

Form A3: Hospital Beds—Public

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Reporting requirements

The purpose of the hospital beds return is to obtain an average count of beds immediately available for use for admitted patients if required. This information is required for planning purposes and must also be provided to other agencies such as the Australian Institute of Health and Welfare and Australian Bureau of Statistics.

A bed is immediately available for use if it is located in a suitable place for care with nursing and auxiliary staff available within a reasonable period.

An average bed count is to be calculated over each day in the period, including weekends and public holidays, and includes both occupied and unoccupied beds.

Beds in wards that are closed or not staffed for any reason are excluded.

No adjustment should be made for contracted services (that is, a purchasing hospital should *not* add in beds purchased from a contracted hospital, *nor* should a contracted hospital delete beds contracted to a purchasing hospital).

The calculation for number of average available beds is as follows:

$$\text{Average Staffed Beds for the Period} = \frac{\text{Sum of staffed beds on each day of the period}}{\text{Number of days in the period}}$$

The number of beds on each day is defined as:

- Occupied beds at midnight
- + unoccupied but staffed beds at midnight
- + day procedure beds which were staffed and available that day.

Acute services

Include beds immediately available for acute medical and surgical admitted patient services. The beds must be located in a suitable place for care and available for same day, overnight or multi-day stays. This includes day surgery unit beds, registered short stay unit beds (SOU) and emergency medical units (EMUs). Include a complete count of dialysis, chemotherapy and dental chairs for admitted patients, including chairs located in satellite or community settings. Exclude chairs used for non-admitted patient services.

Exclude surgical tables, recovery trolleys, delivery beds, cots for normal neonates, emergency trolleys/stretchers/beds, beds designated for same-day non-admitted patient care, medical ambulatory care, medi-hotel beds, hospital in the home, rehabilitation in the home, residential nursing home, hostel and other non-acute residential beds, acute mental health and sub-acute beds.

Acute mental health beds

Include beds located in designated acute admission units dedicated to the treatment and care of admitted patients with psychiatric, mental or behavioural disorders funded by the Mental Health Program.

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Sub-acute beds

Include beds dedicated for providing sub-acute services, including rehabilitation, geriatric evaluation and management, palliative care, geriatric respite and interim care.

Return of forms

Hospitals are to submit data to the Department via the AIMS OnLine Entry System by the 15th day following the end of each month. A tick in the *Completed* field indicates to the department that the form is complete with all validation rules satisfied and appropriate approvals for release obtained.

Printouts of the original signed forms are to be retained by the hospital and made available to officers of the Department upon request.

Correction of forms

Where an error is detected for any data item previously submitted to the Department, then a correction must be submitted. A correction can be made at any time during the reporting year.