

5 Specialised mental health care resources

This chapter presents an overview of available data on the characteristics of psychiatrist and mental health nursing labour forces and PBS expenditure on mental health-related medications. It also describes the characteristics of establishments delivering specialised mental health care in Australia. 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.

Specialised mental health care labour force

This section presents information on the characteristics of psychiatrists and mental health nurses, using data from the National Medical Labour Force Survey and the National Nursing Labour Force Survey. Expenditure on private psychiatrist services is sourced from the Medicare data collection.

State and Territory health authority expenditure on psychiatrists is composed mainly 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 cannot be isolated from the expenditure on other types of medical practitioners.

Psychiatrists

The information presented in this section is based on data collated in the National Medical Labour Force Survey conducted in 1999. The survey includes data on psychiatrists and trainee psychiatrists practising in both the public and private sectors. The expenditure on private psychiatrist services is sourced from the DHA and HIC Medicare data collections. Background information on *Medical Labour Force 1999* (AIHW 2003) and the Medicare data collections is presented in Appendix 1.

National medical labour force survey data on the number of specialists practising as psychiatrists and psychiatry trainees are presented in Tables 5.1, 5.2 and 5.3. 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.

Table 5.1: Psychiatrists and psychiatrists-in-training, and per 100,000 population, States and Territories, 1999

	NSW	NSW	Qld	WA	SA	Tas	ACT	NT	Total
Psychiatrists^(a)									
Male	493	457	211	117	119	37	21	15	1,470
Female	183	216	93	41	63	12	8	2	617
<i>Total</i>	<i>676</i>	<i>673</i>	<i>304</i>	<i>158</i>	<i>182</i>	<i>49</i>	<i>29</i>	<i>16</i>	<i>2,088</i>
Per 100,000 population ^(c)	10.6	14.4	8.7	8.6	12.2	10.3	9.3	8.5	11.1
Psychiatrists-in-training^(b)									
Male	120	51	46	29	29	0	3	5	284
Female	87	66	49	34	23	0	7	2	269
<i>Total</i>	<i>207</i>	<i>117</i>	<i>96</i>	<i>64</i>	<i>52</i>	<i>0</i>	<i>11</i>	<i>7</i>	<i>553</i>
Per 100,000 population ^(c)	3.2	2.5	2.8	3.5	3.5	0.0	3.4	3.5	2.9
Total psychiatrists and psychiatrists in training									
Male	613	508	257	146	148	37	24	20	1,754
Female	270	282	142	75	86	12	15	4	886
Total	883	790	400	222	234	49	40	23	2,641
Per 100,000 population ^(c)	13.6	16.7	11.3	11.9	15.6	10.4	12.7	11.7	13.8

(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 1999 estimated resident population.

Source: AIHW 2003.

Table 5.2: Psychiatrists and psychiatrists-in-training, and per 100,000 population, Australia, 1995 to 1999

	1995	1996	1997	1998	1999
Psychiatrists^(a)					
Male	1,462	1,400	1401	1,473	1,470
Female	454	496	519	512	617
<i>Total</i>	<i>1,916</i>	<i>1,896</i>	<i>1,921</i>	<i>1,985</i>	<i>2,088</i>
Per 100,000 population ^(c)	10.5	10.3	10.3	10.5	11.1
Psychiatrists-in-training^(b)					
Male	324	319	326	285	284
Female	221	233	242	238	269
<i>Total</i>	<i>545</i>	<i>552</i>	<i>568</i>	<i>523</i>	<i>553</i>
Per 100,000 population ^(c)	3.0	3.0	3.0	2.7	2.9
Total psychiatrists and psychiatrists in training					
Male	1,786	1,719	1,739	1,762	1,755
Female	675	729	763	754	886
Total	2,461	2,448	2,502	2,517	2,641
Per 100,000 population ^(c)	13.5	13.3	13.4	13.2	14.0

(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 1995, 1996, 1997, 1998, 1999 estimated resident population.

Source: AIHW 2003.

Table 5.3: Psychiatrists and psychiatrists per 100,000 population by metropolitan, rural and remote region of main place of work, Australia, 1995 to 1999

	1995	1996	1997	1998	1999
Psychiatrists^{(a), (b)}					
Metropolitan	1,756	1,732	1,760	1,182	1,918
Rural	155	157	153	163	159
Remote	4	6	7	10	10
Total all regions	1,916	1,896	1,921	1,985	2,088
Psychiatrists per 100,000 population^(c)					
Metropolitan	13.5	13.3	13.3	13.6	14.2
Rural	3.2	3.3	3.2	3.4	3.3
Remote	0.9	1.2	1.3	1.9	1.8
Total all regions	10.5	10.4	10.4	10.6	11.1

(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 1995, 1996, 1997, 1998, 1999 estimated resident population.

Source: AIHW 2003.

In 1999, it was estimated that there were 2,088 specialists practising psychiatry in Australia (11.1 psychiatrists per 100,000 population) (Table 5.1). The estimated number of psychiatrists-in-training in Australia was 553 (2.9 psychiatrists-in-training per 100,000 population).

The States or Territories with the largest number of psychiatrists per 100,000 population were Victoria (14.4) and South Australia (12.2). The Northern Territory had the lowest number of psychiatrists, with 8.5 per 100,000 population (Table 5.1).

There was a 35.9% increase in the number of female psychiatrists in contrast with the 0.5% increase in the number of male psychiatrists from 1995 to 1999 (Table 5.2). From 1995 to 1998, the number of psychiatrists and psychiatrists-in-training increased by 7.3%, from 2,461 to 2,641. Although there was an increase (8.9%) in the number of psychiatrists from 1995 to 1999, there has been little variation in the number of the psychiatrists-in-training.

For the majority of psychiatrists (91.9%), their main place of work was in a capital city (Table 5.3 and Figure 2.14). There has been little or no variation in this pattern since 1995.

Based on the number of Medicare-funded items, the estimated number of full-time-equivalent private psychiatrists for 2000–01 was 2,116 (Table 5.4). The majority of these full-time-equivalent private psychiatrists were located in metropolitan regions (1,980 or 92.8%). Victoria (14.8) and South Australia (15.2) were the jurisdictions with the largest number of full-time-equivalent private psychiatrists per 100,000 population.

In 2000–01, a total of \$196.5 million of Medicare funds were used to reimburse attendances with private psychiatrists (Table 5.5). The benefits paid to private psychiatrists represented 2.7% of total Medicare expenditure (\$7,326.8 million) and 19.5% of expenditure on specialist attendances (\$1,005.3 million) for 2000–01. A total of \$10,149 per 100,000 population was paid during 2000–01. 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 private psychiatrists (Table 5.4) and the number of private psychiatry services provided in each jurisdiction (Table 3.14). Similarly the per capita benefits paid to private psychiatrists in Western Australia, Tasmania, the Australian Capital Territory and the Northern Territory were well below the national average.

Following a period of growth, the total Medicare funds (current prices) paid to private psychiatrists have remained largely unchanged since the mid-1990s. This probably corresponds with initiatives undertaken by State and Territory health authorities to balance the distribution of psychiatrists across private and public sectors (DHA 2002).

Mental health nurses

Mental health nurses are defined as nurses who indicate that their main area of nursing is mental health. Information on the number of mental health nurses by State and Territory is presented in Table 5.7. This information is based on the AIHW national nursing labour force collection from 1993 to 1999. Comprehensive mental health nursing data for 1999 will be released in early 2003. At that time, these data will be included in the Internet version of this publication at www.aihw.gov.au. Additional information on this collection is presented in Appendix 1.

Table 5.4: Medicare-funded full-time-equivalent private psychiatrists, and per 100,000 population, by metropolitan, rural and remote region, States and Territories, 2000–01

Full-time-equivalent psychiatrists	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Number									
Metropolitan	634.3	677.0	283.3	108.3	224.2	26.8	21.6	4.3	1979.8
Rural and remote	47.1	26.7	42.8	4.9	4.1	10.6	0.0	0.3	136.5
Total all regions	681.4	703.8	326.1	113.2	228.3	37.4	21.6	4.6	2116.3
Per 100,000 population^(a)									
Metropolitan	12.9	18.7	13.4	7.8	20.5	13.8	7.0	4.8	14.4
Rural and remote	3.0	2.3	3.0	1.0	1.0	3.8	0.0	0.3	2.5
Total all regions	10.5	14.8	9.1	6.0	15.2	8.0	6.9	2.4	11.0

(a) Rates are crude rates based on estimated resident population at 30 June 2000.

Source: DHA.

Table 5.5: Medicare expenditure (\$'000) on services provided by private psychiatrists by schedule item, States and Territories, 2000-01

Code	Description	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Patient attendances										
Consulting rooms										
300, 310	15 minutes or less	908.7	302.0	174.4	82.0	75.7	24.3	37.3	32.7	1,637.1
302, 312	16 to 30 minutes	6,109.7	4,769.2	3,603.5	1,109.0	1,407.8	504.6	238.7	76.0	17,818.5
304, 314	31 to 45 minutes	11,696.7	12,795.3	8,327.4	2,379.1	3,792.3	1,312.0	361.7	100.5	40,764.9
306, 316	46 to 75 minutes	34,606.4	35,703.0	13,465.5	4,782.7	11,306.6	1,081.1	824.3	173.2	101,942.8
308, 318	Over 75 minutes	2,055.0	1,706.5	1,105.4	476.9	783.2	174.4	91.1	11.5	6,404.0
319	Selected cases (> 45 mins)	4,131.3	4,217.6	1,254.3	135.5	1,168.5	103.6	55.1	5.6	11,071.5
	<i>Total</i>	<i>59,507.7</i>	<i>59,493.7</i>	<i>27,930.5</i>	<i>8,965.2</i>	<i>18,534.2</i>	<i>3,199.9</i>	<i>1,608.1</i>	<i>399.5</i>	<i>179,638.9</i>
Hospital										
320	15 minutes or less	68.8	186.6	112.3	63.7	59.5	19.5	3.8	0.3	514.6
322	16 to 30 minutes	652.6	850.6	1,397.4	445.9	490.5	99.7	23.3	6.4	3,966.2
324	31 to 45 minutes	1,032.9	907.0	767.1	326.0	373.8	136.2	21.1	3.5	3,567.6
326	46 to 75 minutes	1,180.8	1,103.8	577.7	317.3	311.9	106.9	29.2	3.3	3,630.9
328	Over 75 minutes	284.5	136.2	112.1	65.0	50.8	18.8	8.2	0.5	676.1
	<i>Total</i>	<i>3,219.5</i>	<i>3,184.4</i>	<i>2,966.6</i>	<i>1,217.9</i>	<i>1,286.5</i>	<i>381.1</i>	<i>85.5</i>	<i>13.9</i>	<i>12,355.3</i>
Other location										
330	15 minutes or less	29.0	3.9	0.6	4.6	0.4	0.0	0.0	0.0	38.6
332	16 to 30 minutes	62.1	56.1	5.6	22.4	4.5	1.0	0.8	0.0	152.5
334	31 to 45 minutes	99.2	162.0	10.2	2.1	18.8	2.6	1.5	0.0	296.4
336	46 to 75 minutes	162.1	195.7	12.1	10.8	42.0	3.4	1.2	0.0	427.4
338	Over 75 minutes	199.4	35.6	8.1	7.6	11.8	0.7	0.3	0.0	263.4
	<i>Total</i>	<i>551.7</i>	<i>453.2</i>	<i>36.6</i>	<i>47.5</i>	<i>77.6</i>	<i>7.7</i>	<i>3.8</i>	<i>0.0</i>	<i>1,178.2</i>
Other services										
342, 344, 346	Group psychotherapy	686.3	1,410.5	183.6	58.4	123.1	27.7	5.2	0.6	2,495.4
348, 350, 352	Interview with non-patient	76.9	48.7	39.9	55.9	18.3	7.5	2.3	0.3	249.8
14224	Electroconvulsive therapy ^(a)	142.7	153.8	173.8	32.5	49.8	19.1	3.6	0.0	575.4
	<i>Total</i>	<i>905.9</i>	<i>1,613.0</i>	<i>397.3</i>	<i>146.8</i>	<i>191.2</i>	<i>54.3</i>	<i>11.2</i>	<i>0.9</i>	<i>3,320.6</i>
	Total expenditure (\$'000)	64,184.8	64,744.3	31,331.1	10,377.4	20,089.5	3,643.0	1,708.6	414.3	196,493.0
	Per 1,000 population ^(b)	9,771.0	13,513.0	8,695.7	5,480.5	13,293.9	7,713.5	5,351.1	2,087.4	10,149.1

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

(b) The rate per 1,000 population is a crude rate based on the estimated resident population at December 2000.

Source: HIC.

Table 5.6: Medicare expenditure (\$'000) on services provided by private psychiatrists (current prices), 1990-91 to 2000-01^(a)

	1990-91	1991-92	1992-93	1993-94	1994-95	1995-96	1996-97	1997-98	1998-99	1999-00	2000-01
Total expenditure ^(b)	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	196,493.0
Per 1,000 population ^(b)	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	10,149.1

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

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

Source: DHA.

Table 5.7: Mental health nurses, and per 100,000 population, States and Territories, 1993 to 1999

Year ^(a)	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total	
									Number	Per 100,000 population
1999 ^(b)	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	12,174	63.7
1997	4,254	3,060	2,222	1,123	1,134	299	127	75	12,294	66.0
1996	3,649	3,083	2,013	1,103	1,010	214	115	68	11,255	61.1
1995	3,532	3,183	1,900	1,091	1,149	216	121	58	11,250	61.8
1994	3,516	3,201	2,019	873	1,311	222	122	88	11,352	63.2
1993	3,520	3,191	1,822	826	1,344	231	126	75	11,135	62.7

(a) Data are unavailable for 1998 as the survey has been conducted biennially since 1997.

(b) State and Territory mental health nurse data unavailable at time of publication. Due to be released later in 2003.

n.a. not available.

Source: AIHW 2001a.

The number of mental health nurses remained fairly stable between 1993 and 1996 (Table 5.7 and Figure 2.13). However, in 1997, there was an increase of 9.2% in the mental health nursing workforce, from 11,255 to 12,294. In 1999, there were 12,294 mental health nurses, of whom 4,170 were male and 8,123 were female.

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 for mental health-related medications, and all prescriptions by private psychiatrists. 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 3 for more information on the ATC codes used to define mental health-related medications.

PBS expenditure data for all prescriptions from private psychiatrists and mental health-related medications prescribed by general practitioners are presented in Tables 5.8 and 5.9. There was more PBS expenditure on mental health-related medications prescribed by general practitioners (\$321.2 million) than on those prescribed by private psychiatrists (\$88.0 million). Almost 62.8% of PBS funds relating to general practitioner mental health-related prescriptions were for antidepressant medication. For private psychiatrist prescriptions, antipsychotic medications accounted for the majority of PBS funds paid (50.5%), with antidepressants a close second (38.4%).

The Northern Territory had the lowest rate of PBS expenditure for mental health-related medication prescribed by these medical practitioners, at \$6,000 per 1,000 population. Victoria (\$22,700 per 1,000 population) and South Australia (\$25,100 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 5.1).

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 National Community Mental Health Establishment Database (NCMHED) collates available bed, separation, staff and expenditure data for each public community mental health care establishment in Australia, from routine administrative collections. Further information on the NCMHED can be found in Appendix 1.

Table 5.8: Pharmaceutical Benefits Scheme expenditure (\$'000) on pharmaceuticals prescribed by private psychiatrists by pharmaceutical group, States and Territories, (a) 2000–01

ATC code	Description	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(b)
A	Alimentary tract & metabolism	198	169	125	27	53	10	4	1	604
B	Blood & blood-forming organs	12	6	6	1	3	1	0	0	31
C	Cardiovascular system	353	250	162	58	93	27	9	2	1,000
D	Dermatologicals	15	10	6	1	2	1	1	0	38
G	Genitourinary system & sex hormones	68	55	63	9	20	8	1	0	230
H	Systemic hormonal preparations, excl sex hormones	13	15	12	5	7	0	0	0	52
J	General anti-infectives for systematic use	55	52	41	11	13	2	4	2	185
L	Antineoplastic & immunomodulating agents	59	39	22	3	5	7	1	0	142
M	Musculoskeletal system	91	122	51	17	26	8	2	1	327
N	Central nervous system									
N05A	Antipsychotics	15,288	13,310	7,137	2,205	4,303	498	903	69	44,490
N05B	Anxiolytics	259	445	188	41	103	39	7	1	1,090
N05C	Hypnotics & sedatives	63	91	48	16	29	10	2	1	261
N06A	Antidepressants	9,466	10,075	6,215	3,008	3,498	785	486	51	33,829
	Other	1,476	1,519	871	709	561	146	60	25	5,420
	<i>Total</i>	26,552	25,440	14,460	5,979	8,494	1,477	1,458	147	85,090
P	Antiparasitic products	2	2	1	0	1	0	0	0	6
R	Respiratory system	79	70	50	11	20	5	2	0	244
S	Sensory organs	14	17	9	2	13	1	0	0	61
	Total^(c)	27,524	26,254	15,014	6,127	8,754	1,549	1,482	154	88,044
	<i>Per 1,000 population (\$)</i>	4.3	5.5	4.2	3.3	5.8	3.3	4.8	0.8	4.6

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

(c) Includes State or Territory unknown.

(d) Includes ATC unknown or various (Chapter V).

Source: DHA.

Table 5.9: Pharmaceutical Benefits Scheme expenditure (\$'000) on pharmaceuticals prescribed by general practitioners by mental health-related pharmaceutical group, States and Territories, (a) 2000–01

ATC code	Description	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(b)
General practitioners										
N05A	Antipsychotics	26,786	23,636	14,730	5,445	8,098	1,543	955	240	89,931
N05B	Anxiolytics	4,034	3,937	2,650	996	1,231	580	117	34	13,635
N05C	Hypnotics & sedatives	3,825	3,264	2,090	1,202	1,083	380	98	30	12,020
N06A	Antidepressants	58,869	50,069	41,185	21,899	17,911	6,170	3,110	699	201,718
	<i>Total (\$'000)</i>	94,719	81,717	61,379	29,980	28,830	8,738	4,327	1,009	321,195
	Per 1,000 population (\$)	14.7	17.1	17.2	15.9	19.3	18.6	13.9	5.2	16.8
General practitioners and private psychiatrists										
	Total (\$'000)	122,243	107,972	76,392	36,106	37,584	0,287	5,809	1,163	409,239
	Per 1,000 population (\$)	18.9	22.7	21.4	19.2	25.1	21.9	18.7	6.0	21.4

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

(b) Includes State or Territory unknown.

Source: DHA.

Table 5.10: Summary of public and private psychiatric hospitals^(a) and public community mental health establishments^(b), Australia, 1997–98 to 2000–01

	1997–98	1998–99	1999–00	2000–01
Public psychiatric hospitals				
Number of establishments	24	21	22	23
Available beds ^(c)	3,112	2,943	2,759	2,478
Full-time-equivalent staff	6,128	6,395	6,274	5,601
Total salaries and wages expenditure (\$'000)	276,877	318,056	303,812	281,494
Total non-salary expenditure (\$'000) ^(d)	100,962	119,284	133,078	135,194
Total recurrent expenditure (\$'000) ^(d)	377,839	437,340	423,827	416,688
Revenue (\$'000) ^(d)	22,406	22,131	19,769	21,978
Private psychiatric hospitals^(e)				
Number of establishments	23	26	24	24
Available beds ^(b)	1,344	1,471	1,369	1,369
Full-time-equivalent staff	1,514	1,660	1,572	1,566
Recurrent expenditure (\$'000) ^(d)	111,141	123,601	122,498	133,491
Public community mental health establishments^(f)				
Number of establishments ^(b)	n.a.	208	232	233
Available beds ^(c)	n.a.	1,301	1,171	1,306
Full-time-equivalent staff	n.a.	8,679	8,570	8,878
Total salaries and wages expenditure (\$'000) ^(d)	n.a.	421,192	453,492	505,310
Total non-salary expenditure (\$'000) ^(d)	n.a.	166,409	177,865	187,029
Total recurrent expenditure (\$'000) ^(d)	n.a.	588,006	631,358	692,340

(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.

(b) The count of public community mental health establishments can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of service outlets.

(c) Average beds for the year.

(d) Expenditure and revenue data are based on current prices

(e) 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.

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

n.a. not available.

Source: NPHEd, PHEC, NCMHED.

Table 5.11: Public community mental health establishments, establishments with residential care services, available beds and available beds per 100,000 population, States and Territories, 2000-01

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Establishments ^(a)	19	38	90	20	30	28	2	6	233
Establishments with residential care services	7	30	0	2	1	8	1	0	49
Available beds ^(b)	206	906	0	18	24	132	20	0	1,306
Available beds per 100,000 population ^(c)	3.1	18.9	0	1.0	1.6	27.9	6.3	0.0	6.7

(a) The number of establishments reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of service outlets. For details on the establishments reporting to NCMHED, refer to Appendix 6.

(b) Average available beds where possible; otherwise available beds at 30 June 2001.

(c) Rates are crude rates based on 31 December 2000 estimated resident population.

Source: NCMHED.

Table 5.10 presents a summary of establishments, number of available beds, staffing and expenditure from NCMHED since 1998. Information from the NCMHED on the number of establishments by State and Territory in 2000–01 is presented in Table 5.11. A list of the establishments that report to NCMHED is presented in Table A6.2. Note 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 these reasons, the number of establishments reported does not necessarily reflect the number of physical buildings or service outlets from which community mental health care was provided.

There were 1,306 available beds reported to the NCMHED for 2000–01. The 11.5% increase from the 1,171 reported for 1999–00 was largely attributable to a rise in available beds in New South Wales, South Australia and Tasmania. Queensland and Northern Territory public community mental health establishments did not provide residential care.

Data on the number of FTE staff employed in community mental health establishments by State and Territory are presented in Table 5.12. 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. A total of 8,933 FTE staff were employed in Australian community mental health establishments for 2000–01. This is an increase from the 8,548 FTE staff reported in 1999–00.

FTE staffing data by staff category were able to be supplied to the NCMHED by New South Wales, Queensland, South Australia, Tasmania, the Australian Capital Territory and the Northern Territory. For these six jurisdictions, the majority of the FTE staff were *Nurses* (37.4% or 1,855 FTE staff) and *Diagnostic & allied health professionals* (32.4% or 1,607 FTE staff). The community mental health care workforce of these five jurisdictions also included numbers of *Administrative & clerical staff* (16.3% or 809 FTE staff) and *Salaried medical officers* (7.9% or 393 FTE staff).

The recurrent expenditure on community mental health establishments in 2000–01 was \$702.1 million (Tables 5.13 and 5.14). The salary category made up 73.2% (\$514.2 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 36.8% (\$83.0 million) and 14.3% (\$32.4 million) respectively. *Diagnostic and allied health professionals* wage and salary payments accounted for 30.7% (\$69.3 million) of the salary expenditure.

Table 5.12: Full-time-equivalent staff,^(a) public community mental health establishments,^(b) States and Territories, 2000-01

Full-time-equivalent staff	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Salaried medical officers	183	n.a.	116	n.a.	59	17	9	9	393
Nurses									
Registered nurses	n.a.	n.a.	394	n.a.	n.a.	82	57	29	562
Enrolled nurses	n.a.	n.a.	7	n.a.	n.a.	28	7	0	42
<i>Total nurses^(c)</i>	<i>1,021</i>	<i>n.a.</i>	<i>401</i>	<i>n.a.</i>	<i>229</i>	<i>111</i>	<i>65</i>	<i>29</i>	<i>1,856</i>
Other personal care staff	n.a.	n.a.	18	n.a.	7	23	7	0	55
Diagnostic & allied health professionals	723	n.a.	490	n.a.	253	52	68	21	1,607
Administrative & clerical staff	448	n.a.	184	n.a.	100	22	32	22	808
Domestic & other staff	218	n.a.	12	n.a.	4	14	0	0	248
Total staff	2,593	2,982	1,221	985	652	239	181	80	8933

(a) Where average full-time-equivalent staff numbers were not available, staff numbers at 30 June 2001 were used.

(b) For details on the services reporting to NCMHED, refer to Appendix 6.

(c) Total nurses includes trainee/pupil nurses.

n.a. not available.

Source: NCMHED.

Table 5.13: Salaries and wages expenditure (\$'000), public community mental health establishments,^(a) States and Territories, 2000-01

Recurrent expenditure category	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Salaried medical officers	16,745	n.a.	11,725	n.a.	n.a.	1,859	1,013	1,035	32,377
Nurses									
Registered nurses	n.a.	n.a.	19,848	n.a.	n.a.	4234	3,514	1,725	29,321
Enrolled nurses	n.a.	n.a.	282	n.a.	n.a.	985	294	0	1,561
Total nurses^(b)	52,078	n.a.	20,130	n.a.	n.a.	5,354	3,808	1,725	81,095
Other personal care staff	n.a.	n.a.	664	n.a.	n.a.	700	236	0	1,600
Diagnostic & allied health professionals	36,952	n.a.	24,435	n.a.	n.a.	2,727	3,793	1,410	69,317
Administrative & clerical staff	21,234	n.a.	6,881	n.a.	n.a.	803	866	1,050	30,834
Domestic & other staff	7,930	n.a.	358	n.a.	n.a.	416	0	41	8,745
Total salaries and wages	134,938	194,448	64,194	52,913	34,490	11,859	9,716	5,262	507,821

(a) For details on the establishments reporting to NCMHED, refer to Appendix 6.

(b) Total nurses includes trainee/pupil nurses.

n.a. not available.

Source: NCMHED.

Table 5.14: Non-salary and total recurrent expenditure (\$'000), public community mental health establishments,^(a) States and Territories, 2000-01

Recurrent expenditure category	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Payments to visiting medical officers	3,418	n.a.	4,387	n.a.	n.a.	119	692	0	8,615
Superannuation	10,019	n.a.	6,172	n.a.	n.a.	1,162	1,279	0	18,632
Drug supplies	3,225	n.a.	2,218	n.a.	n.a.	358	22	38	5,860
Medical & surgical supplies	511	n.a.	78	n.a.	n.a.	23	9	1	621
Food supplies	854	n.a.	71	n.a.	n.a.	344	90	9	1,367
Domestic services	2,067	n.a.	862	n.a.	n.a.	385	107	117	3,538
Repairs & maintenance	6,453	n.a.	710	n.a.	n.a.	80	35	64	7,341
Patient transport	3,008	n.a.	276	n.a.	n.a.	11	20	44	3,358
Administrative expenses	24,224	n.a.	8,042	n.a.	n.a.	278	501.67	1,008	34,054
Interest payments	3,713	n.a.	28	n.a.	n.a.	0	0.00	0.3	3,741
Depreciation	3,576	n.a.	977	n.a.	n.a.	0	3.74	0.0	4,557
Other recurrent expenditure	4,573	n.a.	2,750	n.a.	n.a.	3,710	3,012	1,286.6	15,332
Total non-salary expenditure^(b)	66,497	50,607	26,569	21,458	7,950	6,469	5,770	2,567	187,887
Total recurrent expenditure	201,436	245,055	90,764	74,371	42,440	18,328	15,487	7,829	695,709

(a) For details on the services reporting to NCMHED, refer to Appendix 6.

(b) Includes total for establishments which were not able to provide data by recurrent expenditure category. n.a. not available.

Source: NCMHED.

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 Appendix 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 National Public Hospital Establishment Database (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 as public psychiatric hospitals.

In 2000–01, there were 23 public psychiatric hospitals in Australia providing 9.7% of the separations with specialised psychiatric care and 33.7% of the total psychiatric care days (Tables 4.2 and 4.3). The number of separate establishments reported was similar to that reported in the previous 2 years (Table 5.10). The increase of one public psychiatric hospital over 1999–00 was due to the recategorisation of an existing establishment in Western Australia

When comparing between jurisdictions, note 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 Table A6.1 on the AIHW's web site, see page 239.

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 2000–01 year was 2,749 compared with 2,759 available beds for the 1999–00 year (Table 5.10), representing a 0.4% decline. The decline in public psychiatric hospital bed numbers indicates the continuation of the integration of mental health care into acute hospital and community settings.

The majority of public psychiatric hospital beds were located in capital cities and other metropolitan areas (82.6%). There were no public psychiatric hospital beds in remote areas (Table 5.15).

Data on the number of staff employed in public psychiatric hospitals by State and Territory are presented in Table 5.16. 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 5,601 FTE staff were employed in Australian public psychiatric hospitals in 2000–01 compared with 6,274 FTE staff reported for 1999–00 (10.7% decrease).

The majority of the FTE staff were *Nursing staff* (52.9% or 2,962 FTE staff), followed by *Domestic & other staff* (21.4% or 1,199 FTE staff). *Salaried medical officers* and *Diagnostic & allied health professionals* made up 5.3% (295 FTE staff) and 8.7% (485 FTE staff) of the public psychiatric hospital workforce respectively.

Box 5.1 Expenditure and staffing data for public psychiatric hospital-based services provided to non-admitted patients

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.

Table A6.1 (available on the AIHW's web site, see page 239) 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).

Tables 5.17 and 5.18 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.

The recurrent expenditure on public psychiatric hospitals in 2000–01 was \$416.7 million. The equivalent figure for the 1999–00 collection period was \$434.9 million, hence there was a decrease of 4.2% between 1999–00 and 2000–01.

The total recurrent expenditure reported to NPHEd for 2000–01 is higher than that reported to the National Survey of Mental Health Services (NSMHS) for 1999–00 (DHA 2002). 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 7.

The salary category made up 70.9% (\$281.5 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 53.1% (\$149.6 million) of the expenditure on salary and wages. Salary and wages payments for *Domestic & other staff* and *Salaried medical officers* made up 14.5% (\$40.8 million) and 10.2% (\$28.7 million) respectively.

Data on public psychiatric hospital revenue, excluding general revenue payments received from State or Territory governments, are presented in Table 5.19. The revenue received by Australian public psychiatric hospitals (other than in Tasmania) was \$22.0 million for 2000–01 compared with \$19.8 million for 1999–00. This amount is equivalent to 5.5% of the total recurrent expenditure. A relatively large proportion of the total revenue for public psychiatric hospitals was collected as patient revenue (73.4% or \$16.1 million). In comparison, the proportion of total revenue that was collected as patient revenue for all public hospitals was 49.9% (AIHW 2002c). The recoveries, which include income from the use of hospital facilities by salaried medical officers or private practitioners, was 6.8% (\$1.5 million) of the collected revenue.

Table 5.15: Public psychiatric hospitals, (a) available beds and available beds per 1,000 population by metropolitan, rural and remote region, States and Territories, 2000–01

Region	NSW	Vic	Qld	WA	SA	Tas	Total
Public psychiatric hospitals							
Metropolitan	7	1	4	2	1	4	19
Rural	2	0	2	0	0	0	4
Remote	0	0	0	0	0	0	0
Total all regions	9	1	6	2	1	4	23
Available beds^(b)							
Metropolitan	862	95	228	273	488	27	1,973
Rural	185	..	321	..	..	..	506
Remote	..	..	..	..	..	..	..
Total all regions	1,046	95	549	273	488	27	2,479
Available beds per 100,000 population^(c)							
Metropolitan	17.6	2.6	10.8	19.8	44.5	13.9	14.4
Rural	12.3	..	25.6	..	..	..	10.4
Remote	..	..	..	..	..	..	..
Total all regions	16.2	2.0	15.4	14.5	32.6	5.7	12.9

(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 Table A6.1.

(b) Average available beds where possible; otherwise available beds at 30 June 2001.

(c) Rates are crude rates based on 31 December 2000 estimated resident population.

.. not applicable.

Source: NPHED.

Table 5.16: Full-time-equivalent staff,^(a) Public psychiatric hospitals,^(b) States, 2000–01

Full-time-equivalent staff	NSW ^(c)	Vic ^(d)	Qld	WA	SA ^(e)	Tas	Total
Salaries medical officers	127	25	35	41	66	3	295
Nurses							
Registered nurses	n.a.	126	510	292	402	53	1,383
Enrolled nurses	n.a.	0	123	84	79	10	296
<i>Total nurses</i>	<i>1,283</i>	<i>126</i>	<i>633</i>	<i>376</i>	<i>482</i>	<i>63</i>	<i>2,962</i>
Other personal care staff	..	6	59	0	..	n.a.	65
Diagnostic & allied health professionals	219	22	106	77	56	5	485
Administrative & clerical staff	311	5	108	76	85	9	594
Domestic & other staff	528	2	267	140	170	93	1,199
Total staff	2,468	186	1,207	710	859	173	5,601

(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 Table A6.1.

(b) Where average full-time-equivalent staff numbers were not available, staff numbers at 30 June 2001 were used.

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

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

(e) 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 5.17: Salaries and wages expenditure (\$'000), public psychiatric hospitals,^(a) States, 2000–01

	NSW ^(b)	Vic ^(c)	Qld	WA	SA ^(d)	Tas	Total
Salaries medical officers	15,319	n.a.	3,466	5,107	4,571	205	28,668
Nurses							
Registered nurses	n.a.	n.a.	28,932	15,366	21,395	3,084	68,778
Enrolled nurses	n.a.	n.a.	5,713	3,030	4,052	424	13,220
Total nurses	67,568	n.a.	34,645	18,396	25,447	3,509	149,560
Other personal care staff	n.a.	n.a.	2,387	0	n.a.	n.a.	2,387
Diagnostic & allied health professionals	10,993	n.a.	5,397	3,372	5,021	294	25,077
Administrative & clerical staff	11,854	n.a.	4,637	2,986	3,434	360	23,271
Domestic & other staff	18,028	n.a.	9,823	4,750	4,667	0	40,768
Total salaries & wages^(e)	123,762	11,757	60,355	34,610	43,142	7,867	281,494

(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 Table A6.1.

(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*.

(e) Includes recurrent expenditure not allocatable to salary expenditure category.
n.a. not available.

Source: NPHED.

Table 5.18: Non-salary expenditure and total recurrent expenditure (\$'000), public psychiatric hospitals,^(a) States, 2000–01

	NSW ^(b)	Vic ^(c)	Qld ^(d)	WA ^(e)	SA ^(f)	Tas	Total
Payments to visiting medical officers	1,291	0	1,194	0	1,340	0	3,825
Superannuation	11,885	0	5,555	3,217	3,551	815	25,023
Drug supplies	4,423	0	2,436	1,206	1,205	141	9,411
Medical & surgical supplies	1,603	0	309	129	170	25	2,237
Food supplies	4,312	0	1,602	1,036	1,119	281	8,351
Domestic services	3,502	0	3,656	1,001	1,663	451	10,273
Repairs & maintenance	4,156	0	1,318	688	2,674	189	9,024
Patient transport	62	0	2	78	672	12	826
Administrative expenses	15,157	0	6,061	2,224	5,225	75	28,742
Interest payments	15	0	0	0	0	0	15
Depreciation	8,458	0	10,347	1094	0	0	19,899
Other recurrent expenditure	2,919	0	4,148	3168	739	694	11,668
Total non-salary expenditure^(g)	57,782	5,901	36,628	13,842	18,358	2,683	135,194
Total recurrent expenditure	181,545	17,658	96,983	48,452	61,500	10,550	416,688

(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 Table A6.1.

(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) Includes recurrent expenditure not allocatable to salary expenditure category.

Source: NPHED.

Public acute hospitals

In 2000–01, public acute hospitals provided 46.4% of the separations with specialised psychiatric care and 45.0% of the total psychiatric care days (Tables 4.2 and 4.3). In 2000–01, there were 111 public acute hospitals with specialised psychiatric units or wards in Australia (Table 5.20).

New South Wales and Victoria (35 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 (71.1%).

Private psychiatric hospitals

In 2000–01, private hospitals provided 43.8% of the separations with specialised psychiatric care and 21.2% of the total psychiatric care days (Tables 4.2 and 4.3). 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 for which 50% or more of the patient days were for psychiatric patients. There were 24 private hospitals designated as psychiatric during 2000–01 (Table 5.21), compared with 24 in 1999–00 and 26 in 1998–99 (Table 5.10). The average number of available private psychiatric hospital beds for 2000–01 (1,369) remained the same as in the previous year (Table 5.10).

There was a decline in the number of FTE staff compared with the previous year. In 2000–01, the average number of FTE staff employed by private sector psychiatric hospitals was 1,566 (Table 5.22). This was a 0.4% decrease on the 1999–00 figure of 1,572.

There were increases for both expenditure and revenue. In 2000–01, the recurrent expenditure for private psychiatric hospitals in Australia was \$133.5 million, an increase of 9.0% from \$122.5 million in 1999–00 (Tables 5.10 and 5.24). Private psychiatric hospital expenditure was 25.2% of the total psychiatric hospital expenditure in Australia. The total revenue for private psychiatric hospitals for 2000–01 exceeded total expenditure at \$156.6 million (Table 5.25).

Table 5.19: Revenue (\$'000), public psychiatric hospitals,^(a) States, 2000–01

Revenue	NSW	Vic	Qld	WA	SA	Tas ^(b)	Total
Patient revenue ^(c)	9,893	0	3,069	609	1,928	638	16,137
Recoveries	1,295	163	22	6	1	0	1,487
Other revenue	2,512	287	698	195	548	115	4,355
Total revenue	13,699	450	3,789	810	2,477	753	21,978

(a) For details on the hospitals reporting to NPHED, refer to Table A6.1 (on AIHW's web site, see page 239).

(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.

Source: NPHED.

Table 5.20: Public acute care hospitals with psychiatric units or wards,^(a) by metropolitan, rural and remote region, States and Territories, 2000–01

Region	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Metropolitan	23	26	10	8	8	1	2	1	79
Rural	12	9	6	2	0	2	0	0	31
Remote	0	0	0	0	0	0	..	1	1
Total	35	35	16	10	8	3	2	2	111

(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.

.. not applicable.

Source: NPHED.

Table 5.21: Private psychiatric hospitals, available beds and available beds per 1,000 population, States and Territories, 2000-01

	NSW & ACT	Vic	Qld	WA, SA & Tas	NT	Total
Private psychiatric hospitals	9	5	4	6	0	24
Available beds ^(a)	471	304	289	305	..	1,369
Available beds per 100,000 population ^(b)	6.8	6.3	8.0	7.9	..	7.1

(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 5.22: Full-time-equivalent staff,^(a) private psychiatric hospitals, States and Territories, 2000-01

	NSW & ACT	Vic	Qld	WA, SA & Tas	NT	Total
Full-time-equivalent staff						
Salaries medical officers	n.a.	3	n.a.	n.a.	..	24
Total nurses ^(b)	258	208	191	178	..	836
Diagnostic & allied health professionals	n.a.	35	n.a.	n.a.	..	151
Administrative & clerical staff	111	63	57	46	..	277
Domestic & other staff ^(c)	105	54	55	64	..	279
Total full-time-equivalent staff	555	363	331	317	..	1,566

(a) Where average full-time-equivalent staff numbers were not available, staff numbers at 30 June 2001 were used.

(b) Includes *Nursing administrators, Nurse educators, Other registered nurses, Enrolled 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 5.23: Salaries and wages expenditure (\$'000), private psychiatric hospitals, States and Territories, 2000-01

Recurrent expenditure category	NSW & ACT	Vic	Qld	WA, SA & Tas	NT	Total
Salaries medical officers	n.a.	224	n.a.	n.a.	..	2,033
Total nurses ^(a)	14,320	11,565	9,760	8,592	..	44,237
Diagnostic & allied health professionals	n.a.	1,663	n.a.	n.a.	..	6,989
Administrative & clerical staff	4,536	2,821	2,626	1,996	..	11,979
Domestic & other staff ^(b)	3,050	1,805	1,613	2,148	..	8,616
Total salaries and wages	26,245	18,077	15,371	14,141	..	73,834

(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 5.24: Non-salary expenditure (\$'000), private psychiatric hospitals and total recurrent expenditure, States and Territories, 2000-01

Recurrent expenditure category	NSW & ACT	Vic	Qld	WA, SA & Tas	NT	Total
Superannuation	2,124	1,348	945	1,142	..	5,559
Payroll tax	721	1,056	n.a.	n.a.	..	3,097
On-costs excluding superannuation and payroll tax ^(a)	2,433	909	553	694	..	4,589
Drug supplies	n.a.	313	126	n.a.	..	1,863
Medical & surgical supplies	n.a.	160	n.a.	67	..	1,906
Food supplies	1,797	1,103	808	913	..	4,621
Domestic services	762	580	351	470	..	2,163
Repairs & maintenance	768	856	333	354	..	2,311
Patient transport	n.a.	n.a.	n.a.	n.a.	..	73
Administrative expenses	10,761	3,895	1,619	3,348	..	19,623
Interest payments	1,139	170	n.a.	n.a.	..	1,336
Depreciation	1,318	n.a.	859	n.p.	..	n.a.
Contract services (excluding medical practitioners)	3,297	739	2,164	831	..	7,031
Other recruitment expenditure	n.a.	n.a.	n.a.	n.a.	..	n.a.
Total non-salary expenditure	29,069	12,225	8,758	9,605	..	59,657
Total recurrent expenditure	55,314	30,302	24,129	23,746	..	133,491

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

.. not applicable.

n.a. not available.

Source: PHEC.

Table 5.25: Revenue (\$'000), private psychiatric hospitals, States and Territories, 2000-01

Revenue	NSW & ACT	Vic	Qld	WA, SA & Tas	NT	Total
Patient revenue ^(a)	n.a.	35,772	27,920	29,048	..	147,324
Recoveries	2,808	n.a.	n.a.	935	..	6,944
Other ^(b)	n.a.	2,705	821	132	..	2,358
Total revenue	59,294	38,476	28,741	30,115	..	156,626

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

(b) Other revenue includes investment income, income from charities, bequests, visitor's meals and accommodation and kiosk sales.

.. not applicable.

n.a. not available.

Source: PHEC.