

7 Admitted patient care overview

This chapter draws on data from the National Hospital Morbidity Database (NHMD) to present an overview of admitted patient care in Australia's hospitals. This chapter is particularly focused on information related to total admitted patient activity.

Subsequent chapters present information on subsets of admitted patient care:

- same-day acute admitted patient care (*Chapter 8*)
- overnight acute admitted patient care (*Chapter 9*)
- elective surgery (*Chapter 10*)
- sub- and non-acute care (*Chapter 11*).

Data on admitted patients

The NHMD contains episode-level records from admitted patient morbidity data collection systems in Australian hospitals. The data presented in this chapter include administrative, demographic and clinical data.

Administrative data provides information on:

- how patients were admitted
- the type of care provided
- how patient care ended
- length of stay in hospital
- the source of funding.

Demographic information includes:

- patient age
- patient sex
- Indigenous status
- remoteness area of usual residence
- socioeconomic status of area of usual residence.

Clinical information includes:

- principal diagnoses
- procedures and
- Australian Refined-Diagnosis Related Groups (AR-DRGs).

Terms relevant to admitted patient care data are summarised in Box 7.1.

Box 7.1: Summary of terms and classifications relating to admitted patient care

Statistics on **admitted patients** are compiled when an admitted patient (a patient who undergoes a hospital's formal admission process) completes an episode of admitted patient care and 'separates' from the hospital. This is because most of the data on the use of hospitals by admitted patients are based on information provided at the end of the patients' episodes of care, rather than at the beginning. The length of stay and the procedures carried out are then known and the diagnostic information is more accurate.

Separation is the term used to refer to the episode of admitted patient care, which can be a total hospital stay (from admission to discharge, transfer or death) or a portion of a hospital stay beginning or ending in a change of type of care (for example from acute to rehabilitation). 'Separation' also means the process by which an admitted patient completes an episode of care by being discharged, dying, transferring to another hospital or changing type of care.

Patient day means the occupancy of a hospital bed (or chair in the case of some same-day patients) by an admitted patient for all or part of a day. The length of stay for an overnight patient is calculated by subtracting the date the patient is admitted from the date of separation and deducting days the patient was on leave. A same-day patient is allocated a length of stay of 1 day.

A **same-day** separation occurs when a patient is admitted and separated from the hospital on the same date. An **overnight** separation occurs when a patient is admitted and separated from the hospital on different dates.

The **principal diagnosis** is the diagnosis established after study to be chiefly responsible for occasioning the patient's episode of admitted patient care). An **additional diagnosis** is a condition or complaint that either coexists with the principal diagnosis or arises during the episode of care.

A **procedure** is a clinical intervention that is surgical in nature, carries an anaesthetic risk, requires specialised training and/or requires special facilities or services available only in an acute care setting. Procedures therefore encompass surgical procedures and non-surgical investigative and therapeutic procedures such as X-rays. Client support interventions that are neither investigative nor therapeutic (such as anaesthesia) are also included.

AR-DRG is an Australian system of diagnoses related groups (DRGs). DRGs provide a clinically meaningful way of relating the number and type of patients treated in a hospital (that is, its casemix) to the resources required by the hospital. Each AR-DRG represents a class of patients with similar clinical conditions requiring similar hospital resources. The AR-DRG system is partly hierarchical, with 23 Major Diagnostics Categories, divided into *Surgical, Medical* and *Other* DRG partitions, and then into 665 individual DRGs.

In 2008–09, diagnoses and external causes of injury were recorded using the sixth edition of *the International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM) (NCCH 2008). It comprises classifications of diseases and external causes of injuries and poisoning, based on the World Health Organization version of ICD-10.

The ICD-10-AM classification is hierarchical, with 20 summary disease chapters that are divided into a large number of more specific disease groupings (represented by 3-character codes). Most of the 3-character codes are divided into even larger numbers of very specific disease categories represented by 4- and 5-character codes/ grouped according to chapters, covering broad groups of conditions. In this publication, most diagnosis information is presented at the chapter and 3-character level.

(continued)

Box 7.1 (continued):

Procedures were recorded using the sixth edition of *Australian Classification of Health Interventions* (ACHI) (NCCH 2008). The ACHI classification is divided into 20 chapters by anatomical site. These subchapters are further divided into more specific procedure blocks, ordered from the least invasive to the most invasive. The blocks, which are numbered sequentially, group the very specific procedure information. In this publication, procedures are presented based on the ACHI procedure chapters and the ACHI procedure blocks.

Box 7.2: What are the limitations of the data?

When interpreting the data presented, the reader should note the following:

- Coverage for the NHMD is essentially complete. For 2008–09, all public hospitals were included except for a small mothercraft hospital in the Australian Capital Territory. Private hospital data were not provided for private freestanding day facilities in the Australian Capital Territory and the Northern Territory, and for one private free-standing day facility in Tasmania.
- Hospitals may be re-categorised as public or private between or within years (see *Appendix 2*).
- There may be variation among states and territories in the use of statistical discharges and the use of care types. States and territories varied in whether or not they reported separations for *Newborns with no qualified days* and records for *Hospital boarders* and *Posthumous organ procurement* (see *Appendix 1*).
- The overall quality of the data provided for Indigenous status in 2008–09 is considered to be in need of some improvement, being considered acceptable for data analysis purposes for New South Wales, Victoria, Queensland, Western Australia, South Australia and public hospitals in the Northern Territory (see *Appendix 1*).
- In 2008–09, there were 67 separations that did not have sex reported as male or female, and 6 separations for which date of birth was not reported (age could not be calculated).
- Data on state of hospitalisation should be interpreted with caution because of cross-border flows of patients (see *Appendix 1*). This is particularly the case for the Australian Capital Territory. In 2008–09, about 22% of separations for Australian Capital Territory hospitals were for patients who resided in New South Wales.

Box 7.3: What methods were used?

Readers should note the following:

- Unless otherwise indicated in footnotes, separations with a care type of *Newborn with no qualified days*, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.
- The patient's age is calculated at the date of admission.
- In tables by age group and sex, separations for which age and sex were not reported are included in totals.
- Separation rates are age standardised as detailed in *Appendix 1*.

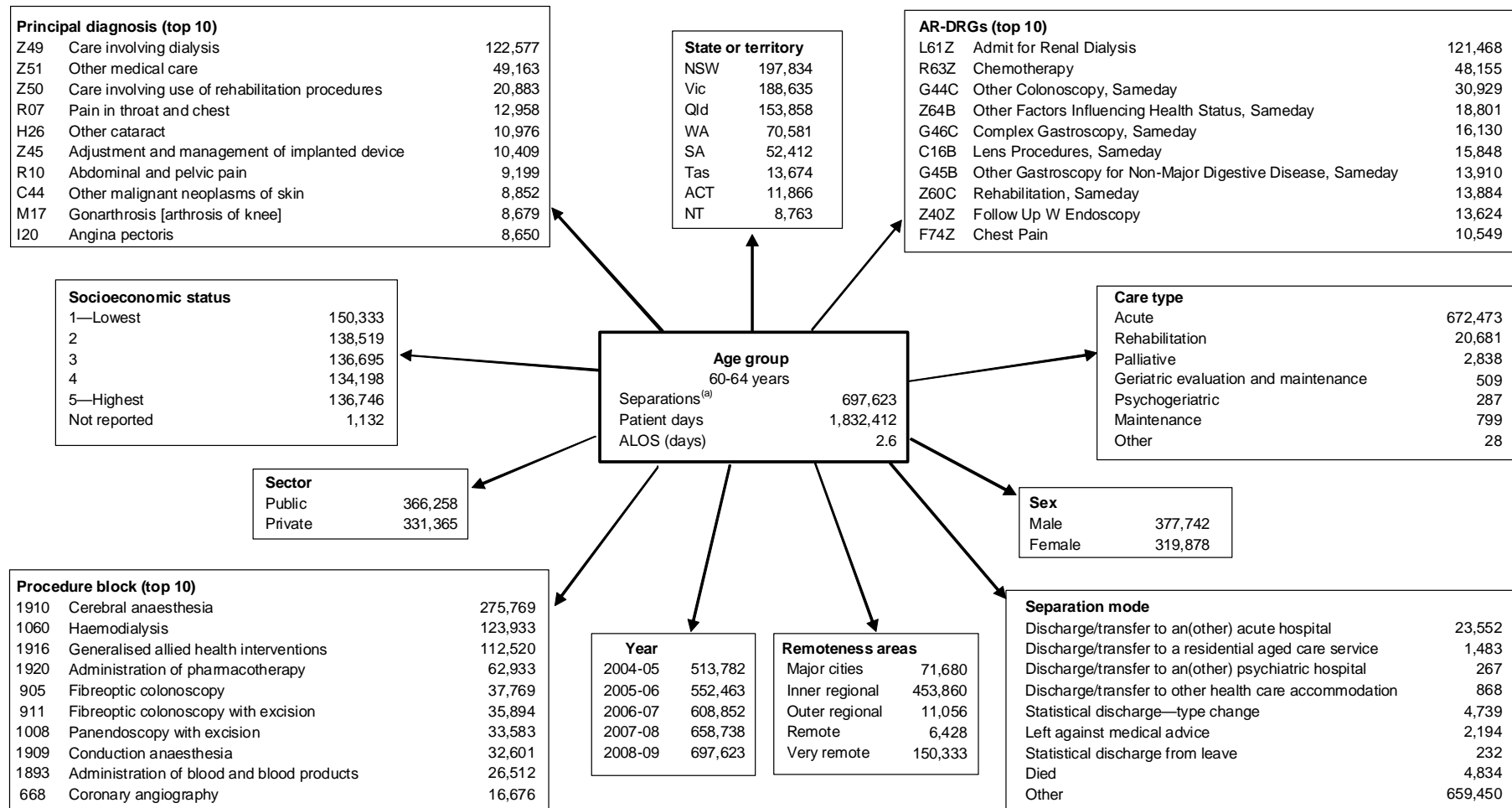
Box 7.3 (continued)

- In some tables, separation rates are accompanied by the standardised separation rate ratio (SRR). If the SRR is greater than 1, then the rate for category was higher than the national average (or, in the case of Indigenous status, than *Other Australians*). The 95% confidence interval of the SRR is also included. If the confidence interval includes 1, then a difference between categories is considered less likely (see *Appendix 1*).
- The data presented on area of usual residence were provided as state or territory and Statistical Local Area (SLA) and/or postcode, and have been aggregated to remoteness areas under the Australian Standard Geographical Classification (ASGC 2006) (see *Appendix 1*).
- Socioeconomic status (SES) groups in this report are based on the Index of Relative Advantage/Disadvantage (IRAD) (from SEIFA 2006) for the area of usual residence (SLA) of the patient. The SLAs are ranked from lowest to highest according to the IRAD. The SLAs are then grouped together so that each of the resulting socioeconomic status groups (SES) contain about 20% of the total Australian population (see *Appendix 1*).

Figure 7.1 demonstrates some of the data included in the NHMD using the example of separations for admitted patients aged 60 to 64 years.

In 2008–09:

- there were approximately 698,000 separations for people aged 60 to 64 years
- the number of separations for people aged 60 to 64 years increased by 35.8% over the period 2004–05 to 2008–09, an average annual increase of 7.9%
- 54.1% of these separations were for males
- 52.5% of these separations were in the public sector
- the majority of separations (94.5%) had a separation mode of *Other*, suggesting that these patients went home at the end of their care
- a small proportion of separations had a separation mode of *Discharged/transferred to an(other) acute hospital* (3.4%) or *Died* (0.7%)
- the most common principal diagnosis was *Care involving dialysis*, followed by *Other medical care* (mostly for chemotherapy sessions)
- the most common Diagnosis related group (AR-DRG) was *Admit for renal dialysis*
- the most common procedure was *Cerebral anaesthesia*, followed by *Haemodialysis*.



Notes:

Abbreviations: AR-DRG—Australian Refined Diagnosis Related Group; ALOS—average length of stay; CC—complication or comorbidity; Cat—Catastrophic; Sev— Severe; W—with; W/O—without.

Figure 7.1: Data reported for separations for persons aged 60–64 years, all hospitals, 2008–09

How has activity changed over time?

From 2007–08 to 2008–09, separations rose 3.5% to 8.15 million. Between 2004–05 and 2008–09, the number of separations rose by an average of 3.8% per year (Table 7.1). Over that period, the average annual rise in separations was higher in private hospitals than in public hospitals. For both hospital sectors, the rate and direction of change in the number of separations varied between funding sources.

Table 7.1: Separations^(a) ('000s), by principal source of funds, public and private hospitals, 2004–05 to 2008–09

	Separations ('000)					Change (per cent)	
	2004–05	2005–06	2006–07	2007–08	2008–09	Ave since 2004–05	Since 2007–08
Public hospitals							
Public patients ^(a)	3,703,459	3,866,522	4,030,707	4,081,111	4,188,501	3.1	2.6
Private health insurance	325,804	350,807	382,085	415,919	451,591	8.5	8.6
Self-funded ^(b)	50,741	52,085	53,385	54,765	58,226	3.5	6.3
Workers compensation	21,644	22,268	22,550	23,296	22,478	0.9	–3.5
Motor vehicle third party personal claim	20,475	21,318	21,664	21,880	23,102	3.1	5.6
Department of Veterans' Affairs	137,203	135,417	131,807	125,645	123,600	–2.6	–1.6
Other ^(c)	17,099	17,659	19,082	21,445	23,525	8.3	9.7
Total	4,276,425	4,466,076	4,661,280	4,744,061	4,891,023	3.4	3.1
Private hospitals							
Public patients ^(a)	92,278	100,092	49,095	76,227	100,619	2.2	32.0
Private health insurance	2,114,158	2,196,184	2,348,872	2,497,892	2,579,128	5.1	3.3
Self-funded ^(b)	260,139	273,530	260,940	267,179	278,086	1.7	4.1
Workers compensation	49,771	52,180	50,735	50,163	54,788	2.4	9.2
Motor vehicle third party personal claim	4,852	5,020	4,610	4,840	4,719	–0.7	–2.5
Department of Veterans' Affairs	208,594	207,525	213,246	205,007	203,840	–0.6	–0.6
Other ^(c)	12,633	11,376	14,139	28,577	36,245	30.1	26.8
Total	2,742,425	2,845,907	2,941,637	3,129,885	3,257,425	4.4	4.1
All hospitals	7,018,850	7,311,983	7,602,917	7,873,946	8,148,448	3.8	3.5

Notes: See Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

(a) 'Public patients' includes separations with a funding source of *Australian Health Care Agreements, Reciprocal health care agreements, Other hospital or public authority* (with a public patient election status) and *No charge raised* (in public hospitals). The majority of separations with a funding source of *No charge raised* in public hospitals were in Western Australia, reflecting that some public patient services were funded through the Medicare Benefit Schedule.

(b) Tasmania was unable to identify all patients whose funding source may have been *Self-funded*, therefore the number of separations in this category may be underestimated and others may be overestimated.

(c) 'Other' includes separations with a funding source of *Other compensation, Department of Defence, Correctional facilities, Other hospital or public authority* (without a public patient election status), *Other, No charge raised* (in private hospitals) and *Not reported*.

Abbreviations: Ave—average.

How much activity was there in 2008–09?

In 2008-09, there were almost 4.9 million public hospital separations and 3.3 million private hospital separations (Table 7.2). The Australian Capital Territory and the Northern Territory do not have public psychiatric hospitals, and admitted patient data for private free-standing day hospital facilities was not available.

Table 7.2: Separations^(a) ('000s) by hospital type, public and private hospitals, states and territories, 2008–09

Hospital type	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Public acute	1,500	1,379	883	466	372	94	90	95	4,880
Public psychiatric	6	0	0	1	2	1	..	..	11
<i>Total public hospitals</i>	<i>1,506</i>	<i>1,380</i>	<i>883</i>	<i>467</i>	<i>375</i>	<i>95</i>	<i>90</i>	<i>95</i>	<i>4,891</i>
Private hospitals									
Private free-standing day hospital facilities	203	182	208	87	47	n.p.	n.p.	n.p.	729
Other private hospitals	705	629	606	276	209	n.p.	n.p.	n.p.	2,528
<i>Total private hospitals</i>	<i>907</i>	<i>811</i>	<i>814</i>	<i>362</i>	<i>256</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>3,257</i>
All hospitals	2,413	2,191	1,697	830	630	n.p.	n.p.	n.p.	8,148

Notes: See Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

Additional information by state and territory is available in Table S7.1 at the end of this chapter.

There were almost 17.9 million public hospital patient days (69% of total patient days) compared to 7.9 million private hospital patient days (Table 7.3). For private hospitals, 78% of separations and 91% of patient days were in *Other private hospitals*.

Table 7.3: Patient days ('000s) by hospital type, public and private hospitals, states and territories, 2008–09

Hospital type	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Public acute	5,885	4,455	2,954	1,588	1,490	367	293	270	17,302
Public psychiatric	229	44	119	59	109	27	..	..	587
<i>Total public hospitals</i>	<i>6,114</i>	<i>4,500</i>	<i>3,073</i>	<i>1,647</i>	<i>1,599</i>	<i>394</i>	<i>293</i>	<i>270</i>	<i>17,889</i>
Private hospitals									
Private free-standing day hospital facilities	203	182	208	87	47	n.p.	n.p.	n.p.	729
Other private hospitals	1,919	1,879	1,798	733	563	n.p.	n.p.	n.p.	7,164
<i>Total private hospitals</i>	<i>2,121</i>	<i>2,061</i>	<i>2,006</i>	<i>820</i>	<i>610</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>7,893</i>
All hospitals	8,235	6,560	5,079	2,467	2,208	n.p.	n.p.	n.p.	25,782

Notes: See Boxes 7.1, 7.2, 7.3 for notes on data limitations and methods.

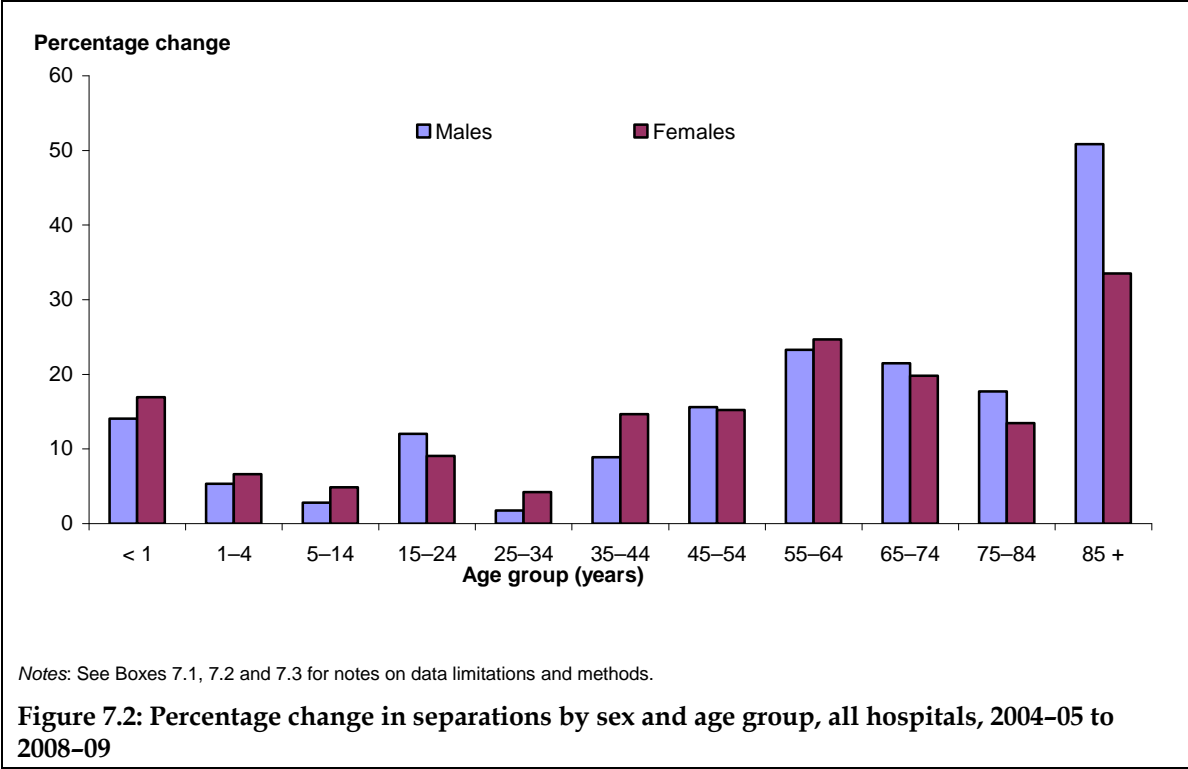
Additional information by state and territory is available in Table S7.1 at the end of this chapter.

Who used these services?

Sex and age group

Changes in activity by the patients' sex and age group over time

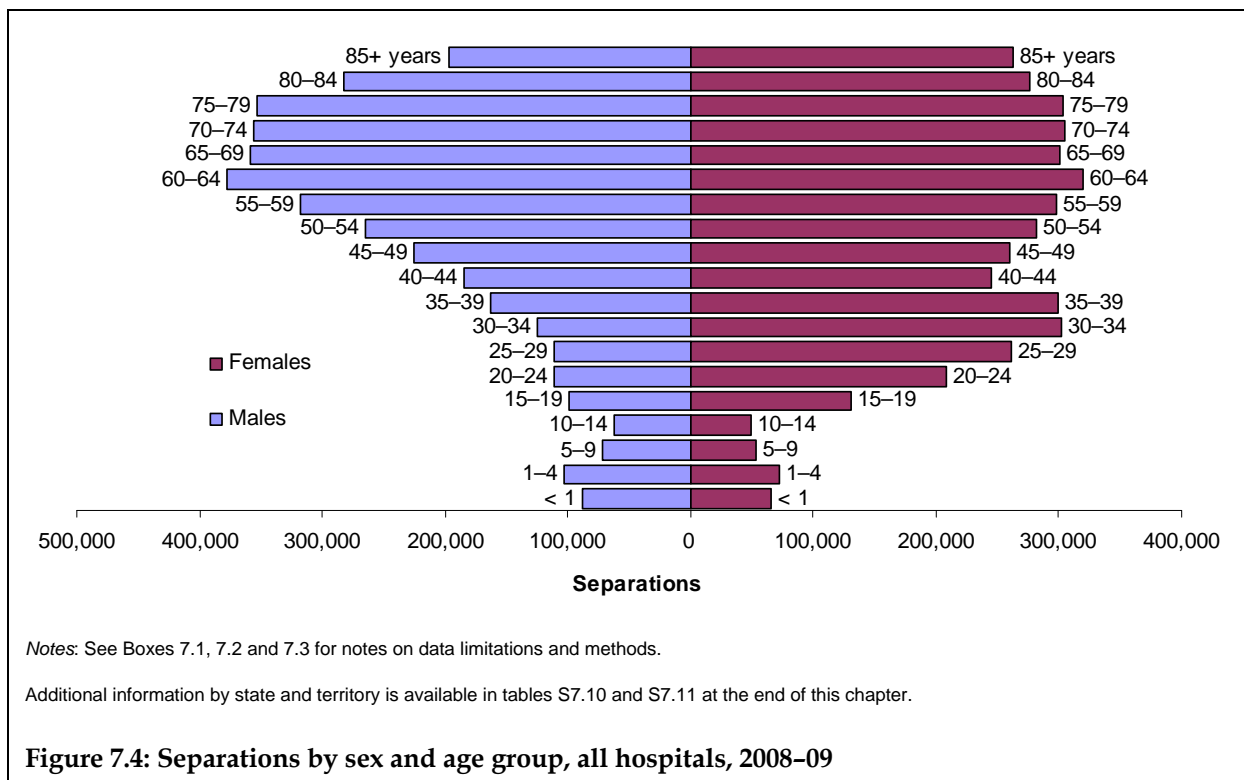
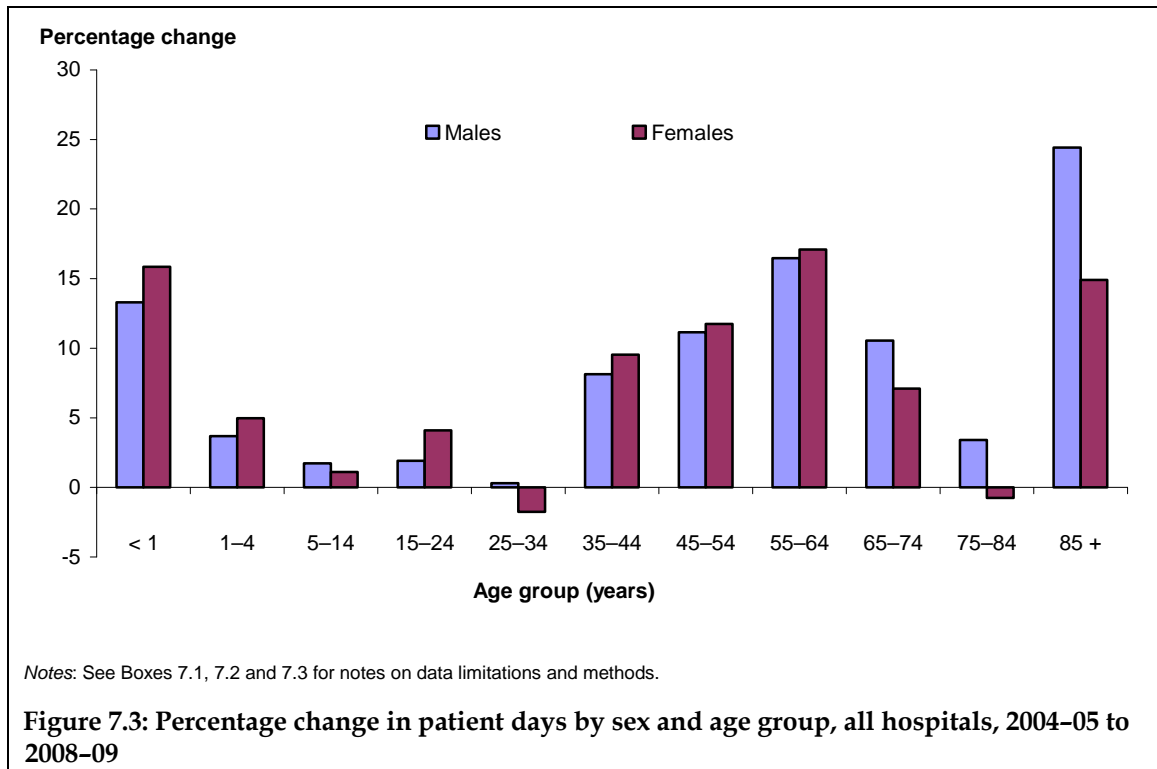
Between 2004-05 and 2008-09, the increase in separations was more marked for males than females, particularly for males aged 85 and over (Figure 7.2). The increase in separations was greatest for males aged 0 to 14 years and 55 to 84 years.



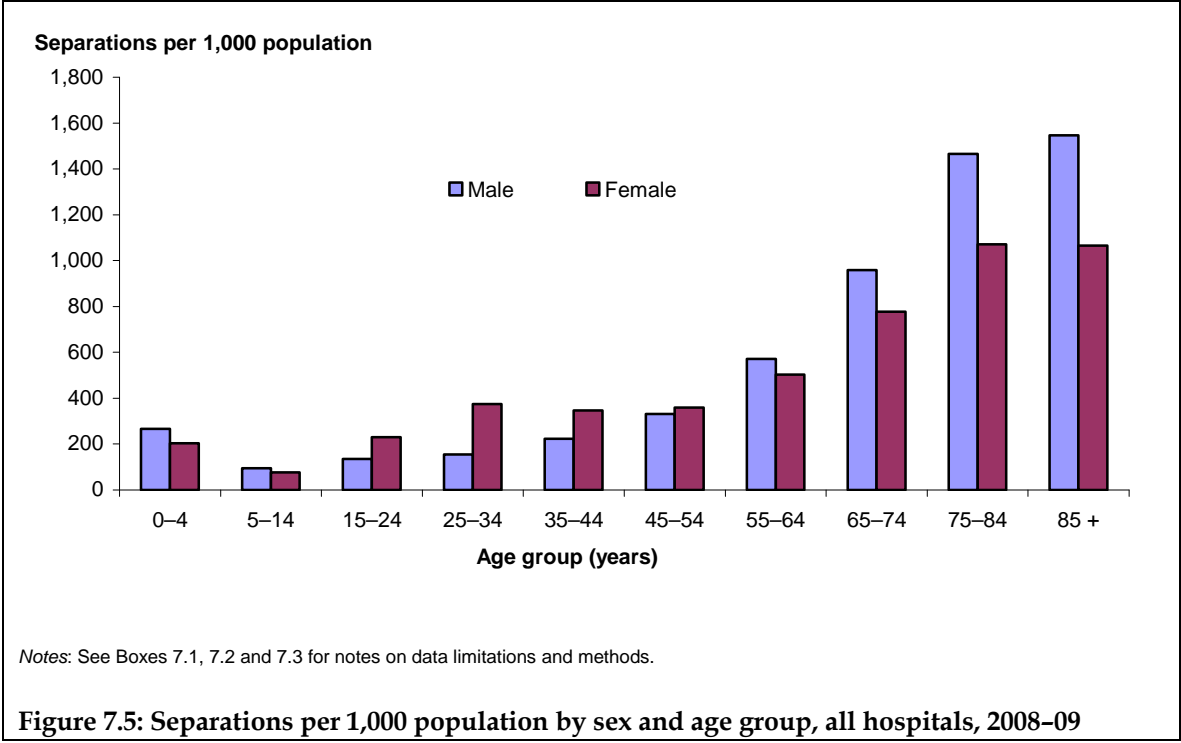
Between 2004-05 and 2008-09, patient days in public hospitals increased by 11.3% for males, and by 6.2% for females (Figure 7.3). The relative size and direction of change in patient days varied by sex and age group.

Sex and age group profile for 2008-09

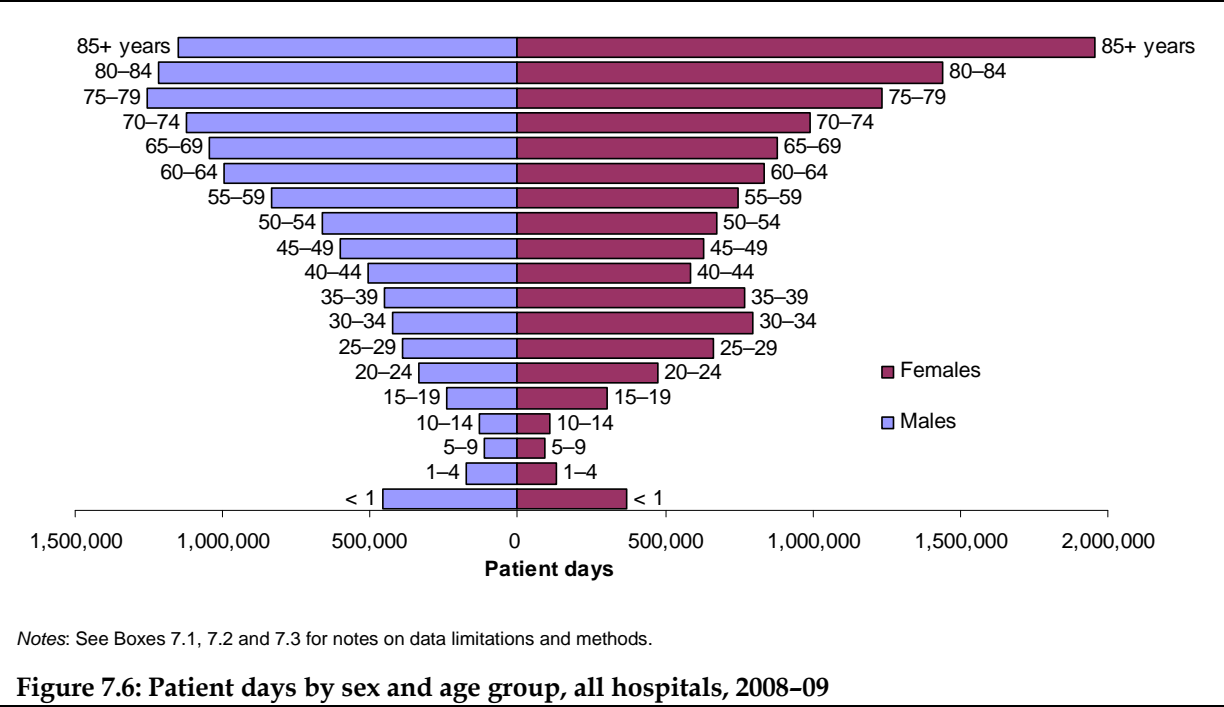
In 2008-09, there were about 4.3 million separations for females compared with 3.9 million separations for males overall. People aged 55 years and over accounted for 52.9% of separations overall (Figure 7.4).



There were more separations per 1,000 population for females than for males in all age groups from 15-54 years in 2008-09 (Figure 7.5). Separations rates increased with age for both males and females from the age group 55 to 64 years and above.



Females accounted for more patient days than males (Figure 7.6). People aged 55 years and over accounted for over 59% of patient days in 2008-09.



Aboriginal and Torres Strait Islander people

Box 7.4: Quality of Indigenous status data

The AIHW report *Indigenous identification in hospital separations data-quality report* (AIHW 2010c) found that the level of Indigenous identification was acceptable for analysis purposes (greater than 80%) for New South Wales, Victoria, Queensland, Western Australia, South Australia and the Northern Territory (public hospitals only).

Nationally, about 89% of Indigenous Australians were identified correctly in hospital admissions data in a recent study (AIHW 2010c), and the 'true' number of separations for *Indigenous Australians* was about 12% higher than reported.

Caution should be used in the interpretation of these data because of jurisdictional differences in data quality. It should also be noted that data presented for the six jurisdictions with data of acceptable quality for analysis purposes are not necessarily representative of the jurisdictions excluded. See *Appendix 1* for more information on the quality of Indigenous status data in the NHMD.

In 2008–09, there were about 291,000 separations for Aboriginal and Torres Strait Islander people. About 98% of these separations were reported for the six jurisdictions with data of sufficient quality for analysis purposes (see above and *Appendix 1*). *Other Australians* includes separations for which the Indigenous status was not reported.

For the six jurisdictions:

- Over 88.6% of separations for *Indigenous Australians* were reported as *Aboriginal but not Torres Strait Islander origin*, 7.8% were reported as *Torres Strait Islander but not Aboriginal origin* and 3.6% were reported as *Aboriginal and Torres Strait Islander origin*.
- Nearly 89.2% of separations for *Indigenous Australians* in 2008–09 were from the public sector (269,000), whereas 59.7% of separations for *Other Australians* were from the public sector.

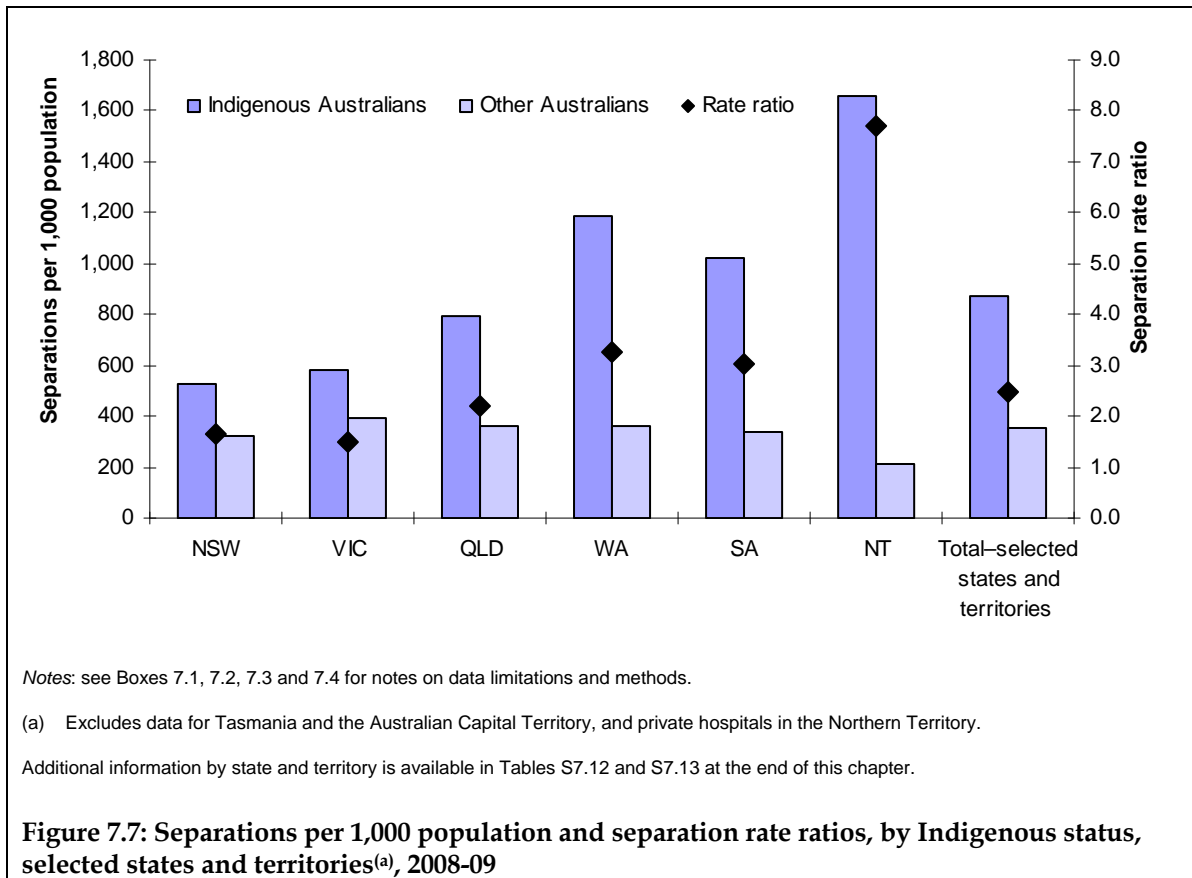
In 2008–09, there were 869.8 separations per 1,000 population for *Indigenous Australians* (Figure 7.7), 2.5 times the separation rate for *Other Australians*. About four-fifths of the difference between these rates was due to higher separation rates for *Indigenous Australians* admitted for maintenance renal dialysis (see *Chapter 8*).

The Northern Territory had the highest separation rate for *Indigenous Australians* (1,656.0 separations per 1,000). In the Northern Territory, the separation rate for *Indigenous Australians* was 7.7 times the rate for *Other Australians*.

Under-identification of Indigenous persons

Using the national estimated Indigenous under-identification level of 89% (see above) (and assuming that the age distributions for unidentified and identified *Indigenous Australians* is similar) the 'true' number of separations for *Indigenous Australians* for 2008–09 could be estimated at about 320,000 separations. As *Other Australians* may include unidentified Aboriginal and Torres Strait Islander people, the 'true' number of *Other Australians* would be reduced, and could be estimated at about 7,536,000 separations.

Using the same method, the 'true' separation rates for *Indigenous Australians* and *Other Australians* for 2008–09 could be estimated as about 974 per 1,000 population and 352 per 1,000, respectively. These rates indicate that, after adjusting for under-identification, *Indigenous Australians* were hospitalised at about 2.8 times the rate for *Other Australians*.



Sex and age group

Table 7.4 presents separations for the six jurisdictions by Indigenous status, sex and age group. In 2008-09:

- 55.7% of separations for *Indigenous Australians* were for females, compared to 52.5% for *Other Australians*
- 11.9% of separations for *Indigenous Australians* were for people aged 65 years and over, compared with 36.5% of separations for *Other Australians*.

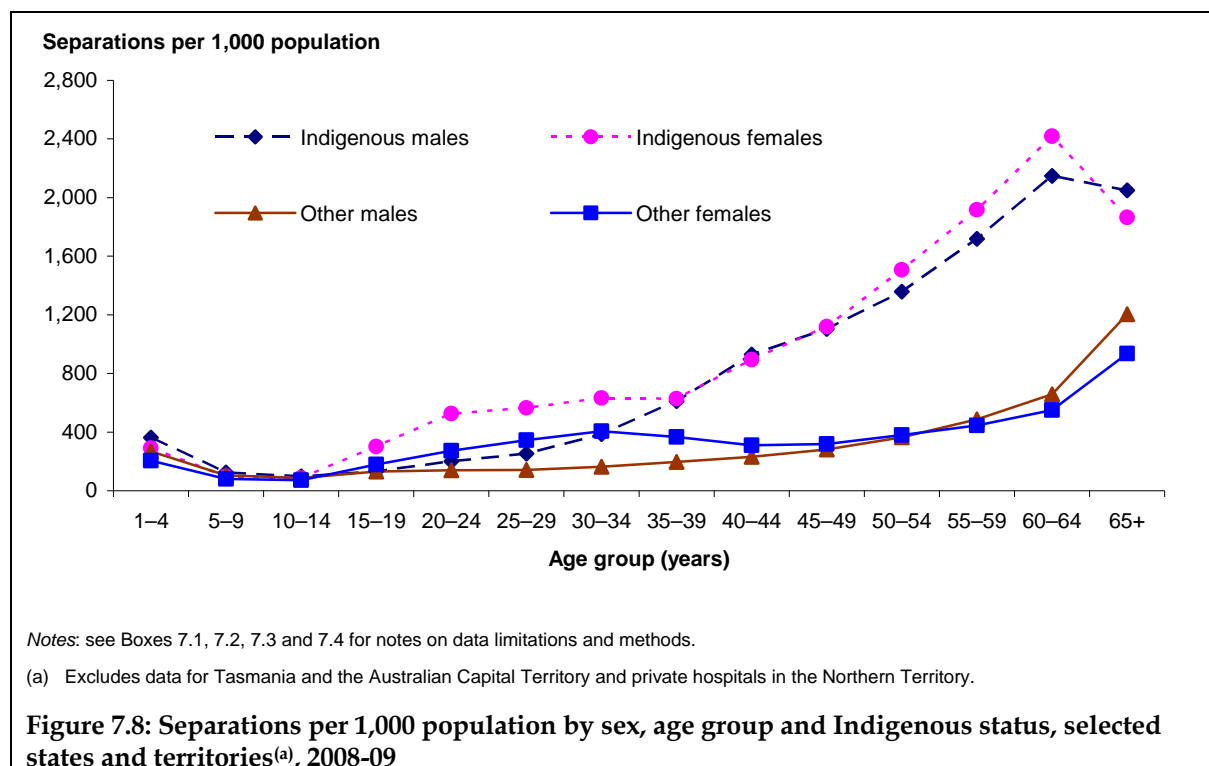
In 2008-09, separation rates for Indigenous males and females were higher than those for other males and females across all age groups (Figure 7.8). Separation rates for *Indigenous Australians* in older age groups are subject to variability because of the relatively small populations in these age groups.

Table 7.4: Separations by Indigenous status, sex and age group, selected states and territories^(a), 2008–09

Age group	Indigenous Australians			Other Australians		
	Males	Females	Persons	Males	Females	Persons
0–4	11,686	8,975	20,661	173,921	125,447	299,368
5–9	3,965	2,996	6,961	65,559	48,608	114,167
10–14	3,129	2,659	5,788	56,868	44,865	101,733
15–19	3,967	8,442	12,409	91,827	117,563	209,390
20–24	4,607	11,726	16,333	102,371	188,877	291,248
25–29	4,743	10,626	15,369	102,380	241,481	343,861
30–34	6,465	10,856	17,321	113,204	280,175	393,379
35–39	10,154	11,362	21,516	145,912	277,015	422,927
40–44	13,428	14,028	27,456	164,683	221,416	386,099
45–49	13,494	14,966	28,460	203,834	234,640	438,474
50–54	13,435	15,973	29,408	241,144	255,157	496,301
55–59	12,394	15,458	27,852	294,026	271,538	565,564
60–64	10,665	13,743	24,408	352,502	293,902	646,404
65+	14,373	17,501	31,874	1,480,478	1,380,885	2,861,363
Total	126,506	159,311	285,817	3,588,709	3,981,573	7,570,282

Notes: See Boxes 7.1, 7.2, 7.3 and 7.4 for notes on data limitations and methods.

(a) Excludes data for Tasmania and the Australian Capital Territory, and private hospitals in the Northern Territory.



State or territory of residence

The admitted patient care data includes information on the patient's area of usual residence, in the form of the state or territory of usual residence and the Statistical Local Area of usual residence.

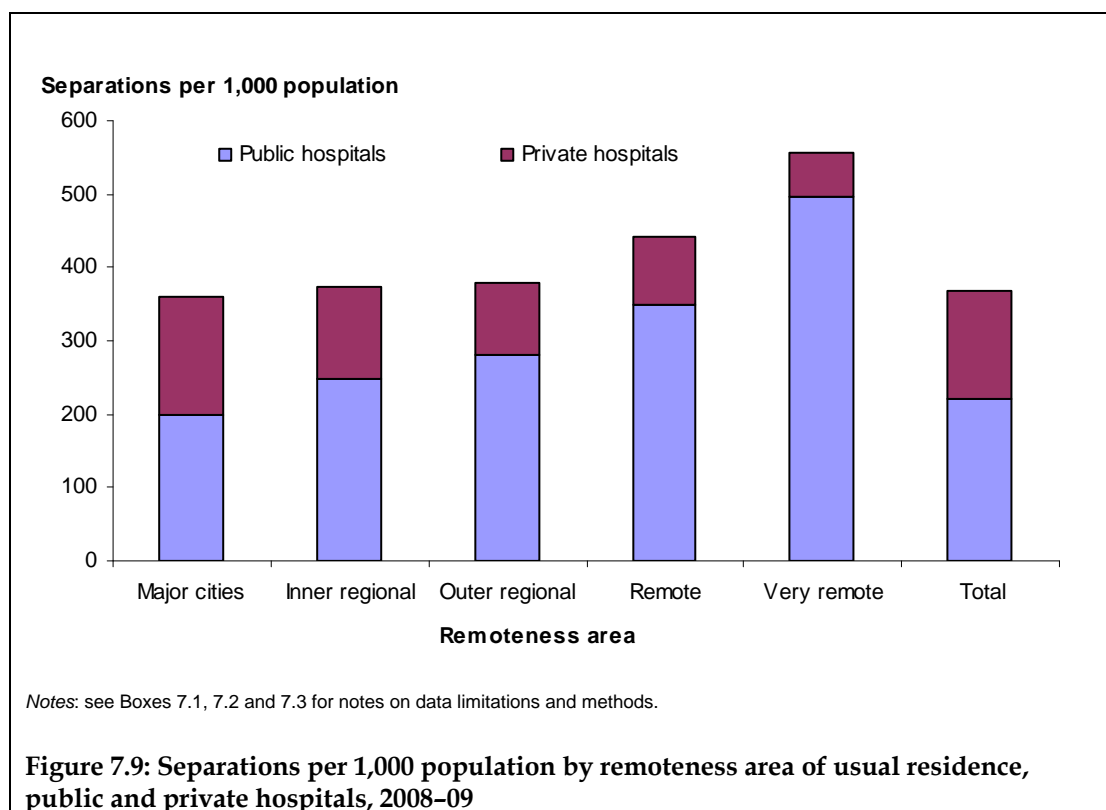
Table S7.3 (at the end of this chapter) presents separations and age standardised separation rates (per 1,000 population) by both the state or territory of hospitalisation and the state or territory of usual residence of the patient. For 2008–09, about 98% of separations (7.9 million) were for people who were hospitalised in their state or territory of residence. However, in the Australian Capital Territory, only 77% of hospital separations were for Australian Capital Territory residents, with most of the remainder being residents of New South Wales.

Remoteness area of residence

The Statistical Local Area of usual residence can be used to derive the patient's remoteness area of usual residence. Remoteness area categories divide Australia into areas depending on distances from population centres.

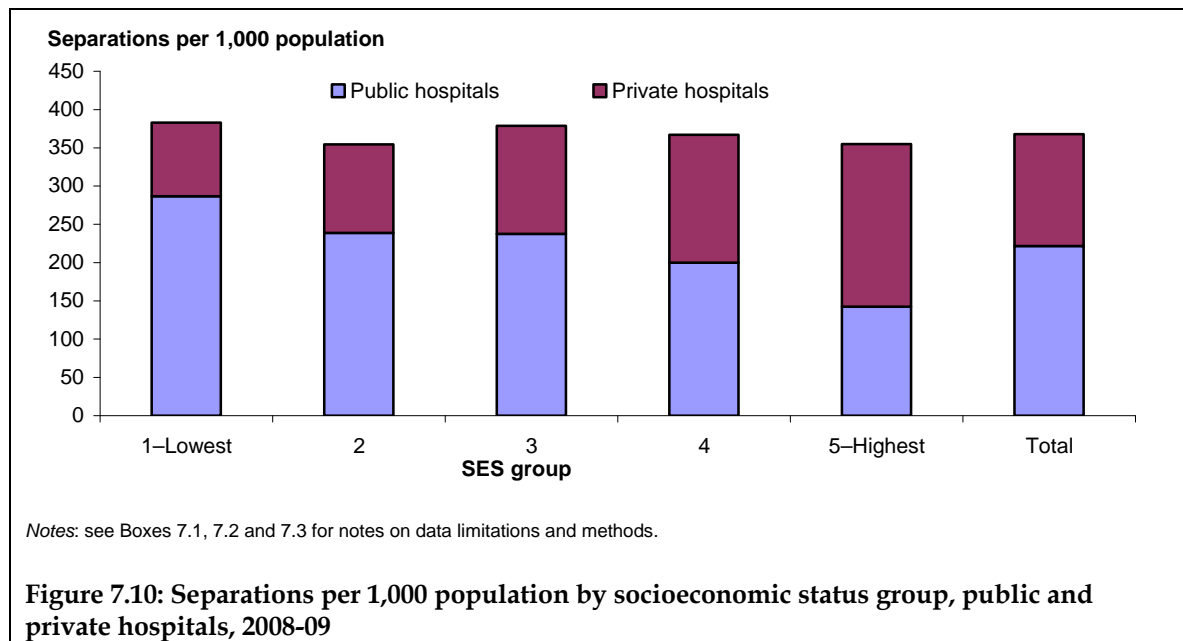
The number of separations per 1,000 population varied by remoteness area. Overall, separation rates were highest in *Remote* and *Very remote* areas, and in both instances, the difference from the national rate was statistically significant (Figure 7.9).

The separation rates for public and private sectors varied across remoteness areas. *Very remote* areas, which had the highest separation rate overall, had the highest rate for public hospital separations and the lowest rate for private hospital separations. *Major cities* had the lowest separation rate for public hospitals and the highest rate for private hospitals.

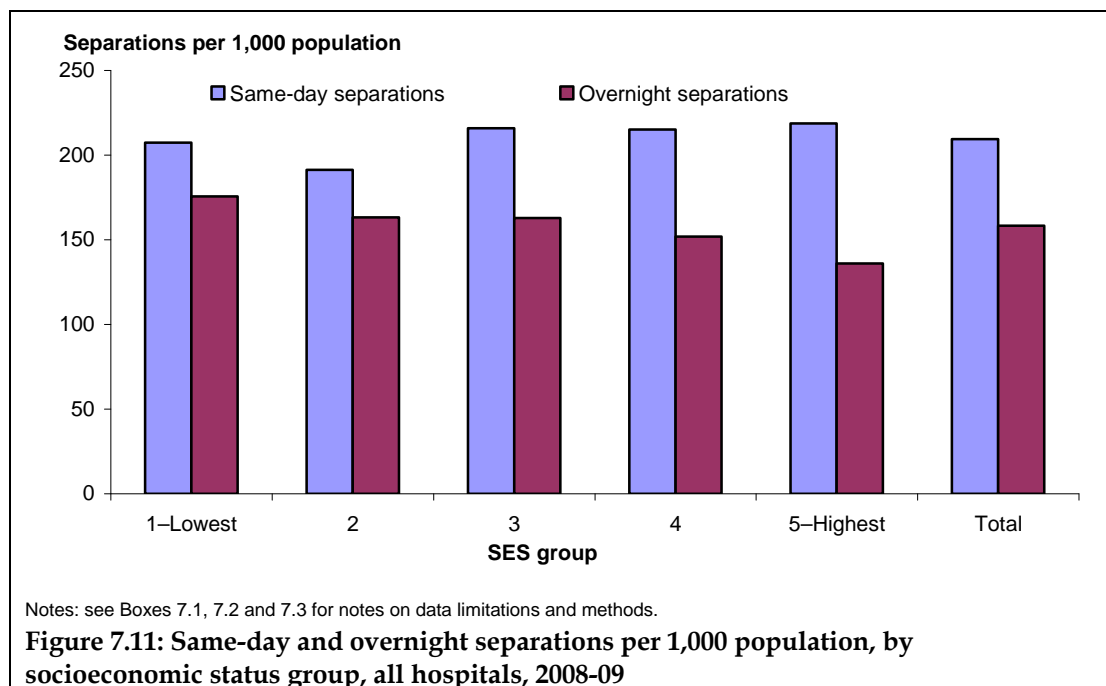


Socioeconomic status

In 2008–09, separation rates varied across socioeconomic status (SES) groups and between public and private hospitals (Figure 7.10). Separation rates for patients living in areas classified as the lowest SES group were slightly above the overall rate. However, for this SES group, rates were relatively high for public hospitals, and low for private hospitals.



The separation rates for same-day separations versus overnight separations varied across SES groups (Figure 7.11). The highest rate of same-day separations occurred for patients living in areas classified as being in the highest SES group and the highest rate of overnight separations occurred for patients living in areas classified as being in the lowest SES group.



How did people access these services?

The Mode of admission records the mechanism by which an admitted patient begins an episode of care. Patients may have the following modes of admission:

- *Admitted patient transferred from another hospital*
- *Statistical admission: care type change* – where a new admitted patient episode is created as a result of a change in the clinical intent of care (for example, a patient’s care may move from a focus on acute care to a focus on rehabilitation or palliative care), within the same hospital
- *Other* – the term used to refer to all other planned and unplanned admissions

In 2008–09, most separations in both public and private hospitals had a Mode of admission of *Other* (94.4%). Public hospitals had a higher proportion of transfers than private hospitals (4.8% and 3.0% respectively). Public hospitals also reported higher proportions of *Statistical admissions* than private hospitals (1.4% and 0.7% respectively) (Table 7.5).

Table 7.5: Separations by mode of admission, public and private hospitals, 2008–09

Mode of admission	Public hospitals	Private hospitals	Total
Admitted patient transferred from another hospital	235,311	98,230	333,541
Statistical admission: care type change	69,955	22,316	92,271
Other ^(a)	4,553,768	3,136,192	7,689,960
Not reported	31,989	687	32,676
Total	4,891,023	3,257,425	8,148,448

Notes: see Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

(a) *Other* refers to all planned and unplanned admissions except transfers from other hospitals and statistical admissions.

Additional information by state and territory is available in Table S7.7 at the end of this chapter.

Why did people receive the care?

The reasons that patients receive admitted patient care are usually described in terms of the principal diagnosis. The principal diagnosis is the diagnosis established after study to be chiefly responsible for occasioning the episode of admitted patient care.

Where a patient has a diagnosis related to injury and poisoning, additional information is available on the cause of the injury (for example, a traffic accident or fall). In some cases, the principal diagnosis is described in terms of a treatment for an ongoing condition (for example, care involving dialysis).

Principal diagnosis

In 2008–09, about a quarter of separations in public and private hospitals had a principal diagnosis in the *Factors influencing health status and contact with health services* chapter, which includes care involving dialysis and chemotherapy (Table 7.6).

The relative distribution of separations by diagnosis chapter varied across public and private hospitals. For example, over eight in ten separations for *Injury, poisoning and certain other*

consequences of external causes were from public hospitals and over seven in ten separations for *Diseases of the eye and adnexa* were from private hospitals.

Table 7.6: Separations, by principal diagnosis in ICD-10-AM chapters, public and private hospitals, 2008–09

Principal diagnosis chapter		Public hospitals	Private hospitals	Total
A00–B99	Certain infectious and parasitic diseases	101,774	17,061	118,835
C00–D48	Neoplasms	265,743	287,821	553,564
D50–D89	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	67,625	32,111	99,736
E00–E90	Endocrine, nutritional and metabolic diseases	101,356	62,874	164,230
F00–F99	Mental and behavioural disorders	176,721	147,343	324,064
G00–G99	Diseases of the nervous system	114,621	83,324	197,945
H00–H59	Diseases of the eye and adnexa	70,660	172,995	243,655
H60–H95	Diseases of the ear and mastoid process	29,831	26,072	55,903
I00–I99	Diseases of the circulatory system	314,380	159,791	474,171
J00–J99	Diseases of the respiratory system	282,008	87,325	369,333
K00–K93	Diseases of the digestive system	379,591	459,653	839,244
L00–L99	Diseases of the skin and subcutaneous tissue	91,845	40,542	132,387
M00–M99	Diseases of the musculoskeletal system and connective tissue	169,390	266,401	435,791
N00–N99	Diseases of the genitourinary system	214,574	165,180	379,754
O00–O99	Pregnancy, childbirth and the puerperium	332,013	150,427	482,440
P00–P96	Certain conditions originating in the perinatal period	44,552	12,175	56,727
Q00–Q99	Congenital malformations, deformations and chromosomal abnormalities	24,983	10,199	35,182
R00–R99	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	370,106	173,645	543,751
S00–T98	Injury, poisoning and certain other consequences of external causes	445,815	97,414	543,229
Z00–Z99	Factors influencing health status and contact with health services	1,293,176	801,611	2,094,787
	Not reported	259	3,461	3,720
Total		4,891,023	3,257,425	8,148,448

Notes: See Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

Aboriginal and Torres Strait Islander people

Over 46% of separations for *Indigenous Australians* were for *Factors influencing health status and contact with health services*, compared to 25% for *Other Australians* (Table 7.7). *Injury, poisoning and certain other consequences of external causes* was the second most common principal diagnosis among *Indigenous Australians*, accounting for about 7.5% of separations for *Indigenous Australians*.

Table 7.7: Separations by principal diagnosis in ICD-10-AM chapters, by Indigenous status, selected states and territories^(a), 2008–09

Principal diagnosis chapter		Indigenous Australians	Other Australians ^(b)	Total ^(a)
A00–B99	Certain infectious and parasitic diseases	5,181	110,167	115,348
C00–D48	Neoplasms	4,129	530,990	535,119
D50–D89	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	1,332	94,973	96,305
E00–E90	Endocrine, nutritional and metabolic diseases	5,954	151,225	157,179
F00–F99	Mental and behavioural disorders	11,646	299,388	311,034
G00–G99	Diseases of the nervous system	3,771	187,625	191,396
H00–H59	Diseases of the eye and adnexa	1,448	234,522	235,970
H60–H95	Diseases of the ear and mastoid process	2,271	51,666	53,937
I00–I99	Diseases of the circulatory system	8,826	446,914	455,740
J00–J99	Diseases of the respiratory system	17,097	339,555	356,652
K00–K93	Diseases of the digestive system	13,870	798,600	812,470
L00–L99	Diseases of the skin and subcutaneous tissue	6,210	121,733	127,943
M00–M99	Diseases of the musculoskeletal system and connective tissue	4,794	411,488	416,282
N00–N99	Diseases of the genitourinary system	7,016	358,430	365,446
O00–O99	Pregnancy, childbirth and the puerperium	19,629	444,737	464,366
P00–P96	Certain conditions originating in the perinatal period	2,983	51,357	54,340
Q00–Q99	Congenital malformations, deformations and chromosomal abnormalities	994	32,952	33,946
R00–R99	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	12,479	511,779	524,258
S00–T98	Injury, poisoning and certain other consequences of external causes	21,460	500,181	521,641
Z00–Z99	Factors influencing health status and contact with health services	134,717	1,888,293	2,023,010
	Not reported	10	3,707	3,717
Total		285,817	7,570,282	7,856,099

Notes: See Boxes 7.1, 7.2, 7.3 and 7.4 for notes on data limitations and methods.

(a) Excludes data for Tasmania and the Australian Capital Territory and private hospitals in the Northern Territory.

(b) 'Other Australians' includes separations for which the Indigenous status was *Not reported*.

How many separations were due to injury and poisoning?

The number of separations with a principal diagnosis of injury or poisoning is an NHA performance indicator, recently reported in the *National Healthcare Agreement: Baseline performance report for 2008–09* (CRC 2010) using 2007–08 data.

Some hospitalisations for injury or poisoning may be considered potentially avoidable. It should also be noted that the admitted patient care data provide only a partial picture of the overall burden of injury as it does not include injuries that are treated by GPs and in the emergency department, that do not require admission to hospital.

In 2008–09, approximately 543,000 separations had a principal diagnosis for *Injury, poisoning and certain other consequences of external causes*. The majority (82%) of these were treated in public hospitals (Table 7.8).

Table 7.8: Separations with a principal diagnosis of injury or poisoning, public and private hospitals, 2008–09

Principal diagnosis		Public hospitals	Private hospitals	Total
S00-S19	Injuries to head & neck	83,526	6,685	90,211
S20-S39	Injuries to thorax, abdomen, back, spine & pelvis	39,989	5,577	45,566
S40-S99	Injuries to upper & lower limbs	195,779	49,953	245,732
T00-T19	Injuries to multi- or unspecified region; foreign body effects	9,920	1,279	11,199
T20-T35	Burns and frostbite	8,268	314	8,582
T36-T65	Poisoning and toxic effects	38,409	688	39,097
T66-T79	Other and unspecified effects of external causes	10,652	944	11,596
T80-T88	Complications of medical and surgical care	59,072	31,935	91,007
T89-T98	Other trauma complications; external cause sequelae	200	39	239
Total		445,815	97,414	543,229
Separations per 1,000 population		20.4	4.4	24.8

Notes: See Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

Aboriginal and Torres Strait Islander people

Indigenous Australians were hospitalised with a principal diagnosis for injury and poisoning at about twice the rate for *Other Australians* (Table 7.9). *Injuries to the head and neck* accounted for almost 27% of these separations for *Indigenous Australians* and 16% for *Other Australians*. *Complications of medical and surgical care* accounted for a higher proportion of these separations for *Other Australians* compared with *Indigenous Australians*.

Table 7.9: Separations with a principal diagnosis of injury or poisoning, by Indigenous status, selected states and territories^(a), 2008–09

Principal diagnosis		Indigenous Australians	Other Australians ^(b)	Total ^(a)
S00-S19	Injuries to head & neck	5,790	81,154	86,944
S20-S39	Injuries to thorax, abdomen, back, spine & pelvis	1,545	42,338	43,883
S40-S99	Injuries to upper & lower limbs	8,586	227,194	235,780
T00-T19	Injuries to multi- or unspecified region; foreign body effects	490	10,297	10,787
T20-T35	Burns and frostbite	668	7,639	8,307
T36-T65	Poisoning and toxic effects	1,576	35,837	37,413
T66-T79	Other and unspecified effects of external causes	471	10,739	11,210
T80-T88	Complications of medical and surgical care	2,313	84,770	87,083
T89-T98	Other trauma complications; external cause sequelae	21	213	234
Total		21,460	500,181	521,641
Separations per 1,000 population		22.2	11.8	12.0

Notes: See Boxes 7.1, 7.2, 7.3 and 7.4 for notes on data limitations and methods.

(a) Excludes data for Tasmania and the Australian Capital Territory and private hospitals in the Northern Territory.

(b) 'Other Australians' includes separations for which the Indigenous status was *Not reported*.

What were the causes of injury and poisoning?

An external cause is defined as the environmental event, circumstance or condition that was the cause of injury, poisoning or adverse event. Whenever a patient has a principal or additional diagnosis of an injury or poisoning, an external cause code should be recorded. A place of occurrence code is also usually recorded and, for most records, the activity of the person at the time of the event should be recorded (HDSC 2006).

More information on the place of occurrence and the activity when injured are available on the Internet <www.aihw.gov.au>.

In 2008–09, there were 930,000 separations that reported an ‘external cause of injury or poisoning’ for either a principal or an additional diagnosis of injury or poisoning (Table 7.10). About 77% of these separations were from public hospitals. The most frequently reported group of external causes in both public and private hospitals was *Complications of medical and surgical care*, followed by *Falls*. Public hospitals had higher proportions of separations with external causes of *Transport accidents*, *Intentional self-harm* and *Assault* than private hospitals.

Table 7.10: Separations, by external cause in ICD-10-AM groupings, public and private hospitals, 2008–09

External cause		Public hospitals	Private hospitals	Total
V00–V99	Transport accidents	63,719	7,719	71,438
W00–W19	Falls	198,567	43,044	241,611
W20–W64	Exposure to mechanical forces	81,877	10,264	92,141
W65–W74	Accidental drowning and submersion	590	18	608
W75–W84	Other accidental threats to breathing	9,634	1,336	10,970
W85–W99	Exposure to electricity, radiation, extreme temperature/pressure	1,355	204	1,559
X00–X19	Exposure to smoke, fire, flames, hot substances	8,703	414	9,117
X20–X39	Exposure to venomous plants, animals, forces of nature	5,456	367	5,823
X40–X49	Accidental poisoning	12,379	595	12,974
X50–X59	Other external causes of accidental injury	38,869	34,518	73,387
X60–X84	Intentional self-harm	30,972	787	31,759
X85–Y09	Assault	28,121	638	28,759
Y10–Y34	Events of undetermined intent	8,734	311	9,045
Y35–Y36	Legal intervention and operations of war	150	19	169
Y40–Y84	Complications of medical and surgical care	243,785	107,212	350,997
Y85–Y98	Sequelae and supplementary factors	20,923	7,754	28,677
Total		720,108	209,738	929,846

Notes: See Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

Aboriginal and Torres Strait Islander people

Assault was the most commonly reported external cause of injury and poisoning for hospitalisations for *Indigenous Australians*. This category accounted for 20.1% of external causes reported for *Indigenous Australians* compared to 2.5% of external causes reported for *Other Australians* (Table 7.11).

Table 7.11: Separations, by external cause in ICD-10-AM groupings and Indigenous status, selected states and territories, 2008–09

External cause		Indigenous Australians	Other Australians ^(b)	Total ^(a)
V00–V99	Transport accidents	2,457	65,476	67,933
W00–W19	Falls	4,973	227,787	232,760
W20–W64	Exposure to mechanical forces	4,249	84,265	88,514
W65–W74	Accidental drowning and submersion	28	563	591
W75–W84	Other accidental threats to breathing	303	10,525	10,828
W85–W99	Exposure to electricity, radiation, extreme temperature/pressure	21	1,469	1,490
X00–X19	Exposure to smoke, fire, flames, hot substances	703	8,158	8,861
X20–X39	Exposure to venomous plants, animals, forces of nature	209	5,466	5,675
X40–X49	Accidental poisoning	582	11,969	12,551
X50–X59	Other external causes of accidental injury	1,926	68,814	70,740
X60–X84	Intentional self-harm	1,740	28,567	30,307
X85–Y09	Assault	6,167	21,524	27,691
Y10–Y34	Events of undetermined intent	500	8,132	8,632
Y35–Y36	Legal intervention and operations of war	16	149	165
Y40–Y84	Complications of medical and surgical care	6,785	328,994	335,779
Y85–Y98	Sequelae and supplementary factors	1,265	25,985	27,250
Total		30,729	861,347	892,076

Notes: See Boxes 7.1, 7.2 and 7.3 and 7.4 for notes on data limitations and methods.

(a) Excludes data for Tasmania and the Australian Capital Territory and private hospitals in the Northern Territory.

(b) 'Other Australians' includes separations for which the Indigenous status was *Not reported*.

How many separations were potentially preventable?

Potentially preventable hospitalisations

The rate of potentially preventable hospitalisations (PPHs) is an NHA performance indicator, recently reported in the *National Healthcare Agreement: Baseline performance report for 2008-09* (CRC 2010) using 2007–08 data.

(PPHs) are those conditions where hospitalisation is thought to have been avoidable if timely and adequate non-hospital care had been provided. Separation rates for PPHs therefore have potential as indicators of the quality or effectiveness of non-hospital care. A high rate of PPHs 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.

(continued)

Potentially preventable hospitalisations (continued)

Three broad categories of PPHs have been used in this chapter. These have been sourced from *The Victorian Ambulatory Care Sensitive Conditions Study* (DHS, Victoria 2002) and are classified as:

- *Vaccine-preventable*. These diseases can be prevented by proper vaccination and 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 would not result in hospitalisation if adequate and timely care (usually non-hospital) was received. These include complicated appendicitis, dehydration/gastroenteritis, pyelonephritis, perforated ulcer, cellulitis, pelvic inflammatory disease, ear nose and throat infections and dental conditions.
- *Chronic*. These conditions may be preventable through behaviour modification and lifestyle change, but they can also be managed effectively through timely care (usually non-hospital) to prevent deterioration and hospitalisation. These conditions include diabetes complications, asthma, angina, hypertension, congestive heart failure and chronic obstructive pulmonary disease.

Appendix 5 presents more information on the PPH classification.

In 2008–09, over 690,000 separations in public and private hospitals were classified as PPHs (Table 7.13). PPHs accounted for 8.5% of all hospital separations, 10.5% of public hospital separations and 5.5% of private hospital separations. Nearly three-quarters of PPHs occurred in public hospitals.

Table 7.12: Separation for potentially preventable hospitalisations (PPH), public and private hospitals, 2008–09

PPH category	Public hospitals	Private hospitals	Total
Vaccine preventable conditions	13,927	2,418	16,345
Acute conditions	217,820	80,535	298,355
<i>Chronic conditions</i> ^(a)	283,082	95,778	378,860
Diabetes complications	117,813	59,428	177,241
Chronic conditions (excluding diabetes)	178,256	38,320	216,576
Total	512,177	178,311	690,488
Proportion of total separations	10.5	5.5	8.5

Notes: See Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

(a) As more than one chronic condition may be reported for a separation, the sum of *Diabetes complications* and *Chronic conditions (excluding diabetes)* does not necessarily equal the total number of separations for *Chronic conditions*.

Additional information by residence state is available in Table S7.9 at the end of this chapter.

Between 2004–05 and 2007–08, PPH separations rates were relatively stable (Table 7.13). Over that period, the rate of PPH separations in Western Australia was relatively high, influenced by the recording of diabetes as an additional diagnosis when a patient with diabetes was admitted for dialysis treatment. This was not done in all jurisdictions and because dialysis

may be required several times per week, the number of separations which are included in *Diabetes complications* was markedly higher than in other jurisdictions.

Between 2007–08 and 2008–09, there was a 7.9% decrease in PPHs overall, mostly due to decreases in the number of hospitalisations for *Chronic conditions* (14.8%).

Table 7.13 shows that the decrease in *Diabetes complications* conditions was much greater (28.0%) than for *Chronic conditions* overall. The decrease in *Chronic conditions* was most marked in Western Australia and Tasmania (see Table S7.9). This decline was probably due to the introduction of changes in clinical coding rules in June 2008, to ensure that additional diagnoses were only coded where they had an impact on the care given to patients. The effect was less marked in other jurisdictions.

Table 7.13: Separations per 1,000 population (age-standardised) for potentially preventable hospitalisations, by PPH category, all hospitals, 2004–05 to 2008–09

PPH category	2004–05	2005–06	2006–07	2007–08	2008–09	Change (per cent)	
						Ave since 2004–05	Since 2007–08
Vaccine preventable conditions	0.7	0.7	0.6	0.7	0.7	2.1	3.4
Acute conditions	12.4	12.8	13.0	13.4	13.5	2.3	1.4
<i>Chronic conditions</i>	18.8	18.7	19.0	19.3	16.5	-3.2	-14.8
Diabetes complications	9.8	9.9	10.4	10.7	7.7	-5.9	-28.0
Chronic conditions (excluding diabetes)	10.0	9.9	9.7	9.7	9.4	-1.6	-3.3
Total	31.7	32.1	32.5	33.3	30.6	-0.9	-7.9

Notes: See Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

(a) As more than one chronic condition may be reported for a separation, the sum of *Diabetes complications* and *Chronic conditions (excluding diabetes)* does not necessarily equal the total number of separations for *Chronic conditions*.

For 2008–09, the overall rate of PPHs was highest for residents of *Very remote* areas (69.7 per 1,000 population) and lowest for residents of *Major cities* (28.0 per 1,000 population). This pattern was also observed for the vaccine-preventable and acute conditions (Table 7.14). For chronic conditions, the highest rates were observed for those living in *Remote* areas, who had the highest rate for *Diabetes complications*.

Separations for patients living in areas classified as being in the lowest SES group were more likely to be separated from hospital for a PPH than residents of other SES groups. The rate of PPH separations decreased with increased levels of advantage (Table 7.14).

Table 7.14: Separations per 1,000 population (age-standardised) for potentially preventable hospitalisations, by remoteness area and socioeconomic status, all hospitals, 2008–09

PPH category	Vaccine-preventable conditions	Acute conditions	Total chronic conditions	Diabetes complications	Chronic conditions (excluding diabetes)	Total
Remoteness						
Major cities	0.7	12.5	15.0	6.8	8.7	28.0
Inner regional	0.7	15.2	18.0	8.5	10.2	33.8
Outer regional	0.8	16.6	20.7	9.5	12.0	38.0
Remote	1.3	23.2	39.8	25.7	15.4	64.0
Very remote	2.4	30.7	37.5	21.3	18.0	69.7
SES group						
1–Lowest	1.0	16.4	22.2	10.7	12.4	39.4
2	0.8	14.9	19.2	9.0	11.0	34.7
3	0.7	13.6	18.2	9.5	9.5	32.5
4	0.7	13.2	14.4	6.1	8.8	28.2
5–Highest	0.6	11.8	10.8	4.4	6.8	23.2
Total	0.7	14.0	16.5	8.0	9.4	30.6

Notes: See Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

(a) As more than one chronic condition may be reported for a separation, the sum of *Diabetes complications* and *Chronic conditions (excluding diabetes)* does not necessarily equal the total number of separations for *Chronic conditions*.

How urgent was the care?

Admissions to hospital can be categorised as *Emergency* (required within 24 hours), or *Elective* (required at some stage beyond 24 hours). Urgency of admission is *Not assigned* for some admissions, such as admissions for normal delivery and birth, statistical admissions and planned readmissions for some treatments.

Table 7.15 includes information on Urgency of admission and whether the separations were considered to be *Surgical*, *Medical* or *Other DRGs* based on the AR-DRG classification. See the section *What care did people receive?* for more information on these types of care.

In 2008–09, over a quarter of separations had an Urgency of admission of *Emergency*. Over 92% of *Emergency* admissions were in public hospitals, with about 86% of these being for *Medical* care. Private hospitals accounted for about 57% of *Elective* admissions, with 44% of these for *Surgical* care (Table 7.15). Over 15% of separations had a *Not assigned* urgency of admission.

Table 7.15: Separations, by type of care^(a) and urgency of admission, public and private hospitals, 2008–09

Urgency of admission and type of care	Public hospitals		Private hospitals		Total	
	Separations	Per cent (column)	Separations	Per cent (column)	Separations	Per cent (column)
Emergency						
Surgical	231,418	4.7	30,609	0.9	262,027	3.2
Medical	1,737,232	35.5	125,669	3.9	1,862,901	22.9
Other	54,994	1.1	10,800	0.3	65,794	0.8
<i>Total emergency</i>	<i>2,023,644</i>		<i>167,078</i>		<i>2,190,722</i>	
Elective						
Surgical	659,027	13.5	1,186,080	36.4	1,845,107	22.6
Medical	1,135,150	23.2	861,023	26.4	1,996,173	24.5
Other	247,579	5.1	619,348	19.0	866,927	10.6
<i>Total elective</i>	<i>2,041,756</i>		<i>2,666,451</i>		<i>4,708,207</i>	
Not assigned	825,054	16.9	407,755	12.5	1,232,809	15.1
Not reported	569	<0.1	16,141	0.5	16,710	0.2
Total	4,891,023	100	3,257,425	100	8,148,448	100

Notes: see Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

(a) The type of care is assigned according to the *Medical/Surgical/Other* partitions of the AR-DRG classification.

Additional information by state and territory is available in Table S7.8 at the end of this chapter.

What care was provided?

The care that the patient received can be described in a variety of ways. This section presents information describing care by:

- the overall type of care: *Surgical* (involving an operating room procedure), *Medical* (not involving a procedure) and *Other* (involving a non-operating room procedure such as endoscopy)
- ‘Care type’, which reflects the clinical intent or treatment goal of an episode
- the type of surgical or other procedure undertaken (see *chapters 8, 9 and 11*).

Australian Refined Diagnosis Group

In this section, separations are grouped according to categories of care, using the Australian Refined Diagnosis Group (AR-DRG) classification. AR-DRGs are a means of relating types of patients treated in a hospital in a meaningful way.

Acute care activity can be classified as *Medical*, *Surgical* and *Other* care. This classification is based on the *Medical*, *Surgical* and *Other* partitions of the AR-DRG classification (see Box 7.1).

Episodes are assigned to AR-DRGs within MDCs, mainly on the basis of the procedure codes (in the *Surgical* DRG partition) or the diagnosis codes (in the *Medical* DRG partition). Additional variables including the patient's age, complicating diagnoses/procedures and/or patient clinical complexity level, the length of stay, and the mode of separation are also used for AR-DRG assignment.

Medical, Surgical and Other care

In 2008–09, about 18% of separations in public hospitals were for *Surgical* care and 59% were for *Medical* care, compared to 37% and 30% in private hospitals, respectively (Table 7.15). Overall, *Medical* care accounted for 47% of separations and *Surgical* care accounted for 26% of separations.

Care type

The care type describes the overall nature of a clinical service provided to an admitted patient during an episode of care.

The care type can be classified as *Acute care*, *Rehabilitation care*, *Palliative care*, *Geriatric evaluation and management*, *Psychogeriatric care*, *Maintenance care*, *Newborn care* and *Other admitted patient care*.

For public and private sectors combined, 95.4% of separations were classified as episodes of *Acute care*, 3.5% as *Newborn* and 2.6% as *Rehabilitation care* (Table 7.16). Public and private sectors varied in the proportions of separations and the separation rates for each care type. The proportion of patient days, and days per 1,000 population varied for each care type and between public and private sectors.

In public hospitals, the average length of stay for episodes of *Acute care* (3.1 days) was longer than that for private hospitals (2.2 days). The average length of stay for *Rehabilitation care* was 18.1 days in public hospitals, and 5.6 days in private hospitals. In part, this reflects a high proportion of same-day rehabilitation separations in the private sector, as well as a number of very long stay rehabilitation separations in the public sector. More information on sub-acute and non-acute care is available in *Chapter 11*.

Table 7.16: Selected separations statistics by care type, public and private hospitals, 2008–09

Care type and sector	Separations	Separations per 1,000 population	Patient days	Days per 1,000 population	Average length of stay
Public hospitals					
Acute care	4,689,915	212.8	14,399,657	646.3	3.1
Newborn total	215,619	10.4	444,324	40.1	2.1
Newborn with qualified days only	45,968	2.2	406,053	19.5	8.8
Newborn with a mixture of qualified days and unqualified days ^(a)	10,308	0.5	38,271	1.8	3.7
Rehabilitation care	77,875	3.4	1,413,375	61.6	18.1
Other non-acute care ^(b)	66,957	2.8	1,631,826	69.5	24.4
<i>Total</i> ^(c)	<i>4,891,023</i>	<i>221.8</i>	<i>17,889,182</i>	<i>798.7</i>	<i>3.7</i>
Private hospitals					
Acute care	3,087,308	138.4	6,846,149	303.3	2.2
Newborn total	60,151	2.9	106,418	13.6	1.8
Newborn with qualified days only	15,581	0.7	97,695	4.7	6.3
Newborn with a mixture of qualified days and unqualified days ^(a)	2,334	0.1	8,723	0.4	3.7
Rehabilitation care	137,946	6.0	771,272	32.8	5.6
Other non-acute care ^(b)	14,256	0.6	169,090	7.1	11.9
<i>Total</i> ^(c)	<i>3,257,425</i>	<i>145.9</i>	<i>7,892,929</i>	<i>348.4</i>	<i>2.4</i>
Total	8,148,448	367.6	25,782,111	1,147.2	3.2

Notes: see Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

- (a) For *Newborns* with a mixture of qualified and unqualified days, the number of patient days includes only the qualified days for these separations. Unqualified days for these separations are not included in counts of patient days in this report.
- (b) Includes separations for *Palliative care, Geriatric evaluation and management, Psychogeriatric care, Maintenance care* and *Other admitted patient care*.
- (c) The totals do not include separations and unqualified days for *Newborns with no qualified days*. For information on *Newborns with no qualified days*, see tables S7.3 and S7.4.

Additional information by state and territory is available in tables S7.3 and S7.4 at the end of this chapter.

What was the cost of the care?

Admitted patient expenditure—public hospitals

In 2008–09, approximately \$22 billion was expended on admitted patient services in public hospitals (Table 7.17). This figure is based on the total expenditure reported for public hospitals, multiplied by the estimated ‘admitted patient cost proportion’ provided for each public hospital, see *chapters 3 and 4* for more information.

Table 7.17: Estimated expenditure on admitted patient care (\$'000,000), public hospitals, states and territories, 2008–09

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
	\$'000,000								
Total expenditure	10,209	7,912	5,755	3,258	2,467	693	586	442	31,322
Estimated admitted patient cost proportion ^(a)	0.69	0.71	0.70	0.69	0.70	0.69	0.68	0.80	0.70
Estimated admitted patient expenditure^(b)	7,062	5,675	4,005	2,269	1,761	467	399	354	21,993

Notes: see Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

(a) Estimated admitted patient cost proportion is based on the mean of reported admitted patient cost proportions for all benchmarking hospitals in the state or territory.

(b) Admitted patient expenditure includes estimated expenditure on non-benchmarking hospitals (see *Chapter 3*) in the state or territory.

Cost weights

The cost estimates for admitted patient care are approximations of the relative costs of hospital services during 2008–09. They should be used with caution in any comparisons between the states and territories. They are not derived from, or comparable to, the expenditure and cost per casemix-adjusted separation information presented in *chapters 3 and 4*.

Estimated total admitted patient costs are not directly comparable between public and private hospitals. Private hospital treatment may include medical, pharmacy, and pathology costs that are not included in existing private hospital cost information. These costs are included in public hospital cost information.

The ‘cost weight’ for a separation is the ratio of the estimated average cost for the separation (based on the reported AR-DRG version 5.2) compared to the average cost for all acute separations. For 2008–09, the 2007–08 AR-DRG (version 5.1) cost weights obtained from the National Hospital Cost Data Collection (NHCDC) (DoHA 2009) were applied to each separation. Separate cost weights are estimated for the public and private sectors because of the differences in the range of costs recorded in public and private hospitals.

The average relative cost for admitted patient care varied across the public and private sectors. In public hospitals, separations for *Public patients* generally had lower average costs weights than other patients. In private hospitals, *Self-funded* separations had lower average costs than other separations (Table 7.18). In both sectors overall, separations funded by *Motor vehicle third party personal claim* had higher average cost weights than most other separations.

Cost by volume

An estimate of expenditure in public and private hospitals can be made using AR-DRGs and related cost information. The NHCDC provided estimates of average costs for each separation for an AR-DRG with a cost weight of 1.00 – \$3,907 in the public sector (including depreciation) and 1.00 – \$2,895 in the private sector (based on 2007–08 AR-DRGs version 5.1, DoHA 2009).

Table 7.18: Average cost weight of separations, by funding source, public and private hospitals, states and territories, 2008–09

Funding source	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Public patients ^(a)	1.04	0.94	1.00	0.94	1.08	1.05	0.97	0.67	0.99
Private health insurance	1.13	1.07	0.95	1.32	1.24	0.91	1.46	1.24	1.12
Self-funded ^(b)	1.21	0.74	1.04	0.83	0.82	n.a.	1.27	1.01	1.03
Workers compensation	1.31	1.19	1.32	1.29	1.21	1.21	1.48	1.16	1.27
Motor vehicle third party personal claim	1.89	2.20	2.30	2.70	2.21	2.24	3.57	2.54	2.23
Department of Veterans' Affairs	1.20	1.13	1.13	1.19	1.32	1.15	0.83	1.14	1.17
Other ^(c)	1.53	1.23	1.11	1.44	1.02	1.13	0.98	1.34	1.26
<i>Total</i>	<i>1.07</i>	<i>0.97</i>	<i>1.00</i>	<i>0.98</i>	<i>1.10</i>	<i>1.05</i>	<i>1.00</i>	<i>0.70</i>	<i>1.01</i>
Private hospitals									
Public patients ^(a)	1.14	1.17	0.56	0.17	0.31	n.p.	n.p.	n.p.	0.40
Private health insurance	0.86	0.83	0.83	0.86	0.88	n.p.	n.p.	n.p.	0.85
Self-funded ^(b)	0.63	0.46	0.49	0.58	0.61	n.p.	n.p.	n.p.	0.54
Workers compensation	1.15	1.12	0.96	1.00	1.13	n.p.	n.p.	n.p.	1.08
Motor vehicle third party personal claim	1.12	1.12	1.31	1.02	1.14	n.p.	n.p.	n.p.	1.12
Department of Veterans' Affairs	1.16	1.13	0.93	1.09	1.11	n.p.	n.p.	n.p.	1.05
Other ^(c)	0.99	0.55	0.40	0.47	0.68	n.p.	n.p.	n.p.	0.73
<i>Total</i>	<i>0.86</i>	<i>0.81</i>	<i>0.80</i>	<i>0.76</i>	<i>0.88</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>0.82</i>

Notes: see Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

- (a) 'Public patients' includes separations with a funding source of *Australian Health Care Agreements, Reciprocal health care agreements, Other hospital or public authority* (with a *Public patient election status*) and *No charge raised* (in public hospitals). The majority of separations with a funding source of *No charge raised* in public hospitals were in Western Australia, reflecting that some public patient services were funded through the Medicare Benefit Schedule.
- (b) Tasmania was unable to identify all patients whose funding source may have been *Self-funded*, therefore the number of separations in this category may be underestimated and others may be overestimated.
- (c) 'Other' includes separations with a funding source of *Other compensation, Department of Defence, Correctional facilities, Other hospital or public authority* (without a *Public patient election status*), *Other, No charge raised* (in private hospitals) and *Not reported*.

The cost by volume figures in Table 7.19 were derived for each version 5.2 AR-DRG by multiplying the estimated average cost for the AR-DRG by the number of acute separations for the AR-DRG. The cost estimates for all of the AR-DRGs within a given Major Diagnostic Category (MDC) were then summed to produce an estimated cost for the MDC. It should be noted that the estimates in Table 7.19 do not include the costs for sub-acute and non-acute separations. The cost estimates in that table do not reconcile with those presented for total admitted patient care in public hospitals due to different estimation methods.

For 2008–09, the total estimated costs for acute admitted patient care were \$18.8 billion in public hospitals and \$7.4 billion in private hospitals (Table 7.19). The highest cost by volume MDC in both the public and private sector was *Diseases and disorders of the musculoskeletal system and connective tissue* (over \$2,216 million and \$1,697 million, respectively), *Medical DRGs* accounted for 53% of the estimated costs in public hospitals and 26% in private hospitals. *Surgical DRGs* accounted for 42% of the estimated costs in public hospitals and about 65% in private hospitals.

Table 7.19: Separations and cost statistics, by Major Diagnostic Category version 5.2 and Medical/Surgical/Other partition, public and private hospitals, 2008–09

Major Diagnostic Category		Public hospitals		Private hospitals	
		Separations	Cost by volume (\$'000) ^(b)	Separations	Cost by volume (\$'000) ^(c)
PR	Pre-MDC (tracheostomies, transplants, ECMO)	11,991	1,010,703	1,470	111,377
01	Diseases and disorders of the nervous system	234,533	1,237,283	65,556	245,375
02	Diseases and disorders of the eye	95,559	251,555	199,635	304,981
03	Diseases and disorders of the ear, nose, mouth and throat	181,384	487,319	210,104	314,722
04	Diseases and disorders of the respiratory system	273,761	1,450,547	87,930	241,133
05	Diseases and disorders of the circulatory system	397,341	2,034,401	156,716	1,025,924
06	Diseases and disorders of the digestive system	477,024	1,671,451	518,475	723,247
07	Diseases and disorders of the hepatobiliary system and pancreas	87,816	509,976	33,760	131,559
08	Diseases and disorders of the musculoskeletal system and connective tissue	361,223	2,216,138	332,831	1,697,060
09	Diseases and disorders of the skin, subcutaneous tissue and breast	180,000	632,368	171,871	346,513
10	Endocrine, nutritional and metabolic diseases and disorders	72,585	414,537	43,497	201,488
11	Diseases and disorders of the kidney and urinary tract	1,032,935	1,147,950	271,340	256,081
12	Diseases and disorders of the male reproductive system	45,878	169,579	67,204	155,271
13	Diseases and disorders of the female reproductive system	111,437	387,358	158,983	272,798
14	Pregnancy, childbirth and puerperium	350,337	1,379,651	153,225	469,916
15	Newborns and other neonates	65,895	615,999	19,855	59,008
16	Diseases and disorders of the blood and blood-forming organs, and immunological disorders	77,354	192,507	35,694	50,297
17	Neoplastic disorders (haematological and solid neoplasms)	178,633	449,412	216,088	160,184
18	Infectious and parasitic diseases	58,277	360,015	12,329	57,680
19	Mental diseases and disorders	130,242	1,076,818	118,004	247,999
20	Alcohol/drug use and alcohol/drug induced organic mental disorders	34,123	107,825	24,607	47,706
21	Injuries, poisoning and toxic effects of drugs	147,181	591,845	22,963	68,573
22	Burns	8,341	74,012	369	1,403
23	Factors influencing health status and other contacts with health services	127,491	252,221	175,358	137,953
ED	Error DRGs ^(d)	4,859	66,899	7,445	45,465
	<i>Surgical DRGs</i>	947,168	7,826,304	1,270,484	4,819,444
	<i>Medical DRGs</i>	3,490,801	10,025,656	1,188,310	1,939,667
	<i>Other DRGs</i>	308,231	936,412	646,515	614,603
Total		4,746,200	18,788,372	3,105,309	7,373,713

Notes: See Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

(a) Separations for which the care type was reported as *Acute*, or *Newborn with qualified patient days*, or *Not reported*.

(b) Cost by volume for public hospitals is based on the 2007–08 AR-DRG version 5.1 average public hospital cost estimates applied to AR-DRG version 5.2.

(c) Cost by volume for private hospitals is based on the 2007–08 AR-DRG version 5.1 average private hospital cost estimates applied to AR-DRG version 5.2.

(d) An Error DRG is assigned to hospital records that contain clinically atypical or invalid information.

Abbreviations: ALOS—average length of stay; MDC—Major Diagnostic Category; DRG—Diagnosis Related Group; ECMO—extracorporeal membrane oxygenation.

Who paid for the care?

The Principal funding source describes the principal source of funds for the admitted patient episode.

There may be some variation between jurisdictions in the definitions of funding source categories and in the way in which state- or territory- level information were mapped to the *National health data dictionary* domain values (see *Appendix 1*).

In 2008–09, almost 86% of separations in public hospitals were for *Public patients*, compared to about 3% in private hospitals. Over 79% of private hospital separations were funded by *Private health insurance* (Table 7.20).

Table 7.20: Separations, by principal source of funds, public and private hospitals, 2008–09

Funding source	Public hospitals	Private hospitals	Total
Public patients ^(a)	4,188,501	100,619	4,289,120
Private health insurance	451,591	2,579,128	3,030,719
Self-funded ^(b)	58,226	278,086	336,312
Workers compensation	22,478	54,788	77,266
Motor vehicle third party personal claim	23,102	4,719	27,821
Department of Veterans' Affairs	122,656	198,277	320,933
Other ^(c)	24,469	41,808	66,277
Total	4,891,023	3,257,425	8,148,448

Notes: See Boxes 7.2 and 7.3 for notes on data limitations and methods.

- (a) 'Public patients' includes separations with a funding source of *Australian Health Care Agreements*, *Reciprocal health care agreements*, *Other hospital or public authority* (with a *Public* patient election status) and *No charge raised* (in public hospitals). The majority of separations with a funding source of *No charge raised* in public hospitals were in Western Australia, reflecting that some public patient services were funded through the Medicare Benefit Schedule.
- (b) Tasmania was unable to identify all patients whose funding source may have been *Self-funded*, therefore the number of separations in this category may be underestimated and others may be overestimated.
- (c) 'Other' includes separations with a funding source of *Other compensation*, *Department of Defence*, *Correctional facilities*, *Other hospital or public authority* (without a *Public* patient election status), *Other*, *No charge raised* (in private hospitals) and *Not reported*.

Additional information by state and territory is available in tables S7.2 and S7.3 at the end of this chapter.

How much care was contracted between hospitals?

Inter-hospital contracted patient separations are episodes of care for an admitted patient whose treatment and/or care is provided under an arrangement between a hospital purchaser of hospital care and a provider of an admitted service and for which the activity is recorded by both hospitals (HDSC 2006).

These data should be interpreted with caution as the activity reported here includes separations under contract between hospitals, but does not include separations under contract between private hospitals and the jurisdiction or between private hospitals and regional or area health services.

As inter-hospital contracted patients are admitted patients of both the contracting and contracted hospital, these separations may represent double-counting of hospital activity in the NHMD.

In 2008–09, there were over 62,000 separations for inter-hospital contracted patients (Table 7.21). The total number of inter-hospital contracted patients was higher for private hospitals than for public hospitals. Over 95% (45,300 separations) of contracted care provided by private hospitals was purchased by public hospitals.

Table 7.21: Separations, by inter-hospital contracted patient status, public and private hospitals, 2008–09

Contracted patient status	Public hospitals	Private hospitals	Total
Inter-hospital contracted patient from public sector	10,233	45,334	55,567
Inter-hospital contracted patient from private sector	4,290	2,299	6,589
Not inter-hospital contracted patient	4,804,430	3,169,850	7,974,280
Not reported	72,070	39,942	112,012
Total	4,891,023	3,257,425	8,148,448

Notes: see Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

Additional information by state and territory is available in Table S7.15 at the end of this chapter.

How much hospital care was provided in the patient’s home?

Most states and territories have hospital-in-the-home (HITH) programs under which admitted patients are provided with hospital care in the home. This care has been defined as occurring in the patient’s (permanent or temporary) place of residence as a substitute for hospital accommodation, and within an episode of care for an admitted patient (HDSC 2006). Two jurisdictions (NSW and Tasmania) did not provide information on HITH activity to the NHMD. Hospital-in-the-home days are counted as patient days in the data presented in this report (see Table S7.14 at the end of this chapter).

How long did patients stay?

In 2008–09, public hospitals accounted for 60% of separations and 69% of patient days. The average length of stay per separation was higher in the public sector, at 3.7 days, compared to 2.4 days in the private sector. Same-day separations accounted for 50% of public hospital separations and 67% of private hospital separations. The average length of stay for overnight separations was 6.0 days overall, 6.3 days in public hospitals and 5.3 in private hospitals (Table 7.22).

Table 7.22 Average length of stay, public and private hospitals, 2008–09

Hospital type	Separations	Same-day separations	Patient days	Average length of stay (ALOS)	ALOS (excluding same-day)
Public hospitals	4,891,023	2,460,879	17,889,182	3.7	6.3
Private hospitals	3,257,425	2,183,666	7,892,929	2.4	5.3
Total	8,148,448	4,644,545	25,782,111	3.2	6.0

Notes: see Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

Additional information by state and territory is available in table S7.2 and S7.3 at the end of this chapter.

How was the care completed?

The Mode of separation records the status of the patient at the time of separation and, for some categories, the place to which the person was discharged or transferred.

About 92% of separations (7.5 million) were included in the *Other* category, suggesting that most patients go home after their episode of care (Table 7.23). This was particularly the case in the private sector, where 97.1% of separations (3.2 million) were categorised as *Other*, compared with 88.8% (4.3 million) in the public sector.

There is a discrepancy between the number of separations with a Mode of separation of *Discharge/transfer to an (other) hospital (acute and psychiatric)* (344,000; see Table 7.23) and the number of separations with a Mode of admission of *Admitted patient transferred from another hospital* (320,000; see Table 7.4). This may indicate that not all patients who are transferred from one hospital to another are having this recorded as their Mode of admission, or that some patients were admitted and separated in different reporting years.

Table 7.23: Separations, by mode of separation, public and private hospitals, 2008–09

Mode of separation	Public hospitals	Private hospitals	Total
Discharge/transfer to an (other) acute hospital	292,660	56,120	348,780
Discharge/transfer to residential aged care service ^(a)	56,504	8,480	64,984
Discharge/transfer to an (other) psychiatric hospital	6,254	215	6,469
Discharge/transfer to other health care accommodation	13,624	2,077	15,701
Statistical discharge: type change	70,258	12,286	82,544
Left against medical advice/discharge at own risk	39,360	1,870	41,230
Statistical discharge from leave	6,440	142	6,582
Died	60,850	13,530	74,380
Other ^(b)	4,345,061	3,162,690	7,507,751
Not reported	12	15	27
Total	4,891,023	3,257,425	8,148,448

Notes: see Boxes 7.1, 7.2 and 7.3 for notes on data limitations and methods.

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

(b) Includes discharge to usual residence/own accommodation/welfare institution (including prisons, hostels and group homes providing primarily welfare services).

Additional information by state and territory is available in Table S7.13 at the end of this chapter.

Additional information

More detailed information on admitted patient care, including data by state and territory for principal diagnoses and procedures, is provided on the accompanying CD and Internet at <www.aihw.gov.au>.

Supplementary tables

The following supplementary tables provide more information on administrative data such as funding source, care type, sex and age group, Indigenous status data, modes of admission and separation, urgency of admission, inter-hospital contracted patients and hospital-in-the-home care by state and territory.

Box 7.4 Methods – Chapter 7 supplementary tables

Table S7.4

- (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) Separation rates were directly age-standardised as detailed in *Appendix 1*.
- (c) Includes Cocos (Keeling) Islands, Christmas Island, Jervis Bay Territory.
- (d) Includes resident overseas, at sea, no fixed address.

Tables S7.5 and S7.6

- (a) The reporting of *Newborns with unqualified days only* is not compulsory for the Victorian private sector, resulting in a low number of separations in this category.
- (b) Tasmania and the Northern Territory did not supply *Newborn* care according to the *National health data dictionary definition* and did not report any separations with both qualified and unqualified days.
- (c) Total separations and patient days exclude unqualified days for *Newborns*.

Table S7.7:

- (b) *Other* refers to all planned and unplanned admissions except transfers from other hospitals and statistical admissions.

Tables S7.11 and S7.12:

- (b) Identification of Indigenous patients is not considered to be complete and completeness varies among the jurisdictions. See *Appendix 1* for further detail.
- (c) Excludes data for Tasmania and the Australian Capital Territory. See Box 7.4 for more information. Caution should be used in the interpretation of these data because of jurisdictional differences in data quality.
- (d) Rates per 1,000 population were directly age-standardised as detailed in *Appendix 1*, and separation rate for *Other Australians* includes Indigenous status *Not reported*.
- (e) The rate ratio is equal to the separation rate for *Indigenous Australians* divided by the separation rate for *Other Australians*.

Table S7.1: Summary of separation, average cost weight, patient day and average length of stay statistics, by hospital type, states and territories, 2008–09

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Separations^(a)									
<i>Public hospitals</i>	1,505,969	1,379,624	883,340	467,433	374,540	94,892	89,869	95,356	4,891,023
Public acute hospitals	1,500,020	1,379,132	882,933	465,971	372,401	94,226	89,869	95,356	4,879,908
Public psychiatric hospitals	5,949	492	407	1,462	2,139	666	0	0	11,115
<i>Private hospitals</i>	907,214	811,020	813,941	362,162	255,500	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	3,257,425
Private free-standing day hospital facilities	202,544	181,631	208,048	86,596	46,609	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	729,162
Other private hospitals ^(b)	704,670	629,389	605,893	275,566	208,891	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	2,528,263
<i>Public acute and private hospitals</i>	2,407,234	2,190,152	1,696,874	828,133	627,901	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	8,137,333
Total	2,413,183	2,190,644	1,697,281	829,595	630,040	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	8,148,448
Overnight separations^(a)									
<i>Public hospitals</i>	844,105	590,087	440,246	227,217	206,420	45,360	41,176	35,533	2,430,144
Public acute hospitals	838,343	589,596	439,839	225,833	204,644	44,700	41,176	35,533	2,419,664
Public psychiatric hospitals	5,762	491	407	1,384	1,776	660	0	0	10,480
<i>Private hospitals</i>	277,995	274,134	264,426	118,883	92,977	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	1,073,759
Private free-standing day hospital facilities	0	85	0	1,160	0	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	1,247
Other private hospitals ^(b)	277,995	274,049	264,426	117,723	92,977	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	1,072,512
<i>Public acute and private hospitals</i>	1,116,338	863,730	704,265	344,716	297,621	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	3,493,423
Total	1,122,100	864,221	704,672	346,100	299,397	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	3,503,903
Same-day separations^(a)									
<i>Public hospitals</i>	661,864	789,537	443,094	240,216	168,120	49,532	48,693	59,823	2,460,879
Public acute hospitals	661,677	789,536	443,094	240,138	167,757	49,526	48,693	59,823	2,460,244
Public psychiatric hospitals	187	1	0	78	363	6	0	0	635
<i>Private hospitals^(b)</i>	629,219	536,886	549,515	243,279	162,523	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	2,183,666
Private free-standing day hospital facilities	202,544	181,546	208,048	85,436	46,609	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	727,915
Other private hospitals ^(b)	426,675	355,340	341,467	157,843	115,914	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	1,455,751
<i>Public acute and private hospitals</i>	1,290,896	1,326,422	992,609	483,417	330,280	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	4,643,910
Total	1,291,083	1,326,423	992,609	483,495	330,643	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	4,644,545

(continued)

Table S7.1 (continued): Summary of separations, average cost weight, patient day and average length of stay statistics, by hospital type, states and territories, 2008–09

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Same-day separations as a % of total									
Public hospitals	43.9	57.2	50.2	51.4	44.9	52.2	54.2	62.7	50.3
Public acute hospitals	44.1	57.2	50.2	51.5	45.0	52.6	54.2	62.7	50.4
Public psychiatric hospitals	3.1	0.2	0.0	5.3	17.0	0.9	..	..	5.7
Private hospitals ^(b)	69.4	66.2	67.5	67.2	63.6	n.p.	n.p.	n.p.	67.0
Private free-standing day hospital facilities	100.0	100.0	100.0	98.7	100.0	n.p.	n.p.	n.p.	99.8
Other private hospitals ^(b)	60.5	56.5	56.4	57.3	55.5	n.p.	n.p.	n.p.	57.6
Public acute and private hospitals	53.6	60.6	58.5	58.4	52.6	n.p.	n.p.	n.p.	57.1
Total	53.5	60.5	58.5	58.3	52.5	n.p.	n.p.	n.p.	57.0
Separations per 1,000 population^(c)									
Public hospitals	204.2	247.3	202.1	212.6	216.3	179.0	275.4	487.9	219.3
Public acute hospitals	203.4	247.2	202.0	212.0	215.1	177.7	275.4	487.9	218.8
Public psychiatric hospitals	0.9	0.1	0.1	0.7	1.3	1.3	..	..	0.5
Private hospitals ^(b)	122.1	144.0	184.4	163.0	142.5	n.p.	n.p.	n.p.	144.3
Private free-standing day hospital facilities	27.4	32.2	47.2	39.0	25.8	n.p.	n.p.	n.p.	32.4
Other private hospitals ^(b)	94.7	111.7	137.3	123.9	116.7	n.p.	n.p.	n.p.	111.9
Public acute and private hospitals	325.5	391.1	386.5	374.9	357.5	n.p.	n.p.	n.p.	363.1
Total	326.4	391.2	386.5	375.6	358.8	n.p.	n.p.	n.p.	363.6
Average public cost weight of separations^(d)									
Public hospitals	1.07	0.97	1.00	0.98	1.10	1.05	1.00	0.70	1.01
Public acute hospitals	1.06	0.97	1.00	0.97	1.09	1.04	1.00	0.70	1.01
Public psychiatric hospitals	2.69	3.86	4.37	3.20	3.21	2.45	..	..	2.91
Private hospitals ^(b)	0.93	0.89	0.88	0.83	0.96	n.p.	n.p.	n.p.	0.90
Private free-standing day hospital facilities	0.55	0.41	0.48	0.34	0.46	n.p.	n.p.	n.p.	0.47
Other private hospitals ^(b)	1.06	1.03	1.02	0.99	1.08	n.p.	n.p.	n.p.	1.03
Public acute and private hospitals	1.02	0.94	0.94	0.91	1.04	n.p.	n.p.	n.p.	0.97
Total	1.02	0.94	0.94	0.91	1.04	n.p.	n.p.	n.p.	0.97

(continued)

Table S7.1 (continued): Summary of separations, average cost weight, patient day and average length of stay statistics, by hospital type, states and territories, 2008–09

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Average private cost weight of separations^(e)									
Private hospitals ^(b)	0.86	0.81	0.80	0.76	0.88	n.p.	n.p.	n.p.	0.82
Private free-standing day hospital facilities	0.42	0.30	0.35	0.26	0.34	n.p.	n.p.	n.p.	0.35
Other private hospitals ^(b)	1.00	0.96	0.96	0.91	1.00	n.p.	n.p.	n.p.	0.97
Patient days									
Public hospitals	6,114,244	4,499,508	3,072,713	1,647,019	1,598,610	394,285	292,947	269,856	17,889,182
Public acute hospitals	5,884,963	4,455,411	2,953,505	1,588,188	1,489,687	367,287	292,947	269,856	17,301,844
Public psychiatric hospitals	229,281	44,097	119,208	58,831	108,923	26,998	..	..	587,338
Private hospitals ^(b)	2,121,237	2,060,800	2,005,809	819,851	609,747	n.p.	n.p.	n.p.	7,892,929
Private free-standing day hospital facilities	202,544	181,692	208,048	86,596	46,609	n.p.	n.p.	n.p.	729,223
Other private hospitals ^(b)	1,918,693	1,879,108	1,797,761	733,255	563,138	n.p.	n.p.	n.p.	7,163,706
Public acute and private hospitals	8,006,200	6,516,211	4,959,314	2,408,039	2,099,434	n.p.	n.p.	n.p.	25,194,773
Total	8,235,481	6,560,308	5,078,522	2,466,870	2,208,357	n.p.	n.p.	n.p.	25,782,111
Patient days per 1,000 population^(c)									
Public hospitals	810.6	789.5	702.0	751.2	871.8	713.3	909.0	1,543.0	789.3
Public acute hospitals	778.4	781.2	674.4	724.6	810.3	662.7	909.0	1,543.0	762.4
Public psychiatric hospitals	32.2	8.3	27.6	26.5	61.5	50.6	..	..	27.0
Private hospitals ^(b)	279.8	358.4	454.4	371.6	326.1	n.p.	n.p.	n.p.	344.3
Private free-standing day hospital facilities	27.4	32.3	47.2	39.0	25.8	n.p.	n.p.	n.p.	32.4
Other private hospitals ^(b)	252.4	326.1	407.2	332.5	300.4	n.p.	n.p.	n.p.	311.9
Public acute and private hospitals	1,058.2	1,139.6	1,128.8	1,096.2	1,136.5	n.p.	n.p.	n.p.	1,106.7
Total	1,090.4	1,147.9	1,156.4	1,122.8	1,198.0	n.p.	n.p.	n.p.	1,133.7

(continued)

Table S7.1 (continued): Summary of separations, average cost weight, patient day and average length of stay statistics, by hospital type, states and territories, 2008–09

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Average length of stay (days)									
Public hospitals	4.1	3.3	3.5	3.5	4.3	4.2	3.3	2.8	3.7
Public acute hospitals	3.9	3.2	3.3	3.4	4.0	3.9	3.3	2.8	3.5
Public psychiatric hospitals ^(f)	38.5	89.6	292.9	40.2	50.9	40.5	..	..	52.8
Private hospitals ^(b)	2.3	2.5	2.5	2.3	2.4	n.p.	n.p.	n.p.	2.4
Private free-standing day hospital facilities	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.p.	1.0
Other private hospitals ^(b)	2.7	3.0	3.0	2.7	2.7	n.p.	n.p.	n.p.	2.8
Public acute and private hospitals	3.3	3.0	2.9	2.9	3.3	n.p.	n.p.	n.p.	3.1
Total	3.4	3.0	3.0	3.0	3.5	n.p.	n.p.	n.p.	3.2
Average length of stay, excluding same-day separations (days)									
Public hospitals	6.5	6.3	6.0	6.2	6.9	7.6	5.9	5.9	6.3
Public acute hospitals	6.2	6.2	5.7	6.0	6.5	7.1	5.9	5.9	6.1
Public psychiatric hospitals ^(f)	39.8	89.8	292.9	42.5	61.1	40.9	..	..	56.0
Private hospitals ^(b)	5.4	5.6	5.5	4.8	4.8	n.p.	n.p.	n.p.	5.3
Private free-standing day hospital facilities	..	1.7	..	1.0	..	n.p.	n.p.	n.p.	1.0
Other private hospitals ^(b)	5.4	5.6	5.5	4.9	4.8	n.p.	n.p.	n.p.	5.3
Public acute and private hospitals	6.0	6.0	5.6	5.6	5.9	n.p.	n.p.	n.p.	5.9
Total	6.2	6.1	5.8	5.7	6.3	n.p.	n.p.	n.p.	6.0

Notes: See Boxes 7.2 and 7.3 for notes on data limitations and methods.

- (a) Separations for which the care type was reported as *Newborn with no qualified days*, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.
- (b) Includes private psychiatric hospitals.
- (c) Figures are directly age-standardised to the June 2001 Australian population as detailed in *Appendix 1*.
- (d) Separations for which the care type was reported as *Acute*, or as *Newborn with qualified patient days*, or was *Not reported*. AR-DRG version 5.1 national public sector estimated cost weights 2007–08 were applied to AR-DRG version 5.2 DRGs for all rows in Average public cost weight of separations.
- (e) Separations for which the care type was reported as *Acute*, or as *Newborn with qualified patient days*, or was *Not reported*. AR-DRG version 5.1 national private sector estimated cost weights for 2007–08 were applied to AR-DRG version 5.2 DRGs for all rows in Average private cost weight of separations.
- (f) Caution should be used with average length of stay data for public psychiatric hospitals. The figures include a small percentage of long-stay patients who can affect the average markedly.

Table S7.2: Separations by funding source, public and private hospitals, states and territories, 2008–09

Funding source	NSW	Vic	Qld	WA	SA	Tas^(b)	ACT	NT	Total
Public hospitals									
Public patients ^(a)	1,190,540	1,194,355	809,615	419,343	325,903	78,296	78,691	91,758	4,188,501
Private health insurance	222,985	116,224	33,356	31,089	29,932	11,919	5,433	653	451,591
Self-funded ^(b)	25,725	14,837	14,911	674	1,508		213	358	58,226
Workers compensation	7,384	5,571	4,964	1,872	1,475	453	445	314	22,478
Motor vehicle third party personal claim	4,654	8,861	3,363	2,945	1,715	851	241	472	23,102
Department of Veterans' Affairs	51,415	30,450	13,457	7,906	11,778	3,108	4,099	443	122,656
Other ^(c)	3,266	9,326	3,674	3,604	2,229	265	747	1,358	24,469
<i>Total</i>	<i>1,505,969</i>	<i>1,379,624</i>	<i>883,340</i>	<i>467,433</i>	<i>374,540</i>	<i>94,892</i>	<i>89,869</i>	<i>95,356</i>	<i>4,891,023</i>
Private hospitals									
Public patients ^(a)	6,393	1,165	25,262	54,004	4,098	n.p.	n.p.	n.p.	100,619
Private health insurance	741,102	677,625	615,766	262,709	219,865	n.p.	n.p.	n.p.	2,579,128
Self-funded ^(b)	91,837	80,823	74,243	17,725	10,193	n.p.	n.p.	n.p.	278,086
Workers compensation	19,584	10,061	11,560	6,779	5,185	n.p.	n.p.	n.p.	54,788
Motor vehicle third party personal claim	620	2,742	63	620	389	n.p.	n.p.	n.p.	4,719
Department of Veterans' Affairs	46,721	37,444	77,577	17,201	13,703	n.p.	n.p.	n.p.	198,277
Other ^(c)	957	1,160	9,470	3,124	2,067	n.p.	n.p.	n.p.	41,808
<i>Total</i>	<i>907,214</i>	<i>811,020</i>	<i>813,941</i>	<i>362,162</i>	<i>255,500</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>3,257,425</i>
All hospitals	2,413,183	2,190,644	1,697,281	829,595	630,040	n.p.	n.p.	n.p.	8,148,448

Notes: See Boxes 7.1, 7.2 and 7.4 for notes on data limitations and methods.

- (a) 'Public patients' includes separations with a funding source of *Australian Health Care Agreements*, *Reciprocal health care agreements*, *Other hospital or public authority* (with a public patient election status) and *No charge raised* (in public hospitals). The majority of separations with a funding source of *No charge raised* in public hospitals were in Western Australia, reflecting that some public patient services were funded through the Medicare Benefit Schedule.
- (b) Tasmania was unable to identify all patients whose funding source may have been *Self-funded*, therefore the number of separations in this category may be underestimated and others may be overestimated.
- (c) 'Other' includes separations with a funding source of *Other compensation*, *Department of Defence*, *Correctional facilities*, *Other hospital or public authority* (without a public patient election status), *Other*, *No charge raised* (in private hospitals) and *Not reported*.

Table S7.3: Patient days by funding source, public and private hospitals, states and territories, 2008–09

Funding source	NSW	Vic	Qld	WA	SA	Tas ^(b)	ACT	NT	Total
Public hospitals									
Public patients ^(a)	4,616,210	3,699,821	2,811,225	1,388,328	1,310,114	319,148	247,661	254,845	14,647,352
Private health insurance	944,945	470,812	111,346	162,794	163,983	38,974	25,164	1,783	1,919,801
Self-funded ^(b)	82,994	22,250	23,619	1,238	2,016	0	765	1,233	134,115
Workers compensation	27,412	16,826	18,839	7,565	5,408	1,624	1,829	1,323	80,826
Motor vehicle third party personal claim	31,683	45,565	21,234	24,948	11,107	5,534	1,814	4,068	145,953
Department of Veterans' Affairs	307,976	175,323	73,670	44,962	99,272	20,818	13,042	2,040	737,103
Other ^(c)	103,024	68,911	12,780	17,184	6,710	8,187	2,672	4,564	224,032
<i>Total</i>	<i>6,114,244</i>	<i>4,499,508</i>	<i>3,072,713</i>	<i>1,647,019</i>	<i>1,598,610</i>	<i>394,285</i>	<i>292,947</i>	<i>269,856</i>	<i>17,889,182</i>
Private hospitals									
Public patients ^(a)	8,886	2,695	73,607	80,133	6,049	n.p.	n.p.	n.p.	200,326
Private health insurance	1,709,225	1,727,331	1,485,047	607,483	517,855	n.p.	n.p.	n.p.	6,200,983
Self-funded ^(b)	142,603	103,950	83,903	20,913	11,695	n.p.	n.p.	n.p.	367,284
Workers compensation	42,312	25,628	20,418	10,969	12,077	n.p.	n.p.	n.p.	114,999
Motor vehicle third party personal claim	2,142	32,899	184	1,360	1,377	n.p.	n.p.	n.p.	39,523
Department of Veterans' Affairs	214,228	166,458	327,978	93,881	55,035	n.p.	n.p.	n.p.	882,282
Other ^(c)	1,841	1,839	14,672	5,112	5,659	n.p.	n.p.	n.p.	87,532
<i>Total</i>	<i>2,121,237</i>	<i>2,060,800</i>	<i>2,005,809</i>	<i>819,851</i>	<i>609,747</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>7,892,929</i>
All hospitals	8,235,481	6,560,308	5,078,522	2,466,870	2,208,357	n.p.	n.p.	n.p.	25,782,111

Notes: See Boxes 7.1, 7.2 and 7.4 for notes on data limitations and methods.

- (a) 'Public patients' includes separations with a funding source of *Australian Health Care Agreements, Reciprocal health care agreements, Other hospital or public authority* (with a public patient election status) and *No charge raised* (in public hospitals). The majority of separations with a funding source of *No charge raised* in public hospitals were in Western Australia, reflecting that some public patient services were funded through the Medicare Benefit Schedule.
- (b) Tasmania was unable to identify all patients whose funding source may have been *Self-funded*, therefore the number of separations in this category may be underestimated and others may be overestimated.
- (c) 'Other' includes separations with a funding source of *Other compensation, Department of Defence, Correctional facilities, Other hospital or public authority* (without a public patient election status), *Other, No charge raised* (in private hospitals) and *Not reported*.

Table S7.4: Separations, by state or territory of usual residence, public and private hospitals, states and territories, 2008-09

State or territory of usual residence	State or territory of hospitalisation								Total	Separations per 1,000 population ^(b)
	NSW	Vic	Qld	WA	SA	Tas	ACT	NT		
Public hospitals										
New South Wales	1,468,718	19,549	10,207	602	1,874	223	20,398	331	1,521,902	206.4
Victoria	6,615	1,348,878	1,957	596	2,236	315	331	356	1,361,284	243.9
Queensland	11,564	1,410	864,494	546	510	144	168	479	879,315	201.2
Western Australia	520	593	427	463,413	286	77	55	2,291	467,662	212.7
South Australia	645	1,740	482	228	367,182	59	70	3,258	373,664	215.7
Tasmania	266	1,491	254	88	67	93,933	18	33	96,150	181.6
Australian Capital Territory	2,908	235	197	30	57	7	68,761	37	72,232	221.0
Northern Territory	238	245	381	228	1,664	5	21	88,002	90,784	465.4
Other Australian territories ^(c)	n.p.	742	8	140	0	0	0	0	n.p.	n.p.
Not elsewhere classified ^(d)	n.p.	4,301	4,179	1,562	125	129	47	388	n.p.	n.p.
Not reported	0	440	754	0	539	0	0	0	1,733	..
<i>Total</i>	<i>1,505,969</i>	<i>1,379,624</i>	<i>883,340</i>	<i>467,433</i>	<i>374,540</i>	<i>94,892</i>	<i>89,869</i>	<i>95,175</i>	<i>4,890,842</i>	<i>219.3</i>
Private hospitals										
New South Wales	891,305	5,950	27,623	201	1,636	n.p.	n.p.	n.p.	934,184	125.6
Victoria	7,200	801,061	1,430	241	1,537	n.p.	n.p.	n.p.	811,702	144.1
Queensland	4,219	975	782,464	207	270	n.p.	n.p.	n.p.	788,315	178.6
Western Australia	369	326	306	361,119	98	n.p.	n.p.	n.p.	362,307	163.1
South Australia	222	443	288	62	250,311	n.p.	n.p.	n.p.	251,391	140.2
Tasmania	218	1,176	282	48	50	n.p.	n.p.	n.p.	55,950	104.4
Australian Capital Territory	2,119	178	181	17	51	n.p.	n.p.	n.p.	30,734	92.3
Northern Territory	289	332	601	133	1,190	n.p.	n.p.	n.p.	15,740	86.7
Other Australian territories ^(c)	n.p.	36	43	35	0	n.p.	n.p.	n.p.	n.p.	n.p.
Not elsewhere classified ^(d)	n.p.	543	669	99	12	n.p.	n.p.	n.p.	n.p.	n.p.
Not reported	0	0	54	0	345	n.p.	n.p.	n.p.	482	..
<i>Total</i>	<i>907,214</i>	<i>811,020</i>	<i>813,941</i>	<i>362,162</i>	<i>255,500</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>3,257,425</i>	<i>144.3</i>
Total	2,413,183	2,190,644	1,697,281	829,595	630,040	n.p.	n.p.	n.p.	8,148,448	363.6

Notes: See Boxes 7.1, 7.2 and 7.4 for notes on data limitations and methods.

Table S7.5: Separations by care type, public and private hospitals, states and territories, 2008–09

Care type	NSW	Vic ^(a)	Qld	WA	SA	Tas ^(b)	ACT	NT ^(b)	Total
Public hospitals									
Acute care	1,437,796	1,332,252	842,765	450,300	359,088	91,658	82,785	93,271	4,689,915
Rehabilitation care	26,400	13,821	17,574	8,923	6,907	1,168	2,681	401	77,875
Palliative care	9,345	5,652	5,457	1,245	1,298	304	609	352	24,262
Geriatric evaluation and management	2,348	12,250	1,336	708	377	44	1,244	0	18,307
Psychogeriatric care	669	2,001	525	716	265	165	53	0	4,394
Maintenance care	6,391	802	5,547	1,895	2,767	464	1,369	402	19,637
Newborn–qualified days only	18,816	10,940	7,017	3,262	2,886	1,089	1,046	912	45,968
Newborn–qualified and unqualified days ^(c)	4,195	1,906	2,790	384	952	0	81	0	10,308
Newborn–unqualified days only	54,139	41,630	35,353	18,497	11,612	2,845	3,009	2,566	169,651
<i>Newborn total</i>	<i>77,150</i>	<i>54,476</i>	<i>45,160</i>	<i>22,143</i>	<i>15,450</i>	<i>3,934</i>	<i>4,136</i>	<i>3,478</i>	<i>225,927</i>
Other admitted patient care	0	0	329	0	0	0	1	18	348
Not reported	9	0	0	0	0	0	0	0	9
<i>Total</i>	<i>1,560,108</i>	<i>1,421,254</i>	<i>918,693</i>	<i>485,930</i>	<i>386,152</i>	<i>97,737</i>	<i>92,878</i>	<i>97,922</i>	<i>5,060,674</i>
Private hospitals									
Acute care	816,865	786,677	782,217	355,940	241,913	n.p.	n.p.	n.p.	3,087,308
Rehabilitation care	82,032	13,596	25,295	1,393	12,484	n.p.	n.p.	n.p.	137,946
Palliative care	434	506	1,949	2,156	221	n.p.	n.p.	n.p.	5,281
Geriatric evaluation and management	0	0	55	3	47	n.p.	n.p.	n.p.	113
Psychogeriatric care	0	6,353	27	199	0	n.p.	n.p.	n.p.	6,579
Maintenance care	101	83	1,479	292	11	n.p.	n.p.	n.p.	2,004
Newborn–qualified days only	7,488	3,805	1,969	950	824	n.p.	n.p.	n.p.	15,581
Newborn–qualified and unqualified days ^(c)	294	0	760	1,229	0	n.p.	n.p.	n.p.	2,334
Newborn–unqualified days only	15,699	2	16,519	8,091	42	n.p.	n.p.	n.p.	44,570
<i>Newborn total</i>	<i>23,481</i>	<i>3,807</i>	<i>19,248</i>	<i>10,270</i>	<i>866</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>62,485</i>
Other admitted patient care	0	0	190	0	0	n.p.	n.p.	n.p.	193
Not reported	0	0	0	0	0	n.p.	n.p.	n.p.	86
<i>Total</i>	<i>922,913</i>	<i>811,022</i>	<i>830,460</i>	<i>370,253</i>	<i>255,542</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>3,301,995</i>

Notes: See Boxes 7.1, 7.2 and 7.4 for notes on data limitations and methods.

Table S7.6: Patient days, by care type, public and private hospitals, states and territories, 2008–09

Care type	NSW	Vic ^(a)	Qld	WA	SA	Tas ^(b)	ACT	NT ^(b)	Total
Public hospitals									
Acute care	5,111,025	3,585,978	2,402,547	1,328,711	1,193,685	320,269	214,760	242,682	14,399,657
Rehabilitation care	489,683	302,083	265,098	175,511	112,223	31,725	32,050	5,002	1,413,375
Palliative care	109,058	81,867	51,375	11,882	16,392	3,316	0	387	285,300
Geriatric evaluation and management	22,642	313,534	23,590	6,239	3,646	704	13,000	0	383,355
Psychogeriatric care	48,774	63,576	10,851	32,842	38,386	182	546	0	195,157
Maintenance care	199,516	33,453	235,524	53,022	193,592	27,645	15,456	8,352	766,560
Newborn–qualified days	133,267	119,017	82,614	38,812	40,686	10,444	9,523	9,961	444,324
Newborn–unqualified days	151,985	109,978	82,944	50,449	32,776	7,346	6,651	7,664	449,793
<i>Newborn total</i>	<i>285,252</i>	<i>228,995</i>	<i>165,558</i>	<i>89,261</i>	<i>73,462</i>	<i>17,790</i>	<i>16,174</i>	<i>17,625</i>	<i>894,117</i>
Other admitted patient care	0	0	1,114	0	0	0	1	60	1,175
Not reported	279	0	0	0	0	0	0	0	279
<i>Total^(c)</i>	<i>6,114,244</i>	<i>4,499,508</i>	<i>3,072,713</i>	<i>1,647,019</i>	<i>1,598,610</i>	<i>394,285</i>	<i>292,947</i>	<i>269,856</i>	<i>17,889,182</i>
Private hospitals									
Acute care	1,739,792	1,788,993	1,779,257	747,655	543,658	n.p.	n.p.	n.p.	6,846,149
Rehabilitation total	334,033	202,119	127,023	28,084	57,438	n.p.	n.p.	n.p.	771,272
Palliative care	5,059	6,030	27,682	20,914	3,230	n.p.	n.p.	n.p.	63,024
Geriatric evaluation and management	0	0	504	3	208	n.p.	n.p.	n.p.	738
Psychogeriatric care	0	29,052	356	5,472	0	n.p.	n.p.	n.p.	34,880
Maintenance care	1,572	11,830	46,239	7,599	342	n.p.	n.p.	n.p.	68,661
Newborn–qualified days	40,781	22,776	24,151	10,124	4,871	n.p.	n.p.	n.p.	106,418
Newborn–unqualified days	68,329	2	66,866	42,043	137	n.p.	n.p.	n.p.	194,573
<i>Newborn total</i>	<i>109,110</i>	<i>22,778</i>	<i>91,017</i>	<i>52,167</i>	<i>5,008</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>300,991</i>
Other admitted patient care	0	0	597	0	0	n.p.	n.p.	n.p.	707
Not reported	0	0	0	0	0	n.p.	n.p.	n.p.	1,080
<i>Total^(c)</i>	<i>2,121,237</i>	<i>2,060,800</i>	<i>2,005,809</i>	<i>819,851</i>	<i>609,747</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>7,892,929</i>

Notes: See Boxes 7.1, 7.2 and 7.4 for notes on data limitations and methods.

Table S7.7: Separations, by mode of admission, public and private hospitals, states and territories, 2008–09

Mode of admission	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Admitted patient transferred from another hospital	87,001	62,102	28,446	34,165	17,404	3,033	2,852	308	235,311
Statistical admission: type change	21,465	9,574	17,970	8,223	4,414	1,606	5,399	1,304	69,955
Other ^(a)	1,378,865	1,307,456	836,924	425,045	350,342	79,774	81,618	93,744	4,553,768
Not reported	18,638	492	0	0	2,380	10,479	0	0	31,989
<i>Total</i>	<i>1,505,969</i>	<i>1,379,624</i>	<i>883,340</i>	<i>467,433</i>	<i>374,540</i>	<i>94,892</i>	<i>89,869</i>	<i>95,356</i>	<i>4,891,023</i>
Private hospitals									
Admitted patient transferred from another hospital	36,400	26,688	17,696	6,430	5,898	n.p.	n.p.	n.p.	98,230
Statistical admission: type change	2,797	2,221	4,958	986	272	n.p.	n.p.	n.p.	22,316
Other ^(a)	867,873	782,111	791,287	354,746	249,239	n.p.	n.p.	n.p.	3,136,192
Not reported	144	0	0	0	91	n.p.	n.p.	n.p.	687
<i>Total</i>	<i>907,214</i>	<i>811,020</i>	<i>813,941</i>	<i>362,162</i>	<i>255,500</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>3,257,425</i>
All hospitals									
Admitted patient transferred from another hospital	123,401	88,790	46,142	40,595	23,302	n.p.	n.p.	n.p.	333,541
Statistical admission: type change	24,262	11,795	22,928	9,209	4,686	n.p.	n.p.	n.p.	92,271
Other ^(a)	2,246,738	2,089,567	1,628,211	779,791	599,581	n.p.	n.p.	n.p.	7,689,960
Not reported	18,782	492	0	0	2,471	n.p.	n.p.	n.p.	32,676
Total	2,413,183	2,190,644	1,697,281	829,595	630,040	n.p.	n.p.	n.p.	8,148,448

Notes: See Boxes 7.1, 7.2 and 7.4 for notes on data limitations and methods.

Table S7.8: Separations, by urgency of admission and *Medical/Surgical/Other care*^(a), public and private hospitals, 2008–09

Urgency of admission and type of care	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Emergency									
Surgical	78,224	54,710	37,670	25,685	19,844	5,728	5,775	3,782	231,418
Medical	582,332	425,740	343,842	152,737	144,094	33,659	28,419	26,409	1,737,232
Other	19,975	13,148	7,762	5,287	5,312	1,555	1,003	952	54,994
<i>Total emergency</i>	<i>680,531</i>	<i>493,598</i>	<i>389,274</i>	<i>183,709</i>	<i>169,250</i>	<i>40,942</i>	<i>35,197</i>	<i>31,143</i>	<i>2,023,644</i>
Elective									
Surgical	186,860	196,943	112,377	70,431	64,642	11,905	10,081	5,788	659,027
Medical	389,220	516,563	71,467	67,249	47,182	15,387	8,019	20,063	1,135,150
Other	66,662	83,690	39,813	36,541	11,138	4,675	3,301	1,759	247,579
<i>Total elective</i>	<i>642,742</i>	<i>797,196</i>	<i>223,657</i>	<i>174,221</i>	<i>122,962</i>	<i>31,967</i>	<i>21,401</i>	<i>27,610</i>	<i>2,041,756</i>
Not assigned ^(b)	182,635	88,338	270,409	109,503	82,328	21,967	33,271	36,603	825,054
Not reported	61	492	0	0	0	16	0	0	569
<i>Total</i>	<i>1,505,969</i>	<i>1,379,624</i>	<i>883,340</i>	<i>467,433</i>	<i>374,540</i>	<i>94,892</i>	<i>89,869</i>	<i>95,356</i>	<i>4,891,023</i>

(continued)

Table S7.8 (continued): Separations, by urgency of admission and *Medical/Surgical/Other* care^(a), public and private hospitals, 2008–09

Urgency of admission and type of care	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Private hospitals									
Emergency									
Surgical	4,256	6,927	9,783	3,651	5,237	n.p.	n.p.	n.p.	30,609
Medical	15,132	27,386	47,109	11,976	18,257	n.p.	n.p.	n.p.	125,669
Other	1,145	2,691	3,384	1,054	2,244	n.p.	n.p.	n.p.	10,800
<i>Total emergency</i>	<i>20,533</i>	<i>37,004</i>	<i>60,276</i>	<i>16,681</i>	<i>25,738</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>167,078</i>
Elective									
Surgical	368,602	285,811	260,031	131,788	99,559	n.p.	n.p.	n.p.	1,186,080
Medical	272,517	283,582	157,785	74,143	48,429	n.p.	n.p.	n.p.	861,023
Other	183,403	179,763	139,267	60,793	42,057	n.p.	n.p.	n.p.	619,348
<i>Total elective</i>	<i>824,522</i>	<i>749,156</i>	<i>557,083</i>	<i>266,724</i>	<i>190,045</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>2,666,451</i>
Not assigned ^(b)	62,159	24,860	196,582	78,757	39,717	n.p.	n.p.	n.p.	407,755
Not reported	0	0	0	0	0	n.p.	n.p.	n.p.	16,141
<i>Total</i>	<i>907,214</i>	<i>811,020</i>	<i>813,941</i>	<i>362,162</i>	<i>255,500</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>3,257,425</i>

Notes: See Boxes 7.1 and 7.2 for notes on data limitations and methods.

(a) The type of care is assigned according to the *Medical/Surgical/Other* partitions of the AR-DRG classification.

(b) The Urgency of admission category *Not assigned* includes admissions for normal delivery and birth, statistical admissions and planned readmissions for some treatments.

Table S7.9: Separations for selected potentially preventable hospitalisations, by state or territory of usual residence, all hospitals, 2008–09

PPH category	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Vaccine-preventable conditions									
Influenza and pneumonia	3,778	2,798	2,760	998	960	275	143	319	12,053
Other vaccine-preventable conditions	1,398	1,433	609	348	265	49	23	183	4,312
<i>Total vaccine-preventable conditions</i>	<i>5,169</i>	<i>4,227</i>	<i>3,364</i>	<i>1,345</i>	<i>1,224</i>	<i>324</i>	<i>166</i>	<i>500</i>	<i>16,345</i>
Acute conditions									
Appendicitis with generalised peritonitis	1,131	1,004	695	475	299	84	66	41	3,799
Cellulitis	12,023	8,615	8,481	3,309	2,647	640	435	734	36,945
Convulsions and epilepsy	10,742	7,689	6,953	2,810	2,601	768	485	745	32,852
Dehydration and gastroenteritis	18,578	19,256	12,085	5,400	4,843	1,115	702	535	62,559
Dental conditions	15,799	16,356	11,836	7,765	5,025	874	726	773	59,174
Ear, nose and throat infections	10,979	7,946	8,306	3,405	3,413	635	417	707	35,847
Gangrene	1,132	1,649	1,085	470	357	110	38	149	4,998
Pelvic inflammatory disease	1,349	1,187	1,042	448	366	91	71	114	4,670
Perforated/bleeding ulcer	1,711	1,414	891	547	450	104	82	38	5,242
Pyelonephritis	16,916	13,590	10,856	4,718	4,098	780	789	615	52,450
<i>Total acute conditions</i>	<i>90,316</i>	<i>78,648</i>	<i>62,193</i>	<i>29,332</i>	<i>24,081</i>	<i>5,198</i>	<i>3,810</i>	<i>4,446</i>	<i>298,355</i>
Chronic conditions									
Angina	9,615	8,504	9,087	2,860	2,750	853	298	326	34,319
Asthma	12,489	9,374	6,611	2,914	3,719	611	323	435	36,526
Chronic obstructive pulmonary disease	20,751	15,189	13,470	4,847	5,911	1,531	633	969	63,340
Congestive cardiac failure	14,961	12,714	8,524	3,958	3,931	969	617	341	46,057
Diabetes complications	43,548	35,526	39,589	41,218	11,126	2,788	1,455	1,873	177,241
Hypertension	2,092	1,363	1,505	384	579	114	80	26	6,149
Iron deficiency anaemia	7,673	9,002	4,666	2,749	2,189	632	284	186	27,393
Nutritional deficiencies	64	44	59	20	14	1	5	25	232
Rheumatic heart disease	645	589	654	223	221	44	26	157	2,560
<i>Total chronic conditions</i>	<i>107,157</i>	<i>88,620</i>	<i>81,086</i>	<i>57,519</i>	<i>29,204</i>	<i>7,311</i>	<i>3,545</i>	<i>4,135</i>	<i>378,860</i>
<i>Total chronic conditions, excluding diabetes</i>	<i>68,290</i>	<i>56,779</i>	<i>44,576</i>	<i>17,955</i>	<i>19,314</i>	<i>4,755</i>	<i>2,266</i>	<i>2,465</i>	<i>216,576</i>
Total selected potentially preventable hospitalisations	201,786	170,790	145,944	87,871	54,232	12,772	7,496	8,963	690,488

Notes: See Boxes 7.1 and 7.2 for notes on data limitations and methods.

(a) As more than one chronic condition may be reported for a separation, the sum of *Diabetes complications* and *Chronic conditions (excluding diabetes)* does not necessarily equal the total number of separations for *Chronic conditions*.

Table S7.10: Separations, by age group and sex, public hospitals, states and territories, 2008–09

Sex	Age group	NSW	VIC	QLD	WA	SA	TAS	ACT	NT	Total
Males	Under 1	26,407	16,817	13,377	5,895	5,244	1,221	1,327	1,414	71,702
	1–4	26,569	18,950	16,837	8,039	7,233	1,174	1,150	1,819	81,771
	5–14	33,390	25,703	22,376	10,835	7,443	1,906	1,842	1,895	105,390
	15–24	41,483	37,497	29,102	14,663	10,107	2,891	2,787	2,400	140,930
	25–34	45,353	43,418	33,212	16,556	11,248	3,300	3,339	3,452	159,878
	35–44	61,343	61,264	41,396	23,037	17,618	4,375	4,733	7,400	221,166
	45–54	84,145	81,286	56,403	29,589	21,681	6,310	5,252	9,375	294,041
	55–64	110,877	112,330	72,345	38,245	27,249	7,551	8,488	7,932	385,017
	65–74	127,415	131,246	71,991	38,808	29,509	8,575	7,849	5,191	420,584
	75–84	130,399	121,366	59,983	33,969	33,664	6,583	7,607	1,257	394,828
	85 and over	42,828	30,285	15,039	9,099	10,805	2,133	2,075	195	112,459
	<i>Total^(a)</i>	<i>730,210</i>	<i>680,162</i>	<i>432,061</i>	<i>228,735</i>	<i>181,801</i>	<i>46,019</i>	<i>46,449</i>	<i>42,330</i>	<i>2,387,767</i>
Females	Under 1	20,945	12,548	10,108	4,377	3,923	910	860	1,080	54,751
	1–4	19,737	13,740	12,305	5,548	4,868	864	817	1,312	59,191
	5–14	23,902	19,142	17,002	7,732	5,814	1,396	1,110	1,391	77,489
	15–24	63,584	55,960	51,604	22,986	18,904	4,783	3,652	5,310	226,783
	25–34	108,908	98,906	69,258	33,119	26,362	6,169	6,282	7,061	356,065
	35–44	82,900	83,568	52,836	28,736	22,484	5,615	5,415	8,976	290,530
	45–54	75,043	80,524	51,849	29,652	20,713	6,554	4,381	11,365	280,081
	55–64	83,407	91,073	56,120	29,712	21,205	6,794	6,017	10,691	305,019
	65–74	110,534	99,860	56,758	32,290	25,324	6,558	6,116	4,323	341,763
	75–84	122,183	97,893	49,124	29,904	28,511	6,309	5,843	1,218	340,985
	85 and over	64,600	46,246	24,315	14,641	14,630	2,920	2,927	299	170,578
	<i>Total^(a)</i>	<i>775,745</i>	<i>699,460</i>	<i>451,279</i>	<i>238,697</i>	<i>192,738</i>	<i>48,872</i>	<i>43,420</i>	<i>53,026</i>	<i>2,503,237</i>
Total^(a)		1,505,969	1,379,624	883,340	467,433	374,540	94,892	89,869	95,356	4,891,023

Notes: See Boxes 7.1 and 7.2 for notes on data limitations and methods.

Table S7.11: Separations, by age group and sex, private hospitals, states and territories, 2008–09

Sex	Age group	NSW	VIC	QLD	WA	SA	TAS	ACT	NT	Total
Males	Under 1	5,755	3,825	3,203	2,613	1,078	n.p.	n.p.	n.p.	16,959
	1–4	6,652	3,833	5,434	2,759	1,854	n.p.	n.p.	n.p.	21,419
	5–14	8,739	6,038	7,384	3,534	2,184	n.p.	n.p.	n.p.	28,953
	15–24	19,821	17,153	15,097	9,827	5,622	n.p.	n.p.	n.p.	70,080
	25–34	21,640	19,650	16,885	10,130	5,248	n.p.	n.p.	n.p.	76,412
	35–44	36,428	32,033	28,507	16,250	8,901	n.p.	n.p.	n.p.	126,186
	45–54	53,204	47,978	48,077	24,683	15,486	n.p.	n.p.	n.p.	195,955
	55–64	85,366	72,478	82,740	35,905	24,120	n.p.	n.p.	n.p.	310,713
	65–74	82,309	68,890	77,584	31,971	24,458	n.p.	n.p.	n.p.	294,255
	75–84	66,950	61,127	60,314	24,230	22,352	n.p.	n.p.	n.p.	241,654
	85 and over	22,035	21,583	24,806	6,969	6,224	n.p.	n.p.	n.p.	83,747
	<i>Total^(a)</i>	<i>408,899</i>	<i>354,588</i>	<i>370,031</i>	<i>168,871</i>	<i>117,527</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>1,466,333</i>
Females	Under 1	4,067	2,430	2,064	1,635	448	n.p.	n.p.	n.p.	11,028
	1–4	4,303	2,413	3,520	1,743	1,297	n.p.	n.p.	n.p.	13,767
	5–14	7,440	5,336	6,354	3,021	1,994	n.p.	n.p.	n.p.	25,100
	15–24	28,889	31,526	26,926	14,366	6,550	n.p.	n.p.	n.p.	112,446
	25–34	57,352	53,604	50,544	25,244	12,773	n.p.	n.p.	n.p.	207,844
	35–44	70,218	70,126	58,556	29,532	15,885	n.p.	n.p.	n.p.	253,600
	45–54	70,019	67,270	63,945	30,050	20,300	n.p.	n.p.	n.p.	261,204
	55–64	85,747	77,189	78,336	35,017	26,139	n.p.	n.p.	n.p.	312,644
	65–74	76,133	63,055	67,913	25,611	22,468	n.p.	n.p.	n.p.	263,625
	75–84	69,904	59,044	60,973	20,183	21,497	n.p.	n.p.	n.p.	238,347
	85 and over	24,243	24,428	24,779	6,889	8,610	n.p.	n.p.	n.p.	91,449
	<i>Total^(a)</i>	<i>498,315</i>	<i>456,421</i>	<i>443,910</i>	<i>193,291</i>	<i>137,961</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>1,791,054</i>
Total^(a)		907,214	811,020	813,941	362,162	255,500	n.p.	n.p.	n.p.	3,257,425

Notes: See Boxes 7.1 and 7.2 for notes on data limitations and methods.

Table S7.12: Separations, by Indigenous status, public and private hospitals, states and territories, 2008–09

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Sub-total— selected states and territories	Total
Public hospitals										
Aboriginal but not Torres Strait Islander origin	54,436	11,454	54,954	39,872	17,920	2,236	1,690	64,824	243,460	247,386
Torres Strait Islander but not Aboriginal origin	1,012	277	9,964	206	433	105	16	298	12,190	12,311
Aboriginal and Torres Strait Islander origin	1,305	949	3,790	900	100	111	281	1,067	8,111	8,503
<i>Indigenous people</i>	56,753	12,680	68,708	40,978	18,453	2,452	1,987	66,189	263,761	268,200
Neither Aboriginal nor Torres Strait Islander origin	1,434,823	1,357,081	797,701	426,455	339,592	89,994	86,244	29,165	4,384,817	4,561,055
Not reported	14,393	9,863	16,931	0	16,495	2,446	1,638	2	57,684	61,768
<i>Total</i>	1,505,969	1,379,624	883,340	467,433	374,540	94,892	89,869	95,356	4,706,262	4,891,023
Private hospitals										
Aboriginal but not Torres Strait Islander origin	791	271	3,156	14,022	934	n.p.	n.p.	n.p.	19,174	19,776
Torres Strait Islander but not Aboriginal origin	59	81	742	278	46	n.p.	n.p.	n.p.	1,206	1,255
Aboriginal and Torres Strait Islander origin	609	358	528	143	38	n.p.	n.p.	n.p.	1,676	1,779
<i>Indigenous people</i>	1,459	710	4,426	14,443	1,018	n.p.	n.p.	n.p.	22,056	22,810
Neither Aboriginal nor Torres Strait Islander origin	885,960	800,180	733,180	347,719	240,286	n.p.	n.p.	n.p.	3,007,325	3,088,730
Not reported	19,795	10,130	76,335	0	14,196	n.p.	n.p.	n.p.	120,456	145,885
<i>Total</i>	907,214	811,020	813,941	362,162	255,500	n.p.	n.p.	n.p.	3,149,837	3,257,425
All hospitals										
<i>Indigenous people</i>	58,212	13,390	73,134	55,421	19,471	n.p.	n.p.	n.p.	285,817	291,010
<i>Other Australians^(c)</i>	2,354,971	2,177,254	1,624,147	774,174	610,569	n.p.	n.p.	n.p.	7,570,282	7,857,438
Total	2,413,183	2,190,644	1,697,281	829,595	630,040	n.p.	n.p.	n.p.	7,856,099	8,148,448
Separation rate ^(d) for Indigenous people per 1,000	528.8	581.9	797.1	1190.4	1017.9	n.p.	n.p.	1656.0	869.8	n.p.
Separation rate ^(d) for Other Australians per 1,000	327.4	395.3	383.5	364.2	355.4	n.p.	n.p.	215.0	362.5	n.p.
Separation rate ^(d) for all people per 1,000	330.5	396.0	391.2	380.9	362.8	n.p.	n.p.	502.6	369.4	n.p.
Rate ratio^(e)	1.6	1.5	2.1	3.3	2.9	n.p.	n.p.	7.7	2.4	n.p.

Notes: See Boxes 7.1, 7.2 and 7.4 for notes on data limitations and methods.

Table S7.13: Overnight separations, by Indigenous status, public and private hospitals, states and territories, 2008–09

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Sub-total— selected states and territories	Total
Public hospitals										
Aboriginal but not Torres Strait Islander origin	28,194	4,775	23,547	20,652	7,310	1,249	709	19,494	103,972	105,930
Torres Strait Islander but not Aboriginal origin	472	179	3,472	65	225	51	10	96	4,509	4,570
Aboriginal and Torres Strait Islander origin	820	465	1,759	213	63	68	81	262	3,582	3,731
<i>Indigenous people</i>	<i>29,486</i>	<i>5,419</i>	<i>28,778</i>	<i>20,930</i>	<i>7,598</i>	<i>1,368</i>	<i>800</i>	<i>19,852</i>	<i>112,063</i>	<i>114,231</i>
Neither Aboriginal nor Torres Strait Islander origin	805,789	579,730	403,071	206,287	190,842	42,600	39,239	15,680	2,201,399	2,283,238
Not reported	8,830	4,938	8,397	0	7,980	1,392	1,137	1	30,146	32,675
<i>Total</i>	<i>844,105</i>	<i>590,087</i>	<i>440,246</i>	<i>227,217</i>	<i>206,420</i>	<i>45,360</i>	<i>41,176</i>	<i>35,533</i>	<i>2,343,608</i>	<i>2,430,144</i>
Private hospitals										
Aboriginal but not Torres Strait Islander origin	256	99	813	128	366	n.p.	n.p.	n.p.	1,662	1,985
Torres Strait Islander but not Aboriginal origin	26	55	136	3	20	n.p.	n.p.	n.p.	240	259
Aboriginal and Torres Strait Islander origin	138	58	84	34	12	n.p.	n.p.	n.p.	326	369
<i>Indigenous people</i>	<i>420</i>	<i>212</i>	<i>1,033</i>	<i>165</i>	<i>398</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>2,228</i>	<i>2,613</i>
Neither Aboriginal nor Torres Strait Islander origin	273,370	271,138	246,438	118,718	88,808	n.p.	n.p.	n.p.	998,472	1,034,400
Not reported	4,205	2,784	16,955	0	3,771	n.p.	n.p.	n.p.	27,715	36,746
<i>Total</i>	<i>277,995</i>	<i>274,134</i>	<i>264,426</i>	<i>118,883</i>	<i>92,977</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>1,028,415</i>	<i>1,073,759</i>
All hospitals										
<i>Indigenous people</i>	<i>29,906</i>	<i>5,631</i>	<i>29,811</i>	<i>21,095</i>	<i>7,996</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>114,291</i>	<i>116,844</i>
<i>Other Australians^(c)</i>	<i>1,092,194</i>	<i>858,590</i>	<i>674,861</i>	<i>325,005</i>	<i>291,401</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>3,257,732</i>	<i>3,387,059</i>
Total	1,122,100	864,221	704,672	346,100	299,397	n.p.	n.p.	n.p.	3,372,023	3,503,903
Separation rate ^(d) for Indigenous people per 1,000	241.9	205.9	278.2	364.0	363.6	n.p.	n.p.	359.2	288.5	n.p.
Separation rate ^(d) for Other Australians per 1,000	153.3	156.7	160.6	154.3	171.1	n.p.	n.p.	118.3	157.0	n.p.
Separation rate ^(d) for all people per 1,000	155.0	157.0	163.5	160.2	173.9	n.p.	n.p.	179.7	159.7	n.p.
Rate ratio^(e)	1.6	1.3	1.7	2.4	2.1	n.p.	n.p.	3.0	1.8	n.p.

Notes: See Boxes 7.1, 7.2 and 7.4 for notes on data limitations and methods.

Table S7.14: Separations, by mode of separation, public and private hospitals, states and territories, 2008–09

Mode of separation	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Discharge/transfer to an(other) acute hospital	101,522	88,319	49,698	21,947	21,523	3,397	3,454	2,800	292,660
Discharge/transfer to residential aged care service ^(a)	17,640	19,111	4,524	5,058	7,928	1,234	757	252	56,504
Discharge/transfer to an(other) psychiatric hospital	2,667	1,213	147	960	1,227	0	30	10	6,254
Discharge/transfer to other health-care accommodation	4,140	2,213	1,896	1,112	842	1,072	387	1,962	13,624
Statistical discharge: type change	21,302	9,829	18,072	8,334	4,307	1,787	5,479	1,148	70,258
Left against medical advice/discharge at own risk	15,960	5,688	7,698	3,969	2,738	351	270	2,686	39,360
Statistical discharge from leave	4,228	3	712	1,332	157	8	0	0	6,440
Died	23,944	15,618	9,710	3,936	4,908	1,286	961	487	60,850
Other ^(b)	1,314,555	1,237,630	790,883	420,785	330,909	85,757	78,531	86,011	4,345,061
Not reported	11	0	0	0	1	0	0	0	12
<i>Total</i>	<i>1,505,969</i>	<i>1,379,624</i>	<i>883,340</i>	<i>467,433</i>	<i>374,540</i>	<i>94,892</i>	<i>89,869</i>	<i>95,356</i>	<i>4,891,023</i>
Private hospitals									
Discharge/transfer to an(other) acute hospital	17,877	16,461	10,134	3,385	7,118	n.p.	n.p.	n.p.	56,120
Discharge/transfer to residential aged care service ^(a)	1,306	3,431	1,243	992	1,278	n.p.	n.p.	n.p.	8,480
Discharge/transfer to an(other) psychiatric hospital	48	55	50	39	19	n.p.	n.p.	n.p.	215
Discharge/transfer to other health-care accommodation	698	4	668	11	98	n.p.	n.p.	n.p.	2,077
Statistical discharge: type change	2,768	2,364	4,836	1,041	372	n.p.	n.p.	n.p.	12,286
Left against medical advice/discharge at own risk	688	605	360	133	44	n.p.	n.p.	n.p.	1,870
Statistical discharge from leave	8	0	105	20	1	n.p.	n.p.	n.p.	142
Died	2,102	3,042	4,754	1,975	1,202	n.p.	n.p.	n.p.	13,530
Other ^(b)	881,719	785,058	791,791	354,566	245,353	n.p.	n.p.	n.p.	3,162,690
Not reported	0	0	0	0	15	n.p.	n.p.	n.p.	15
<i>Total</i>	<i>907,214</i>	<i>811,020</i>	<i>813,941</i>	<i>362,162</i>	<i>255,500</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>3,257,425</i>

Notes: See Boxes 7.1 and 7.2 for notes on data limitations and methods

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

(b) Includes discharge to usual residence/ own accommodation/ welfare institution (including prisons, hostels and group homes providing primarily welfare services).

Table S7.15: Separations by inter-hospital contracted patient status, public and private hospitals, states and territories, 2008–09

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public hospitals									
Inter-hospital contracted patient from public sector	1,232	249	0	6,748	2,002	0	0	2	10,233
Inter-hospital contracted patient from private sector	4,145	50	0	3	0	0	0	92	4,290
Not inter-hospital contracted patient	1,497,587	1,378,833	883,340	460,682	372,538	94,892	21,296	95,262	4,804,430
Not reported	3,005	492	0	0	0	0	68,573	0	72,070
<i>Total</i>	<i>1,505,969</i>	<i>1,379,624</i>	<i>883,340</i>	<i>467,433</i>	<i>374,540</i>	<i>94,892</i>	<i>89,869</i>	<i>95,356</i>	<i>4,891,023</i>
Private hospitals									
Inter-hospital contracted patient from public sector	4,420	1,111	6,181	27,551	4,112	n.p.	n.p.	n.p.	45,334
Inter-hospital contracted patient from private sector	0	3	2,290	1	5	n.p.	n.p.	n.p.	2,299
Not inter-hospital contracted patient	902,794	809,906	805,326	334,610	251,383	n.p.	n.p.	n.p.	3,169,850
Not reported	0	0	144	0	0	n.p.	n.p.	n.p.	39,942
<i>Total</i>	<i>907,214</i>	<i>811,020</i>	<i>813,941</i>	<i>362,162</i>	<i>255,500</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>3,257,425</i>
All hospitals									
Inter-hospital contracted patient from public sector	5,652	1,360	6,181	34,299	6,114	n.p.	n.p.	n.p.	55,567
Inter-hospital contracted patient from private sector	4,145	53	2,290	4	5	n.p.	n.p.	n.p.	6,589
Not inter-hospital contracted patient	2,400,381	2,188,739	1,688,666	795,292	623,921	n.p.	n.p.	n.p.	7,974,280
Not reported	3,005	492	144	0	0	n.p.	n.p.	n.p.	112,012
Total separations	2,413,183	2,190,644	1,697,281	829,595	630,040	n.p.	n.p.	n.p.	8,148,448

Notes: See Boxes 7.1 and 7.2 for notes on data limitations and methods

Table S7.16: Separations with hospital-in-the-home care, by hospital sector, states and territories, 2008–09

	NSW	Vic	Qld ^(a)	WA	SA ^(a)	Tas	ACT	NT	Total
Public hospitals									
Same-day separations	n.a.	9,010	445	65	109	n.a.	34	8	9,671
Overnight separations	n.a.	23,416	2,362	7,640	6,530	n.a.	1,039	621	41,608
Total patient days	n.a.	290,405	29,639	125,137	86,098	n.a.	15,383	9,773	556,435
Hospital-in-the-home days	n.a.	187,327	21,520	87,265	59,544	n.a.	10,843	5,953	372,452
Average length of stay	..	12.4	12.5	16.4	13.2	..	14.8	15.7	13.4
Average length of stay excluding hospital-in-the-home days	..	4.4	3.4	5.0	4.1	..	4.4	6.2	4.4
Private hospitals									
Same-day separations	n.a.	1,903	2,350	32	2,220	n.a.	n.p.	n.p.	6,505
Overnight separations	n.a.	2,359	122	156	46	n.a.	n.p.	n.p.	2,683
Total patient days	n.a.	50,390	3,927	3,929	2,515	n.a.	n.p.	n.p.	60,761
Hospital-in-the-home days	n.a.	40,232	3,927	2,133	2,515	n.a.	n.p.	n.p.	48,807
Average length of stay	..	21.4	32.2	25.2	54.7	..	n.p.	n.p.	22.6
Average length of stay excluding hospital-in-the-home days	..	4.3	..	11.5	..	..	n.p.	n.p.	n.a.
All hospitals									
Same-day separations	n.a.	10,913	2,795	97	2,329	n.a.	n.p.	n.p.	16,176
Overnight separations	n.a.	25,775	2,484	7,796	6,576	n.a.	n.p.	n.p.	44,291
Total patient days	n.a.	340,795	33,566	129,066	88,613	n.a.	n.p.	n.p.	617,196
Hospital-in-the-home days	n.a.	227,559	25,447	89,398	62,059	n.a.	n.p.	n.p.	421,259
Average length of stay	..	13.2	13.5	16.6	13.5	..	n.p.	n.p.	13.9
Average length of stay excluding hospital-in-the-home days	..	4.4	n.a.	5.1	n.a.	..	n.p.	n.p.	n.a.

Notes: See Boxes 7.1 and 7.2 for notes on data limitations and methods

(a) For private hospitals in Queensland and South Australia, separations with hospital-in-the-home care were reported with hospital-in-the-home days only.