National Healthcare Agreement: PI 67-Capital expenditure on health and aged care facilities as a proportion of capital consumption expenditure on health and aged care facilities, 2012 QS



© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AlHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at https://creativecommons.org/licenses/by/4.0/.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

National Healthcare Agreement: PI 67-Capital expenditure on health and aged care facilities as a proportion of capital consumption expenditure on health and aged care facilities, 2012 QS

Identifying and definitional attributes

Metadata item type: Data Quality Statement

METEOR identifier: 500050

Registration status: <u>Health</u>, Retired 14/01/2015

Data quality

Data quality statement summary:

- The Australian Institute of Health and Welfare (AIHW) health expenditure
 database is a comprehensive collection of expenditure data across all
 jurisdictions, and the private sector, and encompasses all areas of health
 expenditure from hospitals to medical services to public health activities.
- The indicator includes expenditure on publicly owned and/or controlled health and aged care facilities only. A very small amount of capital expenditure for the community aged care sector by State health authorities has been excluded, as it is so small it would be unreliable to report it.
- Expenditure by local government is included but expenditure by nongovernment providers of health and aged care services is excluded.

Institutional environment: The AIHW has calculated this indicator.

The AIHW is an independent statutory authority within the Health and Ageing portfolio, which is accountable to the Parliament of Australia through the Minister. For further information see the AIHW website.

For information on the institutional environment of the ABS, please see the ABS Institutional Environment.

Timeliness: The reference period for this data set is 2009–10.

Accessibility: The data that are used in the development of this indicator are sourced from the

AlHW's health expenditure database. The AlHW publishes a number of products that draw upon its health expenditure database. Published products available on

the AIHW website are:

• Health expenditure Australia and associated Excel tables

• Interactive health expenditure data cubes

Interpretability: Supporting information on the quality and use of data from the Institute's health

expenditure database are published annually in Health expenditure Australia.

Relevance:

The AIHW health expenditure database is a comprehensive collection of expenditure data across all jurisdictions, and the private sector, and encompasses all areas of health expenditure from hospitals to medical services to public health activities.

Capital expenditure represents additions to the gross capital stock for the health and aged care sector. Capital consumption (depreciation) represents subtractions from the gross capital stock. The ratio of the two therefore gives an indication of whether the gross capital stock is increasing or decreasing. GFS enables policy makers and users to analyse the financial operations and financial position of the public sector by the level of government, institutional sector or set of transactions.

Capital expenditure by Victoria as reported does not take account of projects completed under the Partnership Victoria policy for the design, construction, finance and maintenance of major public hospitals by private consortiums. Examples since 2004 105 have been the Royal Women's Hospital, Casey Hospital, St. Vincent's Hospital and the new Royal Children's Hospital. For the latter the underlying arrangements are recognised by the hospital through a finance lease. There is no capital expenditure by the State, however; the department's 2009 110 accounts recognise total expenditure commitments of \$5,548.6 million for these projects, and similar arrangements that apply for the Mildura and St. Vincent's hospitals.

Accuracy:

National and State/Territory estimates of capital expenditure and capital consumption for 2009–10 were derived from the Government Finance Statistics (GFS) series published by the ABS.

The system of GFS provides details of revenues, expenses, cash flows and assets and liabilities of the Australian public sector and comprises units which are owned by the Commonwealth, state and local governments. The Australian system of GFS is designed to provide statistical information on public sector entities in Australia classified in a uniform and systematic way.

The system of GFS is based on international standards set out in the *System of National Accounts 2008* (SNA2008) and the International Monetary Fund's *Government Finance Statistics Manual 2001*.

The main influence on the accuracy of the ABS Government Finance Statistics data is non-sampling error. Non-sampling error arises from inaccuracies in collecting, recording and processing the data. The most significant of these errors are misreporting of data and processing errors. Every effort is made by the ABS to minimise error by working closely with data providers, training processing staff and having efficient data processing procedures.

For practical reasons the ABS does not attempt to cover all economic activity of the public sector. Under-coverage can arise because units are omitted or because some activities are not covered. This only occurs when the economic activity of these units is relatively insignificant.

Revisions are made as required as a result of new and updated information available from providers.

Coherence:

The data here are consistent with what are published in *Health expenditure Australia*.

Relational attributes

Related metadata references:

Supersedes National Healthcare Agreement: PI 67-Capital expenditure on health and aged care facilities as a proportion of capital consumption expenditure on health and aged care facilities, 2011 QS

Health, Superseded 04/12/2012

Indicators linked to this Data Quality statement:

National Healthcare Agreement: PI 67-Capital expenditure on health and aged care facilities as a proportion of capital consumption expenditure on health and aged care facilities, 2012

Health, Retired 25/06/2013