

2 Overview of Australian hospitals

Introduction

This chapter presents an overview of public and private hospital sectors covering the number and types of hospitals and availability of beds. Public and private hospital sector information on separations and length of stay is included. Summary information on non-admitted patient episodes is also presented.

The summary information on public hospitals is derived from the National Public Hospital Establishments Database (NPHEd). Information on private hospitals has been provided by the states and territories for 2006–07 and is preliminary. The final data are included on the AIHW's website as they become available from the Australian Bureau of Statistics' (ABS) Private Health Establishments Collection. Summary statistics for private and public hospitals are presented at a national level for the years 2002–03 to 2006–07, and for states and territories for 2006–07.

Summary separation, patient day, average length of stay and average cost weight information is derived from the National Hospital Morbidity Database (NHMD) for public and private hospitals. National statistics for the years 2002–03 to 2006–07 and state and territory statistics for 2006–07 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. Further information on the hospitals included is provided in Appendix 2.

There is some variation between jurisdictions in how hospitals that predominantly provide public hospital services and that are privately owned and/or operated are reported. Most of these are reported as public hospitals but some are reported as private hospitals, as detailed in Appendix 2.

As detailed in Appendix 2, there is some variation in the scope of the NHMD among the states and territories. There is also some variation in the way in which separations with *Newborn care* were reported, as described in Chapter 7 and Appendix 1. 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 NPHEd, are presented, as are similar data for private hospitals from the ABS's Private Health Establishments Collection.

Hospitals and hospital beds

A range of data on hospitals, available beds, expenditure and revenue is presented in Table 2.1 for the period 2002–03 to 2006–07. Over the 4-year period, there can be changes to the reporting arrangements of jurisdictions which can affect the comparability of results across years.

There were 758 public hospitals and 543 private hospitals in 2006–07, compared with 755 public hospitals and 536 private hospitals in 2005–06 (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 2). For example, New South Wales made a number of changes to reporting arrangements between 2002–03 and 2003–04 that caused a rise in reporting units in the public sector although there was no change in the number of actual facilities.

In 2006–07, there were two new public hospital reporting units created in Western Australia which covered the substantial amount of contracted public hospital services provided by two private hospitals. In 2005–06, two hospitals in Melbourne were amalgamated resulting in one less hospital establishment for Victoria. In 2004–05, the Western Australian Department of Health purchased two private hospitals and amalgamated them with existing public hospitals. In Tasmania, one hospital that provided mainly public patient services was categorised as a private hospital until 2003–04 and has been reported as a public hospital since 2004–05. That hospital is reported as part of another public hospital for the purposes of reporting establishment-level data. The changes in Tasmania resulted in increases in the numbers of available beds reported for public hospitals, but did not increase the numbers of hospital establishments reported.

Change in the number of available beds is a more reliable indicator of shifts in the availability of hospital services than change in the number of hospitals. However, the concept of an available bed is also becoming less important, particularly in the light of increasing same-day hospitalisations and the 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 55,904 beds (67.6% of the national total) in 2006–07, and 26,758 beds were provided in private hospitals (32.4% 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 to 2004–05 are from the ABS's *Private hospitals Australia 2004–05* (ABS 2006) and from earlier editions of *Private hospitals Australia*, which report numbers of beds on an average available beds basis. Private sector hospital counts and bed numbers for most jurisdictions in 2005–06 and 2006–07 are based on information provided by the states and territories. Bed numbers are provided on a licensed beds basis which may overstate the number of beds available. These differences in reporting arrangements may affect the comparability of results across years.

Nationally, bed numbers in the public sector experienced an overall increase from 52,314 in 2002–03 to 55,904 in 2006–07. Over the same period, bed numbers in the private sector have fluctuated, increasing overall from 26,364 beds in 2002–03 to 26,758 in 2006–07. These figures would have been affected by changes in hospital reporting arrangements detailed above.

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 3.5 per 1,000 population in the Australian Capital Territory and the Northern Territory, to 4.7 per 1,000 population in Tasmania in 2006–07.

Expenditure and revenue

Recurrent expenditure for public hospitals in 2006–07 was \$26.3 billion in current price terms (not adjusted for inflation), an increase of 9.7% from 2005–06. In constant price terms (that is, adjusted for inflation) the real increase in national expenditure for public hospitals was 5.6% between 2005–06 and 2006–07 (Table 2.1).

Total revenue for public hospitals increased in constant price terms by an average of 8.4% per year between 2002–03 and 2006–07.

Admitted patients by sector and hospital type

Separations

There were 7,602,917 separations reported from public and private acute and psychiatric hospitals in 2006–07 (Table 2.4), an increase of 290,934 (4.0%) compared with 2005–06 (Table 2.3). Public hospital separations increased by 4.4% (195,204) compared with 2005–06, and there was a 3.4% (95,730) increase in separations reported for the private sector.

The private sector accounted for 38.7% of the 7.6 million separations in 2006–07 (2,941,637), almost unchanged compared with 2005–06 (38.9%). Private free-standing day hospital facilities, excluding Tasmania, the Australian Capital Territory and the Northern Territory, accounted for almost 564,000 or 19.2% of private sector separations in 2006–07, compared with about 542,000 or 19.0% in 2005–06.

The increases in separations should be interpreted in the light of coverage changes (see Appendix 2).

There was no change in the coverage of private hospitals for New South Wales, Queensland, the Australian Capital Territory and the Northern Territory. In Western Australia in 2006–07, two private hospitals which provided a substantial amount of public hospital services through contract arrangements were split, resulting in the creation of two new public hospital reporting units to cover the public separations from these two hospitals. This does not represent coverage change but does represent a change in reporting arrangements that affects the comparison of the public and private sectors over time. A small number of private hospitals were missing data for short periods in 2004–05 in both Victoria and South Australia, but coverage was essentially complete for both states from 2004–05. In Tasmania in 2004–05, one hospital that provided mainly public patient services (and is separately reported in the NHMD) changed from reporting as a private hospital to reporting as a public hospital. In addition, approximately 21% of Tasmanian private hospital separations were not reported in 2004–05, equivalent to 0.5% of private hospital separations nationally. Data for Tasmania were complete from 2005–06. Coverage for Western Australian private hospitals was complete from 2004–05.

After adjusting for the public patient separations in Western Australia that were reported as for private hospitals before 2006–07, the growth between 2005–06 and 2006–07 was estimated

as 5.1% for private hospitals. Over the same period, the growth for both public acute hospitals and all public hospitals (including psychiatric) was estimated as 3.3%.

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 2006–07 (Table 2.3). 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 the Organisation for Economic Co-operation and Development (OECD) definition of admitted patients, same-day patients are not included, and therefore the reported average lengths of stay in OECD publications (OECD 2006) are greater than those presented in this publication.

In 2006–07, 4,241,509 separations were on a same-day basis, an increase of 4.9%, compared with 2005–06 (Table 2.3). There was an increase of 5.3% in public hospitals and 4.4% in private hospitals over this period. After adjusting for the change in hospital reporting arrangements in Western Australia, the increases were estimated as 3.9% in public acute hospitals, 4.0% in all public hospitals and 6.1% in private hospitals.

Same-day separations made up 55.8% of separations overall, compared with 55.3% (4,043,180) in 2005–06, and there were increases in the proportions of same-day patients in both public hospitals (from 49.6% to 50.0%) and private hospitals (from 64.2% to 64.9%).

There was some variation among the states and territories in the proportion of same-day separations in 2006–07 (Table 2.4). For public hospitals, New South Wales (43.7%) had a markedly lower proportion than the national average (50.0%), whereas the Northern Territory (60.6%), Victoria (56.1%) and the Australian Capital Territory (54.4%) had markedly higher proportions. In the private sector, New South Wales (68.0%) and Queensland (66.2%) reported higher proportions than average (64.9%).

There was a 2.8% increase in overnight separations between 2005–06 and 2006–07, from 3,268,803 to 3,361,408 (Table 2.3). There was a rise of 3.5% in public hospitals (from 2,250,330 to 2,328,472), and a 1.4% increase in the private sector (from 1,018,473 to 1,032,936). After adjusting for the change in hospital reporting arrangements in Western Australia, increases were estimated at 2.6% in public hospitals and 3.3% in 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 rose by 2.5% between 2005–06 and 2006–07 for public acute hospitals and by 1.3% for private hospitals (Table 2.3).

Among the states and territories, the Northern Territory reported the highest age-standardised public acute hospital separation rate in 2006–07 (480.1 per 1,000 population; Table 2.4). Private hospital separation rates ranged from 112.9 per 1,000 population in New South Wales to 177.9 per 1,000 population in Queensland. These rates relate to resident populations, and therefore do not take into account interstate and overseas patient flows.

These rates are likely to have been affected by whether or not statistical separations and statistical admissions were made to reflect changes in the type of care (see Glossary) and the way in which hospital stays for patients aged 9 days or less on admission (*Newborn* episodes) were reported (see Chapter 7 and Appendix 1 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 and the Australian Capital Territory public hospitals, there has been a reclassification over recent years of chemotherapy patients from admitted patients to non-admitted patients (outpatients). There were also changes in admission practices for some same-day procedures in South Australian public hospitals in 2004–05.

The age-standardised separation rate for public psychiatric hospitals also varied, from 0.1 per 1,000 population in Victoria and Queensland to 1.6 per 1,000 population in New South Wales. This variation reflects differences in the extent to which public psychiatric services have been provided in public acute hospitals and non-hospital facilities (AIHW 2007c). There are no public psychiatric hospitals in the Australian Capital Territory and the Northern Territory.

Average cost weight of separations

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.

In tables 2.3 and 2.4, average cost weights are presented based on the latest available cost weights and the relevant AR-DRG versions applying to each year. Version 5.0 public cost weights (2005–06) were used for the public sector, and version 4.2 (2002–03) private cost weights were used for the private sector. In one part of Table 2.3 and of Table 2.4, public sector cost weights were used for both public and private hospitals to enable comparison between the sectors, because the public and private sector cost weights are not comparable. Further information about the AR-DRG classification and cost weights is included in Appendix 1.

Separations were included only if 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 with care types of *Rehabilitation*, *Palliative care*, *Geriatric evaluation and management*, *Psychogeriatric care*, *Maintenance care*, *Other admitted patient care*, and *Newborn care* with no qualified days were excluded.

Table 2.4 indicates that, within the public sector, most states and territories had average cost weights fairly close to the national average (1.00) for public acute hospitals. The Northern Territory was a notable exception, with an average cost weight of 0.72. This reflects the high proportion of public hospital separations in the Northern Territory that were for *Admit for renal dialysis* (AR-DRG L61Z), an AR-DRG with a 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 (see Appendix 1 for more information).

In Table 2.4, the average public cost weight for private free-standing day hospital facilities in 2006–07 was markedly lower (0.48) than for other private hospitals (1.02) (both figures exclude Tasmania, the Australian Capital Territory and the Northern Territory), reflecting

the lower complexity and day-only nature of most admissions to these hospitals in 2006–07. 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 day stays for patients who separated from hospital during the reporting period, and the aggregated length of stay for all patients (see Glossary). A total of 24,924,565 patient days was reported for 2006–07, 70.0% in the public sector and 30.0% in the private sector (Table 2.4).

There was an increase of 2.7% (449,029) in patient days for public acute hospitals in 2006–07, compared with 2005–06 (Table 2.3). For private hospitals, patient days increased by 2.0% (147,850). Patient days for public acute and private hospitals combined increased by 2.5% (596,879), and for all hospitals combined they increased by 2.4% (593,912). After adjusting for changes to reporting arrangements in Western Australia, increases were estimated at 2.1% in public acute hospitals and 3.6% for private hospitals.

Patient days in public psychiatric hospitals decreased from 660,896 in 2005–06 to 657,929 in 2006–07 (0.4%) (Table 2.4). 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.

Unadjusted for changes to reporting arrangements in Western Australia, the number of age-standardised patient days per 1,000 population for public acute and private hospitals combined increased by 0.3% between 2005–06 and 2006–07 (Table 2.3). Public acute hospital patient days per 1,000 population increased by 0.5%, and private hospital patient days per 1,000 population decreased by 0.3%.

The Northern Territory reported the highest number of patient days per 1,000 population for public acute hospitals in 2006–07 (1,593.0 per 1,000 population) (Table 2.4). The highest age-standardised population rate for patient days in private hospitals was reported by Queensland (457.4 per 1,000 population).

Average length of stay

The average length of stay for public acute and private hospitals combined decreased by 1.4% between 2005–06 and 2006–07 (Table 2.3). For private hospitals, the average length of stay was 2.5 days in 2006–07. The average length of stay for public psychiatric hospitals increased from 42.5 days in 2005–06 to 43.3 days in 2006–07, reflecting the larger relative decrease in separations than patient days in 2006–07 reported for these hospitals.

With same-day separations excluded (as is the practice for OECD reporting), average lengths of stay in all hospitals combined decreased by 0.9% in 2006–07. For public psychiatric hospitals, the average length of stay increased from 48.2 days in 2005–06 to 50.3 days in 2006–07 (Table 2.3). The average lengths of stay are within the range of those reported from 2001 to 2003 for acute care for other OECD countries (OECD 2006).

Relative stay index

Relative stay index (RSI) information is presented for the period 2002–03 to 2006–07 in Table 2.3. The RSI is calculated as the actual number of patient days for separations in selected AR-DRGs (version 5.0/5.1) divided by the expected number of patient days (based on national figures for the 5 years combined) and 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 of calculating the RSIs are given in Chapter 4 and Appendix 1.

In public hospitals, the directly standardised RSI in 2006–07 (0.97) was 1.0% lower than in 2005–06. Directly standardised RSIs were higher in private hospitals than in public hospitals for all years. For all hospitals, the directly standardised RSI fell between 2002–03 (1.03) and 2005–06 (0.98). This corresponds to an average annual decrease over the period of 1.4%.

Non-admitted patients

Information on non-admitted patient occasions of service and group sessions provided by public acute and psychiatric hospitals for 2006–07 is presented in Table 2.5 by state and territory. Similar information from the ABS's Private Health Establishments Collection is presented for private hospitals for 2005–06 in Table 2.6. Data for private hospitals for 2006–07 were not available at the time of writing this report.

The most common non-admitted patient occasions of service delivered to individuals through public acute hospitals in 2006–07 (Table 2.5) were *Outpatient care*, followed by *Pathology* and *Accident and emergency* services. *Pharmacy, Radiology & organ imaging* and *Community health* were also frequently provided. *Pharmacy* included a large number of occasions of service for Justice Health in New South Wales which may not be typical of *Pharmacy* in other hospitals.

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 for which individual non-admitted patient services are recorded.

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 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 are differences in the scope and definition of the data reported in this chapter for *Accident and emergency* occasions of service and the emergency department data presented in Chapter 5. There are also differences in the scope and definition of the data reported in this chapter for outpatient-related occasions of service and the outpatient care data presented in Chapter 5. The differences are discussed in Chapter 5.

Data on the number of non-admitted patient occasions of service provided through public psychiatric hospitals are also presented for New South Wales, 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 2005–06, private hospitals reported about 1.73 million non-admitted patient occasions of service to the ABS's Private Health Establishments Collection. Nationally, there were about 423,300 non-admitted patient occasions of service reported for *Accident and emergency* in private hospitals (Table 2.6).

Remoteness Area of hospital

Table 2.7 presents data on accident and emergency non-admitted occasions of service in public hospitals by Remoteness Area of the hospital.

There was a total of 6,741,304 accident and emergency occasions of service reported for 2006–07, including almost 3.7 million (54.8%) in Major Cities and over 1.6 million (24.3%) in Inner Regional areas.

Table 2.7 also presents the number of occasions of service provided in the area per 1,000 residents in the area. This represents an approximation of the use of accident and emergency services by the resident population, as services provided in one area may be provided to persons residing in other Remoteness Area categories. The analysis by Remoteness Area is of less relevance to geographically smaller jurisdictions and those jurisdictions with smaller populations residing in remote areas (such as Victoria and the Australian Capital Territory). For Victoria, it was not possible to separately identify accident and emergency occasions of service in hospital campuses located in remote areas.

The rate varied from 261 per 1,000 population in Major Cities to 435 per 1,000 population in Inner Regional and Outer Regional areas combined, and 866 per 1,000 population in Remote and Very Remote areas combined. The pattern of use may reflect a number of factors including the availability of other health care services (such as primary care practitioners), patterns of occurrence of accidents causing injury, and the relatively poor health of Indigenous people who have higher population concentrations in remote areas.

Table 2.1: Summary of hospitals, Australia, 2002–03 to 2006–07

	2002–03	2003–04	2004–05	2005–06	2006–07	Change (Per cent) ^(a)	
						Ave since 2002–03	Since 2005–06
Hospitals^(b)							
Public hospitals	748	761	759	755	758	0.3	0.4
Public acute hospitals	729	741	739	736	739	0.3	0.4
Public psychiatric hospitals	19	20	20	19	19	0.0	0.0
Private hospitals	549	525	532	536	543	–0.3	1.3
Private free-standing day hospital facilities	248	234	247	252	265	1.7	5.2
Other private hospitals	301	291	285	284	278	–2.0	–2.1
Public acute and private hospitals	1,278	1,266	1,271	1,272	1,282	0.1	0.8
<i>Total</i>	1,297	1,286	1,291	1,291	1,301	0.1	0.8
Available or licensed beds^(c)							
Public hospitals	52,314	53,475	55,112	54,601	55,904	1.7	2.4
Public acute hospitals	49,791	50,915	52,626	52,236	53,563	1.8	2.5
Public psychiatric hospitals	2,523	2,561	2,487	2,366	2,342	–1.8	–1.0
Private hospitals	26,364	26,589	26,424	27,217	26,758	0.4	–1.7
Private free-standing day hospital facilities	1,910	1,947	2,078	1,965	1,992	1.1	1.4
Other private hospitals	24,454	24,642	24,346	25,252	24,766	0.3	–1.9
Public acute and private hospitals	76,155	77,504	79,050	79,453	80,321	1.3	1.1
<i>Total</i>	78,678	80,064	81,536	81,818	82,662	1.2	1.0
Beds per 1,000 population							
Public hospitals	2.65	2.67	2.72	2.66	2.68	0.3	0.9
Public acute hospitals	2.52	2.54	2.60	2.54	2.57	0.5	1.1
Public psychiatric hospitals	0.13	0.13	0.12	0.12	0.11	–3.1	–2.4
Private hospitals	1.33	1.33	1.30	1.32	1.28	–0.9	–3.1
Private free-standing day hospital facilities	0.10	0.10	0.10	0.10	0.10	–0.3	–0.1
Other private hospitals	1.24	1.23	1.20	1.23	1.19	–1.0	–3.3
Public acute and private hospitals	3.85	3.87	3.90	3.86	3.85	0.0	–0.3
<i>Total</i>	3.98	4.00	4.02	3.98	3.96	–0.1	–0.4
Non-admitted occasions of service^(d) ('000)							
Public acute hospitals	40,706	43,622	42,643	44,749	46,141	3.2	3.1
Other private hospitals	1,919	1,910	1,780	1,734	n.a.	–2.5	–2.6
<i>Total</i>	42,625	45,531	44,424	46,483	n.a.	2.2	4.6
Total recurrent expenditure, constant prices^(e) (\$ million)							
Public hospitals	20,467	21,626	22,692	23,964	25,303	5.4	5.6
Public acute hospitals	19,990	21,119	22,164	23,323	24,697	5.4	5.9
Public psychiatric hospitals	477	506	529	641	605	6.2	–5.6
Private hospitals	6,407	6,452	6,336	6,498	n.a.	0.4	2.6
Private free-standing day hospital facilities	301	311	316	338	n.a.	2.9	6.9
Other private hospitals	6,106	6,141	6,050	6,160	n.a.	0.2	1.8
<i>Total</i>	26,874	28,078	29,028	30,462	n.a.	3.2	4.9
Total recurrent expenditure, current prices^(f) (\$ million)							
Public hospitals	18,256	20,004	21,762	23,964	26,290	9.5	9.7
Public acute hospitals	17,831	19,535	21,255	23,323	25,661	9.5	10.0
Public psychiatric hospitals	425	468	507	641	629	10.3	–1.9
Private hospitals	5,401	5,859	6,114	6,498	n.a.	4.7	6.3
Private free-standing day hospital facilities	254	282	305	338	n.a.	7.4	10.8
Other private hospitals	5,147	5,576	5,838	6,160	n.a.	4.6	5.5
<i>Total</i>	23,641	25,863	27,876	30,462	n.a.	6.5	9.3

(continued)

Table 2.1 (continued): Summary of hospitals, Australia, 2002–03 to 2006–07

	2002–03	2003–04	2004–05	2005–06	2006–07	Change (Per cent) ^(a)	
						Ave since 2002–03	Since 2005–06
Total revenue, constant prices^(e) (\$ million)							
Public hospitals	1,685	1,774	1,993	2,158	2,325	8.4	7.7
Public acute hospitals	1,664	1,748	1,965	2,132	2,298	8.4	7.8
Public psychiatric hospitals	22	26	28	26	26	4.9	–0.1
Private hospitals	6,830	6,909	6,864	7,001	n.a.	0.6	2.0
Private free-standing day hospital facilities	357	375	390	410	n.a.	3.5	5.2
Other private hospitals	6,473	6,534	6,476	6,591	n.a.	0.5	1.8
<i>Total</i>	<i>8,515</i>	<i>8,683</i>	<i>8,857</i>	<i>9,159</i>	<i>n.a.</i>	<i>1.8</i>	<i>3.4</i>
Total revenue, current prices^(f) (\$ million)							
Public hospitals	1,503	1,641	1,911	2,158	2,415	12.6	11.9
Public acute hospitals	1,484	1,617	1,884	2,132	2,388	12.6	12.0
Public psychiatric hospitals	19	24	27	26	27	8.9	3.8
Private hospitals	5,758	6,273	6,624	7,001	n.a.	5.0	5.7
Private free-standing day hospital facilities	301	341	376	410	n.a.	8.0	9.0
Other private hospitals	5,456	5,933	6,249	6,591	n.a.	4.8	5.5
<i>Total</i>	<i>7,261</i>	<i>7,914</i>	<i>8,535</i>	<i>9,159</i>	<i>n.a.</i>	<i>6.0</i>	<i>7.3</i>

- (a) The average since 2002–03 is the average annual change between 2002–03 and the latest available year of data. The change since 2005–06 is the percentage change between 2005–06 and 2006–07 or the change between the two latest available years of data if the 2006–07 data are unavailable.
- (b) 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.
- (c) 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.
- (d) Excludes public psychiatric hospitals and group occasions of service. Reporting arrangements have varied significantly across years.
- (e) Constant price values referenced to 2005–06. Constant price values are adjusted for inflation and are expressed in terms of prices in the reference year. ABS Government Final Consumption Expenditure, State and Local – Hospitals & Nursing Homes deflator used for public hospitals. ABS Household Final Consumption Expenditure Hospital Services deflator used for private hospitals.
- (f) Current prices refer to amounts as reported, unadjusted for inflation. Current price amounts are less comparable between years than constant price amounts.

Source: For 2006–07, private hospital data are preliminary.

Table 2.2: Number of hospitals^(a) and available or licensed beds, by hospital sector and type, states and territories, 2006–07

	NSW	Vic ^(b)	Qld	WA	SA	Tas	ACT	NT	Total
Hospitals									
Public acute hospitals	219	143	173	94	78	24	3	5	739
Public psychiatric hospitals	9	1	4	1	1	3	0	0	19
<i>Total public hospitals</i>	228	144	177	95	79	27	3	5	758
Private free-standing day hospital facilities	89	71	51	20	23	2	9	0	265
Other private hospitals ^(c)	84	73	57	23	31	6	3	1	278
<i>Total private hospitals</i>	173	144	108	43	54	8	12	1	543
Total hospitals	401	288	285	138	133	35	15	6	1,301
Available or licensed beds^(d)									
Public acute hospitals	18,755	12,300	9,896	5,358	4,595	1,274	785	600	53,563
Public psychiatric hospitals	1,169	134	458	201	301	79	0	0	2,342
<i>Total beds available in public hospitals</i>	19,924	12,434	10,354	5,558	4,895	1,353	785	600	55,904
Private free-standing day hospital facilities	746	527	315	208	135	9	52	0	1,992
Other private hospitals ^(c)	6,136	6,148	6,028	2,858	2,158	939	349	150	24,766
<i>Total beds available in private hospitals</i>	6,882	6,675	6,343	3,066	2,293	948	401	150	26,758
Total available beds	26,806	19,109	16,697	8,624	7,188	2,301	1,186	750	82,662
Available or licensed beds per 1,000 population									
Public acute hospitals	2.7	2.4	2.4	2.6	2.9	2.6	2.3	2.8	2.6
Public psychiatric hospitals	0.2	0.0	0.1	0.1	0.2	0.2	0.0	0.0	0.1
<i>Total beds available in public hospitals</i>	2.9	2.4	2.5	2.7	3.1	2.8	2.3	2.8	2.7
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 ^(c)	0.9	1.2	1.5	1.4	1.4	1.9	1.0	0.7	1.2
<i>Total beds in private hospitals</i>	1.0	1.3	1.5	1.5	1.5	1.9	1.2	0.7	1.3
Total beds per 1,000 population	3.9	3.7	4.0	4.1	4.6	4.7	3.5	3.5	4.0

(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. Hospitals are counted at the end of the financial year.

(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) 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. Source: For 2006–07, private hospital data are preliminary.

Table 2.3: Summary of separation^(a), patient day and average length of stay statistics, by hospital type, Australia, 2002–03 to 2006–07^(b)

	2002–03	2003–04	2004–05	2005–06	2006–07	Change (Per cent) ^(c)	
						Ave since 2002–03	Since 2005–06
Separations ('000)							
Public hospitals	4,091	4,201	4,276	4,466	4,661	3.3	4.4
Public acute hospitals	4,074	4,183	4,261	4,451	4,646	3.3	4.4
Public psychiatric hospitals	17	17	16	16	15	-2.7	-2.3
Private hospitals ^{(d)(e)}	2,554	2,641	2,742	2,846	2,942	3.6	3.4
Private free-standing day hospital facilities ^(e)	455	486	515	547	570	5.8	4.2
Other private hospitals ^(e)	1,991	2,043	2,134	2,298	2,371	4.5	3.2
Public acute & private hospitals ^(f)	6,629	6,824	7,003	7,296	7,588	3.4	4.0
Total	6,645	6,842	7,019	7,312	7,603	3.4	4.0
Overnight separations ('000)							
Public hospitals	2,091	2,143	2,177	2,250	2,328	2.7	3.5
Public acute hospitals	2,077	2,129	2,164	2,237	2,315	2.8	3.5
Public psychiatric hospitals	14	14	13	14	13	-1.5	-4.7
Private hospitals ^{(d)(e)}	986	986	995	1,018	1,033	1.2	1.4
Private free-standing day hospital facilities ^(e)	4	3	3	2	2	-11.5	-0.7
Other private hospitals ^(e)	951	934	952	1,016	1,031	2.0	1.4
Public acute & private hospitals ^(f)	3,063	3,116	3,158	3,255	3,348	2.3	2.9
Total	3,076	3,130	3,172	3,269	3,361	2.2	2.8
Same-day separations ('000)							
Public hospitals	2,000	2,057	2,099	2,216	2,333	3.9	5.3
Public acute hospitals	1,997	2,054	2,097	2,214	2,331	3.9	5.3
Public psychiatric hospitals	3	3	2	2	2	-6.6	14.7
Private hospitals ^{(d)(e)}	1,569	1,654	1,748	1,827	1,909	5.0	4.4
Private free-standing day hospital facilities ^(e)	451	483	512	545	568	5.9	4.2
Other private hospitals ^(e)	1,081	1,109	1,181	1,282	1,341	5.5	4.5
Public acute & private hospitals ^(f)	3,566	3,708	3,845	4,041	4,239	4.4	4.9
Total	3,569	3,711	3,847	4,043	4,242	4.4	4.9
Same-day separations as a % of total							
Public hospitals	48.9	49.0	49.1	49.6	50.0	0.6	0.9
Public acute hospitals	49.0	49.1	49.2	49.7	50.2	0.6	0.8
Public psychiatric hospitals	17.0	18.5	14.9	12.1	14.2	-4.4	17.4
Private hospitals ^{(d)(e)}	61.4	62.6	63.7	64.2	64.9	1.4	1.0
Private free-standing day hospital facilities ^(e)	99.1	99.4	99.5	99.6	99.6	0.1	0.0
Other private hospitals ^(e)	53.2	54.3	55.4	55.8	56.5	1.5	1.3
Public acute & private hospitals ^(f)	53.8	54.3	54.9	55.4	55.9	0.9	0.9
Total	53.7	54.3	54.8	55.3	55.8	1.0	0.9
Separations per 1,000 population^(g)							
Public hospitals	205.7	207.8	208.1	213.6	218.8	1.6	2.4
Public acute hospitals	204.8	206.9	207.3	212.8	218.0	1.6	2.5
Public psychiatric hospitals	0.8	0.9	0.8	0.8	0.7	-3.3	-3.4
Private hospitals ^{(d)(e)}	129.0	130.9	133.9	139.6	141.4	2.3	1.3
Private free-standing day hospital facilities ^(e)	23.9	25.1	26.1	27.3	27.9	3.9	2.2
Other private hospitals ^(e)	105.1	105.8	107.8	112.3	113.5	1.9	1.0
Public acute & private hospitals ^(f)	333.9	337.8	341.2	352.4	359.4	1.9	2.0
Total	333.5	337.3	340.2	348.2	355.1	1.6	2.0

(continued)

Table 2.3 (continued): Summary of separation^(a), patient day and average length of stay statistics, by hospital type, Australia, 2002–03 to 2006–07^(b)

	2002–03	2003–04	2004–05	2005–06	2006–07	Change (Per cent) ^(c)	
						Ave since 2002–03	Since 2005–06
Average public cost weight of separations^(h)							
Public hospitals	1.00	1.00	1.02	1.01	1.00	0.0	–0.6
Public acute hospitals	1.00	1.00	1.02	1.00	1.00	0.0	–0.6
Public psychiatric hospitals	1.92	1.84	2.00	2.02	1.99	1.0	–1.4
Private hospitals ^{(e)(f)}	0.93	0.92	0.91	0.91	0.92	–0.2	0.3
Private free-standing day hospital facilities ^(f)	0.49	0.48	0.48	0.48	0.48	–0.2	1.6
Other private hospitals ^(f)	1.03	1.02	1.02	1.02	1.03	0.0	0.3
Public acute & private hospitals ^(f)	0.97	0.97	0.98	0.97	0.97	–0.1	–0.3
Total	0.97	0.97	0.98	0.97	0.97	–0.1	–0.3
Average private cost weight of separations⁽ⁱ⁾							
Private hospitals ^{(d)(e)}	0.86	0.85	0.85	0.85	0.86	–0.0	0.2
Private free-standing day hospital facilities ^(e)	0.37	0.37	0.37	0.37	0.38	0.1	1.8
Other private hospitals ^(e)	0.97	0.97	0.97	0.97	0.98	0.3	0.3
Patient days ('000)							
Public hospitals	16,425	16,419	16,662	16,993	17,439	1.5	2.6
Public acute hospitals	15,506	15,742	15,880	16,332	16,781	2.0	2.7
Public psychiatric hospitals ^(j)	919	677	782	661	658	–8.0	–0.4
Private hospitals ^{(d)(e)}	7,115	7,165	7,166	7,338	7,485	1.3	2.0
Private free-standing day hospital facilities ^(e)	455	486	515	548	570	5.8	4.2
Other private hospitals ^(e)	6,450	6,356	6,400	6,790	6,915	1.8	1.8
Public acute & private hospitals ^(f)	22,622	22,907	23,046	23,670	24,267	1.8	2.5
Total	23,541	23,583	23,829	24,331	24,925	1.4	2.4
Patient days per 1,000 population^(g)							
Public hospitals	821.1	805.3	802.2	804.3	808.1	–0.4	0.5
Public acute hospitals	774.7	771.7	763.5	772.3	776.5	0.1	0.5
Public psychiatric hospitals ^(j)	46.4	33.6	38.6	32.0	31.6	–9.2	–1.3
Private hospitals ^{(d)(e)}	356.9	351.4	344.0	346.1	345.1	–0.8	–0.3
Private free-standing day hospital facilities ^(e)	23.9	25.1	26.1	27.3	27.9	3.9	2.2
Other private hospitals ^(e)	331.8	325.3	319.3	328.3	326.6	–0.4	–0.5
Public acute & private hospitals ^(f)	1,131.6	1,123.1	1,107.5	1,118.4	1,121.7	–0.2	0.3
Total	1,175.6	1,154.5	1,143.9	1,148.1	1,150.8	–0.5	0.2
Average length of stay (days)							
Public hospitals	4.0	3.9	3.9	3.8	3.7	–1.8	–1.7
Public acute hospitals	3.8	3.8	3.7	3.7	3.6	–1.3	–1.6
Public psychiatric hospitals	55.1	39.6	49.4	42.5	43.3	–5.9	1.9
Private hospitals ^{(d)(e)}	2.8	2.7	2.6	2.6	2.5	–2.2	–1.3
Private free-standing day hospital facilities ^(e)	1.0	1.0	1.0	1.0	1.0	0.0	–0.0
Other private hospitals ^(e)	3.2	3.1	3.0	3.0	2.9	–2.1	–1.3
Public acute & private hospitals ^(f)	3.4	3.4	3.3	3.2	3.2	–1.6	–1.4
Total	3.5	3.4	3.4	3.3	3.3	–1.9	–1.5
Average length of stay, excluding same-day separations (days)							
Public hospitals	6.9	6.7	6.7	6.6	6.5	–1.5	–1.2
Public acute hospitals	6.5	6.4	6.4	6.3	6.2	–1.0	–1.1
Public psychiatric hospitals	66.2	48.3	57.8	48.2	50.3	–6.6	4.4
Private hospitals ^{(d)(e)}	5.6	5.6	5.4	5.4	5.4	–1.0	–0.2
Private free-standing day hospital facilities ^(e)	1.0	1.0	1.0	1.0	1.0	0.1	–4.0
Other private hospitals ^(e)	5.6	5.6	5.5	5.4	5.4	–1.1	–0.2
Public acute & private hospitals ^(f)	6.2	6.2	6.1	6.0	6.0	–1.0	–0.8
Total	6.5	6.3	6.3	6.2	6.2	–1.3	–0.9

(continued)

Table 2.3 (continued): Summary of separation^(a), patient day and average length of stay statistics, by hospital type, Australia, 2002–03 to 2006–07^(b)

	2002–03	2003–04	2004–05	2005–06	2006–07	Change (Per cent) ^(c)	
						Ave since 2002–03	Since 2005–06
Indirectly standardised relative stay index^(k)							
Public hospitals	1.01	1.00	0.97	0.97	0.96	..	..
Public acute hospitals	1.01	0.99	0.97	0.97	0.96	..	..
Public psychiatric hospitals ^(d)	1.28	1.28	1.28	1.29	1.27	..	..
Private hospitals ^{(d)(e)}	1.09	1.06	1.03	1.01	1.00	..	..
Private free-standing day hospital facilities ^(e)	0.76	0.76	0.76	0.76	0.75	..	..
Other private hospitals ^(e)	1.10	1.08	1.05	1.03	1.01	..	..
Public acute & private hospitals ^(f)	1.03	1.02	0.99	0.98	0.97	..	..
Total	1.03	1.02	0.99	0.99	0.97	..	..
Directly standardised relative stay index^(l)							
Public hospitals	1.02	1.01	0.99	0.99	0.97	-1.2	-1.0
Public acute hospitals	1.02	1.00	0.98	0.98	0.97	-1.1	-1.0
Public psychiatric hospitals ^(d)	n.p.	n.p.	n.p.	n.p.	n.p.	n.p.	n.p.
Private hospitals ^{(d)(e)}	1.13	1.11	1.08	1.06	1.06	-1.7	-0.2
Private free-standing day hospital facilities ^(e)	n.p.	n.p.	n.p.	n.p.	n.p.	n.p.	n.p.
Other private hospitals ^(e)	1.14	1.13	1.09	1.07	1.07	-1.7	-0.2
Public acute & private hospitals ^(f)	1.03	1.02	0.99	0.98	0.97	-1.4	-1.0
Total	1.03	1.02	0.99	0.99	0.98	-1.4	-1.1

- (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 2002–03 to 2006–07, 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 7.1.
- (c) Annual average change, not adjusted for changes in coverage and recategorisation. Change for private free-standing day facilities and other private hospitals excludes Tasmania, the Northern Territory and the Australian Capital Territory.
- (d) Includes private psychiatric hospitals. Coverage of private hospitals is incomplete for some states and territories. See Appendix 2 for details.
- (e) The hospital type was not specified for Tasmanian private hospitals reporting to the National Hospital Morbidity Database for 2002–03 and 2003–04. Thus, data for those years for Tasmania, the Northern Territory and the Australian Capital Territory are included in the total for private hospitals but not the private hospital subcategories to protect the privacy of Tasmanian subcategorised data for private free-standing and other private hospitals. However, they were included in the total for private hospitals.
- (f) Excludes public psychiatric hospitals.
- (g) Figures are directly age-standardised to the June 2006 Australian population as detailed in Appendix 1.
- (h) AR-DRG version 5.0 national public sector estimated cost weights 2005–06 were applied to AR-DRG version 5.1 DRGs for all rows in this category.
- (i) AR-DRGs version 4.2 and private national cost weights for 2002–03 were used for all rows in this category.
- (j) In 2004–05, all long-stay patients in one public psychiatric hospital in New South Wales were statistically discharged and readmitted. This would have had the effect of increasing the number of patient days reported in 2004–05.
- (k) Relative stay index based on all hospitals combined for the 5-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 5-year average based on the casemix of that group. See Appendix 1 for details on the methodology.
- (l) Relative stay index based on all hospitals combined for the 5-year period using the direct method. The directly standardised relative stay index is comparable between cells. See Appendix 1 for details on the methodology.

Table 2.4: Summary of separation^(a), average cost weight, patient day and average length of stay statistics, by hospital type, states and territories, 2006–07

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Separations									
Public hospitals	1,462,129	1,314,242	784,630	450,896	390,647	97,156	75,767	85,813	4,661,280
Public acute hospitals	1,451,371	1,313,916	784,225	449,451	388,888	96,643	75,767	85,813	4,646,074
Public psychiatric hospitals	10,758	326	405	1,445	1,759	513	..	..	15,206
Private hospitals	808,376	761,417	742,014	289,163	229,324	n.p.	n.p.	n.p.	2,941,637
Private free-standing day hospital facilities	184,223	119,379	173,525	44,899	41,588	n.p.	n.p.	n.p.	570,475
Other private hospitals ^(b)	624,153	642,038	568,489	244,264	187,736	n.p.	n.p.	n.p.	2,371,162
Public acute & private hospitals	2,259,747	2,075,333	1,526,239	738,614	618,212	n.p.	n.p.	n.p.	7,587,711
Total	2,270,505	2,075,659	1,526,644	740,059	619,971	n.p.	n.p.	n.p.	7,602,917
Overnight separations									
Public hospitals	823,046	576,966	398,797	214,562	198,381	48,386	34,555	33,779	2,328,472
Public acute hospitals	814,045	576,641	398,395	213,182	196,943	47,885	34,555	33,779	2,315,425
Public psychiatric hospitals	9,001	325	402	1,380	1,438	501	..	..	13,047
Private hospitals	259,010	273,481	250,906	111,257	92,906	n.p.	n.p.	n.p.	1,032,936
Private free-standing day hospital facilities	2,026	0	0	397	0	n.p.	n.p.	n.p.	2,423
Other private hospitals ^(b)	256,984	273,481	250,906	110,860	92,906	n.p.	n.p.	n.p.	1,030,513
Public acute & private hospitals	1,073,055	850,122	649,301	324,439	289,849	n.p.	n.p.	n.p.	3,348,361
Total	1,082,056	850,447	649,703	325,819	291,287	n.p.	n.p.	n.p.	3,361,408
Same-day separations									
Public hospitals	639,083	737,276	385,833	236,334	192,266	48,770	41,212	52,034	2,332,808
Public acute hospitals	637,326	737,275	385,830	236,269	191,945	48,758	41,212	52,034	2,330,649
Public psychiatric hospitals	1,757	1	3	65	321	12	..	..	2,159
Private hospitals ^(b)	549,366	487,936	491,108	177,906	136,418	n.p.	n.p.	n.p.	1,908,701
Private free-standing day hospital facilities	182,197	119,379	173,525	44,502	41,588	n.p.	n.p.	n.p.	568,052
Other private hospitals ^(b)	367,169	368,557	317,583	133,404	94,830	n.p.	n.p.	n.p.	1,340,649
Public acute & private hospitals	1,186,692	1,225,211	876,938	414,175	328,363	n.p.	n.p.	n.p.	4,239,350
Total	1,188,449	1,225,212	876,941	414,240	328,684	n.p.	n.p.	n.p.	4,241,509
Same-day separations as a % of total									
Public hospitals	43.7	56.1	49.2	52.4	49.2	50.2	54.4	60.6	50.0
Public acute hospitals	43.9	56.1	49.2	52.6	49.4	50.5	54.4	60.6	50.2
Public psychiatric hospitals	16.3	0.3	0.7	4.5	18.2	2.3	..	..	14.2
Private hospitals ^(b)	68.0	64.1	66.2	61.5	59.5	n.p.	n.p.	n.p.	64.9
Private free-standing day hospital facilities	98.9	100.0	100.0	99.1	100.0	n.p.	n.p.	n.p.	99.6
Other private hospitals ^(b)	58.8	57.4	55.9	54.6	50.5	n.p.	n.p.	n.p.	56.5
Public acute & private hospitals	52.5	59.0	57.5	56.1	53.1	n.p.	n.p.	n.p.	55.9
Total	52.3	59.0	57.4	56.0	53.0	n.p.	n.p.	n.p.	55.8

(continued)

Table 2.4 (continued): Summary of separation^(a), average cost weight, patient day and average length of stay statistics, by hospital type, states and territories, 2006–07

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Separations per 1,000 population^(c)									
Public hospitals	206.0	246.7	190.2	218.4	232.6	188.5	244.8	480.1	218.8
Public acute hospitals	204.4	246.6	190.1	217.7	231.5	187.5	244.8	480.1	218.0
Public psychiatric hospitals	1.6	0.1	0.1	0.7	1.1	1.1	..	..	0.7
Private hospitals ^(b)	112.9	141.3	177.9	138.4	132.5	n.p.	n.p.	n.p.	141.4
Private free-standing day hospital facilities	25.8	22.4	41.6	21.5	23.8	n.p.	n.p.	n.p.	27.3
Other private hospitals ^(b)	87.1	119.0	136.3	116.8	108.6	n.p.	n.p.	n.p.	112.3
Public acute & private hospitals	317.3	388.0	368.0	356.1	364.0	n.p.	n.p.	n.p.	359.4
Total	318.9	388.0	368.1	356.8	365.1	n.p.	n.p.	n.p.	355.1
Average public cost weight of separations^(d)									
Public hospitals	1.07	0.95	1.01	0.95	1.01	1.04	1.01	0.72	1.00
Public acute hospitals	1.06	0.95	1.01	0.95	1.01	1.04	1.01	0.72	1.00
Public psychiatric hospitals	1.79	3.03	3.96	2.60	2.54	1.78	..	..	1.99
Private hospitals ^(b)	0.94	0.90	0.89	0.91	0.98	n.p.	n.p.	n.p.	0.92
Private free-standing day hospital facilities	0.54	0.41	0.49	0.41	0.47	n.p.	n.p.	n.p.	0.48
Other private hospitals ^(b)	1.07	0.99	1.01	1.01	1.09	n.p.	n.p.	n.p.	1.02
Public acute & private hospitals	1.02	0.93	0.95	0.93	1.00	n.p.	n.p.	n.p.	0.97
Total	1.02	0.93	0.95	0.94	1.00	n.p.	n.p.	n.p.	0.97
Average private cost weight of separations^(e)									
Private hospitals ^(b)	0.88	0.84	0.82	0.85	0.92	n.p.	n.p.	n.p.	0.86
Private free-standing day hospital facilities	0.45	0.30	0.37	0.31	0.36	n.p.	n.p.	n.p.	0.38
Other private hospitals ^(b)	1.02	0.95	0.97	0.95	1.04	n.p.	n.p.	n.p.	0.98
Patient days									
Public hospitals	6,015,425	4,419,117	2,872,078	1,610,062	1,598,163	406,365	260,346	257,532	17,439,088
Public acute hospitals	5,694,253	4,371,668	2,750,008	1,558,140	1,509,563	379,649	260,346	257,532	16,781,159
Public psychiatric hospitals	321,172	47,449	122,070	51,922	88,600	26,716	..	..	657,929
Private hospitals ^(b)	1,970,718	1,994,122	1,900,834	743,581	589,917	n.p.	n.p.	n.p.	7,485,477
Private free-standing day hospital facilities	184,233	119,379	173,525	44,899	41,588	n.p.	n.p.	n.p.	570,485
Other private hospitals ^(b)	1,786,485	1,874,743	1,727,309	698,682	548,329	n.p.	n.p.	n.p.	6,914,992
Public acute & private hospitals	7,664,971	6,365,790	4,650,842	2,301,721	2,099,480	n.p.	n.p.	n.p.	24,266,636
Total	7,986,143	6,413,239	4,772,912	2,353,643	2,188,080	n.p.	n.p.	n.p.	24,924,565

(continued)

Table 2.4 (continued): Summary of separation^(a), average cost weight, patient day and average length of stay statistics, by hospital type, states and territories, 2006–07

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Patient days per 1,000 population^(c)									
Public hospitals	830.4	814.7	697.1	785.2	908.4	762.5	859.7	1,593.0	808.1
Public acute hospitals	783.7	805.5	667.3	760.2	852.3	712.1	859.7	1,593.0	776.5
Public psychiatric hospitals	46.8	9.2	29.8	25.1	56.1	50.4	..	..	31.6
Private hospitals ^(b)	270.2	363.9	457.4	360.3	327.8	n.p.	n.p.	n.p.	345.1
Private free-standing day hospital facilities	25.8	22.4	41.6	21.5	23.8	n.p.	n.p.	n.p.	27.3
Other private hospitals ^(b)	244.4	341.6	415.8	338.8	303.9	n.p.	n.p.	n.p.	328.3
Public acute & private hospitals	1,053.9	1,169.4	1,124.7	1,120.5	1,180.1	n.p.	n.p.	n.p.	1,121.7
Total	1,100.6	1,178.7	1,154.5	1,145.5	1,236.2	n.p.	n.p.	n.p.	1,150.8
Average length of stay (days)									
Public hospitals	4.1	3.4	3.7	3.6	4.1	4.2	3.4	3.0	3.7
Public acute hospitals	3.9	3.3	3.5	3.5	3.9	3.9	3.4	3.0	3.6
Public psychiatric hospitals ^(f)	29.9	145.5	301.4	35.9	50.4	52.1	..	..	43.3
Private hospitals ^(b)	2.4	2.6	2.6	2.6	2.6	n.p.	n.p.	n.p.	2.5
Private free-standing day hospital facilities	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.p.	1.0
Other private hospitals ^(b)	2.9	2.9	3.0	2.9	2.9	n.p.	n.p.	n.p.	3.0
Public acute & private hospitals	3.4	3.1	3.0	3.1	3.4	n.p.	n.p.	n.p.	3.2
Total	3.5	3.1	3.1	3.2	3.5	n.p.	n.p.	n.p.	3.3
Average length of stay, excluding same-day separations (days)									
Public hospitals	6.5	6.4	6.2	6.4	7.1	7.4	6.3	6.1	6.5
Public acute hospitals	6.2	6.3	5.9	6.2	6.7	6.9	6.3	6.1	6.2
Public psychiatric hospitals ^(f)	35.5	146.0	303.6	37.6	61.4	53.3	..	..	50.3
Private hospitals ^(b)	5.5	5.5	5.6	5.1	4.9	n.p.	n.p.	n.p.	5.4
Private free-standing day hospital facilities	1.0	..	..	1.0	..	n.p.	n.p.	n.p.	1.0
Other private hospitals ^(b)	5.5	5.5	5.6	5.1	4.9	n.p.	n.p.	n.p.	5.4
Public acute & private hospitals	6.0	6.0	5.8	5.8	6.1	n.p.	n.p.	n.p.	6.0
Total	6.3	6.1	6.0	6.0	6.4	n.p.	n.p.	n.p.	6.2

(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) Includes private psychiatric hospitals.

(c) Figures are directly age-standardised to the June 2006 Australian population as detailed in Appendix 1.

(d) Separations for which the care type was reported as *Acute*, or as *Newborn* with qualified patient days, or was *Not reported*. AR-DRG version 5.0 national public sector estimated cost weights 2005–06 were applied to AR-DRG version 5.1 DRGs for all rows in Average public cost weight of separations.

(e) Separations for which the care type was reported as *Acute*, or as *Newborn* with qualified patient days, or was *Not reported*. AR-DRGs version 4.2 and national private sector estimated cost weights for 2002–03 were used for all rows in this category.

(f) 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.

Table 2.5: Non-admitted patient occasions of service^(a), by type of non-admitted patient care, public acute and psychiatric hospitals, states and territories, 2006–07

Type of non-admitted patient care	NSW	Vic	Qld	WA	SA	Tas	ACT	NT ^(b)	Total ^(c)
Public acute hospitals									
Individual occasions of service									
Accident & emergency	2,303,877	1,468,474	1,382,259	726,741	515,928	124,902	96,322	122,801	6,741,304
Outpatient care									
Allied health	812,920	1,067,213	533,317	930,513	196,570	92,435	17,220	9,575	3,659,763
Dental	595,152	188,335	265,265	11,116	10,841	13,447	0	0	1,084,156
Dialysis	21,892	0	0	..	0	10,906	0	0	32,798
Endoscopy & related procedures	11,867	0	9,098	..	0	1,339	2,125	0	24,429
Other medical/surgical/obstetric ^(d)	4,813,614	1,575,831	2,392,838	653,758	928,863	312,459	245,202	108,586	11,031,151
<i>Total Outpatient occasions of service</i>	<i>6,255,445</i>	<i>2,831,379</i>	<i>3,200,518</i>	<i>1,595,387</i>	<i>1,136,274</i>	<i>430,586</i>	<i>264,547</i>	<i>178,161</i>	<i>15,832,297</i>
Mental health	848,381	707,496	121,465	37,664	12,801	..	1,803	0	1,729,610
Alcohol & drug	1,307,495	22,852	94,960	0	0	0	0	0	1,425,307
Pharmacy ^(e)	3,292,540	438,871	574,952	190,223	0	78,178	870	33,652	4,609,286
Community health	1,473,441	250,466	177,365	801,342	9,002	..	9,420	0	2,721,036
District nursing ^(f)	1,361,175	221,709	108,112	171,813	13,758	0	0	0	1,876,567
Pathology	2,322,209	755,109	3,268,395	556,170	..	205,762	35,194	82,219	7,225,058
Radiology & organ imaging	782,283	568,491	872,786	411,248	229,220	83,274	66,940	61,059	3,075,301
Other outreach	337,919	3,964	147,193	176,258	222,473	..	17,323	0	905,130
Total individual occasions of service	20,284,765	7,268,811	9,948,005	4,666,846	2,139,456	922,702	492,419	417,892	46,140,896
Group sessions									
Outpatient care									
Allied health	18,252	20,400	6,841	14,850	5,645	n.a.	695	n.a.	66,683
Dental	54	n.a.	n.a.	n.a.	0	n.a.	..	n.a.	54
Other medical/surgical/obstetric ^(d)	51,608	2,212	4,678	n.a.	6,921	n.a.	1,466	79	66,964
<i>Total Outpatient occasions of service</i>	<i>69,914</i>	<i>22,612</i>	<i>11,519</i>	<i>14,850</i>	<i>12,566</i>	<i>n.a.</i>	<i>2,161</i>	<i>n.a.</i>	<i>133,701</i>
Mental health	28,854	n.a.	212	2,846	1,374	n.a.	326	n.a.	33,612
Alcohol & drug	1,980	n.a.	70	..	..	n.a.	..	n.a.	2,050
Community health	37,561	n.a.	3,245	34,920	..	n.a.	..	n.a.	75,726
District nursing	4,842	n.a.	300	3,099	..	n.a.	..	n.a.	8,241
Other outreach	4,384	n.a.	422	3,548	83,112	n.a.	74	n.a.	91,540
Other	539	n.a.	0	..	..	n.a.	..	n.a.	539
Total group sessions	148,074	22,612	15,768	59,263	97,052	n.a.	2,561	79	345,409

(continued)

Table 2.5 (continued): Non-admitted patient occasions of service^(a), by type of non-admitted patient care, public acute and psychiatric hospitals, states and territories, 2006–07

Type of non-admitted patient care	NSW	Vic	Qld	WA	SA	Tas	ACT	NT ^(b)	Total ^(c)
Public psychiatric hospitals									
Emergency & outpatient individual sessions	126,949	2,801	60	16,393	n.a.	n.a.	..	..	146,203
Emergency & outpatient group sessions	9,304	0	0	2,446	n.a.	n.a.	..	..	11,750
Outreach/community individual sessions	0	0	0	0	n.a.	n.a.	..	..	0
Outreach/community group sessions	0	0	0	0	n.a.	n.a.	..	..	0
Total services	136,253	2,801	60	18,839	n.a.	n.a.	..	..	157,953

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

(b) Radiology figures for the Northern Territory are underestimated and Pathology figures relate only to three of the five hospitals.

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

(d) Other medical/surgical/obstetric includes the outpatient services of Gynaecology, Obstetrics, Cardiology, Endocrinology, Oncology, Respiratory, Gastroenterology, Medical, General practice primary care, Paediatric, Plastic surgery, Urology, Orthopaedic surgery, Ophthalmology, Ear, nose and throat, Chemotherapy, Paediatric surgery and Renal medical.

(e) Justice Health (formerly known as Corrections Health) in New South Wales reported a large number of occasions of service for Pharmacy which may not be typical for other hospitals.

(f) Justice Health (formerly known as Corrections Health) in New South Wales reported a large number of occasions of service which may not be typical of District nursing.

Table 2.6: Non-admitted patient occasions of service ('000), by type of non-admitted patient care, private hospitals, states and territories, 2005–06

Type of non-admitted patient care	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Accident and emergency ^(a)	51.7	106.4	138.4	67.7	37.1	n.a.	n.a.	n.a.	423.3
Outpatient services ^(b)	154.5	696.5	180.6	24.2	6.7	n.a.	n.a.	n.a.	1,064.5
Other non-admitted services ^(c)	133.8	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	182.9
Other	24.6	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	63.1
Total	364.6	802.9	319.0	91.9	43.8	n.a.	n.a.	n.a.	1,733.9

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

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

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

Source: ABS Private Health Establishments Collection, unpublished data.

Table 2.7: Accident and emergency non-admitted patient occasions of service, Remoteness Area of hospital, public acute hospitals, states and territories, 2006–07

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Accident and emergency services									
Major Cities	1,343,543	983,429	539,348	370,169	358,950	..	96,322	..	3,691,761
Inner Regional	684,175	375,504	385,811	95,416	46,046	52,670	..	..	1,639,622
Outer Regional	234,906	109,541	331,278	116,423	73,612	64,624	..	56,064	986,448
<i>Total regional</i>	919,081	485,045	717,089	211,839	119,658	117,294	..	56,064	2,626,070
Remote	30,143	n.a.	77,531	84,732	25,375	5,950	..	46,913	270,644
Very Remote	11,110	..	48,291	60,001	11,945	1,658	..	19,824	152,829
<i>Total remote</i>	41,253	n.a.	125,822	144,733	37,320	7,608	..	66,737	423,473
Total	2,303,877	1,468,474	1,382,259	726,741	515,928	124,902	96,322	122,801	6,741,304
Rate of accident and emergency services provided in area to 1,000 population resident in area^(a)									
Major Cities	272	256	221	252	315	..	289	..	261
Inner Regional	493	362	431	373	244	166	..	..	402
Outer Regional	528	437	537	612	407	397	..	486	503
<i>Total regional</i>	502	377	474	474	324	245	..	486	435
Remote	907	n.a.	871	916	557	778	..	1,022	849
Very Remote	2,332	..	938	1,232	887	642	..	401	897
<i>Total remote</i>	1,085	n.a.	896	1,025	632	743	..	700	866
Total	338	286	338	353	329	255	288	583	326

(a) The rate of services provided in the area to the number of residents in the area only approximates population use as services provided in the area may be provided to persons residing in other Remoteness Area categories or states.