

PRIVATE HOSPITALS

AUSTRALIA

EMBARGO: 11.30AM (CANBERRA TIME) FRI 29 JUL 2005

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For further information about these and related statistics, contact the National Information and Referral Service on 1300 135 070.

NOTES

ABOUT THIS PUBLICATION

This publication presents details from the 2003–04 national census of private hospitals. Three categories of hospitals are identified: acute hospitals, psychiatric hospitals and free-standing day hospital facilities.

There are relatively few psychiatric hospitals and some of these are owned by the same parent company. To maintain the confidentiality of their data, psychiatric hospitals are combined with acute hospitals in most tables in this publication. Any differences between the data given in this publication and the data shown in other reports on hospital activity are due to differences in scope and coverage, relative completeness of the data sources and differing error resolution procedures.

CHANGES IN THIS PUBLICATION

The structure of this publication has been changed from previous years. All Hospitals, private acute and psychiatric hospitals, and free-standing day hospital facilities are separated into individual chapters. Tables 6 and 7 from the 2002–03 publication have been combined and now form Table 2.5 (Private acute and psychiatric hospitals, separations, patient days, average length of stay and bed occupancy rates, by hospital type and hospital size, Australia). Dedicated day surgery units have been included in counts of selected specialised wards and units in private acute and psychiatric hospitals (Table 2.8).



ABBREVIATIONS

ABS	Australian Bureau of Statistics
ACHS	Australian Council on Healthcare Standards
AIHW	Australian Institute of Health and Welfare
AN-DRG	Diagnosis Related Groups
ICD-10-AM	International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification
ICD-9-CM	International Classification of Diseases, 9th Revision, Clinical Modification
PHEC	Private Health Establishments Collection

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INTRODUCTION

This publication presents data for the private hospital sector in 2003–04. Comparable data for public hospitals is available in *Australian Hospitals 2003–04*, produced by the Australian Institute of Health and Welfare (AIHW). According to the AIHW, nearly 4 in ten hospital patients in Australia were admitted to private hospitals in 2003–04, representing nearly one-third of all days of hospitalisation.

HOSPITALS

There were 525 private hospitals operating in Australia in 2003–04 compared with 536 in 2002–03. This decrease of 2.1% in the total number of private hospitals was reflected in both acute and psychiatric (1.7%) and free-standing day hospitals (2.5%). This is the first downturn in the number of free-standing day hospitals since 1993–94. Despite this decrease, the number of available beds and chairs increased 2.0% from 26,364 in 2002–03 to 26,589 in 2003–04. Similarly, total patient separations increased by 3.3% (2.6m in 2002–03 to 2.7m in 2003–04). Private hospitals provided 7.3m days of hospitalisation to patients in 2003–04, an increase of 1.0% from 7.2m in 2002–03. Staff numbers also increased by 2.2% to 48,577 people (full-time equivalent).

PATIENT CHARACTERISTICS

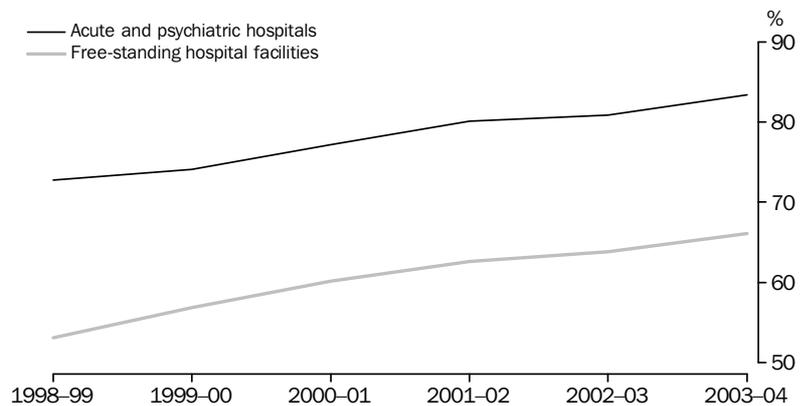
Sex and Age

There was little change in the characteristics of private hospital patients with females accounting for 55.1% of all patient separations, and people aged 65 and over accounting for 35.4% of all patient separations. Overall, there were 147 patient separations per 1,000 population for females and 122 patient separations per 1,000 population for males.

Insurance

The proportion of patient separations reported as being covered by hospital insurance continued to increase for all private hospitals. In 2003–04, 80.1% of patient separations reported having hospital insurance compared with 77.7% in 2002–03 and 71.3% in 1999–2000. Patient separations reported being covered by hospital insurance in private acute and psychiatric hospitals rose by 2.6% with a similar rise of 2.3% for free-standing day hospitals.

ALL PRIVATE HOSPITALS, Hospital insurance (a)



(a) For definition of insurance status see Glossary.

Procedures performed

The total number of procedures increased by 5.4 % from 5.6 million in 2002–03 to 5.9 million in 2003–04. Of these procedures, 4.9 million were performed in acute and psychiatric hospitals and the remainder in free-standing day hospitals. The greatest proportion of procedures were non-invasive, cognitive and interventions nec (42.6%) followed by procedures on the digestive system (12.6%). This pattern is reflected in both the acute & psychiatric and free-standing day hospitals.

Examples of non-invasive and cognitive interventions are services such as dietary education and exercise therapy (often used for development of treatment plans, programs, case reviews or follow up to previous procedures performed). For further details of the classification refer to Volume 3 International Statistical Classification of Diseases and Related Health Problems, 10th Revision-Australian Modification (ICD-10-AM).

For acute and psychiatric hospitals, non-invasive, cognitive and interventions, nec accounted for 43.8% of all procedures performed in 2003–04, up from 42.7 % in the previous year. The next most common procedures in acute and psychiatric hospitals were on the digestive system (10.6 %), the musculoskeletal system (6.7 %) and dermatological and plastic procedures (4.4%).

For free-standing day hospitals, non-invasive, cognitive and interventions, nec accounted for the highest proportion of all procedures performed on patients in 2003–04 at 36.9%. This is followed by procedures on the digestive system (21.7 %), dermatological and plastic procedures (8.2 %) and the eye and adnexa (7.7%).

The most common principal diagnosis for separations from all private hospitals was Factors influencing health status and contact with health services (19.2%) followed by Diseases of the Digestive system (16.2%). This was similar to 2002–03 where Factors influencing health status and contact with health services comprised 18.7% of patient separations and Diseases of the Digestive System comprised 16.6% of patient separations.

Mode of Separation

The majority (96.9%) of all patients were discharged to their place of usual residence in 2003–04. Patient separations discharged to usual residence increased by 2.4% for private acute and psychiatric hospitals and 7.1% for free-standing day hospitals since 2002–03. For private acute and psychiatric hospitals, Queensland showed the greatest increase of 7.0% with Victoria reporting the lowest increase of less than 1%. These changes can be attributed to the overall increase in patient separations for both private acute and psychiatric and free-standing day hospitals.

The number of those patients discharged from a private acute and psychiatric hospital to another hospital increased slightly overall from 37.3% in 2002–03 to 37.6% in 2003–04. New South Wales and Queensland increased transfers by 13.7% and 6.1% respectively while in the remainder of Australian states and territories, transfers to other hospitals dropped by 5.9%.

INCOME & EXPENDITURE

While the number of private hospitals has declined, patient activity continues to grow with total income generated at \$6,274m in 2003–04, up from \$5,758m in 2002–03. Total income from private acute and psychiatric hospitals was \$5,933m which accounted for 94.6% of all private hospital income.

INCOME & EXPENDITURE

continued

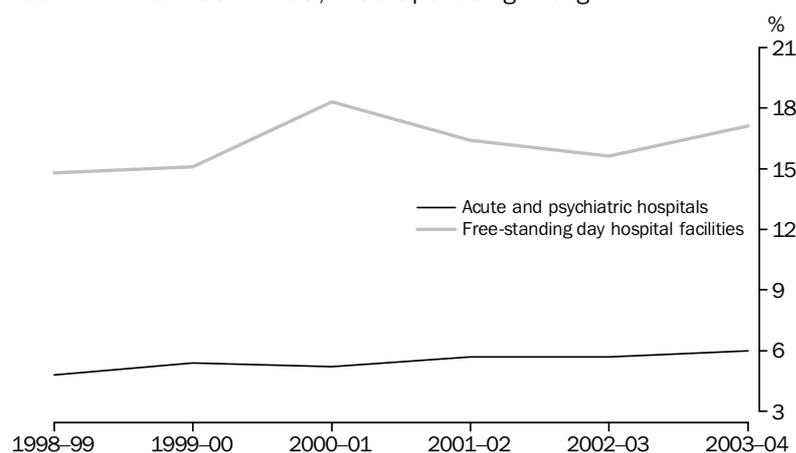
Total recurrent expenditure for all private hospitals increased by 8.5% to \$5,859m in 2003–04 from \$5,401m in 2002–03. The proportion of wages and salaries attributed to recurrent expenses dropped 1.1% for private acute and psychiatric hospitals to 51.5% and 1.9% for free-standing day hospitals to 39.2%.

The private hospital sector invested \$331m in building and other capital assets in 2003–04, with private acute and psychiatric hospitals increasing investment from \$290m in 2002–03 to \$309 in 2003–04. Conversely, free-standing day hospitals decreased investment from \$24m in 2002–03 to \$22m in 2003–04.

NET OPERATING MARGIN

Net operating margin is derived by subtracting recurrent expenditure from income and expressing the result as a proportion of income. The net operating margin for acute and psychiatric hospitals during 2003–04 was 6.0%, remaining steady at the level of the previous year. For free-standing day hospital facilities, the net operating margin was much higher at 17.1%, slightly higher than the previous year's percentage of 15.6%, but consistent with the previous five years.

ALL PRIVATE HOSPITALS, Net Operating Margin



ACCREDITATION

Hospital accreditation has been identified as an indicator of capability within the National Health Performance Framework (for further information refer to *Australian Hospitals 2003–04*, produced by Australian Institute of Health and Welfare (AIHW)).

As at the 30 June 2004, the main organisations used by hospitals to obtain accreditation were Australian Council on Healthcare Standards (ACHS) (used by 406 hospitals) and Benchmark Certification (used by 76 hospitals).

1.1 ALL HOSPITALS, SUMMARY TABLE

	<i>Acute and psychiatric hospitals</i>	<i>Free-standing day hospital facilities</i>	<i>All Hospitals</i>
.....			
Hospitals			
New South Wales	85	93	178
Victoria	81	54	135
Queensland	54	46	100
South Australia	32	22	54
Western Australia	25	11	36
Tasmania, Northern Territory and Australian Capital Territory	14	8	22
Australia	291	234	525
Beds/chairs(a)	24 642	1 947	26 589
Separations ('000)	2 182	506	2 688
Patient days			
Same-day patients ('000)	1 126	506	1 632
Overnight-stay patients ('000)	5 697	—	5 697
Total ('000)	6 823	506	7 329
Sex			
Males ('000)	992	216	1 208
Females ('000)	1 191	289	1 480
Aged 65 and over (%)	35.7	34.2	35.4
Operating theatres	826	220	1 046
Staff(b)	46 539	2 038	48 577
Income			
Total (\$'000)	5 932 744	340 730	6 273 474
Patient revenue (%) (c)	95.6	94.7	95.2
Recurrent expenditure			
Total (\$'000)	5 576 246	282 401	5 858 647
Wages and salaries, including on-costs (%) (d)	51.5	39.2	45.4
Gross capital expenditure (\$'000)	308 806	21 695	330 501

— nil or rounded to zero (including null cells)

(a) Available beds/chairs (average for the year).

(b) Full-time equivalent (average for the year).

(c) As a proportion of total income.

(d) As a proportion of total recurrent expenditure.

1.2

ALL HOSPITALS, Separations—Insurance status(a)

1999-2000 2000-01 2001-02 2002-03 2003-04

ACUTE AND PSYCHIATRIC HOSPITALS (%)

Hospital insurance	74.1	77.2	80.1	80.8	83.4
No hospital insurance	21.8	19.5	16.0	15.4	15.0
Not stated	4.1	3.3	3.9	3.8	1.6
<i>Total</i>	<i>100.0</i>	<i>100.0</i>	<i>100.0</i>	<i>100.0</i>	<i>100.0</i>

FREE-STANDING DAY HOSPITAL FACILITIES (%)

Hospital insurance	56.9	60.2	62.6	63.8	66.1
No hospital insurance	39.1	35.5	29.9	30.6	31.2
Not stated	4.1	4.3	7.4	5.6	2.7
<i>Total</i>	<i>100.0</i>	<i>100.0</i>	<i>100.0</i>	<i>100.0</i>	<i>100.0</i>

ALL HOSPITALS (%)

Hospital insurance	71.3	74.4	77.2	77.7	80.1
No hospital insurance	24.6	22.2	18.3	18.2	18.0
Not stated	4.1	3.5	4.5	4.1	1.8
Total	100.0	100.0	100.0	100.0	100.0

ALL SEPARATIONS ('000)

Acute and psychiatric hospitals	1 799.1	1 958.8	2 117.5	2 130.4	2 182.4
Free-standing day hospital facilities	349.0	393.8	433.3	471.7	505.6
All hospitals	2 148.1	2 352.5	2 550.7	2 602.1	2 688.0

(a) For definition of insurance status see Glossary.

1.3 ALL HOSPITALS, Separations—Age & sex

	ACUTE AND PSYCHIATRIC HOSPITALS			FREE-STANDING DAY HOSPITAL FACILITIES			ALL HOSPITALS		
	Males	Females	Persons(a)	Males	Females	Persons(a)	Males	Females	Persons(a)
PROPORTION (%)									
Age group									
0-4	3.1	1.7	2.3	1.4	0.5	0.9	2.8	1.5	2.1
5-14	2.6	1.8	2.1	1.5	1.1	1.3	2.4	1.6	2.0
15-24	5.4	6.0	5.8	4.2	9.6	7.3	5.2	6.7	6.1
25-34	5.9	13.3	10.0	6.0	13.0	10.0	6.0	13.3	10.0
35-44	9.5	14.0	12.0	10.3	14.1	12.5	9.7	14.0	12.1
45-54	14.1	15.6	14.9	16.7	14.6	15.5	14.6	15.4	15.0
55-64	19.4	15.3	17.2	20.0	16.7	18.1	19.5	15.6	17.3
65-74	17.4	13.3	15.1	20.0	15.0	17.1	17.9	13.6	15.5
75-84	18.2	14.1	16.0	16.9	12.8	14.5	18.0	13.9	15.7
85 and over	4.3	4.8	4.6	2.7	2.5	2.6	4.0	4.4	4.2
Total(a)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Proportion of persons	45.4	54.6	100.0	42.8	57.2	100.0	44.9	55.1	100.0
NUMBER ('000)									
All separations	991.7	1 190.7	2 182.4	216.2	289.4	505.6	1 207.8	1 480.1	2 688.0

(a) Including not stated. (Not stated counts are not separately identified as they make minor contribution to the total, ranging from 0 to 0.3%).

1.4

ALL HOSPITALS, Separations—Principal diagnosis(a)

	<i>Acute and psychiatric hospitals</i>	<i>Free-standing day hospital facilities</i>	<i>Total hospitals</i>
PROPORTION (%)			
Certain infectious and parasitic diseases	0.6	0.3	0.5
Neoplasms	9.2	10.6	9.5
Diseases of the blood and blood forming organs	0.9	1.0	0.9
Endocrine, nutritional and metabolic diseases	1.4	1.0	1.3
Mental and behavioural disorders	5.3	—	4.3
Diseases of			
Nervous system	2.8	0.9	2.5
Eye and adnexa	3.0	13.0	4.9
Ear and mastoid process	1.0	0.5	0.9
Circulatory system	6.3	3.1	5.7
Respiratory system	3.7	0.5	3.1
Digestive system	14.3	24.6	16.2
Skin and subcutaneous tissue	1.5	2.3	1.6
Musculoskeletal system and connective tissue	10.0	2.1	8.5
Genitourinary system	6.8	1.9	5.9
Pregnancy, childbirth and the puerperium	4.8	7.8	5.4
Certain conditions originating in the perinatal period	0.4	—	0.4
Congenital malformations, deformations, and chromosomal abnormalities	0.4	0.3	0.4
Symptoms, signs, and abnormal clinical and laboratory findings	4.8	5.8	5.0
Injury, poisoning and certain other consequences of external causes	4.6	0.8	3.8
Factors influencing health status and contact with health services	18.2	23.7	19.2
<i>Total</i>	<i>100.0</i>	<i>100.0</i>	<i>100.0</i>

NUMBER ('000)

Separations	2 182.4	505.6	2 688.0
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— nil or rounded to zero (including null cells)

(a) Based on the International Statistical Classification of Diseases and Related Health Problems, 10th Revision-Australia Modification (ICD-10-AM). See Explanatory Notes, paragraph 17.

1.5 ALL HOSPITALS, Procedures(a)

	<i>Acute and psychiatric hospitals</i>	<i>Free-standing day hospital facilities</i>	<i>Total hospitals</i>
PROPORTION (%)			
Procedures on			
Nervous system	2.1	0.5	1.8
Endocrine system	0.1	np	np
Eye and adnexa	1.7	7.7	2.7
Ear and mastoid process	0.6	0.3	0.5
Nose, mouth and pharynx	1.9	0.9	1.7
Dental services	4.4	5.3	4.6
Procedures on			
Respiratory system	0.7	0.1	0.6
Cardiovascular system	4.0	1.3	3.6
Blood and blood-forming organs	0.4	0.4	0.4
Digestive system	10.6	21.7	12.6
Urinary system	4.5	3.8	4.4
Male genital organs	1.0	0.4	0.9
Gynaecological procedures	4.1	6.6	4.6
Obstetric procedures	2.9	—	2.4
Procedures of Musculoskeletal system	6.7	1.6	5.8
Dermatological and plastic procedures	4.4	8.2	5.1
Procedures on breast	0.7	0.4	0.6
Chemotherapeutic and radiation oncology procedures	2.5	3.3	2.7
Non-invasive, cognitive and interventions nec	43.8	36.9	42.6
Imaging services	2.8	np	np
Total	100.0	100.0	100.0

NUMBER ('000)

Procedures	4 869.9	1 033.6	5 903.5
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— nil or rounded to zero (including null cells)

np not available for publication but included in totals where applicable, unless otherwise indicated

(a) Based on the International Statistical Classification of Diseases and Related Health Problems, 10th Revision-Australia Modification (ICD-10-AM). See Explanatory Notes, paragraph 17.

1.6 ALL HOSPITALS, Mode of separation

DISCHARGE OR TRANSFER TO

	<i>Usual residence(b)</i>	<i>Residential aged care(c)</i>	<i>Other hospital</i>	<i>Died</i>	<i>Left against advice</i>	<i>Other(a)</i>	<i>Total</i>
	'000	'000	'000	'000	'000	'000	'000
ACUTE AND PSYCHIATRIC HOSPITALS							
New South Wales	553.8	1.4	11.6	2.8	0.6	2.1	572.3
Victoria	537.9	2.2	13.4	3.3	0.5	1.8	559.0
Queensland	488.0	1.5	5.2	4.7	0.2	3.4	503.0
South Australia	163.6	1.5	4.2	1.4	0.1	0.2	171.0
Western Australia	257.9	1.2	np	2.3	np	np	266.0
Tasmania, Northern Territory and Australian Capital Territory	109.6	0.1	np	0.4	np	np	111.1
<i>Australia</i>	<i>2 110.9</i>	<i>8.0</i>	<i>37.6</i>	<i>14.9</i>	<i>1.7</i>	<i>9.4</i>	<i>2 182.4</i>

FREE-STANDING DAY HOSPITAL FACILITIES

Total	495.0	0.1	np	—	—	np	505.6
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ALL HOSPITALS

Total	2 605.9	8.0	np	14.9	1.7	np	2 688.0
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— nil or rounded to zero (including null cells)

np not available for publication but included in totals where applicable, unless otherwise indicated

(a) Including discharge or transfer to another health care accommodation, statistical discharge and not stated. For definition of statistical discharge see Glossary.

(b) Including own accommodation/welfare institution (includes prisons, hostels and group homes primarily providing welfare services).

(c) Unless this is the usual place of residence.

1.7 ALL HOSPITALS, Accreditation/Certification status(a)

	ACHS (b)		BENCHMARK CERTIFICATION		OTHER (c)		All hospitals
	Accredited hospitals	Non-accredited hospitals	Accredited hospitals	Non-accredited hospitals	Accredited hospitals	Non-accredited hospitals	
	no.	no.	no.	no.	no.	no.	
PRIVATE ACUTE & PSYCHIATRIC HOSPITALS							
New South Wales	80	5	6	79	8	77	85
Victoria	75	6	4	77	9	72	81
Queensland	np	np	np	np	np	np	54
South Australia	26	6	np	np	7	25	32
Western Australia	np	np	—	25	np	np	25
Tasmania, Northern Territory and Australian Capital Territory	np	np	—	14	—	14	14
<i>Australia</i>	269	22	14	277	26	265	291
FREE-STANDING DAY HOSPITAL FACILITIES							
New South Wales	53	40	32	61	6	87	93
Victoria	26	28	12	42	12	42	54
Queensland	30	16	15	31	5	41	46
South Australia	15	7	np	np	np	np	22
Western Australia	np	np	—	11	np	np	11
Tasmania, Northern Territory and Australian Capital Territory	np	np	np	np	—	8	8
<i>Australia</i>	137	97	62	172	29	205	234
ALL HOSPITALS							
New South Wales	133	45	38	140	14	164	178
Victoria	101	34	16	119	21	114	135
Queensland	np	np	np	np	np	np	100
South Australia	41	13	3	51	np	np	54
Western Australia	29	7	—	36	np	np	36
Tasmania, Northern Territory and Australian Capital Territory	np	np	np	np	—	22	22
<i>Australia</i>	406	119	76	449	55	470	525

— nil or rounded to zero (including null cells)

np not available for publication but included in totals where applicable, unless otherwise indicated

(a) As at 30 June.

(b) Accredited by the Australian Council on Healthcare Standards (2004).

(c) Accreditation or certification with other body. For definition see accredited/certified hospitals in Glossary.

CHAPTER 2

ACUTE AND PSYCHIATRIC HOSPITALS

HOSPITALS

The number of private acute and psychiatric hospitals continued to decline in 2003–04 (291), down by 1.7% on 2002–03 (296). However, measures of the level of activity in private acute and psychiatric hospitals remained steady and in some cases increased.

BEDS

The average number of beds available in acute and psychiatric hospitals during 2003–04 was 24,642, 0.8% higher than in 2002–03. This was due to growth in the average number of beds available in regions outside the capital cities. In regional Australia, average bed numbers increased by 3.5% over the 12 months to 2003–04.

Capital City Statistical Divisions account for 73.0% of all available beds in private acute and psychiatric hospitals in Australia, while 64% of Australia's population lived in these areas. (See Explanatory Notes, paragraph 19, concerning population estimates.)

The occupancy rate in private acute and psychiatric hospitals was 75.7%, compared with 75.6% in 2002–03. The highest bed occupancy rate was in Queensland (78.6%) and the lowest was for Tasmania, Northern Territory and Australian Capital Territory combined (69.4%). The occupancy rate was higher in hospitals located in the Capital City Statistical Divisions (77.4%), compared with 70.8% in the rest of Australia.

Private acute and psychiatric hospitals operated by religious or charitable institutions provided 39.3% of the available beds during 2003–04. The majority of these types of hospitals (67.5%) have an average of more than 50 beds available, higher than the 61.5% of for profit acute and psychiatric hospitals that averaged more than 50 beds in 2003–04.

PATIENT SEPARATIONS

In 2003–04, there were 2.2 million patient separations from private acute and psychiatric hospitals. Total patient separations in these hospitals for 2003–04 increased by 2.4% compared with an increase in the previous year of less than 1%. Amongst the States and Territories, patient separations increased over the year in Queensland (7.1%), Tasmania, Northern Territory and Australian Capital Territory combined (4.3%) and marginally in Victoria. In South Australia and Western Australia there were slight decreases in separations from 2002–03 (0.2% and 0.4% respectively). The average annual growth rate of patient separations for the last five years has been 5.3%.

Same day separations from private acute and psychiatric hospitals accounted for 51.6% of all separations (1.13 million) in 2003–04 with 1.06 million separations relating to overnight stays.

PATIENT DAYS AND AVERAGE LENGTH OF STAY IN HOSPITAL

During 2003–04, 6.8 million patient days were provided in private acute and psychiatric hospitals, up 1.1% from 2002–03. Queensland was the main contributor to this increase, up 4.4% over the 2003–04 year. Patient days decreased by 0.4% in Victoria, Western Australia 0.5% and by 1.9% in South Australia.

PATIENT DAYS AND
AVERAGE LENGTH OF
STAY IN HOSPITAL

continued

The average length of stay for all patients (same-day and overnight-stay) in private acute and psychiatric hospitals, dropped slightly to 3.1 days in 2003–04. Average length of stay has been declining consistently since 1993–94 (4.1 days).

For overnight-stay patients only, the average length of stay dropped to 5.4 days in 2003–04 from 5.5 days in 2002–03.

PATIENT
CHARACTERISTICS

Insurance status

During 2003–04, 83.4% of admitted patient separations from private acute and psychiatric hospitals carried hospital insurance. The proportion of patient separations with hospital insurance was highest in South Australia (91.8%) and lowest in Western Australia (71.0%).

HOSPITAL
CHARACTERISTICS

In 2003–04, there were 201 private acute and psychiatric hospitals with operating theatres. New South Wales (61) had the largest number of hospitals with operating theatres and the lowest number was in Tasmania, Northern Territory and Australian Capital Territory combined (9). Of the 826 operating theatres in acute and psychiatric hospitals in Australia, 29.1% are located in NSW (240) 23.8% in Victoria (197) and 20.6% in Queensland (170).

The average number of sessions per operating theatre per week was highest in Queensland (8.0) compared to the average for Australia (7.5) with South Australia (6.3) the lowest during 2003–04.

There were 140 dedicated day surgery units in private acute and psychiatric hospitals in 2003–04. Of these 75.7% are located in New South Wales (40), Victoria (38) and Queensland (28). Per theatre per week, the average theatre time used in day surgery theatres (20.0 hours) was 33.1% less than the average theatre time used in operating theatres (29.9 hours).

Over 2003–04 there were 1.91 million occasions of service in non-admitted patients services in Private Hospitals in Australia. Of these the major non-admitted patient services were accident and emergency (472,000 occasions of service), allied health services (344,000) and pathology (315,000). In 2003–04 there were 48 private hospitals in Australia with accident and emergency services. Among the states, Victoria (13) had the largest number of private hospitals with accident and emergency services, followed closely by Queensland (12).

STAFF

The number of full-time equivalent staff employed at private acute and psychiatric hospitals in Australia during 2003–04 was 46,539, an increase of 2.2% over the previous year. Nursing staff (29,360) consisted of 63.1% of total staff in 2003–04 compared to 63.6% in the previous year. The average number of staff per occupied bed remained at 2.5. Tasmania, Northern Territory and Australian Capital Territory combined accounted for the highest average number of staff per occupied bed (2.8%), while South Australia had the lowest average number of staff at 2.3%.

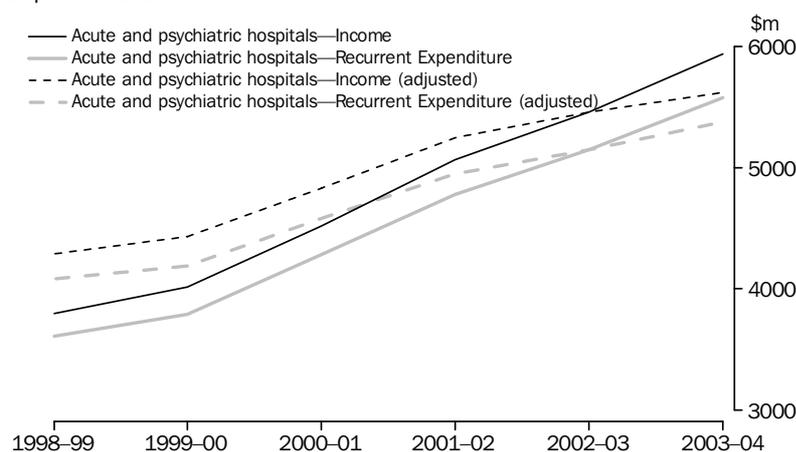
INCOME

Income received by private acute and psychiatric hospitals in Australia during 2003–04 amounted to \$5,933m, an increase of 8.7% over the previous year. Over the five years to 2003–04, the average annual increase in income was 9.3%. When costs are adjusted to remove the effects of price changes over the period, the increases are 4.8 % from the

INCOME *continued*

previous year and a 5.9 % average annual increase over the five years to 2003–04. (See Explanatory Notes paragraph 16, concerning the use of chain volume measures.) Patient revenue accounted for 95.6% of all income generated by private acute and psychiatric hospitals in 2003–04. Patient revenue as a proportion of total revenue was highest in South Australia (96.7%) and lowest in Queensland (94.9%).

ACUTE AND PSYCHIATRIC PRIVATE HOSPITALS, Income and expenditure



EXPENDITURE

Recurrent expenditure for acute and psychiatric hospitals during 2003–04 amounted to \$5.576m, an 8.3% increase over the previous year. Over the five years to 2003–04, the average annual increase in recurrent expenditure was 5.7% (adjusted for price changes over the period). (See Explanatory Notes, paragraph 16, concerning the use of chain volume measures.)

For private acute and psychiatric hospitals, wages and salaries (including on-costs such as employer contributions to superannuation and payroll tax), as a proportion of recurrent expenditure, has decreased from 52.6% in 2002–03 to 51.5% in 2003–04. This proportion has continued to decrease from 60.3% in 1993–94. Other large components were drug, medical and surgical supplies (24.5% of total) and administrative expenses (8.7%).

The average expenditure per patient day in 2003–04 was \$817 compared with \$763 in 2002–03. These average costs have increased from \$430 in 1993–94.

While the average costs per patient day have increased for all private hospitals, the average cost per patient day continues to increase as hospital size increases. This is a reflection of the greater complexity of procedures undertaken at the larger hospitals. The more complex procedures necessitate greater use of highly trained staff, expensive equipment, drugs and medical supplies. In 2003–04, recurrent expenditure per patient day at private acute and psychiatric hospitals with over 200 beds was \$968, compared with the average of \$513 for hospitals with 25 or fewer beds.

There are also considerable differences in the average recurrent expenditure per patient day among the various hospital types. Religious or charitable hospitals had the highest average costs per patient day (\$908) in 2003–04. Other non-profit hospitals and hospitals operated for profit, had lower average costs per patient day (\$615 and \$763 respectively). Religious or charitable hospitals account for 62.5% of all private acute and psychiatric hospitals with more than 200 beds.

EXPENDITURE
continued

Gross capital expenditure for private acute and psychiatric hospitals during 2003–04 increased by 6.4% over the previous year to \$309m, although is still 30.9% lower than for 2001–02.

Capital expenditure in 2003–04 represented 5.2% of the total income for the year. Amongst the states and territories capital expenditure as a proportion of total income was highest for Queensland (8.1%) and lowest for South Australia (2.7%).

2.1 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Summary table

	1993-94	1998-99	1999-2000	2000-01	2001-02	2002-03	2003-04
New South Wales	91	87	86	87	87	85	85
Victoria	113	95	86	85	84	84	81
Queensland	51	52	56	54	56	55	54
South Australia	38	37	32	32	32	32	32
Western Australia	24	28	28	28	29	27	25
Tasmania, Northern Territory and Australian Capital Territory	12	13	14	13	13	13	14
Australia	329	312	302	299	301	296	291
Beds(a)							
Capital City Statistical Divisions	15 809	17 246	17 202	17 837	18 119	18 034	17 995
Rest of Australia	5 432	6 500	6 463	6 628	6 629	6 420	6 647
Total	21 241	23 746	23 665	24 465	24 748	24 454	24 642
Separations							
Same-day patients ('000)	381	792	857	956	1 092	1 104	1 126
Overnight-stay patients ('000)	870	893	942	1 003	1 026	1 026	1 056
Total ('000)	1 251	1 684	1 799	1 959	2 118	2 130	2 182
Patient days							
Same-day patients ('000)	381	792	857	956	1 092	1 104	1 126
Overnight-stay patients ('000)	4 792	5 249	5 375	5 569	5 703	5 644	5 697
Total ('000)	5 172	6 041	6 232	6 526	6 794	6 748	6 823
Average length of stay							
Overnight-stay patients (days)	5.5	5.9	5.7	5.6	5.6	5.5	5.4
All patients (days)	4.1	3.6	3.5	3.3	3.2	3.2	3.1
Occupancy							
Overnight-stay patients (%)	61.8	60.6	62.1	62.4	63.1	63.2	63.2
All patients (%)	66.7	69.7	72.0	73.1	75.2	75.6	75.7
Staff(b)	33 758	43 053	43 120	44 720	46 709	45 556	46 539
Income							
Total (\$'000)	2 491 674	3 797 681	4 012 135	4 517 550	5 065 971	5 456 451	5 932 744
Patient revenue (c) (%)	95.1	90.8	90.6	92.7	94.5	95.4	95.6
Recurrent expenditure							
Total (\$'000)	2 225 893	3 613 591	3 794 034	4 284 272	4 776 566	5 147 409	5 576 246
Wages and salaries, including on-costs(d) (%)	60.3	58.0	57.2	55.6	54.7	52.6	51.5
Per patient day (\$)	430	598	609	657	703	763	817
Gross capital expenditure (\$'000)	369 474	527 763	325 254	426 087	446 990	290 291	308 806

(a) Available beds/chairs (average for the year).

(b) Full-time equivalent (average for the year).

(c) As a proportion of total income.

(d) As a proportion of total recurrent expenditure.

2.2 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Numbers & beds—States/territories

	NSW	Vic.	Qld	SA	WA	Tas., NT and ACT	Total
HOSPITALS							
Type							
Acute	76	75	50	np	np	np	266
Psychiatric	9	6	4	np	np	np	25
Total	85	81	54	32	25	14	291
Location							
Capital City Statistical Division	56	60	21	23	20	8	188
Rest of state/territory	29	21	33	9	5	6	103
Hospital size(a)							
0–25 beds	7	17	9	np	5	np	50
26–50 beds	26	20	9	np	6	np	74
51–100 beds	35	28	15	6	7	5	96
101–200 beds	14	12	13	np	np	np	47
Over 200 beds	3	4	8	3	np	np	24
BEDS							
Available beds(b)							
Acute hospitals	6 032	5 882	5 412	np	np	np	23 201
Psychiatric hospitals	508	378	288	np	np	np	1 441
Total	6 540	6 260	5 700	1 941	2 909	1 292	24 642
Location							
Capital City Statistical Divisions	4 562	5 222	2 896	1 786	2 592	937	17 995
Rest of Australia	1 978	1 038	2 804	155	317	355	6 647
PROPORTION OF AUSTRALIAN TOTAL (%)							
Hospitals	29	28	19	11	9	5	100
Available Beds	27	25	23	8	12	5	100

np not available for publication but included in totals where applicable, unless otherwise indicated

(a) Based on the number of available beds (average for the year).

(b) Average for the year.

2.3 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Numbers & beds—Hospital type

	NOT FOR PROFIT			
	<i>For profit</i>	<i>Religious or charitable</i>	<i>Other(a)</i>	<i>Total</i>
HOSPITALS				
New South Wales	66	19	—	85
Victoria	53	14	14	81
Queensland	25	24	5	54
South Australia	11	6	15	32
Western Australia	np	11	np	25
Tasmania, Northern Territory and Australian Capital Territory	np	6	np	14
Australia	174	80	37	291
Location				
Capital City Statistical Divisions	129	48	11	188
Rest of Australia	45	32	26	103
Hospital size(b)				
0–25 beds	13	15	22	50
26–50 beds	54	11	9	74
51–100 beds	69	21	6	96
101–200 beds	29	18	—	47
Over 200 beds	9	15	—	24
BEDS				
Available beds(c)				
Capital City Statistical Divisions	10 214	7 248	533	17 995
Rest of Australia	3 713	2 425	509	6 647
Total	13 927	9 673	1 042	24 642

— nil or rounded to zero (including null cells)

np not available for publication but included in totals where applicable, unless otherwise indicated

(a) Comprising bush nursing, community and memorial hospitals.

(b) Based on available beds (average for the year).

(c) Average for the year.

2.4

PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, States & territories

	Separations		Patient Days		Average length of stay	Bed occupancy rate
	'000	%	'000	%	Days	%
.....						
2001-02						
New South Wales	554.5	26.2	1 752.1	25.8	3.2	73.8
Victoria	550.3	26.0	1 728.4	25.4	3.1	75.0
Queensland	475.7	22.5	1 637.4	24.1	3.4	77.8
South Australia	172.5	8.1	582.0	8.6	3.4	79.2
Western Australia	258.1	12.2	761.5	11.2	3.0	73.4
Tasmania, Northern Territory and Australian Capital Territory	106.5	5.0	332.9	4.9	3.1	69.7
Australia	2 117.5	100.0	6 794.3	100.0	3.2	75.2
Location						
Capital City Statistical Divisions	1 566.6	74.0	5 054.7	74.4	3.2	76.4
Rest of Australia	550.8	26.0	1 739.6	25.6	3.2	71.9
.....						
2002-03						
New South Wales	559.2	26.2	1 769.5	26.2	3.2	73.7
Victoria	556.5	26.1	1 743.0	25.8	3.1	77.4
Queensland	469.6	22.0	1 570.3	23.3	3.3	77.1
South Australia	171.4	8.0	556.2	8.2	3.2	77.0
Western Australia	267.2	12.5	780.7	11.6	2.9	73.6
Tasmania, Northern Territory and Australian Capital Territory	106.5	5.0	328.0	4.9	3.1	72.2
Australia	2 130.4	100.0	6 747.7	100.0	3.2	75.6
Location						
Capital City Statistical Divisions	1 588.6	74.6	5 086.3	75.4	3.2	77.3
Rest of Australia	541.9	25.4	1 661.3	24.6	3.1	70.9
.....						
2003-04						
New South Wales	572.3	26.2	1 797.9	26.4	3.1	75.1
Victoria	559.0	25.6	1 735.4	25.4	3.1	75.7
Queensland	503.0	23.0	1 639.1	24.0	3.3	78.6
South Australia	171.0	7.8	545.4	8.0	3.2	76.8
Western Australia	266.0	12.2	776.7	11.4	2.9	73.0
Tasmania, Northern Territory and Australian Capital Territory	111.1	5.1	328.4	4.8	3.0	69.4
Australia	2 182.4	100.0	6 823.0	100.0	3.1	75.7
Location						
Capital City Statistical Divisions	1 619.6	74.2	5 100.0	74.7	3.1	77.4
Rest of Australia	562.7	25.8	1 722.9	25.3	3.1	70.8

2.5 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Hospital type & hospital size(a)

	Separations		Patient Days		Average length of stay	Bed occupancy rate
	'000	%	'000	%	Days	%
HOSPITAL TYPE						
For profit	1 247.1	57.1	3 805.8	55.8	3.1	74.7
Not for profit						
Religious or charitable	866.4	39.7	2 776.7	40.7	3.2	78.4
Other(b)	68.9	3.2	240.5	3.5	3.5	63.1
Total	2 182.4	100.0	6 823.0	100.0	3.1	75.7
HOSPITAL SIZE						
0–25 beds	38.1	1.7	129.2	1.9	3.4	58.6
26–50 beds	226.9	10.4	677.1	9.9	3.0	64.6
51–100 beds	571.5	26.2	1 815.5	26.6	3.2	70.1
101–200 beds	642.6	29.4	1 893.6	27.8	2.9	79.0
Over 200 beds	703.3	32.2	2 307.6	33.8	3.3	83.5
Total	2 182.4	100.0	6 823.0	100.0	3.1	75.7

(a) Based on available beds (average for the year).

(b) Comprising bush nursing, community and memorial hospitals.

2.6 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Operating & day surgery theatres(a)

	NSW	Vic.	Qld	SA	WA	Tas., NT and ACT	Aust.
Operating theatres							
Hospitals with these theatres	61	52	38	22	19	9	201
Theatres	240	197	170	80	96	43	826
Average number of sessions(b)	7.6	7.4	8.0	6.3	7.5	7.7	7.5
Average theatre time used (hours)(b)	32.4	28.4	28.6	25.5	32.1	31.0	29.9
Nurses(c)	1 515.1	1 110.8	1 203.7	435.1	516.6	263.2	5 044.4
Day surgery theatres(d)							
Hospitals with these theatres	24	28	23	12	10	8	105
Theatres	34	50	45	17	19	11	176
Average number of sessions(b)	6.4	7.3	6.3	6.1	4.4	5.9	6.4
Average theatre time used (hours)(b)	22.8	20.6	17.8	20.3	18.5	19.9	20.0
Nurses(c)	169.1	261.2	164.2	76.6	59.9	28.7	759.7

(a) Details are for last week of pay period before 30 June.

(c) Full-time equivalent.

(b) Per theatre per week.

(d) Excluding free-standing day hospital facilities.

2.7 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Insurance status(a)

	NSW	Vic.	Qld	SA	WA	Tas., NT and ACT	Aust.
SEPARATIONS ('000)							
Hospital Insurance	475.1	475.4	429.9	157.0	189.0	93.6	1 820.0
No hospital insurance	91.1	73.9	71.4	np	77.1	np	326.8
Not stated	6.0	9.7	1.7	np	—	np	35.6
Total	572.3	559.0	503.0	171.0	266.0	111.1	2 182.4
SEPARATIONS (%)							
Hospital Insurance	83.0	85.0	85.5	91.8	71.0	84.3	83.4
No hospital insurance	15.9	13.2	14.2	np	29.0	np	15.0
Not stated	1.1	1.7	0.3	np	—	np	1.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
AVERAGE LENGTH OF STAY (DAYS)							
Hospital Insurance	3.1	3.0	3.4	3.2	2.8	2.9	3.1
No hospital insurance	3.4	3.7	2.7	np	3.2	np	3.2
Not stated	4.1	3.8	1.5	np	—	np	3.7
Total	3.1	3.1	3.3	3.2	2.9	3.0	3.1

— nil or rounded to zero (including null cells)

np not available for publication but included in totals where applicable, unless otherwise indicated

(a) For definition of insurance status see Glossary.

2.8 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Selected specialised wards & units

	<i>Labour wards</i>	<i>Psychiatric wards (a)</i>	<i>Special care units (b)</i>	<i>Emergency departments (c)</i>	<i>Dedicated day surgery unit</i>
	no.	no.	no.	no.	no.
Hospitals with specialised wards or units					
New South Wales	21	15	49	5	40
Victoria	19	10	40	6	38
Queensland	19	11	29	8	28
South Australia	7	np	12	np	12
Western Australia	11	4	17	3	11
Tasmania, Northern Territory and Australian Capital Territory	6	np	10	np	11
Australia	83	46	157	27	140

np not available for publication but included in totals where applicable, unless otherwise indicated

(a) Including alcohol and drug rehabilitation or treatment units.

(b) Intensive care units, coronary care units, neonatal care units, high dependency units, hospice care units and post-acute rehabilitation units.

(c) Bona fide emergency departments.

2.9 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Specialised units or wards

	HOSPITALS						
	NSW	Vic.	Qld	SA	WA	Tas., NT and ACT	Aust.
	no.	no.	no.	no.	no.	no.	no.
Neonatal intensive care unit	18	14	16	3	8	6	65
Separate intensive care unit (ICU)	13	9	9	np	np	np	38
Separate coronary care unit (CCU)	7	9	8	np	np	np	31
Combined ICU/CCU	7	4	7	np	np	np	25
High dependency unit	16	13	5	7	np	np	47
Obstetric/maternity service	22	20	17	6	10	7	82
Specialised paediatric service	9	5	9	—	np	np	27
Cardiac surgery unit	8	7	6	np	np	—	24
Maintenance renal dialysis	3	5	6	—	3	—	17
Psychiatric unit/ward(a)	15	9	10	np	4	3	44
Oncology unit	13	17	21	7	6	5	69
Rehabilitation unit	21	15	7	3	np	np	49
Sleep centre	19	16	10	np	3	np	53
Residential aged care service(b)	—	np	np	5	—	—	7
Geriatric assessment unit	—	5	np	np	np	—	11
Domiciliary care service	np	4	np	—	—	np	7
Hospice/palliative care unit	np	np	4	np	8	np	18
Dedicated day surgery unit	40	38	28	12	11	11	140
Other specialised units/wards(c)	16	26	25	8	7	7	89
All hospitals(d)	71	66	44	26	24	13	244

— nil or rounded to zero (including null cells)

np not available for publication but included in totals where applicable, unless otherwise indicated

(a) Designated as such by registered health benefits funds.

(b) Including those which are an integral part of the hospital only.

(c) For definition of other specialised units/wards see Glossary.

(d) Many hospitals have more than one type of specialised unit or ward and so are counted in more than one row.

2.10 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Non-admitted patient services

HOSPITALS

	NSW	Vic.	Qld	SA	WA	Tas., NT and ACT	Aust.	Occasions of service
	no.	no.	no.	no.	no.	no.	no.	'000
Accident and emergency(a)	6	13	12	9	4	4	48	472.1
Medical/surgical/diagnostic								
Dialysis	np	np	—	—	—	—	np	np
Radiology and organ imaging	np	5	—	—	—	np	10	182.1
Endoscopy	np	np	np	np	np	—	7	33.0
Pathology	np	3	np	—	—	np	6	314.7
Other	4	8	np	4	9	np	32	222.8
Mental health	4	3	np	np	np	np	14	46.1
Alcohol and drug	np	—	—	np	np	—	np	np
Pharmacy	np	—	—	—	—	—	np	np
Allied health services	7	14	np	5	np	—	29	343.7
Outreach services								
Community Health services	3	np	—	np	—	3	9	90.4
District nursing services	np	4	—	—	—	—	6	80.8
Other outreach services	np	5	np	—	np	—	9	11.2
Other	5	6	4	np	6	np	27	81.9
All hospitals(b)	20	34	24	18	15	9	120	1 909.5

— nil or rounded to zero (including null cells)

np not available for publication but included in totals where applicable, unless otherwise indicated

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

(b) Many hospitals have more than one type of designated unit or ward and so are counted in more than one row.

2.11 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Number of staff & average staff per bed(a)

	NSW	Vic.	Qld	SA	WA	Tas., NT and ACT	Aust.
NUMBER OF STAFF							
Nursing staff							
Registered nursing staff	5 433.5	6 019	5 203	1 673	2 627	1 276	22 231
Other nursing staff(b)	2 338	1 677	1 498	470	780	367	7 129
Total	7 772	7 696	6 701	2 143	3 406	1 643	29 360
Salaried medical officers and other diagnostic health professionals	856	940	495	117	468	140	3 017
Administrative and clerical	1 683	1 642	1 946	552	875	328	7 027
Domestic and other staff	1 790	1 924	1 447	662	945	398	7 167
Total	12 102	12 202	10 556	3 475	5 695	2 510	46 539

AVERAGE NUMBER OF STAFF PER OCCUPIED BED

Nursing staff							
Registered nursing staff	1.1	1.3	1.2	1.1	1.2	1.4	1.2
Other nursing staff(b)	0.5	0.4	0.3	0.3	0.4	0.4	0.4
Total	1.6	1.6	1.5	1.4	1.6	1.8	1.6
Other(c)	0.9	0.9	0.9	0.9	1.1	1.0	0.9
Total	2.5	2.6	2.4	2.3	2.7	2.8	2.5

(a) Full-time equivalent.

(b) Including other personal care staff e.g. warders, orderlies and hospital attendants.

(c) Including salaried medical officers and other diagnostic health professionals, administrative, domestic and other staff.

2.12 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Income—States & territories

	NSW	Vic.	Qld	SA	WA	Tas., NT and ACT	Aust.
Income							
Patient revenue(a) (\$'000)	1 578 164	1 453 577	1 270 242	411 787	682 886	275 773	5 672 429
Recoveries (\$'000)	29 538	38 958	39 708	6 877	17 147	5 839	138 066
Other(b) (\$'000)	28 441	37 079	28 019	7 202	11 363	4 548	116 652
Total (\$'000)	1 635 306	1 529 614	1 338 009	425 866	717 789	286 160	5 932 744
Patient revenue as a proportion of total revenue (%)	96.5	95.0	94.9	96.7	95.1	96.4	95.6

(a) Including prostheses.

(b) Including investment income, income from charities, bequests, visitors' meals, and accommodation and kiosk sales.

2.13 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Income—Hospital type

	NOT FOR PROFIT			
	<i>For profit</i>	<i>Religious or charitable</i>	<i>Other(a)</i>	<i>Total</i>
Income				
Patient revenue(b) (\$'000)	3 063 435	2 469 232	139 761	5 672 429
Recoveries (\$'000)	60 305	66 990	10 772	138 066
Other(c) (\$'000)	36 900	74 416	5 336	116 652
Total (\$'000)	3 160 681	2 616 194	155 869	5 932 744
Patient revenue as a proportion of total revenue (%)				
	96.9	94.4	89.7	95.6

- (a) Comprising bush nursing, community and memorial hospitals.
- (b) Including prostheses.
- (c) Including investment income, income from charities, bequests, visitors' meals, and accommodation and kiosk sales.

2.14 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Income—Hospital size(a)

	HOSPITALS WITH BEDS NUMBERING					
	0-25	26-50	51-100	101-200	Over 200	Total
Income						
Patient revenue(b) (\$'000)	60 940	366 529	1 310 992	1 668 937	2 265 031	5 672 429
Recoveries (\$'000)	1 489	7 903	29 859	44 968	53 847	138 066
Other(c) (\$'000)	5 129	4 780	18 831	34 641	53 271	116 652
Total (\$'000)	67 558	378 375	1 360 380	1 748 546	2 377 886	5 932 744
Patient revenue as a proportion of total revenue (%)						
	90.2	96.9	96.4	95.4	95.3	95.6

- (a) Based on number of available beds (average for the year).
- (b) Including prostheses.
- (c) Including investment income, income from charities, bequests, visitors' meals and accommodation and kiosk sales.

2.15 PRIVATE ACUTE AND PSYCHIATRIC HOSPITALS, Expenditure—State & territories

	NSW	Vic.	Qld	SA	WA	Tas., NT and ACT	Aust.
Recurrent expenditure(a)							
Wages and salaries including on-costs (\$'000)	771 954	786 269	616 559	202 569	347 713	148 548	2 873 611
Drug, medical and surgical supplies(b) (\$'000)	415 031	338 876	320 304	95 819	139 008	59 820	1 368 859
Food supplies (\$'000)	22 866	24 459	17 828	6 425	11 181	5 053	87 812
Other domestic services (\$'000)	27 742	22 208	20 192	6 315	11 638	6 225	94 320
Administrative expenses (\$'000)	107 045	121 331	119 111	39 590	69 297	28 850	485 223
Repairs and maintenance (\$'000)	31 425	23 786	23 286	6 465	11 879	4 161	101 002
Other(c) (\$'000)	145 961	143 816	126 185	42 995	77 108	25 859	561 924
Total (\$'000)	1 522 024	1 460 746	1 243 464	400 177	667 764	282 071	5 576 246
Wages and salaries including on-costs as a proportion of total recurrent expenditure (%)	50.7	53.8	49.6	50.6	52.1	52.7	51.5
Average recurrent expenditure(d)							
Per separation (\$)	2 660	2 613	2 472	2 340	2 510	2 540	2 555
Per patient day (\$)	847	842	759	734	860	859	817
Gross capital expenditure (\$'000)	80 142	65 458	108 266	11 656	32 413	10 872	308 806

(a) See Explanatory notes, paragraph 11. Expenditure on non-admitted patient services is included by default because such expenditure is not separately available.

(b) Included surgically implanted prostheses and homograph items.

(c) Including interest, depreciation and contract services.

(d) Average expenditure figures can vary considerably between hospitals depending on the type of services they provide.

2.16

PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Expenditure—Hospital Type

	NOT FOR PROFIT			Total
	For profit	Religious or charitable	Other(a)	
.....				
Recurrent expenditure(b)				
Wages and salaries including on-costs (\$'000)	1 513 085	1 277 152	83 375	2 873 611
Drug, medical and surgical supplies(c) (\$'000)	720 800	626 173	21 886	1 368 859
Food supplies (\$'000)	46 721	37 401	3 690	87 812
Other domestic services (\$'000)	46 379	44 248	3 693	94 320
Administrative expenses (\$'000)	252 396	218 970	13 857	485 223
Repairs and maintenance (\$'000)	61 450	36 996	2 556	101 002
Other(d) (\$'000)	264 892	278 108	18 925	561 924
Total (\$'000)	2 905 721	2 522 543	147 982	5 576 246
Wages and salaries including on-costs as a proportion of total recurrent expenditure (%)	52.1	50.6	56.3	51.5
Average recurrent expenditure(e)				
Per separation (\$)	2 330	2 911	2 149	2 555
Per patient day (\$)	763	908	615	817
Gross capital expenditure (\$'000)	167 770	126 729	14 307	308 806

(a) Comprising bush nursing, community and memorial hospitals.

(b) See Explanatory Notes, paragraph 11. Expenditure on non-admitted patient services is included by default because such expenditure is not separately available.

(c) Including surgically implanted prostheses and homograft items.

(d) Including interest, depreciation, contract services and transport.

(e) Average expenditure figures can vary considerably between hospitals depending on the type of services they provide.

2.17 PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Expenditure—Hospital size(a)

	HOSPITALS WITH BEDS NUMBERING					
	0–25	26–50	51–100	101–200	Over 200	Total
Recurrent expenditure(b)						
Wages and salaries including on-costs (\$'000)	42 855	205 391	665 680	825 727	1 133 958	2 873 611
Drug, medical and surgical supplies(c) (\$'000)	5 656	54 629	268 779	450 512	589 282	1 368 859
Food supplies (\$'000)	1 449	7 724	22 106	23 046	33 487	87 812
Other domestic services (\$'000)	1 622	9 178	22 424	25 382	35 715	94 320
Administrative expenses (\$'000)	7 064	35 312	127 689	143 538	171 621	485 223
Repairs and maintenance (\$'000)	1 163	7 340	25 120	32 077	35 302	101 002
Other(d) (\$'000)	6 479	31 965	121 912	170 175	231 393	561 924
Total (\$'000)	66 287	351 539	1 253 710	1 670 457	2 234 253	5 576 246
Wages and salaries including on-costs as a proportion of total recurrent expenditure (%)	64.7	58.4	53.1	49.4	50.8	51.5
Average recurrent expenditure(e)						
Per separation (\$)	1 741	1 550	2 194	2 599	3 177	2 555
Per patient day (\$)	513	519	691	882	968	817
Gross capital expenditure (\$'000)	4 935	24 858	86 740	85 259	107 014	308 806

- (a) Based on the number of available beds (average for the year).
 (b) See Explanatory Notes, paragraph 11. Expenditure on non-admitted patient services is included by default because such expenditure is not separately available.

- (c) Including surgically implanted prostheses and homograft items.
 (d) Including interest, depreciation, contract services and transport.
 (e) Average expenditure figures can vary considerably between hospitals depending on the type of services they provide.

HOSPITALS

Following growth in the number of private free-standing day hospital facilities in recent years, in 2003–04 there was a reduction of facilities by 6 to 234. New South Wales experienced the largest decrease of all the states and territories, with 5 less hospitals than in 2002–03. Despite this reduction in number of hospitals, the number of beds/chairs increased slightly by 1.9% from 1910 to 1,947, averaging 260 separations per bed/chair. The number of operating theatres increased by 1.4% from 217 to 220 over the year, while the number of procedure rooms dropped by 5.3% to 178 rooms.

The four main types of free-standing day hospitals in 2003–04 were specialist endoscopy (32.1%), ophthalmic (21.8%), plastic/cosmetic (11.5%) and general (5.6%). Specialist endoscopy centres had the highest number of separations with 175,800 in 2003–04 followed by ophthalmic centres with 81,300.

Patient separations

Patient separations from free-standing day hospital facilities continued to increase from 471,700 in 2002–03 to 505,600 in 2003–04, representing an increase of 7.2%. The average annual growth rate for the five years ending 2003–04 was 10.9%.

Staff

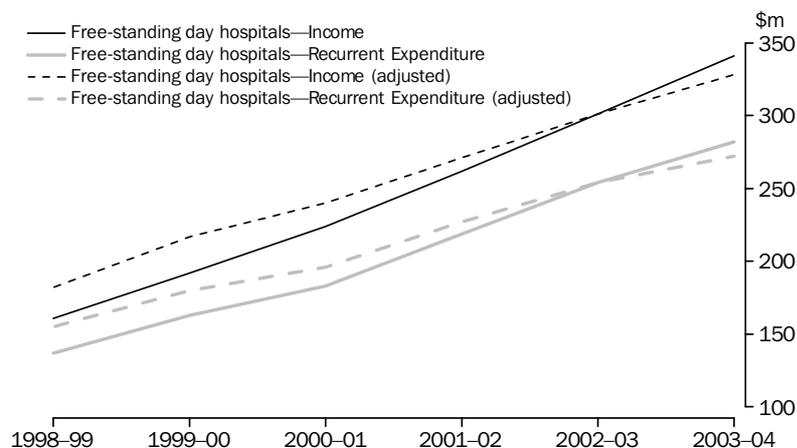
The total number of full-time equivalent staff in free-standing day hospital facilities increased by 4.2% to 2,038 in 2003–04. Nursing staff comprised 60.7% of total staff in 2003–04 compared with 58.6% in 2002–03.

INCOME

Free-standing day hospital facilities received \$341m in income during 2003–04. This was a 13.2% increase over the previous year. This is consistent with a 16.1% average annual increase in income over the five years to 2003–04. In adjusted terms these increases were 9.1 % and 12.5%, respectively. (See Explanatory Notes, paragraph 16, concerning chain volume measures.) Of all income generated in free-standing day hospitals, 94.7% is attributed to patient revenue. This proportion was highest for Western Australia (99.3%) and lowest for Victoria (90.0%).

INCOME *continued*

PRIVATE FREE-STANDING DAY HOSPITAL FACILITIES, Income and expenditure



EXPENDITURE

Recurrent expenditure recorded for free-standing day hospital facilities in 2003–04 was \$282m. This represents an increase of 11.2% over the previous year (7.2% when adjusted for price changes). The average annual growth rate was 11.9% over the five year period to 2003–04 (adjusted for price changes over the period). (See Explanatory Notes, paragraph 16, concerning the use of chain volume measures.) The average expenditure per patient separation continued to increase from \$539 in 2002–03 to \$559 in 2003–04. Gross capital expenditure for free-standing day hospital facilities during 2003–04 was \$22m.

Capital expenditure represented 6.4% of the total income in 2003–04. This proportion was highest for Western Australia (22.3%) and lowest for New South Wales (3.1%).

3.1 FREE-STANDING DAY HOSPITAL FACILITIES, Summary Table

	1993-94	1998-99	1999-2000	2000-01	2001-02	2002-03	2003-04
Hospitals							
New South Wales	63	83	83	89	93	98	93
Victoria	24	41	50	51	52	56	54
Queensland	9	30	33	36	47	44	46
South Australia	3	15	18	19	23	23	22
Western Australia	7	11	13	13	12	12	11
Tasmania, Northern Territory and Australian Capital Territory	5	10	10	9	9	7	8
Australia	111	190	207	217	236	240	234
Hospitals by type(a)							
General surgery	46	33	23	20	18	13	13
Specialist endoscopy	30	50	53	62	71	76	75
Ophthalmic	16	33	43	46	52	52	51
Plastic/cosmetic	—	—	—	27	31	29	27
Other(b)	19	74	88	62	64	70	68
Total	111	190	207	217	236	240	234
Beds/chairs(c)	917	1 460	1 581	1 688	1 764	1 910	1 947
Separations ('000)	182.2	302.1	349.0	393.8	433.3	471.7	505.6
Operating theatres at 30 June	111	180	197	202	215	217	220
Procedure rooms at 30 June	103	162	168	180	179	188	178
Staff(d)	653	1 319	1 537	1 594	1 797	1 955	2 038
Income							
Total (\$'000)	76 502	161 400	191 614	224 239	262 028	301 080	340 730
Patient revenue(e) (%)	94.2	95.5	95.5	95.9	96.3	95.7	94.7
Recurrent expenditure							
Total (\$'000)	61 092	137 480	162 710	183 115	219 091	254 024	282 401
Wages and salaries, including on-costs(f) (%)	39.7	41.5	41.2	42.3	42.1	41.1	39.2
Per separation (\$)	335	455	466	465	506	539	559
Gross capital expenditure (\$'000)							
	15 317	21 628	26 489	26 380	27 285	23 533	21 695

— nil or rounded to zero (including null cells)

(a) See Explanatory Notes, paragraph 12 re category changes.

(b) Including fertility and sleep disorders clinics.

(c) Available beds/chairs (average for the year).

(d) Full-time equivalent (average for the year).

(e) As a proportion of total income.

(f) As a proportion of total recurrent expenditure.

3.2 FREE-STANDING DAY HOSPITALS, Type of centre(a)

	<i>General surgery</i>	<i>Specialist endoscopy</i>	<i>Ophthalmic</i>	<i>Plastic/cosmetic</i>	<i>Other(b)</i>	<i>Total</i>
.....						
Number of hospitals						
New South Wales	7	25	23	9	29	93
Victoria	3	28	7	6	10	54
Queensland	np	14	12	5	np	46
South Australia	np	4	4	7	np	22
Western Australia	—	np	np	—	7	11
Tasmania, Northern Territory and Australian Capital Territory	—	np	np	—	3	8
Australia	13	75	51	27	68	234
Operating theatres at 30 June	28	34	68	33	57	220
Procedure rooms at 30 June	np	81	21	13	np	178
Average number of sessions(c)	5	4	4	4	5	4
Average theatre/room time used(c) (<i>hours</i>)	21	19	15	15	18	17
Average number beds/chairs	206	609	379	153	600	1 947
Separations ('000)	39.2	175.8	81.3	38.2	171.3	505.6
Avg number of separations per bed/chair	190	289	214	250	285	260

— nil or rounded to zero (including null cells)

np not available for publication but included in totals where applicable,
unless otherwise indicated

(a) See Explanatory Notes, paragraph 12 re category changes.

(b) Including fertility and sleep disorders clinics.

(c) Per theatre/room per week.

3.3 FREE-STANDING DAY HOSPITALS, Full-time equivalent staff—Type of centre(a) ..

	<i>General surgery</i>	<i>Specialist endoscopy</i>	<i>Ophthalmic</i>	<i>Plastic/cosmetic</i>	<i>Other(b)</i>	<i>Total</i>
.....						
Nursing staff(c)	124.4	332.7	269.4	131.2	379.5	1 237.3
Administrative and clerical	37.3	231.0	115.2	60.1	187.3	630.9
Other(d)	10.4	36.6	33.4	11.5	77.9	169.7
Total	172.0	600.4	418.0	202.8	644.7	2 037.8

(a) See Explanatory Notes, paragraph 12 re category changes.

(b) Including fertility and sleep disorders clinics.

(c) Including other personal care staff e.g. warders, orderlies, and
hospital attendants.(d) Including salaried medical officers and other diagnostic health
professionals, domestic and other staff.

3.4 FREE-STANDING DAY HOSPITALS, Full-time equivalent staff—States & territories

	NSW	Vic.	Qld	SA	WA	Tas., NT and ACT	Aust.
Nursing staff(a)	491.0	208.9	373.6	77.1	51.2	35.6	1 237.3
Administrative and clerical	261.3	110.6	165.9	46.3	23.2	23.5	630.9
Other(b)	95.5	19.9	33.0	16.0	3.2	2.2	169.7
Total	847.8	339.4	572.5	139.4	77.5	61.3	2 037.8

(a) Including other personal care staff e.g. warders, orderlies, and hospital attendants.

(b) Including salaried medical officers and other diagnostic health professionals, domestic and other staff.

3.5 FREE-STANDING DAY HOSPITALS, Income—Type of centre(a)

	General surgery	Specialist endoscopy	Ophthalmic	Plastic/cosmetic	Other(b)	Total
Income						
Patient revenue ('000)	np	76 303	95 492	29 753	np	322 810
Other(c) ('000)	np	8 539	4 777	1 770	np	17 920
Total ('000)	25 257	84 841	100 268	31 523	98 841	340 730
Patient revenue as a proportion of total revenue (%)	np	89.9	95.2	94.4	np	94.7

np not available for publication but included in totals where applicable, unless otherwise indicated

(c) Including investment income, income from charities, bequests, visitors' meals, and accommodation and kiosk sales.

(a) See Explanatory Notes, paragraph 12 re category changes.

(b) Including fertility and sleep disorders clinics.

3.6 FREE-STANDING DAY HOSPITALS, Income—States & territories

	NSW	Vic.	Qld	SA	WA	Tas., NT and ACT	Aust.
Income							
Patient revenue (\$'000)	141 981	48 519	88 088	19 451	np	np	322 810
Other (\$'000)	6 618	5 386	4 787	902	np	np	17 920
Total (\$'000)	148 599	53 905	92 875	20 353	13 923	11 076	340 730
Patient revenue as a proportion of total revenue (%)							
	95.5	90.0	94.8	95.6	np	np	94.7

np not available for publication but included in totals where applicable, unless otherwise indicated

3.7 FREE-STANDING DAY HOSPITALS, Expenditure—Type of centre(a)

	General surgery	Specialist endoscopy	Ophthalmic	Plastic/ cosmetic	Other(b)	Total
Recurrent expenditure(c)						
Wages and salaries including on-costs (\$'000)	9 165	31 224	23 622	10 366	36 244	110 620
Drug, medical and surgical supplies(d) (\$'000)	5 980	10 093	26 264	5 059	20 312	67 708
Administrative expenses (\$'000)	3 948	13 163	13 507	5 161	15 908	51 688
Other(e) (\$'000)	4 306	16 289	9 522	5 299	16 967	52 383
Total (\$'000)	23 398	70 769	72 914	25 885	89 434	282 401
Wages and salaries, including on-costs as a proportion of total recurrent expenditure. (%)						
	39.2	44.1	32.4	40.0	40.5	39.2
Average recurrent expenditure per separation(f) (\$)						
	598	403	897	678	522	559
Gross capital expenditure (\$'000)						
	533	4 412	5 856	2 549	8 345	21 695

(a) See Explanatory Notes, paragraph 12 re category changes.

(b) Including fertility and sleep disorders clinics.

(c) See Explanatory Notes, paragraph 11. Expenditure on non-admitted patient services is included by default because such expenditure is not separately available.

(d) Including surgically implanted prostheses and homograft items.

(e) Including repairs and maintenance, interest, depreciation, contract services and payments to sessional medical officers.

(f) Average expenditure figures can vary considerably between hospitals depending on the type of services they provide.

3.8 FREE-STANDING DAY HOSPITALS, Expenditure—States & territories

	NSW	Vic.	Qld	SA	WA	Tas., NT and ACT	Aust.
.....							
Recurrent expenditure(a)							
Wages and salaries including on-costs (\$'000)	48 533	18 194	28 634	8 317	3 899	3 044	110 620
Drug, medical and surgical supplies(b) (\$'000)	30 222	9 720	18 235	3 595	3 394	2 542	67 708
Administrative expenses (\$'000)	25 390	6 878	12 636	3 835	1 074	1 874	51 688
Other(c) (\$'000)	24 296	8 907	12 245	3 379	2 383	1 173	52 383
Total (\$'000)	128 441	43 699	71 752	19 126	10 750	8 633	282 401
Wages and salaries including on-costs as a proportion of total recurrent expenditure (%)	38	42	40	43	36	35	39
Average recurrent expenditure per separation(d) (\$)	774	355	488	518	599	580	559
Gross capital expenditure (\$'000)	4 545	3 261	9 264	876	np	np	21 695

np not available for publication but included in totals where applicable, unless otherwise indicated

(a) See Explanatory Notes, paragraph 1.1. Expenditure on non-admitted patient services is included by default because such expenditure is not separately available.

(b) Including surgically implanted prostheses and homograft items.

(c) Including repairs and maintenance, interest, depreciation, contract services and payments to sessional medical officers.

(d) Average expenditure figures can vary considerably between hospitals depending on the type of services they provide.

EXPLANATORY NOTES

- INTRODUCTION**
- 1** This publication contains statistical information for 2003–04 and previous years, obtained from annual censuses of all licensed private hospitals in Australia. It contains details about the facilities, activities, staffing and finances of all private acute and psychiatric hospitals and free-standing day hospital facilities.
- 2** Corresponding statistics for public hospitals are compiled by the Australian Institute of Health and Welfare (AIHW) in their annual publication, *Australian Hospital Statistics 2003-04*.
- SCOPE**
- 3** Included are all private acute and psychiatric hospitals licensed by state and territory health authorities and all free-standing day hospital facilities approved by the Commonwealth Department of Health and Ageing for the purpose of health insurance benefits.
- COLLECTION METHODOLOGY**
- 4** Data collection forms are sent each year to all private hospitals in Australia for completion and return to the ABS. A large component of the required data on admitted patients is sent to the ABS by state and territory health authorities on behalf of hospitals, thus relieving hospitals of the task of collating this information for the ABS.
- COVERAGE**
- 5** All private hospitals in Australia which operated for all or only part of the reference year are included in the collection.
- 6** Updated lists of private hospitals are received from state, territory and Commonwealth health authorities and every effort is made to include all hospitals in scope.
- DEFINITIONS**
- 7** The data items and definitions are based on the *National Health Data Dictionary* published by the AIHW, with the addition of data items requested by private hospital associations and health authorities. Refer to the Glossary for definitions of the data items used in this publication.
- DATA QUALITY**
- 8** Establishments which provided incomplete data were contacted to obtain the missing details. Hospital staff were asked to provide estimates in cases where records for the data item were not kept. If reasonable estimates could not be provided by the establishment then the data item was either left blank or imputed by ABS staff. Imputation was based on data received in previous years and on the results of the data provided by all responding hospitals. Due to the high response rates, imputation rates were very low.
- 9** The statistics from this collection may be subject to various sources of error. These may be errors in reporting (e.g. because estimates may have been used in the case of actual data not being available, misunderstanding of questions or unwillingness of respondents to reveal all details) or errors arising during processing (e.g. coding, data recording). Every effort is made to reduce errors in the collection to a minimum by careful design of questionnaires and by processing procedures designed to detect errors and enable them to be corrected. These procedures include external coverage checks, clerical and computer editing of input data, error resolution including referral back to the source, and clerical scrutiny of preliminary aggregates.

DATA QUALITY *continued*

10 Hospital morbidity data, providing admitted patient's details such as age, principal diagnosis and procedure, are routinely provided by hospitals to state and territory health authorities. Arrangements were made, with consent of the hospitals, for state health authorities to provide the ABS with the relevant morbidity data. Any significant inconsistencies between the data collated by health authorities and by hospitals were followed up and resolved. As a result of this reconciliation of the 2003–04 data, the final total for patient separations was 0.52% higher than that reported by consenting hospitals and 1.99% higher than that compiled from data supplied by state health authorities.

11 Differences in accounting policy and practices lead to some inconsistencies in the financial data provided by hospitals. Measurement of expenditure is affected by management policy on such things as depreciation rates, bad debt and goodwill write-off. Further inconsistency occurs in cases where all property and fixed assets accounts are administered by a parent body or religious order headquarters and details are not available for the individual hospitals.

DAY HOSPITALS CATEGORIES

12 Free-standing day hospital facilities are classified by the main income earning activity of the centre. Plastic/cosmetic facilities were collected as a separate category for the first time in 2000–01.

CASEMIX

13 Casemix is an information tool which recognises that there are similarities between groups of hospital patients. A special feature of a Casemix classification is that for each class, patients will have clinical similarities and will be homogeneous with respect to another variable such as the cost of care.

14 In Australia, a system of Diagnosis Related Groups (AN–DRG) is used as a means of classifying patients for Casemix purposes. Each AN–DRG represents a class of patients with similar clinical conditions requiring similar total hospital resources for their treatment.

15 This classification is used by most states and territories as a management tool for public hospitals and, to varying degrees, for their funding. The classification is becoming more widely used by private hospitals as a reporting tool. Some contracting between health funds and private hospitals is gradually incorporating charging for patients based on their Casemix classification.

CHAIN VOLUME MEASURES

16 Chain volume measures have been used in the Summary of Findings in this publication to enable analysis of the changes to recurrent expenditure for private hospitals in 'real' terms. It is considered that these measures provide better indicators of movement in real output and expenditures than do constant price estimates. Unlike constant price estimates, they take account of changes to price relativities that occur from one year to the next. Chain volume measures are derived by revaluing the original current price series of recurrent expenditure for private hospitals by a specifically compiled measure of price change. The reference period for the chain volume measure is 2002–2003. In this publication the Laspeyres input cost index for hospitals was used. This was specifically designed to measure price change in hospital recurrent expenditures. The data are consistent with the March quarter 2005 *Australian National Accounts: National Income, Expenditure and Product* (cat. no. 5206.0). Detailed information on chain volume measures and their introduction into the Australian National Accounts are contained in:

Information Paper: Australian National Accounts, Introduction of Chain Volume and Price Indexes, 1997 (cat. no. 5248.0); and

Information Paper: Upgraded Australian National Accounts, 1998 (cat. no. 5253.0)

CLASSIFICATIONS

17 Principal diagnosis and procedure for admitted patients are reported using the *International Statistical Classification of Diseases and Related Health Problems, 10th Revision – Australian Modification (ICD-10-AM)*.

CLASSIFICATIONS *continued*

18 The locations of all private health establishments are coded according to the *Australian Standard Geographical Classification, 2003 Edition* (cat. no. 1216.0).

19 The proportion of population in Capital City Statistical Divisions is calculated using the population as at 31 December 2003, *Australian Demographic Statistics, December 2004* (cat. no. 3101.0).

GENERAL

ACKNOWLEDGEMENT

20 ABS publications draw extensively on information provided by individuals, businesses, governments and other organisations. Their continued cooperation is very much appreciated. Information received by the ABS is treated in strict confidence as required by the *Census and Statistics Act 1905*.

RELATED PUBLICATIONS

21 Other ABS publications which may be of interest include:

Hospitals Australia, 1991–92 (cat. no. 4391.0) – Produced jointly with AIHW, released 1995

Information Paper: Australian National Accounts, Introduction of Chain Volume and Price Indexes, 1997 (cat. no. 5248.0) – Released 19 March 1998

Information Paper: Upgraded Australian National Accounts, 1998 (cat. no. 5253.0) – Released 4 November 1998

National Health Survey: Private Health Insurance, Australia, 1995 (cat. no. 4334.0) – Released 28 May 1998

National Health Survey: Summary of Results, 2001 (cat. no. 4364.0) – Released 25 October 2002

The following related publications are issued by other organisations.

- Available from the AIHW Distribution Centre, GPO Box 84, Canberra ACT 2601 or from its web site <www.aihw.gov.au>:

Australian Hospital Statistics, 1993–95: An Overview

Australian Hospital Statistics, 2003–04

Australia's Health, 2004

Health Expenditure Australia, 2002-03

Health and Community Services Labour Force, 2001 – Produced jointly with ABS

Medical Labour Force, 2002

Medical Workforce Supply and Demand in Australia: a discussion paper, 1998

National Health Data Dictionary, Version 12, 2003

Nursing Labour Force, 2002

- Available from the New South Wales Health Department, Sydney – telephone 0293919000 or from its web site <www.health.nsw.gov.au>:

Fourth National Report on Health Sector Performance Indicators – by the

National Health Ministers' Benchmarking working group, July 2000

- Available from the National Mental Health Report Service (Mental Health Branch, Department of Health and Ageing – telephone 1800 066 247) or from its web site <www.mentalhealth.gov.au>:

National Mental Health Report, 2002

- Available from the Private Health Insurance Administration Council, Canberra (PHIAC) ACT 2600 – telephone 02 6215 7900 or from its website <www.phiac.gov.au>:

Membership Statistics – Released quarterly

PHIAC A Report, – Released quarterly

Statistical Trends in Membership and Benefits, – Released quarterly

RELATED PUBLICATIONS

continued

22 Current publications and other products released by the ABS are listed in the *Catalogue of Publications and Products* (cat. no. 1101.0). The Catalogue is available from any ABS office or the ABS web site <<http://www.abs.gov.au>>. The ABS also issues a daily Release Advice on the web site which details products to be released in the week ahead.

ABS DATA AVAILABLE ON
REQUEST

23 As well as the statistics included in this and related publications, the ABS may have other relevant data available. Inquiries should be directed to the National Information and Referral Service on 1300 135 070.

EFFECTS OF ROUNDING

24 Where figures have been rounded, discrepancies may occur between totals and sums of the component items.

GLOSSARY

Accredited/certified hospitals	Hospitals that are accredited/certified by the Australian Council on Healthcare Standards (ACHS 2003), Benchmark Certification, Business Excellence Australia (SAI-Global Ltd) or any other body approved for private sector quality criteria certification or ISO 9000 quality family standards. Participation in these schemes are voluntary and are awarded when hospitals demonstrate a continuing adherence to quality assurance standards. Hospital accreditation/certification is regarded as one of the few indicators of hospital quality that is available nationally.
Acute hospitals	These provide at least minimal medical, surgical or obstetrical services for admitted patient treatment and/or care and provide round-the-clock comprehensive qualified nursing services as well as other necessary professional services. They must be licensed by the state or territory health authority. Most of the patients have acute conditions or temporary ailments and the average stay per admission is relatively short.
Administrative expenses	Includes management and administrative support expenditure such as rates and taxes, printing, telephone, stationery, insurances and motor vehicle running expenses.
Allied health services	These are provided by units and clinics for the treatment and counselling of patients. They mainly comprise physiotherapy, speech therapy, family planning, dietary advice, optometry and occupational therapy.
Average length of stay in hospital	This is calculated by dividing the aggregate number of patient days by the number of separations associated with those patient days.
Beds	These are provided for the care and treatment of admitted (same-day and overnight-stay) patients. <ul style="list-style-type: none">■ Available beds are those immediately available (occupied and unoccupied) for the care of admitted patients as required. In the case of free-standing day hospital facilities, they include chairs, trolleys, recliners and cots and are used mainly for post-surgery recovery purposes only.■ Occupied beds are calculated by dividing total patient days by the number of days in the year (366 in 2003–04).
Capital expenditure	Comprises expenditure on land and buildings, computer facilities, major medical equipment, plant and other equipment, and expenditure in relation to intangible assets, having regard to guidelines followed as to the differentiation between capital and recurrent costs.
Free-standing day hospital facilities	These provide investigation and treatment for acute conditions on a day-only basis and are approved by the Commonwealth for the purposes of basic table health insurance benefits.
Hospital type	'Not-for-profit' hospitals are those which qualify as a nonprofit organisation with either the Australian Taxation Office or the Australian Securities and Investment Commission. These are further categorised as 'religious or charitable' and 'other'. All other hospitals are classed as 'for profit'.
ICD	International Statistical Classification of Diseases and Related Health Problems. The purpose of the ICD is to permit the systematic recording, analysis, interpretation and comparison of mortality and morbidity data collected in different countries or areas and at different times. The ICD, which is endorsed by the World Health Organisation (WHO), is primarily designed for the classification of diseases and injuries with a formal diagnosis. Further information is available from the WHO web site <<www.who.int>>.

Income	<p>Three categories of income are identified:</p> <ul style="list-style-type: none"> ■ Patient revenue includes revenue received by, and due to, the hospital in respect of patient liability for accommodation and other fees, regardless of source of payment (Commonwealth, health fund, insurance company, direct from patient) or status of patient (whether admitted or non-admitted patient). ■ Recoveries includes income received from items such as staff meals and accommodation, and facility fees paid by medical practitioners. ■ Other income includes revenue such as investment income from temporarily surplus funds and income from charities, bequests, meals and accommodation provided to visitors, and kiosk sales. Revenue payments received from state or territory governments are excluded.
Insurance status	Indicates whether or not hospital insurance is held with a registered health insurance fund, or a general insurance company. Patients who have insurance cover only for ancillary services are regarded as not having hospital insurance.
Occasions of service	Any services provided to a non-admitted patient in a functional unit (e.g. radiology) of the hospital. Each diagnostic test or simultaneous set of related diagnostic tests is counted as one occasion of service.
Occupancy rate	<p>Is calculated by dividing patient days by the product of average number of beds and the number of days in the year (366 in 2003–04) and expressed as a percentage.</p> $\text{occupancy rate (\%)} = \frac{\text{patient days} \times 100}{\text{average available beds} \times 366}$
Other domestic services	Includes staff services, accommodation, bedding and linen, hardware, crockery, cutlery, laundering and cleaning of uniforms.
Other specialised units/wards	Includes neurosurgical unit, acute spinal cord injury unit, burns unit, major plastic/reconstructive surgery unit, transplantation units, acute renal dialysis unit, infectious diseases unit, comprehensive epilepsy centre, clinical genetics unit, AIDS unit, diabetes unit, in-vitro fertilisation unit, alcohol and drug unit and other specialised services.
Patient	<p>A patient is a person for whom a hospital accepts responsibility for treatment and/or care.</p> <ul style="list-style-type: none"> ■ An admitted patient undergoes a hospital's formal admission process. Babies born in hospital are excluded unless they are provided with medical care other than that which would normally be provided to a newborn, or they remain in hospital after the mother has been discharged, or are the second or subsequent live born infant of a multiple birth and the mother is currently an admitted patient. Persons accompanying a sick patient (e.g. nursing mothers and parents accompanying sick children) are also excluded. ■ Overnight-stay patients are admitted to and separated from hospital on different dates (i.e. they stay at least one night in hospital). ■ Same-day patients are admitted and separated on the same day (i.e. they are in hospital for a period that does not include an overnight stay). ■ Non-admitted patients do not undergo a hospital's formal admission process. These include outpatients, accident and emergency patients and off-site (community/outreach) patients.
Patient days	These are the aggregate number of days of stay (i.e. separation date minus admission date) for all overnight-stay patients who were separated from hospital during the year. Periods of approved leave are subtracted from these calculations. Same-day patients are each counted as having a stay of one day.
Procedure	<p>A clinical intervention that:</p> <ul style="list-style-type: none"> ■ is surgical in nature; and/or ■ carries a procedural risk; and/or ■ carries an anaesthetic risk; and/or

Procedure <i>continued</i>	<ul style="list-style-type: none"> ■ requires specialised training; and/or ■ requires special facilities or equipment only available in an acute care setting. <p>For admitted patients, procedures undertaken during an episode of care are recorded in accordance with ICD-10-AM (2nd edition).</p>
Psychiatric hospitals	Psychiatric hospitals are licensed/approved by each state or territory health authority and cater primarily for admitted patients with psychiatric, mental or behavioural disorders.
Recurrent Expenditure	Comprises expenditure on wages and salaries, drug, medical and surgical supplies, food supplies, domestic services, administrative expenses, repairs and maintenance, and other recurrent expenditure. For further information refer to the National Health Data Dictionary V12 which is available on the AIHW web site <<www.aihw.gov.au>>.
Repairs and maintenance	Includes costs of maintaining, repairing, replacing and providing additional equipment, maintaining and renovating buildings, and minor additional works.
Separation	Occurs when an admitted patient: <ul style="list-style-type: none"> ■ is discharged ■ is transferred to another institution ■ leaves against medical advice ■ dies whilst in care ■ statistical discharge, i.e. when type of care changes from/to acute, rehabilitation, palliative or non-acute care, or ■ leaves hospital for a period of seven or more days.
Specialised service	A facility or unit dedicated to the treatment or care of patients with particular conditions or characteristics.
Staff	Includes staff employed by the hospital and contract staff employed through an agency in cases where the contract is for the supply of labour. <ul style="list-style-type: none"> ■ Nursing staff comprises registered nurses, enrolled nurses, student nurses, trainee/pupil nurses and other personal care staff (e.g. orderlies, warders and nursing assistants). ■ Administrative and clerical staff includes computing staff, finance staff and civil engineers. ■ Domestic and other staff includes staff engaged in cleaning, laundry services, the provision of food, trades people and maintenance staff. ■ Diagnostic and health professionals includes qualified diagnostic health professionals, allied health professionals and laboratory technicians. ■ Full-time equivalent staff represents the sum of full-time staff and the full-time equivalent of part-time staff. It is derived by adding the on-job hours worked and hours of paid leave (sick, recreation, long service, workers' compensation leave) by/for a staff member (or contract employee where applicable) divided by the number of hours normally worked by a full-time staff member when on the job (or contract employee where applicable) under the relevant award or agreement.
Statistical discharge – type change	The process by which a hospital records a patient discharge when changing type of care. This occurs when the type of care changes from/to acute, rehabilitation, palliative or non-acute care.
Statistical divisions	These are groupings of the whole or part of legal local government areas. They are designed to be relatively homogeneous regions characterised by identifiable social and economic units within the region. Capital City Statistical Divisions, shown in some tables of this publication, comprise Sydney, Melbourne, Brisbane, Adelaide, Perth, Greater Hobart, Darwin and Canberra.
Type of centre	Free-standing day hospital centres are categorised by type according to their main economic activity. The following types of centres are separately categorised: General surgery, specialist endoscopy, ophthalmic, plastic/cosmetic and other.

Wages and salaries (including on-costs) Includes wages and salaries, superannuation employer contributions, payroll tax, workers' compensation and workcare premiums, uniforms, education, personnel costs and fringe benefits tax.

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