

---

# 10 Public hospitals

## CONTENTS

<b>Indigenous data in the Public hospitals chapter</b>	<b>216</b>
<b>Separation rates for Indigenous patients</b>	<b>216</b>
<b>Separations with a procedure recorded for Indigenous patients</b>	<b>219</b>
<b>Framework of performance indicators for public hospitals</b>	<b>222</b>
<b>Equity of access by special needs groups</b>	<b>224</b>
<b>Emergency department waiting times</b>	<b>224</b>
<b>Waiting times for elective surgery</b>	<b>225</b>
<b>Safety — unplanned/unexpected readmissions within 28 days of selected surgical admissions</b>	<b>226</b>
<b>Safety — falls resulting in patient harm in hospitals</b>	<b>228</b>
<b>Safety — intentional self harm in hospitals</b>	<b>228</b>
<b>Framework of performance indicators for maternity services</b>	<b>229</b>
<b>Fetal death rate</b>	<b>230</b>
<b>Neonatal death rate</b>	<b>231</b>
<b>Perinatal death rate</b>	<b>232</b>
<b>Future directions in performance reporting</b>	<b>234</b>
<b>Definitions of key terms and indicators</b>	<b>235</b>
<b>List of attachment tables</b>	<b>238</b>
<b>References</b>	<b>238</b>

---

## Attachment tables

Attachment tables are identified in references throughout this Indigenous Compendium by an 'A' suffix (for example, in this chapter, table 10A.3). As the data are directly sourced from the 2011 Report, the Compendium also notes where the original table, figure or text in the 2011 Report can be found. For example, where the Compendium refers to '2011 Report, p. 10.15' this is page 15 of chapter 10 of the 2011 Report, and '2011 Report, table 10A.2' is attachment table 2 of attachment 10A of the 2011 Report. A full list of attachment tables is provided at the end of this chapter, and the attachment tables are available from the Review website at [www.pc.gov.au/gsp](http://www.pc.gov.au/gsp).

The Public hospitals chapter (chapter 10) in the *Report on Government Services 2011* (2011 Report), reports on the performance of public hospitals in each Australian state and territory. Data are reported for Indigenous people for a subset of the performance indicators reported in that chapter — those data are compiled and presented here.

Public hospitals are important providers of government funded health services in Australia. A key objective of government is to provide public hospital services to ensure the population has access to cost-effective health services, based on clinical need and within clinically appropriate times, regardless of geographic location. Public hospitals provide a range of services, including:

- acute care services to admitted patients
- subacute and non-acute services to admitted patients (for example, rehabilitation, palliative care, and long stay maintenance care)
- emergency, outpatient and other services to non-admitted patients
- mental health services, including services provided to admitted patients by designated psychiatric/psychogeriatric units
- public health services
- teaching and research activities.

The public hospitals chapter in the 2011 Report focuses on services provided to admitted patients and emergency services provided to non-admitted patients in public hospitals. These services comprise the bulk of public hospital activity and, in the case of services to admitted patients, have the most reliable data available. Data are reported for subacute and non-acute care services.

In some instances, stand-alone psychiatric hospitals are included in the 2011 Report, although their role is diminishing in accordance with the National Mental Health Strategy. Under the strategy, the provision of psychiatric treatment is shifting away

---

from specialised psychiatric hospitals to mainstream public hospitals and the community sector. The performance of psychiatric hospitals and psychiatric units of public hospitals is examined more closely in the mental health section of the 'Health management' chapter (reported in 2011 Report, chapter 12).

Some common health terms relating to hospitals are defined in box 10.1.

### Box 10.1 **Some common terms relating to hospitals**

#### ***Patients***

**admitted patient:** a patient who has undergone a formal admission process in a public hospital to begin an episode of care. Admitted patients can receive acute, subacute or non-acute care services.

**non-admitted patient:** a patient who has not undergone a formal admission process, but who may receive care through an emergency department, outpatient or other non-admitted service.

#### ***Types of care***

Classification of care depends on the principal clinical intent of the care received.

**acute care:** clinical services provided to admitted or non-admitted patients, including managing childbirth, curing illness or treating injury, performing surgery, relieving symptoms and/or reducing the severity of illness or injury, and performing diagnostic and therapeutic procedures. Most episodes involve a relatively short hospital stay.

**subacute care:** interdisciplinary clinical care in which the need for care depends primarily on the patient's functional status and quality of life rather than the underlying medical diagnosis or the patient's prospects of recovery from illness. Subacute care includes rehabilitation, palliative care and some mental health care, as well as geriatric evaluation and management and psychogeriatric care. Common to all is the patient no longer meets criteria for classification as 'acute', but still requires therapeutic, clinically-intense and goal-directed care.

**non-acute care:** includes maintenance care and newborn care.

#### ***Hospital outputs***

**separation:** an episode of care for an admitted patient, 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). Admitted patients who receive same day procedures (for example, renal dialysis) are included in separation statistics.

**casemix-adjusted separations:** the number of separations adjusted to account for differences across hospitals in the complexity of their episodes of care. Casemix adjustment is an important step to achieving comparable measures of efficiency across hospitals and jurisdictions.

(Continued on next page)

---

### Box 10.1 (Continued)

**non-admitted occasion of service:** an occasion of examination, consultation, treatment or other service provided to a non-admitted patient in a functional unit of a health service establishment. Services can include emergency department visits, outpatient services (such as pathology, radiology and imaging, and allied health services, including speech therapy and family planning) and other services to non-admitted patients. Hospital non-admitted occasions of service are not yet recorded consistently across states and territories, and relative differences in the complexity of services provided are not yet documented.

#### ***Other common health terms***

**AR-DRG (Australian refined diagnosis related group):** a patient classification system that hospitals use to match their patient services (hospital procedures and diagnoses) with their resource needs. AR-DRG versions 5.1 and 5.2 are based on the ICD-10-AM classification.

**ICD-10-AM (the Australian modification of the International Standard Classification of Diseases and Related Health Problems):** the current classification of diagnoses and procedures.

*Source:* AIHW (2006, 2008); NCCH (2008).

## **Indigenous data in the Public hospitals chapter**

The Public hospitals chapter in the 2011 Report contains the following data items for Indigenous people:

- separation rates, 2008-09
- separations with a procedure recorded, July 2008–June 2009 (per cent)
- emergency department waiting times, 2008-09
- waiting times for elective surgery, 2008-09
- safety — unplanned/unexpected readmissions within 28 days of selected surgical admissions, 2008-09
- perinatal, neonatal and fetal deaths, 2004–2008.

## **Separation rates for Indigenous patients**

The completeness of Indigenous identification in hospital admitted patient data varies across states and territories. The AIHW (2005) report *Improving the Quality of Indigenous Identification in Hospital Separations Data* found that Indigenous

---

patient data was of acceptable quality for analytical purposes only for hospitals in Queensland, WA, SA, and public hospitals in the NT. Following new assessments of the quality of Indigenous identification in 2007, the National e-Health and Information Principal Committee (NEHIPC) has approved NSW and Victorian Indigenous patient data as acceptable in quality for analytical purposes, from the 2004-05 reference year. More recently, the National Health Information Standards and Statistics Committee (a standing committee of NEHIPC) approved reporting of data for Tasmania and the ACT by Indigenous status at the state and territory level for COAG reporting purposes. However, pending further examination of the quality of Indigenous identification for these jurisdictions, these data will not be included in national totals. This decision was taken too late to include most data for Tasmania and the ACT in this chapter for the 2011 Report. Efforts to improve Indigenous identification across states and territories are ongoing.

The available data are not necessarily representative of other jurisdictions. Also because of improvements in data quality over time, caution should be used in time series analysis of the data.

In 2008-09, separations for Indigenous people accounted for around 3.6 per cent of total separations and 5.6 per cent of separations in public hospitals in NSW, Victoria, Queensland, WA, SA and the NT combined (table 10.1). Indigenous people made up only around 2.4 per cent of the population in these jurisdictions (2011 Report, tables AA.2 and AA.7). Most separations involving Indigenous patients (92.3 per cent) in these jurisdictions occurred in public hospitals (table 10.1).

**Table 10.1 Separations, by Indigenous status of patient and hospital sector, 2008-09<sup>a, b</sup>**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total <sup>c</sup>
Public hospital separations ('000)									
Indigenous	56.8	12.7	68.7	41.0	18.5	2.5	2.0	66.2	263.8
Non-Indigenous	1 434.8	1 357.1	797.7	426.5	339.6	90.0	86.2	29.2	4 384.8
Not reported	14.4	9.9	16.9	–	16.5	2.4	1.6	–	57.7
<b>Total</b>	<b>1 506.0</b>	<b>1 379.6</b>	<b>883.3</b>	<b>467.4</b>	<b>374.5</b>	<b>94.9</b>	<b>89.9</b>	<b>95.4</b>	<b>4 706.3</b>
Private hospital separations ('000)									
Indigenous	1.5	0.7	4.4	14.4	1.0	np	np	np	22.1
Non-Indigenous	886.0	800.2	733.2	347.7	240.3	np	np	np	3 007.3
Not reported	19.8	10.1	76.3	–	14.2	np	np	np	120.5
<b>Total</b>	<b>907.2</b>	<b>811.0</b>	<b>813.9</b>	<b>362.2</b>	<b>255.5</b>	<b>np</b>	<b>np</b>	<b>np</b>	<b>3 149.8</b>
Indigenous separations as proportion of total separations (%)									
Public hospitals	3.8	0.9	7.8	8.8	4.9	2.6	2.2	69.4	5.6
Private hospitals	0.2	0.1	0.5	4.0	0.4	np	np	np	0.7
<b>All hospitals</b>	<b>2.4</b>	<b>0.6</b>	<b>4.3</b>	<b>6.7</b>	<b>3.1</b>	<b>np</b>	<b>np</b>	<b>np</b>	<b>3.6</b>
Separations in public hospitals as a proportion of separations in all hospitals (%)									
Indigenous	97.5	94.7	93.9	73.9	94.8	np	np	np	92.3
Non-Indigenous	61.8	62.9	52.1	55.1	58.6	np	np	np	59.3

<sup>a</sup> Excludes separations for which the care type was reported as 'newborn with no qualified days' and records for hospital boarders and posthumous organ procurement. <sup>b</sup> Identification of Indigenous patients is not considered complete and completeness varies across jurisdictions. The AIHW advised that only data for NSW, Victoria, Queensland, WA, SA and the NT are considered to be acceptable for the purpose of analysis. Nevertheless, data for these jurisdictions should be interpreted with caution as there are jurisdictional differences in data quality. In addition, these jurisdictions are not necessarily representative of the excluded jurisdictions. <sup>c</sup> The total includes data only for NSW, Victoria, Queensland, WA and SA for private hospitals and all hospitals. – Nil or rounded to zero. **np** Not published.

Source: AIHW (2010), *Australian Hospital Statistics 2008-09*, Health Services Series No. 34, Cat. no. HSE 84; table 10A.1; 2011 Report, table 10.1, p. 10.14.

In 2008-09, on an age standardised basis, 763.3 public hospital separations (including same day separations) for Indigenous patients were reported per 1000 Indigenous people in NSW, Victoria, Queensland, WA, SA and the NT combined (table 10.2). This rate was markedly higher than the corresponding rate of 221.3 per 1000 for these jurisdictions' combined total population (table 10.2). Incomplete identification of Indigenous people limits the validity of comparisons over time, as well as across jurisdictions.

**Table 10.2 Estimates of public hospital separations per 1000 people, by Indigenous status of patient<sup>a, b</sup>**

	NSW <sup>c</sup>	Vic <sup>c</sup>	Qld <sup>c</sup>	WA <sup>c, d</sup>	SA <sup>c</sup>	Tas	ACT	NT <sup>c</sup>	Total <sup>e</sup>
2004-05									
Indigenous people	np	np	733.6	821.5	822.2	np	np	1 441.0	907.0
Total population	193.3	238.3	188.1	195.2	225.3	np	np	456.2	208.1
2005-06									
Indigenous people	495.6	np	745.4	845.2	875.0	np	np	1 548.0	792.1
Total population	203.2	243.4	186.2	196.4	228.4	np	np	479.1	213.6
2006-07									
Indigenous people	528.0	624.3	756.7	876.5	929.3	np	np	1 584.8	787.5
Total population	206.0	246.7	190.2	218.4	232.6	np	np	480.1	218.8
2007-08									
Indigenous people	550.5	629.8	785.7	869.4	908.9	np	np	1 670.7	807.7
Total population	202.8	247.8	195.7	215.1	216.4	np	np	486.4	217.6
2008-09									
Indigenous people	511.5	535.8	732.5	817.3	950.5	np	np	1 656.0	763.3
Total population	205.6	249.5	204.4	215.8	217.7	np	np	495.5	221.3

<sup>a</sup> The rates are directly age standardised to the Australian population at 30 June 2001. <sup>b</sup> Identification of Indigenous patients is not considered complete and completeness varies across jurisdictions and time.

<sup>c</sup> AIHW advice on data of acceptable quality limits reporting across jurisdictions for various years. Data for these jurisdictions should be interpreted with caution as there are jurisdictional differences in data quality and changes in hospitalisation rates for Indigenous people over time that can be partly due to improved identification. In addition, these jurisdictions are not necessarily representative of the excluded jurisdictions.

<sup>d</sup> Data for WA from 2006-07 include separations for public patients at Joondalup and Peel Health Campuses. Separations for these patients are not included in previous years. <sup>e</sup> Total rates include data for Queensland, WA, SA, and the NT for all years, and from 2005-06 include NSW and from 2006-07 include Victoria. Total rates before 2005-06 are not comparable with the 2005-06 total and total rates before 2006-07 are not comparable with the 2006-07 total. **np** Not published.

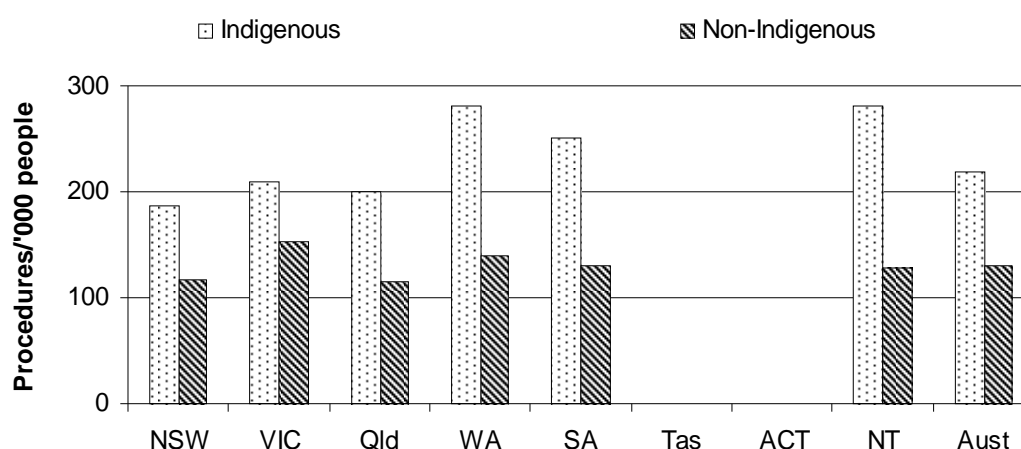
Source: AIHW (unpublished), National Hospital Morbidity Database; table 10A.2; 2011 Report, table 10.2, p. 10.15.

## Separations with a procedure recorded for Indigenous patients

Hospitalisations with a procedure reported both by jurisdiction and by remoteness are presented in figures 10.1 and 10.2, and include data for all patients treated in public hospitals and public patients treated in private hospitals. Private hospital data are not published for the NT, but the extent to which public patients are treated in private hospitals in that jurisdiction is limited. In the period July 2008–June 2009, excluding hospitalisations for care involving dialysis, Indigenous people had higher rates of hospitalisations with a procedure reported for all states and territories and for each remoteness category (figures 10.1 and 10.2).

Care involving dialysis accounts for the greatest number of Indigenous separations, with end-stage renal disease requiring frequent dialysis treatments, often several times per week. The alternative to dialysis is a kidney transplant. Indigenous people have very high levels of end-stage renal disease as a consequence of high rates of diabetes, hypertension and related illnesses. In addition, few Indigenous people receive kidney transplants (AHMAC 2006). Without the exclusion of dialysis the result would overestimate the numbers of Indigenous people being treated by procedure for other conditions.

Figure 10.1 Hospitalisations with a procedure reported, public hospitals, July 2008–June 2009<sup>a, b, c</sup>

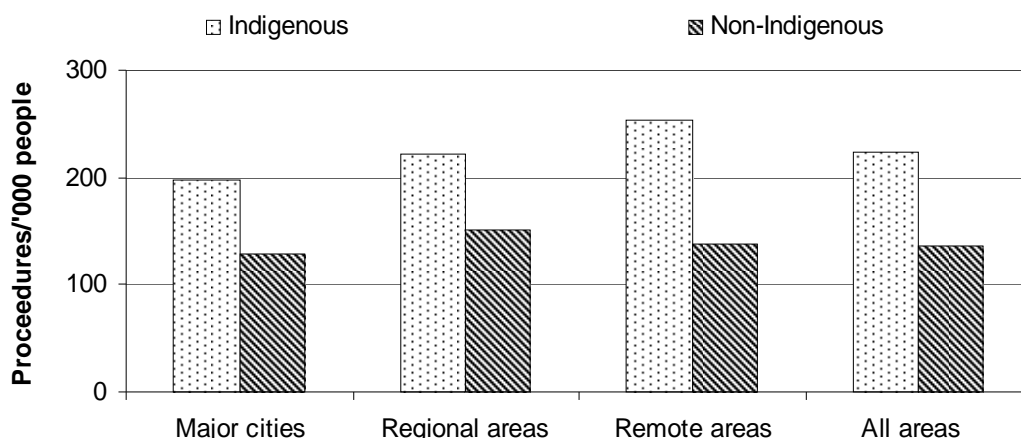


<sup>a</sup> Includes all patients treated in public hospitals and public patients treated in private hospitals. Private hospital data for NT were not available therefore results for NT include public hospital data only. <sup>b</sup> The AIHW advised that only data for NSW, Victoria, Queensland, WA, SA and the NT are considered to be acceptable for the purpose of analysis. Nevertheless, data for these jurisdictions should be interpreted with caution as there are jurisdictional differences in data quality. In addition, these jurisdictions are not necessarily representative of the excluded jurisdictions. <sup>c</sup> 'All diagnoses' excludes care involving dialysis.

Source: AIHW (unpublished), National Hospital Morbidity Database, table 10A.4; 2011 Report, figure 10.9, p. 10.16.



Figure 10.2 Hospitalisations with a procedure reported, public hospitals, July 2008–June 2009<sup>a, b</sup>

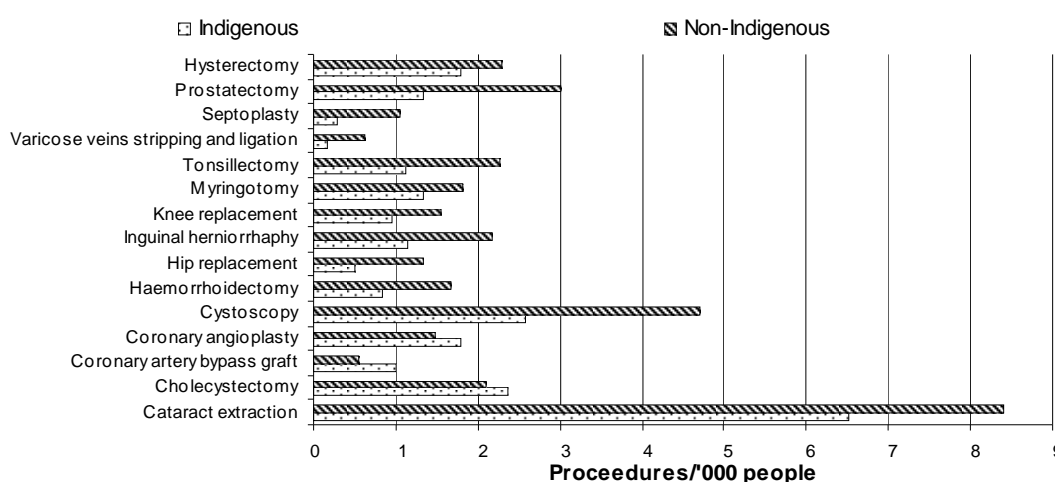


<sup>a</sup> Includes all patients treated in public hospitals and public patients treated in private hospitals in NSW, Victoria, Queensland, WA, SA and NT. Private hospital data for NT were not available therefore results for NT include public hospital data only. <sup>b</sup> 'All diagnoses' excludes care involving dialysis.

Source: AIHW (unpublished), National Hospital Morbidity Database, table 10A.5; 2011 Report, figure 10.10, p. 10.17.

Data for NSW, Victoria, Queensland, WA, SA and NT public hospitals for selected procedures are presented in figure 10.3. In the period July 2008–June 2009, Indigenous people had lower rates of hospital procedures for a number of selected procedures (figure 10.3).

Figure 10.3 Selected hospital procedures, public hospitals, July 2008–June 2009<sup>a</sup>



<sup>a</sup> Includes patients treated in public hospitals and public patients treated in private hospitals in NSW, Victoria, Queensland, WA, SA and NT.

Source: AIHW (unpublished), National Hospital Morbidity Database, table 10A.3; 2011 Report, figure 10.11, p. 10.17.

---

While Indigenous people have higher rates of separations and hospitalisations with a procedure recorded per 1000 of the population than non-Indigenous people, Indigenous people are actually less likely to undergo procedures while in hospital than non-Indigenous people. The underlying reasons for this are not well understood and are likely to reflect a range of factors, including, for example, clinical judgements about the appropriateness of treatment, patient preferences and concerns, and distance from appropriate facilities (AHMAC 2006). Other factors are also likely to affect the data, including those relating to variations in casemix, comorbidities and stage at presentation.

### **Framework of performance indicators for public hospitals**

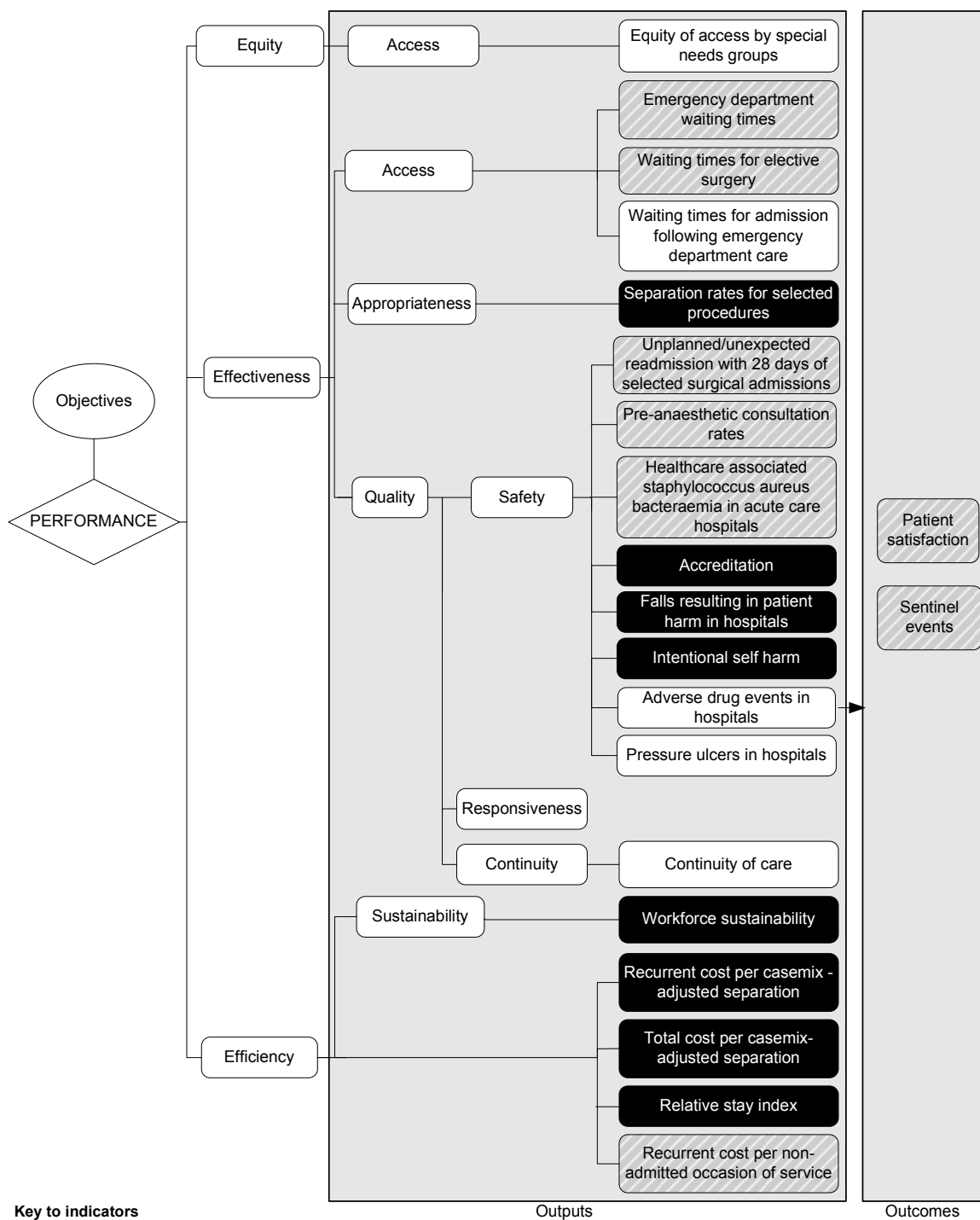
The Public hospitals performance indicator framework outlined in figure 10.4 is based on shared government objectives for public hospitals (2011 Report, box 10.2). Data for Indigenous people are reported for a subset of the performance indicators, and are presented here. It is important to interpret these data in the context of the broader performance indicator framework. The framework shows which data are comparable. For data that are not considered directly comparable, the text includes relevant caveats and supporting commentary.

Indicator boxes presented throughout the chapter provide information about the reported indicators. As these are sourced directly from the 2011 Report, they might include references to data not reported for Indigenous people and therefore not included in this Compendium.

The Report's statistical appendix contains data that may assist in interpreting the performance indicators presented in this chapter. These data cover a range of demographic and geographic characteristics, including age profile, geographic distribution of the population, income levels, education levels, tenure of dwellings and cultural heritage (including Indigenous and ethnic status) (appendix A).

The Council of Australian Governments (COAG) has agreed six National Agreements (NAs) to enhance accountability to the public for the outcomes achieved or outputs delivered by a range of government services (see chapter 1 for more detail on reforms to federal financial relations). The NHA covers the area of health, and health indicators in the NIRA establish specific outcomes for reducing the level of disadvantage experienced by Indigenous Australians. The agreements include performance indicators, for which the Steering Committee collates annual performance information for analysis by the COAG Reform Council (CRC). Revisions have been made to the performance indicators reported in this chapter to align with the performance indicators in the NAs.

Figure 10.4 Performance indicators for public hospitals



**Key to indicators**

- Text** Data for these indicators comparable, subject to caveats to each chart or table
- Text** Data for these indicators not complete or not directly comparable
- Text** These indicators yet to be developed or data not collected for this Report

Source: 2011 Report, figure 10.13, p. 10.25.

---

## Equity of access by special needs groups

‘Equity of access by special needs groups’ is an indicator of governments’ objective to provide accessible services (box 10.2).

### Box 10.2 Equity of access by special needs groups

‘Equity of access by special needs groups’ measures the performance of agencies providing services for three identified special needs groups: Indigenous people; people living in communities outside the capital cities (that is, people living in other metropolitan areas, or rural and remote communities); and people from a non-English speaking background.

Equity of access by special needs groups has been identified as a key area for development in future Reports.

## Emergency department waiting times

‘Emergency department waiting times’ is an indicator of governments’ objective to provide accessible services (box 10.3).

### Box 10.3 Emergency department waiting times

‘Emergency department waiting times’ measures the proportion of patients seen within the benchmarks set by the Australasian Triage Scale. The Australasian Triage Scale is a scale for rating clinical urgency, designed for use in hospital-based emergency services throughout Australia and New Zealand.

The nationally agreed method of calculation for waiting times is to subtract the time at which the patient presents at the emergency department (that is, the time at which the patient is clerically registered or triaged, whichever occurs earlier) from the time of commencement of service by a treating medical officer or nurse. Patients who do not wait for care after being triaged or clerically registered are excluded from the data.

The benchmarks, set according to triage category, are as follows:

- triage category 1: need for resuscitation — patients seen immediately
- triage category 2: emergency — patients seen within 10 minutes
- triage category 3: urgent — patients seen within 30 minutes
- triage category 4: semi-urgent — patients seen within 60 minutes
- triage category 5: non-urgent — patients seen within 120 minutes (HDSC 2008).

(Continued next page)

---

**Box 10.3 (continued)**

It is desirable that a high proportion of patients are seen within the benchmarks set for each triage category. Non-urgent patients who wait longer are likely to suffer discomfort and inconvenience, and more urgent patients can experience poor health outcomes as a result of extended waits.

Data reported for this indicator are not directly comparable.

Data quality information for this indicator is under development.

The comparability of emergency department waiting times data across jurisdictions can be influenced by differences in data coverage (see 2011 Report, table 10.6) and clinical practices — in particular, the allocation of cases to urgency categories.

Nationally, there was little difference between Indigenous and non-Indigenous people in the percentages of patients treated within national benchmarks across the triage categories for peer group A and B hospitals, although there were variations across states and territories for some triage categories (table 10A.6).

### **Waiting times for elective surgery**

‘Waiting times for elective surgery’ is an indicator of governments’ objective to provide accessible services (box 10.4).

**Box 10.4 Waiting times for elective surgery**

Two measures are reported for ‘Waiting times for elective surgery’:

- ‘Overall elective surgery waiting times’ are calculated by comparing the date on which patients are added to a waiting list with the date on which they are admitted. Days on which the patient was not ready for care are excluded. ‘Overall waiting times’ are presented as the number of days within which 50 per cent of patients are admitted and the number of days within which 90 per cent of patients are admitted. The proportion of patients who waited more than one year is also shown.
- ‘Elective surgery waiting times by clinical urgency category’ reports the proportion of patients who were admitted from waiting lists after an extended wait. The three generally accepted clinical urgency categories for elective surgery are:
  - category 1 — admission is desirable within 30 days
  - category 2 — admission is desirable within 90 days
  - category 3 — admission at some time in the future is acceptable.

(Continued next page)

---

**Box 10.4 (continued)**

There is no specified or agreed desirable wait for category 3 patients, but the term 'extended wait' is used for patients waiting longer than 12 months for elective surgery, as well as for category 1 and 2 patients waiting more than the agreed desirable waiting times of 30 days and 90 days respectively.

For 'Overall elective surgery waiting times' fewer days waited at the 50th and 90th percentile and a smaller proportion of people waiting more than 365 days are desirable. For 'Elective surgery waiting times by clinical urgency category' a smaller proportion of patients who have experienced extended waits at admission is desirable. However, variation in the way patients are classified to urgency categories should be taken into account. Rather than comparing jurisdictions, the results for individual jurisdictions should be viewed in the context of the proportions of patients assigned to each of the three urgency categories (2011 Report, table 10.8).

Data reported for this indicator are not directly comparable.

Data quality information for this indicator is under development.

The elective surgery waiting times data are provided for waiting lists managed by public acute hospitals. The data collection covers most public hospitals that undertake elective surgery.

Attachment table 10A.7 includes data on 'elective surgery waiting times' by Indigenous status for 2008-09. Nationally, Indigenous people had longer waiting times for elective surgery than non-Indigenous people at the 50<sup>th</sup> and 90<sup>th</sup> percentiles for many of the procedures reported for peer group A and B hospitals (table 10A.7).

### **Safety — unplanned/unexpected readmissions within 28 days of selected surgical admissions**

'Unplanned/unexpected readmissions within 28 days of selected surgical admissions' is an indicator of governments' objective to provide public hospital services that are safe and of high quality (box 10.5). This indicator has been included in the report for the first time this year and replaces the previously reported 'unplanned readmission rates indicator'.

---

**Box 10.5 Unplanned/unexpected readmissions within 28 days of selected surgical admissions**

'Unplanned/unexpected readmissions within 28 days of selected surgical admissions' show the rate at which patients unexpectedly return to hospital within 28 days for further treatment of the same condition.

The indicator is calculated as the number of separations that were unplanned or unexpected readmissions to the same hospital following a separation in which a selected surgical procedure was performed and occurred within 28 days of the previous date of separation divided by number of public hospital separations in which one of the selected surgical procedures was performed expressed per 1000 separations.

Selected surgical procedures are knee replacement, hip replacement, tonsillectomy and adenoidectomy, hysterectomy, prostatectomy, cataract surgery and appendectomy.

'Unexpected/unplanned' readmissions are those having a principal diagnosis of a post-operative adverse event for which a specified ICD-10-AM diagnosis code has been assigned.

Patients might be re-admitted unexpectedly if the initial care or treatment was ineffective or unsatisfactory, if post discharge planning was inadequate, or for other reasons outside the control of the hospital (for example poor post-discharge care). High rates for this indicator suggest the quality of care provided by hospitals, or post-discharge care or planning, should be examined, because there may be scope for improvement.

There are some difficulties in identifying re-admissions that were unplanned. The unplanned and/or unexpected readmissions are limited to those having a principal diagnosis of a post-operative adverse event. This does not include all possible unplanned/unexpected readmissions, so the indicator is likely to be an under-estimate.

This indicator identifies only those patients re-admitted to the same hospital, so there is some under-reporting (for example, where patients go to another hospital). Unplanned re-admission rates are not adjusted for casemix or patient risk factors, which can vary across hospitals and across jurisdictions.

Data reported for this indicator are not complete or directly comparable.

Data quality information for this indicator is at [www.pc.gov.au/gsp/reports/rogs/2011](http://www.pc.gov.au/gsp/reports/rogs/2011)

Unplanned/unexpected readmissions within 28 days of selected surgical admissions in public hospitals in 2008-09 are reported by Indigenous status and remoteness in table 10A.8. The measure reported for this indicator is significantly different from that reported previously and data are not comparable with previous reports.

---

## **Safety — falls resulting in patient harm in hospitals**

‘Falls resulting in patient harm in hospitals’ is an indicator of governments’ objective to provide public hospital services that are safe and of high quality (box 10.6).

### **Box 10.6 Falls resulting in patient harm in hospitals**

Falls occurring in health care settings and resulting in patient harm treated in hospital is defined as the number of separations with an external cause code for fall and a place of occurrence of health service area divided by the total number of hospital separations and is expressed as a rate per 1000 separations.

A high number of falls resulting in patient harm in hospitals can indicate hospital system and process deficiencies that compromise the quality and safety of public hospitals. Falls resulting in patient harm in hospitals can result in serious consequences for individual patients and place a significant burden on the health system.

Data reported for this indicator are comparable.

Data quality information for this indicator is at [www.pc.gov.au/gsp/reports/rogs/2011](http://www.pc.gov.au/gsp/reports/rogs/2011)

The indicator defines a fall in hospital as a fall for which the place of occurrence is coded as health service area. The health service area as a place of occurrence is broader in scope than hospitals as it includes other health care settings such as day surgery centres or hospices. Data could therefore be an overestimate as they include falls in health care settings other than hospitals. Separations for falls resulting in patient harm in public health care settings are reported by Indigenous status and remoteness in table 10A.9.

## **Safety — intentional self harm in hospitals**

‘Intentional self harm in hospitals’ is an indicator of governments’ objective to provide public hospital services that are safe and of high quality (box 10.7).



---

**Box 10.7 Intentional self harm in hospitals**

Intentional self harm in hospitals is defined as the number of hospital separations with an external cause code for intentional self harm and a place of occurrence of health service divided by the total number of hospital separations and is expressed as a rate per 1000 separations.

Self harm in hospitals can result in serious consequences for individual patients. A high rate of self harm can indicate hospital system and process deficiencies that compromise the quality and safety of public hospitals.

Data reported for this indicator are complete and directly comparable.

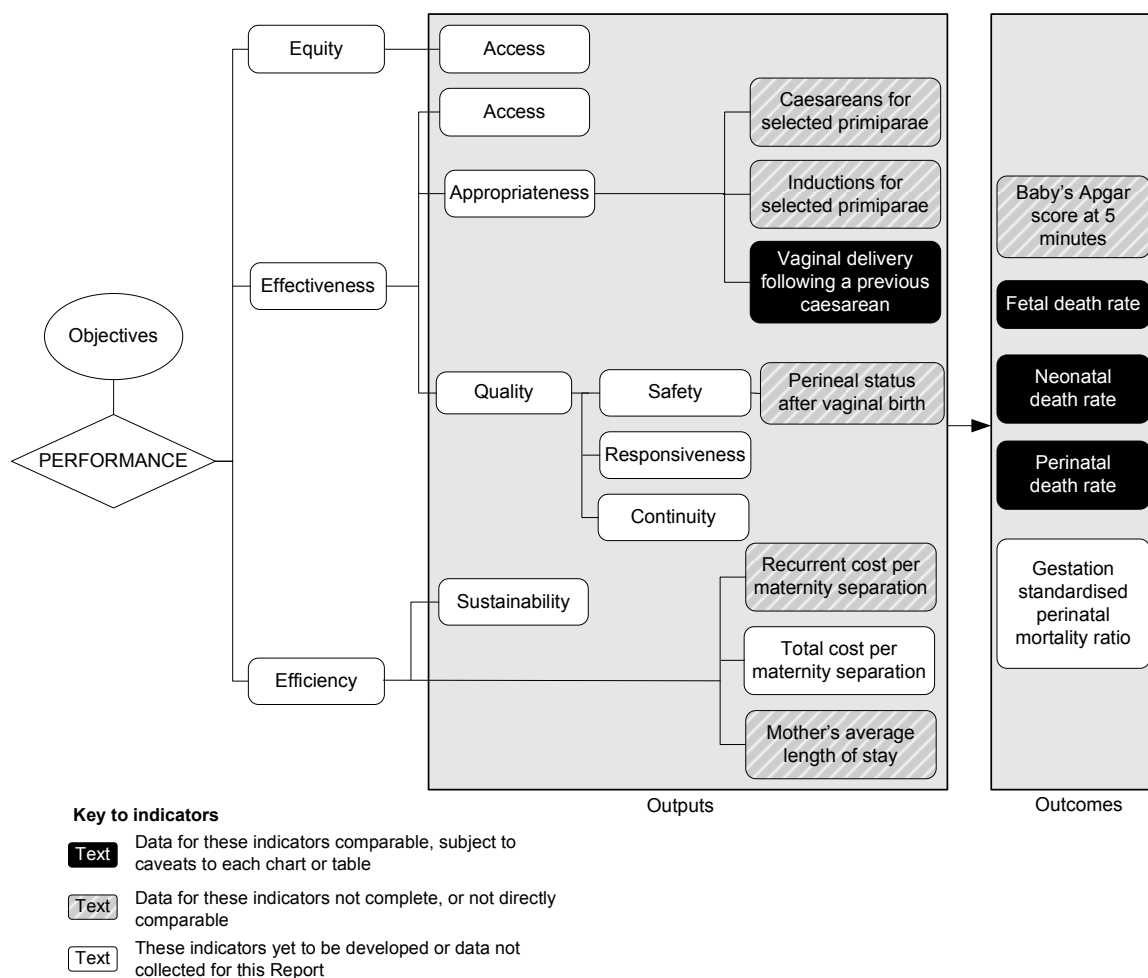
Data quality information for this indicator is at [www.pc.gov.au/gsp/reports/rogs/2011](http://www.pc.gov.au/gsp/reports/rogs/2011)

The indicator defines intentional self harm in hospital as being one for which the place of occurrence is coded as health service area. The health service area as a place of occurrence is broader in scope than hospitals as it includes other health care settings such as day surgery centres or hospices. Data could therefore be an overestimate as they include intentional self harm in health care settings other than hospitals. Separations for intentional self harm in health care settings in 2008-09 are reported by Indigenous status and remoteness in table 10A.10.

**Framework of performance indicators for maternity services**

The Maternity services performance indicator framework outlined in figure 10.5 is based on the same shared government objectives as for public hospitals (2011 Report, box 10.2). Data for Indigenous people are reported for a subset of the performance indicators, and are presented here. It is important to interpret these data in the context of the broader performance indicator framework. The framework shows which data are comparable. For data that are not considered directly comparable, the text includes relevant caveats and supporting commentary.

**Figure 10.5 Performance indicators for maternity services**



Source: 2011 Report, figure 10.28, p. 10.79.

## Fetal death rate

'Fetal death rate' is an indicator of governments' objective to deliver maternity services that are safe and of high quality (box 10.8).

---

**Box 10.8 Fetal death rate**

Fetal death (stillbirth) is the birth of a child who did not at any time after delivery breathe or show any other evidence of life, such as a heartbeat. Fetal deaths by definition include only infants weighing at least 400 grams or of a gestational age of at least 20 weeks.

'Fetal death rate' is reported as an indicator because maternity services for admitted patients have some potential to reduce the likelihood of fetal deaths. However, this potential is limited and other factors (such as the health of mothers and the progress of pregnancy before hospital admission) are also important.

The 'fetal death rate' is calculated as the number of fetal deaths divided by the total number of births (live births and fetal deaths combined), by State or Territory of usual residence of the mother. The rate of fetal deaths is expressed per 1000 total births. This indicator is also reported by the Indigenous status of the mother.

Low fetal death rates can indicate high quality maternity services. In jurisdictions where the number of fetal deaths is low, small annual fluctuations in the number affect the annual rate of fetal deaths.

Differences in the 'fetal death rate' between jurisdictions are likely to be due to factors outside the control of maternity services for admitted patients. To the extent that the health system influences fetal death rates, the health services that can have an influence include outpatient services, general practice services and maternity services.

Data reported for this indicator are comparable.

Data quality information for this indicator is under development.

Fetal deaths rates by the Indigenous status of the mother are shown in figure 10.6.

**Neonatal death rate**

'Neonatal death rate' is an indicator of governments' objective to deliver maternity services that are safe and of high quality (box 10.9).

---

### **Box 10.9 Neonatal death rate**

Neonatal death is the death of a live born infant within 28 days of birth (see section 10.8 for a definition of a live birth). As for fetal deaths, a range of factors contribute to neonatal deaths. However, the influence of maternity services for admitted patients is greater for neonatal deaths than for fetal deaths, through the management of labour and the care of sick and premature babies.

The 'neonatal death rate' is calculated as the number of neonatal deaths divided by the number of live births registered. The rate of neonatal deaths is expressed per 1000 live births, by state or territory of usual residence of the mother. This indicator is also reported by the Indigenous status of the mother.

Low 'neonatal death rates' can indicate high quality maternity services. The rate tends to be higher among premature babies, so a lower neonatal death rate can also indicate a lower percentage of pre-term births.

Data reported for this indicator are comparable.

Data quality information for this indicator is under development.

Neonatal death rates by the Indigenous status of the mother are shown in figure 10.6.

### **Perinatal death rate**

'Perinatal death rate' is an indicator of governments' objective to deliver maternity services that are safe and of high quality (box 10.10).

### **Box 10.10 Perinatal death rate**

A perinatal death is a fetal or neonatal death (boxes 10.8 and 10.9).

The 'perinatal death rate' is calculated as the number of perinatal deaths divided by the total number of births (live births registered and fetal deaths combined) in each jurisdiction. It is expressed per 1000 total births. This indicator is also reported by the Indigenous status of the mother.

The caveats that apply to fetal and neonatal death rates also apply to perinatal death rates.

Data reported for this indicator are comparable.

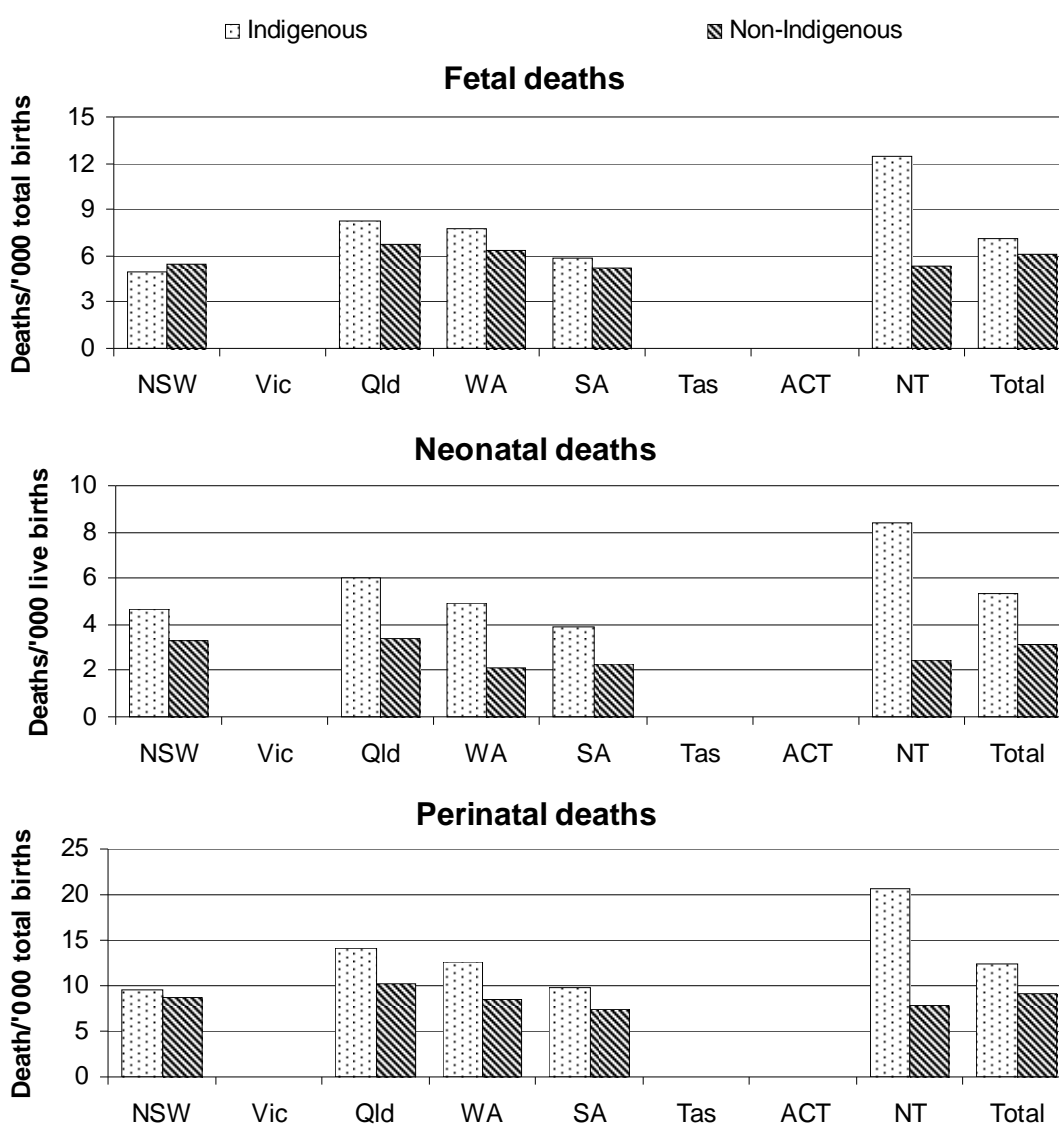
Data quality information for this indicator is under development.

Perinatal death rates by the Indigenous status of the mother are shown in figure 10.6.

## Fetal, neonatal and perinatal deaths for Indigenous people

Fetal, neonatal and perinatal deaths data by the Indigenous status of the mother are available for NSW, Queensland, WA, SA and the NT only. Data for other jurisdictions are not included due to small numbers or poor coverage rates (ABS 2004). In those jurisdictions for which data are available, the fetal, neonatal and perinatal death rates for Indigenous people are higher than those for non-Indigenous people (figure 10.6).

Figure 10.6 **Fetal, neonatal and perinatal deaths, by Indigenous status of mother 2004–2008<sup>a</sup>**



<sup>a</sup> The total relates to those jurisdictions for which data are published. Data are not available for other jurisdictions.

Source: ABS (unpublished) *Perinatal deaths, Australia*, Cat. no. 3304.0; table 10A.11; 2011 Report, figure 10.38, p. 10.95.

---

## Future directions

Priorities for future reporting on public hospitals and maternity services include the following:

- Improving the comprehensiveness of reporting by filling in gaps in the performance indicator frameworks. Important gaps in reporting for public hospitals include indicators of equity of access to services for special needs groups (particularly Indigenous people), and indicators of continuity of care. Gaps in the maternity services framework include equity of access, effectiveness of access, two aspects of quality — responsiveness and continuity — and the efficiency subdimension of sustainability.
- Improving the quality of Indigenous data, particularly completeness and Indigenous identification. Indigenous hospitalisation data for the ACT and Tasmania will be included in future reports. Work on improving Indigenous identification in hospital admitted patient data across states and territories is ongoing, with the inclusion of data for Tasmania and the ACT in national totals a priority.

---

## Definitions of key terms and indicators

<b>Acute care</b>	Clinical services provided to admitted or non-admitted patients, including managing labour, curing illness or treating injury, performing surgery, relieving symptoms and/or reducing the severity of illness or injury, and performing diagnostic and therapeutic procedures. Most episodes involve a relatively short hospital stay.
<b>Admitted patient</b>	A patient who has undergone a formal admission process in a public hospital to begin an episode of care. Admitted patients can receive acute, subacute or non-acute care services.
<b>Allied health (non-admitted)</b>	Occasions of service to non-admitted patients at units/clinics providing treatment/counselling to patients. These include units providing physiotherapy, speech therapy, family planning, dietary advice, optometry and occupational therapy.
<b>AR-DRG</b>	Australian Refined Diagnosis Related Group - a patient classification system that hospitals use to match their patient services (hospital procedures and diagnoses) with their resource needs. AR-DRG versions 5.1 and 5.2 are based on the ICD-10-AM classification.
<b>Casemix adjusted</b>	Adjustment of data on cases treated to account for the number and type of cases. Cases are sorted by AR-DRG into categories of patients with similar clinical conditions and requiring similar hospital services. Casemix adjustment is an important step to achieving comparable measures of efficiency across hospitals and jurisdictions.
<b>Casemix adjusted separations</b>	The number of separations adjusted to account for differences across hospitals in the complexity of episodes of care.
<b>Elective surgery waiting times</b>	The time elapsed for a patient on the elective surgery waiting list, from the date on which he or she was added to the waiting list for a procedure to admission or a designated census date.
<b>Emergency department waiting times to service delivery</b>	The time elapsed for each patient from presentation to the emergency department (that is, the time at which the patient is clerically registered or triaged, whichever occurs earlier) to the commencement of service by a treating medical officer or nurse.
<b>Emergency department waiting times to admission</b>	The time elapsed for each patient from presentation to the emergency department to admission to hospital.
<b>Fetal death</b>	Delivery of a child who did not at any time after delivery breathe or show any other evidence of life, such as a heartbeat. Excludes infants that weigh less than 400 grams or that are of a gestational age of less than 20 weeks.
<b>Fetal death rate</b>	The number of fetal deaths divided by the total number of births (that is, by live births registered and fetal deaths combined).
<b>General practice</b>	The organisational structure with one or more GPs and other staff such as practice nurses. A general practice provides and supervises healthcare for a 'population' of patients and can include services for specific populations, such as women's health or Indigenous health.
<b>ICD-10-AM</b>	The Australian modification of the International Standard Classification of Diseases and Related Health Problems. This is the current classification of diagnoses and procedures in Australia.

---

<b>Live birth</b>	Birth of a child who, after delivery, breathes or shows any other evidence of life, such as a heartbeat. Includes all registered live births regardless of birthweight.
<b>Neonatal death</b>	Death of a live born infant within 28 days of birth. Defined in Australia as the death of an infant that weighs at least 400 grams or that is of a gestational age of at least 20 weeks.
<b>Neonatal death rate</b>	Neonatal deaths divided by the number of live births registered.
<b>Non-acute care</b>	Includes maintenance care and newborn care.
<b>Non-admitted occasions of service</b>	Occasion of examination, consultation, treatment or other service provided to a non-admitted patient in a functional unit of a health service establishment. Services can include emergency department visits, outpatient services (such as pathology, radiology and imaging, and allied health services, including speech therapy and family planning) and other services to non-admitted patients. Hospital non-admitted occasions of service are not yet recorded consistently across states and territories, and relative differences in the complexity of services provided are not yet documented.
<b>Non-admitted patient</b>	A patient who has not undergone a formal admission process, but who may receive care through an emergency department, outpatient or other non-admitted service.
<b>Perinatal death</b>	Fetal death or neonatal death of an infant that weighs at least 400 grams or that is of a gestational age of at least 20 weeks.
<b>Perinatal death rate</b>	Perinatal deaths divided by the total number of births (that is, live births registered and fetal deaths combined).
<b>Public hospital</b>	A hospital that provides free treatment and accommodation to eligible admitted persons who elect to be treated as public patients. It also provides free services to eligible non-admitted patients and can provide (and charge for) treatment and accommodation services to private patients. Charges to non-admitted patients and admitted patients on discharge can be levied in accordance with the Australian Health Care Agreements (for example, aids and appliances).
<b>Separation</b>	A total hospital stay (from admission to discharge, transfer or death) or a portion of a hospital stay beginning or ending in a change in the type of care for an admitted patient (for example, from acute to rehabilitation). Includes admitted patients who receive same day procedures (for example, renal dialysis).
<b>Separation rate</b>	Hospital separations per 1000 people or 100 000 people.
<b>Subacute care</b>	Interdisciplinary therapeutic clinically-intense and goal-directed care in which the need for care depends primarily on the patient's functional status and quality of life rather than the underlying medical diagnosis or the patient's prospects of recovery from illness. Subacute care includes rehabilitation, palliative care and some mental health care, as well as geriatric evaluation and management and psychogeriatric care. Common to all is the patient no longer meets criteria for classification as 'acute', but still requires therapeutic, clinically-intense and goal-directed care.



---

<b>Triage category</b>	The urgency of the patient's need for medical and nursing care: category 1 — resuscitation (immediate within seconds) category 2 — emergency (within 10 minutes) category 3 — urgent (within 30 minutes) category 4 — semi-urgent (within 60 minutes) category 5 — non-urgent (within 120 minutes).
<b>Unplanned hospital re-admission</b>	An unexpected hospital admission for treatment of: the same condition for which the patient was previously hospitalised; a condition related to one for which the patient was previously hospitalised; or a complication of the condition for which the patient was previously hospitalised.
<b>Unplanned hospital re-admission rate</b>	The number of unplanned re-admissions to the same hospital within 28 days of separation, during the time period under study, divided by the total number of separations (excluding deaths) for the same time period, including day stay patients.
<b>Urgency category for elective surgery</b>	Category 1 patients — admission is desirable within 30 days for a condition that has the potential to deteriorate quickly to the point that it can become an emergency.  Category 2 patients — admission is desirable within 90 days for a condition that is causing some pain, dysfunction or disability, but that is not likely to deteriorate quickly or become an emergency.  Category 3 patients — admission at some time in the future is acceptable for a condition causing minimal or no pain, dysfunction or disability, that is unlikely to deteriorate quickly and that does not have the potential to become an emergency.

---

## List of attachment tables

Attachment tables for data within this chapter are contained in the attachment to the Compendium. These tables are identified in references throughout this preface by an 'A' suffix (for example, table 10A.1 is table 1 in the Public hospitals attachment). Attachment tables are on the Review website ([www.pc.gov.au/gsp](http://www.pc.gov.au/gsp)).

<b>Table 10A.1</b>	Separations by hospital sector and Indigenous status of patient, 2008-09
<b>Table 10A.2</b>	Separations per 1000 people, by Indigenous status of patient (number)
<b>Table 10A.3</b>	Selected hospital procedures, public hospitals, per 1000 population, July 2008 – June 2009
<b>Table 10A.4</b>	Hospitalisations with a procedure recorded, excluding hospitalisations for care involving dialysis, per 1000 population, July 2008 – June 2009 (per cent)
<b>Table 10A.5</b>	Hospitalisations with a procedure reported, excluding hospitalisations for care involving dialysis, per 1000 population, July 2008 – June 2009 (per cent)
<b>Table 10A.6</b>	Patients treated within national benchmarks for emergency department waiting time, by Indigenous status, 2008-09
<b>Table 10A.7</b>	Waiting times for elective surgery in public hospitals, by Indigenous status and procedure, 2008-09 (days)
<b>Table 10A.8</b>	Rate of unplanned/unexpected readmission within 28 days of selected surgical admissions, by Indigenous status, remoteness and SEIFA, 2008-09
<b>Table 10A.9</b>	Separations for falls that occurred in a health care setting, 2008-09
<b>Table 10A.10</b>	Separations for intentional self-harm that occurred in a health care setting, 2008-09
<b>Table 10A.11</b>	Perinatal, neonatal and fetal deaths, 2004–2008

## References

- ABS (Australian Bureau of Statistics) 2004, *Deaths, Australia 2003*, Cat. no. 3302.0, Canberra.
- AHMAC (Australian Health Ministers' Advisory Council) 2006, *Aboriginal and Torres Strait Islander Health Performance Framework Report 2006*, AHMAC, Canberra.
- HDSC (Health Data Standards Committee) 2008, *National health data dictionary. Version 14*. Cat. no. HWI 101. AIHW, Canberra.
- NCCH (National Centre for Classification in Health) 2008, *The International Statistical Classification of Diseases and Related Health Problems, 10th Revision*, Australian Modification, 6<sup>th</sup> edition (ICD-10-AM), Sydney.

# 10A Public hospitals — attachment

Tables in this attachment are sourced from the Public hospitals attachment of the 2011 Report — table numbers from the 2011 Report are identified in the source information. For example, a source reference to ‘2011 Report, table 10A.15’ refers to attachment table 15 of attachment 10A of the 2011 Report.

Definitions for indicators and descriptors in this attachment are in the Public hospitals chapter of the Compendium.

Data in this Report are examined by the Health Working Group, but have not been formally audited by the Secretariat. Unsourced information was obtained from the Australian, State and Territory governments.

This file is available in Adobe PDF format on the Review web page ([www.pc.gov.au/gsp](http://www.pc.gov.au/gsp)).

## Attachment contents

---

<b>Table 10A.1</b>	Separations by hospital sector and Indigenous status of patient, 2008-09
<b>Table 10A.2</b>	Separations per 1000 people, by Indigenous status of patient (number)
<b>Table 10A.3</b>	Selected hospital procedures, public hospitals, per 1000 population, July 2008 – June 2009
<b>Table 10A.4</b>	Hospitalisations with a procedure recorded, excluding hospitalisations for care involving dialysis, per 1000 population, July 2008 – June 2009 (per cent)
<b>Table 10A.5</b>	Hospitalisations with a procedure reported, excluding hospitalisations for care involving dialysis, per 1000 population, July 2008 – June 2009 (per cent)
<b>Table 10A.6</b>	Patients treated within national benchmarks for emergency department waiting time, by Indigenous status, 2008-09
<b>Table 10A.7</b>	Waiting times for elective surgery in public hospitals, by Indigenous status and procedure, 2008-09 (days)
<b>Table 10A.8</b>	Rate of unplanned/unexpected readmission within 28 days of selected surgical admissions, by Indigenous status, remoteness and SEIFA, 2008-09
<b>Table 10A.9</b>	Separations for falls that occurred in a health care setting, 2008-09
<b>Table 10A.10</b>	Separations for intentional self-harm that occurred in a health care setting, 2008-09
<b>Table 10A.11</b>	Perinatal, neonatal and fetal deaths, 2004–2008

Table 10A.1

Table 10A.1 Separations by hospital sector and Indigenous status of patient, 2008-09 (a), (b)

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total (c)
<b>Public hospitals</b>									
Indigenous people	no.	56 753	12 680	68 708	40 978	2 452	1 987	66 189	263 761
Non-Indigenous people	no.	1 434 823	1 357 081	797 701	426 455	89 994	86 244	29 165	4 384 817
Not reported	no.	14 393	9 863	16 931	–	2 446	1 638	2	57 684
<b>Total</b>	<b>no.</b>	<b>1 505 969</b>	<b>1 379 624</b>	<b>883 340</b>	<b>467 433</b>	<b>94 892</b>	<b>89 869</b>	<b>95 356</b>	<b>4 706 262</b>
<b>Private hospitals</b>									
Indigenous people	no.	1 459	710	4 426	14 443	np	np	np	22 056
Non-Indigenous people	no.	885 960	800 180	733 180	347 719	np	np	np	3 007 325
Not reported	no.	19 795	10 130	76 335	–	np	np	np	120 456
<b>Total</b>	<b>no.</b>	<b>907 214</b>	<b>811 020</b>	<b>813 941</b>	<b>362 162</b>	<b>np</b>	<b>np</b>	<b>np</b>	<b>3 149 837</b>
Indigenous separations (% of total separations)									
Public hospitals	%	3.8	0.9	7.8	8.8	2.6	2.2	69.4	5.6
Private hospitals	%	0.2	0.1	0.5	4.0	np	np	np	0.7
All hospitals	%	2.4	0.6	4.3	6.7	np	np	np	3.6
Separations in public hospitals (% of total separations)									
Indigenous people	%	97.5	94.7	93.9	73.9	np	np	np	92.3
Non-Indigenous people	%	61.8	62.9	52.1	55.1	np	np	np	59.3

(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) Identification of Indigenous patients is not considered to be complete and completeness varies among the jurisdictions.

(c) Total includes data only for NSW, Victoria, Queensland, WA, SA and the NT (public hospitals only), for which the quality of Indigenous identification is considered acceptable for the purposes of analysis. Caution should be used in the interpretation of these data because of jurisdictional differences in data quality. In addition, these jurisdictions are not necessarily representative of the excluded jurisdictions.

– Nil or rounded to zero. np Not published.

Source: AIHW 2010, *Australian Hospital Statistics 2008-09*, Health Services Series No. 34, Cat no. HSE 84, AIHW, Canberra; 2011 Report, table 10A.10.

Table 10A.2

**Table 10A.2 Separations per 1000 people, by Indigenous status of patient (number) (a), (b), (c)**

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA (d)</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT</i>	<i>Total (e)</i>
2004-05									
Public hospitals									
Indigenous people	np	np	733.6	821.5	822.2	np	np	1 441.0	907.0
Total population	193.3	238.3	188.1	195.2	225.3	np	np	456.2	208.1
Private Hospitals (f)									
Indigenous people	np	np	np	np	np	np	np	np	np
Total population	106.6	136.1	172.4	155.7	126.5	np	np	np	133.9
2005-06									
Public hospitals									
Indigenous people	495.6	np	745.4	845.2	875.0	np	np	1 548.0	792.1
Total population	203.2	243.4	186.2	196.4	228.4	np	np	479.1	213.6
Private Hospitals (f)									
Indigenous people	np	np	np	np	np	np	np	np	np
Total population	108.6	136.4	175.2	157.2	129.2	np	np	np	139.6
2006-07									
Public hospitals									
Indigenous people	528.0	624.3	756.7	876.5	929.3	np	np	1 584.8	787.5
Total population	206.0	246.7	190.2	218.4	232.6	np	np	480.1	218.8
Private Hospitals (f)									
Indigenous people	np	np	np	np	np	np	np	np	np
Total population	112.9	141.3	177.9	138.4	132.5	np	np	np	141.4
2007-08									
Public hospitals									
Indigenous people	550.5	629.8	785.7	869.4	908.9	np	np	1 670.7	807.7
Total population	202.8	247.8	195.7	215.1	216.4	np	np	486.4	217.6
Private Hospitals									
Indigenous people	15.0	53.7	82.0	315.3	91.3	np	np	np	95.1
Total population	117.6	145.5	181.5	150.9	138.3	np	np	np	147.0
2008-09									
Public hospitals									
Indigenous people	511.5	535.8	732.5	817.3	950.5	np	np	1 656.0	763.3
Total population	205.6	249.5	204.4	215.8	217.7	np	np	495.5	221.3
Private Hospitals									
Indigenous people	17.3	44.1	64.6	373.1	67.4	np	np	np	81.7
Total population	122.9	145.3	186.6	165.3	143.4	np	np	np	145.6

(a) Directly age standardised to the Australian population at 30 June 2001.

(b) Identification of Aboriginal and Torres Strait Islander patients is not considered to be complete and completeness varies among jurisdictions.

**Table 10A.2 Separations per 1000 people, by Indigenous status of patient (number) (a), (b), (c)**

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA (d)</i>	<i>SA</i>	<i>Tas</i>	<i>ACT</i>	<i>NT Total (e)</i>
(c)	The AIHW has advised that data for for NSW, Victoria, Queensland, SA, WA and the NT are of acceptable quality in 2006-07 and 2007-08. Nevertheless data for these jurisdictions should be interpreted with caution as there are jurisdictional differences in data quality and changes in hospitalisation rates for Indigenous people over time may include a component due to improved identification. Indigenous status should therefore be interpreted cautiously.							
(d)	In WA, separations for public patients at Joondalup and Peel Health Campuses are included from 2006-07 public hospitals figures but not in those for previous years.							
(e)	The totals include data only for NSW, Victoria, Queensland, WA, SA and the NT (public hospitals only), for which the quality of Indigenous identification is considered acceptable for the purposes of analysis. Caution should be used in the interpretation of these data because of jurisdictional differences in data quality							
(f)	Data quality of Indigenous status in the private sector is considered to be unacceptable and therefore data have been suppressed for the private sector.							

**np** Not published.

*Source:* AIHW (unpublished), National Hospital Morbidity Database; 2011 Report, table 10A.11.

Table 10A.3

Table 10A.3 **Selected hospital procedures, public hospitals, per 1000 population, July 2008 – June 2009 (a), (b), (c)**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT (d)	Total (e)
Procedures for Indigenous patients									
Cataract extraction	5.5	5.1	8.3	7.7	5.4	np	np	5.8	6.5
Cholecystectomy	2.4	2.7	2.3	2.3	2.5	np	np	2.2	2.4
Coronary artery bypass graft	1.0	0.5	1.4	0.9	2.5	np	np	–	1.0
Coronary angioplasty	2.1	2.0	1.5	1.8	4.6	np	np	–	1.8
Cystoscopy	1.7	3.0	2.8	3.2	4.7	np	np	2.0	2.6
Haemorrhoidectomy	1.3	1.6	0.6	0.5	0.6	np	np	0.4	0.8
Hip replacement	0.4	0.7	0.4	0.6	0.5	np	np	0.5	0.5
Inguinal herniorrhaphy	1.3	1.0	1.5	0.8	1.2	np	np	0.4	1.1
Knee replacement	1.3	0.5	1.3	0.5	0.6	np	np	0.3	0.9
Myringotomy	1.2	1.6	1.3	1.8	1.6	np	np	1.4	1.3
Tonsillectomy	1.2	1.6	1.1	1.1	1.6	np	np	0.3	1.1
Varicose veins stripping and ligation	0.1	0.3	0.1	0.1	0.6	np	np	0.1	0.2
Septoplasty	0.2	0.4	0.3	0.3	0.4	np	np	0.2	0.3
Prostatectomy	1.5	1.8	1.1	1.2	1.4	np	np	1.0	1.3
Hysterectomy	2.1	2.1	1.8	1.3	2.1	np	np	1.5	1.8
Procedures for all other patients (f)									
Cataract extraction	8.3	8.0	9.3	10.3	7.0	np	np	2.7	8.4
Cholecystectomy	2.1	2.1	2.2	2.6	1.7	np	np	0.7	2.1
Coronary artery bypass graft	0.5	0.6	0.7	0.4	0.5	np	np	–	0.6
Coronary angioplasty	1.5	1.6	1.4	1.7	1.2	np	np	–	1.5
Cystoscopy	3.9	4.8	4.9	7.3	4.5	np	np	1.2	4.7
Haemorrhoidectomy	2.4	1.4	1.3	1.4	1.0	np	np	1.2	1.7
Hip replacement	1.2	1.4	1.2	1.7	1.4	np	np	0.2	1.3
Inguinal herniorrhaphy	2.1	2.2	2.3	2.9	1.7	np	np	1.0	2.2
Knee replacement	1.6	1.3	1.6	1.9	1.6	np	np	0.3	1.6
Myringotomy	1.5	1.8	1.7	3.4	2.1	np	np	0.6	1.8
Tonsillectomy	2.1	2.1	2.4	4.2	1.9	np	np	0.8	2.3
Varicose veins stripping and ligation	0.5	0.8	0.5	0.7	0.5	np	np	0.3	0.6
Septoplasty	1.0	1.3	0.9	1.2	1.0	np	np	0.3	1.1
Prostatectomy	3.0	3.4	2.7	2.6	2.9	np	np	1.7	3.0
Hysterectomy	2.2	2.1	2.6	2.3	2.7	np	np	1.8	2.3

(a) Includes all patients treated in public hospitals and public patients treated in private hospitals.

(b) Proportions are indirectly age standardised using the age and cause specific rates of other Australians as the standard.

(c) Excludes separations with a care type of Newborn without qualified days and records for Hospital Boards and Posthumous organ procurement.

(d) Excludes private hospital data for NT.

(e) Includes data for NSW, Victoria, Queensland, WA, SA and NT only.

(f) Includes non-Indigenous patients and those for whom Indigenous status was not stated.

– Nil or rounded to zero. **np** Not published.

Source: AIHW (unpublished), National Hospital Morbidity Database; 2011 Report, table 10A.12.



Table 10A.4

**Table 10A.4 Hospitalisations with a procedure recorded, excluding hospitalisations for care involving dialysis, per 1000 population, July 2008 – June 2009 (per cent) (a), (b)**

	<i>NSW</i>	<i>Vic</i>	<i>Qld</i>	<i>WA</i>	<i>SA</i>	<i>Tas</i>	<i>ACT NT (c)</i>	<i>Aust</i>
Public hospitals and public patients (d)								
Indigenous hospitalisations with procedure reported	187	209	199	282	251	np	np	281
Hospitalisations with procedure reported for all other patients (e)	118	153	115	139	131	np	np	129
Total patients (f)								
Indigenous hospitalisations with procedure reported	199	234	232	290	297	np	np	281
Hospitalisations with procedure reported for all other patients (e)	234	280	276	274	258	np	np	215

- (a) Proportions are indirectly age standardised using the age and cause specific rates of other Australians as the standard.
- (b) Excludes hospitalisations with a principal diagnosis of care involving dialysis. Excludes separations with a care type of Newborn without qualified days and records for Hospital Boarders and Posthumous organ procurement.
- (c) Excludes private hospital data for NT.
- (d) Includes all patients treated in public hospitals and public patients treated in private hospitals.
- (e) Includes non-Indigenous patients and those for whom Indigenous status was not stated.
- (f) Includes all patients in public and private hospitals.

**np** Not published.

Source: AIHW (unpublished), National Hospital Morbidity Database; 2011 Report, table 10A.13.

**Table 10A.5 Hospitalisations with a procedure reported, excluding hospitalisations for care involving dialysis, per 1000 population, July 2008 – June 2009 (per cent) (a), (b)**

	<i>Major cities</i>	<i>Regional areas</i>	<i>Remote areas</i>	<i>All areas (c)</i>
Public hospitals and public patients (d)				
Indigenous hospitalisations with procedure reported	198	221	253	223
Hospitalisations with procedure reported for all other patients (e)	128	151	138	136
Total patients (f)				
Indigenous hospitalisations with procedure reported	231	243	256	243
Hospitalisations with procedure reported for all other patients (e)	277	257	215	270

(a) Proportions are indirectly age standardised using the age and cause specific rates of other Australians as the standard.

(b) Excludes hospitalisations with a principal diagnosis of care involving dialysis. Excludes separations with a care type of Newborn without qualified days and records for Hospital Boarders and Posthumous organ procurement.

(c) Includes data for NSW, Victoria, Queensland, WA, SA and NT only. Excludes private hospital data for NT.

(d) Includes all patients treated in public hospitals and public patients treated in private hospitals.

(e) Includes non-Indigenous patients and those for whom Indigenous status was not stated.

(f) Includes all patients in public and private hospitals.

Source: AIHW (unpublished), National Hospital Morbidity Database; 2011 Report, table 10A.14.

Table 10A.6

Table 10A.6 Patients treated within national benchmarks for emergency department waiting time, by Indigenous status, 2008-09 (a), (b)

Unit	NSW		Vic	Qld	WA	SA	Tas	ACT	NT	Aust	
	%	no.									
Indigenous											
Triage category 1	100		100	100	99	100	100	np	100	100	1 375
Triage category 2	79		85	78	69	74	74	85	60	73	14 922
Triage category 3	65		80	66	50	56	44	50	50	60	57 212
Triage category 4	69		74	73	55	61	56	56	39	62	75 460
Triage category 5	86		91	92	84	83	86	80	71	88	17 407
<b>Total (c)</b>	<b>71</b>		<b>79</b>	<b>73</b>	<b>58</b>	<b>64</b>	<b>56</b>	<b>60</b>	<b>47</b>	<b>66</b>	<b>..</b>
	no.		no.	no.	no.	no.	no.	no.	no.	no.	
Total number (c)	41 727		13 548	48 879	18 931	6 309	3 364	1 667	31 956	166 381	
Unit	%		%	%	%	%	%	%	%	%	no.
Other Australians (d)											
Triage category 1	100		100	99	99	100	99	100	100	100	37 625
Triage category 2	80		82	72	66	74	75	85	63	77	443 287
Triage category 3	66		73	58	47	57	50	53	40	63	1 525 245
Triage category 4	70		67	64	56	60	58	53	38	65	1 909 359
Triage category 5	87		85	87	85	83	86	78	79	86	443 759
<b>Total (c)</b>	<b>72</b>		<b>73</b>	<b>64</b>	<b>57</b>	<b>63</b>	<b>59</b>	<b>60</b>	<b>43</b>	<b>68</b>	<b>..</b>
	no.		no.	no.	no.	no.	no.	no.	no.	no.	
Total number (c)	1 418 688		1 147 308	862 558	410 688	287 384	93 837	89 815	49 480	4 359 758	

(a) It should be noted that the data presented here are not necessarily representative of the hospitals not included in the National Non-Admitted Patient Emergency Department Care Database (NNAPEDCD).

Table 10A.6

**Table 10A.6 Patients treated within national benchmarks for emergency department waiting time, by Indigenous status, 2008-09 (a), (b)**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
--	-----	-----	-----	----	----	-----	-----	----	------

(b) The quality of the identification of Indigenous patients in NNAPEDCD has not been assessed. Identification of Indigenous patients is not considered to be complete, and completeness may vary among the states and territories.

(c) The totals include a small number of records for which the triage category was not assigned or not reported.

(d) 'Other Australians' includes non-Indigenous patients and those for whom Indigenous status was not stated.  
 .. Not applicable.

Source: AIHW (unpublished), National Non-admitted Patient Emergency Department Care Database; 2011 Report, table 10A.22.

Table 10A.7

	Waiting times for elective surgery in public hospitals, by Indigenous status and procedure, 2008-09 (days) (a),(b)																	
	Indigenous							Other Australians										
	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (b)	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (b)
50th percentile	All hospitals																	
Cataract extraction	177	104	74	97	90	204	97	124	114	168	56	42	55	58	31	121	163	83
Cholecystectomy	50	28	48	33	19	33	np	109	47	53	46	40	32	45	58	83	76	46
Coronary artery bypass graft	15	np	15	17	29	np	np	..	20	15	18	9	15	15	25	11	..	14
Cystoscopy	35	21	33	26	32	63	np	68	35	26	19	33	23	35	34	65	47	25
Haemorrhoidectomy	37	np	26	np	np	np	-	63	43	51	66	43	34	46	109	84	73	52
Hysterectomy	50	39	42	32	np	55	np	47	47	50	48	41	55	50	56	77	64	48
Inguinal herniorrhaphy	38	23	33	56	np	58	-	107	40	59	50	48	32	48	60	87	69	51
Myringoplasty	242	np	82	113	163	np	-	34	97	186	82	66	103	143	33	273	54	92
Myringotomy	39	57	59	41	61	np	np	28	54	47	43	30	58	48	46	120	35	43
Prostatectomy	69	np	44	np	-	np	..	np	53	54	21	40	25	56	47	42	108	41
Septoplasty	317	np	46	np	np	np	np	np	147	236	82	70	109	106	108	426	108	125
Tonsillectomy	158	107	67	111	80	157	np	90	102	144	77	46	106	71	105	344	57	84
Total hip replacement	110	np	106	np	np	np	-	np	110	123	106	68	71	102	350	170	66	100
Total knee replacement	213	np	132	np	np	np	-	np	177	220	143	86	90	182	510	249	148	147
Varicose veins stripping & ligation	52	np	np	np	-	np	np	np	81	69	101	55	87	115	109	276	99	84
<b>Total (c)</b>	<b>42</b>	<b>35</b>	<b>30</b>	<b>32</b>	<b>39</b>	<b>46</b>	<b>57</b>	<b>40</b>	<b>36</b>	<b>39</b>	<b>31</b>	<b>27</b>	<b>32</b>	<b>36</b>	<b>38</b>	<b>74</b>	<b>35</b>	<b>34</b>
90th percentile																		
Cataract extraction	348	295	237	215	243	474	189	480	332	348	190	224	205	260	567	340	316	314
Cholecystectomy	154	127	133	210	116	620	np	600	188	190	169	115	146	148	407	226	183	166
Coronary artery bypass graft	96	np	53	78	109	np	np	..	83	78	189	76	35	125	129	51	..	94
Cystoscopy	136	179	139	210	131	119	np	210	167	118	126	145	163	99	163	332	232	131
Haemorrhoidectomy	123	np	64	np	np	np	-	412	175	193	242	166	185	281	591	164	296	215
Hysterectomy	182	111	103	92	np	112	np	175	145	216	142	120	157	184	284	253	219	171

Table 10A.7

Table 10A.7 **Waiting times for elective surgery in public hospitals, by Indigenous status and procedure, 2008-09 (days) (a),(b)**

	Indigenous										Other Australians							
	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (b)	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (b)
Inguinal herniorrhaphy	239	122	113	160	np	259	-	243	191	240	207	147	149	217	617	272	192	216
Myringoplasty	383	np	351	381	344	np	-	563	412	366	316	325	389	479	378	689	498	366
Myringotomy	155	216	131	210	96	np	np	132	155	191	117	117	213	109	159	339	90	140
Prostatectomy	196	np	295	np	-	np	-	np	227	184	208	120	77	136	103	417	216	165
Septoplasty	368	np	218	np	np	np	np	np	404	369	339	414	350	339	448	728	2 470	376
Tonsillectomy	351	220	231	333	194	227	np	294	332	363	274	166	327	277	230	567	297	335
Total hip replacement	354	np	175	np	np	np	-	np	377	363	351	242	249	374	719	492	415	363
Total knee replacement	366	np	435	np	np	np	-	np	371	375	467	340	298	430	809	589	351	391
Varicose veins stripping & ligation	218	np	np	np	-	np	np	np	499	268	473	277	393	342	584	572	504	357
<b>Total (c)</b>	<b>289</b>	<b>200</b>	<b>148</b>	<b>202</b>	<b>189</b>	<b>343</b>	<b>265</b>	<b>329</b>	<b>232</b>	<b>282</b>	<b>189</b>	<b>133</b>	<b>183</b>	<b>207</b>	<b>405</b>	<b>370</b>	<b>209</b>	<b>217</b>

(a) The data presented for this indicator are sourced from linked records in the National Hospital Morbidity Database and National Elective Surgery Waiting Times Data Collection. The linked records represent about 97 per cent of all records in the National Elective Surgery Waiting Times Data Collection for 2008-09.

(b) Data for Tasmania and the ACT should be interpreted with caution until further assessment of Indigenous identification is completed. The Australian totals for Indigenous/Other Australians do not include data for the ACT or Tasmania.

(c) Total includes all removals for elective surgery procedures, including but not limited to the procedures listed above.

.. Not applicable. - Nil or rounded to zero. **np** Not published.

Source: Linked AIHW (unpublished) National Hospital Morbidity Database; AIHW (unpublished) National Elective Surgery Waiting Times Data Collection; 2011 Report, table 10A.26.

Table 10A.8

**Table 10A.8 Rate of unplanned/unexpected readmission within 28 days of selected surgical admissions, by Indigenous status, remoteness and SEIFA, 2008-09 (a)**

Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (b)	no.																																																																																																																																																																																																																																							
	Rate per 1000 separations																																																																																																																																																																																																																																																
	Knee replacement																																																																																																																																																																																																																																																
Hospital peer group											Peer group A	30.8	29.7	41.3	24.7	24.9	np	np	np	32.0	184	Peer group B	13.3	24.5	np	17.8	np	np	-	-	19.6	30	Other peer groups	18.1	21.9	-	9.5	np	-	-	-	17.5	21	Indigenous status (c)											Indigenous	np	np	np	-	np	np	np	np	np	1	Other Australians (d)	25.1	27.7	43.5	16.0	15.1	np	np	-	28.8	229	Remoteness of residence (e)											Major cities	18.5	32.3	44.2	10.1	17.6	-	np	-	26.4	129	Inner regional	36.4	22.3	38.2	28.7	np	np	np	-	29.3	68	Outer regional	34.0	19.5	45.3	26.2	np	np	np	np	29.8	34	Remote & Very remote	np	np	np	-	np	np	np	np	np	3	SEIFA of residence (f)											Quintile 1	22.3	26.9	43.7	46.5	12.3	np	np	np	25.4	66	Quintile 2	32.1	32.6	46.5	12.8	np	np	np	np	32.6	75	Quintile 3	18.8	17.9	40.9	7.8	np	np	np	np	23.9	36	Quintile 4	20.4	30.3	43.4	21.6	np	np	np	np	28.5	37	Quintile 5	21.5	33.8	np	19.8	np	-	np	np	26.0	20		Hip replacement										Hospital peer group											Peer group A	23.3	26.5	32.4	22.5	19.2	np	np	np	25.4	116	Peer group B	np	np	np	18.6	np	np	-	-	13.3	15
Peer group A	30.8	29.7	41.3	24.7	24.9	np	np	np	32.0	184																																																																																																																																																																																																																																							
Peer group B	13.3	24.5	np	17.8	np	np	-	-	19.6	30																																																																																																																																																																																																																																							
Other peer groups	18.1	21.9	-	9.5	np	-	-	-	17.5	21																																																																																																																																																																																																																																							
Indigenous status (c)											Indigenous	np	np	np	-	np	np	np	np	np	1	Other Australians (d)	25.1	27.7	43.5	16.0	15.1	np	np	-	28.8	229	Remoteness of residence (e)											Major cities	18.5	32.3	44.2	10.1	17.6	-	np	-	26.4	129	Inner regional	36.4	22.3	38.2	28.7	np	np	np	-	29.3	68	Outer regional	34.0	19.5	45.3	26.2	np	np	np	np	29.8	34	Remote & Very remote	np	np	np	-	np	np	np	np	np	3	SEIFA of residence (f)											Quintile 1	22.3	26.9	43.7	46.5	12.3	np	np	np	25.4	66	Quintile 2	32.1	32.6	46.5	12.8	np	np	np	np	32.6	75	Quintile 3	18.8	17.9	40.9	7.8	np	np	np	np	23.9	36	Quintile 4	20.4	30.3	43.4	21.6	np	np	np	np	28.5	37	Quintile 5	21.5	33.8	np	19.8	np	-	np	np	26.0	20		Hip replacement										Hospital peer group											Peer group A	23.3	26.5	32.4	22.5	19.2	np	np	np	25.4	116	Peer group B	np	np	np	18.6	np	np	-	-	13.3	15																																												
Indigenous	np	np	np	-	np	np	np	np	np	1																																																																																																																																																																																																																																							
Other Australians (d)	25.1	27.7	43.5	16.0	15.1	np	np	-	28.8	229																																																																																																																																																																																																																																							
Remoteness of residence (e)											Major cities	18.5	32.3	44.2	10.1	17.6	-	np	-	26.4	129	Inner regional	36.4	22.3	38.2	28.7	np	np	np	-	29.3	68	Outer regional	34.0	19.5	45.3	26.2	np	np	np	np	29.8	34	Remote & Very remote	np	np	np	-	np	np	np	np	np	3	SEIFA of residence (f)											Quintile 1	22.3	26.9	43.7	46.5	12.3	np	np	np	25.4	66	Quintile 2	32.1	32.6	46.5	12.8	np	np	np	np	32.6	75	Quintile 3	18.8	17.9	40.9	7.8	np	np	np	np	23.9	36	Quintile 4	20.4	30.3	43.4	21.6	np	np	np	np	28.5	37	Quintile 5	21.5	33.8	np	19.8	np	-	np	np	26.0	20		Hip replacement										Hospital peer group											Peer group A	23.3	26.5	32.4	22.5	19.2	np	np	np	25.4	116	Peer group B	np	np	np	18.6	np	np	-	-	13.3	15																																																																													
Major cities	18.5	32.3	44.2	10.1	17.6	-	np	-	26.4	129																																																																																																																																																																																																																																							
Inner regional	36.4	22.3	38.2	28.7	np	np	np	-	29.3	68																																																																																																																																																																																																																																							
Outer regional	34.0	19.5	45.3	26.2	np	np	np	np	29.8	34																																																																																																																																																																																																																																							
Remote & Very remote	np	np	np	-	np	np	np	np	np	3																																																																																																																																																																																																																																							
SEIFA of residence (f)											Quintile 1	22.3	26.9	43.7	46.5	12.3	np	np	np	25.4	66	Quintile 2	32.1	32.6	46.5	12.8	np	np	np	np	32.6	75	Quintile 3	18.8	17.9	40.9	7.8	np	np	np	np	23.9	36	Quintile 4	20.4	30.3	43.4	21.6	np	np	np	np	28.5	37	Quintile 5	21.5	33.8	np	19.8	np	-	np	np	26.0	20		Hip replacement										Hospital peer group											Peer group A	23.3	26.5	32.4	22.5	19.2	np	np	np	25.4	116	Peer group B	np	np	np	18.6	np	np	-	-	13.3	15																																																																																																																																				
Quintile 1	22.3	26.9	43.7	46.5	12.3	np	np	np	25.4	66																																																																																																																																																																																																																																							
Quintile 2	32.1	32.6	46.5	12.8	np	np	np	np	32.6	75																																																																																																																																																																																																																																							
Quintile 3	18.8	17.9	40.9	7.8	np	np	np	np	23.9	36																																																																																																																																																																																																																																							
Quintile 4	20.4	30.3	43.4	21.6	np	np	np	np	28.5	37																																																																																																																																																																																																																																							
Quintile 5	21.5	33.8	np	19.8	np	-	np	np	26.0	20																																																																																																																																																																																																																																							
	Hip replacement																																																																																																																																																																																																																																																
Hospital peer group											Peer group A	23.3	26.5	32.4	22.5	19.2	np	np	np	25.4	116	Peer group B	np	np	np	18.6	np	np	-	-	13.3	15																																																																																																																																																																																																																	
Peer group A	23.3	26.5	32.4	22.5	19.2	np	np	np	25.4	116																																																																																																																																																																																																																																							
Peer group B	np	np	np	18.6	np	np	-	-	13.3	15																																																																																																																																																																																																																																							









Table 10A.8

**Table 10A.8 Rate of unplanned/unexpected readmission within 28 days of selected surgical admissions, by Indigenous status, remoteness and SEIFA, 2008-09 (a)**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (b)
Cataract surgery									
Hospital peer group									
Peer group A	3.3	5.2	4.4	8.2	10.9	np	np	32.1	5.2
Peer group B	np	7.3	-	1.5	np	-	-	-	6.4
Other peer groups	4.2	1.0	np	2.3	1.9	-	-	np	2.7
Indigenous status (c)									
Indigenous	np	np	np	5.8	np	np	np	np	15.4
Other Australians (d)	3.6	4.7	3.8	3.2	5.7	np	np	19.0	4.4
Remoteness of residence (e)									
Major cities	4.6	6.3	3.9	2.8	8.3	-	np	np	5.5
Inner regional	2.6	2.4	np	1.0	np	np	np	-	2.5
Outer regional	np	np	5.6	9.3	4.7	np	np	24.5	4.1
Remote & Very remote	np	np	np	5.7	-	np	-	np	7.6
SEIFA of residence (f)									
Quintile 1	3.8	3.6	6.5	9.6	6.2	np	np	np	5.1
Quintile 2	2.3	3.5	np	2.5	np	np	np	np	2.8
Quintile 3	3.4	5.9	3.6	1.0	np	np	np	np	4.6
Quintile 4	np	5.7	np	5.1	np	np	-	np	4.8
Quintile 5	12.0	5.7	np	4.8	np	-	np	np	7.3
Appendicectomy									
Hospital peer group									
Peer group A	31.5	18.8	25.1	31.6	36.0	41.4	28.1	30.5	27.1
Peer group B	18.2	27.6	23.5	24.0	np	np	-	-	23.5
Other peer groups	22.2	21.1	np	17.0	35.6	-	-	np	26.1

Table 10A.8

**Table 10A.8 Rate of unplanned/unexpected readmission within 28 days of selected surgical admissions, by Indigenous status, remoteness and SEIFA, 2008-09 (a)**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (b)	
Indigenous status (c)										
Indigenous	35.2	np	np	36.5	np	np	np	np	42.6	24
Other Australians (d)	27.8	20.3	24.5	27.5	35.1	38.0	28.4	np	25.7	460
Remoteness of residence (e)										
Major cities	26.3	21.5	25.1	31.5	33.9	np	22.8	np	25.3	315
Inner regional	34.5	22.7	21.0	26.3	np	43.7	np	np	29.2	127
Outer regional	26.6	np	30.8	18.3	43.7	np	np	np	28.4	54
Remote & Very remote	np	np	np	15.4	np	np	–	np	24.2	9
SEIFA of residence (f)										
Quintile 1	23.1	18.2	25.5	30.4	37.8	23.3	np	np	24.8	109
Quintile 2	32.2	15.5	31.1	26.5	48.2	np	np	np	30.4	122
Quintile 3	29.9	29.2	23.6	28.0	np	np	np	np	27.3	109
Quintile 4	20.1	16.0	21.6	34.3	31.7	np	np	np	21.3	80
Quintile 5	34.0	23.5	28.7	21.3	np	–	np	np	29.0	85

(a) This indicator is limited to public hospitals.

(b) Total rates and numbers for Australia do not include WA.

(c) Data for Tasmania and the ACT should be interpreted with caution until further assessment of Indigenous identification is completed. The Australian totals for Indigenous/Other Australians do not include data for the ACT and Tasmania.

(d) 'Other Australians' includes readmissions for non-Indigenous people and those for whom Indigenous status was not stated.

(e) Disaggregation by remoteness area is by usual residence, not remoteness of hospital. Separations are reported by jurisdiction of hospital, regardless of the jurisdiction of usual residence.

Table 10A.8

**Table 10A.8 Rate of unplanned/unexpected readmission within 28 days of selected surgical admissions, by Indigenous status, remoteness and SEIFA, 2008-09 (a)**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust (b)
--	-----	-----	-----	----	----	-----	-----	----	----------

(f) Socio-Economic Indexes for Areas (SEIFA) quintiles are based on the ABS Index of Relative Socio-economic Disadvantage (IRSD), with quintile 1 being the most disadvantaged and quintile 5 being the least disadvantaged. The SEIFA quintiles represent approximately 20 per cent of the national population, but do not necessarily represent 20 per cent of the population in each State or Territory. Disaggregation by SEIFA is based on the patient's usual residence, not the location of the hospital.

**np** Not published. – Nil or rounded to zero.

Source: AIHW (unpublished) Admitted Patient Care National Minimum Data Set; 2011 Report, table 10A.47.

Table 10A.9

Table 10A.9 Separations for falls that occurred in a health care setting, 2008-09

	NSW	Vic	Qld	WA	SA	Tas (a)	ACT	NT	Aust
	Number								
Hospital sector									
Private	1 126	914	1 120	406	289	np	np	np	3 997
Public	5 431	3 760	2 255	1 359	972	np	np	np	14 400
Indigenous status (b)									
Indigenous	60	8	55	49	17	5	–	44	233
Other Australians (c)	6 497	4 666	3 320	1 716	1 244	366	284	66	17 509
Remoteness of residence (d)									
Major cities	4 624	3 200	2 023	1 276	933	np	246	np	12 306
Inner regional	1 436	1 125	773	239	140	261	np	np	4 001
Outer regional	422	338	473	158	136	101	13	64	1 705
Remote and Very remote	29	4	96	89	52	5	–	43	318
SEIFA of residence (e)									
Quintile 1	1 444	874	905	148	410	198	5	35	4 019
Quintile 2	1 902	853	537	390	261	33	27	9	4 012
Quintile 3	1 186	985	706	521	242	75	17	26	3 758
Quintile 4	758	947	798	288	200	63	68	34	3 156
Quintile 5	1 221	1 008	415	415	148	np	167	np	3 379
<b>Total (f)</b>	<b>6 557</b>	<b>4 674</b>	<b>3 375</b>	<b>1 765</b>	<b>1 261</b>	<b>371</b>	<b>284</b>	<b>110</b>	<b>18 397</b>
	Rate per 1000 separations								
Hospital sector									
Private	1.2	1.1	1.4	1.1	1.1	np	np	np	1.2
Public	3.6	2.7	2.6	2.9	2.6	np	np	np	2.9
Indigenous status (b)									
Indigenous	1.0	0.6	0.8	0.9	0.9	1.6	–	0.7	0.8
Other Australians (c)	2.8	2.1	2.0	2.2	2.0	2.4	2.3	1.5	2.3

Table 10A.9

Table 10A.9 Separations for falls that occurred in a health care setting, 2008-09

	NSW	Vic	Qld	WA	SA	Tas (a)	ACT	NT	Aust
Remoteness of residence (d)									
Major cities	2.7	2.0	2.0	2.2	2.0	np	2.3	np	2.2
Inner regional	2.8	2.5	2.0	2.3	2.1	2.7	np	np	2.5
Outer regional	2.6	2.9	1.9	2.0	1.7	2.1	2.4	1.4	2.2
Remote and Very remote	1.8	np	1.7	1.6	2.3	1.8	–	0.7	1.5
SEIFA of residence (e)									
Quintile 1	2.8	2.3	2.2	2.3	1.9	2.4	2.1	0.7	2.3
Quintile 2	3.0	2.3	1.9	2.3	2.0	2.6	3.0	0.8	2.5
Quintile 3	2.8	2.2	2.0	2.0	2.6	2.7	2.4	1.2	2.3
Quintile 4	2.3	1.9	2.0	2.0	1.9	2.5	1.6	2.0	2.0
Quintile 5	2.5	2.1	1.7	2.2	1.8	np	2.6	np	2.2
<b>Total (f)</b>	<b>2.7</b>	<b>2.1</b>	<b>2.0</b>	<b>2.1</b>	<b>2.0</b>	<b>2.4</b>	<b>2.3</b>	<b>1.0</b>	<b>2.3</b>

(a) Data for Tasmania does not include two private hospitals that account for approximately one eighth of Tasmania's total hospital separations.

(b) Data for Tasmania and the ACT should be interpreted with caution until further assessment of Indigenous identification is completed. The Australian totals for Indigenous/Other Australians do not include data for the ACT and Tasmania.

(c) 'Other Australians' includes hospitalisations of non-Indigenous people and those for whom Indigenous status was not stated.

(d) Disaggregation by remoteness area is by usual residence, not remoteness of hospital. Separations are reported by jurisdiction of hospitalisation, regardless of the jurisdiction of usual residence.

(e) Socio-Economic Indexes for Areas (SEIFA) quintiles are based on the ABS Index of Relative Socio-economic Disadvantage (IRSD), with quintile 1 being the most disadvantaged and quintile 5 being the least disadvantaged. The SEIFA quintiles represent approximately 20 per cent of the national population, but do not necessarily represent 20 per cent of the population in each State or Territory. Disaggregation by SEIFA is based on the patient's usual residence, not the location of the hospital.

(f) Total includes separations for which a SEIFA category or remoteness area could not be assigned as the place of residence was unknown or not stated.

np Not published. – Nil or rounded to zero.

Source: AIHW (unpublished) National Hospital Morbidity Database; 2011 Report, table 10A.52.

Table 10A.10

## Table 10A.10 Separations for intentional self-harm that occurred in a health care setting, 2008-09

	NSW	Vic	Q/d	WA	SA	Tas (e)	ACT	NT	Aust																																																																																																																																																																																																																																																										
	Number																																																																																																																																																																																																																																																																		
Hospital sector										Private	61	69	126	120	8	np	np	np	392	Public	195	96	192	194	48	np	np	np	770	Indigenous status (b)										Indigenous	12	np	15	6	-	np	-	-	35	Other Australians (c)	244	np	303	308	56	np	31	4	1 078	Remoteness of residence (d)										Major cities	171	125	232	233	38	-	np	np	826	Inner regional	56	25	53	34	5	np	np	-	193	Outer regional	17	13	27	32	8	np	np	np	102	Remote and Very remote	-	-	4	13	3	-	np	np	21	SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)									
Private	61	69	126	120	8	np	np	np	392	Public	195	96	192	194	48	np	np	np	770	Indigenous status (b)										Indigenous	12	np	15	6	-	np	-	-	35	Other Australians (c)	244	np	303	308	56	np	31	4	1 078	Remoteness of residence (d)										Major cities	171	125	232	233	38	-	np	np	826	Inner regional	56	25	53	34	5	np	np	-	193	Outer regional	17	13	27	32	8	np	np	np	102	Remote and Very remote	-	-	4	13	3	-	np	np	21	SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																			
Public	195	96	192	194	48	np	np	np	770	Indigenous status (b)										Indigenous	12	np	15	6	-	np	-	-	35	Other Australians (c)	244	np	303	308	56	np	31	4	1 078	Remoteness of residence (d)										Major cities	171	125	232	233	38	-	np	np	826	Inner regional	56	25	53	34	5	np	np	-	193	Outer regional	17	13	27	32	8	np	np	np	102	Remote and Very remote	-	-	4	13	3	-	np	np	21	SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																													
Indigenous status (b)										Indigenous	12	np	15	6	-	np	-	-	35	Other Australians (c)	244	np	303	308	56	np	31	4	1 078	Remoteness of residence (d)										Major cities	171	125	232	233	38	-	np	np	826	Inner regional	56	25	53	34	5	np	np	-	193	Outer regional	17	13	27	32	8	np	np	np	102	Remote and Very remote	-	-	4	13	3	-	np	np	21	SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																							
Indigenous	12	np	15	6	-	np	-	-	35	Other Australians (c)	244	np	303	308	56	np	31	4	1 078	Remoteness of residence (d)										Major cities	171	125	232	233	38	-	np	np	826	Inner regional	56	25	53	34	5	np	np	-	193	Outer regional	17	13	27	32	8	np	np	np	102	Remote and Very remote	-	-	4	13	3	-	np	np	21	SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																	
Other Australians (c)	244	np	303	308	56	np	31	4	1 078	Remoteness of residence (d)										Major cities	171	125	232	233	38	-	np	np	826	Inner regional	56	25	53	34	5	np	np	-	193	Outer regional	17	13	27	32	8	np	np	np	102	Remote and Very remote	-	-	4	13	3	-	np	np	21	SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																											
Remoteness of residence (d)										Major cities	171	125	232	233	38	-	np	np	826	Inner regional	56	25	53	34	5	np	np	-	193	Outer regional	17	13	27	32	8	np	np	np	102	Remote and Very remote	-	-	4	13	3	-	np	np	21	SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																					
Major cities	171	125	232	233	38	-	np	np	826	Inner regional	56	25	53	34	5	np	np	-	193	Outer regional	17	13	27	32	8	np	np	np	102	Remote and Very remote	-	-	4	13	3	-	np	np	21	SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																															
Inner regional	56	25	53	34	5	np	np	-	193	Outer regional	17	13	27	32	8	np	np	np	102	Remote and Very remote	-	-	4	13	3	-	np	np	21	SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																									
Outer regional	17	13	27	32	8	np	np	np	102	Remote and Very remote	-	-	4	13	3	-	np	np	21	SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																			
Remote and Very remote	-	-	4	13	3	-	np	np	21	SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																													
SEIFA of residence (e)										Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																							
Quintile 1	49	25	73	18	24	np	-	np	196	Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																	
Quintile 2	70	18	35	54	11	np	np	-	194	Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																											
Quintile 3	42	38	48	78	10	5	np	np	225	Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																																					
Quintile 4	31	35	89	75	np	5	9	np	250	Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																																															
Quintile 5	52	47	71	87	np	-	15	np	277	<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																																																									
<b>Total (f)</b>	<b>256</b>	<b>165</b>	<b>318</b>	<b>314</b>	<b>56</b>	<b>18</b>	<b>31</b>	<b>4</b>	<b>1 162</b>		Rate per 1000 separations									Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																																																																			
	Rate per 1000 separations																																																																																																																																																																																																																																																																		
Hospital sector										Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																																																																																							
Private	0.1	0.1	0.2	0.3	-	np	np	np	0.1	Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																																																																																																	
Public	0.1	0.1	0.2	0.5	0.1	np	np	np	0.2	Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																																																																																																											
Indigenous status (b)										Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																																																																																																																					
Indigenous	0.2	np	0.2	0.1	-	np	-	-	0.1	Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																																																																																																																															
Other Australians (c)	0.1	np	0.2	0.4	0.1	np	0.3	np	0.2	Remoteness of residence (d)																																																																																																																																																																																																																																																									
Remoteness of residence (d)																																																																																																																																																																																																																																																																			



Table 10A.10

Table 10A.10 Separations for intentional self-harm that occurred in a health care setting, 2008-09

	NSW	Vic	Qld	WA	SA	Tas (a)	ACT	NT	Aust
Major cities	0.1	0.1	0.2	0.4	0.1	–	np	np	0.2
Inner regional	0.1	0.1	0.2	0.3	0.1	np	np	–	0.1
Outer regional	0.1	0.1	0.1	0.4	0.1	np	np	np	0.1
Remote and Very remote	–	–	np	0.3	np	–	np	np	0.1
SEIFA of residence (e)									
Quintile 1	0.1	0.1	0.2	0.3	0.1	np	–	np	0.1
Quintile 2	0.1	0.1	0.1	0.3	0.1	np	np	–	0.1
Quintile 3	0.1	0.1	0.2	0.3	0.1	0.2	np	np	0.1
Quintile 4	0.1	0.1	0.2	0.6	np	0.2	0.2	np	0.2
Quintile 5	0.1	0.1	0.3	0.5	np	–	0.2	np	0.2
<b>Total (f)</b>	<b>0.1</b>	<b>0.1</b>	<b>0.2</b>	<b>0.4</b>	<b>0.1</b>	<b>0.1</b>	<b>0.3</b>	<b>np</b>	<b>0.2</b>

(a) Data for Tasmania does not include two private hospitals that account for approximately one eighth of Tasmania's total hospital separations.

(b) Data for Tasmania and the ACT should be interpreted with caution until further assessment of Indigenous identification is completed. The Australian totals for Indigenous/Other Australians do not include data for the ACT and Tasmania.

(c) 'Other Australians' includes hospitalisations of non-Indigenous people and those for whom Indigenous status was not stated.

(d) Disaggregation by remoteness area is by usual residence, not remoteness of hospital. Separations are reported by jurisdiction of hospital, regardless of the jurisdiction of usual residence.

(e) Socio-Economic Indexes for Areas (SEIFA) quintiles are based on the ABS Index of Relative Socio-economic Disadvantage (IRSD), with quintile 1 being the most disadvantaged and quintile 5 being the least disadvantaged. The SEIFA quintiles represent approximately 20 per cent of the national population, but do not necessarily represent 20 per cent of the population in each State or Territory. Disaggregation by SEIFA is based on the patient's usual residence, not the location of the hospital.

(f) Total includes separations for which a SEIFA category or remoteness area could not be assigned as the place of residence was unknown or not stated.

np Not published. – Nil or rounded to zero.

Source: AIHW (unpublished) National Hospital Morbidity Database; 2011 Report, table 10A.53.

Table 10A.11

Table 10A.11 Perinatal, neonatal and fetal deaths, 2004–2008 (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Fetal deaths (b)										
Indigenous										
Total all births (c)	no.	18 000	na	19 592	10 065	3 911	na	na	7 811	66 256
Fetal deaths	no.	89	na	160	79	23	na	na	97	473
Fetal death rate	per 1000 total births	4.9	na	8.2	7.8	5.9	na	na	12.4	7.1
Non-Indigenous (d)										
Total all births (c)	no.	428 449	na	260 992	131 187	89 668	na	na	11 088	1 304 045
Fetal deaths	no.	2 362	na	1 777	835	465	na	na	60	8 008
Fetal death rate	per 1000 total births	5.5	na	6.8	6.4	5.2	na	na	5.4	6.1
Neonatal deaths (e)										
Indigenous										
Total live births (f)	no.	17 911	na	19 432	9 986	3 888	na	na	7 714	65 783
Neonatal deaths	no.	84	na	116	49	15	na	na	65	347
Neonatal death rate	per 1000 live births	4.7	na	6.0	4.9	3.9	na	na	8.4	5.3
Non-Indigenous (d)										
Total live births (f)	no.	426 087	na	259 215	130 352	89 203	na	na	11 028	1 296 037
Neonatal deaths	no.	1 401	na	874	275	205	na	na	28	3 974
Neonatal death rate	per 1000 live births	3.3	na	3.4	2.1	2.3	na	na	2.5	3.1
Perinatal deaths (g)										
Indigenous										
Total all births (c)	no.	18 000	na	19 592	10 065	3 911	na	na	7 811	66 256
Perinatal deaths	no.	173	na	276	128	38	na	na	162	820
Perinatal death rate	per 1000 total births	9.6	na	14.1	12.7	9.7	na	na	20.7	12.4
Non-Indigenous (d)										
Total all births (c)	no.	428 449	na	260 992	131 187	89 668	na	na	11 088	1 304 045
Perinatal deaths	no.	3 763	na	2 651	1 110	670	na	na	88	11 982

Table 10A.11

Table 10A.11 Perinatal, neonatal and fetal deaths, 2004–2008 (a)

	Unit	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Perinatal death rate	per 1000 total births	8.8	na	10.2	8.5	7.5	na	na	7.9	9.2

(a) Perinatal deaths (including fetal and neonatal deaths) for years 1999-2007 have been subject to a revision of scope rules. See ABS Perinatal Deaths, Australia, 2007 (cat.no. 3304.0) Explanatory Notes 18-20 for further information.

(b) Fetal death (stillbirth) is the birth of a child who did not at any time after delivery breathe or show any other evidence of life, such as a heartbeat. Fetal deaths by definition include only infants of a gestational age of at least 20 weeks or weighing at least 400 grams.

(c) Total all births is the number of live births and fetal deaths combined. Fetal deaths by definition include only infants of a gestational age of at least 20 weeks or weighing at least 400 grams

(d) Non-Indigenous includes Indigenous status not stated

(e) A neonatal death is the death within 28 days of birth of a child who after delivery, breathes or shows any evidence of life such as a heartbeat.

(f) Total live births are all live births registered in the calendar year.

(g) Perinatal deaths are fetal and neonatal deaths combined. Fetal deaths exclude those records where gestational age was less than 20 weeks or birthweight was known to be less than 400 grams.

na Not available.

Source: ABS Perinatal deaths, Australia, Cat. no. 3304.0, Canberra (unpublished); 2011 Report, table 10A.109.