Antimicrobial utilisation rates provided in this report are calculated using the number of defined daily doses (DDDs) of the antimicrobial class consumed each month per 1,000 occupied bed days. Contributing hospitals can find their de-identifying code via the NAUSP Portal ‘Maintain My Hospital’ drop-down menu.

Peer groups are assigned according to AIHW definitions for public hospitals (1). Private hospitals are assigned by NAUSP to an AIHW peer group appropriate to their size and acuity.

A change to the DDD for a number of high volume antimicrobials occurred in January 2019. This has been applied to all retrospective data. For more information refer to WHO WTC/DDD alterations 2019.

The chart below presents aggregated contributor data over the six-month period from 1 January 2019 to 30 June 2019.

Chart 1: Total hospital antibacterial usage rates (DDD/1000 OBD) in NAUSP Public Acute Group C contributor hospitals, Jan–Jun 2019

This report includes data from 36 Public Acute Group C hospitals including 7 private hospitals assigned by NAUSP to this peer group.

This report includes data from the following hospitals:

- Atherton Hospital
- Bentley Health Service
- Broome Hospital
- Busselton Health
- Cessnock District Hospital
- Derby Hospital
- Esperance Hospital
- Forbes District Hospital
- Gawler Health Service
- Gove District Hospital
- Hedland Health Campus
- Hobart Private Hospital
- Kareena Private Hospital
- Katherine District Hospital
- Kingaroy Hospital
- Kununurra Hospital
- Maclean District Hospital
- Mareeba Hospital
- Mater Bundaberg
- Mater Gladstone
- Milton-Ulladulla Hospital
- Mudgee District Hospital
- Muswellbrook Hospital
- Narrogin Hospital
- Northam Hospital
- Osborne Park Hospital
- Palmerston Regional Hospital
- Parkes Hospital
- Port Lincoln Hospital
- Scott Memorial Hospital
- Singleton District Hospital
- St John Of God Bunbury
- St John Of God Mt Lawley
- St Vincent's Private Hospital Brisbane
- Warwick Hospital
- Young Health Service

Disclaimer:
Data presented in this report were correct at the time of publication. As additional hospitals join NAUSP, retrospective data are included. Also data may change when quality assurance processes identify the need for data updates.


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