# 2 Overview of Australian hospitals

## Introduction

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

The summary information on public hospitals is derived from the National Public Hospital Establishments Database. Data on expenditure and occasions of service for New South Wales are preliminary (Tables 2.1, 2.5 and 2.6). These tables will be updated on the AIHW website when the data have been finalised. Information on private hospitals has been provided by the states and territories for 2002–03 and is preliminary. The final data will be included in the AIHW's website when they become available from the ABS's Private Health Establishments Collection. Summary statistics for private and public hospitals are presented at a national level for the years 1998–99 to 2002–03 and for states and territories for 2002–03.

Summary separation, patient day, average length of stay and average cost weight information is derived from the National Hospital Morbidity Database for public and private hospitals. National statistics for the years 1998–99 to 2002–03 and state and territory statistics for 2002–03 are presented.

The hospital sectors and types reported in this chapter are public acute hospitals, public psychiatric hospitals, private free-standing day hospital facilities and other private hospitals. Data are also presented for all public hospitals combined, all acute hospitals (that is, excluding public psychiatric hospitals), all private hospitals and all hospitals. For reasons of confidentiality, the patient-level data for private hospitals in Tasmania, the Australian Capital Territory and the Northern Territory have been suppressed. Also, private free-standing day hospital facilities were not separately identified for Tasmania. Therefore, totals for Australia for private free-standing day hospital facilities and other private hospitals do not include Tasmania. Further information on the hospitals included is provided in Appendix 4.

As detailed in Appendix 4, there is some variation in the scope of the National Hospital Morbidity Database among the states and territories. There is also some variation in the way in which separations with *Newborn* care were reported and in the inclusion of periods of hospital in the home care, as described in Chapter 6 and Appendix 3. These variations should be considered when comparing states and territories, the public and private sectors, and reporting years.

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

## Hospitals and hospital beds

A range of data on hospitals, available beds, expenditure and revenue are presented in Table 2.1 for the period 1998–99 to 2002–03. Over the four-year period, a number of jurisdictions changed from accounting on a cash basis to accrual accounting, and a number of other changes to reporting arrangements occurred so comparisons across years must be made with care.

There were 748 public hospitals and 549 private hospitals in 2002–03, compared with 746 public hospitals and 560 private hospitals in 2001–02 (Table 2.1). Changes in the numbers of hospitals can be due to changes in administrative or reporting arrangements and not necessarily to changes in the number of hospital campuses or buildings (see Appendix 4). Therefore, change in the number of available beds may be a more reliable indicator of shifts in the availability of hospital services. However, the concept of an available bed is also becoming less important, particularly in the light of increasing same day hospitalisations and provision of hospital in the home care. The comparability of bed numbers can also be affected by the casemix of hospitals with, for example, different proportions of beds available for special and more general purposes. Public hospitals provided 52,200 beds (66% of the national total) in 2002–03, compared with 27,112 beds provided in private hospitals (34% of the national total).

Public sector bed numbers are the average number of beds available through the course of the year. Private sector data for 2002–03 were collated on a different basis from earlier years. Data for 1998–99 to 2001–02 are from the ABS's *Private Hospitals Australia 2001–02* (ABS 2003) publication and from earlier editions of *Private Hospitals Australia*, which report numbers of beds on an average available beds basis. Data for 2002–03 were provided by the states and territories with the exception of New South Wales day hospital facilities beds (estimated using the Australian Bureau of Statistics 2001–02 figure (ABS 2003)) and the Northern Territory, from the *Hospitals and Health Services Yearbook 2004* (APN Business Information Group 2004). Victorian private hospitals beds were reported on an available bed basis. All other private hospital beds were reported on a licensed beds basis, which may overstate the number of beds available. These differences in reporting arrangements may make cross-year comparisons less valid.

Nationally, bed numbers in the public sector decreased by an average of 0.8% per year, from 53,885 in 1998–99 to 52,200 in 2002–03. Over the same period, the private sector grew by 1.8% per year, from 25,206 beds in 1998–99 to 27,112 in 2002–03.

Recurrent expenditure in 2002–03 was \$18.3 billion in current prices. For New South Wales, data are preliminary. In current price terms (that is, not adjusted for inflation), recurrent expenditure increased by 8.4% from 2001–02 to 2002–03 for public hospitals. In constant prices (that is, adjusted for inflation) (referenced to 2001–02), national expenditure was \$17.7 billion in 2002–03, and represented a real increase in expenditure of 5.0% over 2002–03. Data on recurrent expenditure for public hospitals for 1998–99 in Table 2.1 are not comparable with data for later years because New South Wales only included expenditure through community health program funding administered by hospitals from 1999–00. Total revenue for public hospitals increased by 9.2% on average per year in constant prices between 1998–99 and 2001–02.

Information on the number of hospitals and hospital beds available by state and territory is provided in Table 2.2 for both public and private hospitals. The number of available beds in hospitals ranged from 3.4 per 1,000 population in the Australian Capital Territory and the Northern Territory to 4.8 per 1,000 population in South Australia.

## Admitted patients by sector and hospital type

### Separations

There were 6,653,772 separations reported from public and private acute and psychiatric hospitals in 2002–03 (Table 2.4), an increase of 255,601 (4.0%) compared with 2001–02 (Table 2.3). Public hospital separations increased by 3.2% (125,459) compared with 2001–02 and there was a 5.3% (130,142) increase in separations reported for the private sector.

The increases in separations should be interpreted in the light of coverage changes (see Appendix 4). In the public sector, no data were provided for 2 hospitals that had previously been included in the National Hospital Morbidity Database. Together, they reported about 3,300 separations in 2001–02. If they had been included, the increase in separations may have been about 128,700 (about 3.2%).

In the private sector, compared with 2001–02, there was a marked increase in the coverage for Victoria (see Appendix 4), and an increase of 12.3% in separations for Victorian private hospitals compared with 2001–02. Victoria reports that separations in 2001–02 were likely to have been under-enumerated by about 9%, and by about 1% in 2002–03. For South Australia, coverage in 2001–02 was not complete, with data not included for one free-standing day hospital facility for the year, for another for one month, and for periods of 5 months and one month, respectively, for two non-day facilities. In 2002–03, data were not included for 4 months for one small non-free-standing day hospital facility and there was an increase in separations of 7.1% compared with 2001–02. South Australia estimates that the coverage was essentially complete for 2002–03 and that separations were under-enumerated by about 1.4% in 2001–02. In Tasmania, one private free-standing day hospital facility that had not previously reported was included in the database for 2002-03. In the Australian Capital Territory, a private free-standing day hospital facility which had previously been a separate hospital and not included, was included as part of a non-free-standing day hospital facility. There was an increase in coverage for the Northern Territory, with its one non-free-standing day hospital facility included for the first time. There was no change in the coverage of private hospitals for New South Wales, Queensland and Western Australia.

The effects of changes in coverage cannot be accurately estimated for Australia as a whole. To enable a better comparison, the separation counts for Victoria were adjusted by adding 1% to private hospital separations for 2002–03 and 9% to private hospital separations for 2001–02, and separation counts were adjusted by adding 1.4% to private hospital separations for South Australia in 2001–02. These adjusted estimates for Victoria and South Australia, combined with New South Wales, Queensland and Western Australia (for which there was no change in private hospital separations. For these five states combined (which accounted for 96% of reported private hospital separations in 2002–03), there was an increase of 3.0% for separations in the private sector between 2001–02 and 2002–03. Thus the increase in private hospital activity presented in Table 2.3 may be an overestimate of the actual increase for Australia as a whole. For public hospitals in New South Wales, Victoria, Queensland Western Australia and South Australia combined, there was a 3.1% increase in separations between 2001–02 and 2002–03.

Information on the 30 AR-DRGs with the largest changes in the number of separations in either the public or private sector (or both) between 1998–99 and 2002–03 is presented in Table 11.17.

The private sector accounted for 38.5% of the 6.65 million separations in 2002–03 (2,562,801), compared with 38.0% (2,432,659) in 2001–02. Private free-standing day hospital facilities, excluding Tasmania, accounted for 455,094 or 17.8% of private sector separations in 2002–03, compared with 376,579 or 15.5% in 2001–02.

#### Same day and overnight separations

The proportion of admitted patients being treated on a same day basis, that is, admitted and separated on the same date, continued to increase in the year 2002–03. Same day separations have been distinguished from other separations in this report to illustrate the proportions of total separations which they represent, and also to demonstrate the effect on average lengths of stay when patients receiving this type of hospital care are classified as admitted. In most countries of the Organisation for Economic Co-operation and Development (OECD), same day patients are not counted as admitted patients, and therefore the reported average lengths of stay in OECD publication are greater than those calculated in this publication (OECD 2002).

In 2002–03, 3,577,360 separations were on a same day basis, an increase of 6.8%, compared with 2001–02. There was an increase of 5.9% in public hospitals and 8.1% in private hospitals. In New South Wales, Queensland and Western Australia (for which there was no change in private hospital coverage) combined with Victoria and South Australia (adjusted as above for coverage change, which may not have been the same for same day and overnight separations), increases were 5.7% in both public and private hospitals. Same day separations comprised 53.8% of separations overall, compared with 52.3% (3,348,846) in 2001–02, and there were increases in the proportions of same day patients in both public hospitals (from 47.6% to 48.9%) and private hospitals (from 60.0% to 61.5%).

There was some variation among the states and territories in the proportion of same day separations. For public hospitals, New South Wales had a lower proportion (43.0%) than the national average (48.9%), whereas Northern Territory (56.9%), the Australian Capital Territory (56.7%) and Victoria (54.3%) had markedly higher proportions. In the private sector, Queensland (63.5%) and New South Wales (63.2%) reported higher proportions than average (61.5%).

There was a 0.9% increase in overnight separations between 2001–02 and 2002–03, from 3,049,325 to 3,076,412. There was an increase of 0.7% in public hospitals (from 2,076,284 to 2,090,734), and a 1.3% increase in the private sector (from 973,041 to 985,678). In New South Wales, Queensland and Western Australia (for which there was no change in private hospital coverage) combined with Victoria and South Australia (adjusted as above for coverage change, which may not have been the same for same day and overnight separations), there was an increase of 0.8% in public hospital overnight separations between 2001–02 and 2002–03, and a decrease of 1.1% for private hospitals. Overnight separations for private free-standing day hospital facilities were mainly from sleep centres (mainly AR-DRG E63Z *Sleep Apnoea*).

#### **Separation rates**

The age-standardised separation rate per 1,000 population increased by 1.5% between 2001–02 and 2002–03 for public acute hospitals (Table 2.3). Unadjusted for coverage change, the separation rate increased by 1.5% for public hospitals and 3.5% for private hospitals.

Among the states and territories, the Northern Territory reported the highest agestandardised public acute hospital separation rate in 2002–03 (422.5 per 1,000 population; Table 2.4) and Tasmania reported the lowest (163.9 per 1,000 population). Private hospital separation rates ranged from 104.2 per 1,000 population in New South Wales to 162.8 per 1,000 population in Queensland. These rates relate to resident populations, so do not take into account interstate patient flows.

These rates are likely to have been affected by whether or not separate episodes of care (see Glossary) within a hospital stay were counted as individual separations, the way in which hospital stays for patients aged 9 days or less on admission (*Newborn* episodes) were counted, and the reporting of hospital in the home care (see Chapter 6 and Appendix 3 for details). Changes over time and differences between sectors and jurisdictions can also be affected by variation in admission practices. For example, in New South Wales public hospitals, there has been a gradual reclassification over recent years of chemotherapy patients from admitted patients to non-admitted patients (outpatients).

The age-standardised separation rate for public psychiatric hospitals varied widely, from 0.1 per 1,000 population in Victoria and Queensland, to 1.8 per 1,000 population in South Australia. This variation reflects differences in the extent to which public psychiatric services have been provided in public acute hospitals, non-hospital facilities and in the community (AIHW 2004).

#### Average cost weight of separations

In Table 2.4, average cost weights are presented for 2002–03 based on the version 4.2 AR-DRG (DHAC 2000) into which each separation was classified on the basis of demographic and clinical characteristics of the patient. Separations were only included where the care type was reported as *Acute*, or was not reported, or where the care type was *Newborn* and the separation had at least one qualified day. Thus separations for *Rehabilitation*, *Palliative care*, *Geriatric evaluation and management*, *Psychogeriatric care*, *Maintenance care*, *Other admitted patient care*, and *Newborn care* with no qualified days were excluded.

The average cost weight information provides a guide to the expected resource use for separations, with a value of 1.00 representing the theoretical average for all separations. Cost weights for 2001–02 (AR-DRG version 4.2) were used (DoHA 2003), as 2002–03 cost weights were not available at the time of publication of this report. In one part of Table 2.3 and Table 2.4, public sector cost weights were used for both public and private hospitals to enable comparison between the sectors on the same basis. Data are also presented for private hospitals using private sector cost weights. Further information about the AR-DRG classification and cost weights is included in Chapter 11.

Table 2.4 indicates that, within the public sector, most states and territories had average cost weights close to the national average (0.98) for public acute hospitals. The Northern Territory was the only exception, with an average cost weight of 0.75. This reflects the high proportion (37.0%) of public hospital separations in the Northern Territory that were for *Admit for Renal Dialysis* (AR-DRG L61Z), an AR-DRG with a relatively low cost weight.

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

In Table 2.4, the average public cost weight for private free-standing day hospital facilities was markedly lower (0.50) than for other private hospitals (0.99), reflecting the lesser complexity and day-only nature of most admissions in these hospitals. The average cost weights for the other private hospitals ranged from 0.91 in Western Australia to 1.04 in South Australia. Nationally, the average cost weight for private hospitals using private sector cost weights was 0.86.

#### **Patient days**

Patient days represent the number of full or partial days stay for patients who separated from hospital during the reporting period, and represent the aggregated length of stay for all patients (see Glossary). A total of 23,550,400 patient days was reported for 2002–03, 69.8% in the public sector and 30.2% in the private sector.

There was an increase of 1.9% (284,717) in patient days for public acute hospitals in 2002–03, compared with 2001–02. For private hospitals, patient days increased by 2.3% (160,254), unadjusted for coverage change. In New South Wales, Queensland and Western Australia (for which there was no change in private hospital coverage) combined with Victoria and South Australia (adjusted as above for coverage change, which may not have been the same for patient days as for separations), there was an increase of 1.9% for public acute hospitals and an increase of 0.1% for private hospitals. Patient days for public acute and private hospitals combined (unadjusted for coverage change) increased by 2.0% (444,971), and for all hospitals combined they increased by 1.5% (349,350).

Public psychiatric hospital patient days decreased from 1,014,760 in 2001–02 to 919,139 in 2002–03 (9.4%). This decrease followed a marked increase in patient days from 2000–01 to 2001–02, particularly with New South Wales and Queensland. However, as separations from public psychiatric hospitals can include some very long stay patients, and the pattern of these separations can vary over time, patient day counts can also fluctuate markedly for these hospitals.

The number of age-standardised patient days per 1,000 population in 2002–03 decreased by 0.1% for public acute and private hospitals combined, compared with 2001–02. Public acute hospital patient days per 1,000 decreased by 0.2%, unadjusted for coverage change. For private hospitals, they increased by 0.1%, unadjusted for coverage change.

Of the states and territories, the Northern Territory reported the highest number of patient days per 1,000 population for public acute hospitals in 2002–03 (1,333.1 per 1,000 population) and Queensland reported the lowest (663.5 per 1,000 population). The highest agestandardised population rate for patient days in private hospitals was reported by Queensland (464.4 per 1,000 population). The lowest age-standardised rate for public psychiatric hospitals for 2002–03 was 6.9 patient days per 1,000 population in Victoria and the highest was 90.3 per 1,000 population in Queensland.

#### Average length of stay

The average length of stay for public acute and private hospitals combined decreased by 1.9% between 2001–02 and 2002–03. For public acute hospitals, there was a decrease between 2001–02 and 2002–03 from 3.9 to 3.8 days. For private hospitals, the average length of stay was 2.8 days in 2002–03, a reduction from 2.9 days in the previous year. The average length of stay for public psychiatric hospitals decreased from 60.9 days in 2001–02 to 55.1 days in

2002–03, reflecting the decreased patient days reported for these hospitals, as described above.

New South Wales and Tasmania reported the longest average length of stay for public acute hospitals (4.2 days) and the Northern Territory reported the shortest (3.0 days). For private hospitals other than free-standing day hospital facilities, Queensland reported the greatest average length of stay (3.3 days). With same day separations excluded (as is the practice in most OECD countries), average lengths of stay have not reduced markedly over the last few years (Table 2.3). The average length of stay remained 6.5 days in 2002–03 as in 2001–02. For public psychiatric hospitals, the average length of stay decreased from 72.1 days in 2001–02 to 66.2 in 2002–03. The average lengths of stay are within the range of those reported for 1999 and 2000 average lengths of stay for acute care for other OECD countries (OECD 2002).

#### **Relative stay index**

Relative stay index (RSI) information is presented for the period 1998–99 to 2002–03 in Table 2.3. They are calculated as the actual number of patient days for separations in selected AR-DRGs (version 4.2) divided by the number of patient days expected (based on national figures for the five years combined) standardised for casemix. An RSI greater than 1 indicates that an average patient's length of stay is higher than would be expected given the casemix of 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. More details on the methods to calculate the RSIs are in Chapter 4 and Appendix 3.

In 2002–03, the directly standardised RSI (0.97) was 4% lower in public hospitals than the 5year average. Directly standardised RSIs were higher in private hospitals than in public hospitals for all years. For all hospitals, the RSI decreased from 1.03 in 1998–99 to 0.97 in 2002–03. The average decrease per year was 1.3% for public and 1.1% for private hospitals over the same period.

## Non-admitted patients

Information on non-admitted patient occasions of service and group sessions provided by public acute and psychiatric hospitals for 2002–03 is provided in Table 2.5 by state and territory. Similar information from the ABS's Private Health Establishments Collection is presented for private hospitals for 2001–02 in Table 2.7. Information on occasions of service for New South Wales (Tables 2.5 and 2.6) is preliminary and will be updated on the AIHW website when finalised. Data for private hospitals for 2002–03 were not available at the time of publication of this report.

The most common non-admitted patient occasions of service delivered to individuals through public acute hospitals in 2002–03 (Table 2.5) for states and territories which reported these data was *Other medical/surgical/obstetric encounters*, followed by *Accident and emergency services* and *Pathology*. *Allied health* and *Community health* were also frequently provided services. These categories include services such as physiotherapy, speech therapy, dietary advice, baby clinics, aged care assessment teams and immunisation clinics.

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

Users of these data should note that there is considerable variation among states and territories and between reporting years in the way in which non-admitted patient occasions of service data are collected. Differing admission practices between the states and territories will also lead to variation among jurisdictions in the services reported in Table 2.5. States and territories may also differ in the extent to which these types of services are provided in non-hospital settings (such as community health centres), which are beyond the scope of this data collection.

There were differences in the scope of the data reported here for *Accident and Emergency* and for the emergency department waiting times collection in Chapter 4 (Table 4.13). The differences in reporting are discussed in Appendix 3.

Data on the number of non-admitted patient occasions of service provided through public psychiatric hospitals are also presented for Victoria, Queensland and Western Australia, the states or territories for which these data were supplied (Table 2.5). These services include emergency and outpatient care and outreach/community care provided to individuals or groups.

In 2001–02, private hospitals reported about 1,814,000 non-admitted patient occasions of service to the ABS's Private Health Establishments Collection, ranging from 59,800 for South Australia and the Northern Territory combined, to 714,000 for Victoria. Nationally, there were 504,900 non-admitted patient occasions of service reported for *Accident and emergency* in private hospitals (Table 2.7).

Table 2.6 presents data on the supply of accident and emergency non-admitted occasions of service in public hospitals by Remoteness Area of the hospital. The ratio of services provided in the area to the number of residents in the area is presented as an approximation of population utilisation, although services provided in one area may be provided to persons residing in other Remoteness Area categories. The ratio varied from 237 per 1,000 population in major cities to 374 per 1,000 population in regional areas and 831 per 1,000 population in remote areas. The pattern of utilisation may reflect a number of factors including patterns of availability of other health care services such as primary care practitioners, patterns of occurrence of accidents causing injury, and the poor health of Indigenous people who have higher population concentrations in remote areas.

There are also fewer accident and emergency non-admitted patient occasions of service per 1,000 population for private hospitals in regional and remote areas, though the relative number of private services is small. The ratio of services provided to the population resident in the area ranged from 28 per 1,000 population in major cities to 23 per 1,000 population in regional areas and 7 per 1,000 population in remote areas in 2001–02 (ABS unpublished Private Health Establishments Collection data).

#### Table 2.1: Summary of hospitals, Australia, 1998-99 to 2002-03<sup>(a)</sup>

						% change	3 <sup>107</sup>
	1998–99	1999–00	2000-01	2001–02	2002-03	Ave since 1998–99	Latest tv yea
Hospitals <sup>(c)</sup>	1330-33	1333-00	2000-01	2001-02	2002-03	1550-55	yea
	740	740	740	746	740	0.0	~
Public hospitals	749	748	749	746	748	0.0	0
Public acute hospitals	728	726	726	724 22	729	0.0	
Public psychiatric hospitals	21 502	22 509	23 516	560	19	-2.5	-13 -2
Private hospitals	190	509 207	217	246	549 248	2.3 6.9	
Private free-standing day hospital facilities Other private hospitals	312	302	299	314	301	-0.9	
Public acute and private hospitals	1,230	1,235	1,242	1,284	1,278	-0.9	
Total	1,251	1,257	1,242	1,204	1,270	0.9	-(
Available or licensed beds <sup>(d)</sup>	1,201	1,207	1,200	1,300	1,297	0.9	
Public hospitals	53,885	52,947	F2 410	E1 461	F2 200	-0.8	
	50,942	52,947	52,410 49,932	51,461 49,004	52,200 49,841	-0.8 -0.5	
Public acute hospitals	2,943	2,759	49,932 2,478	49,004 2,457	2,358	-0.5 -5.4	
Public psychiatric hospitals Private hospitals	2,943	25,246	26,153	27,407	2,356	-5.4	_
•	1,460	1,581	1,688	1,851	1,725	4.3	-
Private free-standing day hospital facilities					25,387		-
Other private hospitals	23,746	23,665	24,465	25,556		1.7 0.3	-
Public acute and private hospitals Total	76,148	75,434 78,193	76,085	76,411	76,953	0.3	
	79,091	76,193	78,563	78,868	79,312	0.1	
Beds per 1,000 population	0.00	0.70	0.70	0.00			
Public hospitals	2.86	2.78	2.72	2.63	2.64	-2.0	
Public acute hospitals	2.71	2.64	2.59	2.51	2.52	-1.8	
Public psychiatric hospitals	0.16	0.14	0.13	0.13	0.12	-6.5	-
Private hospitals	1.34	1.33	1.36	1.40	1.37	1.6	
Private free-standing day hospital facilities	0.08	0.08	0.09	0.09	0.09	6.9	
Other private hospitals	1.26	1.24	1.27	1.31	1.28	1.2	
Public acute and private hospitals	4.05	3.96	3.95	3.91	3.89	-1.1	-
Total	4.20	4.11	4.08	4.04	4.01	-1.3	-
Non-admitted occasions of service <sup>(f)</sup> ('000)							
Public acute hospitals	34,251	34,759	40,099	39,523	40,786	4.9	-
Other private hospitals	1,712	1,814	1,688	1,748	n.a.	0.7	:
Total	35,963	36,573	41,787	41,271	n.a.	4.7	-
Fotal recurrent expenditure, constant prices <sup>(g)(h)</sup> (\$ m							
Public hospitals	14,915	15,632	16,042	16,848	17,703	4.1	-
Public acute hospitals	14,438	15,180	15,612	16,424	17,284	4.4	
Public psychiatric hospitals	477	452	430	423	419	-3.9	-
Private hospitals	4,091	4,223	4,610	4,996	n.a.	6.9	-
Private free-standing day hospital facilities	150	174	189	219	n.a.	13.5	1
Other private hospitals	3,941	4,049	4,421	4,777	n.a.	6.6	1
Total	19,006	19,855	20,653	21,843	n.a.	4.7	:
Fotal recurrent expenditure, current prices <sup>(h)(j)</sup> (\$ mill	lion) <sup>(i)</sup>						
Public hospitals	13,677	14,647	15,545	16,848	18,323	7.2	
Public acute hospitals	13,240	14,224	15,128	16,424	17,889	7.4	
Public psychiatric hospitals	437	424	417	423	434	-1.1	
Private hospitals	3,751	3,957	4,467	4,996	n.a.	10.0	1
Private free-standing day hospital facilities	137	163	183	219	n.a.	16.8	1
Other private hospitals	3,614	3,794	4,284	4,777	n.a.	9.7	1
Total	17,428	18,604	20,012	21,843	n.a.	7.8	1
Fotal revenue, constant prices <sup>(g)</sup> (\$ million)							
Public hospitals	1,282	1,306	1,421	1,532	n.a.	6.1	
Public acute hospitals	1,258	1,285	1,398	1,512	n.a.	6.3	
Public psychiatric hospitals	24	21	23	19	n.a.	-7.2	-1
Private hospitals	4,317	4,486	4,893	5,328	n.a.	7.3	
Private free-standing day hospital facilities	176	204	231	262	n.a.	14.2	1
Other private hospitals	4,141	4,282	4,662	5,066	n.a.	6.9	-
Total	5,599	5,792	6,314	6,860	n.a.	7.0	
Fotal revenue, current prices <sup>(j)</sup> (\$ million)	5,000	-,	2,077	2,000			
Public hospitals	1,176	1,223	1,377	1,532	n.a.	9.2	1
	1,176		1,377			9.2 9.4	
Public acute hospitals		1,204		1,512	n.a.		1
Public psychiatric hospitals	22	20	22	19 5 229	n.a.	-4.5	-1:
Private hospitals	3,959	4,204	4,742	5,328	n.a.	10.4	1:
Private free-standing day hospital facilities	161	192	224	262 5.066	n.a.	17.5	1
Other private hospitals	3,798	4,012	4,518	5,066	n.a.	10.1	1:
Total	5,135	5,427	6,118	6,860	n.a.	10.1	1:

(a) Some data amended since previously reported. Revenue data for New South Wales for 2002–03 are unavailable

(b) The average since 1998–99 is the average annual change between 1998–99 and the latest available year of data. The latest two year change is the change between the two latest available years of data.

(c) Apparent differences in the number of hospitals reported are, in many instances, caused by changes in administrative or reporting arrangements rather than by actual differences in the number of buildings. See Appendix 4 for further information.

(d) Before 2002-03 all data were reported on an available bed basis. For 2002-03 public, Victorian private and Northern Territory private hospital beds reported on an available bed basis and all other private hospital beds reported on a licensed beds basis. The comparability of bed numbers can be affected by the casemix of hospitals including the extent to which hospitals provide same day admitted patient services and other specialised services.

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

Data for New South Wales for 2002-03 are preliminary. An updated version of this table will be published on the AIHW website when New South Wales data become available. (f)

Constant price values referenced to 2001-02. Constant price values are adjusted for inflation and are expressed in terms of prices in the reference year. (q)

Data for New South Wales for 2002-03 are preliminary. An updated version of this table will be published on the AIHW website when finalised data become available. (h) From 1999–00, New South Wales included community health program expenditure administered by hospitals. This causes discontinuity between 1998–99 and 1999–00. Victoria included insurance payments of \$41 million made by the Department of Human Services Victoria on behalf of hospitals for the first time in 2001-02. Due to improvements in the (i) allocation of expenditure and revenue from attached nursing home entities that had been incorrectly assigned in by some hospitals in previous years, Victoria reported a decrease of \$90 million in revenue and an increase of \$70 million in expenditure for 2002–03. (j)

Current prices refer to amounts as reported, unadjusted for inflation. Current price amounts are less comparable between years than constant price amounts.

n.a. Not available

Source: For 2001-02 and earlier private hospital data is ABS 2003 and earlier editions of Private Hospitals Australia. Private hospital data for 2002-03 are preliminary, provided by the states and territories.

	NSW	Vic <sup>(b)</sup>	Qld	WA	SA	Tas	ACT	NT	Total
Hospitals									
Public acute hospitals	209	143	175	93	79	22	3	5	729
Public psychiatric hospitals	9	1	4	1	1	3	0	0	19
Total public hospitals	218	144	179	94	80	25	3	5	748
Private free-standing day hospital facilities	96	52	51	14	27	2	5	1	248
Other private hospitals <sup>(c)</sup>	84	88	54	27	35	9	3	1	301
Total private hospitals	180	140	105	41	62	11	8	2	549
Total hospitals	398	284	284	135	142	36	11	7	1,297
Available or licensed beds <sup>(d)</sup>									
Public acute hospitals	16,919	11,843	9,404	4,817	4,551	1,056	682	569	49,841
Public psychiatric hospitals	1,166	95	503	201	313	80			2,358
Total beds available in public hospitals	18,085	11,938	9,907	5,018	4,864	1,136	682	569	52,200
Private free-standing day hospital facilities	720	430	327	91	115	9	33	n.a.	1,725
Other private hospitals <sup>(c)</sup>	6,086	6,198	6,004	3,250	2,277	1,089	375	108	25,387
Total beds available in private hospitals	6,806	6,628	6,331	3,341	2,392	1,098	408	108	27,112
Total available beds	24,891	18,566	16,238	8,359	7,256	2,234	1,090	677	79,312
Available or licensed beds per 1,000 population									
Public acute hospitals	2.5	2.4	2.5	2.5	3.0	2.2	2.1	2.9	2.5
Public psychiatric hospitals	0.2	0.0	0.1	0.1	0.2	0.2			0.1
Total beds available in public hospitals	2.7	2.4	2.6	2.6	3.2	2.4	2.1	2.9	2.6
Private free-standing day hospital facilities	0.1	0.1	0.1	0.0	0.1	0.0	0.1	n.a.	0.1
Other private hospitals <sup>(c)</sup>	0.9	1.3	1.6	1.7	1.5	2.3	1.2	0.5	1.3
Total beds in private hospitals	1.0	1.4	1.7	1.7	1.6	2.3	1.3	0.5	1.4
Total beds per 1,000 population	3.7	3.8	4.3	4.3	4.8	4.7	3.4	3.4	4.0

Table 2.2: Number of hospitals<sup>(a)</sup> and available or licensed beds, by hospital sector and type, states and territories, 2002–03

(a) The number of hospitals reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of physical hospital buildings or campuses See Appendix 4 for more detail.

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

(c) Includes private acute and private psychiatric hospitals.

(d) Public, Victorian private and Northern Territory private hospital beds reported on an available bed basis. All other private hospital beds reported on a licensed beds basis. The comparability of bed numbers can be affected by the casemix of hospitals incl

n.a. Not available

.. Not applicable.

Note: Private hospital data are preliminary. Most were provided by the states and territories. New South Wales freestanding day hospital facility beds are for 2001–02 (ABS 2003). Northern Territory private hospital data from published source (APN Business

## Table 2.3: Summary of separation<sup>(a)</sup>, patient day and average length of stay statistics, by hospital type, Australia, 1998–99 to 2002–03<sup>(b)</sup>

					_	% chan	ige <sup>(c)</sup>
	1998–99	1999–00	2000–01	2001–02	2002–03	Ave since 1998–99	Since 2001–02
Separations ('000)							
Public hospitals	3,860	3,873	3,882	3,966	4,091	1.5	3.2
Public acute hospitals	3,839	3,855	3,864	3,949	4,074	1.5	3.2
Public psychiatric hospitals <sup>(d)</sup>	20	18	18	17	17	-4.8	0.2
Private hospitals <sup>(e)(f)</sup>	1,875	2,026	2,272	2,433	2,563	8.1	5.3
Private free-standing day hospital facilities (f)	261	280	333	377	455	14.9	20.8
Other private hospitals <sup>(f)</sup>	1,614	1,746	1,939	1,985	2,040	6.0	2.7
Public acute & private hospitals <sup>(g)</sup>	5,715	5,881	6,136	6,382	6,637	3.8	4.0
Total	5,735	5,899	6,154	6,398	6,654	3.8	4.0
Overnight separations ('000)							
Public hospitals	2,141	2,106	2,086	2,076	2,091	-0.6	0.7
Public acute hospitals	2,123	2,091	2,071	2,062	2,007	-0.5	0.7
Public psychiatric hospitals	18	_,001	15	14	_,011	-6.3	-1.4
Private hospitals <sup>(e)(f)</sup>	847	889	943	973	986	3.9	1.3
Private free-standing day hospital facilities <sup>(f)</sup>	2	2	3	4	4	25.3	2.9
Other private hospitals <sup>(f)</sup>	845	886	940	937	951	3.0	1.5
Public acute & private hospitals <sup>(g)</sup>	2,970	2,979	3,014	3,035	3,063	0.8	0.9
Total	2,988	2,995	3,029	3,049	3,076	0.0	0.9
Same day separations ('000)	_,	_,	-,	-,	-,	••••	
Public hospitals	1,719	1,767	1,796	1,889	2,000	3.9	5.9
Public acute hospitals	1,716	1,764	1,793	1,887	1,997	3.9	5.9
Public psychiatric hospitals	2	1,704	1,793	3	1,337	5.4	5.9 8.5
Private hospitals <sup>(e)(f)</sup>	1,028	1,137	1,329	1,460	1,577	11.3	8.1
Private free-standing day hospital facilities <sup>(f)</sup>	260	278	330	373	451	14.8	21.0
Other private hospitals <sup>(f)</sup>	769	860	1,000	1,049	1,089	9.1	3.9
Public acute & private hospitals <sup>(g)</sup>	2,745	2,902	3,122	3,346	3,575	6.8	5.9 6.8
Total	2,745 <b>2,747</b>	2,902 <b>2,904</b>	3,122 3,125	3,340 3,349	3,575 3,577	6.8	6.8
	2,141	2,304	5,125	3,343	5,577	0.0	0.0
Same day separations as a % of total							
Public hospitals	44.5	45.6	46.3	47.6	48.9	2.4	2.6
Public acute hospitals	44.7	45.8	46.4	47.8	49.0	2.3	2.6
Public psychiatric hospitals	11.3	13.3	17.7	15.7	17.0	10.7	8.4
Private hospitals <sup>(e)(f)</sup>	54.8	56.1	58.5	60.0	61.5	2.9	2.6
Private free-standing day hospital facilities <sup>(f)</sup>	99.4	99.2	99.2	99.0	99.1	-0.1	0.2
Other private hospitals <sup>(f)</sup>	47.6	49.2	51.5	52.8	53.4	2.9	1.1
Public acute & private hospitals <sup>(g)</sup>	48.0	49.3	50.9	52.4	53.9	2.9	2.7
Total	47.9	49.2	50.8	52.3	53.8	2.9	2.7
Separations per 1,000 population <sup>(h)</sup>							
Public hospitals	207.1	204.6	201.8	202.6	205.7	-0.2	1.5
Public acute hospitals	206.0	203.7	200.9	201.8	204.8	-0.1	1.5
Public psychiatric hospitals	1.1	0.9	0.9	0.9	0.8	-5.8	-0.8
Private hospitals <sup>(e)(f)</sup>	102.3	108.4	119.8	125.1	129.5	6.1	3.5
Private free-standing day hospital facilities (f)	14.4	15.1	18.1	20.2	23.9	13.6	18.6
Other private hospitals <sup>(f)</sup>	88.0	93.5	98.9	104.7	105.5	4.6	0.8
Public acute & private hospitals <sup>(g)</sup>	307.5	311.3	319.3	326.9	334.3	2.1	2.3
Total	308.6	312.3	320.2	327.7	333.9	2.0	1.9

Table 2.3 (continued): Summary of separation<sup>(a)</sup>, patient day and average length of stay statistics, by hospital type, Australia, 1998–99 to 2002–03<sup>(b)</sup>

						% cha	nge <sup>(c)</sup>
	1998–99	1999–00	2000–01	2001–02	2002–03	Ave since 1998–99	Since 2001–02
Average public cost weight of separations <sup>(i)</sup>	1000 00	1000 00	2000 01	2001 02	2002 00		
Public hospitals	1.02	1.02	1.00	0.99	0.99	-0.9	-0.4
Public acute hospitals	1.02	1.02	1.00	0.99	0.98	-0.9	-0.4
Public psychiatric hospitals	1.99	1.95	1.79	1.88	1.88	-1.5	0.0
Private hospitals <sup>(d)(e)</sup>	0.94	0.94	0.91	0.91	0.90	-1.0	-1.2
Private free-standing day hospital facilities <sup>(e)</sup>	0.54	0.51	0.50	0.51	0.50	-0.9	-1.7
Other private hospitals <sup>(e)</sup>	1.01	1.01	0.99	0.99	0.99	-0.3	0.2
Public acute & private hospitals <sup>(f)</sup>	0.99	0.99	0.99	0.99	0.95	-0.4	-0.2
Total	0.99 <b>1.00</b>		0.97 0.97	0.96 <b>0.96</b>	0.95 <b>0.95</b>	-1.1 - <b>1.1</b>	-0.7 - <b>0.7</b>
	1.00	0.99	0.97	0.90	0.95	-1.1	-0.7
Average private cost weight of separations <sup>(i)</sup>							
Private hospitals <sup>(d)(e)</sup>	0.91	0.89	0.87	0.88	0.86	-1.4	-2.5
Private free-standing day hospital facilities <sup>(e)</sup>	0.50	0.47	0.45	0.46	0.46	-1.9	-1.2
Other private hospitals <sup>(e)</sup>	0.98	0.96	0.94	0.96	0.95	-0.8	-1.2
Patient days ('000)							
Public hospitals	16,274	16,243	15,726	16,237	16,426	0.2	1.2
Public acute hospitals	14,989	15,087	15,010	15,223	15,507	0.9	1.9
Public psychiatric hospitals	1,285	1,156	716	1,015	919	-8.0	-9.4
Private hospitals <sup>(e)(f)</sup>	6,045	6,361	6,743	6,964	7,124	4.2	2.3
Private free-standing day hospital facilities (f)	261	280	333	377	455	14.9	20.8
Other private hospitals <sup>(f)</sup>	5,784	6,081	6,410	6,366	6,458	2.8	1.5
Public acute & private hospitals <sup>(9)</sup>	21,034	21,448	21,753	22,186	22,631	1.8	2.0
Total	22,319	22,604	22,469	23,201	23,550	1.4	1.5
	,	,	,		_0,000		
Patient days per 1,000 population <sup>(h)</sup>							
Public hospitals	884.0	865.1	820.0	827.8	774.7	-3.2	-6.4
Public acute hospitals	815.1	804.2	782.8	775.9	774.7	-1.3	-0.2
Public psychiatric hospitals	68.9	60.9	37.1	51.9	46.4	-9.4	-10.6
Private hospitals <sup>(e)(f)</sup>	332.7	342.4	356.8	357.0	357.3	1.8	0.1
Private free-standing day hospital facilities <sup>(f)</sup>	14.4	15.1	18.1	20.2	23.9	13.6	18.6
Other private hospitals <sup>(f)</sup>	318.4	327.4	336.7	334.9	332.2	1.1	-0.8
Public acute & private hospitals <sup>(g)</sup>	1,145.7	1,144.5	1134.9	1,133.0	1,132.0	-0.3	-0.1
Total	1,214.6	1,205.4	1172.0	1,182.5	1,176.0	-0.8	-0.5
Average length of stay (days)							
Public hospitals	4.2	4.2	4.1	4.1	4.0	-1.2	-1.9
Public acute hospitals	3.9	3.9	3.9	3.9	3.8	-0.6	-1.3
Public psychiatric hospitals <sup>(d)</sup>	63.4	64.4	40.1	60.9	55.1	-3.4	-9.6
Private hospitals <sup>(e)(f)</sup>	3.2	3.1	3.0	2.9	2.8	-3.6	-2.9
Private free-standing day hospital facilities (f)	1.0	1.0	1.0	1.0	1.0	0.0	-0.0
Other private hospitals <sup>(f)</sup>	3.6	3.5	3.3	3.2	3.2	-3.0	-1.2
Public acute & private hospitals <sup>(g)</sup>	3.0					-3.0 -1.9	-1.2
		3.6	3.5	3.5	3.4		
Total	3.9	3.8	3.7	3.6	3.5	-2.3	-2.4
Average length of stay, excluding same							
day separations (days)							
Public hospitals	6.8	6.9	6.7	6.9	6.9	0.4	-0.2
Public acute hospitals	6.3	6.4	6.4	6.5	6.5	1.0	0.6
Public psychiatric hospitals <sup>(d)</sup>	71.4	74.1	48.6	72.1	66.2	-1.9	-8.2
Private hospitals <sup>(e)(f)</sup>	5.9	5.9	5.7	5.7	5.6	-1.3	-0.5
Private free-standing day hospital facilities (f)	1.0	1.0	1.0	1.0	1.0	0.0	-3.5
Other private hospitals <sup>(f)</sup>	5.9	5.9	5.8	5.7	5.6	-1.2	-0.5
Public acute & private hospitals <sup>(g)</sup>	6.2	6.2	6.2	6.2	6.2	0.3	0.2
Total	6.6	6.6	6.4	6.5	6.5	-0.2	-0.3

Table 2.3 (continued): Summary of separation<sup>(a)</sup>, patient day and average length of stay statistics, by hospital type, Australia, 1998–99 to 2002–03<sup>(b)</sup>

						% char	ge <sup>(c)</sup>
	1998–99	1999–00	2000–01	2001–02	2002–03	Ave since 1998–99	Since 2001–02
Indirectly standardised relative stay index <sup>(k)</sup>							
Public hospitals	1.00	0.99	0.98	0.98	0.96		
Public acute hospitals	0.98	0.98	0.97	0.95	0.98		
Public psychiatric hospitals <sup>(d)</sup>	1.34	1.28	1.29	1.31	1.33		
Private hospitals <sup>(e)(f)</sup>	1.09	1.06	1.05	1.02	1.00		
Private free-standing day hospital facilities (f)	0.72	0.74	0.75	0.73	0.73		
Other private hospitals <sup>(f)</sup>	1.11	1.08	1.06	1.03	1.02		
Public acute & private hospitals <sup>(g)</sup>	1.03	1.01	1.00	0.99	0.97		
Total	1.03	1.01	1.00	0.99	0.97		
Directly standardised relative stay index <sup>(I)</sup>							
Public hospitals	1.02	0.99	0.99	0.98	0.96	-1.3	-1.7
Public acute hospitals	1.01	0.99	0.99	0.98	0.96	-1.2	-1.7
Public psychiatric hospitals <sup>(d)</sup>	n.p.	n.p.	n.p.	n.p.	n.p.	n.p.	n.p.
Private hospitals <sup>(e)(f)</sup>	1.11	1.09	1.08	1.06	1.06	-1.1	-0.1
Private free-standing day hospital facilities (f)	n.p.	n.p.	n.p.	n.p.	n.p.	n.p.	n.p.
Other private hospitals <sup>(t)</sup>	1.13	1.10	1.09	1.08	1.08	-1.1	-0.0
Public acute & private hospitals <sup>(g)</sup>	1.03	1.01	1.00	0.99	0.97	-1.4	-1.5
Total	1.03	1.01	1.00	0.99	0.97	-1.4	-1.5

(a) Separations for which the care type was reported as Newborn with no qualified days, and records for Hospital boarders and Posthumous organ procurement have been excluded.

(b) For 1998–99 to 2002–03 data on separations and patient days for public patients, private patients and other categories of patients in the public and private sector are presented in Table 6.5.

(c) Annual average change.

(d) Caution should be used with average length of stay for public psychiatric hospitals. The figures include a small percentage of long stay patients who can affect the average markedly. The median length of stay in 2002–03 was 7 days and the median length of stay excluding same day separations was 9 days.
(e) Includes private psychiatric hospitals. Coverage of private hospitals is incomplete for some states and territories. See Appendix 4 for details.

(f) The hospital type was not specified for Tasmanian private hospitals reporting to the National Hospital Morbidity Database for 2000–01, 2001–02 and 2002–03. Thus, data for Tasmania are included in the total for private hospitals but not for the private hospital subcategories.

(g) Excludes public psychiatric hospitals.

(h) Figures are rates per 1,000 directly age-standardised to the Australian population at 30 June 2001. For private hospitals, rates were derived using populations of the reporting states and territories only, without adjustment for incomplete reporting.

(i) AR-DRGs version 4.2 and public national cost weights 2001–02 were used for all rows under Average public cost weight of separations.

(j) AR-DRGs version 4.2 and private national cost weights for 2001-02 were used for all rows in Average private cost weight of separations.

(k) Relative stay index based on all hospitals combined for the five-year period 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 five-year average based on the casemix of that group. See Appendix 3 for details on the methodology.

(I) Relative stay index based on all hospitals combined for the five-year period using the direct method. The directly standardised relative stay index is comparable between cells. See Appendix 3 for details on the methodology.

. . Not applicable

n.p. Not published, because there were too few AR-DRGs in the group.

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total <sup>(b)</sup>
Separations									
Public hospitals	1,291,174	1,149,840	702,166	367,825	367,859	80,215	63,743	68,149	4,090,971
Public acute hospitals	1,280,367	1,149,404	701,701	365,879	365,117	79,933	63,743	68,149	4,074,293
Public psychiatric hospitals	10,807	436	465	1,946	2,742	282			16,678
Private hospitals <sup>(c)</sup>	708,976	651,106	602,165	280,598	211,711	n.p.	n.p.	n.p.	2,562,801
Private free-standing day hospital facilities <sup>(c)</sup>	160,361	96,742	135,926	29,425	32,640	n.p.	n.p.	n.p.	455,094
Other private hospitals <sup>(c)</sup>	548,615	554,364	466,239	251,173	179,071	n.p.	n.p.	n.p.	2,039,731
Public acute & private hospitals <sup>(i)</sup>	1,989,343	1,800,510	1,303,866	646,477	576,828	n.p.	n.p.	n.p.	6,637,094
Total	2,000,150	1,800,946	1,304,331	648,423	579,570	n.p.	n.p.	n.p.	6,653,772
Overnight separations									
Public hospitals	736,259	525,369	358,734	187,005	185,455	40,935	27,598	29,379	2,090,734
Public acute hospitals	727,964	524,937	358,272	185,085	182,996	40,657	27,598	29,379	2,076,888
Public psychiatric hospitals	8,295	432	462	1,920	2,459	278	, 	·	13,846
Private hospitals <sup>(c)</sup>	260,680	248,156	219,880	117,411	89,260	n.p.	n.p.	n.p.	985,678
Private free-standing day hospital facilities <sup>(c)</sup>	3,501	1	0	445	6	n.p.	n.p.	n.p.	3,953
Other private hospitals <sup>(c)</sup>	257,179	248,155	219,880	116,966	89,254	n.p.	n.p.	n.p.	950,549
Public acute & private hospitals <sup>(i)</sup>	988,644	773,093	578,152	302,496	272,256	n.p.	n.p.	n.p.	3,062,566
Total	996,939	773,525	578,614	304,416	274,715	n.p.	n.p.	n.p.	3,076,412
Same day separations	,			2				•	
Public hospitals	554,915	624,471	343,432	180,820	182,404	39,280	36,145	38,770	2,000,237
Public acute hospitals	552,403	624,467	343,429	180,794	182,121	39,276	36,145	38,770	1,997,405
Public psychiatric hospitals	2,512	4	3	26	283	4			2,832
Private hospitals <sup>(c)</sup>	448,296	402,950	382,285	163,187	122,451	n.p.	n.p.	n.p.	1,577,123
Private free-standing day hospital facilities <sup>(c)</sup>	156,860	96,741	135,926	28,980	32,634	n.p.	n.p.	n.p.	451,141
Other private hospitals <sup>(c)</sup>	291,436	306,209	246,359	134,207	89,817	n.p.	n.p.	n.p.	1,089,182
Public acute & private hospitals <sup>(i)</sup>	1,000,699	1,027,417	725,714	343,981	304,572	n.p.	n.p.	n.p.	3,574,528
Total	1,003,211	1,027,421	725,717	344,007	304,855	n.p.	n.p.	n.p.	3,577,360
Same day separations as a % of total									
Public hospitals	43.0	54.3	48.9	49.2	49.6	49.0	56.7	56.9	48.9
Public acute hospitals	43.1	54.3	48.9	49.4	49.9	49.1	56.7	56.9	49.0
Public psychiatric hospitals	23.2	0.9	0.6	1.3	10.3	1.4			17.0
Private hospitals <sup>(c)</sup>	63.2	61.9	63.5	58.2	57.8	n.p.	n.p.	n.p.	61.5
Private free-standing day hospital facilities <sup>(c)</sup>	97.8	100.0	100.0	98.5	100.0	n.p.	n.p.	n.p.	99.1
Other private hospitals <sup>(c)</sup>	53.1	55.2	52.8	53.4	50.2	n.p.	n.p.	n.p.	53.4
Public acute & private hospitals <sup>(i)</sup>	50.3	57.1	55.7	53.2	52.8	n.p.	n.p.	n.p.	53.9
Total	50.2	57.0	55.6	53.1	52.6	n.p.	n.p.	n.p.	53.8

Table 2.4: Summary of separation<sup>(a)</sup>, average cost weight, patient day and average length of stay statistics, by hospital type, states and territories, 2002–03

Table 2.4 (continued): Summary of separation<sup>(a)</sup>, average cost weight, patient day and average length of stay statistics, by hospital type, states and territories, 2002–03

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total <sup>(b)</sup>
Separations per 1,000 population <sup>(e)</sup>									
Public hospitals	190.2	231.3	189.4	195.4	231.0	164.5	219.7	422.5	205.7
Public acute hospitals	188.6	231.2	189.3	194.4	229.2	163.9	219.7	422.5	204.8
Public psychiatric hospitals	1.6	0.1	0.1	1.0	1.8	0.6			0.8
Private hospitals <sup>(c)</sup>	104.2	130.4	162.8	148.1	130.0	n.p.	n.p.	n.p.	129.5
Private free-standing day hospital facilities <sup>(c)</sup>	23.6	19.5	36.6	15.5	19.6	n.p.	n.p.	n.p.	23.9
Other private hospitals <sup>(c)</sup>	80.6	111.0	126.2	132.7	110.4	n.p.	n.p.	n.p.	105.5
Public acute & private hospitals <sup>(i)</sup>	292.8	361.6	352.0	342.5	359.2	n.p.	n.p.	n.p.	334.3
Total	294.4	361.7	352.1	343.5	361.1	n.p.	n.p.	n.p.	333.9
Average public cost weight of separations <sup>(f)</sup>									
Public hospitals	1.03	0.96	0.97	0.96	1.00	1.08	0.94	0.75	0.99
Public acute hospitals	1.03	0.96	0.97	0.95	0.99	1.07	0.94	0.75	0.98
Public psychiatric hospitals	1.55	2.55	2.66	2.41	2.68	2.68			1.88
Private hospitals <sup>(c)</sup>	0.92	0.89	0.88	0.86	0.95	n.p.	n.p.	n.p.	0.90
Private free-standing day hospital facilities <sup>(c)</sup>	0.55	0.44	0.50	0.44	0.50	n.p.	n.p.	n.p.	0.50
Other private hospitals <sup>(c)</sup>	1.03	0.97	1.00	0.91	1.04	n.p.	n.p.	n.p.	0.99
Public acute & private hospitals <sup>(i)</sup>	0.99	0.93	0.93	0.91	0.98	n.p.	n.p.	n.p.	0.95
Total	0.99	0.93	0.93	0.92	0.98	n.p.	n.p.	n.p.	0.95
Average private cost weight of separations <sup>(g)</sup>						•		•	
Private hospitals <sup>(c)</sup>	0.86	0.86	0.84	0.82	0.89	n.p.	n.p.	n.p.	0.86
Private free-standing day hospital facilities <sup>(c)</sup>	0.50	0.43	0.45	0.38	0.41	n.p.	n.p.	n.p.	0.46
Other private hospitals <sup>(c)</sup>	0.98	0.93	0.95	0.87	0.98	n.p.	n.p.	n.p.	0.95
Patient days								·	
Public hospitals	5,695,687	4,224,297	2,772,005	1,450,914	1,504,023	354,296	219,493	205,745	16,426,460
Public acute hospitals	5,333,202	4,190,384	2,436,481	1,375,537	1,409,552	336,927	219,493	205,745	15,507,32
Public psychiatric hospitals	362,485	33,913	335,524	75,377	94,471	17,369			919,139
Private hospitals <sup>(c)</sup>	1,893,686	1,829,025	1,697,289	784,936	599,101	n.p.	n.p.	n.p.	7,123,940
Private free-standing day hospital facilities <sup>(c)</sup>	160,361	96,742	135,926	29,425	32,640	n.p.	n.p.	n.p.	455,094
Other private hospitals <sup>(c)</sup>	1,733,325	1,732,283	1,561,363	755,511	566,461	n.p.	n.p.	n.p.	6,458,14
Public acute & private hospitals <sup>(i)</sup>	7.226.888	6,019,409	4,133,770	2,160,473	2,008,653	n.p.	n.p.	n.p.	22,631,261
Total	7,589,373	6,053,322	4,469,294	2,235,850	2,103,124	n.p.	n.p.	n.p.	23,550,400
Patient days per 1,000 population <sup>(a)</sup>									
Public hospitals	827.5	839.0	753.7	785.0	904.4	709.9	790.9	1,333.1	774.7
Public acute hospitals	773.9	832.1	663.5	745.1	843.1	674.8	790.9	1,333.1	774.7
Public psychiatric hospitals	53.6	6.9	90.3	39.8	61.3	35.1		, · ·	46.4
Private hospitals <sup>(c)</sup>	275.3	362.3	464.4	423.4	354.9	n.p.	n.p.	n.p.	357.3
Private free-standing day hospital facilities <sup>(c)</sup>	23.6	19.5	36.6	15.5	19.6	n.p.	n.p.	n.p.	23.9
Other private hospitals <sup>(c)</sup>	251.7	342.9	427.8	408.0	335.3	n.p.	n.p.	n.p.	332.2
Public acute & private hospitals <sup>(I)</sup>	1,049.2	1,194.4	1,127.9	1,168.6	1,198.0	n.p.	n.p.	n.p.	1,132.0
Total	1,102.8	1,201.3	1,218.1	1,208.4	1,259.3	n.p.	n.p.	n.p.	1,176.0

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total <sup>(b)</sup>
Average length of stay (days)									
Public hospitals	4.4	3.7	3.9	3.9	4.1	4.4	3.4	3.0	4.0
Public acute hospitals	4.2	3.6	3.5	3.8	3.9	4.2	3.4	3.0	3.8
Public psychiatric hospitals <sup>(h)</sup>	33.5	77.8	721.6	38.7	34.5	61.6			55.1
Private hospitals <sup>(c)</sup>	2.7	2.8	2.8	2.8	2.8	n.p.	n.p.	n.p.	2.8
Private free-standing day hospital facilities <sup>(c)</sup>	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.p.	1.0
Other private hospitals <sup>(c)</sup>	3.2	3.1	3.3	3.0	3.2	n.p.	n.p.	n.p.	3.2
Public acute & private hospitals <sup>(1)</sup>	3.6	3.3	3.2	3.3	3.5	n.p.	n.p.	n.p.	3.4
Total	3.8	3.4	3.4	3.4	3.6	n.p.	n.p.	n.p.	3.5
Average length of stay, excluding same day									
separations (days)									
Public hospitals	7.0	6.9	6.8	6.8	7.1	7.7	6.6	5.7	6.9
Public acute hospitals	6.6	6.8	5.8	6.5	6.7	7.3	6.6	5.7	6.5
Public psychiatric hospitals <sup>(h)</sup>	43.4	78.5	726.2	39.2	38.3	62.5			66.2
Private hospitals <sup>(c)</sup>	5.5	5.7	6.0	5.3	5.3	n.p.	n.p.	n.p.	5.6
Private free-standing day hospital facilities <sup>(c)</sup>	1.0	1.0		1.0	1.0	n.p.	n.p.	n.p.	1.0
Other private hospitals <sup>(c)</sup>	5.6	5.7	6.0	5.3	5.3	n.p.	n.p.	n.p.	5.6
Public acute & private hospitals <sup>(1)</sup>	6.3	6.5	5.9	6.0	6.3	n.p.	n.p.	n.p.	6.2
Total	6.6	6.5	6.5	6.2	6.5	n.p.	n.p.	n.p.	6.5

Table 2.4 (continued): Summary of separation<sup>(a)</sup>, average cost weight, patient day and average length of stay statistics, by hospital type, states and territories, 2002–03

(a) Separations for which the care type was reported as Newborn with no qualified days, and records for Hospital boarders and Posthumous organ procurement have been excluded.

(b) In the Total column, the rates for private hospitals were derived using populations of the reporting states and territories only, without adjustment for incomplete reporting.

(c) Includes private psychiatric hospitals. Coverage of private hospitals is incomplete for some states and territories. See Appendix 4 for details.

(d) The hospital type was not specified for Tasmanian private hospitals. Thus, data for Tasmanian hospitals are included in the total for private hospitals, but not for the private hospital subcategories.

(e) Excludes public psychiatric hospitals.

(f) Figures are directly age-standardised to the Australian population at 30 June 2001.

(g) Separations for which the care type was reported as Acute, or as Newborn with qualified patient days, or was Not reported. Public national cost weights were used for all rows under Average public cost weight of separations.

(h) Separations for which the care type was reported as Acute, or as Newborn with qualified patient days, or was Not reported. Private national cost weights were used for all rows in Average private cost weight of separations.

(i) Caution should be used with average length of stay data for public psychiatric hospitals. The figures include a small percentage of long stay patients who can affect the average markedly.

n.p. Not published.

.. Not applicable.

Type of non-admitted patient care	NSW <sup>(b)</sup>	Vic	Qld	WA	SA	Tas	ACT	NT <sup>(c)</sup>	Total <sup>(d)</sup>
Public acute hospitals									
Individual occasions of service									
Accident & emergency	1,982,190	1,260,848	1,222,777	570,975	472,041	96,604	96,151	94,271	5,795,857
Dialysis	20,215								20,215
Pathology	2,552,693	682,346	2,400,981	667,100		186,983	33,196	71,014	6,594,313
Radiology & organ imaging	782,604	606,455	745,031	336,894	255,534	67,979	60,941	68,202	2,923,640
Endoscopy & related procedures	9,274		3,212						12,486
Other medical/surgical/obstetric	3,826,738	1,439,821	2,265,376	547,788	846,851	224,134	188,212	86,008	9,424,928
Mental health	606,318	783,005	82,345	30,046	19,029	1,831	5,580		1,528,154
Alcohol & drug	883,966	24,718	55,080						963,764
Dental	653,181	152,537	399,396	9,001	6,724	1,892			1,222,731
Pharmacy	837,325	372,220	715,088	159,256		55,638	451	23,476	2,163,454
Allied health	1,458,603	1,011,483	557,500	854,588	233,830	97,740	8,257	13,091	4,235,092
Community health	2,010,932	447,469	208,897	759,274		1,623	492		3,428,687
District nursing	881,769	333,916	65,996	184,866					1,466,547
Other outreach	320,541	3,303	121,083	132,200	375,247	35,393	17,934		1,005,701
Total individual occasions of service	16,826,349	7,118,121	8,842,762	4,251,988	2,209,256	769,817	411,214	356,062	40,785,569
Group sessions									
Other medical/surgical/obstetric	35,747	n.a.	8,436	3	5,903	n.a.	2,017	n.a.	52,106
Mental health	27,087	n.a.	1,714	1,273	1,577	n.a.	1,247	n.a.	32,898
Alcohol & drug	5,114	n.a.		0		n.a.		n.a.	5,114
Allied health	43,363	n.a.	11,406	12,076	6,282	n.a.	636	n.a.	73,763
Community health	57,580	n.a.	2,726	18,853		n.a.		n.a.	79,159
District nursing	4,828	n.a.	143	2,780		n.a.		n.a.	7,751
Other outreach	7,615	n.a.	620	2,016	112,349	n.a.	102	n.a.	122,702
Other	376	n.a.				n.a.		n.a.	376
Total group sessions	181,710	32,432	25,045	37,001	126,111	n.a.	4,002	n.a.	406,301
Public psychiatric hospitals									
Emergency & outpatient individual sessions	184,585	4,408	156	31,520	n.a.	n.a.			220,669
Emergency & outpatient group sessions	5,781	0	0	839	n.a.	n.a.			6,620
Outreach/community individual sessions	2,819	0	83,285	0	n.a.	n.a.			86,104
Outreach/community group sessions	0	0	0	0	n.a.	n.a.			0
Total services	193,185	4,408	83,441	32,359	n.a.	n.a.			313,393

Table 2.5: Non-admitted patient occasions of service <sup>(a)</sup>, by type of non-admitted patient care, public acute and psychiatric hospitals, states and territories, 2002–03

(a) Reporting arrangements have varied significantly across years and across jurisdictions.

(b) Data for New South Wales are preliminary. An updated version of this table will be published on the AIHW website when final New South Wales data become available.

(c) Radiology figures for the Northern Territory are underestimated and pathology figures relate only to 3 of the 5 hospitals.

(d) Includes only those states and territories for which data are available.

n.a. Not available.

.. Not applicable.

	NSW <sup>(a)</sup>	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Accident and emergency services									
Major cities	1,129,749	825,805	459,744	270,053	309,971		96,151		3,091,473
Inner regional	609,493	334,848	356,464	47,999	56,564	63,346	0		1,468,714
Outer regional	212,075	100,195	271,190	100,120	68,191	28,520		36,768	817,059
Total regional	821,568	435,043	627,654	148,119	124,755	91,866	0	36,768	2,285,773
Remote	22,026	0	78,200	90,689	26,195	3,236		41,767	262,113
Very remote	8,847		57,179	62,114	11,120	1,502		15,736	156,498
Total remote	30,873	0	135,379	152,803	37,315	4,738		57,503	418,611
Total	1,982,190	1,260,848	1,222,777	570,975	472,041	96,604	96,151	94,271	5,795,857
Ratio of accident and emergency s	ervices provide	ed in area to 1	.000 populatior	resident in ar	ea <sup>(b)</sup>				
Major cities	238	231	236	199	284		300		237
Inner regional	447	325	371	201	298	210	0		360
Outer regional	438	396	414	537	382	177		341	403
Total regional	445	339	389	348	339	199	0	341	374
Remote	564	0	842	999	572	388		1,001	808
Very remote	1,112		1,070	1,248	795	587		320	874
Total remote	656	0	925	1,087	624	435		633	831
Total	299	260	330	297	311	204	299	475	295

Table 2.6: Accident and emergency non-admitted patient occasions of service, by Remoteness Area of hospital, public acute hospitals, states and territories, 2002–03

(a) Data for New South Wales are preliminary. An updated version of this table will be published on the AIHW website when final New South Wales data become available.

(b) The ratio of services provided in the area to the number of residents in the area only approximates population utilisation as services provided in the area may be provided to persons residing in other Remoteness Area categories.

... Not applicable.

Type of non-admitted patient care	NSW & ACT	Vic	Qld	SA & NT	WA	Tas	Total
Accident and emergency <sup>(a)</sup>	73.9	127.2	117.9	45.0	90.3	n.a.	504.9
Outpatient services <sup>(b)</sup>	248.1	562.3	222.8	11.7	75.9	n.a.	1,128.9
Other non-admitted services <sup>(c)</sup>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	136.2
Other	n.a.	n.a.	n.a.	n.a.	n.a.	0.0	44.0
Total	448.9	714.0	342.2	59.8	183.4	65.8	1,814.0

Table 2.7: Non-admitted patient occasions of service ('000), by type of non-admitted patient care, private hospitals, states and territories, 2001-02

(a) Including hospitals which do not have a formal accident and emergency unit but which treated accident and emergency patients during the year.

(b) Includes Dialysis, Radiology and organ imaging, Endoscopy, Pathology, Other medical/surgical/diagnostic, Psychiatric, Alcohol and drug, Dental, Pharmacyand Allied health services.

(c) Includes Community health services, District nursing services and Non-medical and social services.

n.a. Not available.

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