

Form A3: Acute and sub-acute
average available (staffed) beds

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Reporting requirements

Information on available (staffed) beds has previously been collected on the S1 and S4 Admitted Patient returns. These returns are being discontinued from July 2003 and a new bed return has been developed to continue the average available bed collection.

The purpose of the 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.

The reporting categories of acute services, acute mental health and sub-acute services are consistent with previous years but are now included on a single return.

The table below shows beds reported on AIMS forms last year and the 2003-04 categories to be used.

2002-03	2003-04
S1_111 Acute and sub-acute	A3-1 Acute A3-3 Sub-acute
S1_114 Dental health	A3-1 Acute
S1_115 Mental health	A3-2 Mental health
S1_118 Community care	A3-1 Acute
S4_305 Sub-acute	A3-3 Sub-acute

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).

Calculate as follows:

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

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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.

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 *within seven working days* 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.