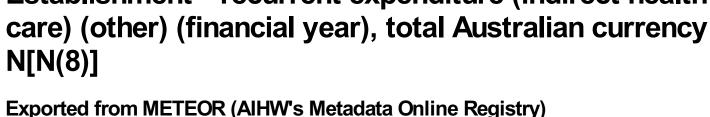
# Establishment—recurrent expenditure (indirect health



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# Establishment—recurrent expenditure (indirect health care) (other) (financial year), total Australian currency N[N(8)]

# Identifying and definitional attributes

Metadata item type: Data Element

**Short name:** Recurrent expenditure (indirect health care)—other

METEOR identifier: 270295

Registration status: Health, Standard 01/03/2005

**Definition:** Expenditure in Australian dollars on health care that cannot be directly related to

programs operated by a particular establishment and is not related to patient transport services, public health and monitoring services, central and statewide

support services or central administrations, for a financial year.

Data Element Concept: Establishment—recurrent expenditure (indirect health care)

Value Domain: <u>Total Australian currency N[N(8)]</u>

### Value domain attributes

# Representational attributes

Representation class: Total

Data type: Currency Format: N[N(8)]

Maximum character length: 9

**Unit of measure:** Australian currency (AU\$)

#### Source and reference attributes

**Submitting organisation:** Australian Institute of Health and Welfare

## **Data element attributes**

# Collection and usage attributes

**Guide for use:** To be provided at the state level.

Other:

Any other indirect health care expenditure as defined above not catered for in the following categories: Patient transport services; Public health and monitoring services; Central and statewide support services; Central administrations.

This might include such things as family planning and parental health counselling services and expenditure incurred in the registration of notifiable diseases and

other medical information.

Record values up to hundreds of millions of dollars, rounded to the nearest whole

dollar.

**Comments:** Resources Working Party members were concerned about the possibility that

double-counting of programs at the hospital and again at the state level and were

also concerned at the lack of uniformity between states. Where possible

expenditure relating to programs operated by hospitals should be at the hospital

level.

#### Source and reference attributes

Origin: National Health Data Committee

#### Relational attributes

Related metadata

references:

Is re-engineered from Indirect health care expenditure, version 1, DE, NHDD,

NHIMG, Superseded 01/03/2005.pdf (19.1 KB)

No registration status

Implementation in Data Set

**Specifications:** 

Public hospital establishments NMDS

Health, Superseded 21/03/2006

Implementation start date: 01/07/2005 Implementation end date: 30/06/2006

Public hospital establishments NMDS Health, Superseded 23/10/2006

Implementation start date: 01/07/2006 Implementation end date: 30/06/2007

Public hospital establishments NMDS 2007-08

Health, Superseded 05/02/2008

Implementation start date: 01/07/2007 Implementation end date: 30/06/2008

Public hospital establishments NMDS 2008-09

Health, Superseded 03/12/2008

Implementation start date: 01/07/2008

Implementation end date: 30/06/2009

Public hospital establishments NMDS 2009-10

<u>Health</u>, Superseded 05/01/2010 Implementation start date: 01/07/2009

Public hospital establishments NMDS 2010-11

Health, Superseded 18/01/2011

Implementation start date: 01/07/2010 Implementation end date: 30/06/2011

Public hospital establishments NMDS 2011-12

Health, Superseded 07/12/2011

Implementation start date: 01/07/2011 Implementation end date: 30/06/2012

Public hospital establishments NMDS 2012-13

Health, Superseded 07/02/2013

Implementation start date: 01/07/2012 Implementation end date: 30/06/2013

Public hospital establishments NMDS 2013-14

Health, Superseded 11/04/2014
Implementation start date: 01/07/2013
Implementation end date: 30/06/2014