 2001–02

	Major cities	Inner regional	Outer regional	Remote	Very remote	Australia ^(c)
Knee replacement						
Separations ^(d)	14,937	6,519	2,728	327	81	24,639
Separation rate ^(e)	0.67	0.82	0.74	0.74	0.48	0.71
Standardised separation rate ratio (SRR)	0.94	1.15	1.04	1.03	0.67	
95% confidence interval of SRR	0.92–0.96	1.12–1.18	1–1.08	0.92–1.14	0.52–0.82	
Prostatectomy						
Separations ^(d)	15,433	5,584	2,532	271	79	23,924
Separation rate ^(e)	0.69	0.70	0.69	0.64	0.50	0.69
Standardised separation rate ratio (SRR)	1.00	1.02	1.00	0.93	0.73	
95% confidence interval of SRR	0.98–1.02	0.99–1.05	0.96–1.04	0.82–1.04	0.57–0.89	
Arthroscopic procedures (includes arthroscopies)						
Separations ^(d)	71,277	25,557	12,293	2,147	656	112,120
Separation rate ^(e)	3.10	3.59	3.47	3.85	2.28	3.24
Standardised separation rate ratio (SRR)	0.96	1.11	1.07	1.19	0.70	
95% confidence interval of SRR	0.95–0.97	1.1–1.12	1.05–1.09	1.14–1.24	0.65–0.75	

(a) The procedures and separations are defined using ICD-10-AM codes in Appendix 3.

(b) Some private hospitals are not included. See Appendix 4 for details.

(c) Includes Unknown Remoteness Area. Excludes non-residents.

(d) Excludes multiple procedures or diagnosis in the same separation within the same group.

(e) Rate per 1,000 population was directly age-standardised to the Australian population at 30 June 2001.

(f) Caesarian sections divided by separations for which in-hospital birth was reported. This is an approximate measure of the proportion of all births that are by Caesarian section, as births out of hospital are not included.

Table 4.8: Separation statistics^(a) for potentially preventable hospitalisations, by state or territory of usual residence, all hospitals, 2001–02

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(b)
Vaccine-preventable conditions									
Total vaccine-preventable conditions									
Separations ^(c)	5,816	3,222	3,157	2,001	1,457	378	131	379	16,545
Separations not within state of residence (%)	3	2	2	2	1	1	6	7	
Separation rate ^(d)	0.86	0.65	0.87	1.07	0.92	0.77	0.48	2.00	0.84
Standardised separation rate ratio (SRR)	1.03	0.78	1.04	1.28	1.10	0.91	0.58	2.38	
95% confidence interval of SRR	1–1.05	0.75–0.8	1–1.07	1.22–1.33	1.04–1.16	0.82–1	0.48–0.67	2.14–2.62	
Acute conditions									
Cellulitis									
Separations ^(c)	9,451	6,667	5,798	2,416	1,959	572	270	530	27,674
Separations not within state of residence (%)	2	2	2	2	1	3	8	7	
Separation rate ^(d)	1.40	1.35	1.60	1.29	1.21	1.17	0.91	2.94	1.40
Standardised separation rate ratio (SRR)	1.00	0.96	1.14	0.92	0.86	0.83	0.65	2.09	
95% confidence interval of SRR	0.98–1.02	0.94–0.98	1.11–1.17	0.89–0.96	0.82–0.9	0.76–0.9	0.57–0.73	1.91–2.27	
Convulsions and epilepsy									
Separations ^(c)	11,146	7,298	5,901	2,778	2,153	759	355	539	30,963
Separations not within state of residence (%)	2	1	3	2	1	8	3	18	
Separation rate ^(d)	1.67	1.50	1.60	1.46	1.43	1.61	1.14	2.62	1.58
Standardised separation rate ratio (SRR)	1.06	0.95	1.01	0.92	0.91	1.02	0.72	1.66	
95% confidence interval of SRR	1.04–1.08	0.93–0.97	0.99–1.04	0.89–0.96	0.87–0.95	0.95–1.09	0.65–0.8	1.52–1.8	
Dehydration and gastroenteritis									
Separations ^(c)	11,758	9,760	8,277	3,443	3,111	865	267	165	37,654
Separations not within state of residence (%)	3	1	1	1	1	2	8	11	
Separation rate ^(d)	1.74	1.97	2.30	1.85	1.93	1.77	0.95	1.28	1.91
Standardised separation rate ratio (SRR)	0.91	1.03	1.20	0.97	1.01	0.93	0.50	0.67	
95% confidence interval of SRR	0.9–0.93	1.01–1.05	1.18–1.23	0.94–1	0.98–1.05	0.87–0.99	0.44–0.56	0.57–0.77	
Dental conditions									
Separations ^(c)	10,725	12,223	9,102	5,623	3,831	771	408	337	43,039
Separations not within state of residence (%)	3	2	1	1	0	0	5	2	
Separation rate ^(d)	1.62	2.54	2.44	2.91	2.56	1.64	1.32	1.52	2.20
Standardised separation rate ratio (SRR)	0.74	1.16	1.11	1.33	1.17	0.75	0.60	0.69	
95% confidence interval of SRR	0.72–0.75	1.14–1.18	1.09–1.14	1.29–1.36	1.13–1.2	0.69–0.8	0.54–0.66	0.62–0.76	
Ear, nose and throat infections									
Separations ^(c)	10,634	6,653	6,829	3,550	3,046	563	342	374	31,995
Separations not within state of residence (%)	3	2	1	1	1	1	4	7	
Separation rate ^(d)	1.61	1.39	1.83	1.84	2.11	1.20	1.07	1.60	1.64
Standardised separation rate ratio (SRR)	0.98	0.85	1.12	1.13	1.29	0.73	0.65	0.98	
95% confidence interval of SRR	0.96–1	0.83–0.87	1.09–1.14	1.09–1.16	1.24–1.33	0.67–0.79	0.58–0.72	0.88–1.08	

(continued)

Table 4.8 (continued): Separation statistics ^(a) for potentially preventable hospitalisations, by state or territory of usual residence, all hospitals, 2001–02

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(b)
Total acute conditions									
Separations ^(c)	78,585	61,719	51,211	25,519	20,071	5,194	2,637	2,709	247,732
Separations not within state of residence (%)	3	1	2	1	1	2	5	7	
Separation rate ^(d)	11.74	12.63	13.99	13.49	12.98	10.83	8.66	14.47	12.60
Standardised separation rate ratio (SRR)	0.93	1.00	1.11	1.07	1.03	0.86	0.69	1.15	
95% confidence interval of SRR	0.92–0.94	0.99–1.01	1.1–1.12	1.06–1.08	1.02–1.04	0.84–0.88	0.66–0.71	1.1–1.19	
Chronic conditions									
Angina									
Separations ^(c)	17,051	12,254	11,132	3,451	3,777	1,327	491	387	49,878
Separations not within state of residence (%)	3	2	2	2	1	1	2	5	
Separation rate ^(d)	2.49	2.45	3.13	1.96	2.17	2.55	1.99	3.02	2.52
Standardised separation rate ratio (SRR)	0.99	0.97	1.24	0.78	0.86	1.01	0.79	1.20	
95% confidence interval of SRR	0.97–1	0.96–0.99	1.22–1.27	0.75–0.8	0.83–0.89	0.96–1.07	0.72–0.86	1.08–1.32	
Asthma									
Separations ^(c)	14,302	9,376	6,814	4,227	4,775	655	356	407	40,918
Separations not within state of residence (%)	2	2	2	1	1	2	4	9	
Separation rate ^(d)	2.15	1.94	1.84	2.20	3.25	1.37	1.14	1.90	2.09
Standardised separation rate ratio (SRR)	1.03	0.93	0.88	1.05	1.56	0.66	0.54	0.91	
95% confidence interval of SRR	1.01–1.05	0.91–0.95	0.86–0.9	1.02–1.09	1.51–1.6	0.61–0.71	0.49–0.6	0.82–1	
Chronic obstructive pulmonary disease									
Separations ^(c)	19,408	12,850	10,619	4,707	4,710	1,504	448	606	54,856
Separations not within state of residence (%)	2	1	1	1	1	3	4	5	
Separation rate ^(d)	2.81	2.56	3.00	2.71	2.70	2.89	1.90	5.60	2.77
Standardised separation rate ratio (SRR)	1.01	0.92	1.08	0.98	0.97	1.04	0.69	2.02	
95% confidence interval of SRR	1–1.03	0.91–0.94	1.06–1.1	0.95–1.01	0.95–1	0.99–1.09	0.62–0.75	1.86–2.18	
Congestive cardiac failure									
Separations ^(c)	14,665	11,902	7,797	3,514	4,026	971	377	272	43,534
Separations not within state of residence (%)	2	1	1	1	0	2	2	4	
Separation rate ^(d)	2.11	2.34	2.24	2.04	2.22	1.84	1.68	2.42	2.19
Standardised separation rate ratio (SRR)	0.96	1.07	1.02	0.93	1.01	0.84	0.76	1.10	
95% confidence interval of SRR	0.95–0.98	1.05–1.09	1–1.05	0.9–0.96	0.98–1.04	0.79–0.89	0.69–0.84	0.97–1.23	
Diabetes complications									
Separations ^(c)	37,283	44,081	25,243	15,281	11,653	6,283	1,311	1,834	142,992
Separations not within state of residence (%)	6	1	1	1	0	1	10	5	
Separation rate ^(d)	5.44	8.83	7.05	8.46	6.87	12.51	5.27	14.69	7.24
Standardised separation rate ratio (SRR)	0.75	1.22	0.97	1.17	0.95	1.73	0.73	2.03	
95% confidence interval of SRR	0.74–0.76	1.21–1.23	0.96–0.99	1.15–1.19	0.93–0.97	1.69–1.77	0.69–0.77	1.94–2.12	

(continued)

Table 4.8 (continued): Separation statistics ^(a) for potentially preventable hospitalisations, by state or territory of usual residence, all hospitals, 2001–02

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(b)
Hypertension									
Separations ^(c)	2,441	1,406	1,351	516	540	158	27	29	6,469
Separations not within state of residence (%)	3	2	1	2	0	1	0	17	
Separation rate ^(d)	0.36	0.28	0.38	0.29	0.32	0.31	0.11	0.21	0.33
Standardised separation rate ratio (SRR)	1.09	0.86	1.16	0.88	0.97	0.93	0.33	0.63	
95% confidence interval of SRR	1.05–1.13	0.82–0.91	1.1–1.23	0.8–0.96	0.89–1.05	0.79–1.08	0.2–0.45	0.4–0.86	
Total chronic conditions									
Separations ^(c)	106,247	93,262	63,813	32,747	29,934	11,034	3,071	3,491	343,649
Separations not within state of residence (%)	3	1	1	1	1	1	7	5	
Separation rate ^(d)	15.53	18.70	17.89	18.23	17.81	21.75	12.28	27.40	17.39
Standardised separation rate ratio (SRR)	0.89	1.07	1.03	1.05	1.02	1.25	0.71	1.58	
95% confidence interval of SRR	0.89–0.9	1.07–1.08	1.02–1.04	1.04–1.06	1.01–1.04	1.23–1.27	0.68–0.73	1.52–1.63	
Total potentially preventable hospitalisations									
Separations ^(c)	188,348	156,295	116,847	59,567	50,942	16,397	5,783	6,440	600,759
Separations not within state of residence (%)	3	1	1	1	1	2	6	6	
Separation rate ^(d)	27.79	31.59	32.37	32.40	31.41	32.94	21.21	42.75	30.48
Standardised separation rate ratio (SRR)	0.91	1.04	1.06	1.06	1.03	1.08	0.70	1.40	
95% confidence interval of SRR	0.91–0.92	1.03–1.04	1.06–1.07	1.05–1.07	1.02–1.04	1.06–1.1	0.68–0.71	1.37–1.44	

(a) These conditions are defined using ICD-10-AM codes in Appendix 3.

(b) Excludes non-residents and Unknown state of residence.

(c) Excludes multiple procedures and diagnoses for the same separation within the same group.

(d) Rate per 1,000 population was directly age-standardised to the Australian population at 30 June 2001 using December 2001 population estimates as divisors

Table 4.9: Separation statistics^(a) for potentially preventable hospitalisations, by Remoteness Area of usual residence, all hospitals, 2001–02

	Major cities	Inner regional	Outer regional	Remote	Very remote	Total ^(b)
Vaccine-preventable conditions						
Total vaccine-preventable						
Separations ^(c)	9,574	3,718	2,087	603	519	16,545
Separation rate ^(d)	0.73	0.92	1.12	1.98	3.27	0.84
Standardised separation rate ratio (SRR)	0.87	1.10	1.33	2.36	3.89	
95% confidence interval of SRR	0.85–0.89	1.06–1.13	1.28–1.39	2.17–2.55	3.56–4.23	
Acute conditions						
Cellulitis						
Separations ^(c)	15,573	6,281	3,798	1,014	942	27,674
Separation rate ^(d)	1.19	1.58	2.05	3.41	5.99	1.40
Standardised separation rate ratio (SRR)	0.85	1.13	1.46	2.44	4.28	
95% confidence interval of SRR	0.84–0.86	1.1–1.16	1.42–1.51	2.29–2.59	4.01–4.55	
Convulsions and epilepsy						
Separations ^(c)	18,595	6,432	4,002	1,025	799	30,963
Separation rate ^(d)	1.42	1.66	2.13	3.03	4.48	1.58
Standardised separation rate ratio (SRR)	0.90	1.05	1.35	1.92	2.84	
95% confidence interval of SRR	0.89–0.91	1.02–1.08	1.31–1.39	1.8–2.04	2.64–3.03	
Dehydration and gastroenteritis						
Separations ^(c)	22,865	8,590	4,850	871	433	37,654
Separation rate ^(d)	1.73	2.20	2.69	3.15	3.20	1.91
Standardised separation rate ratio (SRR)	0.91	1.15	1.41	1.65	1.68	
95% confidence interval of SRR	0.89–0.92	1.13–1.18	1.37–1.45	1.54–1.76	1.52–1.83	
Dental conditions						
Separations ^(c)	25,101	10,812	5,414	930	703	43,039
Separation rate ^(d)	1.93	2.78	2.84	2.63	3.40	2.20
Standardised separation rate ratio (SRR)	0.88	1.26	1.29	1.20	1.55	
95% confidence interval of SRR	0.87–0.89	1.24–1.29	1.26–1.33	1.12–1.27	1.43–1.66	
Ear, nose and throat infections						
Separations ^(c)	18,153	6,919	4,743	1,223	939	31,995
Separation rate ^(d)	1.40	1.77	2.48	3.54	4.47	1.64
Standardised separation rate ratio (SRR)	0.85	1.08	1.51	2.16	2.73	
95% confidence interval of SRR	0.84–0.87	1.05–1.1	1.47–1.56	2.04–2.28	2.55–2.9	
Total acute conditions						
Separations ^(c)	148,462	55,293	31,525	6,884	5,193	247,732
Separation rate ^(d)	11.31	14.14	16.99	22.21	31.31	12.60
Standardised separation rate ratio (SRR)	0.90	1.12	1.35	1.76	2.48	
95% confidence interval of SRR	0.89–0.9	1.11–1.13	1.33–1.36	1.72–1.8	2.42–2.55	
Chronic conditions						
Angina						
Separations ^(c)	28,175	13,623	6,592	945	501	49,878
Separation rate ^(d)	2.17	3.22	3.48	3.66	4.50	2.52
Standardised separation rate ratio (SRR)	0.86	1.28	1.38	1.45	1.79	
95% confidence interval of SRR	0.85–0.87	1.26–1.3	1.35–1.41	1.36–1.54	1.63–1.94	

(continued)

Table 4.9 (continued): Separation statistics^(a) for potentially preventable hospitalisations, by Remoteness Area of usual residence, all hospitals, 2001–02

	Major cities	Inner regional	Outer regional	Remote	Very remote	Total ^(b)
Asthma						
Separations ^(c)	25,493	8,241	5,371	1,141	645	40,918
Separation rate ^(d)	1.96	2.09	2.83	3.53	3.95	2.09
Standardised separation rate ratio (SRR)	0.94	1.00	1.35	1.69	1.89	
95% confidence interval of SRR	0.93–0.95	0.98–1.02	1.32–1.39	1.59–1.79	1.74–2.04	
Chronic obstructive pulmonary disease						
Separations ^(c)	31,943	13,395	7,383	1,243	846	54,856
Separation rate ^(d)	2.47	3.12	3.89	4.98	8.08	2.77
Standardised separation rate ratio (SRR)	0.89	1.13	1.40	1.80	2.92	
95% confidence interval of SRR	0.88–0.9	1.11–1.15	1.37–1.44	1.7–1.9	2.72–3.11	
Congestive cardiac failure						
Separations ^(c)	26,231	10,436	5,549	810	479	43,534
Separation rate ^(d)	2.01	2.47	3.04	3.64	4.62	2.19
Standardised separation rate ratio (SRR)	0.92	1.13	1.39	1.66	2.11	
95% confidence interval of SRR	0.91–0.93	1.11–1.15	1.35–1.42	1.55–1.78	1.92–2.3	
Diabetes complications						
Separations ^(c)	84,745	35,104	17,544	3,289	2,180	142,992
Separation rate ^(d)	6.55	8.36	9.29	12.03	17.72	7.24
Standardised separation rate ratio (SRR)	0.90	1.15	1.28	1.66	2.45	
95% confidence interval of SRR	0.9–0.91	1.14–1.17	1.26–1.3	1.6–1.72	2.34–2.55	
Hypertension						
Separations ^(c)	2,717	1,641	1,623	311	173	6,469
Separation rate ^(d)	0.21	0.40	0.89	1.26	1.62	0.33
Standardised separation rate ratio (SRR)	0.64	1.21	2.70	3.82	4.91	
95% confidence interval of SRR	0.61–0.66	1.15–1.27	2.57–2.83	3.39–4.24	4.18–5.64	
Total chronic conditions						
Separations ^(c)	203,344	83,303	44,231	7,673	4,820	343,649
Separation rate ^(d)	15.68	19.88	23.54	28.81	40.31	17.39
Standardised separation rate ratio (SRR)	0.90	1.14	1.35	1.66	2.32	
95% confidence interval of SRR	0.9–0.91	1.14–1.15	1.34–1.37	1.62–1.69	2.25–2.38	
Total potentially preventable hospitalisations						
Separations ^(c)	357,056	140,690	76,981	14,962	10,381	600,759
Separation rate ^(d)	27.40	34.56	41.19	52.27	73.65	30.48
Standardised separation rate ratio (SRR)	0.90	1.13	1.35	1.71	2.42	
95% confidence interval of SRR	0.9–0.9	1.13–1.14	1.34–1.36	1.69–1.74	2.37–2.46	

(a) These conditions are defined using ICD-10-AM codes in Appendix 3.

(b) Includes Unknown Remoteness Area and excludes non-Australian residents.

(c) Excludes multiple procedures and diagnoses for the same separation within the same group.

(d) Rate per 1,000 population was directly age-standardised to the Australian population at 30 June 2001 using 30 June 2001 population estimates as divisors

Table 4.10: Average length of stay^(a) (days) for selected AR-DRGs version 4.2, by hospital sector, states and territories, 2001-02

AR-DRG	Hospital sector	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
E62C Respiratory Infections/Inflammations W/O CC										
ALOS (days)	Public	3.71	3.41	3.33	3.51	3.35	3.81	3.70	4.25	3.54
	Private	5.23	5.34	5.17	4.44	5.97	5.33	5.56	..	5.19
	Total	3.85	3.75	3.78	3.75	3.89	4.32	3.94	4.25	3.83
Separations	Public	9,264	6,086	4,460	2,493	2,005	467	346	707	25,828
	Private	973	1,321	1,469	871	527	236	52	..	5,449
	Total	10,237	7,407	5,929	3,364	2,532	703	398	707	31,277
E65B Chronic Obstructive Airway Disease W/O Catastrophic or Severe CC										
ALOS (days)	Public	5.23	4.47	4.94	5.51	5.16	6.68	5.89	5.44	5.05
	Private	8.26	7.49	8.03	6.82	7.18	8.36	n.p.	..	7.74
	Total	5.54	4.97	5.68	5.88	5.56	7.30	n.p.	5.44	5.52
Separations	Public	8,772	5,255	4,060	1,675	1,703	441	210	356	22,472
	Private	995	1,041	1,279	645	427	258	43	..	4,688
	Total	9,767	6,296	5,339	2,320	2,130	699	253	356	27,160
E69C Bronchitis and Asthma Age<50 W/O CC										
ALOS (days)	Public	1.72	1.71	1.72	1.93	1.83	2.05	2.13	2.44	1.77
	Private	2.37	2.56	2.44	2.05	3.30	n.p.	n.p.	..	2.41
	Total	1.74	1.76	1.82	1.95	1.90	n.p.	n.p.	2.44	1.82
Separations	Public	10,976	6,440	4,458	2,752	3,388	404	273	317	29,008
	Private	318	401	716	561	178	n.p.	n.p.	..	2,276
	Total	11,294	6,841	5,174	3,313	3,566	n.p.	n.p.	317	31,284
F62B Heart Failure and Shock W/O Catastrophic CC										
ALOS (days)	Public	5.89	4.90	5.46	5.38	5.87	6.77	6.11	5.24	5.52
	Private	9.04	7.52	7.80	7.49	7.01	n.p.	n.p.	..	7.86
	Total	6.26	5.51	6.21	5.88	6.17	n.p.	n.p.	5.24	6.03
Separations	Public	8,801	6,559	3,929	1,938	2,044	428	235	208	24,142
	Private	1,183	2,010	1,872	597	743	n.p.	n.p.	..	6,729
	Total	9,984	8,569	5,801	2,535	2,787	n.p.	n.p.	208	30,871
F71B Non-Major Arrhythmia and Conduction Disorders W/O Catastrophic or Severe CC										
ALOS (days)	Public	2.41	2.21	2.30	1.88	2.17	2.52	1.83	2.17	2.27
	Private	2.35	2.41	2.53	1.81	2.10	n.p.	n.p.	..	2.32
	Total	2.40	2.26	2.38	1.85	2.14	n.p.	n.p.	2.17	2.28
Separations	Public	9,767	6,461	4,530	1,998	1,778	707	404	195	25,840
	Private	1,986	2,323	2,427	1,300	877	n.p.	n.p.	..	9,406
	Total	11,753	8,784	6,957	3,298	2,655	n.p.	n.p.	195	35,246

(continued)

Table 4.10 (continued): Average length of stay^(a) (days) for selected AR-DRGs version 4.2, by hospital sector, states and territories, 2001-02

AR-DRG	Hospital sector	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
G07B Appendicectomy W/O Catastrophic or Severe CC	ALOS (days)									
	Public	3.11	2.80	2.76	2.80	2.97	2.86	2.98	3.20	2.92
	Private	2.84	3.02	2.56	2.67	3.09	3.05	n.p.	..	2.80
	Total	3.06	2.85	2.68	2.75	3.01	2.94	3.01	3.20	2.89
Separations	Public	5,217	3,869	2,625	1,549	944	319	366	200	15,089
	Private	1,125	1,074	1,593	826	421	230	38	..	5,307
	Total	6,342	4,943	4,218	2,375	1,365	549	404	200	20,396
G08Z Abdominal, Umbilical and Other Hernia Procedures Age>0	ALOS (days)									
	Public	2.76	2.55	2.09	2.70	2.44	2.75	3.21	2.71	2.55
	Private	2.24	2.55	2.22	3.00	2.46	2.44	1.91	..	2.39
	Total	2.51	2.55	2.16	2.87	2.45	2.56	2.38	2.71	2.47
Separations	Public	3,607	2,747	2,065	902	937	182	89	83	10,612
	Private	3,290	2,121	2,758	1,141	833	294	156	..	10,593
	Total	6,897	4,868	4,823	2,043	1,770	476	245	83	21,205
G09Z Inguinal and Femoral Hernia Procedures Age>0	ALOS (days)									
	Public	1.58	1.54	1.32	1.49	1.72	1.58	1.25	1.83	1.53
	Private	1.69	1.67	1.44	1.68	1.95	1.60	1.26	..	1.64
	Total	1.64	1.61	1.39	1.61	1.84	1.59	1.26	1.83	1.59
Separations	Public	5,223	4,816	2,802	1,492	1,522	231	186	129	16,401
	Private	7,162	4,782	4,505	2,302	1,719	632	436	..	21,538
	Total	12,385	9,598	7,307	3,794	3,241	863	622	129	37,939
H04B Cholecystectomy W/O Closed CDE W/O Catastrophic or Severe CC	ALOS (days)									
	Public	2.31	2.31	1.92	2.50	2.15	2.08	2.33	3.05	2.24
	Private	2.16	2.48	2.17	2.29	2.53	2.24	1.79	..	2.27
	Total	2.24	2.38	2.06	2.38	2.33	2.18	1.98	3.05	2.26
Separations	Public	6,302	5,398	3,380	1,400	1,682	340	215	147	18,864
	Private	5,783	3,792	3,973	2,018	1,519	528	401	..	18,014
	Total	12,085	9,190	7,353	3,418	3,201	868	616	147	36,878
I03C Hip Replacement W/O Catastrophic or Severe CC	ALOS (days)									
	Public	8.02	8.19	8.32	6.89	7.03	9.12	8.21	n.p.	7.99
	Private	8.47	9.10	9.45	9.97	8.40	n.p.	n.p.	n.p.	9.03
	Total	8.27	8.75	9.01	9.05	7.87	n.p.	n.p.	n.p.	8.63
Separations	Public	2,224	1,624	991	444	597	158	146	21	6,205
	Private	2,886	2,654	1,560	1,028	955	n.p.	n.p.	..	9,662
	Total	5,110	4,278	2,551	1,472	1,552	n.p.	n.p.	21	15,867

(continued)

Table 4.10 (continued): Average length of stay^(a) (days) for selected AR-DRGs version 4.2, by hospital sector, states and territories, 2001-02

AR-DRG	Hospital sector	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
I04A and I04B Knee Replacement and Reattachment (combined in anticipation of AR-DRG version 5)										
ALOS (days)	Public	8.28	8.47	7.85	8.33	6.72	8.72	7.62	n.p.	8.07
	Private	8.22	9.13	9.48	11.04	8.05	10.99	8.35	..	8.99
	Total	8.24	8.90	8.93	10.37	7.53	10.46	8.07	n.p.	8.67
Separations	Public	3,078	1,800	1,405	527	926	116	219	15	8,086
	Private	5,471	3,282	2,801	1,591	1,466	378	353	..	15,342
	Total	8,549	5,082	4,206	2,118	2,392	494	572	15	23,428
I16Z Other Shoulder Procedures										
ALOS (days)	Public	2.18	1.91	1.77	2.22	1.98	1.75	2.08	2.40	2.00
	Private	1.86	1.96	2.00	1.68	1.96	2.22	1.77	..	1.90
	Total	1.91	1.95	1.96	1.76	1.96	2.13	1.84	2.40	1.92
Separations	Public	1,000	1,181	807	563	543	80	95	62	4,331
	Private	5,535	4,906	3,583	3,346	2,314	358	356	..	20,398
	Total	6,535	6,087	4,390	3,909	2,857	438	451	62	24,729
L63B Kidney and Urinary Tract Infections Age>69 W/O Catastrophic CC										
ALOS (days)	Public	5.18	4.54	4.99	5.80	5.27	6.60	6.58	n.p.	5.07
	Private	7.60	6.78	7.14	7.47	6.13	n.p.	n.p.	..	7.03
	Total	5.47	5.05	5.72	6.25	5.52	n.p.	n.p.	n.p.	5.51
Separations	Public	3,272	2,299	1,549	757	688	98	66	30	8,759
	Private	443	672	805	275	280	n.p.	n.p.	..	2,564
	Total	3,715	2,971	2,354	1,032	968	n.p.	n.p.	30	11,323
M02B Transurethral Prostatectomy W/O Catastrophic or Severe CC										
ALOS (days)	Public	3.88	3.08	3.63	3.42	3.49	3.35	3.14	n.p.	3.47
	Private	3.58	3.52	3.48	3.50	3.92	n.p.	n.p.	..	3.60
	Total	3.70	3.32	3.52	3.47	3.73	n.p.	n.p.	n.p.	3.55
Separations	Public	1,830	2,211	717	441	606	145	79	33	6,062
	Private	3,042	2,759	1,984	839	812	n.p.	n.p.	..	9,856
	Total	4,872	4,970	2,701	1,280	1,418	n.p.	n.p.	33	15,918
N04Z Hysterectomy for Non-Malignancy										
ALOS (days)	Public	4.34	4.22	3.95	4.32	4.30	3.71	4.80	4.73	4.22
	Private	4.70	5.15	4.36	5.06	5.03	n.p.	n.p.	..	4.80
	Total	4.54	4.62	4.21	4.76	4.70	n.p.	n.p.	4.73	4.54
Separations	Public	4,114	3,746	2,364	1,531	1,400	372	211	81	13,819
	Private	5,338	2,872	3,899	2,286	1,698	n.p.	n.p.	..	17,311
	Total	9,452	6,618	6,263	3,817	3,098	n.p.	n.p.	81	31,130

(continued)

Table 4.10 (continued): Average length of stay^(a) (days) for selected AR-DRGs version 4.2, by hospital sector, states and territories, 2001-02

AR-DRG	Hospital sector	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
N06Z Female Reproductive System Reconstructive Procedures	Public	3.49	3.48	3.19	3.40	3.88	3.63	3.71	n.p.	3.47
	Private	3.60	3.80	3.12	3.94	4.53	4.24	4.31	..	3.69
	<i>Total</i>	3.56	3.64	3.14	3.73	4.25	4.04	4.16	n.p.	3.60
Separations	Public	2,181	1,924	1,062	954	694	173	82	17	7,087
	Private	3,584	1,808	2,465	1,473	913	351	245	..	10,839
	<i>Total</i>	5,765	3,732	3,527	2,427	1,607	524	327	17	17,926
O01D Caesarean Delivery W/O Complicating Diagnosis	Public	4.69	4.69	4.04	4.76	4.78	4.92	4.84	6.03	4.60
	Private	5.89	5.95	5.39	6.50	6.56	n.p.	n.p.	..	5.91
	<i>Total</i>	5.17	5.13	4.70	5.76	5.52	n.p.	n.p.	6.03	5.16
Separations	Public	7,963	5,850	4,945	1,938	1,830	402	330	379	23,637
	Private	5,272	3,162	4,681	2,624	1,297	n.p.	n.p.	..	17,869
	<i>Total</i>	13,235	9,012	9,626	4,562	3,127	n.p.	n.p.	379	41,506
O60D Vaginal Delivery W/O Complicating Diagnosis	Public	2.85	2.89	2.50	3.09	2.95	3.65	2.69	3.41	2.84
	Private	4.37	4.53	4.38	4.67	4.88	n.p.	n.p.	..	4.48
	<i>Total</i>	3.24	3.30	3.03	3.68	3.48	n.p.	n.p.	3.41	3.28
Separations	Public	35,135	22,915	19,395	7,841	6,457	1,923	1,651	1,469	96,786
	Private	11,998	7,732	7,483	4,667	2,427	n.p.	n.p.	..	36,457
	<i>Total</i>	47,133	30,647	26,878	12,508	8,884	n.p.	n.p.	1,469	133,243
R61B Lymphoma and Non-Acute Leukaemia W/O Catastrophic CC	Public	4.87	4.27	4.53	5.52	5.07	5.80	6.61	n.p.	4.77
	Private	4.93	3.89	4.67	3.55	4.47	n.p.	n.p.	..	4.32
	<i>Total</i>	4.89	4.11	4.61	4.43	4.83	n.p.	n.p.	n.p.	4.59
Separations	Public	3,204	2,428	1,132	615	797	142	140	19	8,477
	Private	935	1,835	1,491	767	520	n.p.	n.p.	..	5,744
	<i>Total</i>	4,139	4,263	2,623	1,382	1,317	n.p.	n.p.	19	14,221
U63B Major Affective Disorders Age<70 W/O Catastrophic or Severe CC	Public	13.51	12.75	11.48	13.23	11.62	11.95	13.59	10.15	12.64
	Private	18.80	17.99	18.27	14.12	16.53	n.p.	n.p.	..	17.46
	<i>Total</i>	14.76	14.61	14.05	13.53	13.07	n.p.	n.p.	10.15	14.16
Separations	Public	5,334	3,917	3,136	2,210	2,391	384	316	135	17,823
	Private	1,660	2,148	1,909	1,120	1,002	n.p.	n.p.	..	8,205
	<i>Total</i>	6,994	6,065	5,045	3,330	3,393	n.p.	n.p.	135	26,028

(a) Separations for which the type of episode of care was reported as acute, or was not reported. Excludes separations where the length of stay was greater than 120 days

.. not available.

n.p. not published

Main abbreviations: ALOS – average length of stay, CC – complications and comorbidities, CDE – common bile duct exploration, W/O – without, W – with.

Table 4.11: Relative stay index^(a), by hospital sector, patient election status and funding source states and territories, 2001-02

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Public patients ^(b)	1.01	0.95	0.93	1.01	0.96	0.98	1.05	1.26	0.98
Public ^(c)	1.01	0.95	0.93	1.01	0.96	0.98	1.05	1.26	0.98
Private patients	1.04	0.97	1.00	1.02	1.00	0.92	1.03	1.17	1.01
Private health insurance	1.04	0.97	1.00	1.04	1.00	0.86	1.00	0.84	1.02
Self funded	1.00	0.85	0.80	0.80	0.91	n.a.	0.77	1.35	0.93
Workers compensation	1.11	0.99	1.08	1.11	1.07	1.14	1.38	1.35	1.08
Motor vehicle third party personal claim	1.34	0.94	1.32	1.14	1.30	1.20	1.12	1.53	1.13
Department of Veterans' Affairs	0.98	0.98	0.95	0.94	0.97	0.95	0.99	0.94	0.97
Other private ^(d)	2.06	1.05	1.03	1.18	1.21	1.27	1.23	1.33	1.36
Patient election status not reported	0.70	0.87	n.a.	n.a.	n.a.	1.10	n.a.	0.69	0.93
Total	1.01	0.95	0.93	1.01	0.97	0.98	1.05	1.25	0.98
Private hospitals									
Public patients ^(b)	1.08	0.77	1.08	0.90	1.06	1.08	1.19	..	1.01
Public ^(c)	1.08	0.77	1.08	0.90	1.06	1.08	1.19	..	1.01
Private patients	1.04	1.01	1.04	1.08	1.03	1.11	1.10	..	1.04
Private health insurance	1.05	1.02	1.04	1.07	1.03	1.12	1.09	..	1.04
Self funded	0.87	0.84	0.78	0.81	0.85	n.a.	0.96	..	0.84
Workers compensation	0.97	1.10	0.90	0.90	0.96	0.93	1.10	..	0.99
Motor vehicle third party personal claim	0.87	1.12	0.97	1.10	0.96	1.04	1.00	..	1.06
Department of Veterans' Affairs	1.13	1.01	1.13	1.30	1.07	1.16	1.20	..	1.11
Other private ^(d)	0.89	0.98	0.92	0.96	0.97	n.a.	0.94	..	0.94
Patient election status not reported	0.76	1.02	n.a.	n.a.	n.a.	1.06	n.a.	..	1.06
Total	1.04	1.01	1.04	1.06	1.03	1.09	1.10	..	1.04
All Hospitals									
Public patients ^(b)	1.01	0.95	0.93	1.00	0.96	1.00	1.05	1.26	0.98
Public ^(c)	1.01	0.95	0.93	1.00	0.96	1.00	1.05	1.26	0.98
Private patients	1.04	1.00	1.04	1.07	1.02	1.05	1.09	1.18	1.03
Private health insurance	1.05	1.01	1.04	1.07	1.03	1.05	1.07	0.84	1.04
Self funded	0.91	0.84	0.80	0.81	0.87	n.a.	0.95	1.35	0.86
Workers compensation	1.03	1.06	0.93	0.96	0.99	1.00	1.19	1.35	1.02
Motor vehicle third party personal claim	1.32	0.98	1.26	1.10	1.25	1.18	1.11	1.53	1.12
Department of Veterans' Affairs	1.03	1.00	1.10	1.16	1.01	0.99	1.13	0.94	1.05
Other private ^(d)	1.88	1.03	0.97	1.10	1.06	1.27	1.11	1.41	1.18
Patient election status not reported	0.70	0.88	n.a.	n.a.	n.a.	1.07	n.a.	0.69	1.04
Total	1.02	0.97	0.98	1.03	0.99	1.02	1.07	1.25	1.00

(a) Relative stay index based on all hospitals using the indirect method. The indirectly standardised relative stay index is not technically comparable between cells but is a comparison of the hospital group with the national average based on the casemix of that group.

(b) Includes separations whose patient election status was *Public* and whose funding source was reported as *Australian Health Care agreements*, *Reciprocal Health Care agreements*, *Other hospital or public authority*, *Other or Not reported*, and *most patients in Psychiatric hospitals*

(c) Includes patients whose funding source was reported as *Australian Health Care agreements*, *Other hospital or public authority* and most patients in public psychiatric hospitals.

(d) Includes patients whose funding source was reported as *Other compensation*, *Department of Defence*, *Correctional facilities*, *Other hospital or public authority*, *Other* and *Unknown*. n.a. not applicable.

Table 4.12: Relative stay index, directly and indirectly standardised^(a), by hospital sector, and medical/surgical/other type of AR-DRG, states and territories, 2001-02

Type of hospital	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Indirectly standardised relative stay index^(b)									
Public hospitals	1.01	0.95	0.93	1.01	0.97	0.98	1.05	1.25	0.98
Medical	0.99	0.93	0.91	1.01	0.96	0.95	1.06	1.21	0.96
Surgical	1.05	1.00	0.99	1.01	1.00	1.03	1.05	1.36	1.02
Other	1.16	1.00	1.06	0.98	0.99	1.07	0.90	1.31	1.06
Private hospitals	1.04	1.01	1.04	1.06	1.03	1.09	1.10	..	1.04
Medical	1.23	1.05	1.13	1.10	1.12	1.12	1.31	..	1.13
Surgical	0.94	0.98	0.97	1.04	0.96	1.05	0.98	..	0.98
Other	0.89	0.94	0.97	0.96	0.94	1.07	0.94	..	0.94
All hospitals	1.02	0.97	0.98	1.03	0.99	1.02	1.07	1.25	1.00
Medical	1.03	0.95	0.98	1.04	0.99	1.01	1.11	1.21	1.00
Surgical	1.01	0.99	0.98	1.02	0.98	1.04	1.02	1.36	1.00
Other	1.03	0.97	1.00	0.97	0.97	1.07	0.91	1.31	1.00
Directly standardised relative stay index^(c)									
Public hospitals	1.03	0.96	0.95	1.02	0.98	1.02	1.09	n.p.	0.99
Medical	1.01	0.93	0.91	1.02	0.96	0.99	1.10	n.p.	0.96
Surgical	1.06	1.01	0.99	1.01	1.00	1.05	1.07	n.p.	1.02
Other	1.16	1.01	1.06	0.99	0.99	1.10	1.00	n.p.	1.06
Private hospitals	1.13	1.05	1.10	1.10	1.07	n.p.	n.p.	..	1.08
Medical	1.27	1.10	1.16	1.14	1.14	n.p.	n.p.	..	1.14
Surgical	0.93	0.98	0.99	1.04	0.97	n.p.	n.p.	..	0.97
Other	0.88	0.91	0.99	0.96	0.94	n.p.	n.p.	..	0.93
All hospitals	1.03	0.97	0.98	1.04	1.00	1.04	1.10	n.p.	1.00
Medical	1.04	0.96	0.98	1.05	1.00	1.04	1.15	n.p.	1.00
Surgical	1.01	1.00	0.98	1.03	0.99	1.04	1.03	n.p.	1.00
Other	1.04	0.97	1.01	0.98	0.97	1.08	0.98	n.p.	1.00

(a) Relative stay indices based on all hospitals.

(b) The indirectly standardised relative stay index is not technically comparable between cells but is a comparison of the hospital group with the national average based on the casemix of that group.

(c) The directly standardised relative stay index is rescaled so each group represents the national casemix and is therefore directly comparable between cells.

Note the indirectly standardised relative stay index and directly standardised relative stay index should be interpreted with the notes in appendix 3

.. not available.

Table 4.13: Emergency department waiting times^(a) by triage category and public hospital peer group, states and territories, 2001–02

Triage category and peer group	NSW ^(b)	Vic	Qld ^(c)	WA	SA ^(d)	Tas ^(e)	ACT ^(f)	NT	Total
Principal referral and women's and children's hospitals									
Number of hospitals in peer group	20	18	16	4	4	2	1	1	66
Number of reporting hospitals	19	17	13	4	4	2	1	1	58
Estimated proportion of emergency visits (%) ^(h)	100	97	90	100	100	100	100	100	97
Number of patients seen	651,457	625,086	517,339	167,675	182,087	59,666	50,983	36,933	2,291,226
Proportion of patients seen on time (%)									
1 – Resuscitation	100	100	99	96	99	91	n.p.	n.p.	99
2 – Emergency	76	83	68	78	65	50	n.p.	n.p.	75
3 – Urgent	48	75	48	55	48	52	n.p.	n.p.	58
4 – Semi-urgent	49	63	54	50	49	47	n.p.	n.p.	55
5 – Non-urgent	79	83	73	72	85	83	n.p.	n.p.	78
Total/	55	71	57	58	53	51	n.p.	n.p.	60
Estimated proportion of patients who were subsequently admitted (%)									
1 – Resuscitation	88	87	83	81	79	91	77	56	84
2 – Emergency	72	75	68	58	66	70	52	59	69
3 – Urgent	54	55	44	46	44	47	43	36	49
4 – Semi-urgent	27	29	15	24	17	18	25	15	23
5 – Non-urgent	9	10	5	7	5	4	6	4	8
Total/	39	40	27	35	32	35	25	24	35
Proportion of patients in each triage category (%)									
1 – Resuscitation	1	1	1	1	2	1	2	2	1
2 – Emergency	8	9	7	12	10	10	5	6	9
3 – Urgent	36	32	34	34	36	40	22	29	34
4 – Semi-urgent	42	48	47	43	47	44	30	59	45
5 – Non-urgent	12	10	11	9	5	5	41	3	11
Total/	100	100	100	100	100	100	100	100	100
Large hospitals									
Number of hospitals in peer group	21	12	7	1	3	1	1	1	47
Number of reporting hospitals	21	2	6	n.a.	3	1	1	1	35
Estimated proportion of emergency visits (%) ^(h)	100	25	84	n.a.	100	100	100	100	80
Number of patients seen	501,890	59,954	192,888	n.a.	82,014	19,326	44,143	28,621	928,836
Proportion of patients seen on time (%)									
1 – Resuscitation	100	99	100	n.a.	100	n.p.	n.p.	n.p.	99
2 – Emergency	79	85	81	n.a.	72	n.p.	n.p.	n.p.	77
3 – Urgent	64	83	68	n.a.	54	n.p.	n.p.	n.p.	65
4 – Semi-urgent	66	72	67	n.a.	53	n.p.	n.p.	n.p.	66
5 – Non-urgent	88	95	87	n.a.	87	n.p.	n.p.	n.p.	88
Total/	70	80	72	n.a.	57	n.p.	n.p.	n.p.	70

(continued)

Table 4.13 (continued): Emergency department waiting times^(a) by triage category and public hospital peer group, states and territories, 2001–02

Triage category and peer group	NSW ^(b)	Vic	Qld ^(c)	WA	SA ^(d)	Tas ^(e)	ACT ^(f)	NT	Total
Estimated proportion of patients who were subsequently admitted (%)									
1 – Resuscitation	90	94	80	n.a.	77	79	61	77	86
2 – Emergency	71	69	61	n.a.	58	77	38	66	67
3 – Urgent	47	45	27	n.a.	43	45	27	42	42
4 – Semi-urgent	20	18	9	n.a.	16	13	12	14	17
5 – Non-urgent	5	7	2	n.a.	3	7	1	4	4
<i>Total</i>	30	26	16	n.a.	27	22	12	26	26
Proportion of patients in each triage category (%)									
1 – Resuscitation	0.6	0.3	0.4	n.a.	0.9	0.3	0.3	0.3	0.6
2 – Emergency	6	6	5	n.a.	8	3	3	6	6
3 – Urgent	32	27	28	n.a.	27	25	17	32	29
4 – Semi-urgent	48	51	49	n.a.	58	58	45	57	50
5 – Non-urgent	13	16	18	n.a.	5	14	35	5	15
<i>Total</i>	100	100	100	n.a.	100	100	100	100	100
Medium hospitals									
Number of hospitals in peer group									
	41	29	17	12	13	0	0	0	112
Number of reporting hospitals									
	10	0	0	2	6	0	0	0	18
Estimated proportion of emergency visits (%) ^(h)									
	33	n.a.	n.a.	37	80	n.a.	n.a.	n.a.	31
Number of patients seen									
	151,634	n.a.	n.a.	57,323	97,103	n.a.	n.a.	n.a.	306,060
Proportion of patients seen on time (%)									
1 – Resuscitation	100	n.a.	n.a.	99	77	n.a.	n.a.	n.a.	98
2 – Emergency	85	n.a.	n.a.	86	47	n.a.	n.a.	n.a.	78
3 – Urgent	79	n.a.	n.a.	61	55	n.a.	n.a.	n.a.	71
4 – Semi-urgent	82	n.a.	n.a.	53	54	n.a.	n.a.	n.a.	70
5 – Non-urgent	96	n.a.	n.a.	79	95	n.a.	n.a.	n.a.	93
<i>Total</i>	84	n.a.	n.a.	60	58	n.a.	n.a.	n.a.	74
Estimated proportion of patients who were subsequently admitted (%)									
1 – Resuscitation	74	n.a.	n.a.	15	85	n.a.	n.a.	n.a.	63
2 – Emergency	60	n.a.	n.a.	25	55	n.a.	n.a.	n.a.	49
3 – Urgent	38	n.a.	n.a.	19	34	n.a.	n.a.	n.a.	33
4 – Semi-urgent	12	n.a.	n.a.	6	9	n.a.	n.a.	n.a.	10
5 – Non-urgent	5	n.a.	n.a.	4	3	n.a.	n.a.	n.a.	4
<i>Total</i>	19	n.a.	n.a.	10	14	n.a.	n.a.	n.a.	16
Proportion of patients in each triage category (%)									
1 – Resuscitation	0.3	n.a.	n.a.	0.4	0.3	n.a.	n.a.	n.a.	0.3
2 – Emergency	4	n.a.	n.a.	5	3	n.a.	n.a.	n.a.	4
3 – Urgent	23	n.a.	n.a.	25	18	n.a.	n.a.	n.a.	22
4 – Semi-urgent	52	n.a.	n.a.	58	63	n.a.	n.a.	n.a.	56
5 – Non-urgent	21	n.a.	n.a.	11	15	n.a.	n.a.	n.a.	17
<i>Total</i>	100	n.a.	n.a.	100	100	n.a.	n.a.	n.a.	100

(continued)

Table 4.13 (continued): Emergency department waiting times^(a) by triage category and public hospital peer group, states and territories, 2001–02

Triage category and peer group	NSW ^(b)	Vic	Qld ^(c)	WA	SA ^(d)	Tas ^(e)	ACT ^(f)	NT	Total
Total^(g)									
Total number of hospitals	218	144	181	89	80	26	3	5	746
Number of reporting hospitals	51	19	20	6	13	4	2	5	120
Estimated proportion of emergency visits (%) ^(h)	72	60	56	42	77	84	100	100	64
Number of patients seen	1,324,282	685,040	744,289	224,998	361,204	97,653	95,126	95,320	3,627,912
Proportion of patients seen on time (%)									
1 – Resuscitation	100	100	99	96	99	89	99	100	99
2 – Emergency	78	83	71	79	65	52	87	67	76
3 – Urgent	57	76	56	56	50	55	80	69	60
4 – Semi-urgent	60	64	59	51	51	57	72	63	59
5 – Non-urgent	86	85	80	74	88	89	82	90	84
<i>Total</i>	64	72	62	58	55	61	78	70	64
Estimated proportion of patients who were subsequently admitted (%)									
1 – Resuscitation	88	87	82	75	79	83	75	59	82
2 – Emergency	71	74	66	54	63	66	47	63	67
3 – Urgent	50	54	37	40	42	43	37	40	45
4 – Semi-urgent	22	28	13	18	14	14	18	16	19
5 – Non-urgent	7	9	4	6	4	2	4	8	6
<i>Total</i>	33	39	23	28	26	26	18	23	30
Proportion of patients in each triage category (%)									
1 – Resuscitation	1	1	1	1	1	1	1	1	1
2 – Emergency	7	8	7	10	8	7	4	5	7
3 – Urgent	33	32	32	32	29	32	20	24	31
4 – Semi-urgent	46	48	48	46	54	47	37	54	47
5 – Non-urgent	14	10	14	10	8	14	38	17	13
<i>Total</i>	100	100	100	100	100	100	100	100	100

(a) Care needs to be taken in interpreting these data. Nationally agreed definitions exist but there may be differences in how data are collected. Data may vary across jurisdictions as a result of differences in clinical practices.

(b) Excludes records with incomplete information.

(c) The number of patients seen and the number of patients admitted was not available for June 2002 for 2 hospitals and waiting time was not available for 3 hospitals. Data for May 2002 was used for these hospitals

(d) Proportion of patients seen on time is based on 1 hospital for the Medium hospitals peer group, and 8 hospitals for the Total

(e) Estimated proportion of patients who were subsequently admitted is based on 3 hospitals for the Total.

(f) Waiting time information was not available for 3,929 records. The denominator for the proportion of patients seen on time only includes records where waiting time information was available.

(g) Includes data for hospitals not included in the specified hospital peer groups and some private hospitals.

(h) The number of occasions of service for Accident and emergency reported to the National Public Hospital Establishments Database for hospitals reporting to the Emergency Department Waiting Times Data Collection as a proportion of the total number of occasions of service for Accident and emergency reported to the National Public Hospital Establishments Database.

n.a. not applicable.

n.p. not published because there was only one hospital in the peer group.