

# 4 Mental health care establishments

This chapter presents an overview of available data on the characteristics of establishments delivering mental health services in Australia – the number of establishments, available beds, full-time-equivalent staff, and salary and non-salary expenditure. The first section details the characteristics of hospitals providing admitted patient mental health care and the second section describes the characteristics of community mental health care establishments.

## Hospitals

Public and private sector psychiatric and acute hospitals provide admitted patient mental health services. In order to present data for the different hospital types, this chapter has drawn on data from the National Public Hospital Establishments Database (NPHEd) and the ABS's Private Health Establishments Collection (PHEC). More details on each collection are presented in Chapter 1.

### Psychiatric hospitals

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

Information from the NPHEd on the number of public psychiatric hospitals and the associated number of hospital beds available by State and Territory is presented in Table 4.1. In 1998–99, there were 21 public psychiatric hospitals in Australia. The number of separate establishments reported is below the 24 reported for the 1997–98 financial year (Table 4.2). This apparent decrease was chiefly due to a change in reporting arrangements by Western Australia which aggregated the data from four small lodges (previously each identified as public psychiatric hospitals) into larger hospital networks. A somewhat more reliable indicator of shifts in public psychiatric hospital service delivery is the number of available beds. The number of available beds for the 1998–99 year was 2,943 compared with 3,112 available beds for the 1997–98 year (Table 4.2). This represents a 5% decline. Nationally, there was a 65% decline in available beds in public psychiatric hospitals between 1989–90 and 1998–99. The decline in public psychiatric hospital bed numbers as a result of integrating of mental health care into acute hospital and community settings appears to have slowed in recent years.

There were 26 private psychiatric hospitals in operation during 1998–99 (Table 4.3) compared with 23 for the 1997–98 year. The average number of available private psychiatric hospital beds for 1998–99 was 1,471. This was a 9.4% increase on the 1997–98 figure of 1,344 beds.

Data on the number of staff employed in public psychiatric hospitals by State and Territory are presented in Table 4.4. The data on full-time-equivalent staff (FTE) refer to the average available staff for the year. Note that data collection by staff category are not consistent

across all States and Territories, with some jurisdictions providing best estimates. An average of 6,395 FTE staff were employed in Australian public psychiatric hospitals in 1998–99 compared with 6,128 FTE staff reported for 1997–98. This was an increase of 4%.

The majority of the FTE staff were nursing staff (53% or 3,405 FTE staff), followed by *Domestic & other staff* and *Administrative & clerical staff* with 19% (1,237 FTE staff) and 11% (734 FTE staff) respectively. *Salaried medical officers* and *Diagnostic & allied health professionals* made up 5% (321 FTE staff) and 9% (596 FTE staff) of the public psychiatric hospital workforce respectively. The number of FTE psychiatric hospital staff employed per 1,000 public psychiatric hospital separations shows a pattern of variation between jurisdictions similar to the 1997–98 figures. The usefulness of this rate is limited as it is based on total separations and does not adjust for differing casemix nor the level of use of contracted staff. The FTE number of psychiatric hospital staff employed per 1,000 public psychiatric hospital patient days showed less pronounced variation among States and Territories.

In 1998–99, the average number of FTE staff employed by private sector psychiatric hospitals was 1,660 (Table 4.3). This was a 9.6% increase on the 1997–98 figure of 1,514. Almost two-thirds of the private psychiatric hospital workforce was located in New South Wales (651 FTE staff) and Victoria (393 FTE staff). The private sector rate for FTE staff per 1,000 separations (23.7) was well below the public sector rate (330.9). This difference in rates possibly reflects the differences in casemix of the public psychiatric and private hospitals. The public sector (5.1) and private sector (4.4) FTE staff per 1,000 patient days rates differed less.

Table 4.5 presents information on the gross recurrent expenditure on public psychiatric hospitals, including salary and non-salary categories. Expenditure data in this table exclude any payments for population health, primary and community-based services administered by hospitals and trust fund expenditure. The recurrent expenditure on public psychiatric hospitals in 1998–99 was \$437.3 million.<sup>1</sup> The equivalent figure for the 1997–98 collection period was \$377.9 million, so there was an increase of 16% between 1997–98 and 1998–99. 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 payments for medical/surgical supplies (excluding equipment purchases), administrative expenses and drug supplies.

The salary category made up 73% (\$318.1 million) of the recurrent expenditure of public psychiatric hospitals. In jurisdictions other than Victoria and Tasmania (for which detailed data were not available), salary and wage payments to nursing staff made up 55% (\$174 million) of the expenditure on salary and wages. Salary and wages payments for *Domestic & other staff* and *Salaried medical officers* made up 14% (\$44.6 million) and 10% (\$31.1 million) respectively.

In 1998–99, the recurrent expenditure for private psychiatric hospitals in Australia was over \$123.6 million (Table 4.3), an 11.3% increase from \$111.1 million in 1997–98. Almost two-thirds of the private sector recurrent expenditure was spent in New South Wales (\$44.5 million) and Victoria (\$33.6 million).

Public psychiatric hospital revenue, excluding general revenue payments received from State or Territory governments, is presented in Table 4.6. The revenue received by Australian public psychiatric hospitals (other than Tasmania and Victoria) was \$22.1 million for 1998–99 compared with \$22.4 million for 1997–98. This amount is equivalent to 5% of the total

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<sup>1</sup> Does not include Tasmanian data as the Tasmanian accounting system combines expenditure within establishment groups. This prevents the identification of recurrent expenditure for the three public psychiatric hospitals.

recurrent expenditure. A large proportion of the total revenue for public psychiatric hospitals was collected as patient revenue (79% or \$17.4 million). In comparison, the proportion of total revenue that was collected as patient revenue for all public hospitals was 62%. The recoveries, which include income from use of hospital facilities by salaried medical officers or private practitioners, was 12% (\$2.5 million) of the collected revenue.

## Public acute hospitals

In 1998–99 there were 115 public acute hospitals with specialised psychiatric units or wards in Australia (Table 4.7), 10.6% above the 104 identified for the 1997–98 year. New South Wales (38 units) and Victoria (36 units) had the largest number of specialised psychiatric units or wards in public acute hospitals. The Australian Capital Territory and the Northern Territory each had two specialised psychiatric units, or wards.

## Community mental health care establishments

This section describes community mental health care establishments in terms of 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 Establishments Database (NCMHED) collates available bed, separation, staff and expenditure data for each public community mental health care establishment in Australia, from routine administrative collections. The NCMHED was compiled for the first time for the 1998–99 period.

Information from the NCMHED on the number of identified establishments by State and Territory is presented in Table 4.8. In 1998–99, there were 208 community mental health care establishments identified in Australia. Activity data are currently limited to the number of completed periods of residential care (termed ‘separations’) and available beds. Data on ambulatory care provided by these establishments were not collected for 1998–99 but are being collected for the client-level data NMDS for 2000–01.

The total number of community mental health residential care separations reported to the NCMHED was 1,653. There were 1,301 available beds reported to the NCMHED. Data on the number of staff employed in community mental health care establishments by State and Territory are presented in Table 4.9. The full-time-equivalent (FTE) staff data presented are the average available staff for the year. Note that data collection by staff category is not consistent across all States and Territories, with some jurisdictions providing best estimates. An average of 8,679 FTE staff were employed in Australian community mental health care establishments in 1998–99.

The NMDS – Community Mental Health Establishments does not require FTE data to be supplied by staffing category as required for the NMDS – Public Hospital Establishments. New South Wales, Queensland, Tasmania, Australian Capital Territory and Northern Territory were able to supply their FTE data by staffing category. For these five jurisdictions, the majority of the FTE staff were *Total nurses* (21% or 1,781 FTE staff) and *Diagnostic & allied health professionals* (13% or 1,167 FTE staff). The community mental health care workforce of these five jurisdictions also included numbers of *Administrative & clerical staff* (7% or 624 FTE staff) and *Salaried medical officers* (4% or 349 FTE staff).

The recurrent expenditure on community mental health establishments in 1998–99 was \$588 million (Table 4.10). The salary category made up 72% (\$421.2 million). 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 include medical supplies (excluding equipment purchases), administrative expenses and drug supplies.

The NMDS – Community Mental Health Establishments does not require salary and wages data to be supplied by staffing category as required in the NMDS – Public Hospital Establishments. New South Wales, Queensland, Tasmania, Australia Capital Territory and Northern Territory were able to supply their salary and wage data by staffing category. The proportion of salary and wage expenditure paid from the five jurisdictions to *Diagnostic & allied health professionals* and *Total nurses* was 18% (\$76.3 million) and 13% (\$55.9 million) respectively. *Salaried medical officer* wage and salary payments accounted for 8% (\$32.2 million) of the salary component.

**Table 4.1: Number of public psychiatric hospitals<sup>(a)</sup> and available beds, States and Territories, 1998–99**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Public psychiatric hospitals <sup>(b)</sup>	8	1	7	1	1	3	0	0	21
Available beds <sup>(c)</sup>	1,108	73	829	351	465	117	..	..	2,943

(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) Excludes alcohol and drug hospitals.

(c) Average available beds where possible; otherwise available beds at 30 June 1999.

.. Not applicable

Source: National Public Hospital Establishments Database.

**Table 4.2: Number of public psychiatric hospitals and available beds, Australia, 1989–90 to 1998–99**

	1989–90	1991–92	1992–93	1993–94	1994–95	1995–96	1996–97	1997–98	1998–99
Public psychiatric hospitals <sup>(a)</sup>	59	45	36	37	35	34	23	24	21
Available beds <sup>(a)(b)</sup>	8,513	7,266	5,814	5,360	4,685	3,992	3,426	3,112	2,943

(a) These data come from three separate sources: Hospital Utilisation and Costs Study for 1989–90 and 1990–91; National Survey of Mental Health Services from 1992–93 to 1996–97; and National Public Hospital Establishments Database for 1997–98 to 1998–99.

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

Source: National Public Hospital Establishments Database; National Survey of Mental Health Services (see Appendix 6); and Hospital Utilisation and Costs Study.

**Table 4.3: Summary of private psychiatric hospitals<sup>(a)</sup>, States and Territories, 1998–99**

	NSW	Vic	Qld	Other States <sup>(b)</sup>	ACT	NT	Total
Private psychiatric hospitals	9	6	5	6	0	0	26
Available beds <sup>(c)</sup>	478	326	333	334	..	..	1,471
Full-time-equivalent staff	651	393	312	303	..	..	1,660
Full-time-equivalent staff per 1,000 separations	33.7	19.0	16.3	27.8	..	..	23.7
Full-time-equivalent staff per 1,000 patient days	5.0	4.2	3.5	4.5	..	..	4.4
Recurrent expenditure (\$'000)	44,519	33,611	23,660	21,811	..	..	123,601

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

(b) Data for Western Australia, South Australia and Tasmania amalgamated for de-identification purposes.

(c) Average for year.

.. Not applicable.

Source: ABS Private Health Establishments Collection.

**Table 4.4: Number of full-time-equivalent staff,<sup>(a)</sup> staff per 1,000 separations and staff per 1,000 patient days, public psychiatric hospitals, States, 1998–99**

<b>Full-time-equivalent staff</b>	<b>NSW<sup>(b)</sup></b>	<b>Vic<sup>(c)</sup></b>	<b>Qld<sup>(d)</sup></b>	<b>WA<sup>(e)</sup></b>	<b>SA<sup>(f)</sup></b>	<b>Tas<sup>(g)</sup></b>	<b>Total</b>
Salaried medical officers	148	12	41	40	80	n.a.	321
Registered nurses	n.a.	75	707	316	478	n.a.	1,576
Enrolled nurses	n.a.	n.a.	181	76	86	n.a.	343
Student nurses	n.a.	..	..	0	0	n.a.	0
Trainee/pupil nurses	n.a.	..	..	0	0	n.a.	0
<b>Total nurses</b>	<b>1,487</b>	<b>75</b>	<b>888</b>	<b>391</b>	<b>564</b>	<b>n.a.</b>	<b>3,405</b>
Other personal care staff	..	5	98	0	..	n.a.	103
Diagnostic & allied health professionals	263	11	111	89	122	n.a.	596
Administrative & clerical staff	345	30	145	75	139	n.a.	734
Domestic & other staff	565	n.a.	323	144	205	n.a.	1,237
<b>Total staff</b>	<b>2,807</b>	<b>133</b>	<b>1,605</b>	<b>739</b>	<b>1,111</b>	<b>n.a.</b>	<b>6,395</b>
<i>Per 1,000 separations</i>	274.4	223.3	1080.1	267.3	297.2	n.a.	330.9
<i>Per 1,000 patient days</i>	6.0	8.6	3.1	6.4	11.3	n.a.	5.1

(a) Where average full-time-equivalent staff numbers were not available, staff numbers at 30 June 1998 were used.

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

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

(d) For Queensland many hospitals were unable to provide a split between *Registered nurses* and *Enrolled nurses* or between *Other personal care staff* or *Domestic & other staff* or *Diagnostic & allied health professionals*. In these cases, the data are a best estimate only.

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

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

(g) The Tasmanian accounting system combines staffing data for establishment groups. This prevents the enumeration of FTE staff for the three psychiatric hospitals.

.. Not applicable.

n.a. Not available.

Source: National Public Hospital Establishments Database.

**Table 4.5: Recurrent expenditure (\$,000), public psychiatric hospitals, States, 1998–99**

	NSW <sup>(a)</sup>	Vic <sup>(b)</sup>	Qld <sup>(c)</sup>	WA <sup>(d)</sup>	SA <sup>(e)</sup>	Tas <sup>(f)</sup>	Total
Salaried medical officers	16,939	n.a.	3,784	4,848	5,554	n.a.	31,125
Registered nurses	n.a.	n.a.	36,411	15,765	27,859	n.a.	80,035
Enrolled nurses	n.a.	n.a.	6,875	2,471	5,622	n.a.	14,968
Student nurses	n.a.	n.a.	..	..	0	n.a.	0
Trainee/pupil nurses	n.a.	n.a.	..	..	0	n.a.	0
<b>Total nurses</b>	<b>78,978</b>	<b>n.a.</b>	<b>43,286</b>	<b>18,236</b>	<b>33,481</b>	<b>n.a.</b>	<b>173,981</b>
Other personal care staff	n.a.	n.a.	3,738	0	n.a.	n.a.	3,738
Diagnostic & allied health prof.	14,104	n.a.	5,079	3,648	5,404	n.a.	28,235
Administrative & clerical staff	15,579	n.a.	5,443	2,576	5,083	n.a.	28,681
Domestic & other staff	23,215	n.a.	11,097	4,506	5,758	n.a.	44,576
<b>Total salaries &amp; wages</b>	<b>148,815</b>	<b>7,720</b>	<b>72,427</b>	<b>33,814</b>	<b>55,281</b>	<b>n.a.</b>	<b>318,056</b>
Payments to visiting medical officers	2,814	n.a.	1,985	0	1,828	n.a.	6,627
Superannuation	10,268	n.a.	7,239	3,994	4,076	n.a.	25,577
Drug supplies	3,686	n.a.	2,295	1,009	2,297	n.a.	9,287
Medical & surgical supplies	1,463	n.a.	297	186	342	n.a.	2,288
Food supplies	3,659	n.a.	2,244	930	1,358	n.a.	8,191
Domestic services	3,065	n.a.	4,950	981	1,805	n.a.	10,801
Repairs & maintenance	3,930	n.a.	1,219	829	3,065	n.a.	9,044
Patient transport	5	n.a.	21	56	903	n.a.	985
Administrative expenses	15,182	n.a.	5,163	1,888	138	n.a.	22,372
Interest payments	33	n.a.	n.a.	0	n.a.	n.a.	33
Depreciation	8,160	n.a.	n.a.	1,295	n.a.	n.a.	9,455
Other recurrent expenditure	3,280	n.a.	26	1,555	4,177	n.a.	9,038
<b>Total non-salary expenditure</b>	<b>55,547</b>	<b>5,586</b>	<b>25,439</b>	<b>12,723</b>	<b>19,989</b>	<b>n.a.</b>	<b>119,284</b>
<b>Total recurrent expenditure</b>	<b>204,362</b>	<b>13,306</b>	<b>97,866</b>	<b>46,537</b>	<b>75,269</b>	<b>n.a.</b>	<b>437,340</b>

(a) New South Wales expenditure recorded against special purposes and trust funds is excluded. *Other personal care staff* are not reported separately.

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

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

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

(e) South Australian *Other personal care staff* are included in *Diagnostic & health professionals* and *Domestic & other staff*. *Interest payments* are included in *Administrative expenses*. Termination payments are included in *Other recurrent expenditure*.

(f) The Tasmanian accounting system combines expenditure data for establishment groups. This prevents the identification of recurrent expenditure or for the three psychiatric hospitals.

.. Not applicable.

n.a. Not available.

Source: National Public Hospital Establishments Database.

**Table 4.6: Revenue (\$'000), public psychiatric hospitals, States, 1998–99**

<b>Revenue</b>	<b>NSW</b>	<b>Vic<sup>(a)</sup></b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas<sup>(b)</sup></b>	<b>Total</b>
Patient revenue <sup>(c)</sup>	9,236	n.a.	3,761	516	3,905	n.a.	17,419
Recoveries	2,454	n.a.	32	29	34	n.a.	2,549
Other revenue	454	n.a.	1,497	177	36	n.a.	2,163
<b>Total revenue</b>	<b>12,143</b>	<b>n.a.</b>	<b>5,290</b>	<b>722</b>	<b>3,975</b>	<b>n.a.</b>	<b>22,131</b>

(a) Victorian reporting arrangements do not allow for the identification of public psychiatric hospital revenue.

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

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

Source: National Public Hospital Establishments Database.

**Table 4.7: Number of public acute hospitals with specialised psychiatric units or wards, States and Territories, 1998–99**

<b>Specialised services</b>	<b>NSW</b>	<b>Vic<sup>(a)</sup></b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
Psychiatric units/wards <sup>(b)</sup>	38	36	16	11	8	2	2	2	115

(a) Victorian data may be a slight underestimate as some small networks reported at network rather than campus level. Consequently, if two campuses within the network had a specialised type of service, it was counted as one.

(b) Excludes psychiatric and drug and alcohol hospitals.

Note: For some jurisdictions, these data were not available for all hospitals so the number of services is therefore under-enumerated.

Source: National Public Hospital Establishments Database.



**Table 4.8: Number of public community mental health establishments, number of establishments with residential care services, available beds and separations, States and Territories, 1998–99**

	NSW <sup>(a)</sup>	Vic	Qld	WA	SA <sup>(b)</sup>	Tas	ACT	NT	Total
Number of establishments	19	23	85	23	28	23	2	5	208
Number of establishments with residential care services	9	17	0	2	n.a.	3	1	0	32
Available beds <sup>(c)</sup>	221	916	0	66	n.a.	68	30	0	1,301
Separations <sup>(d)</sup>	456	744	0	118	n.a.	303	32	0	1,653

(a) New South Wales data excludes all Confused and Disturbed Elderly (CADE) units, except those in the New England Area Health Service.

(b) Available bed and separation data not available for the Eastern Community Mental Health Service.

(c) Average available beds where possible; otherwise available beds at 30 June 1999.

(d) The term 'separations' refers to completed periods of residential care in community residential mental health care establishments.

n.a. Not available.

Source: National Community Mental Health Establishments Database.

**Table 4.9: Number of full-time-equivalent staff,<sup>(a)</sup> in public community mental health establishments, States and Territories, 1998–99**

Full-time-equivalent staff	NSW <sup>(b)</sup>	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Salaried medical officers	202	n.a.	117	n.a.	n.a.	18	5	6	349
Registered nurses	n.a.	n.a.	320	n.a.	n.a.	28	59	29	436
Enrolled nurses	n.a.	n.a.	6	n.a.	n.a.	0	6	0	12
Student nurses	n.a.	n.a.	0	n.a.	n.a.	0	0	0	0
Trainee/pupil nurses	n.a.	n.a.	0	n.a.	n.a.	0	0	0	0
<i>Total nurses</i>	<i>1,269</i>	<i>n.a.</i>	<i>325</i>	<i>n.a.</i>	<i>n.a.</i>	<i>93</i>	<i>65</i>	<i>29</i>	<i>1,781</i>
Other personal care staff	n.a.	n.a.	17	n.a.	n.a.	20	20	0	56
Diagnostic & allied health prof.	641	n.a.	405	n.a.	n.a.	53	46	22	1167
Administrative & clerical staff	387	n.a.	166	n.a.	n.a.	24	27	21	624
Domestic & other staff	214	n.a.	19	n.a.	n.a.	16	0	0	248
<b>Total staff</b>	<b>2,713</b>	<b>2,904</b>	<b>1,048</b>	<b>944</b>	<b>607</b>	<b>223</b>	<b>162</b>	<b>78</b>	<b>8,679</b>

(a) Where average full-time-equivalent staff numbers were not available, staff numbers at 30 June 1999 were used.

(b) New South Wales data exclude all Confused and Disturbed Elderly (CADE) units, except those in the New England Area Health Service.

n.a. Not available

Source: National Community Mental Health Establishments Database.

**Table 4.10: Recurrent expenditure (\$'000), public community mental health establishments, States and Territories, 1998–99**

Recurrent expenditure category	NSW <sup>(a)</sup>	Vic	Qld	WA	SA <sup>(b)</sup>	Tas	ACT	NT	Total <sup>(b)</sup>
Salaried medical officers	17,986	n.a.	11,302	n.a.	n.a.	1,665	492	720	32,165
Registered nurses	n.a.	n.a.	15,186	n.a.	n.a.	744	3287	1522	20,740
Enrolled nurses	n.a.	n.a.	202	n.a.	n.a.	0	246	0	448
Student nurses	n.a.	n.a.	0	n.a.	n.a.	0	0	0	0
Trainee/pupil nurses	n.a.	n.a.	0	n.a.	n.a.	0	0	0	0
<b>Total nurses</b>	<b>51,521</b>	<b>n.a.</b>	<b>15,388</b>	<b>n.a.</b>	<b>n.a.</b>	<b>4,306</b>	<b>3,533</b>	<b>1,522</b>	<b>76,271</b>
Other personal care staff	n.a.	n.a.	615	n.a.	n.a.	0	393	0	1,008
Diagnostic & allied health prof.	31,462	n.a.	17,887	n.a.	n.a.	2,757	2,562	1,273	55,940
Administrative & clerical staff	17,061	n.a.	5,580	n.a.	n.a.	1,023	511	913	25,088
Domestic & other staff	8,048	n.a.	655	n.a.	n.a.	986	0	6	9,694
<b>Total salaries &amp; wages</b>	<b>126,076</b>	<b>150,422</b>	<b>51,427</b>	<b>43,275</b>	<b>27,329</b>	<b>10,738</b>	<b>7,491</b>	<b>4,434</b>	<b>421,192</b>
Payments to visiting medical officers	3,432	n.a.	3,548	n.a.	n.a.	518	408	0	7,905
Superannuation	8,860	n.a.	4,570	n.a.	n.a.	1,020	5	0	14,456
Drug supplies	2,238	n.a.	1,870	n.a.	n.a.	302	22	36	4,467
Medical & surgical supplies	842	n.a.	239	n.a.	n.a.	32	4	2	1,119
Food supplies	1,214	n.a.	100	n.a.	n.a.	184	111	14	1,623
Domestic services	2,047	n.a.	1,464	n.a.	n.a.	134	144	103	3,892
Repairs & maintenance	4,215	n.a.	903	n.a.	n.a.	94	35	5	5,252
Patient transport	262	n.a.	11	n.a.	n.a.	0	7	0	281
Administrative expenses	19,397	n.a.	9,077	n.a.	n.a.	1,052	200	825	30,551
Interest payments	20	n.a.	0	n.a.	n.a.	0	0	0	20
Depreciation	4,985	n.a.	0	n.a.	n.a.	0	2	0	4,987
Other recurrent expenditure	8,521	n.a.	1342	n.a.	n.a.	0	768	665	11,296
<b>Total non-salary expenditure</b>	<b>56,031</b>	<b>59,943</b>	<b>23,126</b>	<b>13,818</b>	<b>6,801</b>	<b>3,335</b>	<b>1,705</b>	<b>1,650</b>	<b>166,409</b>
<b>Total recurrent expenditure</b>	<b>182,108</b>	<b>210,365</b>	<b>74,553</b>	<b>57,093</b>	<b>34,535</b>	<b>14,073</b>	<b>9,197</b>	<b>6,083</b>	<b>588,006</b>

(a) New South Wales data exclude all Confused and Disturbed Elderly (CADE) units, except those in the New England Area Health Service. New South Wales expenditure recorded against special purposes and trust funds is excluded. *Other personal care staff* are not reported separately.

(b) Expenditure data for South Australia's Eastern Community Mental Health Service (Residential) are not available for the *Total salaries and wages* and *Total non-salary expenditure* categories and have been excluded from these categories. *Total recurrent expenditure* data for this establishment are available and have been included.

n.a. Not available

Source: National Community Mental Health Establishments Database.