4 Australia's hospital resources

This chapter presents an overview of public and private hospitals in 2008-09, covering the number and types of hospitals and availability of beds. This chapter also describes public hospitals in terms of public hospital expenditure and revenue, the number of full-time equivalent staff employed, and specialised services provided.

What data are reported?

The hospital types reported in this chapter are:

- public acute hospitals and public psychiatric hospitals (public hospitals)
- private free-standing day hospital facilities and other private hospitals (includes private acute and private psychiatric hospitals).

Information on public hospital resources was derived from the National Public Hospital Establishments Database (NPHED). Financial data reported from the NPHED are not directly comparable with data reported in the annual AIHW publication of *Health expenditure Australia* 2007–08 (AIHW 2009b). In the latter, trust fund expenditure is included (whereas it is not generally included in the data here), and hospital expenditure may be defined to cover activity not covered by this data collection.

Information on expenditure and revenue for private hospitals was sourced from the Australian Bureau of Statistics' *Private hospitals Australia* (ABS 2010). For 2008–09, information on the number of private hospitals and private hospital bed numbers was mainly provided by states and territories. Information on the number of *Private free-standing day hospital facilities* and beds for New South Wales, South Australia and the Northern Territory was sourced from the Department of Health and Ageing (DoHA 2010, unpublished data) as data were not available from states and territories (see *Appendix 1*).

Box 4.1 What are the limitations of the data?

Hospitals

• 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 2*).

Hospital beds

- Comparability of bed numbers can be affected by the range and types of patients treated by a hospital (casemix), with for example, different proportions of beds being available for special and more general purposes. Public and private hospital bed numbers presented in this chapter are based on different definitions.
- The number of average available beds presented in this report may differ from the counts published elsewhere. For example, counts based on a specified date, such as 30 June, may differ from the average available beds for the reporting period.

Box 4.1 (continued)

Public hospital financial data

 A small number of establishments in 2008–09 did not report any financial data, or reported incomplete financial data.

Public hospital expenditure

- Capital formation expenditure is not reported in this publication. Not all jurisdictions were able to report using the *National health data dictionary* (HDSC 2006) categories and the comparability of the data may not be adequate for reporting.
- Recurrent expenditure reported in this chapter was largely expenditure by hospitals
 and may not necessarily include all expenditure spent on hospital services by each state
 or territory government, such as recurrent expenditure on purchase of public hospital
 services at the state or area health service level from privately owned and/or operated
 hospitals.
- Expenditure on public patients hospitalised in other jurisdictions may not be included in the report.

Public hospital revenue

- Revenue reported in this chapter was largely revenue received by individual hospitals, and may not necessarily include all revenue received by each state or territory government for provision of public hospital services.
- There was some variation among the states and territories in the treatment of revenue data, for example in the treatment of Australian Government grants and asset sales (see *Appendix* 2).

Public hospital staffing

- The collection of data by staffing category was not consistent among states and territories for some jurisdictions, best estimates were reported for some staffing categories.
- There was variation in the reporting of *Other personal care staff* and *Domestic and other staff*. Queensland noted that there was little difference between these categories, and that an employee may perform different functions within these two categories on different days (see *Appendix* 2).
- The outsourcing of services with a large labour-related component (such as food services and domestic services) can have a substantial impact on staffing figures.
 Differences in outsourcing may explain some of the differences in full-time equivalent staff in some staffing categories and also some of the differences between the states and territories.
- Different reporting practices and use of outsourced services may also explain some of
 the variation in average salaries reported for *Diagnostic and allied health professionals*,
 Other personal care staff and *Domestic and other staff*. The degree of outsourcing of higher
 paid versus lower paid staffing functions affect the comparison of averages. For
 example, outsourcing the provision of domestic services but retaining domestic service
 managers to oversee the activities of the contractors tends to result in higher average
 salaries for the domestic service staff.

Box 4.2 What methods were used?

- The Remoteness area of hospital presented in chapter was based on the ABS 2006 classification (see *Appendix 1*). Beds per 1,000 population in remoteness area is reported as a crude rate based on the 30 June 2008 population in the remoteness area in question.
- Depreciation represents a significant portion of expenditure, and expenditure totals are reported including and excluding depreciation to ensure comparable figures are available across jurisdictions.
- The Mersey Community Hospital data was included with private hospitals in presentations of hospital resources.

How do hospitals vary across states and territories?

Hospital numbers

Table 4.1 presents the number of public and private hospitals by state and territory for 2008–09. It shows 30% of reported hospitals were in New South Wales, 23% in Victoria, 21% in Queensland and 11% in Western Australia.

Table 4.1: Public and private hospitals, states and territories, 2008-09

	NSW	Vic ^(a)	Qld ^(b)	WA	SA	Tas ^(c)	ACT	NT	Total
Public hospitals									
Public acute hospitals	219	148	166	93	78	25	3	5	737
Public psychiatric hospitals	8	1	4	1	2	3	0	0	19
Private hospitals ^(d)									
Private free-standing day hospital facilities	89	74	53	29	28	2	9	1	285
Other private hospitals	84	75	53	23	30	7	3	1	276
Total	400	298	276	146	138	37	15	7	1,317

Notes: See Box 4.1 and 4.2 for notes on data limitations and methods.

Bed numbers

In 2008–09, the number of available beds in public hospitals ranged from 2.4 per 1,000 population in Victoria, to 3.0 per 1,000 population in South Australia (Table 4.2). The total number of available beds in public and private hospitals combined ranged from 3.2 per 1,000 population in the Northern Territory to 4.6 per 1,000 population in Tasmania in 2008–09.

⁽a) The number of hospitals in Victoria is reported as a count of the campuses that reported data separately to the National Hospital Morbidity

⁽b) The count of private hospitals and licensed beds in Queensland was based on data as at June 2009.

⁽c) Mersev community hospital is included in *Other private hospitals*.

⁽d) Information on the number of private hospitals was mainly provided by states and territories. Information on the number of Private free-standing day hospital facilities for New South Wales, South Australia and the Northern Territory was sourced from the Department of Health and Ageing (DoHA 2010, unpublished data).

Table 4.2: Public and private hospital average available beds^(a) and number of average available beds per 1,000 population^(b), states and territories, 2008–09

	NSW	Vic	QId ^(c)	WA	SA	Tas ^(d)	ACT	NT	Total
Average available or licensed beds ^(a)									
Public hospitals									
Public acute hospitals	18,844	12,715	10,347	5,155	4,600	1,196	875	606	54,338
Public psychiatric hospitals	961	154	458	214	274	79			2,140
Private hospitals ^(e)									
Private free-standing day hospital facilities	644	589	411	294	150	9	64	7	2,168
Other private hospitals	6,070	6,802	6,003	2,815	2,158	1,026	327	97	25,298
Total beds	26,519	20,260	17,219	8,478	7,182	2,310	1,266	710	83,944
Average available or licensed beds per 1,000	populatio	n ^{(a)(b)}							
Public hospitals									
Public acute hospitals	2.7	2.4	2.4	2.3	2.9	2.4	2.5	2.7	2.5
Public psychiatric hospitals	0.1	0.0	0.1	0.1	0.2	0.2			0.1
Private hospitals ^(e)									
Private free-standing day hospital facilities	0.1	0.1	0.1	0.1	0.1	0.0	0.2	0.0	0.1
Other private hospitals	0.9	1.3	1.4	1.3	1.3	2.1	0.9	0.4	1.2
Total beds per 1,000 population ^{(a)(b)}	3.8	3.8	4.0	3.8	4.5	4.6	3.6	3.2	3.9

Public hospitals

How diverse are public hospitals?

The **public hospital peer groups** were designed to explain variability in hospital costs by grouping hospitals according to the type and volume of their admitted patient activity, and their geographical location. A range of other statistics are presented about public hospital peer groups in *chapters 3*, 5 and 10. Detailed information on the public hospital peer group classification is included in *Appendix 1*.

The 756 public hospitals are very diverse in size and the types of services provided for admitted and non-admitted patients (Table 4.3). The diversity of admitted patient services provided by each type can be gauged by the average number of diagnosis related groups reported (AR-DRGs). In 2008–09, there were:

⁽a) The number of average available beds presented here may differ form the counts published elsewhere. For example counts based on bed numbers at a specified date such as 30 June may differ from the average available beds over the reporting period. The Australian Bureau of Statistics' Private hospitals Australia reported 27,180 private hospital beds/chairs (ABS 2010).

⁽b) Average available beds per 1,000 population is reported as a crude rate based on the estimated resident population as at 31 December 2008.

⁽c) The count of private hospitals and licensed beds in Queensland was based on data as at June 2009.

⁽d) Mersey community hospital is included in Other private hospitals.

⁽e) Information on private hospital bed numbers was mainly provided by states and territories. Information on the number of Private freestanding day hospital facilities beds for New South Wales, South Australia and the Northern Territory was sourced from the Department of Health and Ageing (DoHA 2010, unpublished data)

- 74 Principal referral hospitals located mainly in major cities, with at least one in each state and territory. They provided a wide range of services, including emergency department, outpatient and admitted patient services (including 5 or more separations for 398 AR-DRGs on average). These hospitals accounted for a total of 3.1 million separations or 64% of the total for public hospitals (Figure 4.1). These accounted for 10.7 million days or 60% of the total for public hospitals (Figure 4.2).
- 11 Specialist women's and children's hospitals—located in Sydney, Melbourne, Brisbane, Perth and Adelaide. They delivered an average of 20,634 separations, specialising in maternity and other specialist services for women, and/or specialist paediatric services.
- 41 *Large hospitals* 23 in major cities and 18 in regional and remote areas. They provided emergency department, outpatient and admitted patient services, generally with a range of activities less than for the *Principal referral hospitals* (5 or more separations for 259 AR-DRGs), with an average of 15,419 separations per hospital.
- 92 *Medium hospitals* 22 in major cities and 70 in regional areas. They delivered an average of 5,770 separations per hospital (with a narrower range of services than the *Large hospitals*), and most had accident and emergency services (rather than formal emergency departments) and some had outpatient clinics.
- 151 Small acute hospitals 110 in regional areas and 40 in remote areas. They delivered mainly acute care for admitted patients, with an average of 1,205 separations per hospital in the year, with a relatively narrow range of services (5 or more separations for 49 AR-DRGs). They generally did not have emergency departments although most provided accident and emergency services.
- 19 *Psychiatric hospitals* specialising in the treatment and care of people with mental health problems. They were located in Sydney, Melbourne, Brisbane, Perth, Adelaide and Hobart, with 3 in regional Queensland centres.
- 8 specialist *Rehabilitation hospitals*—located in Sydney, Perth and Adelaide, and 2 in regional areas.
- 8 specialist *Mothercraft hospitals*—located in Sydney, Melbourne, Brisbane and Canberra.
- 86 Small non-acute hospitals mainly in rural and remote areas. The services they provided tended to be mainly non-acute, so the average length of stay was longer than in the hospitals that provided mainly acute care.
- 79 *Multi-purpose services* in regional and remote areas. These hospitals were generally combined with services for residential aged care, and mainly provide non-acute admitted patient care.
- 187 other hospitals, mainly small hospitals or specialist hospitals, such as hospices.

More information on hospitals by state and territory is presented in supplementary tables at the end of *Chapter 3*.

Table 4.3: The diversity of public hospitals, 2008-09

	Number of hospitals												
		Loca	ition		5	Service p	rovide	d					
Hospital type	Major cities	Regional	Remote	Total	Emergency departments ^(a)	Accident emergency services ^(b)	Outpatient clinics ^(c)	Elective surgery ^(d)	Average beds	Separations (average)	Average length of stay (days)	Non-acute care (patient days %)	AR-DRGs (5+) ⁽⁶⁾
Principal referral	50	23	1	74	74	74	69	74	411.8	42,058	3.4	8.1	398
Specialist women's and children's	11	0	0	11	9	11	11	11	200.8	20,634	3.1	0.5	227
Large	23	17	1	41	38	41	36	34	143.5	15,419	3.0	13.1	259
Medium	22	70	0	92	34	90	11	55	64.1	5,770	3.2	21.3	146
Small acute	0	110	40	151	18	148	2	33	21.6	1,205	3.2	10.6	49
Psychiatric	10	9	0	19	0	3	0	0	110.7	554	54.7	51.6	10
Rehabilitation	6	2	0	8	0	7	1	1	70.5	1,104	20.8	91.2	27
Mothercraft	8	0	0	8	0	8	0	0	26.5	1,683	3.6	0.0	10
Small non-acute	13	62	11	86	4	83	1	2	28.4	883	8.5	67.9	21
Multi-purpose services	0	47	32	79	0	79	0	3	12.0	345	4.3	29.0	15
Other	32	78	77	187	6	173	0	1	13.1	233	15.0	85.8	22
Total	175	418	162	756	183	717	131	214	74.7	6,434	3.7	17.1	126

Private hospitals expenditure and revenue data were sourced from Private hospitals Australia, 2008–09 (ABS 2010).

⁽a) This is the number of hospitals reporting episode-level non-admitted patient emergency department care data to the National Non-admitted Patient Emergency Department Care Database.

⁽b) This is the number of hospitals reporting establishment-level accident and emergency occasions of service data to the National Public Hospital Establishments Database.

⁽c) This is the number of hospitals reporting outpatient clinic-level non-admitted patient data to the National Outpatient Care Database.

⁽d) This is the number of hospitals reporting episode-level data to the Elective Surgery Waiting Times Data Collection.

⁽e) This is the average number of Diagnosis Related Groups (AR-DRGs) for which there were at least 5 separations.

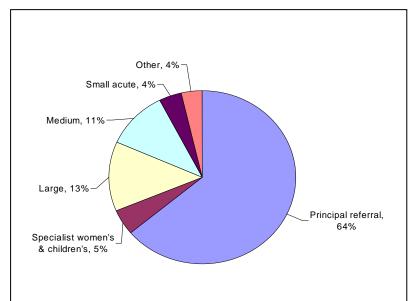


Figure 4.1: Separations (%) for public hospitals, by public hospital peer group, Australia, 2008–09

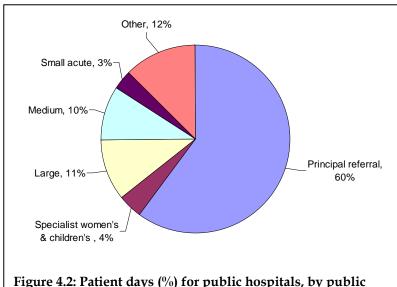


Figure 4.2: Patient days (%) for public hospitals, by public hospital peer group, Australia, 2008–09

Bed numbers

Grouping hospitals by number of available beds showed that there were more small hospitals (Table 4.4). This was particularly the case in jurisdictions that covered large geographical areas. The majority of beds were in larger hospitals and in more densely populated areas. The largest hospital had 1,047 beds. Fifty per cent of hospitals had 26 beds or less.

Table 4.4: Number of public acute and psychiatric hospitals and average available beds, by hospital size, 2008–09

		Proportion of total public hospitals	Average	Proportion of total public hospital beds
Hospital size	Hospitals	(per cent)	available beds	(per cent)
10 or fewer beds	208	28%	951	2%
More than 10 to 50 beds	330	44%	8,119	14%
More than 50 to 100 beds	74	10%	5,288	9%
More than 100 to 200 beds	65	9%	9,855	17%
More than 200 to 500 beds	56	7%	16,876	30%
More than 500 beds	23	3%	15,388	27%
Total	756	100%	56,478	100%

Additional information by states and territories is available in Table S4.1 at the end of this chapter.

Where are public hospitals located?

The remoteness area classification is used in Table 4.5 to present information on the geographical distribution of public hospitals and available beds, and on the number of available beds per 1,000 population. The highest number of hospitals was in *Outer regional* areas (224) and the largest number of beds was in *Major cities* (36,209).

In 2008-09, there were 2.6 public hospital beds per 1,000 population. The number of public hospital beds per 1,000 population varied across remoteness areas. The ratio of available beds to the population does not necessarily indicate the accessibility of hospital services. A hospital can provide services for patients who usually reside in other areas of the state or territory, or in other jurisdictions. The patterns of bed availability across regions may also reflect a number of factors including the availability of other health-care services and patterns of disease and injury.

Table 4.5: Number of hospitals, average available beds and number of average available beds per 1,000 population resident in area^(a), by remoteness area, public acute and psychiatric hospitals, 2008–09

Remoteness area	Hospitals	Average available beds	Average available beds per 1,000 population resident in area ^(a)
Major cities	175	36,209	2.5
Inner regional	194	11,597	2.7
Outer regional	224	6,578	3.3
Total regional	418	18,175	2.9
Remote	90	1,443	4.5
Very remote	72	640	3.8
Total remote	162	2,083	4.3
Total ^(b)	756	56,478	2.6

Notes: See Box 4.1 and 4.2 for notes on data limitations and methods.

Additional information for states and territories is available in Table S4.2 at the end of this chapter.

⁽a) Average available beds per 1,000 population is reported as a crude rate based on the estimated resident population as at 30 June 2008.

⁽b) Remoteness area information for one new public hospital in Victoria in 2008–09 was not available. Hence it is included in statistics for total hospitals but excluded from statistics by remoteness area.

How much expenditure and revenue?

Public hospital recurrent expenditure

Salary expenditure include salaries and wages, payments to staff on paid leave, workers compensation leave and salaries paid to contract staff where the contract was for the supply of labour and where full-time equivalent staffing data were available.

Non-salary expenditure includes items such as Payments to visiting medical officers, Superannuation payments, Drug supplies, Medical and surgical supplies (which include consumable supplies only and not equipment purchases), Food supplies, Domestic services, Repairs and maintenance, Patient transport, Administrative expenses, Interest payments and Depreciation and Other recurrent expenditure.

Information on gross recurrent expenditure, categorised into Salary expenditure and Non-salary expenditure, is presented in Table 4.6. Nationally, total recurrent expenditure excluding depreciation by public acute and psychiatric hospitals was over \$31.3 billion in 2008–09.

With payments to *Visiting medical officers* and payments for outsourced services excluded, salary payments accounted for 63% of the \$31.3 billion spent within the public hospital system.

Depreciation represents a significant portion of expenditure, and expenditure totals are reported including and excluding depreciation to ensure comparable figures are available across jurisdictions. In 2008–09, depreciation ranged from 4.1% of total expenditure in Queensland to 0.8% in the Northern Territory.

Table 4.6: Recurrent expenditure (\$'000,000)(a), public acute and psychiatric hospitals, states and territories, 2008–09

	NSW ^(b)	Vic	Qld ^(c)	WA	SA	Tas	ACT	NT	Total
Salary expenditure	6,253	5,013	3,736	2,134	1,507	407	355	288	19,695
Non-salary expenditure	4,338	3,219	2,263	1,208	1,038	304	248	158	12,777
Total recurrent expenditure including depreciation	10,592	8,232	6,000	3,343	2,545	712	603	446	32,473
Public acute hospitals	10,374	8,186	5,882	3,263	2,426	696	603	446	31,877
Public psychiatric hospitals	218	46	118	79	119	15			596
Total recurrent expenditure excluding depreciation	10,209	7,912	5,755	3,258	2,467	693	586	443	31,323
Public acute hospitals	9,998	7,868	5,642	3,180	2,350	678	586	443	30,746
Public psychiatric hospitals	211	44	113	78	117	15			577

⁽a) Recurrent expenditure does not include the purchase of public hospital services at the state or area health service level from privately owned and/or operated hospitals.

⁽b) New South Wales hospital expenditure recorded against special purposes and trust funds was not included.

⁽c) Pathology services were purchased from a state-wide pathology service rather than being provided by hospital employees in Queensland. Additional information for states and territories is available in Table S4.3 at the end of this chapter.

Public hospital revenue

Revenue is reported against three categories: Patient revenue, Recoveries, and Other revenue. **Recoveries** are income from the use of hospital facilities by salaried medical officers or private practitioners exercising their rights of private practice, and other recoveries. **Other revenue** includes investment income, income from charities, bequests and accommodation provided to visitors.

Australian public hospitals received \$2.98 billion in revenue in 2008-09 (Table 4.7). This was equivalent to 9.5% of total recurrent expenditure (excluding depreciation). Revenue as a proportion of total expenditure varied among the states and territories.

Table 4.7: Revenue (\$'000), public acute and psychiatric hospitals, states and territories, 2008-09

	NSW	Vic	QId ^(a)	WA	SA ^(b)	Tas	ACT	NT	Total
Patient revenue	611,309	269,616	286,828	127,481	118,700	40,626	39,874	12,172	1,506,605
Recoveries	267,363	123,196	45,258	28,709	n.a.	27,161	10,125	6,745	508,558
Other revenue	229,557	490,255	163,991	39,268	29,293	3,846	3,756	37	960,004
Total revenue	1,108,228	883,067	496,078	195,458	147,993	71,633	53,756	18,954	2,975,167
Public acute	1,098,631	881,910	489,484	195,438	143,700	70,900	53,756	18,954	2,952,772
Psychiatric	9,597	1,157	6,594	21	4,293	734			22,395

Notes: See Box 4.1 and 4.2 for notes on data limitations and methods.

How many staff in public hospitals?

Staff is summarised against six categories: Salaried medical officers, Total nurses, Other personal care staff, Diagnostic and allied health professionals, Administrative and clerical staff, and Domestic and other staff. **Total nurses** includes Registered nurses, Enrolled nurses, and Student nurses.

Nationally, over 246,000 full-time equivalent staff were employed in the public hospital sector in 2008-09. *Nurses* constituted 45.3% (over 111,000) of public hospital staff. There were around 29,000 *Salaried medical officers* employed in public hospitals throughout Australia, representing 11.8% of the public hospital labour force (Table 4.8).

The average salary for full-time equivalent *Nurses* in 2008–09 was around \$78,200 nationally (Table 4.8), which was an increase of 5.3% compared with the average salary of \$74,237 in 2007–08 (AIHW 2009a). In 2008-09, the average salary for full-time equivalent *Salaried medical officers* was around \$158,300 and it was a 4.7% increase over the previous year.

The collection of data by staffing category was not consistent among states and territories and may explain some of the variation on average salaries reported.

Different reporting practices and use of outsourcing services with a large labour-related component (such as food services, domestic services and information technology) can have a substantial impact on staffing figures and may also explain some of the variation in average salaries reported between jurisdictions.

⁽a) Patient revenue in Queensland includes revenue for items such as pharmacy and ambulance, which may be considered to be Recoveries.

⁽b) South Australia did not identify any Recoveries due to a change in data recording practices.

For medical officers, for example, this may be reflected in the variation in the proportion of total expenditure that was reported as being for visiting medical officers (VMOs) who were contracted by hospitals to provide services to public patients and paid on a sessional or feefor-service basis (Table S4.3). Variations in the outsourcing arrangements may also be reflected in variations in other recurrent expenditure categories reported in tables 4.6 and S4.3.

Table 4.8: Average full-time equivalent staff^(a) and average salaries, public acute and psychiatric hospitals, states and territories, 2008–09

	NSW ^(b)	Vic ^(c)	Qld ^(d)	WA	SA ^(e)	Tas ^(f)	ACT	NT	Total
Full-time equivalent staff numb	ers								
Salaried medical officers	8,702	7,323	6,061	2,863	2,450	750	649	369	29,166
Total nurses	37,499	28,745	19,699	10,392	9,678	2,464	2,035	1,358	111,870
Other personal care staff	n.a.	n.a.	967	n.a.	800	n.a.	190	14	n.a.
Diagnostic and allied health professionals	11,584	12,989	4,645	3,059	1,844	510	533	341	35,506
Administrative and clerical staff ^(g)	11,246	10,908	6,255	4,256	3,027	803	687	456	37,640
Domestic and other staff	8,918	6,583	7,268	4,253	1,884	1,089	171	578	30,743
Total staff	77,947	66,548	44,896	24,824	19,683	5,616	4,266	3,114	246,895
Average salaries (\$)									
Salaried medical officers	145,736	153,626	167,835	197,684	158,284	121,052	140,944	191,914	158,305
Total nurses	77,898	78,244	78,454	80,909	73,764	75,319	80,439	94,704	78,200
Other personal care staff	n.a.	n.a.	54,437	n.a.	41,083	n.a.	52,942	70,313	48,984
Diagnostic and allied health professionals	68,760	52,682	80,507	75,707	78,949	85,363	73,427	81,845	65,977
Administrative and clerical staff ^(g)	67,451	49,663	60,661	61,900	52,174	48,691	61,472	61,345	58,728
Domestic and other staff	57,077	62,777	50,589	54,699	36,627	44,394	48,002	55,865	54,659
Total staff (\$)	80,224	75,336	83,227	85,984	76,566	72,535	83,181	92,609	79,772

⁽a) Where average full-time equivalent staff numbers were not available, staff numbers at 30 June 2009 were used. Staff contracted to provide products (rather than labour) are not included.

⁽b) In New South Wales, Other personal care staff were included in Diagnostic and allied health professionals, Domestic and other staff and Total Nurses.

⁽c) For Victoria, full-time equivalent staff numbers may be slightly understated as data were unavailable for one hospital. Other personal care staff were included in Domestic and other staff.

⁽d) Queensland pathology services provided by staff employed by the state pathology service were not reported here.

⁽e) In South Australia, Total nurses include Trainee nurses.

⁽f) For Tasmania, data for Other personal care staff were not supplied separately and are included in other staffing categories. Data for two small hospitals in Tasmania were not supplied.

⁽g) Administrative and clerical staff may include staff working to support clinicans, such as ward clerks.

What specialised services were provided?

Specialised services

In 2008-09, the most common specialised services offered by hospitals were *Domiciliary care service, Obstetric/maternity service* and services provided by *Nursing home care units* (Table 4.9).

The existence of a specialised unit does not necessarily imply the delivery of large numbers of services in that unit. For example, there were some smaller hospitals with an *Obstetric/maternity service* unit that had less than one delivery a week on average. There were also a few hospitals that did not report having an obstetric unit but reported one or more deliveries a day.

Data on specialised services were not available for a few hospitals so the services may be under-enumerated.

Table 4.9: Number of public acute hospitals with selected specialised services, 2008-09

Specialised service unit	Major cities	Regional	Remote	Australia
Domiciliary care service	83	245	64	392
Intensive care unit (level III)	54	21	1	76
In-vitro fertilisation unit	7	2	0	9
Maintenance renal dialysis centre	70	95	16	182
Major plastic/reconstructive surgery unit	40	2	0	42
Neonatal intensive care unit (level III)	22	4	0	26
Nursing home care unit	13	191	57	261
Obstetric/maternity service	64	158	24	246
Oncology unit	61	58	0	119
Rehabilitation unit	80	60	1	141

Notes: See Box 4.1 and 4.2 for notes on data limitations and methods.

Additional information for states and territories is available in Table S4.4 at the end of this chapter.

Service related groups

The Service related group (SRG) classification is based on Australian Refined Diagnosis Related Group (AR-DRG) aggregations and categorises admitted patient episodes into groups representing clinical divisions of hospital activity. SRGs are used to assist in the planning of services, analysing and comparing hospital activity, examining patterns of service needs and access, and projecting potential trends in services. The method to assign records to SRGs largely involves aggregations of AR-DRG information. However, the assignment of some separations to SRGs is based on other information, such as procedures, diagnoses and care types. Separations may also be assigned to certain specialist SRGs depending on whether or not the hospital had a specialist neurosurgery, perinatology (neonatal intensive care unit) or cardiothoracic unit, as appropriate, as reported to the National Public Hospital Establishments Database. For more information on the method used to allocate admitted patient records to SRGs, see *Appendix 4*.

Table 4.10 presents the number of public hospitals reporting more than 360 patient days in each SRG for selected SRGs by remoteness area of the hospital. This has been included as an

indicative measure of the number of specialty units. More detailed statistics are available in Table A4.1 accompanying this report on the Internet at <www.aihw.gov.au>.

Table 4.10: Number of public hospitals reporting more than 360 patient days for selected service related groups, by remoteness area of hospital, 2008-09

Service related group	Major cities	Regional	Remote	Australia
Respiratory Medicine	98	197	20	315
Maintenance	67	176	32	275
Orthopaedics	106	143	13	262
Cardiology	93	154	8	255
Medicine, No Definitive Subspecialty	111	127	6	244
Surgery, No Definitive Subspecialty	102	125	13	240
Gastroenterology	95	106	6	207
Neurology	97	105	3	205
Obstetrics	69	122	12	203
Rehabilitation	95	95	2	192
Immunology & Infections	90	84	11	185
Acute Psychiatry	93	61	5	159
Medical Oncology	82	71	2	155
Acute Definitive Geriatrics	88	61	1	150
Diagnostic GI Endoscopy	82	63	0	145
Endocrinology	86	56	2	144
Renal Dialysis	60	74	6	140
Colorectal Surgery	85	53	1	139
Gynaecology	75	57	3	135
Renal Medicine	85	45	2	132

Notes: See Box 4.1 and 4.2 for notes on data limitations and methods.

Additional information for states and territories is available in tables A4.1 to A4.5 at <www.aihw.gov.au>.

Additional information

Tables A4.2 and A4.3 (accompanying this report on the CD and Internet at <www.aihw.gov.au>) summarise the number of separations in each SRG category by state and territory for all public and private hospitals, respectively.

Tables A4.4 and A4.5 (accompanying this report on the CD and Internet at <www.aihw.gov.au>) summarise the number of patient days in each SRG category by state and territory for all public and private hospitals, respectively.

Supplementary tables

The following supplementary tables provide more information on public hospital resources by state and territory.

Table S4.1: Number of public acute and psychiatric hospitals and average available beds, by hospital size, states and territories, 2008-09

Hospital size ^(a)	NSW	Vic ^(b)	Qld	WA	SA	Tas	ACT	NT	Total
Hospitals									
10 or fewer beds	27	41	72	42	7	18	1	0	208
More than 10 to 50 beds	122	46	64	31	58	7	0	2	330
More than 50 to 100 beds	28	24	10	5	6	0	0	1	74
More than 100 to 200 beds	23	19	10	9	2	1	0	1	65
More than 200 to 500 beds	19	15	9	5	5	1	1	1	56
More than 500 beds	8	4	5	2	2	1	1	0	23
Total	227	149	170	94	80	28	3	5	756
Average available beds									
10 or fewer beds	99	197	270	235	41	99	10		951
More than 10 to 50 beds	3,186	1,071	1,466	738	1,468	150		40	8,119
More than 50 to 100 beds	2,023	1,724	690	330	460			60	5,288
More than 100 to 200 beds	3,464	2,795	1,634	1,345	316	130		171	9,855
More than 200 to 500 beds	5,752	4,727	2,688	1,435	1,387	330	223	335	16,876
More than 500 beds	5,281	2,354	4,057	1,286	1,201	566	642		15,388
Total	19,805	12,869	10,805	5,369	4,874	1,275	875	606	56,478

⁽a) Size is based on the average number of available beds.

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

Table S4.2: Number of hospitals, average available beds^(a) and number of average available beds per 1,000 population resident in area^(b), by remoteness area^(c), public acute and psychiatric hospitals, states and territories, 2008–09

Remoteness area	NSW	Vic ^(c)	Qld	WA	SA	Tas	ACT	NT	Total
Hospitals									
Major cities	68	52	16	22	14		3		175
Inner regional	76	58	26	9	16	9			194
Outer regional	63	36	54	28	28	14		1	224
Total regional	139	94	80	37	44	23		1	418
Remote	14	2	31	22	16	3		2	90
Very remote	6		43	13	6	2		2	72
Total remote	20	2	74	35	22	5		4	162
Total all remoteness areas ^(e)	227	149	170	94	80	28	3	5	756
Average available beds ^{(a)(f)}									
Major cities	13,379	9,294	5,676	3,846	3,139		875		36,209
Inner regional	4,490	2,815	2,330	506	445	1,011			11,597
Outer regional	1,679	735	2,133	597	857	242		335	6,578
Total regional	6,169	3,550	4,463	1,103	1,301	1,253		335	18,175
Remote	225	14	348	276	337	12		231	1,443
Very remote	31		318	144	96	10		40	640
Total remote	256	14	666	420	434	22		271	2,083
Total all remoteness areas ^(e)	19,805	12,869	10,805	5,369	4,874	1,275	875	606	56,478
Number of average available beds per	1,000 population	resident in ar	ea ^(b)						
Major cities	2.6	2.3	2.2	2.5	2.7		2.5		2.5
Inner regional	3.2	2.6	2.5	1.8	2.3	3.1			2.7
Outer regional	3.8	2.9	3.3	3.0	4.7	1.5		2.8	3.3
Total regional	3.3	2.7	2.8	2.3	3.4	2.6		2.8	2.9
Remote	6.9	3.0	4.1	2.9	7.4	1.5		4.8	4.5
Very remote	6.9		6.3	3.0	6.9	3.8		0.8	3.8
Total remote	6.9	3.0	4.9	2.9	7.3	2.1		2.8	4.3
Total all remoteness areas ^(e)	2.8	2.4	2.5	2.5	3.0	2.6	2.5	2.8	2.6

⁽a) The number of average available beds presented here may differ from the counts published elsewhere. For example counts based on bed numbers at a specified date such as 30 June may differ from the average available beds over the reporting period.

⁽b) Average available beds per 1,000 population is reported as a crude rate based on the estimated resident population as at 30 June 2008.

⁽c) Remoteness area of hospital was based on the ABS 2006 remoteness area classification.

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

⁽e) Includes hospitals for which remoteness area was Not reported.

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.

Table S4.3: Recurrent expenditure (\$'000)(a), public acute and psychiatric hospitals, states and territories, 2008-09

Recurrent expenditure category	NSW ^(b)	Vic ^(c)	Qld ^(d)	WA	SA ^(e)	Tas ^(f)	ACT	NT	Total
Salary and wages expenditure									
Salaried medical officers	1,268,121	1,125,045	1,017,307	565,871	387,750	90,775	91,454	70,755	4,617,077
Registered nurses	n.a.	2,249,114	1,396,650	808,834	598,601	168,332	144,447	118,453	n.a.
Enrolled nurses	n.a.	n.a.	147,198	32,001	110,695	17,286	19,223	10,127	n.a.
Student nurses			1,616		4,618				6,234
Total nurses	2,921,056	2,249,114	1,545,464	840,835	713,915	185,618	163,669	128,580	8,748,251
Other personal care staff	n.a.	n.a.	52,654	n.a.	32,864	n.a.	10,067	968	96,553
Diagnostic and allied health professionals	796,498	684,294	373,979	231,621	145,569	43,557	39,169	27,877	2,342,565
Administrative and clerical staff	758,581	541,733	379,415	263,476	157,952	39,105	42,256	27,974	2,210,492
Domestic and other staff	509,005	413,246	367,679	232,642	68,997	48,332	8,223	32,270	1,680,393
Total salary and wages expenditure	6,253,260	5,013,432	3,736,498	2,134,445	1,507,046	407,386	354,838	288,426	19,695,330

(continued)

Table S4.3 (continued): Recurrent expenditure (\$'000)(a), public acute and psychiatric hospitals, states and territories, 2008-09

Recurrent expenditure category	NSW ^(b)	Vic ^(c)	$Qld^{(d)}$	WA	SA ^(e)	Tas ^(f)	ACT	NT	Total
Non-salary expenditure									
Payments to visiting medical officers	534,498	127,042	100,321	107,595	121,365	20,329	32,396	5,158	1,048,704
Superannuation payments	570,936	432,610	353,494	174,141	137,297	42,156	43,010	20,402	1,774,046
Drug supplies	506,865	431,712	292,818	178,846	116,060	38,114	16,892	19,678	1,600,986
Medical and surgical supplies	930,114	705,133	593,334	222,426	176,377	79,868	51,713	30,306	2,789,270
Food supplies	109,964	89,435	44,863	25,931	19,428	7,805	2,323	3,598	303,346
Domestic services	308,773	189,638	151,294	79,174	61,808	15,137	22,304	11,530	839,657
Repairs and maintenance	209,126	150,924	127,552	84,202	59,893	13,092	7,592	11,107	663,488
Patient transport	98,832	42,378	35,457	24,186	22,277	4,615	955	18,846	247,546
Administrative expenses	509,268	479,891	315,944	135,113	36,630	34,492	35,923	20,359	1,567,619
Interest payments	8,160	0	0	10,376	0	0	104	0	18,640
Depreciation	382,868	320,036	245,119	84,332	78,197	18,446	16,952	3,704	1,149,654
Other recurrent expenditure	169,056	250,097	3,076	81,746	208,701	30,162	18,042	13,379	774,259
Total non-salary expenditure excluding									
depreciation	3,955,591	2,898,861	2,018,152	1,123,735	959,837	285,769	231,255	154,362	11,627,562
Total non-salary expenditure including									
depreciation	4,338,459	3,218,897	2,263,271	1,208,067	1,038,034	304,215	248,207	158,067	12,777,216
Total expenditure excluding depreciation	10,208,851	7,912,293	5,754,650	3,258,180	2,466,883	693,156	586,093	442,788	31,322,893
Public acute hospitals	9,998,037	7,867,910	5,642,106	3,180,436	2,350,330	678,166	586,093	442,788	30,745,865
Psychiatric hospitals	210,814	44,383	112,544	77,744	116,552	14,990			577,027
Total expenditure including depreciation	10,591,719	8,232,328	5,999,769	3,342,512	2,545,080	711,601	603,045	446,492	32,472,547
Public acute hospitals	10,373,614	8,186,340	5,881,577	3,263,088	2,426,124	696,490	603,045	446,492	31,876,769
Psychiatric hospitals	218,105	45,988	118,192	79,424	118,957	15,111			595,778

⁽a) Recurrent expenditure does not include the purchase of public hospital services at the state or area health service level from privately owned and/or operated hospitals.

⁽b) New South Wales hospital expenditure recorded against special purposes and trust funds is not included. Other personal care staff are included in Diagnostic and allied health professionals and Domestic and other staff and Total nurses. New South Wales was unable to provide information for each nurse category, although data on Total nurses were provided.

⁽c) Victorian Other personal care staff are included in Domestic and other staff. Victoria was unable to provide information for each nurse category, although data on Total nurses were provided.

⁽d) Pathology services were purchased from a state-wide pathology service rather than being provided by hospital employees in Queensland.

⁽e) South Australian Interest payments are included in Administrative expenses. Termination payments are included in Other recurrent expenditure.

⁽f) For Tasmania, Total nurses include payments to Trainee nurses. Superannuation payments to Visiting Medical Officers are included in Superannuation payments.

Table S4.4: Number of public acute hospitals^(a) with specialised services, by remoteness area, states and territories, 2008–09

Specialised services	NSW ^(b)	Vic ^(c)	Qld	WA	SA	Tas	ACT	NT	Total ^(d)
Acute renal dialysis unit	23	19	12	3	4	2	1	2	66
Major cities	15	16	6	3	4		1		45
Regional	8	3	6	0	0	2	0	1	20
Remote	0	0	0	0	0	0		1	1
Acute spinal cord injury unit	3	2	1	2	1	0	0	0	9
Major cities	3	2	1	2	1		0		9
AIDS unit	9	3	2	2	1	0	1	1	19
Major cities	9	3	1	2	1		1		17
Regional	0	0	1	0	0	0	0	0	1
Remote	0	0	0	0	0	0		1	1
Alcohol and drug unit	75	14	9	3	2	1	1	1	106
Major cities	25	8	4	3	1		1		42
Regional	49	6	5	0	1	1	0	0	62
Remote	1	0	0	0	0	0		1	2
	3	2	2	2	2	1	0	0	12
Burns unit (level III)	3		2	2	2			-	
Major cities Regional	0	2 0	0	0	0	 1	0 0	0	11 1
•	-			-	-				
Cardiac surgery unit	11	9	4	4	2	1	1	0	32
Major cities	10	9	3	4	2		1		29
Regional	1	0	1	0	0	1	0	0	3
Clinical genetics unit	11	7	2	3	2	1	1	0	27
Major cities	9	7	1	3	2		1		23
Regional	2	0	1	0	0	1	0	0	4
Coronary care unit	45	24	19	5	9	3	2	2	109
Major cities	30	15	10	5	6		2		68
Regional	15	9	9	0	2	3	0	1	39
Remote	0	0	0	0	1	0		1	2
Diabetes unit	22	17	13	5	5	3	1	1	67
Major cities	21	15	8	5	5		1		55
Regional	1	2	5	0	0	3	0	1	12
Domiciliary care service	160	94	35	58	44	0	0	1	392
Major cities	38	28	3	7	7		0		83
Regional	111	66	12	31	25	0	0	0	245
Remote	11	0	20	20	12	0		1	64
Geriatric assessment unit	66	36	12	22	13	3	2	0	154
Major cities	37	23	5	6	6		2		79
Regional	28	13	7	14	6	3	0	0	71
Remote	1	0	0	2	1	0		0	4
Hospice care unit	47	23	7	29	14	1	1	1	123
Major cities	14	11	3	0	5		1	•	34
Regional	29	12	3	20	5	1	0	1	71
Remote	4	0	1	9	4	0	•	Ö	18
	13	14	10		4	1	 1	1	48
Infectious diseases unit		14	7	4 4	4 4	=	1		
Major cities	13							0	43
Regional Remote	0 0	0 0	3 0	0 0	0 0	1 0	0	1	4
				-			• • •		1
Intensive care unit (level III)	38	16	9	4	4	2	1	2	76
Major cities	24	14	7	4	4		1	• • •	54
Regional	14	2	2	0	0	2	0	1	21
Remote	0	0	0	0	0	0	• • •	1	1
In-vitro fertilisation unit	2	4	1	0	2	0	0	0	9
Major cities	2	2	1	0	2		0		7
Regional	0	2	0	0	0	0	0	0	2
Maintenance renal dialysis centre	56	65	27	11	16	2	1	4	182
Major cities	22	28	7	6	6		1		70
Regional	30	37	14	4	7	2	0	1	95
Remote	4	0	6	1	2	0		3	16

(continued)

Table S4.4 (continued): Number of public acute hospitals^(a) with specialised services, by remoteness area, states and territories, 2008–09

Specialised services	NSW ^(b)	Vic ^(c)	Qld	WA	SA	Tas	ACT	NT	Total ^(d)
Major plastic/reconstructive surgery									
unit	10	13	8	5	4	1	1	0	42
Major cities	10	13	7	5	4		1		40
Regional	0	0	1	0	0	1	0	0	2
Neonatal intensive care unit (level III)	12	4	3	2	2	1	1	1	26
Major cities	11	4	2	2	2		1		22
Regional	1	0	1	0	0	1	0	1	4
Neurosurgical unit	13	8	6	3	3	1	1	0	35
Major cities	13	8	5	3	3		1		33
Regional	0	0	1	0	0	1	0	0	2
Nursing home care unit	75	75	15	43	43	10	0	0	261
Major cities	1	11	0	1	0		0		13
Regional	60	64	8	21	32	6	0	0	191
Remote	14	0	7	21	11	4		0	57
Obstetric/maternity service	78	57	41	29	32	2	2	5	246
Major cities	28	14	7	8	5		2		64
Regional	49	43	27	14	22	2	0	1	158
Remote	1	0	7	7	5	0		4	24
Oncology unit	44	36	14	11	9	3	2	0	119
Major cities	21	17	8	6	7		2		61
Regional	23	19	6	5	2	3	0	0	58
Psychiatric unit/ward	45	34	17	17	8	3	2	3	129
Major cities	27	26	9	14	8		2		86
Regional	18	8	8	3	0	3	0	1	41
Remote	0	0	0	0	0	0		2	2
Refractory epilepsy unit	5	5	1	3	3	0	0	0	17
Major cities	5	5	1	3	3		0		17
Rehabilitation unit	58	31	17	19	9	3	2	2	141
Major cities	33	19	8	12	9 6		2		80
Regional	25	12	9	7	3	3	0		60
Remote	0	0	0	0	0	0	_	1	1
	12	9		3	4	1	 O	0	
Sleep centre	12	9 8	6 4	3 3	4		0	_	35 31
Major cities	0	1	2	0	0		0	0	4
Regional	_			-	-		-	_	
Specialist paediatric service	44	29	18	9	7	3	2	2	114
Major cities	25	15	7	5	4		2		58
Regional Remote	19 0	14	11	3 1	3 0	3 0	0	1 1	54
	_	0	0		-	-		-	2
Transplantation unit—bone marrow	14	7	4	3	1	1	1	0	31
Major cities	14	7	4	3	1		1		30
Regional	0	0	0	0	0	1	0	0	1
Transplantation unit—heart	_	_		_	_	_	_	_	_
(including heart/lung)	2	2	1	2	0	0	0	0	7
Major cities	2	2	1	2	0		0		7
Transplantation unit—liver	2	2	2	2	1	0	0	0	9
Major cities	2	2	2	2	1		0		9
Transplantation unit—pancreas	1	1	0	0	0	0	0	0	2
Major cities	1	1	0	0	0		0		2
Transplantation unit—renal	6	6	2	3	2	0	0	0	19
Major cities	6	6	2	3	2		0		19

⁽a) Excludes psychiatric hospitals. Rows for Regional and Remote with no units omitted from table.

⁽b) Data for a small number of hospitals in New South Wales were not available, so the number of services is therefore slightly under-enumerated.

⁽c) Data for Victoria may underestimate the number of specialised services as some small multi-campus rural services were reported at network rather than campus level. Consequently if two campuses within the group had a specialised type of service, they were counted as one.

⁽d) Includes hospitals for which remoteness area was Not reported.