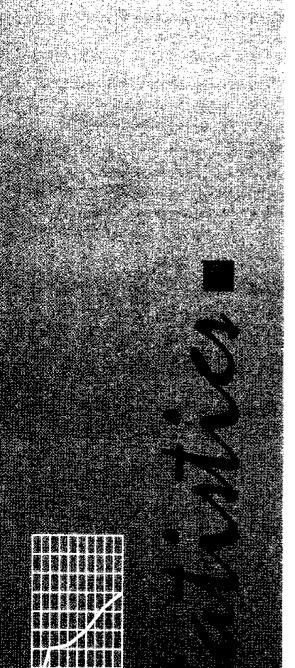


1995-96

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Private Hospitals

Australia

NOTES

INTRODUCTORY NOTES

This publication presents details from the latest national census of private hospitals. Three categories of hospitals are identified: acute hospitals, psychiatric hospitals and free-standing day hospital facilities. The number of psychiatric hospitals is small and a number of them are owned by the same business entity. To maintain their confidentiality, psychiatric hospitals are combined with acute hospitals in most tables in this publication.

For confidentiality reasons, also, the details for the two private acute hospitals in the Australian Capital Territory are included with the details for private acute and psychiatric hospitals in New South Wales and the details for the private acute hospital in the Northern Territory are included with such details for South Australia.

State health authorities for South Australia and Tasmania were unable to provide reliable information for the hospital insurance status of patients and data for the Northern Territory are unpublishable for confidentiality reasons. Details for other States, however, are shown in table 19.

Any differences between the data given in this report 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.

SYMBOLS AND OTHER USAGES

ABS Australian Bureau of Statistics

AIHW Australian Institute of Health and Welfare

AN-DRG Diagnosis Related Groups
n.p. not available for publication
— nil or rounded to zero

INQUIRIES

For information about other ABS statistics and services, please refer to the back of this publication.

For further information about these statistics, contact Keith Carter on Brisbane (07) 3222 6374.

Dennis Trewin Acting Australian Statistician

CONTENTS

		Paş	ge
EDITORIAL			
		Summary of findings	5
TABLES			
Summary tables			
Summary tables	1	Private acute and psychiatric hospitals, Australia: 1991–92 to 1995–96	13
	2	Free-standing day hospital facilities, Australia: 1991–92 to 1995–96	
Private acute and psych	niatric hospita	als	
	3	Numbers, size and beds, States and Territories	15
	4	Numbers, size and beds by hospital classification, Australia	
	5	Separations, patient days, average length of stay and bed occupancy rates, States and Territories, 1993–94 to 1995–96	
	6	Separations, patient days, average length of stay and bed occupancy rates,	.,
		by hospital classification, Australia	18
	7	Separations, patient days, average length of stay and bed occupancy rates,	
		by hospital size, Australia	18
	8	Operating and day surgery theatres, States and Territories, last week of pay	
		period before 30 June 1996	19
	9	Specialised wards and units, numbers, beds and nursing staff, Australia 1	19
	10	Number of full-time equivalent staff and average per bed, States and Territories	20
	11	Revenue categories, States and Territories	20
	12	Expenditure categories, States and Territories	
	13	Expenditure categories by hospital classification, Australia	
	14	Expenditure categories by hospital size, Australia	
	15	Number of hospitals, separations, patient days and average length of stay by patient classification, Australia	
	16	Average length of stay by patient classification, States and Territories 2	
	17	Average length of stay by patient classification and hospital size,	.4
		Australia	:5
	18	Number of hospitals and number and proportion of procedures by type of procedure, Australia	, ,
	19	Separations and average length of stay by hospital insurance status, States and	, ,
	17	Territories	6
	20	Number of hospitals with specialised units or wards, States and Territories	
	21	Number of hospitals with designated wards, units or clinics providing	
		non-admitted patient care, States and Territories	.8
Free-standing day hospi	tal facilities		
	22	Numbers of facilities, theatres, procedure rooms, beds/chairs, sessions and separations, Australia	n
	23	Full-time equivalent staff, Australia	
	24	Revenue categories, Australia	
	25	Expenditure categories, Australia 3	
	26	Most commonly performed procedures, Australia 3	
	27	Separations by type of anaesthesia, Australia	
			_

CONTENTS continued

	28	Separations by age and sex, Australia	32
	29	Separations by principal diagnosis, Australia	
	30	Separations by principal procedure, Australia	34
	31	Separations by mode of separation, States and Territories	35
ADDITIONAL INFORMATION			
		Explanatory notes	36
		Appendix: List of Terms	40

SUMMARY OF FINDINGS

INTRODUCTION

The contribution by the private hospital sector to institutionalised health care is significant. One in every four days of hospitalisation are provided by private hospitals.

In 1995–96, revenue generated by private hospitals accounted for 0.7% of gross national product. Total recurrent expenditure for the hospital industry was \$15,055m of which private hospitals contributed just over 19%.

NUMBER OF PRIVATE HOSPITALS

There were 463 private hospitals in operation during 1995–96 comprising 299 acute hospitals, 24 psychiatric hospitals (table 3) and 140 free-standing day hospital facilities (table 2).

ACUTE AND PSYCHIATRIC HOSPITALS

Over the last five years, the numbers of acute and psychiatric hospitals have risen slightly from 319 in 1991–92 to 323 in 1995–96 and peaking at 329 in 1993–94 (table 1). These hospitals provide medical, surgical, obstetric, psychiatric and rehabilitative procedures for overnight-stay and same-day patients. Generally, acute and psychiatric hospitals are combined throughout this publication (see Notes on page 2).

Acute and psychiatric hospitals are distributed unevenly across the States and Territories. However, the size of these hospitals also varies and therefore numbers of hospitals do not necessarily reflect levels of service. In 1995–96 Victoria, the second most populous State, had the largest number of hospitals (104). In comparison New South Wales, the most populous State, had 91 hospitals. The number of hospitals in each State and Territory has changed very little over the last five years (table 1).

FREE-STANDING DAY HOSPITAL FACILITIES

Free-standing day hospital facilities comprise general surgery, specialist endoscopy, ophthalmic and other (fertility management, plastic surgery and sleep disorders) clinics. The Commonwealth Government considers day surgery is a proven and cost effective alternative to overnight patient care and has encouraged this form of care in recent years. The number of free-standing day hospitals has almost doubled, from 72 in 1991–92 to 140 in 1995–96 (table 2). Conditions for the growth of these facilities have varied greatly between the States and Territories because of market forces, and State and Commonwealth government initiatives to encourage the establishment of new facilities. Over half (53%) of the increase over the last five years has occurred in New South Wales. Of the 140 day hospital facilities operating in Australia in 1995–96, 73 were in New South Wales, 23 were in Victoria, 17 were in Queensland and the remaining 27 were in the other States and Territories (table 2).

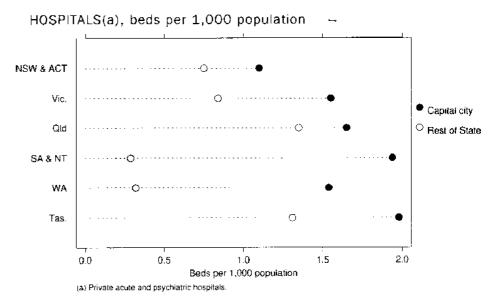
Day hospital theatres operating within acute and psychiatric hospitals numbered 156 in 1995–96 (table 8). Details for these are included with the details for acute and psychiatric hospitals throughout this publication.

BED SUPPLY

ACUTE AND PSYCHIATRIC HOSPITALS

The average number of beds available for overnight accommodation in acute and psychiatric hospitals increased by 2,012 (10%) to 22,757 beds between 1991–92 and 1995–96 (table 1). Over the five-year period to 1995–96, Queensland recorded the largest increase in bed supply (872 beds) while South Australia and the Northern Territory combined recorded the smallest (112 beds) (see reference to the Northern Territory and the Australian Capital Territory in Notes on page 2).

Almost three-quarters (74%) of available beds in 1995–96 were in hospitals located within capital city statistical divisions (table 3), where 64.0% of Australia's population reside. However, in considering this disproportionate supply of private hospital beds in capital city statistical divisions it should be recognised that some large specialised hospitals in the capital cities may service the entire State or even wider areas. South Australia and the Northern Territory combined have the largest variation in bed supply (based on available beds per 1,000 resident population) between capital cities and the rest of State, while Queensland has the smallest.



FREE-STANDING DAY HOSPITAL FACILITIES

Beds for overnight accommodation are not provided at free-standing day hospital facilities as patients undergo day-only surgical and medical procedures. However, 1,023 beds, chairs, recliners, etc. were in use at these hospital facilities during 1995–96 mainly for post-operative use (table 22). This number has increased from 556 in 1991–92 as a result of the rapid expansion in the numbers of day hospital facilities over the period.

USAGE, OCCUPANCY AND LENGTH OF STAY

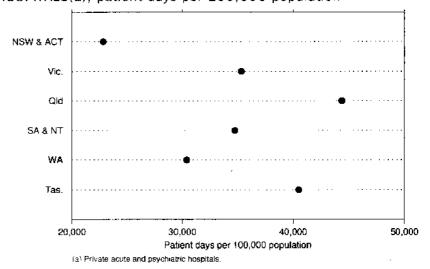
in 1995–96 there were 1,661,100 separations of admitted patients recorded at all private hospitals in Australia; 1,452,300 for private acute and psychiatric hospitals and 208,800 for free-standing day hospital facilities. The contribution by free-standing day hospital facilities has risen from 10% of all separations five years ago to 13% in 1995–96.

ACUTE AND PSYCHIATRIC HOSPITALS

The number of separations recorded at acute and psychiatric hospitals has increased by 295,100 (26%) over the five years to 1995–96 (table 1). Between 1994–95 and 1995–96, the number of separations increased by 105,600 (8%). Queensland hospitals accounted for 37% of this increase since the previous year and Victorian hospitals 23%.

The accumulated days of hospitalisation (patient days) associated with all separations in 1995–96 amounted to 5,844,200, an increase of 19% over the five year period (table 1). Between 1994–95 and 1995–96, the number of patient days increased by 422,300 (8%). Queensland hospitals accounted for 60% of this increase, partly due to special statistical action taken by Queensland Health for Casemix classification purposes (see Explanatory Notes, paragraphs 15–17). The privatisation of one large Commonwealth Government hospital early in 1995 also added significantly to the large increase in patient days and separations recorded for Queensland. Per head of population, Queensland recorded the highest number of patient days. However, after the data are adjusted to remove the statistical effect noted above, Queensland recorded a figure very similar to that recorded by Tasmania.

HOSPITALS(a), patient days per 100,000 population



The average length of stay for patients separating from acute and psychiatric hospitals in 1995–96 was 4.0 days (table 1), a small decline from 4.2 days in 1991–92. This decline in part reflects the increase in the proportion of patients who were same-day.

ACUTE AND PSYCHIATRIC HOSPITALS continued

Bed occupancy rates provide an indication of the usage of available facilities and services at acute and psychiatric hospitals. The national rate for 1995–96 was 70%. This compares with rates under 67% for each of the previous four years (table 1). Generally, occupancy rates increase with the increasing size of the hospital. This is because the larger hospitals are able to offer a wider range of services and they are more often located in centres with high population densities. In 1995–96 the occupancy rate for hospitals with 26–50 beds was 59% while the rate for the largest hospitals (with over 200 beds) was 81% (table 7). Queensland recorded the highest occupancy rate (81%) while New South Wales and the Australian Capital Territory had the lowest (64%) (table 5). However, the special statistical action taken by Queensland Health (see Explanatory Notes, paragraphs 15–17) was partly responsible for their high bed occupancy rate. Adjustment to remove this effect reduces the Queensland occupancy rate to 74% and the national rate for 1995–96 to 69%.

TYPE OF PATIENTS

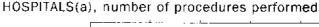
PATIENT CLASSIFICATION

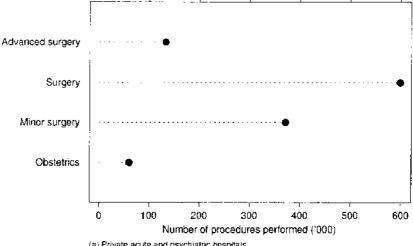
The primary classification of all private hospital patients is into same-day and overnight-stay. Of the 1,452,300 patient separations at acute and psychiatric hospitals in 1995–96, 41% were same-day patient separations. This proportion has been increasing in recent years, from 35% in 1994–95, and 30% in 1993–94 (table 1). All patients treated at free-standing day hospital facilities are classed as same-day patients.

For patient billing purposes, overnight-stay patients are classed as advanced surgery, surgery, minor surgery, obstetric, psychiatric, rehabilitation, nursing home type and medical/other. Surgery (including advanced surgery and minor surgery) patients represented 57% of all overnight-stay patients separated at acute and psychiatric hospitals in 1995–96 (table 15). The average length of stay ranged from 3.3 days for patients classed as surgery and minor surgery, to 197 days for nursing home type patients.

PROCEDURES

There were 1,162,200 surgical and obstetric procedures performed at acute and psychiatric hospitals (but mainly at acute hospitals) in 1995–96 (table 18). Of this number, 95% were surgical procedures while 5% were obstetric procedures. Since 1991–92, the number of procedures performed has increased by 25% in line with a similar increase in the number of separations over that period. Surgical procedures are further categorised into advanced surgery, surgery and minor surgery.





(a) Private acute and psychiatric hospitals.

Investigative endoscopies (listed as Medicare Benefits Schedule item numbers 30473 and 32090) were the most commonly performed procedures in free-standing day hospital facilities, accounting for 35% of the 251,300 procedures performed in 1995-96 (table 26). While most day patients will have a single procedure in their hospital visit, some will undergo two (or more) in the same visit. The total procedures performed at these facilities has increased by 85% since 1991-92 when a total of 136,100 procedures was recorded. This large growth in procedures performed reflects the rapid growth of free-standing day hospital facilities in the period and the associated increase of 69% in the number of separations over that period.

STAFF

FULL-TIME EQUIVALENT STAFF — ANNUAL AVERAGES

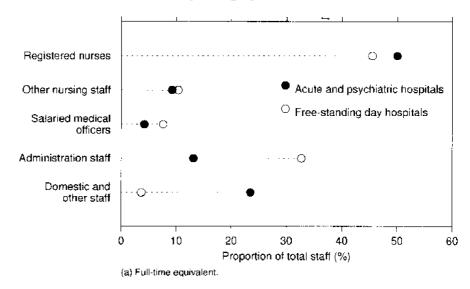
There were 39,100 full-time equivalent staff employed at acute and psychiatric hospitals during 1995–96, 26% up on the total in 1991–92 (table 10). The average number of staff per occupied bed was 2.4 in 1995–96. This ratio has fluctuated between 2.2 and 3.0 over the past five years.

Full-time equivalent staff at free-standing day hospital facilities in 1995–96 numbered 890 (table 23). This doubling in staff numbers since 1991–92 is consistent with the large growth in these facilities over that period.

Staff figures do not include the many visiting medical and other health professionals who use private hospital facilities but are not employed by the hospitals.

The mix of staff employed at acute and psychiatric hospitals differs significantly from that at free-standing day hospital facilities. For both types of hospital, however, registered nurses were the largest group.

ALL HOSPITALS, staff(a) by category



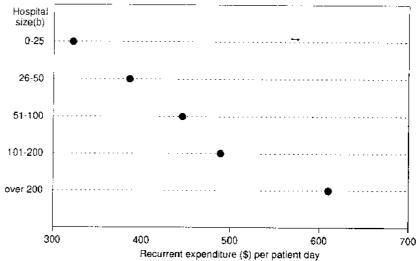
EXPENDITURE

ACUTE AND PSYCHIATRIC HOSPITALS

Total operating expenditure for all private acute and psychiatric hospitals in Australia during 1995-96 was \$2,824.1m (table 1). The corresponding total for 1991-92 was \$1,954.6m, an increase of 44% over the five-year period.

The average recurrent expenditure per patient day in 1995-96 was \$483, an increase of 21% on the 1991-92 average (table 1). Unit costs in 1995-96 ranged from an average of \$322 for smaller hospitals (with 25 or fewer beds) to \$610 for the larger hospitals (with over 200 beds) (table 14). It should be noted that these unit costs are based on total costs for services to both admitted patients and non-admitted patients. Generally, larger hospitals tend to provide the more complex procedures involving expensive medical equipment and highly specialised staff. It is also the larger hospitals which tend to spend significant funds on services to non-admitted patients.

HOSPITALS(a), recurrent expenditure per patient day



(a) Private acute and psychiatric hospitals (b) Based on number of beds.

There was also significant variation in average cost per patient day across States. In 1995-96 these ranged from \$391 for Queensland to \$544 for New South Wales and the Australian Capital Territory combined (table 12).

FREE-STANDING DAY HOSPITAL FACILITIES

Recurrent expenditure at all free-standing day hospital facilities during 1995-96 was \$80.2m, up from \$35.4m in 1991-92 (table 2). Average operating expenditure per patient separation was \$384 in 1995-96. This was highest for ophthalmic clinics (\$690) and lowest for specialist endoscopy centres (\$228) (table 25).

ALL PRIVATE HOSPITALS

Almost 60% of total operating expenditure at private acute and psychiatric hospitals in 1995–96 was for wages and salaries including on-costs (table 12). In contrast, the corresponding proportion for free-standing day hospital facilities was 43% (table 25). A major reason for this difference is that acute and psychiatric hospitals are staffed 24 hours each day, whereas day hospitals mainly operate only during normal business hours. Drugs, medical and surgical supplies are major cost items which accounted for 13% of expenditure at acute and psychiatric hospitals compared with 21% at day hospital facilities. Similarly, administrative expenses comprised 9% of expenditure at acute and psychiatric hospitals and 19% at day hospitals.

1	

Particulars	1991-92	1992-93	1993-94	1994-95	199 5–96
					- x .
Number of hospitals					
New South Wales	90	90	91	92	91
Victoria	111	113	113	111	104
Queensland	49	49	51	52	50
South Australia	37	39	38	39	42
Western Australia	21	21	24	22	23
Tasmania	8	8	9	9	10
Northern Territory	1	1	1	1	1
Australian Capital Territory	2	2	2	2	2
Australia	319	323	329	328	323
Number of beds(b)					
Capital city statistical division	15 690	15 663	15 809	16 632	16 821
Rest of Australia	5 055	5 197	5 432	5 738	5 936
Total	20 745	20 860	21 241	22 370	22 757
Number of separations ('000)					
Same-day patients	311.4	313.4	380.6	465.1	597. 1
Overnight-stay patients	845.8	888.8	870.1	881.6	855.2
Total	1 157.2	1 202.2	1 250.7	1 346.7	1 452.3
Number of patient days ('000)					
Same-day patients	311.4	313.4	380.6	465.1	597.1
Overnight-stay patients	4 579.9	4 692.9	4 791.8	4 956.8	5 247.1
Total	4 891.3	5 006.3	5 172.4	5 421.9	5 844.2
Average length of stay (days)					
Overnight-stay patients	5.4	5.3	5.5	5.6	6.1
All patients	4.2	4.2	4.1	4.0	4.0
Occupancy rate (%)					
Overnight-stay patients	60.3	61.6	6 1.8	60.7	63.2
All patients	64,4	65.8	66.7	66.4	70.4
Number of staff(c)					
Total	31 097	32 493	33 758	36 5 89	39 100
Revenue					
Total (\$'000)	2 177 035	2 325 497	2 491 674	2 763 174	3 083 859
Patient revenue(d) (%)	95.3	9 5.7	95.1	94.7	94.3
Recurrent expenditure					
Total (\$'000)	1 954 646	2 049 427	2 225 893	2 503 067	2 823 781
Wages and salaries, including on costs(e) (%)	60.8	61.3	60.3	59.1	58.7
Per patient day (\$)	400	409	430	462	483
Gross capital expenditure (\$'000)	212 331	258 563	369 474	354 211	3 81 8 53

⁽a) Comprising private acute and psychiatric hospitals.

⁽b) Available beds (average for the year).

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

⁽d) As a proportion of total revenue.

⁽e) As a proportion of total recurrent expenditure.

Particulars	1991-92	1992-93	1993-94	1994-95	1995 -96
	* 2				
Number of hospitals					
New South Wafes	37	57	63	71	7.3
Victoria	22	23	24	23	23
Queensland	4	5	9	11	17
South Australia	1	1	3	7	10
Western Australia	4	4	7	8	10
Tasmania		_	1	1	2
Northern Territory		_		_	_
Australian Capital Territory	4	4	4	. 4	5
Australia	72	94	111	125	140
Number of hospitals by type					
General surgery	24	37	46	47	54
Specialist endoscopy	26	29	30	36	37
Ophthalmic	13	14	16	20	23
Other(b)	9	14	19	22	26
Total	72	94	111	125	140
Number of operating theatres at 30 June	61	90	111	122	139
Number of procedure rooms at 30 June	69	90	103	108	130
Number of beds/chairs(c)	556	763	917	939	1 023
Number of separations	123 396	1 49 390	182 178	189 863	208 793
Number of staff(d)					
Total	429	544	653	755	890
Revenue				-	
Total (\$'000)	45 486	60 825	76 502	85 805	99 305
Patient revenue(e) (%)	90.0	96.1	94.2	96.4	94.8
Recurrent expenditure					
Total (\$'000)	35 360	48 916	61 092	70 044	80 238
Wages and salaries, including oncosts(f) (%)	41.1	40.0	39.7	40.9	42.8
Per patient day (\$)	332	327	335	369	384
Gross capital expenditure (\$'000)	6 052	18 888	15 317	16 717	16 775

⁽a) Comprising free-standing day hospital facilities.

⁽b) Clinics specialising in fertility management, plastic surgery and sleep disorders.

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

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

⁽e) As a proportion of total revenue.

⁽f) As a proportion of total recurrent expenditure.

Particulars	NSW and ACT	Vic.	Qld	SA and NT	WA	Tas.	Aust.
*****	* * * * * * * * * * *		. , ,		• • • • • • • • •	· · · · · · ·	k * * * * * *
T		HOSPIT	ALS				
Type Acute	83	99	47	39	22	9	299
Psychiatric Psychiatric	10	5 5	3	39	1	1	299
Total	93	104	50	43	23	10	323
iotai	73	104	50	43	23	10	323
Location							
Capital city statistical division	68	71	19	34	21	5	218
Rest of State or Territory	25	33	31	9	2	5	105
-							
Hospital size(b)							
0-25 beds	4	33	7	17	3	3	67
26-50 beds	38	30	7	12	5	***	92
51-100 beds	40	24	17	8	10	3	102
101-200 beds	8	13	13	5	3	4	46
Over 200 beds	3	4	6	1	2	_	16
· · ·	D : '		,				
		BED	S				
Available beds(c)							
Acute hospitals	5 853	5 819	4 735	n.p.	n.p.	n.p.	21 475
Psychiatric hospitals	498	333	227	n.p.	n.p.	n.p.	1 282
Total	6 351	6 152	4 962	2 392	2 148	752	22 757
Capital city statistical division:	4 614	5 073	2 503	2 248	n.p.	n.p.	16 821
Rest of State or Territory	1 737	1 079	2 459	144	n.p.	n.p.	5 936
Nest of State of Territory	1701	1075	2 700	144	11.6.	т.р.	2 2 2 4
Approved beds(c)	7 038	6 506	5 489	2 604	2 415 🖰	883	24 935
	. : : 5 # 8 #					*	
	PRO P ORTIO	ON OF AUST	TRALIAN TO	OTAL (%)			
Hospitals	28.8	32.2	15.5	13.3	7.1	3.1	100.0
Available beds(c)	27.9	27.0	21.8	10.5	9.4	3.3	100.0
, wantable ocasio,	22				2		

⁽a) Comprising private acute and psychiatric hospitals.

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

⁽c) Average for the year.

NOT FOR PROFIT.....

D. K. I		Religious or		
Particulars	For profit	charitable	Other(b)	Total
(x,y) = (x,y) + (x,y			****	
	HOSPIT	ALS		
New South Wales and				
Australian Capital Territory	69	21	3	93
Victoria	54	15	3 5	104
Queensland	20	22	8	50
South Australia and				
Northern Territory	17	5	21	43
Western Australia	15	7	1	23
Tasmania	5	3	2	10
Australia	180	73	70	323
Location				
Capital city statistical division	141	47	30	218
Rest of Australia	39	26	40	105
Hospital size(b)				
0-25 beds	21	7	39	67
26-50 beds	64	10	18	92
51-100 beds	70	22	10	102
101 200 beds	20	24	2	46
Over 200 beds	5	10	1	16
Total	180	73	70	~ 323
	* * * * * :		* * * 1 * 4 * *	
	BEDS			
Available beds(c)				
Capital city statistical division	8 8 07	6 366	1 648	16 821
Rest of Australia	2 911	2 281	744	5 936
Total	11 718	8 647	2 392	22 757
Approved beds(c)	12 651	9 750	2 534	24 935

⁽a) Comprising private acute and psychiatric hospitals.

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

⁽c) Average for the year.

	Separations(b	ý	Patient days(b).		Average length of stay	Bed occupancy rate
Particulars	.000	%	-000	%	days	%
	No. of the Control of		•			1 + + - + - + h + &
New South Wales and		199	3-94			
Australian Capital Territory	361.1	28.9				
Victoria	361.1 344.5	28.9 27.5	1 401.6	27.1	3.9	63.4
Oueensland	344.5 261.0	20.9	1 485.0 1 117.5	28.7	4.3	67.5
South Australia and	201.0	20.9	C.1111	21.6	4.3	69.5
Northern Territory	129.4	10.3	594.9	11.5	4.6	71.4
Western Australia	113.8	9.1	422.7	8.2	3.7	71.4 61.6
Tasmania	40.9	3.3	150.7	2.9	3.7	70.0
		3.0	100.1	2.5	3.1	10.0
Australia	1 250.7	100.0	5 172.4	100.0	4.1	66.7
Capital city statistical division	934.2	74.7	3 886.4	75. 1	4.2	67.4
Rest of Australia	316.4	25.3	1 286. 1	24.9	4.1	64.9
	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
Alam Cambo 187-1		199	4-95			
New South Wales and Australian Capital Territory	2012	20 =				
Victoria	384.3	28.5	1 432.9	26.4	3.7	62.6
Queensland	365.6 293.0	27.1 21.8	1 521.4	28.1	4.2	68.6
South Australia and	293.0	21.8	1 212.5	22.4	4.1	69.5
Northern Territory	132.3	9.8	584.8	10.6		67.4
Western Australia	129.5	9.6	515.3	10.8 9.5	4.4 4.0	67. 1 64.2
Tasmania	42.1	3.1	154.9	2.9	4.0 3.7	64.2 64.5
					. .,	37.3
Australia	1 346.7	100.0	5 421.9	100.0	4.0	66.4
Capital city statistical division	1 009.5	75,0	4 073.7	75.1	4.0	67.1
Rest of Australia	337.2	25.0	1 348.2	24.9	4.0	64.4
* T	* * * * * * * * * *	400	. , . , , , , ,	~ · · · · · · · · · · · · · · •		*******
New South Wales and		135.	5-90			
Australian Capital Territory	396.6	27.3	1 476.7	25.3	3.7	63.7
Victoria	389.9	26.8	1 603.9	27.4	4.1	71.4
Queensland(c)	332.2	22.9	1 465.7	25.1	4.4	80.9
South Australia and						
Northern Territory	139.9	9.6	573.9	9.8	4.1	65.7
Western Australia	141.5	9.7	532.0	9.1	3.8	67.9
Tasmania	52.1	3.6	192.1	3.3	3.7	70.0
Australia	1 452.3	100.0	5 844.2	100,0	4.0	70.4
Capital city statistical division	1 088.3	74.9	4 409.0	75.4	4.1	71.8
Rest of Australia	364.0	2 5. 1	1 435.2	. 24.6	3.9	66.2

⁽a) Comprising private acute and psychiatric hospitals.

⁽b) See paragraph 15 of Explanatory Notes.

⁽c) See paragraphs 16 and 17 of Explanatory Notes.

	Separations,		Patient days		Average length of stay	Bed occupancy rate
Hospital classification	.000	%	.000	%	days	36
2 * * * * * * * * * * * * * * * * * * *						
For profit	720.6	49.6	2 824.9	48.3	3.9	66.0
Not for profit Religious or charitable Other(b)	590.7 141.0	40.7 9.7	2 418.5 600.8	41.4 10.3	4.1 4.3	76.6 68.8
Total	1 452.3	100.0	5 844.2	100.0	4.0	70.4

⁽a) Comprising private acute and psychiatric hospitals.

HOSPITALS(a), Separations, Days, Average Stay and Occupancy—By Hospital Size

	Separation	ıs	Patient days	,,	Average length of stay	Bed occupancy rate
Hospital size(b)	.000	%	.000	%	days	%
/ : " : * # # * * # # " ·					* * * * * * * * * * * * * * * *	
0-25 beds	44.8	3.1	229.9	3.9	5.1	62.2
26-50 beds	170.7	11.8	747.4	12.8	4.4	58 .7
51-100 beds	445.8	30.7	1 721.0	29.4	3.9	63.2
101-200 beds	480.8	33.1	1 864.3	31.9	3.9	79.0
Over 200 beds	310.1	21.4	1 281.6	21.9	4.1	81.1
Total	1 452.3	100.0	5 844.2	100.0	4.0	70.4

⁽a) Comprising private acute and psychiatric hospitals.

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

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

Theatres	NSW and ACT	Vic.	Qla	SA and NT	WA	Tas.	Aust.
* * * * * * * * * * * * * * * * * * * *						\$ ·	
Operating theatres							
Hospitals with these theatres	66	68	35	26	21	8	224
Number of theatres	220	181	143	74	82	26	726
Average number of sessions(c)	8.4	7.9	8.1	8.0	7.3	6.5	8.0
Average theatre time used(c) (hours)	28.5	36.1	25.4	23.6	25.9	24.5	28.8
Nurses(d)	1 238.0	1 032.3	803.4	427.6	345.0	175.6	4 021.9
Day surgery theatres(e)							
Hospitals with these theatres	19	33	24	9	10	6	101
Number of theatres	25	50	40	13	21	7	156
Average number of sessions(c)	5.4	5.0	7.0	7.8	6,4	8.4	6.1
Average theatre time used(c) (hours)	19.0	12.6	17.7	21.2	21.2	20.1	17.1
Nurses(d)	96.4	146.2	146.8	37.4	60.9	41.2	528.9

⁽a) Comprising private acute and psychiatric hospitals.

9

HOSPITALS(a), Specialised Wards and Units

	Labour	Psychiatric	Special care	Accident or
Particulars	wards	wards(b)	units(c)	emergency units
				• • • • • • • • • • • •
Hospitals with specialised wards or units				
New South Wales and				
Australian Capital Territory	20	12	37	3
Victoria	36	10	35	11
Queensland	20	8	24	9
South Australia and				
Northern Territory	14	3	1,2	3
Western Australia	11	6	10	2
Tasmania	3	1	7	2
Australia	104	40	125	30
Beds — last Wednesday in June	333	1 568	1 166	192
Nurses(d) — last pay period in June	941	895	1 595	2 57

⁽a) Comprising private acute and psychiatric hospitals,

⁽b) Details for last pay period before 30 June 1996.

⁽c) Per theatre per week,

⁽d) Full-time equivalent.

⁽e) Excluding free-standing day hospital facilities.

⁽b) including alcohol and drug rehabilitation or treatment units.

⁽c) Intensive care units, coronary care units, neonatal intensive care units and high dependency units.

⁽d) Full-time equivalent.

Particulars	NSW and ACT	Vic.	Qla	SA and NT	WA	Təs.	Aust.
4 * * * * * * * / * * * * * * * * * * *							
	NU	IMBER OF S	TAFF				
Nursing staff	6 068.2	6 247.0	5 389.4	2 403.7	2 119.3	907.9	23 135.5
Registered	4 779.1	5 656.8	4 403.1	2 054.1	1 869.5	783.1	19 545.7
Other	1 289.1	590.2	986.2	349.7	249.8	124.8	3 589.7
Salaried medical officers and other							
diagnostic health professionals	496.9	662.2	204.4	44.9	156.5	87.6	1 652.5
Administrative and clerical	1 287.9	1 374.8	1 210.4	448.9	592.1	191.8	5 105.9
Domestic and other staff	2 342.8	2 667.6	2 008.9	748.3	1 060.6	377.8	9 206.0
Total	10 195.8	10 951.7	8 813.0	3 645.8	3 928.4	1 565.0	39 099.9
	- 5 0 - 7 - 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		» . × . « »				* * - 1 . 5 -
	AVERAGE NUMBE	R OF STAFF	PER OCCU	PIED BED			
Nursing staff	1.5	1.4	1.3	1.5	1.5	1.7	1.4
Registered	1.2	1.3	1.1	1.3	1.3	1.5	1.2
Other	0.3	0.1	0.2	0.2	0.2	0.2	0.2
Other	1.0	1.1	0.9	0.8	1.2	1.2	1.0
Total	2.5	2.5	2.2	2.3	2.7	3.0	2.4

⁽a) Comprising private acute and psychiatric hospitals.

Revenue	NSW and ACT	Vic.	Qld	SA and NT	WA	Tas.	Aust.
*****					,		* * * * * * * *
Revenue (\$'000)							
Patient revenue	822 466	833 651	609 871	253 792	279 082	108 759	2 907 622
Recoveries	39 436	30 321	14 096	12 124	12 278	3 400	111 655
Other(b)	13 182	18 619	17 392	5 834	8 010	1 546	64 582
Total	875 084	882 591	641 359	271 750	2 9 9 370	113 706	3 083 859
Patient revenue as a proportion of							
total revenue (%)	94.0	94.5	95.1	93.4	93.2	95.6	94.3
«					. ,		

⁽a) Comprising private acute and psychiatric hospitals.

⁽b) Full-time equivalent.

⁽b) Investment income, income from charities, bequests, visitor's meals and accommodation and kiosk sales.

Expenditure	NSW and ACT	Vic.	Qłd	SA and NT	WA	Tas.	Aust.
						< * × n % 3 >	
Recurrent expenditure(b) (\$1000)							
Wages and salaries including on-costs	439 202	493 257	351 897	153 300	158 835	62 337	1 658 8 29
Drug, medical and surgical supplies	128 563	97 419	62 581	29 992	34 848	10 248	363 650
Food supplies	16 523	19 114	12 393	5 983	6 178	2 075	62 266
Other domestic services	18 949	16 34 1	18 706	5 485	6 796	3 313	69 590
Administrative expenses	78 098	80 014	41 215	21 354	21 795	9 854	252 330
Repairs and maintenance	17 549	18 301	12 885	6 758	4 271	1 786	61 550
Other(c)	104 381	90 248	73 862	31 800	44 121	11 154	355 566
Total	803 265	814 694	573 539	254 672	276 844	100 767	2 823 781
Wages and salaries including on-costs as a proportion of total recurrent	3						
expenaiture (%)	54.7	60.5	61.4	60.2	57.4	61.9	58.7
Average recurrent expenditure(d)							
Per separation (\$)	2 025	2 089	1 727	1 820	1 956	1 933	1 944
Per patient day (\$)	544	508	391	444	520	525	483
Gross capital expenditure (\$'000)	159 095	95 915	59 961	25 270	20 948	20 665	381 853

⁽a) Comprising private acute and psychiatric 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) Interest, depreciation and contract services.

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

NOT FOR PROFIT.....

-		Religious or		
Expenditure	For profit	charitable	Other(b)	Total
	v		* * * * * * * * * * * * * * * * * * * *	: * *
Recurrent expenditure(c) (\$'000)				
Wages and salaries including on-costs	753 110	756 401	149 322	1 658 829
Drug, medical and surgical supplies	169 83 3	170 941	22 876	363 650
Food supplies	29 91 9	26 243	6 103	62 266
Other domestic services	31 559	32 13 7	5 894	69 590
Administrative expenses	118 092	114 938	19 300	252 330
Repairs and maintenance	24 176	31 687	5 68 6	61 550
Other(d)	157 1 47	169 433	28 985	355 566
Total	1 283 836	1 301 780	238 166	2 823 781
Wages and salaries including on-costs as a proportion of total recurrent				
expenditure (%)	58.7	58.1	62.7	58.7
Average expenditure(e)				
Per separation (\$)	1 782	2 204	1 689	1 944
Per patient day (\$)	454	538	396	483
Gross capital expenditure (\$'000)	201 354	148 485	32 015	381 853

- (a) Comprising private acute and psychiatric hospitals.
- (b) Bush nursing, community and memorial hospitals.
- (c) See Explanatory Notes, paragraph 11. Expenditure on non-admitted patient services is included by default because such expenditure is not separately available.
- (d) Interest, depreciation and contract services.
- (e) Average expenditure figures can vary considerably between hospitals depending on the type of services they provide.

	HOSPITALS	HOSPITALS WITH BEDS NUMBERING					
Expenditure	0.25	26-50	51–100	101-200	Over 200	Total	
Sometimes of the state of the s		/ i 8	/ t +		> ^	* * * * * * * * * * * **	
Recurrent expenditure(c) (\$'000)							
Wages and salaries including on-costs	47 146	171 82 9	452 555	529 438	457 864	1 658 829	
Drug, medical and surgical supplies	4 496	28 746	94 404	128 163	107 841	363 650	
Food supplies	2 310	7 743	18 062	18 476	15 675	62 266	
Other domestic services	2 260	7 245	18 420	21 263	20 402	69 590	
Administrative expenses	8 109	30 249	74 921	80 207	58 843	252 330	
Repairs and maintenance	1 448	5 640	15 923	17 510	21 029	61 550	
Other(d)	8 167	37 167	93 875	115 941	100 415	355 566	
Total	73 936	288 619	768 160	910 998	782 069	2 823 781	
Wages and salaries including on-costs as a proportion of total recurrent							
expenditure (%)	63. 8	59.5	58.9	58.1	58.5	58.7	
Average recurrent expenditure(e)							
Per separation (\$)	1 650	1 690	1 723	1 895	2 522	1 944	
Per patient day (\$)	322	386	446	489	610	483	
Gross capital expenditure (\$1000)	5 892	31 801	89 548	95 214	159 400	381 853	

⁽a) Comprising private acute and osychiatric hospitals.

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

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

⁽d) Interest, depreciation and contract services.

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

Patient classification	Number of hospitals(b)	Separations	Patient days(c)	Average length of stay (days)
		'000	'000	
restant to the second of the s				
Same-day patients(d)	289	597.1	597.1	1.0
Overnight-stay patients				
Advanced surgery	208	104.8	833.6	8.0
Surgery and minor surgery	232	386.2	1 260.8	3.3
Obstetrics	114	59.6	372.8	6.3
Psychiatric	36	17.7	362.0	20.4
Rehabilitation	33	11.8	233.2	19.8
Nursing home type	61	1.5	297.8	197.1
Medical and other	294	273.6	1 886.8	6.9
All overnight-stay patients	322	855.2	5 247.1	6.1
Total	323	1 452.3	5 844.2	4.0

⁽a) Comprising private acute and psychiatric hospitals.

HOSPITALS(a), Average Stay (days) by Patient Classification

Patient classification	NSW and ACT	Vic.	Qid	SA and NT	WA	Tas.	Aust.
< > < < < < < < < < < < < < < < < < <		* * * * * * * * *			*****	,	* * * * * * 7 / /
Same-day patients(b)	1.0	1.0	1.0	1.0	1.0	1.0	1.0
Overnight-stay patients							
Advanced surgery	7.6	8.2	8.6	7.8	7.1	8.8	8.0
Surgery and minor surgery	3.0	3.5	3.4	3.0	3.5	3.2	3.3
Obstetrics	6.0	6.6	6.2	5.9	6.6	5. 1	6.3
Psychiatric	22.6	19.8	19.2	n.p.	n.p.	n.p.	20.4
Rehabilitation	20.3	20.6	27.3	n₋p.		n.p.	19.8
Nursing home type(c)	115.2	161.5	222.0	219.5	n.p.	n.a.	197.1
Medical and other	7.3	7.3	6.7	7.0	6.3	5.3	6.9
All overnight-stay patients	5.7	6.5	7.0	5.6	5.4	5.0	6.1
Total	3.7	4.1	4.4	4.1	3.8	3.7	4.0

⁽a) Comprising private acute and psychiatric hospitals.

⁽b) Most hospitals treat more than one class of patient and so are counted in more than one row.

⁽c) Each same-day patient is allocated a notional stay of one day.

 $[\]label{eq:definition} \mbox{(d) Patient classification for same-day patients has been discontinued. See notes on this$ classification in Appendix List of Terms.

⁽b) Allocated a notional stay of one day. Patient classification for same-day patients has been discontinued. See notes on this classification in Appendix List of Terms.

⁽c) See paragraphs 16 and 17 of Explanatory Notes.

HOSPITALS WITH BEDS NUMBERING.....

Patient classification	0-25	26–50	51-100 101-200		Over 200	Total
* * * * * * * * * * * * * * * * * * * *				• • × : : .		
Same-day patients(c)	1.0	1.0	1.0	1.0	1.0	1.0
Overnight-stay patients						
Advanced surgery	5.0	5.6	7.4	8.0	9.3	8.0
Surgery and minor surgery	3.0	2.9	3.0	3.2	4.1	3.3
Obstetrics	4.6	5.8	6.2	6.2	6.6	6.3
Psychiatric	27.1	19.3	21.5	n.p.	n.p.	20.4
Rehabilitation	n.p.	23.0	19.0	15.3	n.p.	19.8
Nursing home type	n.p.	143.9	17.5	n.p.	n.p.	197.1
Medical and other	9.6	9.8	7.2	5.5	6.9	6.9
All overnight-stay patients	10.8	7.0	5.8	5.7	6.3	6.1
Total	5.1	4.4	3.9	3.9	4.1	4.0

⁽a) Comprising private acute and psychiatric hospitals.

18 HOSPITALS(a), Type of Procedure

		Procedures				
Type of procedure	no. (b)	ng.	%			
* * * * * * * * * * * * *		. . .				
Advanced surgery	209	132 716	11.4			
Surgery	230	598 310	51.5			
Minor surgery	225	371 071	31.9			
Obstetrics	114	60 106	5.2			
Total	323	1 162 203	100.0			

⁽a) Comprising private acute and psychiatric hospitals.

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

⁽c) Allocated a notional stay of one day. Patient classification for same-day patients has been discontinued. See notes on this classification in Appendix List of Terms.

⁽b) Most hospitals provide more than one type of procedure and so are counted in more than one row.

Insurance status	NSW and ACT	Vic.	Qld	WA
Insured	SEPARATIONS	(no.)		
Basic only	20 867	17 960	12 981	
Basic plus supplementary		304 816	192 631	_
Not stated		7 501	60 423	101 440
Total	303 407	330 277		
Other				
Uninsured	84 930	59 645	65 239	40 096
Not stated	8 295	_	882	_
Total	396 632	389 922	332 156	141 536
	* * * * * * * * * * * * * * * * * * * *			
SEF Insured	PARATIONS (%	of total)		
Basic only	5.3	4.6	3.9	
Basic plus supplementary	71.2	78.2	58.0	_
Not stated		1.9	18.2	71.7
Total	76.5	84.7	80.1	71.7
Other				
Uninsured	21.4	15.3	19.6	28.3
Not stated	2.1	_	0.3	_
Total	100.0	100.0	100.0	100,0
* * * * * * * * * * * * *			* * * * * * * *	
	E LENGTH OF	STAY (days)		
Insured Basic only	2.0		44.0	
Basic plus supplementary	3.8 3.9	5.6 4.2	11.8 4.1	
Not stated	3.8	4.2	4.1	_
Total	3.9	4.3	4.4	3.6
Other				
Uninsured	3.1	2.9	4.3	4.0
Not stated	2.8	_	4.0	_
Total	3.7	4.1	4.4	3.8

⁽a) Comprising private acute and psychiatric hospitals.

⁽b) Details are not available for South Australia, Tasmania and the Northern Territory (see page 2).

⁽c) See paragraphs 16 and 17 of Explanatory Notes.

Specialised units or wards	NSW and ACT	Vic.	Qīa	SA and NT	WA	Tas.	Aust.
4 * 4 * 6 *	. :			5 7 4 5 4 6 8			
Neonatal intensive care unit	14	13	13	2	3	2	47
Separate intensive careunit (ICU)	11	6	4	3	1	1	26
Separate coronary care unit (CCU)	4	6	2	3	1	1	17
Combined ICU/CCU	8	7	10	_	3	2	30
High dependency unit	21	26	9	12	5	5	78
Obstetric/maternity service	23	26	19	10	8	3	89
Specialist paediatric service	3	7	7	_	1	1	19
Cardiac surgery unit	1	3	3	1	_	_	8
Neurosurgical unit	1	3		_		_	4
Acute spinal cord injury unit				_		_	_
Burns unit	_			-	_	_	_
Major plastic/reconstructive surgery unit	_	1	1		_	_	2
Transplantation units			_	_	_	_	_
Acute renal dialysis unit	_	2	_	_	_	_	2
Maintenance renal dialysis centre	2	3	2	1	_	_	8
Infectious diseases unit	_	_	_	_	_	_	_
Psychiatric unit/ward(b)	11	8	6	4	6	1	36
Oncology unit	2	14	7	1	2	1	27
Rehabilitation unit(b)	12	10	5	2	_	1	30
Refractory epilepsy unit	1		1	_	_	_	2
Clinical genetics unit	_			-	_	_	
Sleep centre	10	5	8	1	1		25
AIDS unit	_	_	_	1	_	_	1
Diabetes unit	_	_	_	_	_	_	_
In-vitro fertilisation unit	_	1	2	_	2	_	5
Alcohol and drug unit	6	4	2	1	1 -	_	14
Nursing home care unit(c)		1	_	3	_	1	5
Geriatric assessment unit	_		_	_	_	_	_
Domiciliary care service	_	_	1		1	1	3
Hospice/palliative care unit	4	5	2	1	3	1	16
Dedicated day surgery unit	27	22	20	9	5	4	87
Other specialised services	_	2	2	1	_	_	5
Total(d)	66	62	35	25	18	10	216

⁽a) Comprising private acute and psychiatric hospitals.

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

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

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

	HOSPITALS	••••••		***************************************				Occasions of service
Designated units or wards	NSW and ACT	Vic.	Qld	SA and NT	WA	Tas.	Aust.	
								.000
			» • « • • ·				3 ^ 8 8 . 4	· • × · :
Accident and emergency(b)	5	25	13	9	3	4	59	249,6
Medical/surgical/diagnostic								
Dialysis	_	-	_	_	_			_
Radiology and organ imaging	5	12	2	1	2	_	22	289.9
Endoscopy	_	4	1	1	5	1	12	12.6
Pathology	2	3	_	_	_		5	175.1
Other	4	5	10	4	7	_	30	26.0
Psychiatric	6	1	1	4	4	_	16	30.4
Alcohol and drug	3		_	1	1	_	5	3,2
Dental	-	-	_	_	1	_	1	n,p,
Pharmacy	3	1	_	_		_	4	n,p,
Allied health services	6	10	_	1	1	1	19	451.1
Community health	2	1	2	_	_	-	5	26.2
District nursing services	1	5	_	_	_	_	6	17.9
Non-medical and social services	2	1	٠.	3	1	_	7	ń,p.
Other	5	6	4	1	5	_	21	30.8
Total(c)	18	33	17	10	17	2	97	1 334.7

⁽a) Comprising private acute and psychiatric hospitals.

⁽b) including hospitals which did not have a formal accident and emergency unit but which treated accident and emergency patients during the year.

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

21 11 3	14 3 4	14 1 2	78 23 17
1 1 3	3	1 2	23
1 1 3	3	1 2	23
1 1 3	3	1 2	23
3		1 2	23
_	- 4 -	2	
1	-	_	1,
1	_	_	
			4.0
1	1	3	10
_	1	3	10
_	1	_	2
37	23	26	140
3	26	26	139
49	11	40	130
4	2	5	4
	-	_	15
267			1 023
267 925			208 793 204
	925	267 89	18 10 23 267 89 162 3 925 15 734 38 094

⁽a) Free-standing day hospital facilities.

DAY HOSPITALS(a), Number of Full-time Equivalent Staff

Staff	General surgery	Specialist endoscopy	Ophthalmic	Other(b)	Total
	:				* * * * * * *
Nursing staff	237.4	118.2	47.1	94.8	497.4
Administrative and clerical	93.1	105.1	34.9	57.6	290.7
Other(c)	20.9	1 2.9	21.0	46.8	101.6
Total	351.4	236.1	102.9	199.2	889.7

⁽a) Free-standing day hospital facilities.

⁽b) Including fertility, plastic surgery and sleep disorders clinics.

⁽c) Per theatre/room per weck.

⁽b) Including fertility, plastic surgery and sleep disorders clinics.

⁽c) Including diagnostic and health professionals, orderlies, domestic and maintenance staff.

Revenue	General surgery	Specialist endoscopy	Ophthalmic	Other(b)	Total
* * * * * * * * * * * * * * * * * * * *					
Revenue (\$'000)					
Patient revenue	35 215	21 854	13 694	23 346	94 109
Other(c)	2 045	1 703	483	965	5 196
Total	37 260	23 557	14 177	24 311	99 305
Patient revenue as a proportion of total revenue (%)	94.5	92.8	96.6	96.0	94.8

⁽a) Free-standing day hospital facilities.

25 DAY HOSPITALS(a), Recurrent Expenditure

Particulars	General surgery	Specialist endoscopy	Ophthalmic	Other(b)	Total
		< * > : < * * * *			
Recurrent expenditure(c) (\$`000)					
Wages and salaries including on-costs	12 589	9 233	3 785	8 721	34 328
Drug, medical and surgical supplies	6 051	2 164	3 411	4 979	16 606
Administrative expenses	7 932	2 707	1 339	3 116	15 093
Other(d)	5 635	3 428	2 322	2 826	14 212
Total	32 207	17 532	10 857	19 642	80 238
Wages and salaries including on-costs as a					
proportion of total recurrent expenditure (%)	39.1	52.7	34.9	44.4	42.8
Average recurrent expenditure(e)					
Per separation (\$)	413	228	690	516	384
Gross capital expenditure (\$'000)	6 285	3 854	5 682	953	16 775

⁽a) Free-standing day hospital facilities.

⁽b) Including fertility, plastic surgery and sleep disorders clinics.

⁽c) Investment income, income from charities, bequests, visitor's means and accommodation and

⁽b) Including fertility, plastic surgery and sleep disorders clinics.

⁽c) See Explanatory Notes, paragraph 11.

⁽d) Comprising repairs and maintenance, interest, depreciation and contract services.

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

	Procedures	
Description and MBS item number	no.	%
李蒙斯俊建林装架中坐下,一点白龙龙。 "一个人也会要办公。"	* > * * * * * * .	*
Oesophagoscopy, gastroscopy, duodenoscopy or panendoscopy, one or more such procedures (30473)	49 991	19.9
Fibre optic colonoscopy — examination of colon beyond the hepatic flexure (32090)	38 564	15.3
Evacuation of the contents of the gravid uterus by curettage or suction curettage (35643)	17 605	7.0
Lens extraction (42698)	16 009	6.4
Insertion of artificial lens (42701)	14 188	5.6
Fibre optic colonoscopy — examination of colon beyond the hepatic flexure with removal of one or more		
polyps (32093)	10 194	4.1
Turnour, cyst, ulcer or scar, (excluding a scar removed during the surgical approach at an operation), up to 3 centimetres in diameter, where the removal is by surgical excision and suture (30117 and 30118) Knee, arthroscopic surgery of, involving one or more of: meniscectomy, removal of loose body, lateral	5 778	2.3
release, or chondroplasty (49560)	3 509	1.4
Flexible fibreoptic sigmoidoscopy or fibreoptic colonoscopy up to the hepatic flexure (32084)	3 249	1.3
Uterus, curettage of, (including curettage for incomplete miscarriage) under general anaesthesia, or under		
epidural or spinal (intrathecal) nerve block (35639 and 35640)	3 232	1.3
Occyte retrieval by any means for the purposes of assisted reproductive technologies (13212)	3 199	1.3
All other procedures	85 810	34.1
Totai	251 328	100.0
« ч ч ч ч ч ч ч ч ч ч ч ч ч ч ч ч ч ч ч		

⁽a) Free-standing day hospital facilities.

Particulars	General Surgery	Specialist endoscopy	Ophthalmic	Other(b)	Total				
T GI W GI GI G			•	Otherio,	Total				
		· · · · · · · · ·			: "				
B.11	PER CENT								
Nil or local									
Nil	1.6	0.6		21.3	4.7				
Local(c)	14.0	2.1	3 6. 2	27.7	13.6				
Total	15.5	2.7	36.2	48.9	18.4				
Other types of anaesthesia									
General	42.0	2.0	1.2	35.4	23.0				
Regional	2.0	n.p,	40.7	n.p.	4.1				
Intravenous	22.1	88.5	11.5	13.2	44.1				
Neuroleptic	17.2	r.p.	ń.p.	1.0	9.5				
Multiple	1.2	9.0.	n.p.	n.p.	0.9				
Total other	84.5	97.3	63.8	51.1	81.6				
Total	100.0	100.0	100.0	100.0	100.0				
		/ * * * * .							
NUMBER									
All separations	78 040	76 925	15 734	38 094	208 793				

⁽a) Free-standing day hospital facilities.

28 ALL HOSPITALS, Separations By Age and Sex

		ND PSYCHI LS			ANDING DA' L FACILITIE:		TOTAL HO	SPITALS	
Age group (years)	Males	Females	Persons	Males	Females	Persons	Males	Females	Persons
* * * * * * *		X < 4 + 4 + 4 +		PER CENT					* * * *
0-14	7.9	4.6	6.0	3,4	1.9	2.5	7.4	4.2	5.6
15-44	26.2	40.3	34.1	28.0	44.8	37.9	26.4	40.9	34.5
4564	30.6	26.5	28.3	36.0	27.0	30.7	31.3	26.6	28.6
65 and over	35.2	28.6	31.5	31.9	25.8	28.3	34.8	28.3	31.1
Total(a)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Proportion of									
persons	44.2	55.8	100.0	41.0	59.0	100.0	43.8	56.2	100.0
* * * * * * * * * * * * * * * * * *	*****	# 1 0 A 1 B 4 0	5 0 00 30 0 02 0 00 00 00	NUMBER					· : x + x +
All separations	641 946	810 353	1 452 299	85 723	123 070	208 793	727 669	933 423	1 661 092
er 5 m m h h d e d d d d d	• • • « <i>»</i> « » « »			« * 4 * * * * * *	e de la elec		«		

(a) Including not stated.

⁽b) Including fertitity, plastic surgery and sleep disorders, clinics.

⁽c) Including topical.

Principal diagnosis	Acute and psychiatric hospitals	Free-standing day nospital facilities	Total hospitals
, ; , v ,	v - n + 1		
	PER CENT		
Infectious diseases	0.7	0.4	0.7
Neoplasms	8.6	9.0	8.7
Endocrine disorders	0.8	0.3	0.8
Diseases of bloog	0.7	0.7	0.7
Mental disorders	3.6	0.1	3.2
Diseases of nervous system	7.2	11.2	7.7
Diseases of circulatory system	7-1	3.7	6.7
Diseases of respiratory system	4.4	0.4	3.9
Diseases of digestive system	15.8	36.7	18.4
Diseases of genitourinary system	9.2	4.0	8.6
Complications of pregnancy	5.9	8.8	6.3
Diseases of skin	1.7	2.8	1.8
Diseases of musculosketal system	11.1	2.6	10.0
Congenital anomalies	0.6	0.4	0.6
Conditions of perinatal period	0.7	_	0.6
Symptoms, signs and ill-defined			
conditions	4.4	8.2	4.9
njury and poisoning	5.0	0.8	4.5
Supplementary classifications	12.3	9.9	12.0
Fotal Control	100.0	100.0	100.0
	NUMBER		
All separations	1 452 299	208 793	1 661 092

Principal procedure	Acute and psychiatric hospitals	Free-standing day hospital facilities	Total hospitals
•		1	•
	PER CENT		
Operations on			
Nervous system	2.9	0.7	2.6
Endocrine system	0.3	n.p.	n,p,
Eye	5.2	12.0	6.2
Ear	2.1	1.5	2.0
Nose, mouth, pharynx	8.3	5.0	7.8
Respiratory system	0.8	0.2	0.7
Cardiovascular system	7.1	n.p.	n.p.
Hemic and lymphatic system	0.4	0.2	0.3
Digestive system	21.1	47.7	25.0
Urinary system	4.1	2.5	3.9
Male genital organs	2.9	0.8	2.6
Female genital organs	8.4	14.4	9.3
Obstetric procedures	4.6	n.p.	n.p.
Musculoskeletal system	13.9	2.8	12.3
Breast	1.9	0.5	1.7
Other operations on skin and			
subcutaneous tissue	4.1	6.2	4.4
Brown and the second			
Diagnostic radiology and related	2.2		
techniques	2.2	0.1	1.9
Other miscellaneous diagnostic and			
therapeutic procedures	9.7	3.5	8.8
Total	100.0	100.0	100.0
•	· · · › › • • • • • • •	8 4 4 5 7 1	
	NUMBER		
All separations	1 188 648	203 525	1 392 173

DISCHARGE OR TRANSFER TO......

Particulars	Usual residence(a)	Nursing home	Other hospital	L Died	eft against a d vice	Other(b)	fotal
			. :				
Acute and psychiatric hospitals							
New South Wales and							
Australian Capital Territory	386 613	1 193	4 839	1 936	935	1 116	396 632
Victoria	374 540	1 557	9 277	3 666	155	727	389 922
Queensland(c)	320 981	2 310	3 321	3 235	261	2 048	332 156
South Australia and							
Northern Territory	131 681	1 985	4 116	1 179	126	832	139 919
Western Australia	138 087	288	1 531	1.387	101	142	141 536
Tasmania	51 054	33	478	320	176	73	52 134
Australia	1 402 956	7 366	23 562	11 723	1 754	4 938	1 452 299
Free-standing day hospital							
facilities	205 226	228	2 945	_	295	99	208 793
Total	1 608 182	7 594	26 507	11 723	2 049	5 037	1 661 092

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

⁽b) Includes discharge or transfer to another health care accommodation, status change, statistical discharge and not stated.

⁽c) See paragraphs 16 and 17 of Explanatory Notes.

EXPLANATORY NOTES

INTRODUCTION

- **1** This publication contains statistical information, for 1995–96 and previous years, obtained from annual censuses of all 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). *Hospitals, Australia, 1991–92* (Cat. no. 4391.0), provides a comparison between the public and private hospital sectors in 1991–92 and was released jointly by AIHW and the Australian Bureau of Statistics (ABS) in May 1995.

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 Family Services.

COLLECTION METHODOLOGY

4 Data collection forms are sent each year to all private hospitals in Australia for completion and return to ABS. A large component of the required data on admitted patients is sent to ABS by State and Territory health authorities on behalf of hospitals, thus relieving hospitals of the task of collating this information for ABS. All data received are subjected to clerical and computer editing. Inconsistencies which are detected are referred to hospitals for resolution. Further clerical editing of aggregates is carried out to detect and resolve any remaining errors.

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 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 AIHW, with the addition of data items requested by private hospitals associations and health authorities. Refer to the Glossary for definitions of the main 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.

DATA QUALITY continued

- **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.
- **10** Hospital morbidity data, providing admitted patients' details such as age, principal diagnosis and procedure, are routinely provided by hospitals to State 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.
- **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, had debt and goodwill write-off. Further inconsistency occurs in cases where all property and fixed asset accounts are administered by a parent body or religious order headquarters and details are not available for the individual hospitals.

CASEMIX

- **12** 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.
- **13** 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.
- **14** 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. As a result, there may be a reduction in the number of patients for whom a patient accommodation classification (which currently categorises overnight-stay patients into advanced surgery, surgery and obstetrics) is available.

COUNTING METHODS

- 15 The method of counting patient separations and patient days was changed for 1995–96 in accordance with procedures outlined in the National Health Data Dictionary. Previously, a patient separation was recorded only when the patient left hospital, and total hospital stay was attributed to that separation. The concept of 'episode of care' has now been introduced to facilitate Casemix classification and cost analysis of patient treatment. Under this concept, if there is a change in the type of clinical treatment, a statistical separation is recorded. For example, if a patient is admitted for acute care and subsequently receives non-acute care (e.g. nursing home type care) until discharged, then one separation and the number of days are recorded for the acute care episode and one separation and the number of days for the non-acute episode are also recorded.
- **16** Generally, these changes have only a small effect on the data for private hospitals. However, in order to prepare for this new reporting procedure, all nursing home type patients in Queensland hospitals were statistically discharged and re-admitted on 1 July 1995. The premature reporting of patient days associated with these statistical separations has produced an overstatement of the number of patient days in Queensland for 1995–96. Therefore, care should be exercised when comparing across States. Further, the recording of these separations in 1995–96 will result in some reduction of patient days in Queensland in future years.
- **17** Though the total number of nursing home type separations was relatively small (approximately 1,000) for Queensland private hospitals in 1995–96, there were 232,000 patient days associated with them. As a consequence, the occupancy rate and average length of stay are affected at both State and National levels.
- **18** Assuming that the number of nursing home type patient days in 1995–96 remained at the same level as for 1994–95, the number of patient days for Queensland in 1995–96 would reduce to 1,348,100, the occupancy rate would be reduced to 74.4% (from 80.9% in table 5) and the average length of stay reduced to 4.1 days (from 4.4 days in table 5). Nationally, the occupancy rate would be reduced to 68.9% (from 70.4%) with negligible impact on average length of stay. Under this assumption, the 60% contribution made by Queensland to the overall national increase in patient days between 1994–95 and 1995–96 would be reduced to 45%.

CLASSIFICATIONS

- **19** The principal diagnosis and principal procedure for admitted patients are reported using the International Classification of Diseases, 9th Revision Clinical Modification.
- **20** The locations of all private health establishments are coded according to the Australian Standard Geographical Classification, Edition 2.5.

NOTE OF APPRECIATION

21 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*.

EXPLANATORY NOTES continued

RELATED PUBLICATIONS

22 Other ABS publications which may be of interest include:

Characteristics of Persons Employed in Health Occupations, Australia, Census of Population and Housing (Cat. no. 4346.0) — Latest issue: August 1991 (\$15.00)

Health Insurance Survey, Australia (Cat. no. 4335.0) — Latest issue: June 1992 (\$15.30)

Hospitals, Australia (Cat. no. 4391.0) — Latest issue: 1991–92 (\$22.00) (Issued co-jointly with the AIHW)

1995 National Health Survey: First Results (Cat. no. 4392.0) (\$14.00)

23 The following related publications are issued by other organisations.

Available from AIHW Distribution Centre, GPO Box 84, Canberra ACT 2601:

Australian Hospital Statistics, 1995-96

Australian Hospital Statistics, 1995-96: An Overview

National Health Data Dictionary, Version 6.0, 1997

Available from the Australian Government Info Shop, 10 Mort Street, Canberra ACT 2601:

Australian Casemix Report, 1994-95

First National Report on Health Sector Performance Indicators: Public Hospitals — The State of Play

Available from the National Mental Health Report Service (Mental Health Branch, Department of Health and Family Services — telephone Canberra (02) 6289 3985):

National Mental Health Report, 1995

National Mental Health Report, 1995 -- Overview

24 Current publications produced by the ABS are listed in the *Catalogue of Publications and Products* (Cat. no. 1101.0). The ABS also issues the *Release Advice* (Cat. no. 1105.0) on Tuesdays and Fridays which lists publications to be released in the next few days. Both the Catalogue and the Release Advice are available from any ABS office.

UNPUBLISHED STATISTICS

25 As well as the statistics included in this and related publications, the ABS may have other relevant unpublished data available. Inquiries should be directed to Keith Carter on Brisbane (07) 3222 6374.

EFFECTS OF ROUNDING

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

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APPENDIX LIST OF TERMS

Establishment level activity data items

An *admitted patient* is a patient who 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.

Same-day patients are patients who are admitted and separated on the same day (i.e. they are in hospital for a period that does not include an overnight stay).

Overnight-stay patients are patients who are admitted to and separated from hospital on different dates (i.e. they stay at least one night in hospital).

Non-admitted patients are patients who do not undergo a hospital's formal admission process. These include outpatients, accident and emergency patients and off-site (community/outreach) patients.

A separation occurs when an admitted patient:

- · is discharged;
- is transferred to another institution;
- absconds:
- dies whilst in care;
- changes status e.g. from acute to nursing home type; or
- leaves hospital for a period of seven or more days.

Patient days 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.

Occupancy rate is calculated by dividing patient days by the product of average number of beds and the number of days in the year (365 in 1995–96) and expressed as a percentage,

```
i.e. occupancy rate (%) = \frac{\text{patient days x } 100}{\text{average available beds x } 365}
```

Average length of stay in hospital is calculated by dividing the aggregate number of patient days by the number of separations which generated those patient days.

Occasions of service are 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.

Allied bealth services are provided by units and clinics for treatment and counselling of patients. They mainly comprise physiotherapy, speech therapy, family planning, dietary advice, optometry and occupational therapy.

Procedures comprise advanced surgery, surgery and obstetrics as defined by the Commonwealth Department of Health and Family Services for health insurance fund benefit purposes. Surgical procedures, other than those defined above, are shown as minor surgery in this publication. Total procedures performed during the year relate to all such procedures regardless of type of patient (admitted or non-admitted patient).

APPENDIX LIST OF TERMS continued

Establishment level resource data items

Approved beds for acute and psychiatric hospitals are those for which the hospital is licensed to operate under the relevant State or Territory government legislation.

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, this includes chairs, trolleys, recliners and cots.

Occupied beds are calculated by dividing total patient days by the number of days in the year (365 in 1995–96).

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.

Staffing categories include staff employed by the hospital and contract staff employed through an agency in cases where the contract is for the supply of labour.

Nursing staff comprises registered nurses, enrolled nurses, student nurses, trainec/pupil nurses and assistants in nursing.

Administrative and clerical staff includes computing and finance staff.

Domestic and other staff includes staff engaged in cleaning, laundry services, the provision of food and also orderlies, porters, hospital attendants and engineering and maintenance staff.

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, accommodation and facility fees paid by medical practitioners.

Other revenues 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.

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

Other domestic services includes staff services, accommodation, bedding and linen, hardware, crockery, cutlery, laundering and cleaning of uniforms.

APPENDIX LIST OF TERMS continued

Establishment level resource data items continued

Repairs and maintenance includes costs of maintaining, repairing, replacing and providing additional equipment, maintaining and renovating buildings, and minor additional works.

Administrative expenses includes management and administrative support expenditure such as rates and taxes, printing, telephone, stationery, insurances and motor vehicle running expenses.

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.

Geographical classification

A legal local government area (LGA) is the geographical area under the responsibility of an incorporated local government council.

Statistical divisions which are groupings of the whole or part of legal LGAs, 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.

Patient level data items

Patient classification applies to all overnight-stay patients and is used to facilitate patient billing. It includes the categories, advanced surgery, surgery and obstetrics as defined by the Commonwealth Department of Health and Family Services for health fund benefits purposes. Surgery, other than that defined above, is shown as minor surgery in this publication. The other categories included under patient classification are psychiatric, rehabilitation and nursing home type. Psychiatric includes all admitted patients of an approved psychiatric program. Similarly, rehabilitation includes all admitted patients of an approved rehabilitation program. Nursing home type relates to admitted patients staying 35 days or more for whom an acute care certificate has not been provided at the time of discharge. Patients not included in the previously defined categories are shown under 'medical and other' in this publication

In previous years, same-day patients were categorised according to patient classification but this practice has been discontinued for the 1995–96 and future surveys.

Insurance status indicates whether or not hospital insurance is held with a registered health insurance fund, with a general insurance company or with an employer health plan. Patients who have insurance cover only for ancillary services are regarded as not having hospital insurance.

Basic insurance provides some cover for hospital accommodation charges for private hospitals including day hospital facilities.

Supplementary insurance provides additional hospital accommodation benefits to those provided by the basic hospital table. Patients with basic and supplementary insurance are counted once only (under basic plus supplementary).

APPENDIX LIST OF TERMS continued

Type of hospital

An *acute* hospital provides at least minimal medical, surgical or obstetrical services for admitted patient treatment and/or care and provides round-the-clock comprehensive qualified nursing service as well as other necessary professional services. It 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.

A *psychiatric* hospital is devoted primarily to the treatment and care of admitted patients with psychiatric, mental or behavioural disorders. Psychiatric hospitals are licensed/approved by each State or Territory health authority and cater primarily for patients with psychiatric or behavioural disorders.

A *free-standing* day hospital facility provides investigation and treatment for acute conditions on a day-only basis and is approved by the Commonwealth for the purposes of basic table health insurance benefits.

For more information . . .

The ABS publishes a wide range of statistics and other information on Australia's economic and social conditions. Details of what is available in various publications and other products can be found in the ABS Catalogue of Publications and Products available from all ABS Offices.

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(08) 9360	5140 (08)	9360 5307
(08) 8237	7100 (08)	8237 7582
(03) 6222	5800 (03)	6222 5800
(08) 8943	2111 (08)	8943 2111
	(02) 9268 (03) 9615 (07) 3222 (08) 9360 (08) 8237 (03) 6222	(02) 9268 4611 (02) (03) 9615 7755 (03) (07) 3222 6351 (07) (08) 9360 5140 (08) (08) 8237 7100 (08) (03) 6222 5800 (03)



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