

7 Specialised mental health care resources

This chapter presents an overview of available data on the characteristics of the psychiatrist and mental health nursing labour forces. It also describes the characteristics of services delivering specialised mental health care in Australia. The services described include government-operated community and residential mental health services, public and private psychiatric hospitals, and psychiatric units or wards in public acute care hospitals.

7.1 Specialised mental health care labour force

This section presents information on the characteristics of psychiatrists using data from the national Medical labour force survey on psychiatrists and Medicare data for private psychiatrists (from the Department of Health and Ageing) and of mental health nurses using data from the national Nursing labour force survey. Background information on these three collections is presented in Appendix 1.

Psychiatrists

National Medical Labour Force Survey data on the number of specialists practising as psychiatrists and psychiatry trainees are presented in Tables 7.1 to 7.4. For the purposes of the survey, a psychiatrist was defined as a medical practitioner who identified as being a specialist – that is, a person who holds a qualification awarded by a specialist college; for example, the Royal Australian and New Zealand College of Psychiatrists (RANZCP) – and whose main specialty of practice was psychiatry. 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. Psychiatrists may work as clinicians or non-clinicians. All psychiatrists-in-training work as clinicians. The work of non-clinicians may include administration, teaching, research and public health. The data exclude medical practitioners practising psychiatry as a second or third speciality.

To enable meaningful comparisons in the size of the psychiatrist labour force, a measure that takes into account the effect of movements between part-time and full-time hours of work, the full-time-equivalent (FTE) is used. This measure is based on the total hours worked by all psychiatrists and psychiatry trainees, divided by 45 hours (45 hours being consistent with the typical working week for specialists). This provides an indication of how many 45-hour-week workloads are being worked by psychiatrists and psychiatry trainees, regardless of the numbers working full time or part time.

In 2003 it was estimated that there were 3,026 psychiatrists and psychiatrists-in-training, comprising 2,395 specialists practising psychiatry as their main speciality and 631 psychiatrists-in-training (Table 7.1). There were 2,810 FTE psychiatrists and psychiatrists-in-training, representing a rate of 14.1 FTE per 100,000 population. There were 2,171 FTE specialists practising psychiatry as their main speciality and 637 FTE psychiatrists-in-training.

Between 1999 and 2003 the number of FTE psychiatrists and psychiatrists-in-training increased by 10.5%, from 2,543 to 2,810; an average annual increase of 2.5%. For the majority of FTE psychiatrists (86.9%), their main place of work was in a major city (Table 7.1 and Figure 1.23), and this has been the case since 1999. Major cities had 18.5 FTE psychiatrists and

psychiatrists-in-training per 100,000 population, and there were 5.0, 3.5 and 2.5 FTE psychiatrists and psychiatrists-in-training per 100,000 population in inner regional, outer regional, remote and very remote areas respectively. Little or no variation has been seen in this pattern since 1999.

Of the estimated 3,026 psychiatrists and psychiatrists-in-training in Australia in 2003, 1,972 (65.2%) were male and 1,054 (34.8%) were female (Table 7.2). Only 30.7% of FTE psychiatrists and psychiatrists-in-training were female, reflecting the difference in average weekly hours worked by males and females.

The average annual increase in FTE female psychiatrists and psychiatrists-in-training between 1999 and 2003 (3.4%) was greater than for males (2.0%) (Table 7.2). Between 1999 and 2003, the proportion of female FTE trainees rose from 42.0% to 51.2%.

In 2003 the majority of FTE psychiatrists in Australia were clinicians (1,964), compared with 208 non-clinicians. Most clinician and non-clinician FTE psychiatrists were males (74.7% and 78.8% respectively) (Table 7.2).

The main age group for FTE psychiatrists in 2003 was 45–54 years (32.7% for clinicians and 35.1% for non-clinicians), and the majority of FTE psychiatrists-in-training were aged under 35 years (56.0%) (Table 7.3). The proportion of FTE psychiatrists who were clinicians was between 88.9% and 98.4% across all age groups. There were 523 FTE psychiatrists working as clinicians in the 55–64 age group, and 214 FTE psychiatrists aged 65 and over.

In 2003 the jurisdiction with the highest number of FTE psychiatrists and psychiatrists-in-training per 100,000 population was the Northern Territory (21.4), followed by Victoria (17.9). Queensland had the lowest, with 10.2 per 100,000 population (Table 7.4).

Psychiatrists in private practice

Based on Medicare Benefits Schedule fee income, the estimated number of full-time-equivalent private psychiatrists for 2004–05 was 1,024.7 (Table 7.5). The majority were located in major cities (932.0, or 91.0%). Victoria (7.0) was the jurisdiction with the highest number of full-time-equivalent private psychiatrists per 100,000 population.

Table 7.1: Psychiatrists and psychiatrists-in-training^(a), by Remoteness Area of main place of work, Australia, 1999 to 2003

	1999	2000	2001	2002	2003	Average annual change (%)
Psychiatrists (clinicians and non-clinicians)^(b)						
Major city	1,825	1,871	1,805	2,019	2,066	3.2
Inner regional	185	154	180	221	203	2.2
Outer regional	55	57	49	49	53	-1.0
Remote and very remote	10	6	7	8	10	-0.8
Not reported	33	66	60	70	63	17.5
Total	2,109	2,153	2,100	2,367	2,395	3.2
Psychiatrists-in-training^(c)						
Major city	500	495	554	509	549	2.4
Inner regional	23	38	35	34	36	11.2
Outer regional	16	17	10	17	23	9.8
Remote and very remote	4	3	3	1	3	-11.0
Not reported	16	22	29	26	21	8.1
Total	559	575	632	587	631	3.1
Total psychiatrists and psychiatrists-in-training						
Major city	2,324	2,366	2,359	2,527	2,614	3.0
Inner regional	209	191	215	256	238	3.3
Outer regional	71	74	59	65	76	1.7
Remote and very remote	15	10	10	9	13	-3.5
Not reported	48	87	89	97	84	15.0
Total	2,667	2,728	2,732	2,954	3,026	3.2
FTE^(d) psychiatrists (clinicians and non-clinicians)^(b)						
Major city	1,715	1,779	1,696	1,866	1,887	2.4
Inner regional	171	145	161	197	172	0.1
Outer regional	52	48	40	45	50	-1.1
Remote and very remote	9	6	7	6	9	-2.3
Not reported	34	53	56	64	49	9.5
Total	1,977	2,038	1,960	2,178	2,171	2.4
FTE^(d) psychiatrists-in-training^(c)						
Major city	506	494	554	501	554	2.3
Inner regional	23	39	34	34	36	11.4
Outer regional	18	18	11	14	21	4.5
Remote and very remote	4	4	4	1	4	-3.3
Not reported	14	21	30	24	22	12.5
Total	566	576	632	574	637	3.0
FTE^(d) psychiatrists and psychiatrists-in-training						
Major city	2,221	2,271	2,249	2,364	2,440	2.4
Inner regional	194	184	194	231	208	1.7
Outer regional	70	67	52	59	71	0.5
Remote and very remote	14	10	10	7	13	-2.7
Not reported	48	77	87	88	73	10.9
Total	2,543	2,613	2,592	2,750	2,810	2.5
FTE^(d) psychiatrists and psychiatrists-in-training per 100,000 population^(e)						
Major city	17.7	17.9	17.5	18.1	18.5	1.1
Inner regional	5.0	4.6	4.8	5.7	5.0	0.1
Outer regional	3.5	3.3	2.6	2.9	3.5	-0.1
Remote and very remote	2.8	1.9	2.0	1.4	2.5	-2.9
Not reported	..	..	..	..	..	..
Total	13.4	13.6	13.4	14.0	14.1	1.3

- (a) These medical practitioner numbers were estimated using Medical Labour Force Survey data, which have been weighted to match the available registration data by assuming that the characteristics of non-respondents and respondents were the same. Disaggregation of psychiatrists as clinician and non-clinician is not available by Remoteness Area.
- (b) Psychiatrists are those that identified themselves as being a specialist—that is, a person who holds a qualification awarded by a specialist college; for example, the Royal Australian and New Zealand College of Psychiatrists—and whose main speciality of practice is psychiatry. Excludes medical practitioners practising psychiatry as a second or third speciality.
- (c) A medical practitioner who has been accepted by the RANZCP into a training position supervised by a member of the college.
- (d) Full-time equivalent is based on a typical working week for specialists of 45 hours.
- (e) Rates are crude rates based on the estimated resident population of Australia at 31 December of the reference year.
- .. Not applicable.

Source: AIHW Medical Labour Force Survey.

Table 7.2: Psychiatrists and psychiatrists-in-training^(a), by sex, Australia, 1999 to 2003

	1999	2000	2001	2002	2003	Average annual change (%)
Psychiatrists^(b)						
Clinicians						
Male	1,397	1,443	1,376	1,505	1,525	2.2
Female	594	547	564	661	652	2.4
<i>Total^(c)</i>	<i>1,991</i>	<i>1,989</i>	<i>1,940</i>	<i>2,167</i>	<i>2,177</i>	<i>2.3</i>
Non-clinicians						
Male	83	111	108	151	157	17.3
Female	35	53	52	49	61	14.9
<i>Total^(c)</i>	<i>118</i>	<i>164</i>	<i>160</i>	<i>200</i>	<i>218</i>	<i>16.6</i>
Psychiatrists-in-training^(d)						
Male	309	323	313	290	290	-1.6
Female	249	252	319	297	341	8.2
Total^(c)	559	575	632	587	631	3.1
Total psychiatrists and psychiatrists-in-training						
Male	1,790	1,876	1,797	1,946	1,972	2.5
Female	878	852	934	1,008	1,054	4.7
Total^(c)	2,667	2,728	2,732	2,954	3,026	3.2
FTE^(e) psychiatrists^(b)						
Clinicians						
Male	1,375	30	1,342	1,469	1,467	1.6
Female	481	437	456	519	494	0.7
<i>Total^(c)</i>	<i>1,858</i>	<i>1,870</i>	<i>1,797</i>	<i>1,989</i>	<i>1,964</i>	<i>1.4</i>
Non-clinicians						
Male	86	122	108	144	164	17.5
Female	37	47	53	46	45	5.0
<i>Total^(c)</i>	<i>123</i>	<i>168</i>	<i>161</i>	<i>190</i>	<i>208</i>	<i>14.0</i>
FTE^(e) psychiatrists-in-training^(d)						
Male	328	336	327	299	310	-1.4
Female	238	240	305	275	326	8.2
<i>Total^(c)</i>	<i>566</i>	<i>576</i>	<i>632</i>	<i>574</i>	<i>637</i>	<i>3.0</i>
FTE^(e) total psychiatrists and psychiatrists-in-training						
Male	1,790	1,889	1,777	1,911	1,941	2.0
Female	757	725	814	840	864	3.4
Total^(c)	2,543	2,613	2,592	2,750	2,810	2.5
FTE^(e) total psychiatrists and psychiatrists-in-training per 100,000 population^(f)						
Male	18.9	19.8	18.3	19.5	19.5	0.8
Female	7.9	7.5	8.3	8.4	8.6	2.1
Total^(c)	13.4	13.6	13.3	13.9	14.1	1.3

- (a) These medical practitioner numbers were estimated using Medical Labour Force Survey data, which have been weighted to match the available registration data by assuming that the characteristics of non-respondents and respondents were the same.
- (b) Psychiatrists are those that identified themselves as being a specialist—that is, a person who holds a qualification awarded by a specialist college; for example, the Royal Australian and New Zealand College of Psychiatrists—and whose main speciality of practice is psychiatry. Excludes medical practitioners practising psychiatry as a second or third speciality.
- (c) Figures may not add to totals due to rounding.
- (d) A medical practitioner who has been accepted by the RANZCP into a training position supervised by a member of the college.
- (e) Full-time equivalent is based on a typical working week for specialists of 45 hours.
- (f) Rates are crude rates based on the estimated resident population of Australia at 31 December of the reference year.

Source: AIHW Medical Labour Force Survey.

Table 7.3: Psychiatrists and psychiatrists-in-training^(a), by age, Australia, 1999 to 2003

	1999	2000	2001	2002	2003	Average annual change (%)
Psychiatrists^(b)						
Clinicians						
Less than 35	128	80	79	72	72	-13.4
35-44	565	596	575	539	583	0.8
45-54	643	620	547	678	659	0.6
55-64	408	471	506	598	563	8.4
65 and over	247	222	232	279	300	5.0
Total^(c)	1,991	1,989	1,940	2,167	2,177	2.3
Non-clinicians						
Less than 35	7	13	13	6	1	-38.5
35-44	29	55	58	53	71	25.1
45-54	40	51	44	74	69	14.6
55-64	29	28	28	44	51	15.2
65 and over	13	17	18	23	36	29.0
Total^(c)	118	164	160	200	218	16.6
Psychiatrists-in-training^(d)						
Less than 35	275	347	392	346	350	6.2
35-44	159	139	132	148	174	2.3
45-54	95	82	100	93	108	3.3
55-64	15	5	3	0	0	-100.0
65 and over	15	3	6	0	0	-100.0
Total^(c)	559	575	632	587	631	3.1
Total psychiatrists and psychiatrists-in-training						
Less than 35	409	440	483	425	423	0.8
35-44	754	790	765	741	828	2.4
45-54	778	753	691	845	835	1.8
55-64	452	505	536	642	614	8.0
65 and over	274	242	256	302	325	4.4
Total^(c)	2,667	2,728	2,732	2,954	3,026	3.2
FTE^(e) psychiatrists^(b)						
Clinicians						
Less than 35	117	74	68	61	61	-15.0
35-44	516	556	532	489	520	0.2
45-54	644	632	549	669	643	0.0
55-64	392	452	488	564	523	7.5
65 and over	185	155	159	201	214	3.7
Total^(c)	1,858	1,870	1,797	1,989	1,964	1.4
Non-clinicians						
Less than 35	7	14	4	9	1	-38.5
35-44	29	56	63	49	65	22.4
45-54	46	58	51	78	73	12.2
55-64	30	31	31	36	50	13.6
65 and over	11	10	12	18	19	14.6
Total^(c)	123	168	161	190	208	14.0
FTE^(e) psychiatrists-in-training^(d)						
Less than 35	288	351	390	350	357	5.5
35-44	150	136	133	135	173	3.6
45-54	98	82	100	89	107	2.2
55-64	16	4	3	0	0	-100.0
65 and over	14	2	6	0	0	-100.0
Total^(c)	566	576	632	574	637	3.0
FTE^(e) total psychiatrists and psychiatrists-in-training						
Less than 35	412	440	462	420	420	0.5
35-44	697	747	728	673	758	2.1
45-54	786	773	700	836	822	1.1
55-64	439	487	522	599	573	6.9
65 and over	210	167	177	219	233	2.6
Total^(c)	2,543	2,613	2,592	2,750	2,810	2.5

- (a) These medical practitioner numbers were estimated using Medical Labour Force Survey data, which have been weighted to match the available registration data by assuming that the characteristics of non-respondents and respondents were the same.
- (b) Psychiatrists are those that identified themselves as being a specialist—that is, a person who holds a qualification awarded by a specialist college; for example, the Royal Australian and New Zealand College of Psychiatrists—and whose main speciality of practice is psychiatry. Excludes medical practitioners practising psychiatry as a second or third speciality.
- (c) Figures may not add to totals due to rounding.
- (d) A medical practitioner who has been accepted by the RANZCP into a training position supervised by a member of the college.
- (e) Full-time equivalent is based on a typical working week for specialists of 45 hours.

Source: AIHW Medical Labour Force Survey.

Table 7.4: Psychiatrists and psychiatrists-in-training^(a), states and territories, 1999 to 2003

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(b)
Psychiatrists^(c)									
Clinicians									
1999	656	617	293	153	176	50	24	18	1,991
2000	631	599	294	176	199	38	35	17	1,989
2001	534	659	293	173	192	46	32	11	1,940
2002	691	698	321	157	194	51	44	12	2,167
2003	648	704	331	164	207	57	50	15	2,177
Average annual change (%)	-0.3	3.4	3.1	1.8	4.1	3.3	20.1	-4.5	2.3
Non-clinicians									
1999	52	32	8	13	13	0	0	0	118
2000	50	47	24	23	15	1	3	0	164
2001	56	52	23	14	12	2	3	0	160
2002	78	62	20	13	17	6	4	0	200
2003	75	72	27	16	17	6	4	0	218
Average annual change (%)	9.6	22.5	35.5	5.3	6.9	394.9	347.2	0.0	16.6
Psychiatrists-in-training^(d)									
1999	190	124	100	68	58	2	11	6	559
2000	188	136	78	79	66	7	12	8	575
2001	227	167	68	69	76	9	11	5	632
2002	210	191	48	50	66	6	4	12	587
2003	232	186	57	63	67	6	6	15	631
Average annual change (%)	5.1	10.7	-13.1	-1.9	3.7	31.6	-14.1	25.7	3.1
Total psychiatrists and psychiatrists-in-training									
1999	898	773	402	234	247	52	39	24	2,667
2000	869	783	396	279	280	47	50	25	2,728
2001	817	878	384	256	279	56	46	16	2,732
2002	978	952	388	220	276	62	53	24	2,954
2003	955	963	415	243	291	70	59	30	3,026
Average annual change (%)	1.6	5.6	0.8	0.9	4.2	7.7	10.9	5.7	3.2
FTE^(e) psychiatrists^(c)									
Clinicians									
1999	586	583	286	141	162	49	26	23	1,858
2000	582	578	288	154	184	35	30	18	1,870
2001	495	621	277	143	185	40	23	12	1,797
2002	638	635	302	139	179	41	39	13	1,989
2003	596	625	305	149	192	47	34	17	1,964
Average annual change (%)	0.4	1.8	1.6	1.4	4.3	-1.0	6.9	-7.3	1.4
Non-clinicians									
1999	50	37	9	15	13	0	0	0	123
2000	51	48	21	28	17	0	3	0	168
2001	62	42	25	17	13	0	2	0	161
2002	74	60	19	12	15	6	4	0	190
2003	68	73	24	16	17	7	3	0	208
Average annual change (%)	8.0	18.5	27.8	1.6	6.9	414.4	316.2	-100.0	14.0

(continued)

Table 7.4 (continued): Psychiatrists and psychiatrists-in-training^(a), states and territories, 1999 to 2003

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(b)
	FTE^(e) psychiatrists-in-training^(d)								
1999	197	127	98	68	52	2	13	9	566
2000	196	135	76	78	62	7	14	9	576
2001	223	173	67	74	70	8	12	5	632
2002	212	189	45	46	60	6	4	11	574
2003	235	189	62	65	60	6	5	13	637
Average annual change (%)	4.5	10.4	-10.8	-1.1	3.6	31.6	-21.2	9.6	3.0
	FTE^(e) total psychiatrists and psychiatrists-in-training								
1999	834	745	393	224	228	51	39	31	2,543
2000	828	762	386	260	263	42	47	27	2,613
2001	779	837	369	235	269	48	38	17	2,592
2002	924	884	367	197	255	54	48	24	2,750
2003	898	886	391	229	270	60	42	30	2,810
Average annual change (%)	1.9	4.4	-0.1	0.6	4.3	4.1	1.9	-0.8	2.5
	FTE^(e) total psychiatrists and psychiatrists-in-training per 100,000 population^(f)								
1999	12.9	15.8	11.1	12	15.1	10.9	12.5	16.2	13.4
2000	12.7	16	10.7	13.8	17.4	8.8	14.9	13.9	13.6
2001	11.8	17.3	10.1	12.3	17.7	10.2	11.8	8.6	13.3
2002	13.9	18.1	9.8	10.2	16.7	11.3	14.8	12.3	13.9
2003	13.4	17.9	10.2	11.7	17.6	12.5	13.1	15.1	14.1
Average annual change (%)	1.0	3.2	-2.1	-0.6	3.9	3.5	1.2	-1.7	1.3

(a) These medical practitioner numbers were estimated using Medical Labour Force Survey data, which have been weighted to match the available registration data by assuming that the characteristics of non-respondents and respondents were the same.

(b) Figures may not add to totals due to rounding.

(c) Psychiatrists identified themselves as being a specialist—that is, a person who holds a qualification awarded by a specialist college; for example, the Royal Australian and New Zealand College of Psychiatrists—and whose main specialty of practice is psychiatry. Excludes medical practitioners practising psychiatry as a second or third specialty.

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

(e) Full-time equivalent is based on a typical working week for specialists of 45 hours.

(f) Rates are crude rates based on the estimated resident population of Australia at 31 December of the reference year.

Source: AIHW Medical Labour Force Survey.

Table 7.5: Medicare-funded full-time-equivalent private psychiatrists^(a), by Remoteness Area, states and territories, 2004–05

	NSW	Vic	Qld	WA	Tas	ACT	SA and NT ^(b)	Total
Remoteness Area	Number							
Major cities	292.0	330.1	140.3	55.2	..	11.7	102.7	932.0
Inner regional	21.3	12.4	20.0	1.6	20.8	..	0.9	76.9
Outer regional	1.2	1.2	6.0	n.a.	n.a.	..	2.4	10.9
Remote	0.0	0.0	0.0	n.a.	n.a.	..	0.4	0.5
Very remote	0.0	..	0.2	n.a.	n.a.	..	0.1	0.3
Total all regions	316.8	344.1	167.3	56.9	20.8	12.1	106.7	1,024.7
	Per 100,000 population^(c)							
Major cities	6.1	9.2	7.0	4.0	..	3.6	9.4	7.1
Inner regional	1.5	1.2	2.0	0.7	12.8	..	0.4	1.9
Outer regional	0.3	0.5	0.9	n.a.	n.a.	..	0.8	0.5
Remote	0.0	0.3	0.0	n.a.	n.a.	..	0.5	0.2
Very remote	0.0	..	0.4	n.a.	n.a.	..	0.2	0.2
Total all regions	4.7	7.0	4.4	2.9	4.4	3.7	6.2	5.2

(a) Includes trainee psychiatrists.

(b) Figures for South Australia and the Northern Territory have been combined for confidentiality reasons.

(c) The rate per 100,000 population is a crude rate based on the estimated resident population at 30 June 2003. Figures for 2004 were not available at time of publication.

.. Not applicable.

Source: Medicare data from DHA.

Mental health nurses

The following information is based on the AIHW national nursing labour force biennial collections for the period 1999 to 2003, the latest years for which there are data. Additional information on this collection is presented in Appendix 1 and further details on the national nursing labour force are available in the *Nursing and Midwifery Labour force 2003* report (AIHW 2005g).

Mental health nurses are defined as nurses who indicate that their main area of nursing is in the psychiatric or mental health field. To enable meaningful comparisons of the size of the nursing labour force, a measure that takes into account the effect of movements between part-time and full-time hours of work, the full-time-equivalent measure, is used. This measure is based on the total hours worked by all nurses, divided by 35 hours (35 hours being consistent with the Australian Bureau of Statistics cut-off for part-time work). This provides an indication of how many 35-hour-week workloads are being worked by nurses, regardless of the numbers working full time or part time.

In 2003 there were 12,354 mental health nurses and 12,883 FTE mental health nurses, representing a rate of 64.8 FTE nurses per 100,000 population (Table 7.6).

Between 1999 and 2003 the number of mental health nurses declined from 13,416 to 12,354, with an average annual decrease of 2.0%. The number of FTE mental health nurses for this period showed a smaller decrease (from 12,995 FTEs to 12,883 FTEs, or a 0.2% decrease each year on average). This reflected an increase in average working hours – from 33.9 hours in 1999 to 36.5 hours in 2003. FTEs per 100,000 population also declined, from 68.7 in 1999 to 64.8 in 2003, reflecting both the decrease in FTE and the grown in population. This represented an average annual decrease of 1.4%.

The main place of work for the majority of mental health nurses was in a major city (8,663 FTE), followed by inner regional areas (2,867 FTE).

The decline in FTE rates per 100,000 population was not consistent across all geographic areas. While the FTE rate in major cities remained relatively stable (66.0 in 1999 and 65.7 in 2003), the FTE rates for most other areas declined during this time – for example, from 38.6 in

Table 7.6: Mental health nurses^{(a)(b)}, by Remoteness Area of main place of work, Australia, 1999 to 2003

	1999	2001	2003	Average annual change (%)
Number				
Major city	8,439	7,663	8,262	-0.5
Inner regional	2,679	2,583	2,795	1.1
Outer regional	812	558	583	-7.9
Remote and Very remote	139	113	58	-19.6
Not reported	1,348	1,176	656	-16.5
Total	13,416	12,094	12,354	-2.0
FTE^(c)				
Major city	8,270	7,641	8,663	1.2
Inner regional	2,595	2,502	2,867	2.5
Outer regional	768	553	632	-4.8
Remote and Very remote	133	108	64	-16.7
Not reported	1,228	1,139	647	-14.8
Total	12,995	11,956	12,883	-0.2
FTE^(c) per 100,000 population^(d)				
Major city	66.0	59.4	65.7	-0.1
Inner regional	66.4	62.2	69.0	1
Outer regional	38.6	27.5	31.0	-5.3
Remote and Very remote	26.6	21.5	12.7	-16.9
Not reported	..	..	..	..
Total	68.7	61.6	64.8	-1.4

(a) Mental health nurse numbers were estimated using Nursing Labour Force Survey data weighted to match the available registration data by assuming that the characteristics of non-respondents and respondents were the same.

(b) Includes registered and enrolled nurses.

(c) Full-time equivalent is based on a typical working week of 35 hours.

(d) Rates are crude rates based on the estimated resident population of Australia at 30 June of the reference year.

.. Not applicable.

Source: AIHW Nursing Labour Force Survey, 1997 and 2001; AIHW Nursing and Midwifery Labour Force Survey, 2003.

1999 to 31.0 in 2003 in outer regional areas (an average annual decrease of 5.3%). Rates for remote and very remote areas appear to show a decrease, but as the numbers these rates are based on are quite small, these figures should be used with caution.

Information on the number of mental health nurses by age and sex is presented in Table 7.7. In 2003 just over two-thirds (68.0%) of mental health nurses were female. The majority of mental health nurses were in the 45–54 years and 35–44 years age groups (37.8% and 28.9%, respectively). Just under two-thirds of FTE mental health nurses were female (65.9%), slightly lower than the number of female mental health nurses, reflecting the difference in average weekly hours worked by male and female mental health nurses (38.9 hours and 35.4 hours, respectively).

Between 1999 and 2003 there was an ageing of the mental health nursing workforce, with declines in the number of mental health nurses aged between 25 years and 44 years (for example, 8.1% average annual decrease for those aged between 35 and 44 years) and increases in those aged 45 years or more (for example, an average annual increase of 8.7% for mental health nurses aged between 55 and 64 years).

The changes in numbers of mental health nurses between 1999 and 2003 was different for males and females. The number of female mental health nurses decreased during this period for all age groups below 55 years, particularly for those aged between 35 and 44 years (9.1% average annual decrease). In contrast, for males there were decreases only for those aged between 25 and 44 years.

Table 7.8 provides information on the number of mental health nurses and FTE mental health nurses by state and territory between 1999 and 2003. Most states and territories showed a decrease in the number of mental health nurses during this time. Although there are apparently large decreases in the number of mental health nurses in Western Australia and the Northern Territory between 1999 and 2003, response rates for the 2003 Nursing and Midwifery Labour Force survey from these jurisdictions were very low, so these data need to be used with caution. In New South Wales and Victoria the number of male mental health nurses increased during this time (by 3.8% and 7.2% respectively).

During the same period there were decreases in the number of female FTE mental health nurses for all states and territories except New South Wales. In contrast, the number of male FTE mental health nurses increased in all states and territories except Western Australia, Tasmania and the Northern Territory.

Table 7.7: Mental health nurses^{(a)(b)} by age and sex, Australia, 1999 to 2003

	1999	2001	2003	Average annual change (%)
Number				
Males				
15–24	64	52	72	3
25–34	580	576	488	–4.2
35–44	1,385	1,251	1,094	–5.7
45–54	1,296	1,543	1,639	6
55–64	357	453	603	14
65 and over	38	43	61	12.6
<i>Total</i>	3,721	3,918	3,957	1.5
Females				
15–24	279	218	278	–0.1
25–34	1,790	1,452	1,361	–6.6
35–44	3,630	2,727	2,480	–9.1
45–54	3,034	2,802	3,028	0
55–64	862	883	1,101	6.3
65 and over	101	95	149	10.2
<i>Total</i>	9,696	8,176	8,397	–3.5
Persons				
15–24	343	270	349	0.4
25–34	2,370	2,028	1,849	–6.0
35–44	5,015	3,977	3,574	–8.1
45–54	4,330	4,345	4,667	1.9
55–64	1,219	1,336	1,704	8.7
65 and over	140	137	211	10.8
Total	13,416	12,094	12,354	–2.0
FTE^(c)				
Males				
15–24	71	54	77	2
25–34	610	617	557	–2.2
35–44	1,468	1,333	1,232	–4.3
45–54	1,388	1,640	1,835	7.2
55–64	365	466	638	15
65 and over	35	37	58	13.5
<i>Total</i>	3,944	4,153	4,398	2.8
Females				
15–24	298	222	306	0.7
25–34	1,708	1,415	1,384	–5.1
35–44	3,236	2,477	2,381	–7.4
45–54	2,913	2,746	3,166	2.1
55–64	808	851	1,117	8.4
65 and over	87	76	124	9.3
<i>Total</i>	9,059	7,802	8,493	–1.6
Persons				
15–24	369	276	383	0.9
25–34	2,323	2,034	1,944	–4.4
35–44	4,714	3,818	3,615	–6.4
45–54	4,305	4,394	5,000	3.8
55–64	1,174	1,317	1,758	10.6
65 and over	122	113	182	10.5
Total	12,995	11,956	12,883	–0.2

(a) Mental health nurse numbers were estimated using Nursing Labour Force Survey data weighted to match the available registration data by assuming that the characteristics of non-respondents and respondents were the same.

(b) Includes registered and enrolled nurses.

(c) Full-time equivalent is based on a typical working week of 35 hours.

Source: AIHW Nursing Labour Force Survey, 1997 and 2001; AIHW Nursing and Midwifery Labour Force Survey, 2003.

Table 7.8: Mental health nurses^{(a)(b)}, by sex, state and territory, 1999 to 2003

	NSW	Vic	Qld	WA ^(c)	SA	Tas	ACT	NT ^(c)	Total
	Number								
Males									
1999	1,103	928	765	382	407	74	31	30	3,721
2001	1,150	1,195	650	290	451	113	45	22	3,918
2003	1,279	1,228	754	210	372	48	44	22	3,957
Average annual change (%)	3.8	7.2	-0.4	-13.9	-2.2	-10.2	9.1	-7.5	1.6
Females									
1999	3,147	2,460	1,680	939	1,035	196	148	91	9,696
2001	2,860	2,251	1,199	675	757	198	168	70	8,176
2003	3,158	2,210	1,425	655	719	92	120	19	8,397
Average annual change (%)	0.1	-2.6	-4.0	-8.6	-8.7	-17.3	-5.1	-32.4	-3.5
Persons									
1999	4,250	3,388	2,445	1,321	1,442	270	179	122	13,416
2001	4,010	3,446	1,848	965	1,208	311	213	92	12,094
2003	4,437	3,438	2,179	866	1,091	140	163	40	12,354
Average annual change (%)	1.1	0.4	-2.8	-10.0	-6.7	-15.2	-2.3	-24.3	-2.0
	FTE^(d)								
Males									
1999	1,178	981	822	411	396	77	36	33	3,944
2001	1,239	1,284	698	298	445	114	45	26	4,153
2003	1404	1,393	834	231	404	53	47	28	4,398
Average annual change (%)	4.5	9.2	0.4	-13.4	0.5	-8.9	6.9	-4.0	2.8
Females									
1999	3,012	2,277	1,613	909	840	187	130	83	9,059
2001	2,770	2,154	1,144	640	664	179	164	70	7,802
2003	3,167	2,254	1,441	672	715	100	121	21	8,493
Average annual change (%)	1.3	-0.3	-2.8	-7.3	-3.9	-14.5	-1.8	-29.1	-1.6
Persons									
1999	4,189	3,263	2,438	1,324	1,231	265	166	116	12,995
2001	4,010	3,436	1,843	938	1,108	293	209	95	11,956
2003	4,564	3,644	2,273	903	1,119	153	169	50	12,883
Average annual change (%)	2.2	2.8	-1.7	-9.1	-2.4	-12.8	0.4	-19.0	-0.2

(a) Mental health nurse numbers were estimated using Nursing Labour Force Survey data weighted to match the available registration data by assuming that the characteristics of non-respondents and respondents were the same.

(b) Includes registered and enrolled nurses.

(c) Western Australian and Northern Territory responses to the 2003 Nursing and Midwifery Labour Force survey were very low, so these data need to be treated with caution.

(d) Full-time equivalent is based on a typical working week of 35 hours.

Source: AIHW Nursing Labour Force Survey, 1997 and 2001; AIHW Nursing and Midwifery Labour Force Survey, 2003.

7.2 Government-operated community and residential mental health services

This section describes government-operated community and residential mental health services in terms of the number of services, availability of beds, staff employed and expenditure. The data relate only to government-operated residential mental health services that are staffed 24 hours per day: data on non-government-operated residential mental health services and government operated services staffed less than 24 hours are not available.

The National Community Mental Health Establishments Database (NCMHED) collates available bed, separation, staff and expenditure data for each public community and residential mental health care establishment in Australia from routine administrative collections. Further information on the NCMHED can be found in Appendix 1. The National Survey of Mental Health Services also collects data on these services, presented in the *National Mental Health Report* series (DHA 2004). The similarities and differences between the data collated by the survey and NCMHED are outlined in Appendix 5.

Table 7.9 presents a summary of services, number of available beds, staffing and expenditure from NCMHED since 1999–00. Information from the NCMHED on the number of services by state and territory in 2003–04 is presented in Table 7.10. A list of the services that are reported to NCMHED can be found in the Internet-only tables at <www.aihw.gov.au>.

Note that the definitions of the services varied between jurisdictions. In some jurisdictions, such as Tasmania and Queensland, the services 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 and Western Australia, entire health regions or areas were defined as services. For these reasons, the number of services reported does not necessarily reflect the number of physical buildings or service outlets from which mental health care was provided.

Between 1999–00 and 2003–04 the number of FTE staff increased from 8,570 to 10,783, or an average rate of 5.9% annually. Salaries and wages expenditure over the same period increased each year by 6.8% on average, from \$500.5 million to \$651.7 million (in constant prices), and non-salary expenditure (including depreciation) increased 5.2% annually on average, from \$196.3 million to \$240.3 million (in constant prices).

There were 1,246 available beds reported to the NCMHED for 2003–04, representing 6.2 beds per 100,000 population (Table 7.10). Tasmania had the highest number of available beds per 100,000 (29.2), followed by Victoria (18.1).

Data on the number of full-time equivalent (FTE) staff employed in community and residential mental health services by state and territory are presented in Table 7.11. 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 10,783 FTE staff were employed in government-operated community and residential mental health services for 2003–04.

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 jurisdictions the majority of the FTE staff were *Nurses* (20.8%, or 2,248 FTE staff) and *Diagnostic and allied health professionals* (18.7%, or 2,020 FTE staff). The community and residential mental health care workforce also included *Administrative and clerical staff* (9.9%, or 1,071 FTE staff), *Salaried medical officers* (4.2%, or 456 FTE staff), *Domestic and other staff* (2.7%, or 292 FTE staff) and *Other personal care staff*.

The salary category made up 73.3% (\$675.8 million) of total expenditure (Tables 7.12 and 7.13). 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, drug and food supplies, patient transport, and repairs and maintenance. Recurrent expenditure by community mental health services in 2003–04 was \$922.1 million (Table 7.13).

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 *Diagnostic and allied health professionals* were 37.6% (\$124.7 million) and 30.8% (\$102.2 million) respectively. *Administrative and clerical staff* payments and *Salaried medical officers* payments accounted for 14.3% (\$47.5 million) and 13.5% (\$44.9 million) of the salary expenditure.

Table 7.9: Summary of public and private psychiatric hospitals^(a) and government-operated community and residential mental health services^(b), Australia, 1999–00 to 2003–04

	1999–00	2000–01	2001–02	2002–03	2003–04	Average annual change (%)
Public psychiatric hospitals						
Number of hospitals	22	23	22	19	19	–3.6
Available beds ^(c)	2,759	2,478	2,457	2,523	2,561	–1.8
Full-time-equivalent staff	6,274	5,601	5,545	5,458	5,600	–2.8
<i>Current prices^(d)</i>						
Salaries and wages expenditure (\$'000)	303,812	281,494	303,693	309,931	346,079	3.3
Non-salary expenditure ^(e) (\$'000)	113,516	115,295	119,576	137,156	122,408	1.9
Depreciation (\$'000)	19,562	19,899	21,955	21,957	19,869	0.4
Total recurrent expenditure (\$'000)	436,890	416,688	445,224	469,044	488,356	2.8
Revenue (\$'000)	19,769	21,978	19,260	19,419	23,874	4.8
<i>Constant prices^(d)</i>						
Salaries and wages expenditure (\$'000)	335,333	300,741	314,382	309,931	333,731	–0.1
Non-salary expenditure ^(e) (\$'000)	125,294	123,178	123,785	137,156	118,041	–1.5
Depreciation (\$'000)	21,592	21,260	22,728	21,957	19,160	–2.9
Total recurrent expenditure (\$'000)	482,219	445,179	460,894	469,044	470,932	–0.6
Revenue (\$'000)	21,820	23,481	19,938	19,419	23,022	1.3
Public acute hospitals						
Number of hospitals with a specialised psychiatric unit or ward	107	111	108	128	124	4.1
Available beds in psychiatric units or wards	n.a.	n.a.	2,985	3,286	3,463	3.9
Private psychiatric hospitals^(f)						
Number of hospitals	24	24	24	25	25	1.0
Available beds ^(c)	1,369	1,369	1,387	1,463	1,441	1.3
Full-time-equivalent staff	1,572	1,566	1,707	1,704	1,672	1.6
<i>Current prices^(d)</i>						
Total recurrent expenditure (\$'000)	122,498	133,491	143,653	158,529	162,066	7.3
<i>Constant prices^(d)</i>						
Total recurrent expenditure (\$'000)	153,892	158,918	156,655	158,529	150,340	–0.6
Government-operated community and residential mental health services						
Number of services ^(b)	232	233	246	242	246	1.5
Available beds ^(c)	1,171	1,306	1,249	1,241	1,246	1.8
Full-time-equivalent staff	8,570	8,933	9,759	10,420	10,783	5.9
<i>Current prices^(d)</i>						
Salaries and wages expenditure (\$'000)	453,492	505,310	563,495	624,680	675,809	10.5
Non-salary expenditure ^(g) (\$'000)	177,865	187,887	214,636	247,052	249,149	5.8
Total recurrent expenditure (\$'000)	631,358	695,709	778,131	871,751	922,079	10.0
<i>Constant prices^(d)</i>						
Salaries and wages expenditure (\$'000)	500,543	539,861	583,328	624,680	651,696	6.8
Non-salary expenditure ^(g) (\$'000)	196,319	200,734	222,190	247,052	240,259	5.2
Total recurrent expenditure (\$'000)	696,863	743,279	805,519	871,751	889,179	6.3

- (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. Some data for 2002–03 have been updated since previously published.
- (b) The count of government-operated community and residential mental health services can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of service outlets.
- (c) Average available beds.
- (d) Expenditure and revenue data are listed in both current and constant prices. Constant price values are referenced to 2002–03 and are adjusted for inflation and expressed in terms of prices for the reference year.
- (e) Excludes depreciation.
- (f) 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.
- (g) Includes depreciation.
- n.a. Not available.

Source: National Public Hospital Establishments Database, Private Health Establishments Collection, National Community Mental Health Establishments Database.

Table 7.10: Government-operated community and residential mental health services, services providing residential care, available beds and available beds per 100,000 population, states and territories, 2003–04

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Services ^(a)	19	39	97	18	35	30	2	6	246
Services providing residential care	7	31	0	2	2	9	1	0	52
Available beds ^(b)	137	893	0	21	27	140	28	0	1,246
Available beds per 100,000 population ^(c)	2	18.1	0.0	1.1	1.8	29.2	8.7	0.0	6.2

(a) The number of services 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 services reported to NCMHED, see <www.aihw.gov.au>.

(b) Average available beds.

(c) Rates are crude rates based on the estimated resident population at 31 December 2003.

Source: National Community Mental Health Establishments Database.

Table 7.11: Full-time-equivalent staff^(a), government-operated community and residential mental health services^(b), states and territories, 2003–04

Staffing category	NSW ^(c)	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Salaried medical officers	218	n.a.	120	n.a.	78	15	15	10	456
Nurses									
Registered nurses	n.a.	n.a.	442	n.a.	273	137	67	30	n.p.
Enrolled nurses	n.a.	n.a.	7	n.a.	11	37	14	0	n.p.
<i>Total nurses</i>	1,231	n.a.	448	n.a.	284	174	81	30	2,248
Other personal care staff	n.a.	n.a.	24	n.a.	10	59	0	0	n.p.
Diagnostic and allied health professionals	958	n.a.	623	n.a.	268	61	91	19	2,020
Administrative and clerical staff	664	n.a.	216	n.a.	111	33	26	21	1,071
Domestic and other staff	237	n.a.	10	n.a.	5	33	7	0	292
Total staff^(d)	3,304	3,522	1,443	1,083	756	375	220	80	10,783

(a) Where average full-time-equivalent staff numbers were not available, staff numbers at 30 June 2004 were used.

(b) For details on the services reporting to the NCMHED, see <www.aihw.gov.au>.

(c) New South Wales *Other personal care staff* are not available separately and are included in total.

(d) Includes total for services which were not able to provide data by staffing category.

n.a. Not available.

n.p. Not published.

Source: National Community Mental Health Establishments Database.

Table 7.12: Salaries and wages expenditure (\$'000), government-operated community and residential mental health services^(a), states and territories, 2003–04

Staffing category	NSW ^(b)	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Salaries medical officers	26,285	n.a.	13,621	n.a.	n.a.	1,570	2,031	1,379	n.p.
Nurses									
Registered nurses	n.a.	n.a.	25,209	n.a.	n.a.	6,892	4,978	2,106	n.p.
Enrolled nurses	n.a.	n.a.	284	n.a.	n.a.	1,270	653	0	n.p.
<i>Total nurses</i>	83,317	n.a.	25,494	n.a.	n.a.	8,162	5,631	2,106	n.p.
Other personal care staff	n.a.	n.a.	954	n.a.	n.a.	1,816	0	0	n.p.
Diagnostic and allied health professionals	58,656	n.a.	33,256	n.a.	n.a.	3,415	5,642	1,251	n.p.
Administrative and clerical staff	34,798	n.a.	8,977	n.a.	n.a.	1,237	1,367	1,110	n.p.
Domestic and other staff	7,197	n.a.	402	n.a.	n.a.	1,009	258	0	n.p.
Total salaries and wages^(c)	211,409	225,722	82,703	73,457	44,534	17,209	14,929	5,846	675,809

(a) For details on the services reporting to NCMHED, see <www.aihw.gov.au>.

(b) Expenditure data for this collection are not regarded as reliable by NSW Health. It is recommended that data from the National Survey of Mental Health Services, as published in the National Mental Health Report be used in preference. New South Wales *Other personal care staff* are not available separately and are included in the total.

(c) Includes total for services that were not able to provide salaries and wages data by staffing category.

n.a. Not available.

n.p. Not published.

Source: National Community Mental Health Establishments Database.

Table 7.13: Non-salary and total recurrent expenditure (\$'000), government-operated community and residential mental health services^(a), states and territories, 2003-04

Recurrent expenditure category	NSW ^(b)	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Payments to visiting medical officers	10,854	n.a.	5,050	n.a.	n.a.	5	705	13	16,627
Superannuation	19,172	n.a.	9,120	n.a.	n.a.	1,905	1,576	514	32,287
Drug supplies	5,747	n.a.	2,001	n.a.	n.a.	637	35	59	8,479
Medical and surgical supplies	1,918	n.a.	226	n.a.	n.a.	37	12	5	2,198
Food supplies	1,051	n.a.	156	n.a.	n.a.	565	141	4	1,917
Domestic services	4,044	n.a.	1,416	n.a.	n.a.	586	166	100	6,312
Repairs and maintenance	6,757	n.a.	1011	n.a.	n.a.	75	92	92	8,027
Patient transport	906	n.a.	15	n.a.	n.a.	10	12	1	944
Administrative expenses	28,550	n.a.	9,950	n.a.	n.a.	5,958	2,092	1,010	47,560
Interest payments	14	n.a.	1	n.a.	n.a.	0	0	n.a.	15
Other recurrent expenditure	15,660	n.a.	1,608	n.a.	n.a.	606	1,693	1,462	21,029
Total non-salary expenditure excluding depreciation^(c)	94,673	n.a.	30,556	n.a.	n.a.	10,395	6,524	3,260	n.p.
Depreciation	8,646	n.a.	691	n.a.	n.a.	0	82	8	n.p.
Total non-salary expenditure including depreciation^(c)	103,319	56,258	31,247	23,808	11,369	10,395	6,606	3,268	246,270
Total recurrent expenditure^(c)	314,728	281,980	113,950	97,265	55,903	27,604	21,535	9,114	922,079

(a) For details on the services reporting to the NCMHED, see <www.aihw.gov.au>.

(b) Expenditure data for this collection are not regarded as reliable by NSW Health. It is recommended that data from the National Survey of Mental Health Services, as published in the National Mental Health Report be used in preference.

(c) Includes total for services that were not able to provide data by recurrent expenditure category. n.a. Not available.

Source: National Community Mental Health Establishments Database.

7.3 Psychiatric and acute care hospitals

Public and private sector psychiatric and acute care hospitals provide admitted patient and non-admitted patient mental health care. For a complete picture of hospital-based mental health care, data from both psychiatric and public acute care hospitals are presented in this section. In order to present data on the different hospital types, this chapter draws on data from the National Public Hospital Establishments Database (NPHEd) and the ABS's Private Health Establishments Collection (PHEC). Details on each collection are presented in Appendix 1. Although there are currently more mental health-specific data available on psychiatric hospitals than on acute care hospitals, this does not necessarily indicate the relative importance or contribution of the two hospital types.

The NPHEd is not the only source of mental health-related staffing, resource and expenditure data on Australia's public hospitals. The National Survey of Mental Health Services also collects data on these hospitals; these data are presented in the *National Mental Health Report* series (DHA 2004). The similarities and differences between the data collated by the survey and by the NPHEd are outlined in Appendix 5.

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.

In 2003–04 there were 20 public psychiatric hospitals in Australia, providing 12.9% of the separations with specialised psychiatric care and 30.3% of the specialised psychiatric care days (Tables 4.2 and 4.3). The number of separate services reported was similar to that reported for the previous four years (Table 7.9).

When comparing jurisdictions, note that the hospital reported by Victoria is a specialist forensic service, whereas the hospitals reported by other jurisdictions provide a broader range of services. A list of the public psychiatric hospitals that were reported to NPHEd is on the AIHW web site <www.aihw.gov.au>.

A useful indicator of public psychiatric hospital service delivery is the number of available beds. The number of available beds for 2003–04 was 2,561, compared with 2,523 available beds for 2002–03 and 2,457 for 2001–02 (Table 7.9). This represents a continuation of the increase in available bed numbers occurring since 2001–02, after previous declines.

The majority of public psychiatric hospital beds were located in major cities (72.0%). There were no public psychiatric hospitals in remote and very remote areas (Table 7.14).

Data on the number of staff employed in public psychiatric hospitals by state and territory are presented in Table 7.15. 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. FTE staff employed in Australian public psychiatric hospitals remained relatively stable between 2000–01 and 2003–04, with an average of 5,600 FTE staff reported for 2003–04 compared with 5,601 reported for 2000–01 (Table 7.9). However, due to a drop in average FTE staff between 1999–00 and 2000–01 there was an average annual decrease of 2.7% between 1999–00 and 2003–04.

The majority of the FTE staff in 2003–04 were *Nursing staff* (53.8% or 3,011 FTE staff), followed by *Domestic and other staff* (18.7% or 1,045 FTE staff). *Salaried medical officers* and

Diagnostic and allied health professionals made up 5.5% (308 FTE staff) and 9.5% (531 FTE staff) of the public psychiatric hospital workforce respectively.

Box 7.1 Expenditure and staffing data for public psychiatric hospital 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 (for example, psychiatric outpatient services and community outreach services) are included in both the public hospital data and the government-operated community and residential mental health services data. Public hospitals report expenditure and staffing data for specialised mental health community, outpatient and outreach services under their management to NPHED. 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 government-operated community and residential mental health services should not be added together.

Available on the AIHW web site <www.aihw.gov.au> is a list of the public psychiatric hospitals contributing to NPHED and the government-operated community and residential mental health services contributing to NCMHED. Dual listing of some services provides evidence of overlap.

Tables 7.16 and 7.17 present information on recurrent expenditure in current prices by 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.

Recurrent expenditure by public psychiatric hospitals in 2003–04 was \$488.4 million (Table 7.17). Between 1999–00 and 2003–04 recurrent expenditure decreased on average by 0.6% annually, from \$482.2 million to \$470.9 million (constant prices) (Table 7.9).

The salary category made up 70.9% (\$346.1 million) of the recurrent expenditure of public psychiatric hospitals. In jurisdictions other than Victoria and South Australia (for which detailed data were not available), salary and wage payments to *Nursing staff* made up 55.5% (\$147.5 million) of the expenditure on salary and wages. Salary and wages payments for *Domestic and other staff* and *Salaried medical officers* made up 11.9% (\$31.6 million) and 11.8% (\$31.4 million) respectively.

Data on public psychiatric hospital revenue, excluding general revenue payments received from state or territory governments, are presented in Table 7.18. The revenue received by Australian public psychiatric hospitals was \$23.7 million for 2003–04, compared with \$19.4 million for 2002–03. This amount is equivalent to 4.9% of the total recurrent expenditure. A relatively large proportion of the total revenue for public psychiatric hospitals was collected as patient revenue (73.3% or \$17.4 million).

Table 7.14: Public psychiatric hospitals^(a) and available beds^(b), by Remoteness Area, states, 2003–04

	NSW	Vic	Qld	WA	SA	Tas	Total
Public psychiatric hospitals							
Major cities	7	1	1	1	1	..	11
Inner regional	3	0	1	0	0	3	7
Outer regional	0	0	2	0	0	0	2
Remote and very remote	0	0	0	0	0	0	0
Total all regions	10	1	4	1	1	3	20
Available beds^(b)							
Major cities	874	115	192	203	461	..	1,845
Inner regional	363	0	204	0	0	69	636
Outer regional	0	0	80	0	0	0	80
Remote and very remote	0	0	0	0	0	0	0
Total all regions	1,237	115	476	203	461	69	2,561
Available beds per 100,000 population^(c)							
Major cities	18.3	3.2	9.6	14.8	42.1	..	14
Inner regional	26.4	0	20.7	0	0	22.7	15.3
Outer regional	0	0	12	0	0	0	3.9
Remote and very remote	0	0	0	0	0	0	0
Total all regions	18.5	2.3	12.5	10.4	30.2	14.5	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. There are no public psychiatric hospitals in the Australian Capital Territory or the Northern Territory. For details on the hospitals reporting to NPHEd, see <www.aihw.gov.au>.

(b) Average available beds where possible; otherwise available beds at 30 June 2004.

(c) Rates are crude rates based on the estimated resident population at 30 June 2003.

.. Not applicable.

Source: National Public Hospital Establishments Database.

Table 7.15: Full-time-equivalent staff^(a), public psychiatric hospitals^(b), states, 2003–04

Staffing category	NSW ^(c)	Vic ^(d)	Qld	WA ^(e)	SA ^(f)	Tas ^(f)	Total
Salaried medical officers	165	21	28	38	56	0	308
Nurses							
Registered nurses	n.a.	137	477	262	465	31	n.a.
Enrolled nurses	n.a.	19	109	50	97	3	n.a.
<i>Total nurses</i>	1,361	156	586	312	562	34	3,011
Other personal care staff	n.a.	n.a.	26	n.a.	5	n.a.	n.a.
Diagnostic and allied health professionals	289	19	104	63	56	0	531
Administrative and clerical staff	356	38	117	71	91	2	675
Domestic and other staff	523	11	220	107	169	15	1,045
Total staff	2,693	245	1,081	591	940	50	5,600

(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. There are no public psychiatric hospitals in the Australian Capital Territory or the Northern Territory. For details on the hospitals reporting to NPHED, see <www.aihw.gov.au>.

(b) Where average full-time-equivalent staff numbers were not available, staff numbers at 30 June 2004 were used. Staff contracted to provide products (rather than labour) are not included.

(c) *Other personal care staff* are included in *Diagnostic and allied health professionals*.

(d) Full-time-equivalent staff numbers may be slightly understated. *Other personal care staff* are included in *Domestic and other staff*.

(e) *Other personal care staff* excludes staff on retention who do not work regular hours and are included in *Domestic and other staff*. Many hospitals were unable to provide a split between nurse categories and these have been reported as *Registered nurses*.

(f) *Other personal care staff* are included in *Domestic and other staff*. n.a. Not available.

Source: National Public Hospital Establishments Database.

Table 7.16: Salaries and wages expenditure (\$'000), public psychiatric hospitals^(a), states, 2003-04

Staffing category	NSW ^(b)	Vic ^(c)	Qld	WA ^(d)	SA ^(e)	Tas ^(f)	Total ^(g)
Salaries medical officers	22,131	n.a.	3,315	5,951	n.a.	0	31,397
Nurses							
Registered nurses	n.a.	n.a.	30,281	17,345	n.a.	1,908	n.a.
Enrolled nurses	n.a.	n.a.	5,024	2,362	n.a.	129	n.a.
<i>Total nurses</i>	<i>90,494</i>	<i>n.a.</i>	<i>35,305</i>	<i>19,707</i>	<i>n.a.</i>	<i>2,038</i>	<i>147,544</i>
Other personal care staff	0	n.a.	1099	0	n.a.	0	1,099
Diagnostic and allied health professionals	15,889	n.a.	5,885	3,256	n.a.	0	25,030
Administrative and clerical staff	20,500	n.a.	5,459	3,351	n.a.	36	29,346
Domestic and other staff	18,081	n.a.	8,756	4,174	n.a.	614	31,625
Total salaries and wages^(h)	167,095	23,218	59,819	36,439	56,820	2,688	346,079

(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, see <www.aihw.gov.au>.

(b) Expenditure recorded against special purposes and trust funds is not included. *Other personal care staff* are included in *Diagnostic and allied health professionals*.

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

(d) *Other personal care staff* are included in *Domestic and other staff*.

(e) For 2003-04, reporting arrangements do not allow for the breakdown of recurrent expenditure for the single public psychiatric hospital.

(f) *Other personal care staff* are included in *Diagnostic and allied health professionals*.

(g) Components do not add to the total as some data not available as subcategories.

(h) Includes recurrent salaries and wages expenditure not allocatable to a salaries and wages expenditure category.

n.a. Not available.

Source: National Public Hospital Establishments Database.

Table 7.17: Non-salary expenditure and total recurrent expenditure (\$'000), public psychiatric hospitals^(a), states, 2003-04

	NSW ^(b)	Vic ^(c)	Qld ^(d)	WA	SA ^(e)	Tas	Total
Payments to visiting medical officers	1,795	n.a.	988	0	n.a.	0	2,783
Superannuation	16,413	n.a.	5,959	3,150	n.a.	557	26,079
Drug supplies	5,978	n.a.	1,650	1,469	n.a.	165	9,262
Medical and surgical supplies	1,847	n.a.	594	486	n.a.	26	2,953
Food supplies	4,734	n.a.	1,398	1,087	n.a.	279	7,498
Domestic services	5,904	n.a.	3,458	1,386	n.a.	225	10,973
Repairs and maintenance	5,721	n.a.	1,088	1,237	n.a.	14	8,060
Patient transport	120	n.a.	6	26	n.a.	6	158
Administrative expenses	17,917	n.a.	6,554	2,298	n.a.	2,362	29,131
Interest payments	10	n.a.	0	0	n.a.	0	10
Other recurrent expenditure	3,015	n.a.	52	254	n.a.	106	3,427
Total non-salary expenditure^(f)	63,456	6,225	21,747	11,393	15,847	3,740	122,408
Depreciation	10,696	1,243	6,805	1,125	n.a.	n.a.	19,869
Total non-salary expenditure	74,152	7,468	28,552	12,518	15,847	3,740	142,277
Total recurrent expenditure^(g)	241,246	30,686	88,371	48,957	72,667	6,428	488,356

(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, see <www.aihw.gov.au>.

(b) Expenditure recorded against special purposes and trust funds is not included.

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

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

(e) For 2003-04, reporting arrangements do not allow for the breakdown of recurrent expenditure for the single public psychiatric hospital.

(f) Excludes depreciation.

(g) Includes depreciation and total salaries and wages.

n.a. Not available.

Source: National Public Hospital Establishments Database.

Table 7.18: Revenue (\$'000), public psychiatric hospitals^(a), states, 2003–04

	NSW	Vic	Qld	WA	SA	Tas	Total
Patient revenue ^(b)	10,115	0	3,387	964	2,365	545	17,376
Recoveries	1,431	897	34	324	0	5	2,691
Other revenue ^(c)	1,588	488	1,389	86	46	45	3,642
Total revenue	13,134	1,385	4,810	1,374	2,411	595	23,709

(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, see <www.aihw.gov.au>.

(b) Includes revenue for items such as pharmacy and ambulance, which may be considered as recoveries.

(c) Includes investment income, income from charities, bequests and accommodation provided to visitors.

Source: National Public Hospital Establishments Database.

Public acute hospitals

In 2003–04 public acute hospitals provided 64.6% of the separations with specialised psychiatric care and 50.3% of the specialised psychiatric care days (Table 5.9). In 2003–04 there were 124 public acute hospitals with specialised psychiatric units or wards in Australia (Table 7.19).

New South Wales and Victoria had the largest number of public acute hospitals with specialised psychiatric units or wards (44 and 31 respectively). The majority of public acute hospitals with specialised psychiatric units or wards were located in major cities (68.5%). In 2003–04 public acute hospitals reported an average of 17.4 available beds in psychiatric units and wards per 100,000 population. Of these beds, 76.0% were in hospitals in major cities. The largest number of these beds per 100,000 population was also in major cities (20.0 beds per 100,000 population).

Private psychiatric hospitals

In 2003–04 private hospitals provided 22.5% of the separations with specialised psychiatric care and 19.3% of the specialised 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 a private hospital by the relevant state or territory health authority and for which 50% or more of the total patient days were for psychiatric patients.

There were 25 private hospitals designated as psychiatric during 2003–04, with an average of 1,441 available beds (Table 7.20). Between 1999–00 and 2003–04, there was an increase in available private psychiatric hospital beds of 1.3% each year on average.

In 2003–04 the average number of FTE staff employed by private sector psychiatric hospitals was 1,672 (Table 7.21). There was an average annual increase of 1.6% between 1999–00 and 2003–04 (Table 7.9).

In 2003–04 recurrent expenditure in current prices for private psychiatric hospitals in Australia was \$162.1 million (Table 7.23). There was an annual increase in constant prices of 11.0% on average between 1999–00 and 2003–04 (from \$111.0 million to \$168.1 million) (Tables 7.9). The total revenue for private psychiatric hospitals for 2003–04 exceeded total expenditure, at \$190.4 million (Table 7.24).

Table 7.19: Public acute hospitals with psychiatric units or wards^(a), by Remoteness Area, states and territories, 2003–04

	NSW	Vic ^(b)	Qld	WA	SA	Tas	ACT	NT	Total
Public acute hospitals with psychiatric units or wards									
Major cities of Australia	29	24	9	13	8	..	2	..	85
Inner regional	14	6	6	1	0	2	..	..	29
Outer regional	1	1	3	2	0	1	..	1	9
Remote and very remote	0	0	0	0	0	0	..	1	1
Total all regions	44	31	18	16	8	3	2	2	124
Available psychiatric beds									
Major cities of Australia	740	745	563	362	177	..	45	..	2,632
Inner regional	169	159	230	15	0	62	..	..	635
Outer regional	2	12	111	16	0	24	..	25	190
Remote and very remote	0	0	0	0	0	..	..	6	6
Total all regions	911	916	904	393	177	86	45	31	3,463
Available beds per 100,000 population									
Major cities of Australia	15.5	20.7	28.1	26.3	16.1	..	13.9	..	20
Inner regional	12.3	15.2	23.3	6.1	0	20.4	..	..	15.3
Outer regional	0.4	4.7	16.7	8.6	0	14.8	..	23.1	9.3
Remote and very remote	0	0	0	0	0	0	..	6.6	1.2
Total all regions	13.6	18.7	23.8	20.2	11.6	18	13.9	15.6	17.4

(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 example, in 2003–04 New South Wales increased the number of reporting public hospital units without changing the number of actual facilities. For details on the hospitals reporting to NPHED, see <www.ahw.gov.au>.

(b) The count of hospitals in Victoria is a count of the campuses that report data separately to the National Hospital Morbidity Database.

(c) Rates are crude rates based on the estimated resident population at 30 June 2003.

.. Not applicable.

Source: National Public Hospital Establishments Database.

Table 7.20: Private psychiatric hospitals, available beds and available beds per 100,000 population, states^(a), 2003-04

	NSW	Vic	Qld	SA	WA	Tas	Total ^(b)
Private psychiatric hospitals	9	6	4	n.a.	n.a.	n.a.	25
Available beds ^(c)	316	378	288	n.a.	n.a.	n.a.	1,441
Available beds per 100,000 population ^(d)	9	6	4	n.a.	n.a.	n.a.	25

(a) There were no private psychiatric hospitals in the Australian Capital Territory or the Northern Territory.

(b) Total includes figures not available.

(c) Average available beds.

(d) Rates are crude rates based on the estimated resident population at 31 December 2003.

n.a. Not available.

Source: Private Health Establishments Collection.

Table 7.21: Full-time-equivalent staff^(a), private psychiatric hospitals, states^(b), 2003-04

	NSW	Vic	Qld	SA	WA	Tas	Total ^(c)
Salaried medical officers	12	n.a.	n.a.	n.a.	n.a.	n.a.	24
Total nurses ^(d)	291	256	171	n.a.	n.a.	n.a.	861
Diagnostic and allied health professionals	49	56	29	n.a.	n.a.	n.a.	151
Administrative and clerical staff	130	87	51	n.a.	n.a.	n.a.	314
Domestic and other staff ^(e)	109	n.a.	n.a.	n.a.	n.a.	n.a.	322
Total staff^(c)	592	508	303	n.a.	n.a.	n.a.	1,672

(a) Average full-time-equivalent staff.

(b) There were no private psychiatric hospitals in the Australian Capital Territory or the Northern Territory.

(c) Includes totals for services that were not able to provide data by staffing category.

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

(e) Includes *Catering and kitchen, Domestic, Engineering and maintenance and Other* categories.

n.a. Not available.

Source: Private Health Establishments Collection.

Table 7.22: Salaries and wages expenditure (\$'000), private psychiatric hospitals, states^(a), 2003-04

	NSW	Vic	Qld	SA	WA	Tas	Total ^(b)
Salaried medical officers	1,136	n.a.	n.a.	n.a.	n.a.	n.a.	2,290
Total nurses ^(c)	18,399	14,290	11,086	n.a.	n.a.	n.a.	52,828
Diagnostic and allied health professionals	2,736	3,472	1,708	n.a.	n.a.	n.a.	8,954
Administrative and clerical staff	5,768	4,521	2,572	n.a.	n.a.	n.a.	15,526
Domestic and other staff ^(d)	3,735	n.a.	n.a.	n.a.	n.a.	n.a.	11,983
Total salaries and wages^(b)	31,773	27,072	17,480	n.a.	n.a.	n.a.	91,581

(a) There are no private psychiatric hospitals in the Australian Capital Territory or the Northern Territory.

(b) Includes total for services that were not able to provide salaries and wages data by staffing category.

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

(d) Includes *Catering and kitchen, Domestic, Engineering and maintenance and Other* categories.

n.a. Not available.

Source: Private Health Establishments Collection.

Table 7.23: Non-salary expenditure (\$'000), and total recurrent expenditure (\$'000), private psychiatric hospitals, states^(a), 2003-04

	NSW	Vic	Qld	SA	WA	Tas	Total
Superannuation	2,587	2,350	1,349	n.a.	n.a.	n.a.	7,814
Payroll tax	909	1,415	902	n.a.	n.a.	n.a.	3,970
On-costs excluding superannuation and payroll tax ^(c)	2,777	1,346	269	n.a.	n.a.	n.a.	5,357
Drug supplies	1,274	463	357	n.a.	n.a.	n.a.	2,263
Medical and surgical supplies	157	154	144	n.a.	n.a.	n.a.	512
Surgically implanted prostheses and homograft items	0	0	0	n.a.	n.a.	n.a.	0
Food supplies	1,742	1,401	787	n.a.	n.a.	n.a.	4,807
Domestic services	844	792	622	n.a.	n.a.	n.a.	2,971
Repairs and maintenance	930	533	475	n.a.	n.a.	n.a.	2,439
Patient transport	n.p.	n.p.	n.p.	n.a.	n.a.	n.a.	106
Administrative expenses	9,070	7,894	3,603	n.a.	n.a.	n.a.	24,417
Interest payments	192	0	9	n.a.	n.a.	n.a.	380
Contract services (excluding medical practitioners)	3,471	2,012	3,206	n.a.	n.a.	n.a.	10,107
Other recruitment expenditure	n.a.	0	n.a.	n.a.	n.a.	n.a.	312
Total non-salary expenditure^(d)	24,046	18,364	11,956	n.a.	n.a.	n.a.	65,455
Depreciation	1,699	1,595	795	n.a.	n.a.	n.a.	5,030
<i>Total non-salary expenditure including depreciation^(d)</i>	<i>25,745</i>	<i>19,959</i>	<i>12,751</i>	<i>n.a.</i>	<i>n.a.</i>	<i>n.a.</i>	<i>70,485</i>
Total recurrent expenditure^(b)	57,518	47,031	30,231	n.a.	n.a.	n.a.	162,066

(a) There are no private psychiatric hospitals in the Australian Capital Territory or the Northern Territory.

(b) Includes total for services which were not able to provide data by recurrent expenditure category.

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

(d) Excludes depreciation.

n.a. Not available.

Source: Private Health Establishments Collection.

Table 7.24: Revenue (\$'000), private psychiatric hospitals, states^(a), 2003–04

Revenue	NSW	Vic	Qld	SA	WA	Tas	Total^(b)
Patient revenue ^(c)	65,119	50,949	35,193	n.a.	n.a.	n.a.	184,291
Recoveries	1,523	n.a.	n.a.	n.a.	n.a.	n.a.	5,437
Other ^(d)	517	n.a.	n.a.	n.a.	n.a.	n.a.	1,535
Total revenue	66,322	53,941	35,926	n.p.	n.p.	n.p.	190,426

(a) There are no private psychiatric hospitals in the Australian Capital Territory or the Northern Territory.

(b) Total includes figures not available.

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

(d) Other revenue includes investment income, income from charities, bequests, visitors' meals and accommodation, and kiosk sales.
n.a. Not available.

Source: Private Health Establishments Collection.