

4 Specialised mental health care labour force and establishments

This chapter presents an overview of available data on the characteristics of medical practitioners and establishments delivering specialised mental health care in Australia. It also describes the characteristics of the psychiatric labour force and PBS expenditure on mental health-related medications. The data presented on mental health care establishments include the number of establishments, available beds, full-time-equivalent (FTE) staff, and salary and non-salary expenditure. The establishments described include public community mental health establishments, public and private psychiatric hospitals, and psychiatric units or wards in public acute care hospitals.

Psychiatrists

This section presents information on the size and characteristics of the psychiatrist labour force, the services provided by psychiatrists in private practice and the Medicare expenditure for those private practice services, using data from the National Medical Labour Force Survey and the Medicare data collection.

State and Territory health authority expenditure on psychiatrists is mainly composed of salaries for staff psychiatrists and fees for consultant psychiatrists providing services in public hospitals and public community mental health services. The State and Territory expenditure on psychiatrists is included in the data presented in the *Medical officers salary and wages* data and *Payments to visiting medical officers* data presented in the community mental health establishments and the public psychiatric and public acute hospital sections below. However, expenditure for psychiatrists can not be isolated from the expenditure on other types of medical practitioners.

Labour force survey data

The information presented in this section is based on data presented in the National Medical Labour Force Survey conducted in 1998. For additional information on this survey, refer to Chapter 1 or *Medical Labour Force 1998* (AIHW 2000b).

National medical labour force survey data on the number of specialists practising as psychiatrists and psychiatry trainees are presented in Tables 4.1 and 4.2. For the purposes of the survey, a psychiatrist was defined as a medical practitioner who had been accepted by the Royal Australian and New Zealand College of Psychiatrists (RANZCP) as a member of the college. Psychiatrists-in-training were defined as medical practitioners who had been accepted by the RANZCP into a training position supervised by a member of the college.

Using the data collected between October and December 1998, it was estimated that there were 1,993 specialists practising psychiatry in Australia (10.5 psychiatrists per 100,000 population). The estimated number of psychiatrists-in-training in Australia was 523 (2.7 psychiatrists-in-training per 100,000 population).

The States or Territories with the largest number of psychiatrists per 100,000 population were Victoria (13.3) and South Australia (13.3). The Northern Territory had the lowest number of

psychiatrists, with 5.2 per 100,000 population. A similar pattern was also apparent in the distribution of psychiatrists-in-training. For the majority of psychiatrists (86%), their main place of work was in a capital city (Table 4.2).

Private psychiatrist services

This section presents data on the estimated number of full-time-equivalent private psychiatrists and expenditure on private psychiatrist services from the DHA Medicare data collection. Background information on the Medicare data collection is presented in Chapter 1.

Based on the number of Medicare-funded items, the estimated number of full-time-equivalent private psychiatrists for 1999–00 was 1,034 (Table 4.3). The majority of these were located in metropolitan regions (967 or 93.5%). Victoria (7.4) and South Australia (7.1) were the jurisdictions with the largest number of full-time-equivalent private psychiatrists per 100,000 population.

In 1999–00, a total of \$193.4 million of Medicare funds were used to reimburse attendances with private psychiatrists (Table 4.4). The benefits paid to private psychiatrists represented 2.8% of total Medicare expenditure (\$6,944.9 million) and 19.9% of expenditure on specialist attendances (\$969.2 million) for 1999–00. This represented \$10,212 of Medicare expenditure per 1,000 population. The per capita benefits paid to private psychiatrists in Victoria and South Australia was above the national average, consistent with data presented above on the distribution of all psychiatrists (Table 4.3) and the number of private psychiatry services provided in each jurisdiction (Table 2.14). Almost 92% of the total expenditure was for patient attendances in the psychiatrist consulting rooms. The total Medicare expenditure for private psychiatrists for 1999–00 represented a 54.5% increase on the \$125.2 million (current prices) expended in 1989–90 (Table 4.5), although expenditure has been flat since the mid-1990s. Timing of this plateau corresponds with initiatives taken by State and Territory health authorities to balance the distribution of psychiatrists across private and public sectors (DHAC 2000).

Expenditure on mental health-related medications

The purchase costs of many medications prescribed by private psychiatrists and general practitioners are fully or partially reimbursed through the PBS. This section presents PBS expenditure data for prescriptions from general practitioners and private psychiatrists for mental health-related medications. PBS medication data are classified using the ATC classification. Mental health-related medications for the purpose of this report were defined using the ATC codes for antipsychotic (ATC code N05A), anxiolytic (N05B), hypnotic and sedative (N05C) and antidepressant (N06A) medications. Refer to Appendix 2 for more information on the ATC codes used to define mental health-related medications.

PBS expenditure data for prescriptions from general practitioners and private psychiatrists for mental health-related medications are presented in Table 4.6. There was more PBS expenditure on mental health-related medications prescribed by general practitioners (\$234.2 million) than on those prescribed by private psychiatrists (\$69.5 million). Almost 68% of PBS funds paid to general practitioners for mental health-related prescriptions were for antidepressant medication. For private psychiatrists, antipsychotic medications

accounted for the majority of PBS funds paid (53.5%), with antidepressants a close second (44.6%).

The Northern Territory had the lowest rate of PBS expenditure for mental health-related medication prescribed by these medical practitioners, at \$4,719 per 1,000 population. Victoria (\$17,364 per 1,000 population) and South Australia (\$19,124 per 1,000 population) had the highest rates of PBS expenditure for these medications, possibly reflecting their greater per capita number of private psychiatrists (Table 4.3).

Public community mental health establishments

This section describes community mental health establishments in terms of the number of establishments, availability of beds, staff employed and expenditure. The data in this section relate only to public community mental health care establishments, as data on non-government community mental health establishments are not available. The AIHW NCMHED collates available bed, separation, staff and expenditure data for each public community mental health care establishment in Australia, from routine administrative collections. More detail on the NCMHED can be found in Chapter 1.

Information from the NCMHED on the number of establishments by State and Territory is presented in Table 4.7. A list of the establishments that report to NCMHED is presented in Appendix 7. In 1999–00, there were 232 community mental health care establishments identified in Australia. Of these establishments, 44 provided some form of residential care. Queensland and Northern Territory public community mental health establishments did not provide residential care. It needs to be noted that the definitions of the establishments varied between jurisdictions. In some jurisdictions, such as Tasmania and Queensland, the establishments were equivalent to individual service units, which can include hospital-based mental health outpatient and outreach services. In other jurisdictions, such as New South Wales, Victoria and Western Australia, entire health regions or areas were defined as establishments. For this reason, the number of establishments is not necessarily a measure of the number of physical buildings or campuses from which community mental health care was provided.

There were 1,171 available beds reported to the NCMHED for 1999–00. This was a 10.0% decline from the 1,301 reported for 1998–99. The decline was largely attributable to a drop in available beds in New South Wales and Western Australia.

Data on the number of FTE staff employed in community mental health establishments by State and Territory are presented in Table 4.8. The FTE staff data presented are the average available staff for the year. Note that data collection by staff category is not consistent across all States and Territories, with some jurisdictions providing best estimates. An average of 8,548 FTE staff were employed in Australian community mental health establishments for 1999–00. This was a slight decrease from the 8,679 FTE staff reported in 1998–99.

FTE staffing data by staff category were able to be supplied to the NCMHED by New South Wales, Queensland, South Australia, the Australian Capital Territory and the Northern Territory. For these five jurisdictions, the majority of the FTE staff were *Nurses* (38% or 1,695 FTE staff) and *Diagnostic & allied health professionals* (32.9% or 1,465 FTE staff). The community mental health care workforce of these five jurisdictions also included numbers of *Administrative & clerical staff* (16% or 713 FTE staff) and *Salaried medical officers* (8.8% or 392 FTE staff).

The recurrent expenditure on community mental health establishments in 1999–00 was \$631.4 million (Tables 4.9 and 4.10). The salary category made up 71.8% (\$453.5 million) of total expenditure. Salary payments include salaries and wages, payments to staff on paid leave, workers compensation and salaries paid to contract staff for supply of labour. Non-salary expenditure includes expenses for medical supplies (excluding equipment purchases), administrative expenses and drug supplies expenses.

New South Wales, Queensland, Tasmania, the Australia Capital Territory and the Northern Territory were able to supply their salary and wage data by staffing category. The proportion of salary and wage expenditure paid by the five jurisdictions to *Total nurses* and *Salaried medical officers* was 36.9% (\$78.6 million) and 15.4% (\$32.8 million) respectively. *Diagnostic and allied health professionals* wage and salary payments accounted for 29.5% (\$62.7 million) of the salary expenditure.

Psychiatric and acute care hospitals

Public and private sector psychiatric and acute care hospitals provide admitted patient and non-admitted patient mental health care. In order to present data on the different hospital types, this chapter has drawn on data from the NPHEd and the ABS's PHEC. More details on each collection are presented in Chapter 1.

Public psychiatric hospitals

This section describes public psychiatric hospitals in terms of number of hospitals, availability of beds, staff employed, expenditure and revenue. The public psychiatric hospital data were obtained from the NPHEd, which holds a record for each public hospital in Australia and is collated from routine administrative collections. The information presented below relates only to those establishments classified under the NHDD definition as public psychiatric hospitals.

In 1999–00, there were 22 public psychiatric hospitals in Australia. The number of separate establishments reported was similar to that reported in the previous two years (Table 4.11). The increase of one public psychiatric hospital over 1998–99 was due to the inclusion of a small establishment in New South Wales, that was previously classified as part of a large public acute care hospital. When comparing between jurisdictions, it needs to be noted that the hospital reported by Victoria is a specialist forensic service, whereas the hospitals reported by other jurisdictions include a broader range of services. A list of the public psychiatric hospitals that were reported to NPHEd is presented in Appendix 7.

A more reliable indicator of shifts in public psychiatric hospital service delivery is the number of available beds. The number of available beds for the 1999–00 year was 2,759 compared with 2,943 available beds for the 1998–99 year. This represents a 6.3% decline. This suggests that the decline in public psychiatric hospital bed numbers as a result of the integration of mental health care into acute hospital and community settings is continuing. The majority of public psychiatric hospital beds were located in capital cities and other metropolitan areas (79%). There were no public psychiatric hospital beds in remote areas (Table 4.12).

Data on the number of staff employed in public psychiatric hospitals by State and Territory are presented in Table 4.13. The data on FTE staff refer to the average available staff for the year. Note that data collection by staff category was not consistent across all States and

Territories, with some jurisdictions providing best estimates. An average of 6,274 FTE staff were employed in Australian public psychiatric hospitals in 1999–00 compared with 6,395 FTE staff reported for 1998–99 (1.9% decrease).

The majority of the FTE staff were *Nursing staff* (54% or 3,369 FTE staff), followed by *Domestic & other staff* with 21% (1,302 FTE staff). *Salaried medical officers* and *Diagnostic & allied health professionals* made up 5% (314 FTE staff) and 9% (559 FTE staff) of the public psychiatric hospital workforce respectively.

Tables 4.14 and 4.15 present information on the gross recurrent expenditure on public psychiatric hospitals, including salary and non-salary categories. Salary payments include salaries and wages, payments to staff on paid leave, workers compensation and amounts paid to contract staff for supply of labour. Non-salary expenditure includes payments for medical/surgical supplies (excluding equipment purchases), administrative expenses and drug supplies.

Box 4.1 Expenditure and staffing data for public psychiatric hospital-based services provided to non-admitted patients

It needs to be noted that the expenditure and staffing data for public psychiatric hospital-based services provided to non-admitted patients and some community-based services (e.g. psychiatric outpatient services and community outreach services) are included in both the public hospital data and the public community mental health establishments data. Public hospitals report to NPHED expenditure and staffing data for specialised mental health community, outpatient and outreach services under their management. Many of these mental health community, outpatient and outreach services also report these data separately to NCMHED. For this reason, the expenditure and staffing totals for public psychiatric hospitals and public community mental health services should not be added together.

Appendix 7 lists the public psychiatric hospitals contributing to NPHED and the community mental health establishments contributing to NCMHED. Dual listing of some establishments provides some evidence of overlap (e.g. Wolston Park Hospital in Queensland).

The recurrent expenditure on public psychiatric hospitals in 1999–00 was \$434.9 million. The equivalent figure for the 1998–99 collection period was \$437.3 million, so there was a increase of 0.5% between 1998–99 and 1999–00.

The total recurrent expenditure reported to NPHED is higher than that reported to the NSMHS for 1997–98 (DHAC 2000). This difference reflects the different hospital classifications used by jurisdictions to report public hospital data to NPHED and NSMHS and the classification of some non-admitted patient services managed by public psychiatric hospitals as community-based services in the NSMHS. For additional detail on this point see Appendix 6.

The salary category made up 69.9% (\$303.8 million) of the recurrent expenditure of public psychiatric hospitals. In jurisdictions other than Victoria (for which detailed data were not available), salary and wage payments to *Nursing staff* made up 55% (\$165.9 million) of the expenditure on salary and wages. Salary and wages payments for *Domestic & other staff* and *Salaried medical officers* made up 15% (\$44.9 million) and 9% (\$28.1 million) respectively.

Data on public psychiatric hospital revenue, excluding general revenue payments received from State or Territory governments, are presented in Table 4.16. The revenue received by Australian public psychiatric hospitals (other than in Tasmania) was \$19.8 million for 1999–00 compared with \$22.1 million for 1998–99. This amount is equivalent to 5% of the total recurrent expenditure. A relatively large proportion of the total revenue for public psychiatric hospitals was collected as patient revenue (78.2% or \$15.5 million). In

comparison, the proportion of total revenue that was collected as patient revenue for all public hospitals was 62% (AIHW 2001a). The recoveries, which include income from the use of hospital facilities by salaried medical officers or private practitioners, was 7.6% (\$1.5 million) of the collected revenue.

Public acute hospitals

In 1999–00 there were 107 public acute hospitals with specialised psychiatric units or wards in Australia (Table 4.17). New South Wales (32 hospitals) and Victoria (33 hospitals) had the largest number of public acute hospitals with specialised psychiatric units or wards. The Australian Capital Territory and the Northern Territory each had two public acute care hospitals with specialised psychiatric units or wards. The majority of public acute hospitals with specialised psychiatric units or wards were located in capital cities and other metropolitan areas (70%).

Private psychiatric hospitals

In 1999–00, private hospitals provided 38.3% of the separations with specialised psychiatric care and 15.7% of the total psychiatric care days (Table 3.13a). Private hospitals are designated by the ABS as psychiatric where they are licensed or approved as such by the relevant State or Territory health authority and cater primarily for admitted patients with psychiatric or behavioural disorders. There were 24 private hospitals designated as psychiatric in operation during 1999–00 (Table 4.15), compared with 26 in 1998–99 and 23 in 1997–98 (Table 4.11).

Whilst the number of private hospitals designated as psychiatric declined by one in Victoria and one in Queensland, there was a decline in the number of available beds, number of FTE staff and expenditure for private psychiatric hospitals for all the jurisdiction groupings used for these data. The average number of available private psychiatric hospital beds for 1999–00 was 1,369 (Table 4.18). This was a 6.9% decrease on the 1998–99 figure of 1,471 available beds but similar to the 1,344 beds reported for 1997–98.

In 1999–00, the average number of FTE staff employed by private sector psychiatric hospitals was 1,572 (Table 4.19). This was a 5.3% decrease on the 1998–99 figure of 1,660.

In 1999–00, the recurrent expenditure for private psychiatric hospitals in Australia was \$122.5 million, a slight decline from \$123.6 million in 1998–99 (Tables 4.20 and 4.21). Private psychiatric hospital expenditure was 22.4% of the total psychiatric hospital expenditure in Australia. The total revenue for private psychiatric hospitals for 1999–00 exceeded total expenditure at \$144.0 million (Table 4.22).

Table 4.1: Psychiatrists and psychiatrists-in-training, psychiatrists and psychiatrists-in-training per 100,000 population, States and Territories, 1998

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Psychiatrists ^(a)									
Male	475	478	223	110	133	29	22	9	1,477
Female	153	153	91	36	65	9	6	2	516
<i>Total</i>	<i>628</i>	<i>631</i>	<i>314</i>	<i>146</i>	<i>199</i>	<i>39</i>	<i>28</i>	<i>10</i>	<i>1,993</i>
Per 100,000 population ^(c)	9.8	13.3	8.9	7.8	13.3	8.3	9.0	5.2	10.5
Psychiatrists-in-training ^(b)									
Male	103	73	43	26	29	5	3	3	285
Female	95	43	41	32	17	3	6	0	238
<i>Total</i>	<i>198</i>	<i>115</i>	<i>84</i>	<i>58</i>	<i>46</i>	<i>8</i>	<i>9</i>	<i>3</i>	<i>523</i>
Per 100,000 population ^(c)	3.1	2.4	2.4	3.1	3.1	1.7	2.9	1.5	2.7
Total psychiatrists and psychiatrists in training									
Male	578	551	266	136	162	34	25	12	1,762
Female	248	196	132	68	82	12	12	2	754
Total	826	746	398	204	245	47	37	13	2,517
Per 100,000 population ^(c)	12.8	15.7	11.3	10.9	16.4	10.0	11.9	6.7	13.2

(a) A medical practitioner who has been accepted by the Royal Australian and New Zealand College of Psychiatrists (RANZCP) as a member of the college. Includes medical practitioners practising psychiatry as second or third speciality.

(b) A medical practitioner who has been accepted by the RANZCP into a training position supervised by a member of the college.

(c) Rates are crude rates based on 31 December 1998 estimated resident population.

Source: AIHW 2000b.

Table 4.2: Psychiatrists and psychiatrists per 100,000 population by metropolitan, rural and remote region of location of main place of work, 1998

	Capital cities	Other metropolitan centres	Large rural centres	Small rural centres	Other rural centres	Remote centres	Other remote areas	Total
Psychiatrists ^{(a), (b)}	1,708	104	100	45	18	10	0	1,985
Psychiatrists per 100,000 ^(c)	14.1	7.2	8.9	3.7	0.7	1.8	0	10.5

(a) A medical practitioner who has been accepted by the Royal Australian & New Zealand College of Psychiatrists as a member of the college. Excludes medical practitioners practising psychiatry as second or third speciality.

(b) Data on psychiatrists-in-training by metropolitan, rural and remote areas are not available.

(c) Rates are crude rates based on 31 December 1998 estimated resident population.

Source: AIHW 2000b.

Table 4.3: Medicare-funded full-time-equivalent private psychiatrists and private psychiatrists per 100,000 population, by metropolitan, rural and remote region, States and Territories, 1999-00

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Number									
Metropolitan	310.0	334.2	137.9	n.p	n.p	13.6	n.p	n.p	966.8
Rural and remote	23.1	12.5	22.0	n.p	n.p	4.9	n.p	n.p	66.9
Total all regions	333.0	346.7	160.0	55.7	106.6	18.5	n.p	n.p	1,033.7
Per 100,000 population^(a)									
Metropolitan	6.4	9.4	6.7	n.p	n.p	7.0	n.p.	n.p.	7.1
Rural and remote	1.5	1.1	1.5	n.p	n.p	1.8	n.p.	n.p.	1.2
Total all regions	5.2	7.4	4.6	3.0	7.1	3.9	n.p.	n.p.	5.5

(a) Rates are crude rates based on the Estimated Resident Population of 30 June 1999.

n.p. Not published.

Source: DHA.

Table 4.4: Medicare expenditure (\$'000) on services provided by private psychiatrists by schedule item, States and Territories, 1999-00

Code	Description	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Patient attendances										
Consulting rooms										
300, 310	15 minutes or less	983.6	318.0	229.4	88.6	78.9	18.1	n.p.	n.p.	1,791.1
302, 312	16 to 30 minutes	5,838.0	4,824.9	3,886.6	1,070.5	1,407.6	443.8	n.p.	n.p.	17,771.0
304, 314	31 to 45 minutes	11,115.6	12,517.5	7,958.4	2,280.1	3,739.2	1,254.3	n.p.	n.p.	39,337.7
306, 316	46 to 75 minutes	34,635.4	35,498.0	13,732.1	4,784.1	10,745.0	1,215.3	n.p.	n.p.	101,677.1
308, 318	Over 75 minutes	1,950.7	1,472.2	1,123.7	437.5	725.2	266.8	n.p.	n.p.	6,124.0
319	Selected cases (> 45 mins)	4,145.2	4,098.1	1,233.2	151.8	1,192.6	99.3	n.p.	n.p.	10,971.0
	<i>Total</i>	<i>58,668.5</i>	<i>58,728.7</i>	<i>28,163.5</i>	<i>8,812.6</i>	<i>17,888.5</i>	<i>3,297.6</i>	<i>n.p.</i>	<i>n.p.</i>	<i>177,671.9</i>
Hospital										
320	15 minutes or less	68.6	196.5	84.8	52.9	47.0	14.6	n.p.	n.p.	468.8
322	16 to 30 minutes	628.5	880.4	1,238.4	386.6	453.4	75.7	n.p.	n.p.	3,697.0
324	31 to 45 minutes	901.3	900.5	712.8	325.5	314.2	121.5	n.p.	n.p.	3,318.7
326	46 to 75 minutes	1,077.1	1,027.2	484.2	274.6	284.1	132.8	n.p.	n.p.	3,320.4
328	Over 75 minutes	250.2	117.6	108.3	49.4	46.6	19.1	n.p.	n.p.	599.4
	<i>Total</i>	<i>2,925.7</i>	<i>3,122.2</i>	<i>2,628.6</i>	<i>1,089.1</i>	<i>1,145.3</i>	<i>363.7</i>	<i>n.p.</i>	<i>n.p.</i>	<i>11,404.3</i>
Other location										
330	15 minutes or less	23.2	2.7	0.5	n.p.	0.2	n.p.	n.p.	n.p.	31.6
332	16 to 30 minutes	45.7	36.2	7.1	23.4	5.7	1.9	n.p.	n.p.	121.1
334	31 to 45 minutes	68.0	168.2	8.2	2.9	20.7	3.5	n.p.	n.p.	273.3
336	46 to 75 minutes	141.4	182.6	12.7	10.6	47.7	9.4	n.p.	n.p.	405.4
338	Over 75 minutes	222.7	30.2	4.1	n.p.	7.3	n.p.	n.p.	n.p.	267.5
	<i>Total</i>	<i>501.0</i>	<i>419.9</i>	<i>32.6</i>	<i>42.5</i>	<i>81.6</i>	<i>15.9</i>	<i>n.p.</i>	<i>n.p.</i>	<i>1,098.9</i>
Other services										
342, 344, 346	Group psychotherapy	673.9	1,542.4	183.6	67.0	137.7	23.1	n.p.	n.p.	2,631.7
348, 350, 352	Interview with non-patient	87.4	47.4	39.5	27.2	18.3	9.9	n.p.	n.p.	232.4
14224	Electroconvulsive therapy ^(a)	104.8	148.5	140.0	30.1	43.2	21.2	n.p.	n.p.	492.4
	<i>Total</i>	<i>866.2</i>	<i>1,738.3</i>	<i>363.2</i>	<i>124.3</i>	<i>199.2</i>	<i>54.1</i>	<i>n.p.</i>	<i>n.p.</i>	<i>3,356.4</i>
Total expenditure (\$'000)		62,961.4	64,009.2	31,187.9	10,068.5	19,314.5	3,731.2	n.p.	n.p.	193,531.5
Per 1,000 population		9,842.8	13,597.0	8,893.3	5,420.2	12,941.9	7,925.3	n.p.	n.p.	10,221.4

(a) The data for electroconvulsive therapy item may include data for medical practitioners other than psychiatrists.

n.p. Not published.

Source: DHA.

Table 4.5: Medicare expenditure (\$'000) on services provided by private psychiatrists by schedule item (current prices), 1989–90 to 1999–00^(a)

	1989–90	1990–91	1991–92	1992–93	1993–94	1994–95	1995–96	1996–97	1997–98	1998–99	1999–00
Total expenditure (\$'000)^(b)	125,166.1	138,927.3	152,905.3	169,530.3	183,411.9	189,810.3	197,546.2	193,009.8	190,529.8	191,871.7	193,381.3
Per 1,000 population	7,444.0	8,141.0	8,847.0	9,690.4	10,381.6	10,632.5	10,933.0	10,542.6	10,287.2	10,245.6	10,213.4

(a) The year in which the Medicare claim was processed. This not necessarily the year in which the service was provided.

(b) Does not include non-psychiatrist services for electroconvulsive therapy.

Source: DHA.

Table 4.6: Pharmaceutical Benefits Scheme expenditure (\$'000) on pharmaceuticals prescribed by general practitioners and private psychiatrists by mental health-related pharmaceutical group, States and Territories,^(a) 1999–00

ATC code	Description	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(b)
General practitioners										
N05A	Antipsychotics	17,157	15,052	9,021	3,420	5,257	981	612	169	52,042
N05B	Anxiolytics	3,835	3,517	2,483	909	1,171	497	111	31	12,563
N05C	Hypnotics & sedatives	3,764	3,044	1,972	1,138	1,061	345	103	27	11,462
N06A	Antidepressants	47,190	39,497	32,352	16,694	14,099	4,838	2,758	561	158,166
	<i>Total (\$'000)</i>	<i>71,945</i>	<i>61,110</i>	<i>45,828</i>	<i>22,160</i>	<i>21,587</i>	<i>6,661</i>	<i>3,584</i>	<i>787</i>	<i>234,234</i>
	Per 1,000 population (\$)	11,247	12,981	13,068	11,930	14,465	14,148	11,588	4,083	12,371
Private psychiatrists										
N05A	Antipsychotics	12,706	10,757	6,400	1,897	3,583	465	826	70	37,162
N05B	Anxiolytics	259	446	197	39	107	37	8	1	1,098
N05C	Hypnotics & sedatives	64	94	50	15	30	11	2	0	269
N06A	Antidepressants	8,639	9,333	5,675	2,679	3,233	742	457	51	30,961
	<i>Total (\$'000)</i>	<i>21,667</i>	<i>20,630</i>	<i>12,323</i>	<i>4,630</i>	<i>6,953</i>	<i>1,255</i>	<i>1,294</i>	<i>122</i>	<i>69,491</i>
	Per 1,000 population (\$)	3,387	4,382	3,514	2,492	4,659	2,665	4,184	636	3,670
General practitioners and private psychiatrists										
	Total (\$'000)	25,760	23,960	14,830	5,840	8,167	1,657	1,463	163	82,470
	Per 1,000 population (\$)	14,635	17,364	16,582	14,422	19,124	16,813	15,772	4,719	16,041

(a) State/Territory is determined according to the address of the pharmacy supplying the item.

(b) Includes State or Territory unknown.

Source: DHA.

Table 4.7: Public community mental health establishments, establishments with residential care services, available beds and available beds per 100,000 population, States and Territories, 1999–00

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Establishments ^(a)	19	38	90	23	31	23	2	6	232
Establishments with residential care services	7	30	0	2	1	3	1	0	44
Available beds ^(b)	127	900	0	26	20	68	30	0	1,171
Available beds per 100,000 population ^(c)	2.0	19.1	0.0	1.4	1.3	14.4	9.7	0.0	6.2

(a) For details on the services reporting to NCMHED, refer to Appendix 7.

(b) Average available beds where possible; otherwise available beds at 30 June 2000.

(c) Rates are crude rates based on 31 December 1999 estimated resident population.

Source: NCMHED.

Table 4.8: Full-time-equivalent staff,^(a) public community mental health establishments,^(b) States and Territories, 1999-00

Staff category	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Salaried medical officers	187	n.a.	122	n.a.	66	n.a.	7	10	392
Nurses									
Registered nurses	n.a.	n.a.	371	n.a.	n.a.	n.a.	59	30	460
Enrolled nurses	n.a.	n.a.	9	n.a.	n.a.	n.a.	6	0	14
<i>Total nurses</i>	<i>982</i>	<i>n.a.</i>	<i>380</i>	<i>n.a.</i>	<i>238</i>	<i>n.a.</i>	<i>65</i>	<i>30</i>	<i>1,695</i>
Other personal care staff	n.a.	n.a.	16	n.a.	6	n.a.	8	0	29
Diagnostic & allied health professionals	682	n.a.	456	n.a.	238	n.a.	65	23	1465
Administrative & clerical staff	402	n.a.	163	n.a.	96	n.a.	28	23	713
Domestic & other staff	222	n.a.	25	n.a.	4	n.a.	0	1	251
Total staff	2,476	2,873	1,160	929	648	202	174	87	8,548

(a) Where average full-time-equivalent staff numbers were not available, staff numbers at 30 June 2000 were used.

(b) For details on the services reporting to NCMHED, refer to Appendix 7.

n.a. Not available.

Source: NCMHED.

Table 4.9: Salaries and wages expenditure (\$'000), public community mental health establishments,^(a) States and Territories, 1999-00

Recurrent expenditure category	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Salaried medical officers	16,984	n.a.	12,347	n.a.	n.a.	1,665	760	1,056	32,811
Nurses									
Registered nurses	n.a.	n.a.	18,359	n.a.	n.a.	744	3163	1,633	23,899
Enrolled nurses	n.a.	n.a.	318	n.a.	n.a.	0	207	0	525
<i>Total nurses</i>	<i>50,602</i>	<i>n.a.</i>	<i>18,677</i>	<i>n.a.</i>	<i>n.a.</i>	<i>4,306</i>	<i>3,370</i>	<i>1,633</i>	<i>78,590</i>
Other personal care staff	n.a.	n.a.	626	n.a.	n.a.	0	299	0	926
Diagnostic & allied health professionals	32,708	n.a.	22,496	n.a.	n.a.	2,757	3,312	1,451	62,724
Administrative & clerical staff	19,153	n.a.	5,718	n.a.	n.a.	1,023	650	1,011	27,556
Domestic & other staff	8,357	n.a.	950	n.a.	n.a.	986	0	39	10,333
Total salaries and wages	127,804	162,406	60,816	46,014	32,132	10,738	8,391	5,191	453,492

(a) For details on the services reporting to NCMHED, refer to Appendix 7.

n.a. Not available.

Source: NCMHED.

Table 4.10: Non-salary and total recurrent expenditure (\$'000), public community mental health establishments,^(a) States and Territories, 1999-00

Recurrent expenditure category	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Payments to visiting medical officers	4,648	n.a.	4,338	n.a.	n.a.	390	636	0	10,013
Superannuation	9,283	n.a.	5,545	n.a.	n.a.	1,020	1,090	0	16,938
Drug supplies	2,789	n.a.	1,722	n.a.	n.a.	302	22	68	4,903
Medical & surgical supplies	946	n.a.	145	n.a.	n.a.	32	4	2	1,129
Food supplies	1,174	n.a.	95	n.a.	n.a.	184	114	8	1,575
Domestic services	1,821	n.a.	1,160	n.a.	n.a.	134	106	105	3,325
Repairs & maintenance	3,800	n.a.	627	n.a.	n.a.	94	52	41	4,614
Patient transport	467	n.a.	337	n.a.	n.a.	0	13	1	818
Administrative expenses	22,271	n.a.	9,691	n.a.	n.a.	1,052	406	1,083	34,503
Interest payments	28	n.a.	114	n.a.	n.a.	0	0	0	142
Depreciation	5,567	n.a.	820	n.a.	n.a.	0	5	0	6,392
Other recurrent expenditure	7,076	n.a.	1226	n.a.	n.a.	0	4,148	1,106	13,556
Total non-salary expenditure	59,870	54,813	25,821	18,900	6,244	3,208	6,595	2,414	177,865
Total recurrent expenditure	187,674	217,219	86,638	64,914	38,376	13,946	14,986	7,605	631,358

(a) For details on the services reporting to NCMHED, refer to Appendix 7.

n.a. Not available.

Source: NCMHED.

Table 4.11: Summary of public and private psychiatric hospitals,^(a) Australia, 1997–98 to 1999–00

	1997–98	1998–99	1999–00
Public psychiatric hospitals			
Number of establishments	24	21	22
Available beds ^(b)	3,112	2,943	2,759
Full-time-equivalent staff	6,128	6,395	6,274
Total salaries and wages expenditure (\$'000)	276,877	318,056	303,812
Total non-salary expenditure (\$'000)	100,962	119,284	133,078
Total recurrent expenditure (\$'000)	377,839	437,340	423,827
Revenue (\$'000)	22,406	22,131	19,769
Private psychiatric hospitals^(c)			
Number of establishments	23	26	24
Available beds ^(b)	1,344	1,471	1,369
Full-time-equivalent staff	1,514	1,660	1,572
Recurrent expenditure (\$'000)	111,141	123,601	122,498
Public community mental health establishments^(d)			
Number of establishments	n.a	208	232
Available beds ^(b)	n.a	1,301	1,171
Full-time-equivalent staff	n.a	8,679	8,570
Total salaries and wages expenditure (\$'000)	n.a	421,192	453,492
Total non-salary expenditure (\$'000)	n.a	166,409	177,865
Total recurrent expenditure (\$'000)	n.a	588,006	631,358

(a) The number of hospitals reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of physical hospital buildings or campuses. There are some overlap between public psychiatric hospitals and public community mental health establishments, so expenditure and staffing information can not be added together. See Box 4.1 for further information.

(b) Average for the year.

(c) ABS defined private psychiatric hospitals as those that are licensed/approved by each State or Territory health authority and for which 50% or more of the total patient days were for psychiatric patients.

(d) No data are available for 1997–98 from the National Community Mental Health Establishments Database.

n.a. Not available.

Source: NPED, PHEC, NCMHED.

Table 4.12: Public psychiatric hospitals,^(a) available beds and available beds per 1,000 population by metropolitan, rural and remote region, States and Territories, 1999–00

Region	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public psychiatric hospitals									
Metropolitan	7	1	5	1	1	3	0	0	18
Rural	2	0	2	0	0	0	0	0	4
Remote	0	0	0	0	0	0	0	0	0
Total all regions	9	1	7	1	1	3	0	0	22
Available beds^(b)									
Metropolitan	875	90	334	283	479	117	..	..	2,178
Rural	193	..	388	..	..	..	..	..	581
Remote	..	..	..	..	..	..	..	..	0
Total all regions	1,068	90	722	283	479	117	..	..	2,759
Available beds per 100,000 population^(c)									
Metropolitan	18.1	2.5	16.1	20.8	43.8	60.2	..	..	16.1
Rural	12.9	..	31.3	..	..	..	..	..	12.0
Remote	..	..	..	..	..	..	..	..	0
Total all regions	16.6	1.9	20.4	15.1	32.0	24.9	..	..	14.5

(a) The number of hospitals reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of physical hospital buildings or campuses. For details on the hospitals reporting to NPHED, refer to Appendix 7.

(b) Average available beds where possible; otherwise available beds at 30 June 2000.

(c) Rates are crude rates based on 31 December 1999 estimated resident population.

.. Not applicable.

Source: NPHED.

Table 4.13: Full-time-equivalent staff,^(a) public psychiatric hospitals,^(b) States, 1999–00

Staff category	NSW^(c)	Vic^(d)	Qld	WA^(e)	SA^(f)	Tas	Total
Salaried medical officers	131	11	35	41	92	4	314
Nurses							
Registered nurses	n.a.	121	609	318	543	84	1,675
Enrolled nurses	n.a.	n.a.	155	84	133	24	396
<i>Total nurses</i>	<i>1,298</i>	<i>121</i>	<i>764</i>	<i>402</i>	<i>676</i>	<i>108</i>	<i>3,369</i>
Other personal care staff	..	0	89	0	..	0	89
Diagnostic & allied health professionals	217	24	98	86	127	7	559
Administrative & clerical staff	307	5	116	72	129	11	641
Domestic & other staff	531	0	301	147	197	126	1,302
Total staff	2,485	161	1,404	748	1,220	256	6,274

(a) Where average full-time-equivalent staff numbers were not available, staff numbers at 30 June 2000 were used.

(b) The data on public psychiatric hospitals can be affected by administrative and/or reporting arrangements, for example the inclusion of data for community-based services managed by hospitals. For details on the hospitals reporting to NPHED, refer to Appendix 7.

(c) New South Wales *Other personal care staff* are included in *Diagnostic & allied health professionals*.

(d) For Victoria, FTEs may be slightly understated.

(e) *Other personal care staff* for Western Australia excludes staff on retention who do not work regular hours.

(f) South Australian *Other personal care staff* are included in *Diagnostic & allied health professionals* and *Domestic & other staff*.

.. Not applicable.

n.a. Not available.

Source: NPHED.

Table 4.14: Salaries and wages expenditure (\$'000), public psychiatric hospitals,^(a) States, 1999–00

Staff category	NSW^(b)	Vic^(c)	Qld	WA	SA^(d)	Tas	Total
Salaried medical officers	13,037	n.a.	3,764	5,036	5,844	390	28,071
Nurses							
Registered nurses	n.a.	n.a.	33,240	16,087	28,135	4,586	82,048
Enrolled nurses	n.a.	n.a.	6,131	3,055	6,749	931	16,867
<i>Total nurses</i>	<i>67,017</i>	<i>n.a.</i>	<i>39,371</i>	<i>19,142</i>	<i>34,884</i>	<i>5,517</i>	<i>165,931</i>
Other personal care staff	n.a.	n.a.	4,092	0	n.a.	n.a.	4,092
Diagnostic & allied health professionals	10,630	n.a.	4,860	3,483	6,364	344	25,681
Administrative & clerical staff	13,109	n.a.	4,714	2,726	5,072	401	26,022
Domestic & other staff	18,442	n.a.	10,903	4,713	6,510	4,411	44,979
Total salaries & wages	122,235	9,036	67,704	35,100	58,674	11,063	303,812

(a) The data on public psychiatric hospitals can be affected by administrative and/or reporting arrangements, for example the inclusion of data for community-based services managed by hospitals. For details on the hospitals reporting to NPHEd, refer to Appendix 7.

(b) New South Wales expenditure recorded against special purposes and trust funds is excluded. *Other personal care staff* are included in *Diagnostic & allied health professionals*.

(c) Victorian reporting arrangements do not allow for the breakdown of recurrent expenditure for its single public psychiatric hospital.

(d) South Australian *Other personal care staff* are included in *Diagnostic & health professionals* and *Domestic & other staff*.

.. Not applicable.

n.a. Not available.

Source: NPHEd.

Table 4.15: Non-salary expenditure and total recurrent expenditure (\$'000), public psychiatric hospitals,^(a) States, 1999–00

	NSW ^(b)	Vic ^(c)	Qld ^(d)	WA ^(e)	SA ^(f)	Tas ^(g)	Total
Payments to visiting medical officers	2,039	n.a.	1,516	0	2,097	n.a.	5,652
Superannuation	10,416	n.a.	6,453	5,221	4,476	n.a.	26,566
Drug supplies	3,426	n.a.	1,815	1,273	2,114	n.a.	8,628
Medical & surgical supplies	1,642	n.a.	262	113	408	n.a.	2,425
Food supplies	3,694	n.a.	1,924	1,021	1,548	n.a.	8,187
Domestic services	3,544	n.a.	4,806	982	2,085	n.a.	11,417
Repairs & maintenance	4,130	n.a.	1,077	904	2,949	n.a.	9,060
Patient transport	37	n.a.	14	80	717	n.a.	849
Administrative expenses	16,193	n.a.	5,501	2,385	6,091	n.a.	30,170
Interest payments	28	n.a.	n.a.	0	n.a.	n.a.	28
Depreciation	8,427	n.a.	9,934	1,201	n.a.	n.a.	19,562
Other recurrent expenditure	3,291	n.a.	387	1,766	1,599	n.a.	7,043
Total non-salary expenditure	56,866	3,493	33,689	14,946	24,084	n.a.	133,078
Total recurrent expenditure	179,101	12,529	101,393	50,046	80,759	n.a.	434,891

(a) The data on public psychiatric hospitals can be affected by administrative and/or reporting arrangements, for example the inclusion of data for community-based services managed by hospitals. For details on the hospitals reporting to NPHEd, refer to Appendix 7.

(b) New South Wales expenditure recorded against special purposes and trust funds is excluded.

(c) Victorian reporting arrangements do not allow for the breakdown of recurrent expenditure for its single public psychiatric hospital.

(d) Queensland *Interest payments* are included in *Administrative expenses*.

(e) Western Australian *Superannuation* may vary substantially from previous years, which were largely based on cash rather than accrual accounting.

(f) *Interest payments* are included in *Administrative expenses*. Termination payments are included in *Other recurrent expenditure*.

(g) The Tasmanian accounting system combines expenditure data for establishment groups. This prevents the identification of non-salary expenditure for the three public psychiatric hospitals.

n.a. Not available.

Source: NPHEd.

Table 4.16: Revenue (\$'000), public psychiatric hospitals,^(a) States, 1999–00

Revenue category	NSW	Vic	Qld	WA	SA	Tas ^(b)	Total
Patient revenue ^(c)	7,724	0	3,256	516	3,969	n.a.	15,465
Recoveries	1,317	163	19	8	0	n.a.	1,508
Other revenue	1,019	287	1,330	109	51	n.a.	2,796
Total revenue	10,061	450	4,605	633	4,020	n.a.	19,769

(a) For details on the hospitals reporting to NPHEd, refer to Appendix 7.

(b) The Tasmanian accounting system combines revenue data for establishment groups. This prevents the identification of revenue for the three public psychiatric hospitals.

(c) Patient revenue includes revenue for items such as pharmacy and ambulance, which may be considered as recoveries.

n.a. Not available.

Source: NPHEd.

Table 4.17: Public acute care hospitals with psychiatric units or wards,^(a) by metropolitan, rural and remote region, States and Territories, 1999–00

Region	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Metropolitan	21	24	10	8	8	1	2	1	75
Rural	11	9	7	2	0	2	0	0	31
Remote	0	0	0	0	0	0	0	1	1
Total	38	33	17	10	8	3	2	2	107

(a) The number of hospitals reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of physical hospital buildings or campuses.

Source: NPHEd.

Table 4.18: Private psychiatric hospitals, available beds and available beds per 1,000 population, States and Territories, 1999-00

	NSW & ACT	Vic	Qld	WA, SA & Tas	NT	Total
Private psychiatric hospitals	9	5	4	6	0	24
Available beds ^(a)	447	288	292	312	..	1,369
Available beds per 100,000 population ^(b)	6.6	6.1	8.3	8.1	..	7.2

(a) Average available beds where possible; otherwise available beds at 30 June 2000.

(b) Rates are crude rates based on 31 December 1999 estimated resident population.

.. Not applicable.

Source: PHEC.

Table 4.19: Full-time-equivalent staff,^(a) private psychiatric hospitals, States and Territories, 1999-00

Staff category	NSW & ACT	Vic	Qld	WA, SA & Tas	NT	Total
Salaried medical officers	15	3	n.a.	n.a.	..	23
Total nurses ^(b)	292	201	178	173	..	843
Diagnostic & allied health professionals	76	37	28	20	..	161
Administrative & clerical staff	122	61	30	51	..	265
Domestic & other staff ^(c)	120	50	52	58	..	280
Total full-time-equivalent staff	624	352	292	304	..	1,572

(a) Where average full-time-equivalent staff numbers were not available, staff numbers at 30 June 2000 were used.

(b) Includes *Nursing administrators, Nurse educators, Other registered nurses, Enrolled nurses, Student nurses, Trainee nurses* and *Other nursing staff* categories.

(c) Includes *Orderlies/porters, Catering and kitchen, Domestic, Engineering & maintenance* and *Other* categories.

.. Not applicable.

n.a. Not available, but included in the total.

Source: PHEC.

Table 4.20: Salaries and wages expenditure (\$'000), private psychiatric hospitals, States and Territories, 1999-00

Recurrent expenditure category	NSW & ACT	Vic	Qld	WA, SA & Tas	NT	Total
Salaried medical officers	1,341	188	n.a.	n.a.	..	2,060
Total nurses ^(a)	14,591	10,048	8,563	8,599	..	41,801
Diagnostic & allied health professionals	3,868	1,848	1,425	1,065	..	8,205
Administrative & clerical staff	4,754	2,370	1,272	2,003	..	10,399
Domestic & other staff ^(b)	3,747	1,747	1,695	1,894	..	9,083
Total salaries and wages	28,301	16,201	13,365	13,682	..	71,549

(a) Includes *Nursing administrators, Nurse educators, Other registered nurses, Enrolled nurses, Student nurses, Trainee nurses* and *Other nursing staff* categories.

(b) Includes *Orderlies/porters, Catering and kitchen, Domestic, Engineering & maintenance* and *Other* categories.

.. Not applicable.

n.a. Not available, but included in the total.

Source: PHEC.

Table 4.21: Non-salary expenditure and total recurrent expenditure (\$'000), private psychiatric hospitals, States and Territories, 1999-00

Recurrent expenditure category	NSW & ACT	Vic	Qld	WA, SA & Tas	NT	Total
Superannuation	1,749	1,126	812	991	..	4,678
Payroll tax	690	982	628	640	..	2,940
On-costs excluding superannuation and payroll tax ^(a)	1,529	1,756	234	634	..	4,154
Drug supplies	1,074	293	115	173	..	1,655
Medical & surgical supplies	272	174	188	142	..	776
Food supplies	1,632	1,026	589	856	..	4,103
Domestic services	720	623	398	463	..	2,205
Repairs & maintenance	874	476	n.a.	n.a.	..	1,827
Patient transport	34	n.a.	0	n.a.	..	57
Administrative expenses	8,066	5,076	2,186	3,288	..	18,615
Interest payments	n.a.	n.a.	n.a.	n.a.	..	267
Depreciation	1,273	1,225	835	874	..	4,207
Contract services (excluding medical practitioners)	1,293	223	2,176	717	..	4,410
Other recruitment expenditure	n.a.	n.a.	0	n.a.	..	1058
Total non-salary expenditure	19,432	13,868	8,339	9,310	..	50,949
Total recurrent expenditure	47,733	30,069	21,704	22,992	..	122,498

(a) Includes workers compensation premiums, uniforms and personal costs.

n.a. Not available, but included in the total.

.. Not applicable.

Source: PHEC.

Table 4.22: Revenue (\$'000), private psychiatric hospitals, States and Territories, 1999-00

Revenue category	NSW & ACT	Vic	Qld	WA, SA & Tas	NT	Total
Patient revenue ^(a)	51,654	34,468	26,206	26,619	..	138,947
Recoveries	1,102	n.a.	n.a.	n.a.	..	3,549
Other revenue	853	n.a.	n.a.	n.a.	..	1,553
Total revenue	53,609	36,224	26,942	27,723	..	144,048

(a) Patient revenue includes revenue for items such as pharmacy and ambulance, which may be considered as recoveries.

n.a. Not available, but included in the total.

.. Not applicable.

Source: PHEC.