

3 Public hospital establishments

Introduction

This chapter describes the public hospital sector in terms of the number of hospitals, availability of hospital beds, staff employed and specialised services provided. This chapter also provides information on public hospital expenditure and revenue. The main source of data is the National Public Hospital Establishments Database. Data on specialised services, expenditure, staffing and revenue for some small hospitals in Tasmania were incomplete. Data were not provided for a small number of hospitals (see Appendix 4). Expenditure data for New South Wales are preliminary (Table 3.5) while information on staffing and revenue are not available for New South Wales (Tables 3.4 and 3.6). These tables will be updated on the AIHW website when the data have been finalised.

Hospitals and bed numbers

Table 3.1 presents information on the numbers of hospitals and beds and the distribution of hospitals by their size, which has been determined by the number of available beds. There were 748 hospitals and 52,200 beds reported for 2002–03.

The number of hospitals reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of physical hospital buildings or campuses. A more reliable indicator of the availability of hospital services may be the numbers of hospital beds. However, the concept of an available bed is also becoming less important, for example in the light of increasing same day hospitalisations and the provision of hospital in the home care. The comparability of bed numbers can also be affected by the casemix of hospitals with, for example, differing proportions of beds available for special and more general purposes.

Based on numbers of available beds, there were more small hospitals, particularly in those jurisdictions that cover large geographic areas. The majority of beds were in larger hospitals and in more densely populated areas. Although 71% of hospitals had fewer than 50 beds, these small hospitals had less than 20% of total available beds. The largest hospital had 818 beds and the median hospital size was 25 beds.

Further detail about the characteristics and numbers of public hospitals is included in Appendix 4 and, by public hospital peer group, in Tables 4.2 and 4.3.

Geographical distribution of beds

The Remoteness Area classification is used in Table 3.2 to present information on the geographical distribution of public hospitals and available beds, and on the number of available beds per 1,000 population. Information on the Remoteness Area classification is included in Appendix 3.

On a Remoteness Area basis, the highest number of hospitals was in outer regional areas (224) and the largest number of beds was in major cities (32,218).

Nationally, there were 2.7 public hospital beds per 1,000 population. The ratio of public hospital beds in a jurisdiction to the population resident in the jurisdiction ranged from 2.1 beds per 1,000 population in the Australian Capital Territory to 3.2 beds per 1,000 population in South Australia.

On a Remoteness Area basis, the ratio of public hospital beds in an area to the population resident in the area ranged from 2.5 beds per 1,000 population nationally in major cities, to 2.8 beds per 1,000 population in regional areas and 5.1 beds per 1,000 population in remote and very remote areas. This distribution of beds is reflected in separation rates for public hospitals by geographical area (see Figure 7.8 and Table 7.12).

These data should be interpreted noting that hospitals based in central locations can also serve patients who reside in other areas of a state or territory or in other jurisdictions. The patterns of bed availability may also reflect a number of factors including patterns of availability of other health care services, patterns of disease and injury, and the poor health of Indigenous people, who have higher population concentrations in remote areas.

Specialised services

Data relating to the availability of specialised services (such as obstetric/maternity services, intensive care units, cancer treatment centres and organ transplant services) in public acute hospitals for all states and territories are presented in Table 3.3. By far, the most common specialised services offered by hospitals were domiciliary care services and services provided by obstetric/maternity and nursing home care units. By contrast, acute spinal cord injury units and pancreas, heart and liver transplant services were provided by only a few hospitals, reflecting the highly specialised nature of those services.

Most specialised services were in hospitals located in major cities, for example with all 7 *Acute spinal cord injury* units being located in *Major cities*. However, other services were more spread with 2 of the 13 *Burns units (level III)* being in regional areas and 67 *Obstetric/maternity services* being in Major cities, 174 in regional hospitals and 31 in remote hospitals.

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

The existence of a specialised unit does not necessarily imply the delivery of large numbers of services in that unit. For example, there were some smaller hospitals that reported having an obstetric unit and reported less than one delivery a week on average to the National Hospital Morbidity Database. There are also a few hospitals that reported not having an obstetric unit, that reported two or more deliveries a day.

For information on service-related indicators of specialised services, see Appendix 5 on Service Related Groups.

Staffing

Information on the number of full-time equivalent staff employed in public hospitals by state and territory is presented in Table 3.4, as the average available staff for the year. The collection of data by staffing category is not consistent among states and territories – for some jurisdictions, best estimates are reported for some staffing categories. Data for New South Wales are not available and Table 3.4 will be updated on the AIHW website when these data are available.

Nurses constituted the largest group of full-time equivalent staff employed in the public hospital sector; registered nurses were the largest group in those states and territories for which data was available for staffing categories.

Information on numbers of visiting medical officers (VMOs), who are contracted by hospitals to provide services to public patients and paid on a sessional or fee-for-service basis in public hospitals, is not available due to problems in the collection of systematic data on the hours, sessions and/or services provided by VMOs in many hospitals. (See Table 3.5 for data on expenditure on VMOs.)

Variation in some staffing categories (in particular, *Other personal care staff* and *Domestic and other staff*) is most likely due to different reporting practices within the states. Queensland, in particular, has noted that there is little difference between these categories, and that an employee may perform different functions within these two categories on different days. South Australia, Tasmania, and Victoria did not provide data on *Other personal care staff* and these staff are included in the *Diagnostic and allied health* and *Domestic and other* staffing categories.

The outsourcing of services with a large labour-related component (e.g. food services and domestic services) can have a large impact on the staffing figures. Differences in outsourcing may explain some of the differences in full-time equivalent staff in some staffing categories and also some of the differences between the states and territories.

Recurrent expenditure by hospitals

Nationally, recurrent expenditure by public acute and psychiatric hospitals was \$18,323 million in 2002–03 (Table 2.1). Information on gross recurrent expenditure, categorised into salary and non-salary expenditure, is presented in Table 3.5. Data for New South Wales are preliminary and this table will be updated on the AIHW website when these data are available.

There was an increase in expenditure of 8.8% (\$1.5 billion) in current prices between 2001–02 and 2002–03. In constant prices (referenced to 2001–02), national expenditure was \$17,703 million in 2002–03, and represented a real increase in expenditure of 5.1% over 2001–02.

The largest contributor to these increases was an increase in recurrent expenditure of \$579 million (current prices) by New South Wales, which included \$304 million increase for salaries and wages expenditure. There was an increase of \$416 million (current prices) for Victoria, which included a \$280 million increase for salaries and wages. The implementation of revised annual reporting structures in 2002–03 resulted in expenditure by Victorian public hospitals being more accurately segmented into expenditure on residential aged care (nursing homes and aged care hostels) and expenditure on 'public hospital services'. It is estimated that the effect of this change was around \$70 million of expenditure on 'public hospital services' being incorrectly excluded in 2001–02 and previous years.

The largest share of expenditure for 2002–03 was for salary payments. Even when payments to VMOs are excluded, salary payments accounted for 62% of the \$18.3 billion spent within the public hospital system. Salary payments include salaries and wages, payments to staff on paid leave, workers compensation leave and salaries paid to contract staff where the contract was for the supply of labour and where full-time equivalent staffing data are available.

Medical and surgical supplies (which include consumable supplies only and not equipment purchases), administrative expenses and drug supplies were the major non-salary expenses

for public hospitals nationally. Data for Queensland includes payments for pathology provided by the state-wide pathology services.

Depreciation has also been reported in Table 3.5. The data show that there is variation between states and territories in reporting, ranging from 6.0% of total expenditure in Queensland to 3.2% in Western Australia and 0.9% for the Northern Territory. No data were available on depreciation for South Australia and Tasmania.

Hospital revenue

Public hospital revenue from patients and other sources (excluding general revenue payments received from state or territory governments) is reported in Table 3.6. In this table, states and territories have reported revenue against three categories: *Patient revenue*, *Recoveries* (income from the use of hospital facilities by salaried medical officers or private practitioners exercising their rights of private practice, and other recoveries), and *Other revenue* (such as from charities). In data reported for Queensland, *Patient revenue* includes revenue for items such as pharmacy and ambulance, which could be considered as *Recoveries*. Data for New South Wales are not available and Table 3.6 will be updated on the AIHW website when these data are available.

Revenue as a proportion of total expenditure was variable across states and territories. Public hospital revenue in Tasmania represented 14% of expenditure, whereas public hospital revenues in Queensland, the Northern Territory and South Australia represented less than 5% of expenditure.

There is some variation among the states and territories in the treatment of revenue data. For example, Victoria's *Other revenue* includes some Commonwealth program grants that are paid directly to hospitals (for example, Rural Health Services Program). In contrast, the Northern Territory does not include Commonwealth grants in its revenue figures. For 2002–03, Victoria improved its validation process and reduced inadvertent reporting of revenue from nursing home entities attached to hospitals that had been included in revenue data by some hospitals in previous years.

There is also some inconsistency in the treatment of income from asset sales. Western Australia netted out asset sales in their capital expenditure accounts, and South Australia netted out land sales in their capital expenditure accounts and reported sales from other surplus goods in the revenue figures. Both the Australian Capital Territory and the Northern Territory reported revenue from asset disposal as part of *Other revenue*. Victoria and Queensland account for asset sales in their capital expenditure accounts. The income from asset disposal (apart from major assets such as land, buildings and some motor vehicles) is usually not very significant as capital assets are generally retained until they are either worn out or obsolete, making their residual value comparatively small. Sometimes there is even a net cost incurred in disposing of an asset.

Other expenditure and revenue related to hospitals

Expenditure reported in Table 3.5 is largely expenditure by hospitals and not necessarily all expenditure on hospital services by the state or territory government. Revenue reported in Table 3.6 is largely revenue received by individual hospitals, and does not necessarily

include all revenue received by the state or territory government for provision of hospital services.

For example, for some states and territories, expenditure on services purchased by the state or territory government from private hospitals is not included in Table 3.5. Expenditure on public patients (see patient election status in chapter 6) in other jurisdictions is also not identified in Table 3.5 for the purchasing jurisdiction, although it would be largely reflected as expenditure in other jurisdictions' columns in Table 3.5. It would not be included in Table 3.6, which excludes general revenue payments from the state and territory governments.

New South Wales, for example, reported \$88.4 million as expenditure on New South Wales residents treated as public patients in other jurisdictions in 2001-02, and \$1.7 million as revenue for treatment of residents of other jurisdictions as public patients in its hospital system (a net \$86.7 million outflow).

Also not included in the Tables is expenditure by states and territories on services purchased by the state and territory governments (rather than by individual public hospitals) from private hospitals. New South Wales, for example, reported that the state government spent \$74.8 million on services reported from two private hospitals in 2001-02.

Notes on financial data

Financial data reported from the National Public Hospital Establishments Database are not comparable with data reported in the Institute's annual publication *Health Expenditure Australia* (AIHW 2003b). For the latter, trust fund expenditure is included (whereas it is not generally included in the data here), and hospital expenditure may be defined to cover activity not covered by this data collection.

Capital formation expenditure is not reported in this publication. Not all jurisdictions were able to report using the *National Health Data Dictionary* (NHDD) (AIHW 2002b) categories and the comparability of the data may not be adequate for reporting.

It should also be noted that, because some states and territories have not fully implemented accrual accounting procedures and systems, expenditure and revenue presented in the current report may be mixtures of expenditure/payments and revenue/receipts, respectively. Depreciation represents a significant portion of expenditure and has been excluded from expenditure totals to improve comparability across jurisdictions.

Table 3.1: Number of public acute and psychiatric hospitals^(a) and available beds^(b), by hospital size, states and territories, 2002-03

Hospital size ^(c)	NSW	Vic ^(d)	Qld	WA	SA	Tas	ACT	NT	Total
Hospitals									
10 or less beds	27	36	66	25	6	15	1	0	176
More than 10 to 50 beds	112	49	76	50	57	7	0	2	353
More than 50 to 100 beds	32	24	11	8	8	0	0	1	84
More than 100 to 200 beds	23	13	14	5	3	1	1	1	61
More than 200 to 500 beds	18	21	9	4	5	2	1	1	61
More than 500 beds	6	1	3	2	1	0	0	0	13
Total	218	144	179	94	80	25	3	5	748
Available beds									
10 or less beds	138	235	222	187	35	74	10	..	901
More than 10 to 50 beds	2,859	1,193	1,864	1,152	1,526	167	..	50	8,811
More than 50 to 100 beds	2,340	1,758	808	555	569	..	..	60	6,090
More than 100 to 200 beds	3,523	1,874	2,029	716	496	131	179	164	9,112
More than 200 to 500 beds	5,595	6,280	2,702	1,243	1,624	764	493	295	18,996
More than 500 beds	3,631	598	2,282	1,164	615	..	..	..	8,290
Total	18,085	11,938	9,907	5,018	4,864	1,136	682	569	52,200

(a) The number of hospitals reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of physical hospital buildings or campuses: See Appendix 4 for more detail.

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

(c) The comparability of bed numbers can be affected by the casemix of hospitals including the extent to which hospitals provide same day admitted services and other specialised services:

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

.. Not applicable.

Table 3.2: Number of hospitals^(a), available beds and ratio of available beds in area to 1,000 population resident in area, by Remoteness Area, public acute and psychiatric hospitals, states and territories, 2002-03

Region	NSW	Vic ^(b)	Qld	WA	SA	Tas	ACT	NT	Total
Hospitals									
Major cities	65	48	20	20	14	..	3	..	192
Inner regional	75	58	26	9	16	8	0	..	170
Outer regional	63	36	55	28	28	13	..	1	224
<i>Total regional</i>	<i>138</i>	<i>94</i>	<i>81</i>	<i>37</i>	<i>44</i>	<i>21</i>	<i>0</i>	<i>1</i>	<i>394</i>
Remote	12	2	34	24	16	2	..	2	92
Very remote	3	..	44	13	6	2	..	2	70
<i>Total remote</i>	<i>15</i>	<i>2</i>	<i>78</i>	<i>37</i>	<i>22</i>	<i>4</i>	<i>..</i>	<i>4</i>	<i>162</i>
Total all regions	218	144	179	94	80	25	3	5	748
Available beds									
Major cities	12,206	8,331	4,764	3,294	2,943	..	682	..	32,218
Inner regional	4,064	2,808	2,064	346	496	856	..	..	10,634
Outer regional	1,562	797	2,151	768	954	246	..	295	6,772
<i>Total regional</i>	<i>5,626</i>	<i>3,605</i>	<i>4,215</i>	<i>1,114</i>	<i>1,450</i>	<i>1,102</i>	<i>..</i>	<i>295</i>	<i>17,406</i>
Remote	200	2	442	443	354	25	..	224	1,691
Very remote	54	..	486	168	118	9	..	50	885
<i>Total remote</i>	<i>254</i>	<i>2</i>	<i>928</i>	<i>611</i>	<i>472</i>	<i>34</i>	<i>..</i>	<i>274</i>	<i>2,576</i>
Total all regions	18,085	11,938	9,907	5,018	4,864	1,136	682	569	52,200
Ratio of available beds in area to 1,000 population resident in area									
Major cities	2.6	2.3	2.4	2.4	2.7	..	2.1	..	2.5
Inner regional	3.0	2.7	2.1	1.4	2.6	2.8	0.0	..	2.6
Outer regional	3.2	3.1	3.3	4.1	5.3	1.5	..	2.7	3.3
<i>Total regional</i>	<i>3.0</i>	<i>2.8</i>	<i>2.6</i>	<i>2.6</i>	<i>3.9</i>	<i>2.4</i>	<i>0.0</i>	<i>2.7</i>	<i>2.8</i>
Remote	5.1	0.3	4.8	4.9	7.7	3.0	..	5.4	5.2
Very remote	6.8	..	9.1	3.4	8.4	3.5	..	1.0	4.9
<i>Total remote</i>	<i>5.4</i>	<i>0.3</i>	<i>6.3</i>	<i>4.3</i>	<i>7.9</i>	<i>3.1</i>	<i>..</i>	<i>3.0</i>	<i>5.1</i>
Total all regions	2.7	2.5	2.7	2.6	3.2	2.4	2.1	2.9	2.7

(a) The number of hospitals reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of physical hospital buildings or campuses. See Appendix 4 for more detail.

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

(c) The comparability of bed numbers can be affected by the casemix of hospitals including the extent to which hospitals provide same day admitted services and other specialised services.

.. Not applicable.

Table 3.3: Number of public acute hospitals ^(a) with specialised services, by Remoteness Area, states and territories, 2002–03

Specialised services	NSW^(b)	Vic^(c)	Qld	WA	SA^(c)	Tas^(b)	ACT	NT	Total
Acute renal dialysis unit	22	11	10	4	4	2	1	2	56
Major city	13	8	3	4	4	0	1	0	33
Regional	7	3	7	0	0	2	0	1	20
Remote	2	0	0	0	0	0	0	1	3
Acute spinal cord injury unit	2	1	1	2	1	0	0	0	7
Major city	2	1	1	2	1	0	0	0	7
AIDS unit	8	3	4	1	1	0	1	1	19
Major city	7	3	3	1	1	0	1	0	16
Regional	1	0	1	0	0	0	0	0	2
Remote	0	0	0	0	0	0	0	1	1
Alcohol and drug unit	32	16	7	2	3	0	0	1	61
Major city	22	7	4	1	1	0	0	0	35
Regional	10	9	3	1	2	0	0	0	25
Remote	0	0	0	0	0	0	0	1	1
Burns unit (level III)	4	2	2	2	2	1	0	0	13
Major city	3	2	2	2	2	0	0	0	11
Regional	1	0	0	0	0	1	0	0	2
Cardiac surgery unit	11	7	3	4	2	1	1	0	29
Major city	11	7	2	4	2	0	1	0	27
Regional	0	0	1	0	0	1	0	0	2
Clinical genetics unit	11	7	2	2	2	2	1	0	27
Major city	7	6	2	2	2	0	1	0	20
Regional	4	1	0	0	0	2	0	0	7
Coronary care unit	48	29	20	4	10	3	2	2	118
Major city	30	14	10	3	5	0	2	0	64
Regional	18	15	10	1	5	3	0	1	53
Remote	0	0	0	0	0	0	0	1	1
Diabetes unit	19	18	11	4	8	3	1	1	65
Major city	18	15	7	4	8	0	1	0	53
Regional	1	3	4	0	0	3	0	1	12
Domiciliary care service	141	93	30	54	48	0	0	1	367
Major city	29	25	5	9	9	0	0	0	77
Regional	107	68	11	26	27	0	0	0	239
Remote	5	0	14	19	12	0	0	1	51
Geriatric assessment unit	59	33	7	14	15	3	1	0	132
Major city	29	21	3	8	8	0	1	0	70
Regional	30	12	3	6	6	3	0	0	60
Remote	0	0	1	0	1	0	0	0	2
Hospice care unit	37	27	6	18	21	1	1	0	111
Major city	14	8	4	0	5	0	1	0	32
Regional	20	19	2	16	12	1	0	0	70
Remote	3	0	0	2	4	0	0	0	9
Infectious diseases unit	8	11	6	4	5	1	1	1	37
Major city	7	11	5	4	5	0	1	0	33
Regional	1	0	1	0	0	1	0	0	3
Remote	0	0	0	0	0	0	0	1	1
Intensive care unit (level III)	36	17	14	4	5	3	1	2	82
Major city	24	12	8	4	4	0	1	0	53
Regional	12	5	6	0	1	3	0	1	28
Remote	0	0	0	0	0	0	0	1	1
In-vitro fertilisation unit	3	5	0	1	2	0	0	0	11
Major city	3	2	0	1	2	0	0	0	8
Regional	0	3	0	0	0	0	0	0	3
Maintenance renal dialysis centre	33	53	19	11	9	2	1	3	131
Major city	17	19	5	6	6	0	1	0	54
Regional	15	34	12	3	2	2	0	1	69
Remote	1	0	2	2	1	0	0	2	8

(continued)

Table 3.3 (continued): Number of public acute hospitals^(a) with specialised services, by Remoteness Area, states and territories, 2002–03

Specialised services	NSW^(b)	Vic^(c)	Qld	WA	SA^(c)	Tas^(b)	ACT	NT	Total
Major plastic/reconstructive surgery unit	11	10	4	3	4	2	1	0	35
Major city	11	10	4	3	4	0	1	0	33
Regional	0	0	0	0	0	2	0	0	2
Neonatal intensive care unit (level III)	11	4	3	1	2	1	1	1	24
Major city	10	4	2	1	2	0	1	0	20
Regional	1	0	1	0	0	1	0	1	4
Neurosurgical unit	10	8	6	3	4	1	1	0	33
Major city	10	8	5	3	4	0	1	0	31
Regional	0	0	1	0	0	1	0	0	2
Nursing home care unit	60	77	6	37	47	10	0	0	237
Major city	2	12	0	3	3	0	0	0	20
Regional	50	65	4	19	30	6	0	0	174
Remote	8	0	2	15	14	4	0	0	43
Obstetric/maternity service	86	63	53	28	30	5	2	5	272
Major city	28	15	7	8	7	0	2	0	67
Regional	56	48	35	13	17	4	0	1	174
Remote	2	0	11	7	6	1	0	4	31
Oncology unit	32	33	9	5	7	3	2	0	91
Major city	19	16	7	4	7	0	2	0	55
Regional	13	17	2	1	0	3	0	0	36
Psychiatric unit/ward	34	30	18	16	8	3	2	2	113
Major city	22	23	9	13	8	0	2	0	77
Regional	12	7	9	3	0	3	0	1	35
Remote	0	0	0	0	0	0	0	1	1
Refractory epilepsy unit	5	6	0	3	2	0	0	0	16
Major city	5	6	0	3	2	0	0	0	16
Rehabilitation unit	48	25	15	12	14	3	1	2	120
Major city	28	15	7	8	5	0	1	0	64
Regional	20	10	8	4	9	3	0	1	55
Remote	0	0	0	0	0	0	0	1	1
Sleep centre	11	7	6	2	4	0	0	0	30
Major city	11	7	4	2	4	0	0	0	28
Regional	0	0	2	0	0	0	0	0	2
Specialist paediatric service	42	26	27	9	8	3	2	3	120
Major city	24	13	9	4	4	0	2	0	56
Regional	18	13	16	3	4	3	0	1	58
Remote	0	0	2	2	0	0	0	2	6
Transplantation unit—bone marrow	8	7	5	3	3	1	1	0	28
Major city	8	7	5	3	3	0	1	0	27
Regional	0	0	0	0	0	1	0	0	1
Transplantation unit—heart (including heart/lung)	1	2	1	1	0	0	0	0	5
Major city	1	2	1	1	0	0	0	0	5
Transplantation unit—liver	2	2	2	1	1	0	0	0	8
Major city	2	2	2	1	1	0	0	0	8
Transplantation unit—pancreas	1	1	0	1	0	0	0	0	3
Major city	1	1	0	1	0	0	0	0	3
Transplantation unit—renal	8	6	1	3	1	0	0	0	19
Major city	8	6	1	3	1	0	0	0	19

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

(b) These data were not available for a small number of hospitals, so the number of services is therefore slightly under-enumerated

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

... Not applicable.

Table 3.4: Average full-time equivalent staff ^(a), public acute and psychiatric hospitals, states and territories, 2002–03

Staffing category	NSW ^(b)	Vic ^(c)	Qld ^(d)	WA ^(e)	SA ^(b)	Tas ^(f)	ACT	NT	Total ^(b)
Full-time equivalent staff numbers									
Salaried medical officers	n.a.	4,973	3,425	1,794	1,621	348	295	235	n.a.
Registered nurses	n.a.	19,447	12,283	7,126	5,853	1,566	1,233	450	n.a.
Enrolled nurses	n.a.	2,495	2,212	810	1,666	176	200	429	n.a.
Student nurses	..	..	..	..	39	..	..	..	..
<i>Total nurses</i>	n.a.	21,942	14,495	7,936	7,558	1,742	1,433	879	n.a.
Other personal care staff	n.a.	n.a.	727	8	n.a.	n.a.	117	17	n.a.
Diagnostic & allied health professionals	n.a.	9,747	3,254	2,139	1,905	342	330	255	n.a.
Administrative & clerical staff	n.a.	8,663	4,644	3,102	2,679	496	529	355	n.a.
Domestic & other staff	n.a.	6,156	6,303	3,607	2,042	952	206	449	n.a.
Total staff	n.a.	51,481	32,848	18,586	15,805	3,880	2,910	2,190	n.a.

(a) Where average full-time equivalent (FTE) staff numbers were not available, staff numbers at 30 June 2003 were used. Staff contracted to provide products (rather than labour) are not included.

(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) For Victoria, FTEs may be slightly understated. *Other personal care staff* are included in *Domestic & other staff*.

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

(e) *Other personal care staff* for Western Australia excludes staff on retention who do not work regular hours. Many hospitals were unable to provide a split between nurse categories and these have been reported as *Registered nurses*.

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

n.a. Not available.

.. Not applicable.

Table 3.5: Recurrent expenditure (\$'000), public acute and psychiatric hospitals, states and territories, 2002-03

Recurrent expenditure category	NSW ^(a)	Vic	Qld ^(b)	WA	SA ^(c)	Tas ^(d)	ACT	NT ^(e)	Total
Salary and wages expenditure									
Salaried medical officers	683,961	687,535	347,284	232,684	142,551	32,750	38,901	32,902	2,198,568
Registered nurses	n.a.	1,280,085	682,166	444,598	328,604	87,198	75,062	49,028	2,946,741
Enrolled nurses	n.a.	124,375	92,770	33,512	71,445	7,345	8,838	12,692	350,977
Student nurses	n.a.	..	..	n.a.	1,250	..	..	..	..
<i>Total nurses</i>	<i>1,778,461</i>	<i>1,404,460</i>	<i>774,936</i>	<i>478,110</i>	<i>401,299</i>	<i>94,543</i>	<i>83,900</i>	<i>61,720</i>	<i>5,077,429</i>
Other personal care staff	n.a.	n.a.	27,929	235	n.a.	n.a.	4,938	958	34,060
Diagnostic & allied health professionals	493,148	448,313	180,544	115,857	94,443	19,977	17,375	17,724	1,387,381
Administrative & clerical staff	503,331	384,078	189,587	135,600	104,377	19,731	24,171	21,976	1,382,851
Domestic & other staff	440,785	259,519	238,842	140,297	65,768	43,425	8,496	19,894	1,217,026
Salary expenditure category, not further categorised	..	21,024	..	..	..	..	..	..	21,024
Total salary & wages expenditure	3,899,686	3,204,929	1,759,122	1,102,783	808,438	210,426	177,781	155,174	11,318,339
Non-salary expenditure									
Payments to visiting medical officers	357,104	108,111	59,517	66,372	67,155	11,359	20,234	1,562	691,414
Superannuation payments	354,294	285,836	171,341	107,812	75,942	23,025	23,213	11,072	1,052,535
Drug supplies	319,893	236,774	155,506	94,879	70,139	17,720	10,277	14,279	919,467
Medical & surgical supplies	580,214	340,727	273,760	120,854	81,514	35,098	27,955	17,243	1,477,365
Food supplies	85,048	78,015	24,172	12,545	11,234	4,478	3,907	2,546	221,945
Domestic services	150,644	118,934	84,103	82,238	40,257	12,597	15,861	9,177	513,811
Repairs & maintenance	176,109	105,382	58,699	47,229	34,104	14,020	5,284	4,863	445,690
Patient transport	49,214	24,429	16,954	14,130	11,347	2,795	819	6,228	125,916
Administrative expenses	387,469	317,372	152,135	77,458	38,175	21,508	24,948	12,759	1,031,824
Interest payments	1,082	450	8	14,069	5	n.a.	65	n.a.	15,679
Depreciation	294,357	171,641	177,250	58,514	n.a.	n.a.	13,088	2,152	n.a.
Other recurrent expenditure	75,252	174,791	10,284	7,160	187,187	17,047	24,588	3,930	500,239
Non-salary expenditure, not further categorised	..	8,570	..	..	..	..	..	..	8,570
Total non-salary expenditure excluding depreciation	2,536,323	1,799,391	1,006,479	644,746	617,059	159,647	157,151	83,659	7,004,455
Total non-salary expenditure including depreciation	2,830,680	1,971,032	1,183,729	703,260	n.a.	n.a.	170,239	85,811	n.a.
Total expenditure excluding depreciation	6,436,009	5,004,320	2,765,601	1,747,529	1,425,497	370,073	334,932	238,833	18,322,794
Public acute hospitals	6,235,386	4,974,728	2,687,683	1,702,251	1,348,745	366,377	334,932	238,833	17,888,935
Psychiatric hospitals	200,623	29,592	77,918	45,278	76,752	3,696	..	..	433,859
Total expenditure including depreciation	6,730,366	5,175,961	2,942,851	1,806,043	n.a.	n.a.	348,020	240,985	n.a.
Public acute hospitals	6,518,375	5,146,369	2,854,338	1,759,761	n.a.	n.a.	348,020	n.a.	n.a.
Psychiatric hospitals	211,991	29,592	88,513	46,282	n.a.	n.a.	..	..	n.a.

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

New South Wales hospital expenditure recorded against special purposes and trust funds is excluded. Other personal care staff are included in *Diagnostic & allied health professionals* and *Domestic & other staff*.

(b) Pathology services are purchased from a statewide pathology service rather than being provided by hospital employees.

(c) South Australian *Other personal care staff* are included in *Diagnostic & allied health professionals* and *Domestic & other staff*. *Interest payments* are included in *Administrative expenses*. Termination payments are included in *Other recurrent expenditure*.

(d) Tasmanian data for one small hospitals not supplied and data for five other small hospitals incomplete. *Other personal care staff* are reported as part of *Domestic & other staff*.

(e) *Interest payments* are not reported.

.. Not applicable.

n.a. Not available.

Table 3.6: Revenue (\$'000), public acute and psychiatric hospitals, states and territories, 2002–03

Revenue source	NSW ^(a)	Vic	Qld ^(b)	WA	SA	Tas ^(c)	ACT	NT	Total ^(a)
Patient revenue	n.a.	150,747	58,897	54,294	53,931	31,607	17,498	6,857	n.a.
Recoveries	n.a.	69,176	20,266	26,246	2,759	8,275	5,777	3,171	n.a.
Other revenue ^(d)	n.a.	200,904	48,292	25,807	13,211	12,114	3,837	450	n.a.
Total revenue	n.a.	420,827	127,455	106,347	69,901	51,996	27,112	10,478	n.a.
Public acute hospitals	n.a.	419,553	124,862	104,987	67,582	51,880	27,112	10,478	n.a.
Psychiatric hospitals	n.a.	1,274	2,593	1,360	2,319	116	..	..	n.a.

(a) 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.

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

(c) Tasmanian data for 5 small hospitals not supplied.

(d) Includes investment income, income from charities, bequests and accommodation provided to visitors.

.. Not applicable.

n.a. Not available.