

4 Hospital performance indicators

Introduction

This chapter presents information on performance indicators that relate to the provision of hospital services. Performance indicators are defined as statistics or other units of information which reflect, directly or indirectly, the extent to which an anticipated outcome is achieved or the quality of the processes leading to that outcome (NHPC 2001).

In 2001, the National Health Performance Committee (NHPC) developed a framework to report the performance of the Australian health system which has been adopted by Health Ministers. *Australian Hospital Statistics* uses this National Health Performance Framework to present performance indicator information.

This chapter describes the performance indicators presented in this chapter and elsewhere in this report, within the context of the framework. A substantial proportion of the performance indicator information in this report is included in this chapter; however, some is included elsewhere, for example for elective surgery waiting times (Chapter 5).

The performance indicators presented in this report are described within the context of the framework. This chapter includes indicators for cost per casemix-adjusted separation, average salary expenditure, hospital accreditation, separation rates for selected procedures, separation rates for selected potentially preventable hospitalisations, average lengths of stay for a selection of AR-DRGs, relative stay indexes, emergency department waiting times and separations with adverse events. Expenditure and occasions of service data for New South Wales are preliminary (Tables 4.1, 4.2, 4.3 and 4.13) while information on staffing are not available for New South Wales (Table 4.4). These tables will be updated on the AIHW website when the data have been finalised.

National Health Performance Framework

The NHPC describes the framework as a structure to guide the understanding and evaluation of the health system, facilitating consideration of how well the health system or program is performing. It has three tiers: 'Health status and outcomes', 'Determinants of health' and 'Health system performance'. Questions are posed for each tier and a number of dimensions have been identified within each. The dimensions can guide the development and selection of performance indicators such that the indicators can be used together to answer each tier's questions. Sometimes single indicators can provide information in several dimensions of the framework.

The third tier is the most directly relevant to assessment of the provision of hospital and other health care services. It has been organised into nine dimensions: effective, appropriate, efficient, responsive, accessible, safe, continuous, capable and sustainable. The questions asked for this tier are: 'How well is the health system performing in delivering quality health actions to improve the health of all Australians?' and 'Is it the same for everyone?'. The latter question underlines the focus throughout the framework on equity.

Table 4.A presents the third tier from the National Health Performance Framework (NHPC 2001). Further information on the Framework is included in Chapter 4 of *Australian Hospital Statistics 2000–01* (AIHW 2000).

Table 4.A: The National Health Performance Framework, Tier 3

Health system performance		
<i>How well is the health system performing in delivering quality health actions to improve the health of all Australians? Is it the same for everyone?</i>		
<i>Effective</i>	<i>Appropriate</i>	<i>Efficient</i>
Care, intervention or action achieves desired outcome.	Care/intervention/action provided is relevant to the client's needs and based on established standards.	Achieving desired results with most cost-effective use of resources.
<i>Responsive</i>	<i>Accessible</i>	<i>Safe</i>
Service provides respect for persons and is client orientated and includes respect for dignity, confidentiality, participation in choices, promptness, quality of amenities, access to social support networks, and choice of provider.	Ability of people to obtain health care at the right place and right time irrespective of income, physical location and cultural background.	The avoidance or reduction to acceptable limits of actual or potential harm from health care management or the environment in which health care is delivered.
<i>Continuous</i>	<i>Capable</i>	<i>Sustainable</i>
Ability to provide uninterrupted, coordinated care or service across programs, practitioners, organisations and levels over time.	An individual's or service's capacity to provide a health service based on skills and knowledge.	System or organisation's capacity to provide infrastructure such as workforce, facilities and equipment, and be innovative and respond to emerging needs (research, monitoring).

Source: NHPC 2001.

Performance indicators in this report

Table 4.B presents performance indicator information that is in this report (both in this chapter and elsewhere), for each of the National Health Performance Framework Tier 3 dimensions. Further information relevant to the interpretation of these performance indicator data is in the text and footnotes accompanying the tables.

Effective

There are no indicators available to assess effectiveness of the acute care sector. However, Tables 4.8 and 4.9 present data on selected potentially preventable hospitalisations (PPH), hospitalisations considered avoidable if timely and adequate non-hospital care is provided. Separation rates for PPHs therefore have potential as indicators of the quality or effectiveness of non-hospital care. These are presented by state and territory and Remoteness Area of usual residence.

Appropriate

Indicators of appropriateness include data on separation rates in Tables 2.4, 6.2, 7.7, 7.8, 7.11 and 7.12, presented for a range of different categories (such as Indigenous status, and area of usual residence) that relate to equity. These indicators should be interpreted taking into

consideration the fact that separation rates are influenced not only by hospital system performance but also by variation in underlying needs for hospitalisation, variation in admission and data recording practices (as noted elsewhere in this report) and variation in the availability of non-hospital services.

The separation rates for selected procedures in Tables 4.6 and 4.7 are also indicators of appropriateness. However, separation rates for some of the procedures may also be indicators of accessibility or of one or more dimensions relating to primary care. For example, separation rates for lens insertion, angioplasty, coronary artery bypass graft, knee replacement and hip replacement may also be indicators of accessibility, and the NHPC describes separation rates for myringotomy and tonsillectomy as indicators of the performance of the primary care sector (NHPC 2001). For all of these, statistics are presented by the state or territory and the Remoteness Area of usual residence of the patient, for equity considerations.

Data presented in Tables 7.11 and 7.12 on the state or territory and Remoteness Area of usual residence of the patient may also be indicators of accessibility of services, for example for the public and private sectors.

Efficient

The cost per casemix-adjusted separation statistics in Tables 4.1, 4.2 and 4.3 are indicators of efficiency, as are the statistics on average salaries (Table 4.4), average lengths of stay for selected AR-DRGs (Table 4.10) and relative stay indexes (Tables 2.3, 4.1, 4.2, 4.3, 4.11, 4.12, 11.1 and 11.2). However, variation in length of stay, for example, may be a reflection of different types of service provision, such as between the public and private sectors, and thus not only an indicator of efficiency.

Table 4.B: Performance indicator information in this report, by National Health Performance Framework dimension

Table(s)	Indicator	Level(s) of care to which it relates	Presentation that relates to equity
Effective			
4.8, 4.9	Separation rates for potentially preventable hospitalisations	Primary care, Population Health	Presented by state and territory of usual residence of the patient (Table 4.8) and by Remoteness Area of usual residence (Table 4.9)
No indicators available for acute care			
Appropriate			
2.4	Separation rates	Acute care	Presented by state and territory of hospitalisation, and for the public and private sectors

(continued)

Table 4.B (continued): Performance indicator information in this report, by National Health Performance Framework dimension

Table(s)	Indicator	Level(s) of care to which it relates	Presentation that relates to equity
6.2	Separation rates	Acute care	Presented by state and territory of hospitalisation, by admitted patient election status and funding source and for the public and private sectors
7.7, 7.8	Separation rates	Acute care	Presented by state and territory of hospital, hospital sector and Indigenous status
7.11, 7.12	Separation rates	Acute care	Presented by state and territory of usual residence of the patient (Table 7.11) and by Remoteness Area of usual residence (Table 7.12), and for the public and private sectors
4.6, 4.7	Separation rates for: myringotomy, tonsillectomy caesarean section, angioplasty, coronary artery bypass graft, hip replacement, revision of hip replacement, knee replacement, lens insertion, hysterectomy cholecystectomy, prostatectomy, appendicectomy, arthroscopy, endoscopy	Acute care	Presented by state and territory of usual residence of the patient (Table 4.6) and by Remoteness Area of usual residence (Table 4.7)
Efficient			
4.1, 4.2, 4.3	Cost per casemix-adjusted separation	Acute care	Presented by state and territory of hospital (Table 4.1), and by public hospital peer group (Tables 4.2 and 4.3)
2.3, 4.1, 4.2, 4.3, 4.11, 4.12, 11.1, 11.2	Relative stay index	Acute care	Presented by hospital type (Table 2.3), by state and territory of hospital (Table 4.1), by public hospital peer group (Tables 4.2 and 4.3) and, for the public and private sectors, by admitted patient election status and funding source (Tables 4.11, 4.12), and by Major Diagnostic Category (Tables 11.1, 11.2)
4.4	Average salary by staffing category	Acute care	Presented by state and territory of hospital
4.10	Average length of stay for a selection of AR-DRGs	Acute care	Presented by state and territory of hospital, and for the public and private sectors
Responsive			
4.13	Emergency department waiting times (proportions waiting longer than clinically desirable)	Acute care	Presented by state and territory of hospital and by public hospital peer group
Accessible			
5.1, 5.2, 5.4, 5.5	Waiting times for elective surgery (times waited at the 50th and 90th percentiles and proportion waiting longer than 365 days)	Acute care	Presented as a time series (Table 5.1), by state and territory of hospital, and by public hospital peer group (Table 5.2), by surgical specialty (Table 5.4) and by indicator procedure (Table 5.5)

(continued)

Table 4.B (continued): Performance indicator information in this report, by National Health Performance Framework dimension

Safe			
4.14	Separations with adverse events	Acute care	Presented for the public and private sectors
Continuous			
6.11, 6.12	Separation for non-acute care by mode of separation, age group, sex and patient election status	Continuing care	Presented by patient election status (Table 6.11) and age group and sex (Table 6.12)
No indicators available for acute care			
Capable			
4.5	Accreditation of hospitals and beds	Acute care	Presented by state and territory of hospital, and for the public and private sectors
Sustainable			
No indicators available for acute care			

Responsive

Statistics on the proportions of patients waiting longer than is clinically desirable for emergency department services (Table 4.13) are indicators of responsiveness, although they can also be regarded as indicators of accessibility. State and territory data can be used to consider equity.

Accessible

Times waited for elective surgery by patients at the 50th and 90th percentiles and proportions waiting longer than 365 days are presented as indicators of accessibility (Chapter 5). Data by surgical specialty, indicator procedure and state and territory can be used in consideration of equity.

Safe

The number of separations with external causes for adverse events (Table 4.14) is presented as an indicator of safety. However, this indicator is under development, so should be interpreted with care. It has not been adjusted for risk in any way so, although the data are presented separately for the public and private sectors, comparisons between the sectors may not be valid.

Continuous

There are no indicators available relevant to the provision of continuous care that are specific for the acute care sector. However, this dimension will probably usually be used in assessments of how the sectors of the health care system work together, rather than individually. Separations for non-acute care by mode of separation, age group, sex and patient election status could be regarded as indicators of continuous care relevant to the

continuing care sector (Tables 6.11 and 6.12). They may also provide information relevant to the integration of the acute (hospital) care and continuing care sectors.

Capable

Accreditation status of hospitals, beds and separations (Table 4.5) has been identified as an indicator of capability, defined by the NHPC as the capacity to provide a health service based on skills and knowledge. Accreditation of hospitals can be achieved through several different mechanisms that measure different processes and outcomes relating to hospital service delivery. Different types of accreditation could therefore relate to different groups of dimensions of the framework.

Sustainable

There are no indicators available for sustainability, defined by the NHPC as capacity to provide infrastructure, such as workforce, facilities and equipment, and be innovative and respond to emerging needs (research, monitoring).

Cost per casemix-adjusted separation

The cost per casemix-adjusted separation is an indicator of the efficiency of the acute care sector. It has been published in *Australian Hospital Statistics* since the 1996–97 reference year, and included within frameworks of indicators by the National Health Ministers' Benchmarking Working Group (NHMBWG 1999), the Steering Committee for the Review of Government Services (SCRGSP 2004) and the NHPC (NHPC 2002). It is a measure of the average recurrent expenditure for each admitted patient, adjusted using AR-DRG cost weights for the expected resource use. Details of the methods used in this analysis are presented in Appendix 3 of this report and in *Australian Hospital Statistics 1999–00* (AIHW 2001).

The calculation of these figures is sensitive to a number of deficiencies in available data. In particular:

- the proportion of recurrent expenditure that relates to admitted patients (the numerator) is estimated in different ways in different hospitals, and so is not always comparable;
- capital costs (including depreciation) are not included in numerators (see Table 3.5 for available data on depreciation, and Appendix 3 for SCRGSP estimates of cost per casemix-adjusted separation including capital costs);
- only cost weights applicable to acute care separations are available, so these have been applied to all separations, including the 2.7% that were not acute (Table 4.1) (Appendix 3 includes details of the separations in this analysis, by care type, and also separate data for acute care separations only for New South Wales, Victoria, Western Australia and South Australia);
- the proportion of patients other than public patients can vary, and the estimation of medical costs for these patients (undertaken to adjust expenditure to resemble what it would be if all patients had been public patients) is subject to error; and

- the 2001–02 AR-DRG version 4.2 cost weights (DoHA 2003) were used as the 2002–03 AR-DRG version 4.2 cost weights were not available at the time of publication, and AR-DRG version 5.0 cost weights are not being prepared for 2002–03.

The scope of the analysis is hospitals that mainly provide acute care. These hospitals are classified in the public hospital peer groups of *Principal referral and specialist women's and children's hospitals*, *Large hospitals*, *Medium hospitals* and *Small acute hospitals* (see below and Appendix 4). Excluded are small non-acute hospitals, multi-purpose services, hospices, rehabilitation hospitals, mothercraft hospitals, other non-acute hospitals, psychiatric hospitals, and hospitals in the *Unpeered and other* peer group. Hospitals that cannot be classified due to atypical events such as being opened or closed mid-year, or for which the data is of poor quality are also excluded. This scope restriction improves the comparability of data among the jurisdictions and increases the accuracy of the analysis. The hospitals included accounted for 95.3% of separations in public acute and psychiatric hospitals in 2002–03 (Table 4.2), and 91.3% of recurrent expenditure.

The scope for 2002–03 is the same (defined in terms of peer groups) as for 1998–99 to 2001–02. However, a small number of hospitals classified to peer groups which were included in the analysis in some years, may have been classified to other peer groups excluded from the analysis in other years; this mainly applies to the *Small acute hospitals* and non-acute peer groups.

The average costs reported here are based on expenditure by public hospitals in a state or territory and does not necessarily include state government contracted services with private hospitals or allow for the source of funds. Expenditure data for New South Wales are preliminary and Table 4.1 will be updated on the AIHW website when finalised data are available.

Table 4.1 shows the cost per casemix-adjusted separation for the states and territories for 2002–03. At the national level, the average casemix-adjusted separation was \$3,184. A large portion of the costs was attributed to non-medical and medical labour costs; nationally these costs were \$1,683 and \$601 respectively, per casemix-adjusted separation.

The cost per casemix-adjusted separation data should be interpreted taking into consideration other factors, such as costs incurred that are beyond the control of a jurisdiction. For example, the Northern Territory has high staffing and transport costs, and treats a greater proportion of Aboriginal and Torres Strait Islander patients than other jurisdictions. Because of factors such as these, cost disabilities associated with providing the same level and standard of hospital services available elsewhere in Australia have been recognised by the Commonwealth Grants Commission.

Public hospital peer groups

Public hospital peer groups have been developed for presenting data on costs per casemix-adjusted separation to allow more meaningful comparison of the data than at the jurisdiction level. The peer groups were designed to explain variability in the average cost per casemix-adjusted separation. Hospitals are grouped into broadly similar groups in terms of their range of admitted patient activities and their geographical location. The expenditure data for New South Wales are preliminary, therefore Tables 4.2 and 4.3 will be updated on the AIHW website when finalised data are available.

For 2002–03, the dominant hospital peer group category was the *Principal referral and specialist women's and children's* hospital group. This group accounted for 67.8% of public acute and psychiatric hospital expenditure and 66.1% of separations (Table 4.2). The average

cost per casemix-adjusted separation for this group was \$3,226, which was 1.3% higher than the overall average cost (\$3,184) for all hospitals included in this analysis.

Table 4.2 also presents a range of other statistics about the peer groups, such as the number of hospitals in each, average length of stay, relative stay index (see below and in Appendix 3), and the cost per casemix-adjusted separation at the 25th and 75th percentile. The average number of AR-DRGs (with either any or five or more acute separations) reported for each hospital is also presented; it provides information on the breadth of activity of each type of hospital, as measured using AR-DRGs.

Table 4.3 presents cost per casemix-adjusted separation data and other statistics by peer group for each state and territory. For *Principal referral and specialist women's and childrens' hospitals*, the cost per casemix-adjusted separation varied among the jurisdictions, for example, from \$2,997 in Tasmania, to \$3,363 in New South Wales.

Average salary expenditure

Average salaries paid to public hospital full-time equivalent staff by states and territories are presented in Table 4.4 as indicators of efficiency. Staffing data for New South Wales were unavailable. This table will be updated on the AIHW website when the data become available.

There was some variation in the average salaries among the jurisdictions. Average salaries for nurses ranged from \$53,098 in South Australia to \$64,008 in Victoria. The comparability of nursing salaries may be affected by the relative proportions of registered and enrolled nurses among the jurisdictions. For medical officers, salaries ranged from \$87,918 in South Australia to \$140,025 in the Northern Territory. Relatively high average salaries for Victoria may partly be the result of underreporting full time equivalent staff (see Chapter 3).

Some states and territories were not able to provide data separately for *Diagnostic and allied health professionals*, *Other personal care staff* and *Domestic and other staff*. Thus some of the variation in average salaries reported for these categories is likely to be a result of different reporting practices. The variations in the averages are also affected by different practices in 'outsourcing' services, for example for domestic and catering functions. The degree of outsourcing of higher-paid versus lower-paid staffing functions will be a factor that affects the comparison of averages. For example, outsourcing the provision of domestic services but retaining domestic service managers to oversee the activities of the contractors would tend to result in higher average salaries for the domestic service staff.

Hospital accreditation

Hospital accreditation has been identified as an indicator of capability within the National Health Performance Framework. The indicator originally related to accreditation under the Australian Council on Healthcare Standards (ACHS) Equip program, as this was the only relevant data available on accreditation nationally. However, hospitals may also be accredited by other organisations, including the Australian Quality Council (now known as Business Excellence Australia) and the Quality Improvement Council, and hospitals can also be certified as compliant with quality standards such as the International Standards Organisation (ISO) 9000 quality family. The data presented in Table 4.5 therefore include accreditation through ACHS Equip and other types of accreditation for public hospitals. The

comparability of the public hospital accreditation data among the states and territories is limited because of the voluntary nature of participation in the award schemes for hospitals in some jurisdictions.

For Australia as a whole, 580 public hospitals with 49,019 public hospital beds (94% of the total) were known to be accredited at 30 June 2002–03 (Table 4.5). The proportion of public hospital accredited beds varied by jurisdiction, from 100% in the Australian Capital Territory to 79% in Tasmania. Accredited public hospitals accounted for 3,941,841 separations (96% of public separations) and 15,653,752 patient days (96% of public patient days).

For private hospitals, the data have been sourced from the ABS's Private Health Establishments Collection for 2001–02 and relate to accreditation by any body. Accreditation at any point in time does not assume a fixed or continuing status as accredited. A total of 381 private hospitals and 24,486 private hospital beds (94% of the total) were accredited in 2001–02.

Separation rates for selected procedures

Separation rates for 'selected' procedures have been identified as indicators of appropriateness and may also be indicators of accessibility or of the performance of the primary care sector.

Most of the procedures were originally selected as indicators of appropriateness by the NHMBWG because of the frequency with which they are undertaken, because they are often elective and discretionary, and because there are sometimes treatment alternatives available (NHMBWG 1998). ICD-10-AM codes used to define the procedures are listed in Appendix 3.

As for other separation rates, these data should be interpreted with caution, as they would reflect not only hospital system performance but also variation in underlying needs for hospitalisation, variation in admission and data recording practices, and variation in the availability of non-hospital services. In addition, the National Hospital Morbidity Database does not include data for some private hospitals (as noted in Appendix 4). This may result in the underestimation of separation rates for some of the diagnoses and procedures, particularly those more common for private hospitals. The separation rates are age-standardised, however, to take into account the different age structures of the populations of the states and territories.

Information on public patients in Tables 4.6 and 4.7 relate to separations for which the patient election status was reported as public (see Chapter 6). For example, the proportion of separations for public patients who had an *Appendectomy* was 65% nationally, ranging from 57% for Queensland to 76% for Northern Territory.

Table 4.6 presents age-standardised separation rates for each procedure for the state or territory of usual residence of the patient, accompanied by the standardised separation rate ratio (SRR) against the national total. If the SRR is greater than 1 then the rate for the state is higher than the national average. Also included is the 95% confidence interval of the SRR which shows the range of values in which the SRR could be expected to fall due to chance. If the confidence interval includes 1, then a difference between jurisdictions is considered less likely (see Appendix 3).

For example, the separation rate for *Knee replacement* for residents of South Australia was 1.36 separations per 1,000 population. The SRR was 1.03 with a 95% confidence interval of 0.99–1.07, indicating that the difference was not statistically significant. For the same procedure in the Australian Capital Territory, the separation rate for was 1.47 per 1,000 population, with

an SRR of 1.12 and the 95% confidence interval of 1.01–1.23, indicating the difference was statistically significant.

Table 4.7 presents similar statistics by the Remoteness Area of usual residence of the patient. For example, the rate for *Hip replacement* for residents of major cities was 1.30 separations per 1,000 population. The SRR was 0.96 and the 95% confidence interval was 0.95–0.97, indicating that the rate for hip replacements in major cities is statistically significant different to the national rate.

The number of caesarean sections is dependent on the birth rate as well as the population so the population rate is less meaningful. The number of in-hospital births has therefore been included in the tables, and the number of caesarean sections reported for separations for which in-hospital birth was reported. Comparability is, however, still complicated by potential under-identification of in-hospital births in this analysis, and in the age at which the mothers are giving birth. Residents of major cities (30.5 caesarean sections per 100 births in Table 4.7) and Queensland (30.3 per 100 births in Table 4.6) had the highest rate on this basis. The national rate of caesarean sections per 100 in-hospital births increased from 22.7 to 29.3 over the years from 1998–99 to 2002–03.

Separation rates for selected potentially preventable hospitalisations

The potentially preventable hospitalisations (PPHs) presented in this report are those conditions where hospitalisation is thought to be avoidable if timely and adequate non-hospital care is provided. Separation rates for PPHs therefore have potential as indicators of the quality or effectiveness of non-hospital care. A high rate of potentially preventable hospitalisations may indicate an increased prevalence of the conditions in the community, poorer functioning of the non-hospital care system or an appropriate use of the hospital system to respond to greater need.

Three broad categories for PPHs have been used in this chapter. These have been sourced from *The Victorian Ambulatory Care Sensitive Conditions Study* (Department of Human Services Victoria 2002).

Vaccine-preventable. These diseases can be prevented with proper vaccination. They include influenza, bacterial pneumonia, tetanus, measles, mumps, rubella, pertussis and polio. The conditions are considered to be preventable, rather than the hospitalisation.

Acute. These conditions may not be preventable, but theoretically do not result in hospitalisation if adequate and timely non-hospital care is received. These include dehydration/gastroenteritis; kidney infection; perforated ulcer; cellulitis; pelvic inflammatory disease; ear, nose and throat infections; and dental conditions.

Chronic. The conditions may be preventable through behaviour modification and lifestyle change, but they can also be managed effectively through non-hospital care to prevent deterioration and hospitalisation. These conditions include diabetes, asthma, angina, hypertension, congestive heart failure and chronic obstructive pulmonary disease.

Tables 4.8 and 4.9 present the number of separations, the proportion of residents treated in hospitals outside their state of residence and the age-standardised separation rates for each PPH condition for the state or territory (Table 4.8) or Remoteness Area of usual residence of the patient (Table 4.9). These tables also include the SRR against the national total as well as the 95% confidence interval of the SRR.

Statistics are presented for the total PPH rate and the rates for each of the three broad PPH categories as well as individual conditions. These conditions include *Appendicitis, Convulsions and epilepsy, Cellulitis, Dental conditions, Dehydration and gastroenteritis* and *Ear, nose and throat infections* from the acute category and *Angina, Asthma, Chronic obstructive pulmonary disease, Congestive cardiac failure* and *Diabetes* from the chronic category. For vaccine-preventable conditions, *Influenza and pneumonia* and *Other vaccine-preventable conditions* are presented. A full description of all conditions presented in these tables, including ICD-10-AM codes, can be found in Appendix 3.

There were 625,035 of these selected PPHs in Australia in 2002–03, which translates to a rate of 30.8 per 1,000 population. The rates ranged from 18.2 per 1,000 population in the Australian Capital Territory to 53.1 per 1,000 population in the Northern Territory. The separation rate for vaccine preventable PPHs in the Northern Territory was 2.4 times the national rate of 0.78, and the separation rate for the Australian Capital Territory was 0.4 times the national rate.

The rate for *Chronic obstructive pulmonary disease* for residents of Western Australia was 2.74 separations per 1,000 population. The SRR was 0.99 but the 95% confidence interval was 0.96–1.02, indicating that the difference was not statistically significant. The separation rate for the Northern Territory was 6.05 per 1,000 population, with a SRR of 2.18 and the 95% confidence interval of the SRR of 2.01–2.35, indicating the difference was statistically significant (Table 4.8). A public dental hospital in Victoria was not included (see Appendix 4) and this may have affected the statistics on dental conditions.

Table 4.9 highlights that separation rates were higher for the more remote areas for most PPH. For example, the separation rate for *Diabetes complications* in major cities was 7.04 per 1,000 population, 9.23 for inner regional, 10.55 for outer regional, 13.30 for remote and 20.73 for very remote.

Average lengths of stay for 20 selected AR-DRGs

The average length of stay for 20 selected AR-DRGs has been identified as an indicator of efficiency. The selected AR-DRGs reflect a representative range of services and were chosen on the basis of:

- homogeneity, where variation is more likely to be attributable to the hospital's performance rather than variations in the patients themselves;
- differences between jurisdictions and/or sectors;
- policy interest as evidenced by:
 - inclusion of similar groups in other tables in *Australian Hospital Statistics*, for example, indicator procedures for elective surgery waiting times
 - high volume and/or cost
 - changes in volume over years;
- representativeness across clinical groups (MDCs) and surgical and medical AR-DRGs.

In addition, only non-complication and/or comorbidity (non-CC) AR-DRGs were chosen from groups of adjacent AR-DRGs because AR-DRGs with CCs may be relatively less homogeneous, as they potentially include a range of complications and/or comorbidities.

To aid the comparability between years some minor alterations were made to the selected AR-DRGS classifications to reflect changes due to the introduction of version 5.0 AR-DRGs.

For example, AR-DRGs I04A *Knee replacement and reattachment with catastrophic complications and comorbidity* and I04B *Knee replacement and reattachment without catastrophic complications and comorbidity* in version 4.2 are presented as DRG I04Z *Knee replacement and reattachment*.

These data are not equivalent to the data presented in the tables in Chapter 11, or the predecessor table in *Australian Hospital Statistics 2000–01* (AIHW 2002a) on the top 10 DRGs, as separations with lengths of stay over 120 days are excluded and same day separations are included.

Table 4.10 shows that the average length of stay of the chosen AR-DRGs ranged from 14.3 days for U63B *Major affective disorders age<70 W/O catastrophic or severe CC* to 1.5 days for G09Z *Inguinal and femoral hernia procedures age>0*. The average length of stay for E62C, *Respiratory infection or inflammations without complications*, was 3.9 days for all hospitals in Australia, 3.6 days for public hospitals and 5.4 days for private hospitals. There was some variation between states and territories with South Australian hospitals reporting an average length of stay of 3.7 days overall and New South Wales hospitals 4.1 days.

Relative stay indexes

Relative stay indexes (RSIs) have been identified as indicators of efficiency. They are calculated as the actual number of patient days for separations in selected version 4.2 AR-DRGs, divided by the number of patient days expected (based on national figures) standardised for casemix. The adjustment for casemix (based on the AR-DRG and age of the patient for each separation) allows variation in types of services provided to be taken into account, but does not take into account other influences on length of stay, such as Indigenous status.

An RSI greater than 1 indicates that an average patient's length of stay is higher than would be expected given the casemix for the group of separations of interest. An RSI of less than 1 indicates that the length of stay was less than would have been expected.

This publication uses two methods of standardisation. The method used in most tables (Tables 4.1, 4.2, 4.3 and 4.11, and part of Tables 2.3 and 4.12) is an indirect standardisation method, where the total observed length of stay is divided by the total expected length of stay. Technically an indirectly standardised rate compares a group with a standard population. The indirectly standardised rates of different groups are not strictly comparable as the different groups have different casemixes.

In addition to the indirect method, Table 2.3 and Table 4.12 present a directly standardised RSI. The direct method weights the separations of the group of hospitals to reflect the total casemix of Australia before calculating the ratio, thereby weighting the casemix of the groups of hospitals to a comparable basis. However, the direct standardisation method is not very suitable for groups of hospitals for which a limited range of AR-DRGs is reported, as the weighting of separations for AR-DRGs that are not reported (or are reported in small numbers) is subject to error. Therefore, presentation of the directly standardised method in the public sector in the Northern Territory have been suppressed. In these cells, fewer than 600 of the 639 AR-DRGs used in the national RSI analysis are represented so the RSIs may be affected by estimation of the data for missing AR-DRGs. More detail on these methods is included in Appendix 3, with a description of the number of AR-DRGs represented in each cell in Table 4.12 (Table A3.8).

Tables 4.1, 4.2 and 4.3 present RSI information for public hospitals, using the indirect method and public hospital data to calculate expected lengths of stay. For the hospitals included in

the cost per casemix-adjusted separation analysis, the RSI was 0.99 overall, and ranged from 1.17 in the Northern Territory to 0.94 in Queensland and Victoria (Table 4.1).

Tables 4.11 and 4.12 present RSI information using public and private sector data together to calculate expected lengths of stay. Overall, the RSI for public hospitals was 0.98 indirectly standardised and 0.99 directly standardised and the RSI for private hospitals was 1.04 indirectly standardised and 1.09 directly standardised (Table 4.12). According to this measure, the lower directly standardised RSI in the public sector indicates relatively shorter lengths of stay compared to the private sector.

Table 4.12 also presents RSI information for the medical, surgical and other categories of AR-DRGs (DoHA 2003). In the public sector, the RSI for medical AR-DRGs was 0.96 (indirectly and directly standardised), while the RSI for surgical AR-DRGs was 1.02 indirectly standardised and 1.03 directly standardised. In the private sector, the RSI for medical AR-DRGs was 1.14 indirectly standardised and 1.17 directly standardised, while the RSI for surgical AR-DRGs was 0.97 (indirectly and directly standardised).

Emergency department waiting times

Emergency department waiting times are regarded as indicators of responsiveness of the acute care sector (NHPC 2002). The indicator presented here is the proportion of patients presenting to public hospital emergency departments who waited longer for care than was clinically appropriate, by triage category.

The triage category indicates the urgency of the patient's need for medical and nursing care (AIHW 2002b). It is usually assigned by triage nurses to patients at, or shortly after, the time of presentation to the emergency department, in response to the question 'This patient should wait for medical care no longer than...?'. The National Triage Scale has five categories that incorporate the time by which the patient should receive care:

Resuscitation: immediate (within seconds)

Emergency: within 10 minutes

Urgent: within 30 minutes

Semi-urgent: within 60 minutes

Non-urgent: within 120 minutes.

There is some variation among the jurisdictions on how the waiting times are calculated, and this may slightly affect the comparability of the data. Queensland, Victoria, Western Australia and the Australian Capital Territory use the national standard method. The Northern Territory uses the time of clerical registration as the starting point, and New South Wales, Tasmania and South Australia use the time of triage. In South Australia, patients are always triaged before being clerically registered. Patients who do not wait for care after having been registered and/or triaged are generally excluded from the data but some may have been included in the data on the number of patients seen for Queensland and the Australian Capital Territory.

The comparability of the data may also be influenced by variation in the coverage of the emergency department waiting times data. Table 4.13 shows that coverage of the collection (as indicated by the proportion of hospitals included) was highest for the *Principal referral and women's and children's hospitals* peer group. Data for 1 New South Wales hospitals, 1 Victorian hospital and 3 hospitals in Queensland were not reported to the collection. For the *Large hospital* peer group, data for 11 hospitals in Victoria was not reported. Data for 21 out of 106

hospitals in the *Medium hospital* peer group were reported. Hospitals that were not included may not have emergency departments or provide emergency department services.

Table 4.13 also presents estimates of the proportion of emergency department visits that were covered by the Emergency Department Waiting Times Data Collection. The AIHW derived these estimates from data provided by the states and territories for the National Public Hospitals Establishments Database. The estimates were derived as:

- the number of outpatient occasions of service for *Accident and emergency* with emergency department waiting times data as a proportion of the total number of outpatient occasions of service for *Accident and emergency* reported to the National Public Hospital Establishments Database.

Based on this measure, the national proportion of emergency visits reported was 71%, ranging from 57% in Victoria to 100% in the Australian Capital Territory and the Northern Territory (Table 4.13). The coverage estimate for New South Wales is preliminary and will be updated when that state's occasions of service data have been finalised. Further information on the *Accident and emergency* outpatient occasions of service reported to the National Public Hospitals Establishments Database and this waiting times collection is included in Appendix 3.

The comparability of the data may also be influenced by the comparability of the triage categories among the states and territories. Although the triage category is not a measure of the need for admission to hospital, the proportions of patients in each category that were admitted can be used as an indication of the comparability of the triage categorisation.

The distribution of patients across triage categories among the states and territories may also provide some indication of the differences between states and territories in the types of patients that present to emergency departments. Table 4.13 shows the proportion of patients seen by triage category and state and territory.

The proportion receiving care on time varied by triage category, from 99% for resuscitation patients to 61% for semi-urgent and urgent patients. Overall, the proportion of patients receiving emergency department care within the required time was 66%, varying from 53% in South Australia to 74% in the Australian Capital Territory (Table 4.13).

Within the triage category 'Resuscitation', the proportion of patients seen on time ranged from 97% in the *Large hospitals* peer group to 99% in the *Principal referral and women's and children's hospitals*. For triage category 'Non-urgent' the proportion of patients seen on time was 85% overall, and ranged from 76% in the *Principal referral and women's and children's hospitals* peer group to 91% in the *Medium hospitals* peer group.

Data are presented for patients subsequently admitted and patients not subsequently admitted. South Australia did not supply this information. There are some differences in the way that subsequent admissions were identified, for example in relation to the transfer of patients to other hospitals for admission.

Separations with adverse events

Adverse events are defined as incidents in which harm resulted to a person receiving health care. They include infections, falls and other injuries, and medication and medical device problems, some of which may be preventable. Hospital separations data can be used to indicate the occurrence of adverse events as they include information on ICD-10-AM diagnoses, places of occurrence and external causes of injury and poisoning that indicate

than an adverse event was treated and/or occurred during the hospitalisation. However, other ICD-10-AM codes may also indicate that an adverse event has occurred, and some adverse events are not identifiable using these codes. The data presented in Table 4.14 can therefore be interpreted as representing selected adverse events in health care that have resulted in, or have affected, hospital admissions, rather than all adverse events that occurred in hospitals.

In 2002-03, there were 300,612 separations with an ICD-10-AM code for an adverse event, 4.5 per 100 separations. There were 209,140 separations in public hospitals (5.1 per 100 separations) and 91,472 separations in private hospitals (3.6 per 100 separations). However, the data for public hospitals is not comparable with the data for private hospitals because their casemixes and recording practices may differ.

Procedures causing abnormal reactions/complications (Y83-Y84) were reported for 194,785 separations, followed by 74,119 separations due to Adverse effects of drugs, medicaments and biological substances (Y40-Y59), and 57,965 separations due to Complications of internal prosthetic devices, implants and graft (T82-T85).

Table 4.1: Cost^(a) per casemix-adjusted separation^(b) and selected other statistics, selected public acute hospitals^(c), states and territories, 2002-03

	NSW ^(d)	Vic	Qld	WA	SA	Tas	ACT	NT ^(e)	Total
Total separations ('000) ^(b)	1,221	1,124	672	330	343	76	64	68	3,899
Acute separations ('000) ^(b)	1,195	1,088	648	325	334	75	62	67	3,795
Proportion of separations not acute (%)	2.2	3.2	3.5	1.6	2.6	1.4	2.1	1.4	2.7
Average cost weight ^(f)	1.04	0.97	0.99	0.98	1.02	1.09	0.96	0.75	1.00
Casemix-adjusted separations ('000) ^(g)	1,274	1,087	665	325	349	83	61	51	3,895
Total admitted patient days ('000) ^(b)	4,556	3,991	2,255	1,148	1,160	303	219	206	13,838
Admitted patient days for acute patients ('000) ^(b)	4,155	3,244	1,959	1,029	1,052	263	194	196	12,092
Proportion of bed days not acute (%)	8.8	18.7	13.1	10.3	9.4	13.3	11.4	4.7	12.6
Total recurrent expenditure (\$m)	5,756	4,762	2,547	1,493	1,248	342	333	239	16,720
Inpatient fraction ^(h)	0.70	0.73	0.74	0.70	0.76	0.75	0.74	0.77	0.72
Total admitted patient recurrent expenditure (\$m)	4,006	3,482	1,889	1,042	947	255	246	183	12,050
Public patient day proportion ⁽ⁱ⁾	0.79	0.87	0.91	0.89	0.84	0.85	0.87	0.95	0.85
Newborn episodes with no qualified days ('000)	48	35	28	13	9	2	3	2	140
Relative stay index ^(j)	1.04	0.94	0.94	1.02	0.95	0.96	1.07	1.17	0.99
Average cost data for selected hospitals									
Non-medical labour costs per casemix-adjusted separation (\$)									
Nursing	840	909	772	843	714	751	1,001	924	838
Diagnostic/allied health ^(k)	239	294	186	221	179	174	210	265	237
Administrative	246	245	199	253	203	169	289	329	235
Other staff	200	157	255	236	105	335	161	312	196
Superannuation	172	185	175	199	141	191	279	166	178
<i>Total non-medical labour costs</i>	<i>1,698</i>	<i>1,790</i>	<i>1,587</i>	<i>1,752</i>	<i>1,343</i>	<i>1,619</i>	<i>1,941</i>	<i>1,996</i>	<i>1,683</i>
Other recurrent costs per casemix-adjusted separation (\$)									
Domestic services	73	76	84	142	76	102	190	137	85
Repairs/maintenance	86	68	59	84	60	119	63	73	74
Medical supplies ^(k)	304	225	299	242	171	311	338	258	265
Drug supplies	168	158	167	185	144	155	124	214	164
Food supplies	38	51	23	19	18	34	47	38	36
Administration	182	201	155	137	72	177	300	191	171
Other	58	110	26	67	405	168	307	152	104
<i>Total other recurrent costs</i>	<i>908</i>	<i>889</i>	<i>814</i>	<i>877</i>	<i>945</i>	<i>1,064</i>	<i>1,369</i>	<i>1,063</i>	<i>899</i>
Total excluding medical labour costs	2,607	2,678	2,400	2,629	2,288	2,683	3,310	3,059	2,582

(continued)

Table 4.1 (continued): Cost^(a) per casemix-adjusted separation^(b) and selected other statistics, selected public acute hospitals^(c), states and territories, 2002–03

	NSW ^(d)	Vic	Qld	WA	SA	Tas	ACT	NT ^(e)	Total
Medical labour costs per casemix-adjusted separation (\$)									
Public patients									
Salaried/sessional staff	356	456	374	452	294	289	470	492	391
VMO payments	181	70	65	128	131	94	244	23	119
Private patients (estimated) ^(f)	139	80	46	74	84	70	104	29	90
<i>Total medical labour costs</i>	<i>676</i>	<i>607</i>	<i>485</i>	<i>655</i>	<i>508</i>	<i>453</i>	<i>818</i>	<i>544</i>	<i>601</i>
Total cost per casemix-adjusted separation^(a)	3,283	3,285	2,885	3,284	2,796	3,136	4,128	3,603	3,184

(a) Excludes depreciation.

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

(c) Psychiatric hospitals, drug and alcohol services, mothercraft hospitals, unpeered and other, hospices, rehabilitation facilities, small non-acute hospitals and multi-purpose services are excluded from this table. The data are based on hospital establishments for which expenditure data were provided, including networks of hospitals in some jurisdictions. Some small hospitals with incomplete expenditure data were not included. See Appendix 4 for further information.

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

(e) These figures should be interpreted in conjunction with the consideration of cost disabilities associated with hospital service delivery in the Northern Territory (see text).

(f) Average cost weight from the National Hospital Morbidity Database, based on acute and unspecified separations and newborn episodes of care with qualified days, using the 2001–02 AR-DRG v 4.2 cost weights (DoHA 2003). Updated versions of this table based on 2002–03 AR-DRG v 4.2 cost weights will be provided on the website when available.

(g) *Casemix-adjusted separations* is the product of *Total separations* and *Average cost weight*.

(h) Of the selected hospitals, all hospitals in the Northern Territory and 3 very small hospitals, 2 in South Australia and 1 in Victoria, have had their IFRAC estimated by the HASAC ratio.

(i) Eligible public patient days as a proportion of total patient days, excluding newborns with no qualified days. Public patients defined by patient election status equal to *public*.

(j) Relative stay index based on public hospitals using the indirect method. The indirectly standardised relative stay index is not technically comparable between cells but is a comparison of the hospital group with the national average of public hospitals based on the casemix of that group. See Appendix 3 for details on the methodology.

(k) Queensland pathology services are purchased from the statewide pathology service rather than being provided by each hospital's employees; resulting in higher medical supplies costs and lower diagnostic staff costs.

(l) Estimated private patient medical costs calculated as the sum of salary/sessional and VMO payments divided by the number of public patient days multiplied by the number of private patient days. This is a notional estimate of the medical costs for all non-public patients, including those self funded and those funded by private health insurance, compensation and the Department of Veterans' Affairs.

Table 4.2: Cost^(a) per casemix-adjusted separation^(b) and selected other statistics, by public hospital peer group, Australia^(c), 2002–03

	Number of hospitals	Separations		Average cost weight	Average length of stay (days)	Recurrent expenditure		Relative stay index ^(d)	Number of AR-DRGs		Cost per casemix-adjusted separation (\$)		
		Number of ('000)	Percent of total			Percent of total	Percent of total		Any acute separations	5 or more acute separations	Average	75th percentile	25th percentile
Principal referral	57	2,483.9	60.7	1.04	3.7	11,213.8	61.2	0.99	574.0	469.6	3,178	3,388	2,765
Specialist women's & children's	10	222.1	5.4	1.11	3.1	1,210.6	6.6	1.00	364.7	241.9	3,750	3,722	2,983
<i>Total Principal referral and women's & children's</i>	67	2,706.0	66.1	1.05	3.6	12,424.4	67.8	0.99	542.7	435.6	3,226	3,506	2,795
Large major cities	21	303.3	7.4	0.98	3.6	1,226.6	6.7	0.96	440.5	279.1	2,946	3,367	2,553
Large regional & remote	23	298.9	7.3	0.92	3.2	1,049.9	5.7	0.95	485.0	301.8	3,010	3,335	2,783
<i>Total Large hospitals</i>	44	602.2	14.7	0.95	3.4	2,276.5	12.4	0.96	463.8	291.0	2,978	3,351	2,598
Medium major cities & regional group 1	28	215.2	5.3	0.89	3.3	776.2	4.2	0.98	394.9	208.9	3,199	3,557	2,861
Medium major cities & regional group 2	69	237.6	5.8	0.79	3.3	739.7	4.0	1.00	308.1	137.1	3,073	3,345	2,559
<i>Total Medium hospitals</i>	97	452.8	11.1	0.84	3.3	1,515.9	8.3	0.99	333.2	157.8	3,140	3,491	2,625
Small regional acute	77	83.3	2.0	0.82	3.8	268.8	1.5	1.04	189.3	58.6	3,068	3,783	2,487
Remote acute	41	54.2	1.3	0.75	3.0	234.1	1.3	1.03	183.4	59.3	3,598	4,726	2,546
<i>Total Small acute hospitals</i>	118	137.6	3.4	0.79	3.5	502.9	2.7	1.04	187.2	58.8	3,271	4,146	2,487
<i>Total hospitals in cost per casemix-adjusted separation analysis (see Table 4.1)</i>	326	3,898.5	95.3	1.00	3.5	16,719.7	91.3	0.99	341.0	197.0	3,184	3,566	2,611
Small non-acute	117	80.4	2.0	0.86	9.5	402.5	2.2	1.15	142.7	34.6	..	..	..
Multi-purpose service	72	29.8	0.7	0.76	5.7	173.2	0.9	1.08	104.8	20.6	..	..	..
Hospice	4	2.8	0.1	2.04	18.4	45.6	0.2	1.18	1.3	0.0	..	..	..
Rehabilitation	6	3.7	0.1	1.93	30.0	102.8	0.6	4.13	0.5	0.0	..	..	..
Mothercraft	8	14.5	0.4	0.67	3.3	22.0	0.1	1.16	16.9	9.7	..	..	..
Other non-acute	22	27.3	0.7	0.64	11.8	212.8	1.2	1.54	35.4	7.9	..	..	..
<i>Total Non-acute</i>	229	158.5	3.9	0.79	9.3	958.9	5.2	1.16	110.3	25.4	..	..	..
Psychiatric ^(e)	18	16.4	0.4	2.12	54.3	433.7	2.4	1.40	14.9	8.7	..	..	..
Unpeered and other acute	109	12.4	0.3	0.68	12.7	208.7	1.1	1.29	43.2	3.0	..	..	..
Total peer-grouped hospitals	682	4,085.9	99.9	1.00	4.0	18,321.0	99.99	1.00	214.3	107.7	..	..	..
Teaching hospitals (excluding psychiatric)	60	2,378.7	58.1	1.06	3.7	11,318.0	61.77	1.00	508.5	406.5	3,287	3,575	2,908

(a) Expenditure data exclude depreciation.

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

(c) The data are based on hospital establishments for which expenditure data were provided, including networks of hospitals in some jurisdictions. Expenditure data for New South Wales are preliminary. An updated version of this table will be published on the AIHW website when finalised data become available. Some small hospitals with incomplete expenditure data were not included. See Appendix 3 for further information.

(d) Relative stay index based on public hospitals using the indirect method. The indirectly standardised relative stay index is not technically comparable between cells but is a comparison of the hospital group with the national average of public hospitals based on the casemix of that group. See Appendix 3 for details on the methodology.

(e) Psychiatric hospitals consist of a mix of short-term acute, long-term, psychogeriatric and forensic psychiatric hospitals.

Note: See Appendix 4 for the definitions of the public hospital peer groups.

.. Not applicable.

Table 4.3: Cost^(a) per casemix-adjusted separation^(b) and selected other statistics, by public hospital peer group^(c), states and territories, 2002–03

	NSW ^(d)	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Principal referral: major cities (>20,000 acute weighted separations) & regional (>16,000 acute weighted separations)									
Number of hospitals	19	15	12	3	4	2	1	1	57
Average beds per hospital	420	550	414	523	385	382	493	295	454
Separations per hospital	36,541	56,112	36,281	55,297	48,642	33,579	49,838	35,073	43,577
AR-DRGs (5+) per hospital ^(e)	471	478	431	517	485	492	545	457	470
Total expenditure (\$'000) ^(a)	3,574,073	3,668,437	1,736,561	n.p.	n.p.	285,209	n.p.	n.p.	11,213,798
Average cost weight ^(f)	1.09	1.00	1.04	1.08	1.09	1.08	0.94	0.83	1.04
Relative stay index ^(g)	1.08	0.93	0.96	n.p.	n.p.	0.95	n.p.	n.p.	0.99
Cost per separation	3,513	3,142	3,047	n.p.	n.p.	3,166	n.p.	n.p.	3,226
Cost per patient day	917	835	867	n.p.	n.p.	807	n.p.	n.p.	876
Cost per casemix-adjusted sep.	3,363	3,227	2,977	n.p.	n.p.	2,997	n.p.	n.p.	3,178
Specialist women's & children's (>10,000 acute weighted separations)									
Number of hospitals	3	1	4	1	1	0	0	0	10
Average beds per hospital	174	541	143	459	309	..	..	..	240
Separations per hospital	17,416	56,776	12,249	33,809	30,260	..	..	..	22,209
AR-DRGs (5+) per hospital ^(e)	229	421	157	360	322	..	..	..	242
Total expenditure (\$'000) ^(a)	307,176	n.p.	231,334	n.p.	n.p.	..	..	..	1,210,560
Average cost weight ^(f)	1.12	1.11	1.15	1.15	0.98	..	..	..	1.11
Relative stay index ^(g)	1.05	n.p.	0.93	n.p.	n.p.	..	..	..	1.00
Cost per separation	3,658	n.p.	3,683	n.p.	n.p.	..	..	..	4,005
Cost per patient day	1,200	n.p.	1,266	n.p.	n.p.	..	..	..	1,305
Cost per casemix-adjusted sep.	3,551	n.p.	3,253	n.p.	n.p.	..	..	..	3,750
Total Principal referral and specialist women's & children's hospitals									
Number of hospitals	22	16	16	4	5	2	1	1	67
Average beds per hospital	387	549	346	507	370	382	493	295	422
Separations per hospital	33,933	56,154	30,273	49,925	44,965	33,579	49,838	35,073	40,387
AR-DRGs (5+) per hospital ^(e)	438	474	363	478	452	492	545	457	436
Total expenditure (\$'000) ^(a)	3,881,249	3,981,884	1,967,895	1,023,401	889,179	285,209	n.p.	n.p.	12,424,358
Average cost weight ^(f)	1.09	1.00	1.05	1.09	1.08	1.08	0.94	0.83	1.05
Relative stay index ^(g)	1.07	0.93	0.95	1.02	0.95	0.95	n.p.	n.p.	0.99
Cost per separation	3,523	3,264	3,111	3,359	2,907	3,166	n.p.	n.p.	3,290
Cost per patient day	933	881	901	931	880	807	n.p.	n.p.	906
Cost per casemix-adjusted sep.	3,373	3,330	3,007	3,152	2,757	2,997	n.p.	n.p.	3,226
Large major cities (>10,000 acute weighted separations)									
Number of hospitals	13	2	2	1	2	0	1	0	21
Average beds per hospital	173	82	134	98	212	..	179	..	161
Separations per hospital	14,192	14,825	12,868	17,140	16,201	..	13,905	..	14,444
AR-DRGs (5+) per hospital ^(e)	300	118	258	258	324	..	300	..	279
Total expenditure (\$'000) ^(a)	738,421	145,157	84,713	n.p.	138,655	..	n.p.	..	1,226,613
Average cost weight ^(f)	0.99	0.88	1.05	0.60	1.14	..	1.01	..	0.98
Relative stay index ^(g)	0.99	0.81	0.86	n.p.	0.96	..	n.p.	..	0.96
Cost per separation	2,781	2,539	2,105	n.p.	3,248	..	n.p.	..	2,777
Cost per patient day	735	1,298	633	n.p.	683	..	n.p.	..	774
Cost per casemix-adjusted sep.	2,906	3,081	2,022	n.p.	2,972	..	n.p.	..	2,946
Large regional (>8,000 acute weighted separations) & remote (>5,000 acute weighted separations)									
Number of hospitals	8	6	6	1	0	1	0	1	23
Average beds per hospital	136	124	134	108	..	131	..	164	132
Separations per hospital	12,020	13,308	13,653	10,472	..	7,639	..	22,831	12,994
AR-DRGs (5+) per hospital ^(e)	317	301	289	285	..	263	..	325	302
Total expenditure (\$'000) ^(a)	381,920	270,234	243,872	n.p.	..	n.p.	..	n.p.	1,049,919
Average cost weight ^(f)	1.05	0.86	0.84	1.05	..	1.24	..	0.67	0.92
Relative stay index ^(g)	0.99	0.95	0.88	n.p.	..	n.p.	..	n.p.	0.95
Cost per separation	3,203	2,480	2,176	n.p.	..	n.p.	..	n.p.	2,694
Cost per patient day	889	802	776	n.p.	..	n.p.	..	n.p.	850
Cost per casemix-adjusted sep.	3,176	2,944	2,628	n.p.	..	n.p.	..	n.p.	3,010
Total Large hospitals									
Number of hospitals	21	8	8	2	2	1	1	1	44
Average beds per hospital	159	114	134	103	212	131	179	164	146
Separations per hospital	13,365	13,687	13,457	13,806	16,201	7,639	13,905	22,831	13,686
AR-DRGs (5+) per hospital ^(e)	307	255	281	272	324	263	300	325	291
Total expenditure (\$'000) ^(a)	1,120,341	415,391	328,585	88,130	138,655	n.p.	n.p.	n.p.	2,276,533
Average cost weight ^(f)	1.01	0.87	0.89	0.77	1.14	1.24	1.01	0.67	0.95
Relative stay index ^(g)	0.99	0.92	0.87	0.92	0.96	n.p.	n.p.	n.p.	0.96
Cost per separation	2,925	2,496	2,159	2,710	3,248	n.p.	n.p.	n.p.	2,736
Cost per patient day	786	897	737	1,030	683	n.p.	n.p.	n.p.	810
Cost per casemix-adjusted sep.	3,002	2,964	2,467	3,550	2,972	n.p.	n.p.	n.p.	2,978

(continued)

Table 4.3 (continued): Cost^(a) per casemix-adjusted separation^(b) and selected other statistics, by public hospital peer group^(c), states and territories, 2002-03

	NSW ^(d)	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Medium (major cities 5,000 to 10,000 and regional 5,000 to 8,000 acute weighted separations)									
Number of hospitals	12	4	1	7	4	0	0	0	28
Average beds per hospital	77	76	97	121	78	..	..	..	89
Separations per hospital	6,540	7,955	6,086	9,129	8,740	..	..	..	7,687
AR-DRGs (5+) per hospital ^(e)	194	231	217	212	225	..	..	..	209
Total expenditure (\$'000) ^(a)	330,069	106,797	n.p.	221,249	97,710	..	..	..	776,183
Average cost weight ^(f)	1.01	0.83	0.90	0.85	0.77	..	..	..	0.89
Relative stay index ^(g)	0.95	0.93	n.p.	1.03	0.98	..	..	..	0.98
Cost per separation	3,063	2,417	n.p.	2,904	2,227	..	..	..	2,765
Cost per patient day	903	850	n.p.	799	816	..	..	n.p.	844
Cost per casemix-adjusted sep.	3,179	3,003	n.p.	3,495	2,968	..	..	..	3,199
Medium (major cities and regional 2,000 acute or acute weighted to 5,000 acute weighted separations)									
Number of hospitals	24	17	15	4	9	0	0	0	69
Average beds per hospital	47	46	55	47	50	..	..	..	49
Separations per hospital	3,364	3,827	3,225	3,238	3,383	..	..	..	3,443
AR-DRGs (5+) per hospital ^(e)	141	134	131	125	146	..	..	..	137
Total expenditure (\$'000) ^(a)	298,588	191,509	132,880	41,209	75,556	..	..	..	739,742
Average cost weight ^(f)	0.81	0.75	0.77	0.83	0.86	..	..	..	0.79
Relative stay index ^(g)	1.04	1.01	0.95	1.03	0.94	..	..	..	1.00
Cost per separation	2,792	2,274	1,737	2,586	2,216	..	..	..	2,350
Cost per patient day	780	769	516	761	686	..	..	..	710
Cost per casemix-adjusted sep.	3,574	3,113	2,337	3,234	2,699	..	..	..	3,073
Total Medium hospitals									
Number of hospitals	36	21	16	11	13	0	0	0	97
Average beds per hospital	57	52	58	94	58	..	..	..	60
Separations per hospital	4,422	4,613	3,404	6,987	5,031	..	..	..	4,668
AR-DRGs (5+) per hospital ^(e)	159	152	137	180	171	..	..	..	158
Total expenditure (\$'000) ^(a)	628,658	298,306	153,238	262,457	173,266	..	..	..	1,515,925
Average cost weight ^(f)	0.91	0.77	0.79	0.84	0.81	..	..	..	0.84
Relative stay index ^(g)	1.00	0.98	0.96	1.03	0.96	..	..	..	0.99
Cost per separation	2,925	2,321	1,809	2,851	2,222	..	..	..	2,548
Cost per patient day	839	795	536	793	750	..	..	..	773
Cost per casemix-adjusted sep.	3,356	3,074	2,385	3,453	2,836	..	..	..	3,140
Small regional acute (<2,000 acute and acute weighted separations less than 40% not acute or outlier patient days)									
Number of hospitals	24	18	17	4	13	1	0	0	77
Average beds per hospital	26	22	18	24	25	16	..	..	23
Separations per hospital	1,349	1,085	807	683	1,090	789	..	..	1,082
AR-DRGs (5+) per hospital ^(e)	74	54	46	36	62	44	..	..	59
Total expenditure (\$'000) ^(a)	115,990	66,051	39,979	11,447	31,603	n.p.	..	..	268,835
Average cost weight ^(f)	0.83	0.80	0.79	0.79	0.84	0.75	..	..	0.82
Relative stay index ^(g)	1.04	1.08	0.99	1.26	0.98	n.p.	..	..	1.04
Cost per separation	2,545	2,638	1,933	3,205	2,054	n.p.	..	..	2,416
Cost per patient day	644	674	555	704	564	n.p.	..	..	630
Cost per casemix-adjusted sep.	3,180	3,391	2,531	4,138	2,583	n.p.	..	..	3,068
Remote acute (<5,000 acute weighted separations)									
Number of hospitals	2	0	17	13	4	2	0	3	41
Average beds per hospital	26	..	21	22	26	15	..	37	23
Separations per hospital	1,268	..	671	1,781	1,585	281	..	3,415	1,323
AR-DRGs (5+) per hospital ^(e)	63	..	37	77	74	19	..	114	59
Total expenditure (\$'000) ^(a)	9,359	..	57,743	107,469	15,642	5,640	..	38,230	234,083
Average cost weight ^(f)	0.7	..	0.7	0.8	0.8	0.8	..	0.7	0.7
Relative stay index ^(g)	1.2	..	1.1	1.0	0.9	1.2	..	1.2	1.0
Cost per separation	2,434	..	2,152	2,972	2,126	4,828	..	2,771	2,656
Cost per patient day	651	..	685	1,042	737	1,297	..	928	887
Cost per casemix-adjusted sep.	3,559	..	2,974	3,893	2,646	6,383	..	4,161	3,598
Total Small acute hospitals									
Number of hospitals	26	18	34	17	17	3	0	3	118
Average beds per hospital	26	22	20	23	25	15	..	37	23
Separations per hospital	1,342	1,085	739	1,523	1,206	450	..	3,415	1,166
AR-DRGs (5+) per hospital ^(e)	73	54	41	68	65	27	..	114	59
Total expenditure (\$'000) ^(a)	125,349	66,051	97,722	118,916	47,245	9,406	..	38,230	502,918
Average cost weight ^(f)	0.82	0.80	0.76	0.77	0.84	0.75	..	0.67	0.79
Relative stay index ^(g)	1.05	1.08	1.04	0.99	0.96	1.19	..	1.18	1.04
Cost per separation	2,537	2,638	2,032	2,996	2,076	4,210	..	2,771	2,511
Cost per patient day	645	674	611	988	610	1,047	..	928	717
Cost per casemix-adjusted sep.	3,204	3,391	2,723	3,926	2,605	5,617	..	4,161	3,271

(continued)

Table 4.3 (continued): Cost^(a) per casemix-adjusted separation^(b) and selected other statistics, by public hospital peer group^(c), states and territories, 2002–03

	NSW ^(d)	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Total hospitals in cost per casemix-adjusted separation analysis (Table 4.1)									
Number of hospitals	105	63	74	34	37	6	2	5	326
Average beds per hospital	139	177	111	108	94	157	336	114	133
Separations per hospital	11,631	17,847	9,076	9,707	9,274	12,691	31,872	13,630	11,959
AR-DRGs (5+) per hospital ^(e)	226	219	157	164	168	221	423	225	197
Total expenditure (\$'000) ^(a)	5,755,596	4,761,632	2,547,440	1,492,905	1,248,344	341,864	333,122	238,831	16,719,734
Average cost weight ^(f)	1.04	0.97	0.99	0.98	1.02	1.09	0.96	0.75	1.00
Relative stay index ^(g)	1.04	0.94	0.94	1.02	0.95	0.96	1.07	1.17	0.99
Cost per separation	3,280	3,097	2,813	3,158	2,759	3,351	3,852	2,689	3,091
Cost per patient day	879	872	838	908	816	842	1,119	891	871
Cost per casemix-adjusted sep.	3,283	3,285	2,885	3,284	2,796	3,136	4,128	3,603	3,184
Small non-acute (<2,000 acute and acute weighted separations more than 40% not acute or outlier patient days)									
Number of hospitals	43	11	31	8	20	4	0	0	117
Average beds per hospital	25	28	24	29	31	17	..	..	26
Separations per hospital	697	755	636	1,078	601	443	..	..	687
Total expenditure (\$'000)	170,260	63,889	72,184	40,836	46,840	8,477	..	..	402,487
Average length of stay	10.7	11.8	6.3	7.6	12.0	9.0	..	..	9.5
Multi-purpose service									
Number of hospitals	14	7	9	36	4	2	0	0	72
Average beds per hospital	6	14	20	14	42	5	..	..	14
Separations per hospital	319	847	611	285	853	88	..	..	413
Total expenditure (\$'000)	36,026	29,970	21,128	66,057	15,465	4,539	..	..	173,186
Average length of stay	5.0	3.7	6.1	5.7	9.2	13.6	..	..	5.7
Hospice									
Number of hospitals	3	0	0	0	0	1	0	0	4
Average beds per hospital	64	..	..	..	..	n.a.	..	..	48
Separations per hospital	839	..	..	..	..	246	..	..	691
Total expenditure (\$'000)	41,904	..	..	..	..	n.p.	..	..	45,609
Average length of stay	19.0	..	..	..	..	n.p.	..	..	18.4
Rehabilitation									
Number of hospitals	5	0	0	0	1	0	0	0	6
Average beds per hospital	40	..	..	..	150	..	..	..	58
Separations per hospital	493	..	..	..	1,238	..	..	..	617
Total expenditure (\$'000)	78,719	..	..	..	n.p.	..	..	..	102,766
Average length of stay	25.9	..	..	..	n.p.	..	..	..	30.0
Mothercraft									
Number of hospitals	2	3	1	0	1	0	1	0	8
Average beds per hospital	30	26	32	..	12	..	10	..	24
Separations per hospital	1,816	2,732	1,789	..	923	..	n.a.	..	1,818
Total expenditure (\$'000)	7,234	9,316	n.p.	..	n.p.	..	n.p.	..	22,044
Average length of stay	4.7	2.6	n.p.	..	n.p.	..	n.p.	..	3.3
Other non-acute									
Number of hospitals	13	2	0	7	0	0	0	0	22
Average beds per hospital	37	70	..	48	..	..	..	..	44
Separations per hospital	730	1,089	..	2,236	..	..	..	..	1,242
Total expenditure (\$'000)	102,856	28,378	..	81,540	..	..	..	..	212,774
Average length of stay	17.1	22.0	..	7.2	..	..	..	..	11.8
Total Non-acute									
Number of hospitals	80	23	41	51	26	7	1	0	229
Average beds per hospital	26	27	23	21	37	11	10	..	25
Separations per hospital	657	1,070	659	677	677	313	n.a.	..	692
Total expenditure (\$'000)	436,999	131,553	96,376	188,434	86,972	16,721	n.p.	..	958,865
Average length of stay	12.1	7.7	6.1	6.8	12.8	9.7	n.p.	..	9.3

(continued)

Table 4.3 (continued): Cost^(a) per casemix-adjusted separation^(b) and selected other statistics, by public hospital peer group^(c), states and territories, 2002–03

	NSW ^(d)	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Psychiatric^(h)									
Number of hospitals	9	1	4	1	1	2	0	0	18
Average beds per hospital	130	95	126	201	313	20	..	..	129
Separations per hospital	1,201	436	116	1,802	2,742	61	..	..	910
Total expenditure (\$'000)	200,622	n.p.	77,918	n.p.	n.p.	3,581	..	..	433,739
Average length of stay	33.6	n.p.	722.1	n.p.	n.p.	58.7	..	..	54.3
Unpeered and other acute (includes hospitals with fewer than 200 separations)									
Number of hospitals	22	6	60	7	10	4	0	0	109
Average beds per hospital	10	9	4	12	13	4	..	..	7
Separations per hospital	128	n.a.	51	205	434	92	..	..	114
Total expenditure (\$'000)	42,792	81,543	43,867	20,914	13,432	6,158	..	..	208,707
Cost per separation	12,285	n.a.	2,860	8,438	2,315	10,681	..	..	6,223
Cost per patient day	374	n.a.	484	942	497	901	..	..	489
Total									
Number of hospitals	216	93	179	93	74	19	3	5	682
Average beds per hospital	84	128	55	54	66	57	227	114	76
Hospital numbers reported in Table 2.2									
Separations per hospital	5,961	12,364	3,923	3,955	4,971	4,149	21,248	13,630	5,991
Total expenditure (\$'000)	6,436,010	5,004,320	2,765,601	1,747,529	1,425,498	368,324	334,932	238,831	18,321,045
Cost per separation	3,506	3,147	2,901	3,376	3,028	3,493	3,852	2,689	3,238
Cost per patient day	800	857	735	856	743	820	1119	891	809
Teaching hospitals (excluding psychiatric)									
Number of hospitals	17	14	10	6	6	3	2	2	60
Average beds per hospital	412	552	348	404	349	298	336	230	412
Separations per hospital	36,976	57,514	29,203	36,056	40,018	24,932	31,872	28,952	39,645
AR-DRGs (5+) per hospital ^(e)	444	438	330	331	426	415	423	391	406
Total expenditure (\$'000) ^(a)	3,393,298	3,601,125	1,370,904	1,117,242	969,280	332,458	333,122	200,600	11,318,029
Average cost weight ^(f)	1.11	1.01	1.14	1.07	1.09	1.10	0.96	0.77	1.06
Relative stay index ^(g)	1.09	0.93	0.97	1.06	0.96	0.95	1.07	1.16	1.00
Cost per separation	3,607	3,225	3,659	3,456	3,001	3,335	3,852	2,674	3,385
Cost per patient day	962	888	1,008	892	864	838	1,119	884	925
Cost per casemix-adjusted sep.	3,417	3,272	3,261	3,312	2,851	3,106	4,128	3,517	3,287

(a) Expenditure data exclude depreciation.

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

(c) The data are based on hospital establishments for which expenditure data were provided, including networks of hospitals in some jurisdictions. Some small hospitals with incomplete expenditure data were not included. See Appendix 3 for further information.

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

(e) The number of different AR-DRGs provided by a hospital for which there were at least 5 acute separations.

(f) Average cost weight from the National Hospital Morbidity Database, based on acute and unspecified separations and newborn episodes of care with qualified days, using the 2001–02 AR-DRG v 4.2 cost weights (DoHA 2003). Updated versions of this table based on 2002–03 AR-DRG v 4.2 cost weights will be provided on the website when

(g) Relative stay index based on public hospitals using the indirect method. The indirectly standardised relative stay index is not technically comparable between cells but is a comparison of the hospital group with the national average of public hospitals based on the casemix of that group. See Appendix 3 for details on the methodology.

(h) Psychiatric hospitals consist of a mix of short-term acute, long-term, psychogeriatric and forensic psychiatric hospitals.

n.p. Not published.

n.a. Not available.

.. Not applicable.

Table 4.4: Average salary (\$) of full-time equivalent staff ^(a), public acute and psychiatric hospitals, states and territories, 2002-03

Staffing category	NSW ^(b)	Vic ^(c)	Qld	WA	SA ^(b)	Tas ^(d)	ACT	NT	Total ^(e)
Salaried medical officers	n.a.	138,260	101,384	129,694	87,918	94,093	131,957	140,025	n.a.
Nurses	n.a.	64,008	53,461	60,249	53,098	54,285	58,551	70,240	n.a.
Other personal care staff	n.a.	n.a.	38,423	29,684	n.a.	n.a.	42,270	58,005	n.a.
Diagnostic & allied health professionals	n.a.	45,997	55,488	54,156	49,581	58,375	52,639	69,429	n.a.
Administrative & clerical staff	n.a.	44,336	40,824	43,711	38,957	39,772	45,701	61,967	n.a.
Domestic & other staff	n.a.	42,155	37,893	38,894	32,202	45,634	41,313	44,328	n.a.
Total staff	n.a.	62,255	53,553	59,334	51,149	54,240	61,111	70,891	n.a.

(a) Where average full-time equivalent (FTE) staff numbers were not available, staff numbers at 30 June 2003 were used

(b) Data for New South Wales are not available. An updated version of this table will be published on the AIHW website when New South Wales data become available.

(c) FTEs may be slightly under-enumerated with a corresponding overstatement of average salaries.

(d) Data for 2 small hospitals not included. *Other personal care staff* are included in *Domestic & other staff*.

(e) The totals for *Other personal care staff*, *Diagnostic & allied health professionals* and *Domestic & other staff* are affected by reporting arrangements noted above.

n.a. Not available.

Table 4.5: Selected statistics ^{(a)(b)} by accreditation status, states and territories, public hospitals 2002-03, private hospitals 2001-02

	NSW ^(c)	Vic ^(d)	Qld ^(e)	WA ^(f)	SA ^(g)	Tas ^(h)	ACT ⁽ⁱ⁾	NT	Total
Public hospitals									
ACHS-accredited hospitals	151	109	91	59	55	0	2	4	471
Other accredited hospitals	31	7	44	7	16	3	1	0	109
<i>Total accredited hospitals</i>	<i>182</i>	<i>116</i>	<i>135</i>	<i>66</i>	<i>71</i>	<i>3</i>	<i>3</i>	<i>4</i>	<i>580</i>
Non-accredited hospitals	36	28	44	28	9	22	0	1	168
Hospitals accredited (%)	83	81	75	70	89	12	100	80	78
<i>Total public hospitals</i>	<i>218</i>	<i>144</i>	<i>179</i>	<i>94</i>	<i>80</i>	<i>25</i>	<i>3</i>	<i>5</i>	<i>748</i>
ACHS-accredited hospitals	15,730	11,508	8,358	3,060	3,832	0	672	549	43,709
Other accredited beds	1,024	143	871	1,526	841	895	10	0	5,310
<i>Total accredited beds</i>	<i>16,754</i>	<i>11,651</i>	<i>9,229</i>	<i>4,586</i>	<i>4,673</i>	<i>895</i>	<i>682</i>	<i>549</i>	<i>49,019</i>
Non-accredited beds	1,331	287	678	432	193	241	0	20	3,182
Beds accredited (%)	93	98	93	91	96	79	100	96	94
<i>Total available beds for admitted patients</i>	<i>18,016</i>	<i>11,938</i>	<i>9,907</i>	<i>5,018</i>	<i>4,864</i>	<i>1,136</i>	<i>682</i>	<i>569</i>	<i>52,130</i>
Separations from ACHS-accredited hospitals	1,161,240	1,122,407	648,105	235,351	297,397	0	63,743	66,272	3,594,515
Separations from other accredited hospitals	54,017	10,895	28,359	115,612	63,647	74,796	0	0	347,326
<i>Total separations from accredited hospitals</i>	<i>1,215,257</i>	<i>1,133,302</i>	<i>676,464</i>	<i>350,963</i>	<i>361,044</i>	<i>74,796</i>	<i>63,743</i>	<i>66,272</i>	<i>3,941,841</i>
Separations from non-accredited hospitals	74,678	16,538	25,702	16,862	6,783	4,906	0	1,877	147,346
Proportion of separations in accredited hospitals	94	99	96	95	98	94	100	97	96
<i>Total separations</i>	<i>1,289,935</i>	<i>1,149,840</i>	<i>702,166</i>	<i>367,825</i>	<i>367,827</i>	<i>79,702</i>	<i>63,743</i>	<i>68,149</i>	<i>4,089,187</i>
Patient days from ACHS-accredited hospitals	5,003,273	4,125,460	2,523,674	903,460	1,217,708	0	219,493	200,888	14,193,956
Patient days from other accredited hospitals	271,253	30,415	129,901	488,915	241,762	297,550	0	0	1,459,796
<i>Total patient days from accredited hospitals</i>	<i>5,274,526</i>	<i>4,155,875</i>	<i>2,653,575</i>	<i>1,392,375</i>	<i>1,459,470</i>	<i>297,550</i>	<i>219,493</i>	<i>200,888</i>	<i>15,653,752</i>
Patient days from non-accredited hospitals	382,034	68,422	118,430	58,539	40,301	53,111	0	4,857	725,694
Proportion of patient days in accredited hospitals	93	98	96	96	97	85	100	98	96
<i>Total Patient days</i>	<i>5,656,560</i>	<i>4,224,297</i>	<i>2,772,005</i>	<i>1,450,914</i>	<i>1,499,771</i>	<i>350,661</i>	<i>219,493</i>	<i>205,745</i>	<i>16,379,446</i>

(continued)

Table 4.5 (continued): Selected statistics^{(a)(b)} by accreditation status, states and territories, public hospitals 2002-03, private hospitals 2001-02

	NSW ^(c)	Vic ^(d)	Qld ^(e)	WA ^(f)	SA ^(g)	Tas	ACT ^(h)	NT ⁽ⁱ⁾	Total
Private hospitals^(g,h)									
Accredited hospitals	141	91	75	n.a.	39	n.a.	n.a.	n.a.	381
Non-accredited hospitals	43	45	15	n.a.	14	n.a.	n.a.	n.a.	135
<i>Total private hospitals</i>	<i>184</i>	<i>136</i>	<i>90</i>	<i>41</i>	<i>53</i>	<i>12</i>	<i>n.a.</i>	<i>n.a.</i>	<i>516</i>
Accredited beds	7,093	6,126	5,707	n.a.	2,087	n.a.	n.a.	n.a.	24,486
Non-accredited beds	503	457	250	n.a.	157	n.a.	n.a.	n.a.	1,667
<i>Total available beds for admitted patients</i>	<i>7,596</i>	<i>6,583</i>	<i>5,957</i>	<i>2,926</i>	<i>2,244</i>	<i>847</i>	<i>n.a.</i>	<i>n.a.</i>	<i>26,153</i>
Total									
Accredited hospitals	323	207	210	n.a.	110	n.a.	n.a.	n.a.	961
Non-accredited hospitals	79	73	59	n.a.	23	n.a.	n.a.	n.a.	303
<i>Total hospitals</i>	<i>402</i>	<i>280</i>	<i>269</i>	<i>135</i>	<i>133</i>	<i>37</i>	<i>n.a.</i>	<i>n.a.</i>	<i>1,264</i>
Accredited beds	23,847	17,777	14,936	n.a.	6,760	n.a.	n.a.	n.a.	73,505
Non-accredited beds	1,834	744	928	n.a.	350	n.a.	n.a.	n.a.	4,849
<i>Total available beds for admitted patients</i>	<i>25,681</i>	<i>18,521</i>	<i>15,864</i>	<i>7,944</i>	<i>7,110</i>	<i>1,983</i>	<i>n.a.</i>	<i>n.a.</i>	<i>78,354</i>

(a) Where average available beds for the year were not available, bed numbers at 30 June 2003 were used.

(b) Separations for which establishment level data were not reported separately or the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(c) All 29 of the *Other accredited hospitals* were accredited by the Australian Quality Council (now known as Business Excellence Australia).

(d) Of the *Other accredited hospitals*, 2 were accredited using Quality Improvement Council and 5 were certified ISO9000 family compliant.

(e) All of the 44 *Other accredited hospitals* were accredited using Quality Improvement Council.

(f) Of the *Other accredited hospitals*, 2 were certified ISO9000 family compliant and 5 had multiple or split accreditation coverage.

(g) Of the *Other accredited hospitals*, 1 was accredited using Quality Improvement Council and 14 were certified ISO9000 family compliant. 1 hospital had multiple accreditation coverage.

(h) Of the *Other accredited hospitals*, all were dual certified ISO9000 family compliant and ACHS accredited.

(i) One establishment was accredited by the Australian Quality Council (now known as Business Excellence Australia).

n.a. Not available.

Note: Private hospital data are provided from the Australian Bureau of Statistics' Private Health Establishments Collection.

Table 4.6: Separation statistics^(a) for selected procedures^(b), by state or territory of usual residence, all hospitals^(c), 2002–03

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(d)
Appendectomy									
Separations ^(e)	8,097	6,548	5,558	3,156	1,926	644	414	325	26,670
Separations not within state of residence (%)	3	2	2	1	1	2	6	4	
Proportion of public patients (%)	67	68	57	66	61	60	74	76	65
Separation rate ^(f)	1.23	1.35	1.47	1.61	1.29	1.38	1.22	1.53	1.35
Standardised separation rate ratio (SRR)	0.91	1.00	1.09	1.19	0.96	1.02	0.90	1.13	
95% confidence interval of SRR	0.89–0.93	0.98–1.02	1.06–1.12	1.15–1.23	0.92–1.00	0.94–1.10	0.81–0.99	1.01–1.25	
Coronary artery bypass graft									
Separations ^(e)	5,848	4,079	3,011	982	1,281	371	135	82	15,791
Separations not within state of residence (%)	8	1	0	1	0	3	11	100	
Proportion of public patients (%)	51	53	43	48	49	53	51	78	50
Separation rate ^(f)	0.84	0.81	0.82	0.54	0.75	0.71	0.53	0.69	0.79
Standardised separation rate ratio (SRR)	1.07	1.03	1.05	0.68	0.95	0.90	0.67	0.88	
95% confidence interval of SRR	1.04–1.10	1.00–1.06	1.01–1.09	0.64–0.72	0.90–1.00	0.81–0.99	0.56–0.78	0.69–1.07	
Coronary angioplasty									
Separations ^(e)	9,359	8,057	4,076	2,385	2,077	632	253	150	26,994
Separations not within state of residence (%)	10	1	1	1	1	3	9	100	
Proportion of public patients (%)	39	44	32	45	48	57	84	70	42
Separation rate ^(f)	1.35	1.60	1.10	1.28	1.22	1.21	0.93	1.14	1.34
Standardised separation rate ratio (SRR)	1.01	1.19	0.82	0.96	0.91	0.90	0.70	0.85	
95% confidence interval of SRR	0.99–1.03	1.16–1.22	0.79–0.85	0.92–1.00	0.87–0.95	0.83–0.97	0.61–0.79	0.71–0.99	
Caesarean section									
Separations ^(e)	22,266	16,857	14,597	7,191	5,034	1,254	985	966	69,170
Separations not within state of residence (%)	3	0	1	0	0	0	1	4	
Proportion of public patients (%)	56	56	53	52	56	51	49	68	55
Separation rate ^(f)	3.38	3.42	3.96	3.73	3.56	3.03	2.87	4.14	3.54
Standardised separation rate ratio (SRR)	0.96	0.97	1.12	1.05	1.00	0.85	0.81	1.17	
95% confidence interval of SRR	0.95–0.97	0.96–0.98	1.10–1.14	1.03–1.07	0.97–1.03	0.80–0.90	0.76–0.86	1.10–1.24	
In-hospital birth separations	73,780	60,040	48,184	23,852	17,042	5,475	3,964	3,550	235,986
Proportion of births to public patients (%)	63	63	66	64	67	58	62	76	64
In-hospital birth separation rate ^(f)	11.2	12.2	13.0	12.4	12.1	13.2	11.4	15.2	12.1
Separations per 100 in-hospital birth separations ^(g)	30.2	28.1	30.3	30.1	29.5	22.9	24.8	27.2	29.3
Public hospitals	28.3	25.5	24.8	24.4	26.0	20.6	20.4	24.6	26.0
Public patients	26.9	24.7	24.2	24.0	24.9	19.1	19.8	24.5	25.0
Private patients	39.5	35.7	38.1	32.1	40.5	30.2	32.2	26.6	37.5
Private hospitals	34.4	33.7	42.4	38.9	38.4	26.3	33.0	37.6	36.4

(continued)

Table 4.6 (continued): Separation statistics^(a) for selected procedures^(b), by state or territory of usual residence, all hospitals^(c), 2002–03

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(d)
Cholecystectomy									
Separations ^(e)	15,263	11,599	8,775	4,298	3,878	1,085	538	306	45,749
Separations not within state of residence (%)	3	1	1	0	1	1	7	10	
Proportion of public patients (%)	51	54	44	51	50	60	46	62	51
Separation rate ^(f)	2.25	2.33	2.36	2.25	2.43	2.24	1.75	2.03	2.29
Standardised separation rate ratio (SRR)	0.98	1.02	1.03	0.98	1.06	0.98	0.76	0.88	
95% confidence interval of SRR	0.96–1.00	1.00–1.04	1.01–1.05	0.95–1.01	1.03–1.09	0.92–1.04	0.70–0.82	0.78–0.98	
Diagnostic gastrointestinal endoscopy									
Separations ^(e)	177,295	160,380	118,734	51,748	41,197	9,995	3,958	3,148	566,493
Separations not within state of residence (%)	3	1	1	0	0	1	5	6	
Proportion of public patients (%)	32	29	23	43	39	31	70	50	31
Separation rate ^(f)	25.97	32.14	31.93	27.26	25.08	19.81	13.57	20.96	28.29
Standardised separation rate ratio (SRR)	0.92	1.14	1.13	0.96	0.89	0.70	0.48	0.74	
95% confidence interval of SRR	0.92–0.92	1.13–1.15	1.12–1.14	0.95–0.97	0.88–0.90	0.69–0.71	0.47–0.49	0.71–0.77	
Hip replacement									
Separations ^(e)	9,118	7,564	4,066	2,678	2,410	960	360	71	27,229
Separations not within state of residence (%)	5	2	3	0	0	4	8	44	
Proportion of public patients (%)	40	38	38	42	39	42	38	46	39
Separation rate ^(f)	1.30	1.48	1.12	1.48	1.36	1.82	1.44	0.73	1.35
Standardised separation rate ratio (SRR)	0.97	1.10	0.83	1.10	1.01	1.35	1.07	0.54	
95% confidence interval of SRR	0.95–0.99	1.08–1.12	0.80–0.86	1.06–1.14	0.97–1.05	1.26–1.44	0.96–1.18	0.41–0.67	
Revision of hip replacement									
Separations ^(e)	1,118	919	502	296	254	111	59	8	3,267
Separations not within state of residence (%)	7	4	2	0	0	1	3	88	
Proportion of public patients (%)	33	30	36	40	32	46	36	25	34
Separation rate ^(f)	0.16	0.18	0.14	0.16	0.14	0.21	0.24	0.07	0.16
Proportion of hip replacements	0.12	0.12	0.12	0.11	0.11	0.12	0.16	0.11	0.12
Standardised separation rate ratio (SRR)	0.99	1.11	0.86	1.01	0.88	1.31	1.47	0.44	
95% confidence interval of SRR	0.93–1.05	1.04–1.18	0.78–0.94	0.89–1.13	0.77–0.99	1.07–1.55	1.09–1.85	0.14–0.74	

(continued)

Table 4.6 (continued): Separation statistics^(a) for selected procedures^(b), by state or territory of usual residence, all hospitals^(c), 2002–03

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(d)
Hysterectomy, females aged 15–69									
Separations ^(e)	9,355	6,779	5,607	3,705	2,695	847	457	242	29,697
Separations not within state of residence (%)	4	1	1	0	0	0	8	8	
Proportion of public patients (%)	40	46	35	43	39	57	35	41	41
Separation rate ^(f)	1.40	1.38	1.49	1.88	1.73	1.78	1.40	1.26	1.49
Standardised separation rate ratio (SRR)	0.94	0.92	1.00	1.26	1.16	1.19	0.94	0.85	
95% confidence interval of SRR	0.92–0.96	0.90–0.94	0.97–1.03	1.22–1.30	1.12–1.20	1.11–1.27	0.85–1.03	0.74–0.96	
Age and sex restricted adjusted separation rate ^(g)	4.0	3.9	4.2	5.3	4.9	5.1	4.0	3.6	4.2
Lens insertion									
Separations ^(e)	54,444	35,303	28,556	14,537	12,605	2,996	1,584	622	150,654
Separations not within state of residence (%)	3	1	3	0	0	1	4	11	
Proportion of public patients (%)	29	28	10	43	30	11	32	60	26
Separation rate ^(f)	7.74	6.87	7.98	8.27	6.96	5.62	6.71	7.67	7.47
Standardised separation rate ratio (SRR)	1.04	0.92	1.07	1.11	0.93	0.75	0.90	1.03	
95% confidence interval of SRR	1.03–1.05	0.91–0.93	1.06–1.08	1.09–1.13	0.91–0.95	0.72–0.78	0.86–0.94	0.95–1.11	
Myringotomy									
Separations ^(e)	8,402	9,284	5,328	4,305	4,089	525	409	168	32,515
Separations not within state of residence (%)	5	1	1	0	0	1	7	7	
Proportion of public patients (%)	35	44	29	46	33	52	45	66	38
Separation rate ^(f)	1.28	1.98	1.41	2.26	2.91	1.11	1.32	0.69	1.68
Standardised separation rate ratio (SRR)	0.76	1.18	0.84	1.35	1.73	0.66	0.78	0.41	
95% confidence interval of SRR	0.74–0.78	1.16–1.20	0.82–0.86	1.31–1.39	1.68–1.78	0.60–0.72	0.70–0.86	0.35–0.47	
Knee replacement									
Separations ^(e)	10,264	5,665	4,379	2,614	2,348	623	381	92	26,368
Separations not within state of residence (%)	5	2	2	0	0	2	6	63	
Proportion of public patients (%)	34	34	29	33	30	35	28	30	32
Separation rate ^(f)	1.47	1.12	1.21	1.44	1.36	1.18	1.47	0.83	1.31
Standardised separation rate ratio (SRR)	1.12	0.85	0.92	1.10	1.03	0.90	1.12	0.63	
95% confidence interval of SRR	1.10–1.14	0.83–0.87	0.89–0.95	1.06–1.14	0.99–1.07	0.83–0.97	1.01–1.23	0.50–0.76	

(continued)

Table 4.6 (continued): Separation statistics^(a) for selected procedures^(b), by state or territory of usual residence, all hospitals^(c), 2002–03

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(d)
Prostatectomy									
Separations ^(e)	8,056	7,205	3,769	2,129	1,993	669	225	97	24,145
Separations not within state of residence (%)	5	1	1	0	1	1	8	12	
Proportion of public patients (%)	35	37	23	39	38	52	32	46	35
Separation rate ^(f)	1.15	1.41	1.04	1.18	1.13	1.26	0.88	1.19	1.20
Standardised separation rate ratio (SRR)	0.96	1.18	0.87	0.98	0.95	1.05	0.74	0.99	
95% confidence interval of SRR	0.94–0.98	1.15–1.21	0.84–0.90	0.94–1.02	0.91–0.99	0.97–1.13	0.64–0.84	0.79–1.19	
Arthroscopic procedures (includes arthroscopies)									
Separations ^(e)	32,723	29,272	16,548	13,719	13,030	2,426	1,390	1,314	110,434
Separations not within state of residence (%)	4	2	1	0	0	3	11	28	
Proportion of public patients (%)	20	21	18	20	19	30	26	21	20
Separation rate ^(f)	4.87	5.93	4.40	7.08	8.34	5.09	4.32	6.95	5.55
Standardised separation rate ratio (SRR)	0.88	1.07	0.79	1.28	1.50	0.92	0.78	1.25	
95% confidence interval of SRR	0.87–0.89	1.06–1.08	0.78–0.80	1.26–1.30	1.47–1.53	0.88–0.96	0.74–0.82	1.18–1.32	
Tonsillectomy									
Separations ^(e)	10,409	8,658	6,185	3,669	3,146	424	389	166	33,049
Separations not within state of residence (%)	4	1	1	0	0	1	6	10	
Proportion of public patients (%)	36	52	28	49	37	56	37	46	41
Separation rate ^(f)	1.60	1.83	1.63	1.89	2.21	0.91	1.17	0.71	1.70
Standardised separation rate ratio (SRR)	0.94	1.07	0.96	1.11	1.30	0.54	0.69	0.42	
95% confidence interval of SRR	0.92–0.96	1.05–1.09	0.94–0.98	1.07–1.15	1.25–1.35	0.49–0.59	0.62–0.76	0.36–0.48	

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

(b) The procedures and diagnoses are defined using ICD-10-AM codes. See Appendix 3.

(c) Some hospitals are not included. See Appendix 4 for details.

(d) Includes Other territories and excludes non-Australian residents and Unknown state of residence.

(e) Excludes multiple procedures/diagnosis for the same separation within the same group.

(f) Rate per 1,000 population was directly age-standardised to the Australian population at 30 June 2001.

(g) Caesarean sections divided by separations for which in-hospital birth was reported. This is an approximate measure of the proportion of all births that are by Caesarean section, as births out of hospital are not included.

(h) Females aged 15–69 years only.

Table 4.7: Separation statistics^(a) for selected procedures^(b), by Remoteness Area of usual residence, all hospitals^(c), Australia, 2002–03

	Major cities	Inner regional	Outer regional	Remote	Very remote	Australia ^(d)
Appendectomy						
Separations ^(e)	16,678	6,062	3,110	515	267	26,670
Proportion of separations public patients (%)	61	70	72	77	88	65
Separation rate ^(f)	1.27	1.52	1.57	1.58	1.39	1.36
Standardised separation rate ratio (SRR)	0.94	1.11	1.15	1.16	1.02	
95% confidence interval of SRR	0.93–0.95	1.08–1.14	1.11–1.19	1.06–1.26	0.90–1.14	
Coronary artery bypass graft						
Separations ^(e)	10,126	3,730	1,652	187	72	15,791
Proportion of separations public patients (%)	48	52	56	61	68	50
Separation rate ^(f)	0.79	0.82	0.77	0.67	0.60	0.79
Standardised separation rate ratio (SRR)	0.99	1.03	0.97	0.85	0.75	
95% confidence interval of SRR	0.97–1.01	1.00–1.06	0.92–1.02	0.73–0.97	0.58–0.92	
Coronary angioplasty						
Separations ^(e)	18,587	5,474	2,467	296	125	26,994
Proportion of separations public patients (%)	40	43	51	58	67	42
Separation rate ^(f)	1.44	1.22	1.16	1.06	0.94	1.36
Standardised separation rate ratio (SRR)	1.06	0.90	0.85	0.79	0.70	
95% confidence interval of SRR	1.04–1.08	0.88–0.92	0.82–0.88	0.70–0.88	0.58–0.82	
Caesarean section						
Separations ^(e)	47,315	12,807	6,883	1,270	823	69,170
Proportion of separations public patients (%)	49	67	67	68	82	55
Separation rate ^(f)	3.48	3.70	3.83	3.86	4.06	3.55
Standardised separation rate ratio (SRR)	0.98	1.04	1.08	1.09	1.14	
95% confidence interval of SRR	0.97–0.99	1.02–1.06	1.05–1.11	1.03–1.15	1.06–1.22	
In-hospital birth separations	155,205	46,785	25,774	4,783	3,204	235,986
Proportion of separations public patients (%)	58.4	75.0	74.4	74.8	87.4	64.2
Separation rate ^(f)	11.38	13.59	14.46	14.76	15.81	12.11
Separations per 100 in-hospital birth separations ^(g)	30.49	27.37	26.71	26.55	25.69	29.31
Public hospitals	26.72	25.24	24.53	24.29	24.28	26.00
Public patients	25.48	24.45	23.98	23.95	24.12	24.99
Private patients	41.01	34.46	31.23	26.35	28.00	37.54
Private hospitals	36.72	34.95	35.09	40.99	40.36	36.42

(continued)

Table 4.7 (continued): Separation statistics^(a) for selected procedures^(b), by Remoteness Area of usual residence, all hospitals^(c), Australia, 2002–03

	Major cities	Inner regional	Outer regional	Remote	Very remote	Australia ^(d)
Cholecystectomy						
Separations ^(e)	29,597	10,285	4,846	653	308	45,749
Proportion of separations public patients (%)	47	56	59	61	76	51
Separation rate ^(f)	2.26	2.48	2.38	2.17	1.97	2.31
Standardised separation rate ratio (SRR)	0.98	1.07	1.03	0.94	0.85	
95% confidence interval of SRR	0.97–0.99	1.05–1.09	1.00–1.06	0.87–1.01	0.76–0.94	
Diagnostic gastrointestinal endoscopy						
Separations ^(e)	390,035	116,566	50,832	5,922	2,345	566,493
Proportion of separations public patients (%)	27	38	46	49	63	31
Separation rate ^(f)	29.94	27.01	24.43	20.30	17.20	28.55
Standardised separation rate ratio (SRR)	1.05	0.95	0.86	0.71	0.60	
95% confidence interval of SRR	1.05–1.05	0.94–0.96	0.85–0.87	0.69–0.73	0.58–0.62	
Hip replacement						
Separations ^(e)	16,965	6,754	3,052	315	75	27,229
Proportion of separations public patients (%)	37	41	46	40	59	39
Separation rate ^(f)	1.30	1.49	1.46	1.25	0.77	1.36
Standardised separation rate ratio (SRR)	0.96	1.09	1.07	0.92	0.56	
95% confidence interval of SRR	0.95–0.97	1.06–1.12	1.03–1.11	0.82–1.02	0.43–0.69	
Revision of hip replacement						
Separations ^(e)	1,997	845	365	43	9	3,267
Proportion of separations public patients (%)	32	35	42	30	56	34
Separation rate ^(f)	0.15	0.19	0.18	0.17	0.10	0.16
Standardised separation rate ratio (SRR)	0.94	1.14	1.07	1.06	0.59	
95% confidence interval of SRR	0.90–0.98	1.06–1.22	0.96–1.18	0.74–1.38	0.20–0.98	
Hysterectomy, females aged 15–69						
Separations ^(e)	18,335	7,137	3,467	508	190	29,697
Proportion of separations public patients (%)	36	47	52	49	63	41
Separation rate ^(f)	1.41	1.74	1.69	1.53	1.17	1.50
Standardised separation rate ratio (SRR)	0.94	1.16	1.12	1.02	0.78	
95% confidence interval of SRR	0.93–0.95	1.13–1.19	1.08–1.16	0.93–1.11	0.67–0.89	
Age and sex restricted adjusted separation rate ^(g)	4.00	4.96	4.81	4.34	3.34	4.28
Lens insertion						
Separations ^(e)	97,261	33,625	16,716	1,845	751	150,654
Proportion of separations public patients (%)	24	28	33	44	60	26
Separation rate ^(f)	7.49	7.35	8.10	7.83	7.97	7.56
Standardised separation rate ratio (SRR)	0.99	0.97	1.07	1.04	1.05	
95% confidence interval of SRR	0.98–1.00	0.96–0.98	1.05–1.09	0.99–1.09	0.97–1.13	

(continued)

Table 4.7 (continued): Separation statistics^(a) for selected procedures^(b), by Remoteness Area of usual residence, all hospitals^(c), Australia, 2002–03

	Major cities	Inner regional	Outer regional	Remote	Very remote	Australia ^(d)
Tonsillectomy						
Separations ^(e)	21,121	7,856	3,310	504	193	33,049
Proportion of separations public patients (%)	36	49	52	49	51	41
Separation rate ^(f)	1.66	1.92	1.60	1.41	0.89	1.70
Standardised separation rate ratio (SRR)	0.98	1.13	0.94	0.83	0.52	
95% confidence interval of SRR	0.97–0.99	1.11–1.15	0.91–0.97	0.76–0.90	0.45–0.59	
Myringotomy						
Separations ^(e)	22,225	6,658	2,902	481	213	32,515
Proportion of separations public patients (%)	32	51	53	56	62	38
Separation rate ^(f)	1.79	1.60	1.35	1.26	0.92	1.68
Standardised separation rate ratio (SRR)	1.06	0.95	0.81	0.75	0.55	
95% confidence interval of SRR	1.05–1.07	0.93–0.97	0.78–0.84	0.68–0.82	0.48–0.62	
Knee replacement						
Separations ^(e)	16,037	6,764	3,069	329	100	26,368
Proportion of separations public patients (%)	30	35	38	33	41	32
Separation rate ^(f)	1.25	1.48	1.45	1.28	0.96	1.32
Standardised separation rate ratio (SRR)	0.94	1.12	1.09	0.96	0.72	
95% confidence interval of SRR	0.93–0.95	1.09–1.15	1.05–1.13	0.86–1.06	0.58–0.86	
Prostatectomy						
Separations ^(e)	15,568	5,565	2,595	276	102	24,145
Proportion of separations public patients (%)	32	39	43	41	46	35
Separation rate ^(f)	1.21	1.21	1.23	1.09	1.05	1.21
Standardised separation rate ratio (SRR)	1.00	1.00	1.02	0.90	0.87	
95% confidence interval of SRR	0.98–1.02	0.97–1.03	0.98–1.06	0.79–1.01	0.70–1.04	
Arthroscopic procedures (includes arthroscopies)						
Separations ^(e)	69,696	25,268	12,445	2,104	705	110,434
Proportion of separations public patients (%)	16	26	30	26	34	20
Separation rate ^(f)	5.31	6.18	6.20	6.68	4.27	5.59
Standardised separation rate ratio (SRR)	0.95	1.11	1.11	1.19	0.76	
95% confidence interval of SRR	0.94–0.96	1.10–1.12	1.09–1.13	1.14–1.24	0.70–0.82	

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

(b) The procedures are defined using ICD-10-AM codes. See Appendix 3.

(c) Some private hospitals are not included. See Appendix 4 for details.

(d) Includes Unknown Remoteness Area and excludes non-Australian residents and Unknown state of residence

(e) Excludes multiple procedures or diagnosis in the same separation within the same group.

(f) Rate per 1,000 population was directly age-standardised to the Australian population at 30 June 2001.

(g) Caesarean sections divided by separations for which in-hospital birth was reported. This is an approximate measure of the proportion of all births that are by Caesarean section, as births out of hospital are not included.

Table 4.8: Separation statistics^(a) for selected potentially preventable hospitalisations^(b), by state or territory of usual residence, all hospitals, 2002–03

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(c)
Vaccine-preventable conditions									
Influenza and pneumonia									
Separations ^(d)	4,238	2,657	2,860	1,557	890	279	85	259	12,826
Separations not within state of residence (%)	3	2	1	1	4	2	12	6	
Separation rate ^(e)	0.61	0.52	0.76	0.82	0.54	0.55	0.30	1.44	0.63
Standardised separation rate ratio (SRR)	0.96	0.82	1.20	1.30	0.85	0.86	0.48	2.27	
95% confidence interval of SRR	0.94–0.99	0.79–0.85	1.16–1.25	1.23–1.36	0.79–0.90	0.76–0.96	0.38–0.58	2.00–2.55	
Other vaccine-preventable conditions									
Separations ^(d)	1,122	731	504	193	244	50	10	75	2,929
Separations not within state of residence (%)	6	0	0	0	3	0	11	15	
Separation rate ^(e)	0.16	0.15	0.13	0.10	0.16	0.11	0.03	0.42	0.15
Standardised separation rate ratio (SRR)	1.13	1.00	0.91	0.68	1.07	0.74	0.20	2.88	
95% confidence interval of SRR	1.07–1.20	0.93–1.08	0.83–0.99	0.59–0.78	0.94–1.20	0.54–0.95	0.08–0.32	2.22–3.53	
Total vaccine-preventable conditions									
Separations ^(d)	5,358	3,385	3,358	1,748	1,132	329	95	334	15,740
Separations not within state of residence (%)	3	2	1	1	4	2	12	8	
Separation rate ^(e)	0.78	0.67	0.89	0.92	0.69	0.65	0.33	1.86	0.78
Standardised separation rate ratio (SRR)	1.00	0.86	1.15	1.18	0.89	0.84	0.43	2.39	
95% confidence interval of SRR	0.97–1.02	0.83–0.88	1.11–1.18	1.13–1.24	0.84–0.94	0.75–0.93	0.34–0.51	2.13–2.64	
Acute conditions									
Appendicitis									
Separations ^(d)	7,938	5,977	5,064	2,827	1,748	575	373	316	24,820
Separations not within state of residence (%)	3	2	2	1	1	2	5	4	
Separation rate ^(e)	1.18	1.21	1.32	1.41	1.16	1.22	1.09	1.44	1.24
Standardised separation rate ratio (SRR)	0.96	0.98	1.06	1.14	0.94	0.98	0.88	1.16	
95% confidence interval of SRR	0.93–0.98	0.95–1.00	1.03–1.09	1.10–1.18	0.89–0.98	0.90–1.06	0.79–0.96	1.03–1.29	
Cellulitis									
Separations ^(d)	9,560	7,367	5,585	2,630	2,115	607	334	544	28,748
Separations not within state of residence (%)	3	1	2	1	2	1	6	3	
Separation rate ^(e)	1.37	1.45	1.49	1.37	1.27	1.19	1.09	3.19	1.41
Standardised separation rate ratio (SRR)	0.97	1.02	1.05	0.97	0.90	0.84	0.77	2.25	
95% confidence interval of SRR	0.95–0.99	1.00–1.05	1.02–1.08	0.93–1.01	0.86–0.93	0.78–0.91	0.69–0.85	2.06–2.44	
Convulsions and epilepsy									
Separations ^(d)	11,342	7,640	5,902	2,826	2,281	747	288	540	31,578
Separations not within state of residence (%)	2	2	3	1	2	9	17	4	
Separation rate ^(e)	1.68	1.54	1.55	1.45	1.51	1.56	0.89	2.70	1.58
Standardised separation rate ratio (SRR)	1.06	0.98	0.98	0.92	0.95	0.99	0.57	1.71	
95% confidence interval of SRR	1.04–1.08	0.95–1.00	0.96–1.01	0.88–0.95	0.92–0.99	0.92–1.06	0.50–0.63	1.57–1.85	

(continued)

Table 4.8 (continued): Separation statistics^(a) for selected potentially preventable hospitalisations^(b), by state or territory of usual residence, all hospitals, 2002-03

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(c)
Dehydration and gastroenteritis									
Separations ^(d)	12,794	12,286	8,077	3,703	3,318	869	300	263	41,616
Separations not within state of residence (%)	3	1	2	1	1	3	9	9	
Separation rate ^(e)	1.85	2.41	2.15	1.93	2.01	1.73	1.01	1.86	2.05
Standardised separation rate ratio (SRR)	0.90	1.18	1.05	0.94	0.98	0.85	0.49	0.91	
95% confidence interval of SRR	0.89-0.92	1.16-1.20	1.03-1.07	0.91-0.97	0.95-1.02	0.79-0.90	0.44-0.55	0.80-1.02	
Dental conditions									
Separations ^(d)	11,673	11,444	9,435	6,421	3,904	786	398	448	44,526
Separations not within state of residence (%)	3	2	1	0	1	1	3	5	
Separation rate ^(e)	1.73	2.33	2.46	3.27	2.57	1.65	1.23	2.02	2.23
Standardised separation rate ratio (SRR)	0.78	1.05	1.10	1.47	1.15	0.74	0.55	0.91	
95% confidence interval of SRR	0.76-0.79	1.03-1.06	1.08-1.13	1.43-1.50	1.12-1.19	0.69-0.79	0.50-0.61	0.82-0.99	
Ear, nose and throat infections									
Separations ^(d)	11,030	6,880	7,038	3,598	3,091	612	289	457	32,997
Separations not within state of residence (%)	3	2	2	1	1	1	7	4	
Separation rate ^(e)	1.64	1.42	1.84	1.85	2.12	1.28	0.88	1.97	1.67
Standardised separation rate ratio (SRR)	0.99	0.85	1.11	1.11	1.27	0.77	0.53	1.18	
95% confidence interval of SRR	0.97-1.01	0.83-0.87	1.08-1.13	1.08-1.15	1.23-1.32	0.71-0.83	0.47-0.59	1.07-1.29	
Gangrene									
Separations ^(d)	1,213	1,254	898	317	326	124	20	75	4,231
Separations not within state of residence (%)	5	1	1	1	1	9	11	7	
Separation rate ^(e)	0.17	0.24	0.24	0.17	0.19	0.24	0.07	0.49	0.21
Standardised separation rate ratio (SRR)	0.83	1.17	1.16	0.82	0.91	1.15	0.36	2.36	
95% confidence interval of SRR	0.78-0.88	1.11-1.24	1.08-1.24	0.73-0.91	0.81-1.00	0.95-1.35	0.20-0.52	1.83-2.90	
Pelvic inflammatory disease									
Separations ^(d)	2,021	1,741	1,247	652	443	140	84	135	6,463
Separations not within state of residence (%)	4	1	1	0	1	1	12	3	
Separation rate ^(e)	0.30	0.35	0.33	0.33	0.29	0.31	0.24	0.60	0.32
Standardised separation rate ratio (SRR)	0.93	1.08	1.02	1.02	0.91	0.96	0.76	1.86	
95% confidence interval of SRR	0.89-0.97	1.03-1.13	0.96-1.08	0.94-1.09	0.82-0.99	0.80-1.11	0.59-0.92	1.55-2.18	
Perforated/bleeding ulcer									
Separations ^(d)	1,854	1,483	805	578	543	116	52	24	5,456
Separations not within state of residence (%)	4	2	2	1	1	1	6	9	
Separation rate ^(e)	0.26	0.29	0.22	0.32	0.30	0.22	0.20	0.15	0.27
Standardised separation rate ratio (SRR)	0.98	1.08	0.82	1.19	1.14	0.82	0.74	0.57	
95% confidence interval of SRR	0.94-1.03	1.02-1.13	0.76-0.88	1.09-1.29	1.04-1.23	0.67-0.97	0.54-0.94	0.34-0.80	

(continued)

Table 4.8 (continued): Separation statistics^(a) for selected potentially preventable hospitalisations^(b), by state or territory of usual residence, all hospitals, 2002–03

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(c)
Pyelonephritis									
Separations ^(d)	12,484	9,981	6,996	3,868	3,104	727	332	495	37,992
Separations not within state of residence (%)	2	1	2	0	1	1	6	2	
Separation rate ^(e)	1.78	1.95	1.88	2.06	1.84	1.44	1.18	3.30	1.86
Standardised separation rate ratio (SRR)	0.96	1.04	1.01	1.10	0.99	0.77	0.63	1.77	
95% confidence interval of SRR	0.94–0.97	1.02–1.06	0.98–1.03	1.07–1.14	0.95–1.02	0.72–0.83	0.56–0.70	1.61–1.92	
Total acute conditions									
Separations ^(d)	81,857	65,989	50,997	27,403	20,839	5,300	2,470	3,292	258,202
Separations not within state of residence (%)	3	2	2	1	1	3	7	4	
Separation rate ^(e)	11.97	13.17	13.46	14.15	13.24	10.84	7.89	17.69	12.82
Standardised separation rate ratio (SRR)	0.93	1.03	1.05	1.10	1.03	0.85	0.62	1.38	
95% confidence interval of SRR	0.93–0.94	1.02–1.04	1.04–1.06	1.09–1.12	1.02–1.05	0.82–0.87	0.59–0.64	1.33–1.43	
Chronic conditions									
Angina									
Separations ^(d)	15,051	12,187	10,584	3,180	3,653	1,193	356	315	46,523
Separations not within state of residence (%)	3	2	2	1	2	1	5	3	
Separation rate ^(e)	2.12	2.35	2.85	1.72	2.04	2.22	1.39	2.45	2.26
Standardised separation rate ratio (SRR)	0.94	1.04	1.26	0.76	0.90	0.98	0.61	1.08	
95% confidence interval of SRR	0.92–0.95	1.02–1.06	1.23–1.28	0.73–0.79	0.87–0.93	0.93–1.04	0.55–0.68	0.96–1.20	
Asthma									
Separations ^(d)	12,946	8,604	6,507	3,947	3,856	516	324	410	37,118
Separations not within state of residence (%)	2	1	2	1	1	2	11	3	
Separation rate ^(e)	1.92	1.76	1.70	2.02	2.59	1.08	1.02	1.95	1.86
Standardised separation rate ratio (SRR)	1.03	0.94	0.91	1.08	1.39	0.58	0.55	1.05	
95% confidence interval of SRR	1.01–1.05	0.92–0.96	0.89–0.94	1.05–1.12	1.35–1.44	0.53–0.63	0.49–0.61	0.94–1.15	
Chronic obstructive pulmonary disease									
Separations ^(d)	19,472	14,412	10,644	4,962	4,745	1,609	392	652	56,892
Separations not within state of residence (%)	2	1	1	1	1	3	7	3	
Separation rate ^(e)	2.73	2.77	2.90	2.74	2.63	2.99	1.61	6.05	2.77
Standardised separation rate ratio (SRR)	0.98	1.00	1.04	0.99	0.95	1.08	0.58	2.18	
95% confidence interval of SRR	0.97–1.00	0.98–1.01	1.02–1.06	0.96–1.02	0.92–0.98	1.03–1.13	0.52–0.64	2.01–2.35	
Congestive cardiac failure									
Separations ^(d)	14,245	11,637	7,997	3,485	4,110	972	316	279	43,045
Separations not within state of residence (%)	2	1	1	1	1	1	6	3	
Separation rate ^(e)	1.97	2.20	2.20	1.94	2.19	1.78	1.36	2.72	2.08
Standardised separation rate ratio (SRR)	0.95	1.06	1.06	0.93	1.05	0.86	0.65	1.31	
95% confidence interval of SRR	0.93–0.96	1.04–1.07	1.03–1.08	0.90–0.96	1.02–1.08	0.80–0.91	0.58–0.73	1.15–1.46	

(continued)

Table 4.8 (continued): Separation statistics^(a) for selected potentially preventable hospitalisations^(b), by state or territory of usual residence, all hospitals, 2002–03

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(c)
Diabetes complications									
Separations ^(d)	39,271	50,370	30,860	18,219	13,539	7,290	1,122	2,881	163,566
Separations not within state of residence (%)	6	1	1	0	2	1	7	5	
Separation rate ^(e)	5.55	9.75	8.28	9.69	7.77	13.98	4.25	22.08	8.00
Standardised separation rate ratio (SRR)	0.69	1.22	1.03	1.21	0.97	1.75	0.53	2.76	
95% confidence interval of SRR	0.69–0.70	1.21–1.23	1.02–1.05	1.19–1.23	0.95–0.99	1.71–1.79	0.50–0.56	2.66–2.86	
Hypertension									
Separations ^(d)	2,346	1,520	1,375	527	488	147	35	29	6,467
Separations not within state of residence (%)	3	2	1	1	2	1	13	4	
Separation rate ^(e)	0.33	0.29	0.37	0.28	0.28	0.28	0.13	0.19	0.32
Standardised separation rate ratio (SRR)	1.05	0.93	1.17	0.89	0.88	0.88	0.42	0.59	
95% confidence interval of SRR	1.01–1.09	0.89–0.98	1.11–1.24	0.82–0.97	0.80–0.96	0.74–1.02	0.28–0.56	0.38–0.81	
Iron deficiency anaemia									
Separations ^(d)	4,715	5,918	2,949	2,141	1,285	440	173	128	17,752
Separations not within state of residence (%)	3	0	1	0	0	0	2	2	
Separation rate ^(e)	0.67	1.15	0.79	1.13	0.74	0.84	0.64	0.94	0.87
Standardised separation rate ratio (SRR)	0.77	1.33	0.91	1.30	0.86	0.97	0.73	1.09	
95% confidence interval of SRR	0.75–0.79	1.29–1.36	0.88–0.94	1.24–1.35	0.81–0.90	0.88–1.06	0.62–0.84	0.90–1.28	
Nutritional deficiencies									
Separations ^(d)	32	28	24	26	4	13	3	16	146
Separations not within state of residence (%)	10	0	0	0	0	0	0	0	
Separation rate ^(e)	0.00	0.01	0.01	0.01	0.00	0.02	0.01	0.06	0.01
Standardised separation rate ratio (SRR)	0.63	0.77	0.90	1.77	0.34	3.42	1.42	8.45	
95% confidence interval of SRR	0.41–0.85	0.48–1.05	0.54–1.26	1.09–2.45	0.01–0.67	1.56–5.28	-0.19–3.03	4.31–12.60	
Total chronic conditions									
Separations ^(d)	105,050	100,611	68,589	35,329	30,604	11,899	2,646	4,544	359,309
Separations not within state of residence (%)	4	1	1	1	1	1	7	4	
Separation rate ^(e)	14.88	19.50	18.45	18.91	17.65	22.67	10.13	35.13	17.58
Standardised separation rate ratio (SRR)	0.85	1.11	1.05	1.08	1.00	1.29	0.58	2.00	
95% confidence interval of SRR	0.84–0.85	1.10–1.12	1.04–1.06	1.06–1.09	0.99–1.02	1.27–1.31	0.55–0.60	1.94–2.06	
Total selected potentially preventable hospitalisations									
Separations ^(d)	190,087	167,485	121,288	63,677	51,935	17,337	5,159	7,975	625,035
Separations not within state of residence (%)	3	1	2	1	1	2	7	4	
Separation rate ^(e)	27.31	32.86	32.36	33.55	31.22	33.80	18.16	53.13	30.78
Standardised separation rate ratio (SRR)	0.89	1.07	1.05	1.09	1.01	1.10	0.59	1.73	
95% confidence interval of SRR	0.88–0.89	1.06–1.07	1.05–1.06	1.08–1.10	1.01–1.02	1.08–1.11	0.57–0.61	1.69–1.76	

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

(b) These conditions are defined using ICD-10-AM codes in Appendix 3.

(c) Excludes non-residents and Unknown state of residence.

(d) Excludes multiple procedures and diagnoses for the same separation within the same group.

(e) Rate per 1,000 population was directly age-standardised to the Australian population at 30 June 2001.

Table 4.9: Separation statistics^(a) for selected potentially preventable hospitalisations^(b), by Remoteness Area of usual residence, all hospitals, 2002–03

	Major cities	Inner regional	Outer regional	Remote	Very remote	Total ^(c)
Vaccine-preventable conditions						
Influenza and Pneumonia						
Separations ^(d)	6,946	3,234	1,763	497	369	12,809
Separation rate ^(e)	0.53	0.74	0.86	1.65	2.29	0.64
Standardised separation rate ratio (SRR)	0.83	1.16	1.34	2.58	3.58	
95% confidence interval of SRR	0.81–0.85	1.12–1.20	1.28–1.41	2.35–2.80	3.21–3.94	
Other vaccine-preventable conditions						
Separations ^(d)	2,200	415	168	53	62	2,898
Separation rate ^(e)	0.17	0.10	0.08	0.17	0.32	0.15
Standardised separation rate ratio (SRR)	1.13	0.67	0.53	1.13	2.13	
95% confidence interval of SRR	1.09–1.18	0.60–0.73	0.45–0.61	0.83–1.44	1.60–2.66	
Total vaccine-preventable						
Separations ^(d)	9,137	3,646	1,929	549	431	15,692
Separation rate ^(e)	0.70	0.84	0.94	1.82	2.60	0.79
Standardised separation rate ratio (SRR)	0.89	1.06	1.19	2.30	3.29	
95% confidence interval of SRR	0.87–0.90	1.03–1.10	1.14–1.24	2.11–2.50	2.98–3.60	
Acute conditions						
Appendicitis						
Separations ^(d)	15,238	5,562	3,034	600	355	24,789
Separation rate ^(e)	1.15	1.38	1.52	1.83	1.79	1.25
Standardised separation rate ratio (SRR)	0.92	1.10	1.22	1.46	1.43	
95% confidence interval of SRR	0.91–0.93	1.07–1.13	1.17–1.26	1.35–1.58	1.28–1.58	
Cellulitis						
Separations ^(d)	16,491	6,550	3,801	993	845	28,680
Separation rate ^(e)	1.25	1.52	1.85	3.24	5.13	1.43
Standardised separation rate ratio (SRR)	0.87	1.06	1.29	2.27	3.59	
95% confidence interval of SRR	0.86–0.89	1.04–1.09	1.25–1.33	2.12–2.41	3.35–3.83	
Convulsions and epilepsy						
Separations ^(d)	18,783	6,772	3,899	1,146	856	31,456
Separation rate ^(e)	1.44	1.65	1.91	3.38	4.72	1.59
Standardised separation rate ratio (SRR)	0.91	1.04	1.20	2.13	2.97	
95% confidence interval of SRR	0.89–0.92	1.01–1.06	1.16–1.24	2.00–2.25	2.77–3.17	
Dehydration and gastroenteritis						
Separations ^(d)	25,320	9,470	5,311	970	482	41,553
Separation rate ^(e)	1.90	2.25	2.63	3.34	3.46	2.07
Standardised separation rate ratio (SRR)	0.92	1.09	1.27	1.61	1.67	
95% confidence interval of SRR	0.91–0.93	1.07–1.11	1.24–1.30	1.51–1.72	1.52–1.82	

(continued)

Table 4.9 (continued): Separation statistics ^(a) for selected potentially preventable hospitalisations ^(b), by Remoteness Area of usual residence, all hospitals, 2002–03

	Major cities	Inner regional	Outer regional	Remote	Very remote	Total ^(c)
Dental conditions						
Separations ^(d)	26,158	10,838	5,713	1,005	710	44,424
Separation rate ^(e)	2.02	2.63	2.75	2.80	3.32	2.25
Standardised separation rate ratio (SRR)	0.90	1.17	1.22	1.24	1.48	
95% confidence interval of SRR	0.89–0.91	1.15–1.19	1.19–1.25	1.17–1.32	1.37–1.58	
Ear, nose and throat infections						
Separations ^(d)	18,815	7,230	4,786	1,257	866	32,954
Separation rate ^(e)	1.46	1.76	2.30	3.50	4.00	1.68
Standardised separation rate ratio (SRR)	0.87	1.05	1.37	2.08	2.38	
95% confidence interval of SRR	0.86–0.88	1.02–1.07	1.33–1.41	1.97–2.20	2.22–2.54	
Gangrene						
Separations ^(d)	2,517	940	618	86	62	0
Separation rate ^(e)	1.46	1.76	2.30	3.50	4.00	1.68
Standardised separation rate ratio (SRR)	0.87	1.05	1.37	2.08	2.38	
95% confidence interval of SRR	0.84–0.90	0.98–1.11	1.26–1.48	1.64–2.52	1.79–2.97	
Pelvic inflammatory disease						
Separations ^(d)	4,091	1,320	712	152	176	6,451
Separation rate ^(e)	0.30	0.34	0.37	0.46	0.90	0.33
Standardised separation rate ratio (SRR)	0.91	1.03	1.12	1.39	2.73	
95% confidence interval of SRR	0.88–0.94	0.97–1.09	1.04–1.20	1.17–1.62	2.32–3.13	
Perforated/bleeding ulcer						
Separations ^(d)	3,677	1,103	567	71	31	5,449
Separation rate ^(e)	0.28	0.24	0.27	0.27	0.24	0.27
Standardised separation rate ratio (SRR)	1.04	0.89	1.00	1.00	0.89	
95% confidence interval of SRR	1.00–1.07	0.84–0.94	0.92–1.08	0.77–1.23	0.58–1.20	
Pyelonephritis						
Separations ^(d)	24,625	7,701	4,072	849	705	37,952
Separation rate ^(e)	1.86	1.78	1.99	3.00	5.20	1.89
Standardised separation rate ratio (SRR)	0.98	0.94	1.05	1.59	2.75	
95% confidence interval of SRR	0.97–1.00	0.92–0.96	1.02–1.09	1.48–1.69	2.55–2.95	
Total acute conditions						
Separations ^(d)	155,562	57,448	32,489	7,127	5,081	257,707
Separation rate ^(e)	11.84	13.77	15.88	22.13	29.16	12.95
Standardised separation rate ratio (SRR)	0.91	1.06	1.23	1.71	2.25	
95% confidence interval of SRR	0.91–0.92	1.05–1.07	1.21–1.24	1.67–1.75	2.19–2.31	

(continued)

Table 4.9 (continued): Separation statistics ^(a) for selected potentially preventable hospitalisations ^(b), by Remoteness Area of usual residence, all hospitals, 2002–03

	Major cities	Inner regional	Outer regional	Remote	Very remote	Total ^(c)
Chronic conditions						
Angina						
Separations ^(d)	25,584	13,291	6,111	969	514	46,469
Separation rate ^(e)	1.94	2.91	2.89	3.62	4.14	2.30
Standardised separation rate ratio (SRR)	0.84	1.27	1.26	1.57	1.80	
95% confidence interval of SRR	0.83–0.85	1.24–1.29	1.23–1.29	1.47–1.67	1.64–1.96	
Asthma						
Separations ^(d)	23,378	7,456	4,662	989	568	37,053
Separation rate ^(e)	1.81	1.79	2.23	2.96	3.21	1.88
Standardised separation rate ratio (SRR)	0.96	0.95	1.19	1.57	1.71	
95% confidence interval of SRR	0.95–0.98	0.93–0.97	1.15–1.22	1.48–1.67	1.57–1.85	
Chronic obstructive pulmonary disease						
Separations ^(d)	33,153	13,879	7,705	1,291	808	56,836
Separation rate ^(e)	2.53	3.00	3.65	5.02	6.97	2.82
Standardised separation rate ratio (SRR)	0.90	1.06	1.29	1.78	2.47	
95% confidence interval of SRR	0.89–0.91	1.05–1.08	1.27–1.32	1.68–1.88	2.30–2.64	
Congestive cardiac failure						
Separations ^(d)	25,754	10,498	5,481	780	491	43,004
Separation rate ^(e)	1.93	2.27	2.66	3.26	4.48	2.12
Standardised separation rate ratio (SRR)	0.91	1.07	1.25	1.54	2.11	
95% confidence interval of SRR	0.90–0.92	1.05–1.09	1.22–1.29	1.43–1.65	1.93–2.30	
Diabetes complications						
Separations ^(d)	92,355	41,729	22,365	3,861	2,998	163,308
Separation rate ^(e)	7.04	9.23	10.55	13.30	20.73	8.11
Standardised separation rate ratio (SRR)	0.87	1.14	1.30	1.64	2.56	
95% confidence interval of SRR	0.86–0.87	1.13–1.15	1.28–1.32	1.59–1.69	2.46–2.65	
Hypertension						
Separations ^(d)	2,816	1,611	1,586	283	161	6,457
Separation rate ^(e)	0.21	0.36	0.76	1.09	1.36	0.32
Standardised separation rate ratio (SRR)	0.66	1.13	2.38	3.41	4.25	
95% confidence interval of SRR	0.63–0.68	1.07–1.18	2.26–2.49	3.01–3.80	3.59–4.91	
Iron deficiency anaemia						
Separations ^(d)	12,148	3,828	1,459	165	136	17,736
Separation rate ^(e)	0.92	0.86	0.70	0.59	0.98	0.88
Standardised separation rate ratio (SRR)	1.05	0.98	0.80	0.67	1.11	
95% confidence interval of SRR	1.03–1.06	0.95–1.01	0.75–0.84	0.57–0.77	0.93–1.30	

(continued)

Table 4.9 (continued): Separation statistics^(a) for selected potentially preventable hospitalisations^(b), by Remoteness Area of usual residence, all hospitals, 2002–03

	Major cities	Inner regional	Outer regional	Remote	Very remote	Total ^(c)
Nutritional deficiencies						
Separations ^(d)	87	30	11	5	13	146
Separation rate ^(e)	0.01	0.01	0.01	0.01	0.05	0.01
Standardised separation rate ratio (SRR)	1.00	1.00	1.00	1.00	5.00	
95% confidence interval of SRR	0.79–1.21	n.p.	n.p.	n.p.	n.p.	
Total chronic conditions						
Separations ^(d)	207,649	89,453	48,085	8,099	5,534	358,820
Separation rate ^(e)	15.83	19.81	22.83	28.96	40.79	17.84
Standardised separation rate ratio (SRR)	0.89	1.11	1.28	1.62	2.29	
95% confidence interval of SRR	0.88–0.89	1.10–1.12	1.27–1.29	1.59–1.66	2.23–2.35	
Total potentially preventable hospitalisations						
Separations ^(d)	367,399	148,781	81,443	15,531	10,859	624,013
Separation rate ^(e)	27.98	34.03	39.14	52.06	71.24	31.17
Standardised separation rate ratio (SRR)	0.90	1.09	1.26	1.67	2.29	
95% confidence interval of SRR	0.89–0.90	1.09–1.10	1.25–1.26	1.64–1.70	2.24–2.33	

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

(b) These conditions are defined using ICD-10-AM codes in Appendix 3.

(c) Excludes unknown Remoteness Area (and unknown State) and non-Australian residents. Hence these numbers are slightly smaller than Table 4.8.

(d) Excludes multiple procedures and diagnoses for the same separation within the same group.

(e) Rate per 1,000 population was directly age-standardised to the Australian population at 30 June 2001.

n.p. Not published.

Table 4.10: Average length of stay(days)^(a) for selected AR-DRGs version 5.0, by hospital sector, states and territories, 2002-03

AR-DRG	Hospital sector	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
E62C Respiratory infections/inflamations W/O CC										
ALOS (days)	Public	3.94	3.33	3.39	3.56	3.30	4.25	4.01	4.24	3.64
	Private	5.39	5.89	5.15	4.86	5.27	n.p.	n.p.	n.p.	5.40
	Total	4.06	3.84	3.86	3.85	3.71	n.p.	n.p.	n.p.	3.94
Separations	Public	10,827	6,551	4,751	2,569	1,727	458	393	651	27,927
	Private	992	1,614	1,739	747	454	n.p.	n.p.	n.p.	5,774
	Total	11,819	8,165	6,490	3,316	2,181	n.p.	n.p.	n.p.	33,701
E65B Chronic obstructive airway disease W/O catastrophic or severe CC										
ALOS (days)	Public	5.40	4.27	5.02	5.74	5.08	6.68	5.82	4.91	5.10
	Private	8.31	7.70	7.87	6.77	7.23	n.p.	n.p.	n.p.	7.75
	Total	5.67	4.91	5.82	6.04	5.51	n.p.	n.p.	n.p.	5.58
Separations	Public	10,494	5,960	4,362	1,888	1,835	598	196	374	25,707
	Private	1,075	1,356	1,720	788	470	n.p.	n.p.	n.p.	5,721
	Total	11,569	7,316	6,082	2,676	2,305	n.p.	n.p.	n.p.	31,428
E69C Bronchitis and asthma age<50 W/O CC										
ALOS (days)	Public	1.70	1.63	1.72	1.92	1.79	1.71	1.98	2.19	1.73
	Private	2.14	2.66	2.43	1.89	2.86	n.p.	n.p.	n.p.	2.30
	Total	1.71	1.68	1.82	1.92	1.84	n.p.	n.p.	n.p.	1.77
Separations	Public	10,164	5,917	4,368	2,636	2,734	354	240	308	26,721
	Private	299	320	697	539	133	n.p.	n.p.	n.p.	2,061
	Total	10,463	6,237	5,065	3,175	2,867	n.p.	n.p.	n.p.	28,782
F62B Heart failure and shock W/O catastrophic CC										
ALOS (days)	Public	6.15	4.76	5.22	5.53	5.75	7.11	6.51	4.45	5.55
	Private	9.51	7.74	8.01	7.72	7.12	n.p.	n.p.	n.p.	8.07
	Total	6.54	5.50	6.11	6.11	6.13	n.p.	n.p.	n.p.	6.11
Separations	Public	8,703	6,293	4,101	1,880	2,056	448	222	194	23,897
	Private	1,134	2,080	1,907	677	814	n.p.	n.p.	n.p.	6,916
	Total	9,837	8,373	6,008	2,557	2,870	n.p.	n.p.	n.p.	30,813
F71B Non-major arrhythmia and conduction disorders W/O catastrophic or severe CC										
ALOS (days)	Public	2.51	2.26	2.30	2.00	2.15	2.36	2.00	2.12	2.33
	Private	2.32	2.57	2.64	2.15	2.24	n.p.	n.p.	n.p.	2.44
	Total	2.48	2.34	2.41	2.06	2.18	n.p.	n.p.	n.p.	2.36
Separations	Public	10,064	6,621	4,609	1,925	1,917	638	403	172	26,349
	Private	1,860	2,248	2,457	1,215	899	n.p.	n.p.	n.p.	9,114
	Total	11,924	8,869	7,066	3,140	2,816	n.p.	n.p.	n.p.	35,463

(continued)

Table 4.10 (continued): Average length of stay(days)^(a) for selected AR-DRGs version 5.0, by hospital sector, states and territories, 2002-03

AR-DRG	Hospital sector	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
G07B Appendicectomy W/O Catastrophic or Severe CC										
ALOS (days)	Public	3.16	2.80	2.66	2.83	2.99	3.10	2.96	3.05	2.93
	Private	2.81	2.94	2.56	2.73	3.25	n.p.	n.p.	n.p.	2.81
	<i>Total</i>	3.10	2.84	2.62	2.80	3.06	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	2.90
Separations	Public	5,576	4,005	2,512	1,644	1,060	314	337	213	15,661
	Private	1,150	1,227	1,597	870	404	n.p.	n.p.	n.p.	5,570
	<i>Total</i>	6,726	5,232	4,109	2,514	1,464	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	21,231
G08B Abdominal and other hernia procedures age 1 to 59 or W catastrophic or severe CC										
ALOS (days)	Public	1.78	1.58	1.56	1.87	1.61	1.56	1.71	1.68	1.67
	Private	1.64	1.66	1.55	1.96	1.72	n.p.	n.p.	n.p.	1.67
	<i>Total</i>	1.71	1.62	1.55	1.92	1.66	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	1.67
Separations	Public	1,976	1,755	1,243	534	579	95	52	72	6,306
	Private	2,265	1,474	1,662	731	464	n.p.	n.p.	n.p.	6,924
	<i>Total</i>	4,241	3,229	2,905	1,265	1,043	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	13,230
G09Z Inguinal and femoral hernia procedures age>0										
ALOS (days)	Public	1.53	1.50	1.26	1.52	1.67	1.37	1.39	1.65	1.48
	Private	1.58	1.60	1.40	1.67	1.83	n.p.	n.p.	n.p.	1.56
	<i>Total</i>	1.56	1.56	1.34	1.61	1.75	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	1.53
Separations	Public	5,306	4,556	2,758	1,511	1,556	267	163	105	16,222
	Private	7,402	5,243	4,573	2,408	1,669	n.p.	n.p.	n.p.	22,478
	<i>Total</i>	12,708	9,799	7,331	3,919	3,225	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	38,700
H08B Laparoscopic cholecystectomy W/O closed CDE W/O catastrophic or severe CC										
ALOS (days)	Public	2.08	1.92	1.66	2.08	1.82	1.58	2.04	2.89	1.94
	Private	1.91	2.19	2.00	2.13	2.25	n.p.	n.p.	n.p.	2.05
	<i>Total</i>	2.00	2.04	1.85	2.11	2.02	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	1.99
Separations	Public	5,921	4,954	3,053	1,277	1,514	286	173	102	17,280
	Private	5,586	3,761	3,663	1,905	1,351	n.p.	n.p.	n.p.	17,051
	<i>Total</i>	11,507	8,715	6,716	3,182	2,865	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	34,331
I03C Hip replacement W/O catastrophic or severe CC										
ALOS (days)	Public	7.76	7.87	8.08	7.87	6.91	8.81	9.19	n.p.	7.85
	Private	7.99	8.54	8.88	9.69	7.82	n.p.	n.p.	n.p.	8.54
	<i>Total</i>	7.89	8.30	8.57	9.13	7.48	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	8.27
Separations	Public	2,469	1,706	983	523	563	178	129	25	6,576
	Private	3,197	3,020	1,572	1,171	933	n.p.	n.p.	n.p.	10,457
	<i>Total</i>	5,666	4,726	2,555	1,694	1,496	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	17,033

(continued)

Table 4.10 (continued): Average length of stay (days)^(a) for selected AR-DRGs version 5.0, by hospital sector, states and territories, 2002-03

AR-DRG	Hospital sector	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
I04Z Knee replacement and reattachment										
ALOS (days)	Public	7.86	8.44	7.79	9.05	6.73	9.38	7.65	n.p.	8.00
	Private	7.94	8.69	8.99	10.64	7.83	n.p.	n.p.	n.p.	8.63
	<i>Total</i>	<i>7.91</i>	<i>8.60</i>	<i>8.59</i>	<i>10.23</i>	<i>7.45</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>8.41</i>
Separations	Public	3,371	2,068	1,394	641	817	134	152	25	8,602
	Private	5,883	3,535	2,793	1,846	1,555	n.p.	n.p.	n.p.	16,382
	<i>Total</i>	<i>9,254</i>	<i>5,603</i>	<i>4,187</i>	<i>2,487</i>	<i>2,372</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>24,984</i>
I16Z Other shoulder procedures										
ALOS (days)	Public	1.89	1.89	1.69	1.97	2.15	1.70	1.84	n.p.	1.90
	Private	1.73	1.79	1.85	1.68	1.86	n.p.	n.p.	n.p.	1.79
	<i>Total</i>	<i>1.76</i>	<i>1.81</i>	<i>1.83</i>	<i>1.73</i>	<i>1.90</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>1.81</i>
Separations	Public	1,216	1,203	750	645	439	89	97	39	4,478
	Private	5,671	5,062	3,672	3,412	2,355	n.p.	n.p.	n.p.	21,055
	<i>Total</i>	<i>6,887</i>	<i>6,265</i>	<i>4,422</i>	<i>4,057</i>	<i>2,794</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>25,533</i>
L63B Kidney and urinary tract infections age>69 W/O catastrophic CC										
ALOS (days)	Public	5.60	4.78	5.31	6.13	5.36	7.02	6.86	5.45	5.40
	Private	7.70	6.88	6.94	7.15	6.72	n.p.	n.p.	n.p.	7.06
	<i>Total</i>	<i>5.83</i>	<i>5.27</i>	<i>5.80</i>	<i>6.40</i>	<i>5.70</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>5.75</i>
Separations	Public	4,610	3,140	2,092	1,140	989	199	90	114	12,374
	Private	547	969	910	405	322	n.p.	n.p.	n.p.	3,265
	<i>Total</i>	<i>5,157</i>	<i>4,109</i>	<i>3,002</i>	<i>1,545</i>	<i>1,311</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>15,639</i>
M02B Transurethral prostatectomy W/O catastrophic or severe CC										
ALOS (days)	Public	3.97	2.95	3.30	3.47	3.61	3.50	4.20	n.p.	3.46
	Private	3.59	3.58	3.54	3.68	3.81	n.p.	n.p.	n.p.	3.64
	<i>Total</i>	<i>3.74</i>	<i>3.31</i>	<i>3.48</i>	<i>3.61</i>	<i>3.72</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>3.57</i>
Separations	Public	1,930	2,041	694	474	543	139	66	33	5,920
	Private	3,111	2,802	1,920	921	762	n.p.	n.p.	n.p.	9,885
	<i>Total</i>	<i>5,041</i>	<i>4,843</i>	<i>2,614</i>	<i>1,395</i>	<i>1,305</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>15,805</i>
N04Z Hysterectomy for non-malignancy										
ALOS (days)	Public	4.28	4.15	3.77	4.24	4.04	3.88	4.62	4.11	4.13
	Private	4.54	4.94	4.31	4.93	4.80	n.p.	n.p.	n.p.	4.65
	<i>Total</i>	<i>4.42</i>	<i>4.52</i>	<i>4.10</i>	<i>4.65</i>	<i>4.46</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>4.42</i>
Separations	Public	4,028	3,553	2,121	1,512	1,203	305	172	102	12,996
	Private	4,926	3,174	3,390	2,178	1,501	n.p.	n.p.	n.p.	16,042
	<i>Total</i>	<i>8,954</i>	<i>6,727</i>	<i>5,511</i>	<i>3,690</i>	<i>2,704</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>29,038</i>

(continued)

Table 4.10 (continued): Average length of stay (days)^(a) for selected AR-DRGs version 5.0, by hospital sector, states and territories, 2002–03

AR-DRG	Hospital sector	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
N06Z Female reproductive system reconstructive procedures										
ALOS (days)	Public	3.31	3.17	2.91	3.23	3.13	3.31	3.98	n.p.	3.18
	Private	3.41	3.51	2.87	3.80	4.34	n.p.	n.p.	n.p.	3.47
	<i>Total</i>	3.37	3.35	2.88	3.59	3.86	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	3.36
Separations	Public	2,107	1,966	1,159	834	617	146	80	18	6,927
	Private	3,313	2,161	2,207	1,427	949	n.p.	n.p.	n.p.	10,527
	<i>Total</i>	5,420	4,127	3,366	2,261	1,566	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	17,454
O01C Caesarean delivery W moderate complicating diagnosis										
ALOS (days)	Public	4.75	4.65	4.02	4.90	4.93	4.74	4.75	5.64	4.62
	Private	5.79	5.60	5.29	6.54	6.57	n.p.	n.p.	n.p.	5.79
	<i>Total</i>	5.14	5.02	4.61	5.81	5.58	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	5.11
Separations	Public	10,806	7,992	6,302	2,506	2,295	496	416	481	31,294
	Private	6,331	5,084	5,407	3,092	1,516	n.p.	n.p.	n.p.	22,535
	<i>Total</i>	17,137	13,076	11,709	5,598	3,811	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	53,829
O60B Vaginal delivery W severe complicating diagnosis										
ALOS (days)	Public	3.25	3.07	2.72	3.38	3.27	3.85	3.07	3.56	3.13
	Private	4.45	4.48	4.43	4.92	4.96	n.p.	n.p.	n.p.	4.55
	<i>Total</i>	3.59	3.50	3.22	3.94	3.74	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	3.56
Separations	Public	27,207	23,249	15,626	7,199	5,800	1,739	1,659	1,237	83,716
	Private	10,792	9,920	6,607	4,076	2,249	n.p.	n.p.	n.p.	35,934
	<i>Total</i>	37,999	33,169	22,233	11,275	8,049	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	119,650
R61B Lymphoma and non-acute leukaemia W/O catastrophic CC										
ALOS (days)	Public	5.34	4.51	5.14	5.91	5.48	5.56	7.13	n.p.	5.18
	Private	4.25	3.87	4.92	3.24	4.29	n.p.	n.p.	n.p.	4.20
	<i>Total</i>	5.10	4.21	5.02	4.53	5.01	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	4.78
Separations	Public	3,141	2,512	1,228	740	864	246	165	30	8,926
	Private	903	2,122	1,653	796	560	n.p.	n.p.	n.p.	6,246
	<i>Total</i>	4,044	4,634	2,881	1,536	1,424	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	15,172
U63B Major affective disorders age<70 W/O catastrophic or severe CC										
ALOS (days)	Public	13.88	12.40	11.55	14.36	10.24	12.36	13.39	11.84	12.60
	Private	19.82	18.35	18.62	15.99	16.72	n.p.	n.p.	n.p.	18.09
	<i>Total</i>	15.34	14.57	14.25	14.92	11.87	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	14.34
Separations	Public	5,255	4,265	3,352	2,165	2,585	512	341	182	18,657
	Private	1,711	2,450	2,071	1,144	868	n.p.	n.p.	n.p.	8,614
	<i>Total</i>	6,966	6,715	5,423	3,309	3,453	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	27,271

(a) Average length of stay for separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded. Excludes separations where the length of stay was greater.

n.p. Not published.

Main abbreviations: ALOS—average length of stay, CC—complications and comorbidities, CDE—common bile duct exploration, W/O—without, W—with.

Table 4.11: Relative stay index^{(a)(b)}, by hospital sector, patient election status and funding source states and territories, 2002-03

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Public patients ^(c)	1.03	0.93	0.93	1.02	0.95	1.00	1.06	1.16	0.98
Public ^(d)	1.03	0.93	0.93	1.02	0.95	1.00	1.06	1.16	0.98
Private patients	1.07	0.95	0.96	1.02	1.00	0.93	1.02	1.18	1.02
Private health insurance	1.08	0.96	1.00	1.03	1.01	0.89	0.99	0.82	1.03
Self-funded	1.05	0.86	0.77	0.76	0.86	..	0.87	0.87	0.92
Workers compensation	1.13	1.03	1.08	1.12	1.06	0.74	1.18	1.30	1.08
Motor vehicle third party personal claim	1.33	0.94	1.16	1.10	1.28	1.15	1.09	1.86	1.13
Department of Veterans' Affairs	0.99	0.95	0.94	0.96	0.96	0.95	0.99	0.96	0.97
Other ^(e)	2.28	1.07	0.94	1.13	1.12	0.79	1.17	1.21	1.16
Patient election status not reported	1.22	0.89	..	..	..	1.02	..	..	0.94
Total	1.03	0.93	0.93	1.02	0.95	0.99	1.06	1.16	0.98
Private hospitals									
Public patients ^(c)	1.08	0.85	0.92	0.94	1.19	n.p.	n.p.	n.p.	1.00
Public ^(d)	1.08	0.85	0.92	0.94	1.19	n.p.	n.p.	n.p.	1.00
Private patients	1.04	1.02	1.05	1.10	1.02	n.p.	n.p.	n.p.	1.04
Private health insurance	1.04	1.02	1.04	1.09	1.03	n.p.	n.p.	n.p.	1.04
Self-funded	0.89	0.84	0.81	0.82	0.73	n.p.	n.p.	n.p.	0.85
Workers compensation	0.98	1.10	0.84	0.92	0.98	n.p.	n.p.	n.p.	0.99
Motor vehicle third party personal claim	0.84	1.00	1.07	1.05	1.14	n.p.	n.p.	n.p.	1.03
Department of Veterans' Affairs	1.14	1.03	1.17	1.32	1.02	n.p.	n.p.	n.p.	1.13
Other ^(e)	1.04	0.81	0.92	1.01	0.97	n.p.	n.p.	n.p.	0.95
Patient election status not reported	0.73	0.95	..	..	..	n.p.	n.p.	n.p.	1.08
Total	1.04	1.02	1.05	1.08	1.02	n.p.	n.p.	n.p.	1.04
All hospitals									
Public patients ^(c)	1.03	0.93	0.93	1.01	0.95	n.p.	n.p.	n.p.	0.98
Public ^(d)	1.03	0.93	0.93	1.01	0.95	n.p.	n.p.	n.p.	0.98
Private patients	1.05	1.00	1.04	1.09	1.01	n.p.	n.p.	n.p.	1.04
Private health insurance	1.05	1.01	1.04	1.08	1.02	n.p.	n.p.	n.p.	1.04
Self-funded	0.93	0.85	0.80	0.81	0.76	n.p.	n.p.	n.p.	0.86
Workers compensation	1.05	1.08	0.93	0.97	1.00	n.p.	n.p.	n.p.	1.03
Motor vehicle third party personal claim	1.32	0.95	1.16	1.09	1.27	n.p.	n.p.	n.p.	1.11
Department of Veterans' Affairs	1.05	1.00	1.12	1.19	0.98	n.p.	n.p.	n.p.	1.06
Other ^(e)	2.01	1.01	0.94	1.10	1.03	n.p.	n.p.	n.p.	1.11
Patient election status not reported	1.20	0.90	..	..	..	n.p.	n.p.	n.p.	1.05
Total	1.04	0.96	0.98	1.04	0.97	n.p.	n.p.	n.p.	1.00

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

(b) Relative stay index based on all hospitals using the indirect method. The indirectly standardised relative stay index is not technically comparable between cells but is a comparison of the hospital group with the national average based on the casemix of that group.

(c) Includes separations whose patient election status was *Public* and whose funding source was reported as *Australian Health Care agreements*, *Reciprocal Health Care agreements*, *Other hospital or public authority*, *Other* or *Not reported*, and most patients in *Public psychiatric hospitals*.

(d) Includes patients whose funding source was reported as *Australian Health Care Agreements*, *Other hospital or public authority* and most patients in *Public psychiatric hospitals*.

(e) Includes patients whose funding source was reported as *Other compensation*, *Department of Defence*, *Correctional facilities*, *Other hospital or public authority*, *Other* and *Unknown*.

.. Not applicable.

n.p. Not published

Table 4.12: Relative stay index^(a), directly and indirectly standardised by hospital sector, and medical/surgical/other type of AR-DRG, states and territories, 2002–03

Type of hospital	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Indirectly standardised relative stay index^(b)									
Public hospitals	1.03	0.93	0.93	1.02	0.95	0.99	1.06	1.16	0.98
Medical	1.01	0.90	0.91	1.02	0.93	0.97	1.07	1.10	0.96
Surgical	1.07	0.98	0.98	1.03	1.01	1.04	1.05	1.35	1.02
Other	1.19	0.98	1.03	0.99	1.00	1.06	0.94	1.22	1.06
Private hospitals	1.04	1.02	1.05	1.08	1.02	n.p.	n.p.	n.p.	1.04
Medical	1.24	1.07	1.14	1.13	1.11	n.p.	n.p.	n.p.	1.14
Surgical	0.94	0.98	0.97	1.05	0.95	n.p.	n.p.	n.p.	0.97
Other	0.88	0.95	0.97	0.97	0.92	n.p.	n.p.	n.p.	0.94
All hospitals	1.04	0.96	0.98	1.04	0.97	1.03	n.p.	n.p.	1.00
Medical	1.05	0.94	0.98	1.05	0.97	1.02	n.p.	n.p.	1.00
Surgical	1.02	0.98	0.97	1.04	0.98	1.04	n.p.	n.p.	1.00
Other	1.05	0.97	0.99	0.98	0.97	1.06	n.p.	n.p.	1.00
Directly standardised relative stay index^(c)									
Public hospitals	1.05	0.94	0.95	1.03	0.97	1.03	1.09	n.p.	0.99
Medical	1.03	0.91	0.92	1.03	0.94	1.01	1.10	n.p.	0.96
Surgical	1.08	0.99	0.99	1.04	1.01	1.07	1.07	n.p.	1.03
Other	1.19	1.00	1.04	1.00	1.00	1.09	1.10	n.p.	1.07
Private hospitals	1.13	1.07	1.10	1.13	1.06	n.p.	n.p.	n.p.	1.09
Medical	1.26	1.13	1.16	1.19	1.13	n.p.	n.p.	n.p.	1.17
Surgical	0.93	0.97	0.98	1.04	0.96	n.p.	n.p.	n.p.	0.97
Other	0.87	0.95	0.98	0.98	0.91	n.p.	n.p.	n.p.	0.93
All hospitals	1.04	0.96	0.98	1.05	0.98	n.p.	n.p.	n.p.	1.00
Medical	1.05	0.95	0.98	1.06	0.98	n.p.	n.p.	n.p.	1.00
Surgical	1.02	0.98	0.98	1.04	0.99	n.p.	n.p.	n.p.	1.00
Other	1.05	0.97	1.00	0.99	0.97	n.p.	n.p.	n.p.	1.00

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

(b) The indirectly standardised relative stay index is not technically comparable between cells but is a comparison of the hospital group with the national average based on the casemix of that group.

(d) The directly standardised relative stay index is rescaled so each group represents the national casemix and is therefore directly comparable between cells.

n.a. Not available.

n.p. Not published

Table 4.13: Emergency department waiting times^(a) by triage category and public hospital peer group, states and territories, 2002–03

Triage category and peer group	NSW^(b)	Vic	Qld	WA	SA^(c)	Tas	ACT	NT	Total
Principal referral and women's and children's hospitals									
Number of hospitals in peer group	22	19	16	4	5	2	1	1	70
Number of reporting hospitals	21	18	13	4	5	2	1	1	65
Estimated proportion of emergency visits (%) ^(d)	100	89	100	98	100	92	100	100	97
Number of patients seen	781,331	678,038	522,974	178,948	217,239	58,537	50,763	36,768	2,524,598
Proportion of patients seen on time (%)									
1 – Resuscitation	100	100	99	97	99	93	n.p.	n.p.	99
2 – Emergency	74	84	73	69	67	54	n.p.	n.p.	75
3 – Urgent	49	76	53	54	45	58	n.p.	n.p.	58
4 – Semi-urgent	53	65	51	47	47	50	n.p.	n.p.	55
5 – Non-urgent	81	85	72	30	84	86	n.p.	n.p.	76
<i>Total</i>	57	73	56	51	51	56	<i>n.p.</i>	<i>n.p.</i>	59
Estimated proportion of patients who were subsequently admitted (%)									
1 – Resuscitation	89	87	84	95	n.a.	85	n.p.	n.p.	87
2 – Emergency	72	75	68	64	n.a.	57	n.p.	n.p.	70
3 – Urgent	52	54	41	52	n.a.	41	n.p.	n.p.	49
4 – Semi-urgent	24	27	15	25	n.a.	15	n.p.	n.p.	23
5 – Non-urgent	8	9	5	13	n.a.	4	n.p.	n.p.	8
<i>Total</i>	35	39	28	38	<i>n.a.</i>	29	<i>n.p.</i>	<i>n.p.</i>	34
Proportion of patients in each triage category (%)									
1 – Resuscitation	1	1	1	1	2	1	n.p.	n.p.	1
2 – Emergency	8	9	8	12	11	10	n.p.	n.p.	9
3 – Urgent	34	32	36	32	37	37	n.p.	n.p.	34
4 – Semi-urgent	38	47	47	44	46	46	n.p.	n.p.	44
5 – Non-urgent	11	10	9	11	4	6	n.p.	n.p.	10
<i>Total</i>	100	100	100	100	100	100	<i>n.p.</i>	<i>n.p.</i>	100
Large hospitals									
Number of hospitals in peer group	21	12	8	2	2	1	1	1	48
Number of reporting hospitals	21	1	8	2	2	1	1	1	37
Estimated proportion of emergency visits (%) ^(d)	100	15	102	99	100	99	100	100	83
Number of patients seen	520,219	36,182	259,581	54,976	42,052	19,586	45,388	29,332	1,007,316
Proportion of patients seen on time (%)									
1 – Resuscitation	100	n.p.	99	58	99	n.p.	n.p.	n.p.	97
2 – Emergency	79	n.p.	72	42	60	n.p.	n.p.	n.p.	73
3 – Urgent	66	n.p.	61	37	57	n.p.	n.p.	n.p.	63
4 – Semi-urgent	69	n.p.	64	35	55	n.p.	n.p.	n.p.	65
5 – Non-urgent	91	n.p.	87	25	87	n.p.	n.p.	n.p.	87
<i>Total</i>	72	<i>n.p.</i>	68	35	58	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	68

(continued)

Table 4.13 (continued): Emergency department waiting times^(a) by triage category and public hospital peer group, states and territories, 2002–03

Triage category and peer group	NSW^(b)	Vic	Qld	WA	SA^(c)	Tas	ACT	NT	Total
Estimated proportion of patients who were subsequently admitted (%)									
1 – Resuscitation	92	n.p.	78	88	n.a.	n.p.	n.p.	n.p.	87
2 – Emergency	73	n.p.	59	57	n.a.	n.p.	n.p.	n.p.	67
3 – Urgent	48	n.p.	27	32	n.a.	n.p.	n.p.	n.p.	40
4 – Semi-urgent	20	n.p.	8	11	n.a.	n.p.	n.p.	n.p.	15
5 – Non-urgent	6	n.p.	2	4	n.a.	n.p.	n.p.	n.p.	4
<i>Total</i>	29	<i>n.p.</i>	15	19	<i>n.a.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	23
Proportion of patients in each triage category (%)									
1 – Resuscitation	1	n.p.	0	0	0	n.p.	n.p.	n.p.	0
2 – Emergency	6	n.p.	5	6	6	n.p.	n.p.	n.p.	5
3 – Urgent	29	n.p.	28	28	26	n.p.	n.p.	n.p.	28
4 – Semi-urgent	44	n.p.	50	56	62	n.p.	n.p.	n.p.	48
5 – Non-urgent	12	n.p.	18	10	6	n.p.	n.p.	n.p.	14
<i>Total</i>	100	<i>n.p.</i>	100	100	100	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	100
Medium hospitals									
Number of hospitals in peer group	36	30	16	11	13	0	0	0	106
Number of reporting hospitals	7	0	0	8	6	0	0	0	21
Estimated proportion of emergency visits (%) ^(d)	29	n.a.	n.a.	99	73	..	..	..	33
Number of patients seen	125,990	n.a.	n.a.	120,530	95,558	..	..	..	342,078
Proportion of patients seen on time (%)									
1 – Resuscitation	100	n.a.	n.a.	98	n.p.	..	..	..	98
2 – Emergency	89	n.a.	n.a.	93	n.p.	..	..	..	85
3 – Urgent	81	n.a.	n.a.	83	n.p.	..	..	..	78
4 – Semi-urgent	81	n.a.	n.a.	80	n.p.	..	..	..	75
5 – Non-urgent	92	n.a.	n.a.	92	n.p.	..	..	..	91
<i>Total</i>	84	<i>n.a.</i>	<i>n.a.</i>	83	<i>n.p.</i>	..	..	..	79
Estimated proportion of patients who were subsequently admitted (%)									
1 – Resuscitation	77	n.a.	n.a.	78	n.a.	..	..	..	77
2 – Emergency	56	n.a.	n.a.	54	n.a.	..	..	..	55
3 – Urgent	42	n.a.	n.a.	35	n.a.	..	..	..	38
4 – Semi-urgent	10	n.a.	n.a.	10	n.a.	..	..	..	10
5 – Non-urgent	4	n.a.	n.a.	7	n.a.	..	..	..	5
<i>Total</i>	17	<i>n.a.</i>	<i>n.a.</i>	18	<i>n.a.</i>	..	..	..	17
Proportion of patients in each triage category (%)									
1 – Resuscitation	0	n.a.	n.a.	0	0	..	..	..	0
2 – Emergency	4	n.a.	n.a.	5	4	..	..	..	4
3 – Urgent	19	n.a.	n.a.	23	17	..	..	..	20
4 – Semi-urgent	47	n.a.	n.a.	56	61	..	..	..	54
5 – Non-urgent	19	n.a.	n.a.	15	17	..	..	..	17
<i>Total</i>	100	<i>n.a.</i>	<i>n.a.</i>	100	100	..	..	..	100

(continued)

Table 4.13 (continued): Emergency department waiting times^(a) by triage category and public hospital peer group, states and territories, 2002–03

Triage category and peer group	NSW ^(b)	Vic	Qld	WA	SA ^(c)	Tas	ACT	NT	Total
Total^(e)									
Total number of hospitals	218	144	179	94	80	25	3	5	748
Number of reporting hospitals	51	19	21	80	13	4	2	5	195
Estimated proportion of emergency visits (%) ^(d)	73	57	64	96	75	84	100	100	71
Number of patients seen	1,469,232	714,220	782,555	548,006	354,849	97,506	96,151	94,271	4,156,790
Proportion of patients seen on time (%)									
1 – Resuscitation	100	100	99	94	99	91	100	100	99
2 – Emergency	77	84	73	73	65	55	82	60	75
3 – Urgent	57	76	55	64	47	61	74	64	61
4 – Semi-urgent	62	65	55	68	49	59	67	58	61
5 – Non-urgent	86	85	80	87	84	90	79	88	85
<i>Total</i>	65	73	60	73	53	64	74	65	66
Estimated proportion of patients who were subsequently admitted (%)									
1 – Resuscitation	89	87	83	87	n.a.	83	74	61	86
2 – Emergency	71	74	66	61	n.a.	57	47	63	69
3 – Urgent	50	53	37	44	n.a.	41	34	41	46
4 – Semi-urgent	21	27	13	16	n.a.	15	17	16	19
5 – Non-urgent	7	8	4	5	n.a.	4	4	8	6
<i>Total</i>	31	38	24	22	n.a.	27	17	24	29
Proportion of patients in each triage category (%)									
1 – Resuscitation	1	1	1	1	1	1	1	1	1
2 – Emergency	7	9	7	6	9	7	4	5	7
3 – Urgent	31	32	33	21	30	29	20	26	30
4 – Semi-urgent	41	48	48	44	52	49	37	51	45
5 – Non-urgent	12	11	12	28	8	14	38	17	14
<i>Total</i>	100	100	100	100	100	100	100	100	100

(a) Care needs to be taken in interpreting these data. Nationally agreed definitions exist but there may be differences in how data are collected. Data may vary across jurisdictions as a result of differences in clinical practices.

(b) Emergency department occasions of service data for New South Wales are preliminary hence the estimated proportion of emergency visits covered is preliminary. An updated version of this table will be published on the AIHW website when final New South Wales data become available.

(c) Proportion of patients seen on time is based on 1 hospital for the Medium hospitals peer group, and 8 hospitals for the total.

(d) The ratio of number of occasions of service for hospitals reporting to the Emergency Department Waiting times collection divided by the Accident and emergency occasions of service reported to the National Public Hospital Establishments Database as part of the non-admitted patient data collection.

(e) Includes data for hospitals not included in the specified hospital peer groups and contracted private hospitals.

n.a. Not available.

. . Not applicable.

n.p. Not published (because there was only one hospital's data in the peer group).

Table 4.14: Separations^(a) with an adverse event^(b) by hospital sector^(c), Australia, 2002–03

Adverse event	Public		Private		Total	
	Separations with adverse events	Adverse event separations per 100 separations	Separations with adverse events	Adverse event separations per 100 separations	Separations with adverse events	Adverse event separations per 100 separations
External cause codes						
Y40–Y59 Adverse effects of drugs, medicaments and biological substances	58,139	1.4	15,980	0.6	74,119	1.1
Y60–Y82 Misadventures to patients during surgical and medical care	6,379	0.2	2,472	0.1	8,851	0.1
Y83–Y84 Procedures causing abnormal reactions/complications	128,810	3.1	65,975	2.6	194,785	2.9
Y88 & Y95 Other external causes of adverse events	3,113	0.1	667	0.0	3,780	0.1
Place of occurrence codes						
Y92.22 Health service area	179,742	4.4	80,190	3.1	259,932	3.9
Diagnosis codes						
E89, G97, H59, H95, I97, J95, K91, M96 Selected post-procedural disorders	28,769	0.7	16,121	0.6	44,890	0.7
T81.0 Haemorrhage and haematoma complicating a procedure, n.e.c.	18,356	0.4	10,662	0.4	29,018	0.4
T81.4 Infection following a procedure, n.e.c.	20,335	0.5	9,043	0.4	29,378	0.4
T82–T85 Complications of internal prosthetic devices, implants and grafts	37,882	0.9	20,083	0.8	57,965	0.9
Other diagnoses of complications of medical and surgical care (T80 to T88 and T98.3, not including above)	31,383	0.8	12,317	0.5	43,700	0.7
Total^(d)	209,140	5.1	91,472	3.6	300,612	4.5

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

(b) Separations that included ICD-10-AM diagnosis and/or external cause codes that indicated an adverse event was treated and/or occurred induring the hospitalisation. Other ICD-10-AM codes may also indicate that an adverse event has occurred, and some adverse events are not identifiable using ICD-10-AM codes. Hence these data will underestimate the total number of adverse events.

(c) The data for public hospitals is not comparable with the data for private hospitals because their casemixes differ and recording practices may also differ.

(d) Categories do not sum to the totals because multiple diagnoses and external causes can be recorded for each separation and external cause codes and diagnosis codes can be used together to describe an adverse event.
n.e.c. Not elsewhere classified.