

## Hospital Code & Classification

In NSW, public hospitals are grouped into broadly similar groups which are called peer groups. Peer grouping is based on the number of patients discharged each year (size), the primary role of the hospital (such as principal referral) and geographical location (i.e. rural or metropolitan area). This information is used for a range of purposes including benchmarking.

Below is a list of SWSLHD facilities and their peer group classification.

<b>Hospital</b>	<b>Code</b>	<b>Classification</b>
Bankstown-Lidcombe Hospital	D227	A1 – Principal referral
Bowral and District Hospital	N219	C1 – District Group 1
Camden Hospital	D205	D1b – Community hospitals without surgery
Campbelltown Hospital	D215	B1 – Major hospital group
Fairfield Hospital	D206	B1 – Major hospital group
Liverpool Hospital	D209	A1 – Principal referral
<b>Affiliated Health Service</b>		
Braeside Hospital	D228	F4 – Sub Acute
Karitane	C203	F7 – Mothercraft
Services for the Treatment & Rehabilitation of Trauma Survivors (STARTTS)	D155	NB Does not treat inpatients
South West Sydney Scarba Service	D155	NB Does not treat inpatients

Source: NSW Hospital Peer Group List – 2014, NSW Ministry of Health (Accessed March 2015)

The following table shows the NSW hospital peer groups and the criteria used for assigning hospitals to them

<b>Peer Group</b>	<b>Criteria Group Grouping</b>
A1 – Principal referral	Greater than 35,000 acute weighted separations AND offering highly specialised services (such as bone marrow and other specialised transplants, severe burn injury, major trauma)
A2 – Paediatric specialist	Specialist paediatric hospitals providing tertiary referral
A3 – Ungrouped acute – tertiary referral	Specialist acute hospitals not suitable for assignment
B1 – Major hospital group 1	35,000 or less but greater than 17,000 acute weighted separations AND availability of one or more specialist services requiring specific infrastructure (such as cardiac catheterisation, comprehensive cancer centre, in-centre dialysis and medical radiation imaging) OR average acute NWAU per separation of 1.25 or greater
B2 – Major hospital group 2	35,000 or less but greater than 10,000 acute weighted separations AND no specialist services requiring specific infrastructure OR average acute NWAU per separation less than 1.25
C1 – District group 1	10,000 or less but greater than 4,000 acute weighted separations
C2 – District group 2	4,000 or less acute weighted separations but greater than 2,000 acute separations
B1 – Major hospital group 1	35,000 or less but greater than 17,000 acute weighted separations AND availability of one or more specialist services requiring specific infrastructure (such as cardiac catheterisation, comprehensive cancer centre, in-centre dialysis and medical radiation imaging) OR average acute NWAU per separation of 1.25 or greater
B2 – Major hospital group 2	35,000 or less but greater than 10,000 acute weighted separations AND no specialist services requiring specific infrastructure OR average acute NWAU per separation less than 1.25

C1 - District group 1	1 10,000 or less but greater than 4,000 acute weighted separations
C2 – District group 2	4,000 or less acute weighted separations but greater than 2,000 acute separations
D1a – Community without surgery	2,000 or less acute separations but greater than 200 total separations AND more than 2 per cent surgery(based on DRG status)
D1b – Community without surgery	2,000 or less acute separations but greater than 200 total separations AND more than 2 per cent surgery(based on DRG status)
E – Ungrouped acute - other	Specialist acute hospital not suitable for any other role based group and not providing tertiary referral services
F1 - Psychiatric	Designated psychiatric facility
F2 – Nursing Home	Nursing home