

Under embargo until 1.00am on Friday, 28 January 2011

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MENTAL HEALTH (CHAPTER 12)

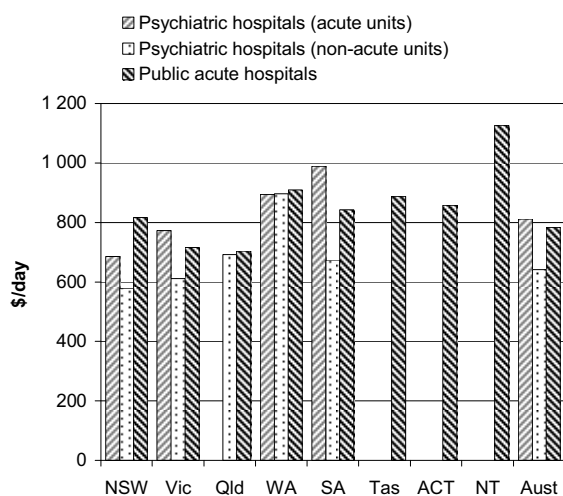
- The focus of this chapter is on the performance of governments in managing two key health issues: breast cancer and mental health. This factsheet focuses on the performance of governments in managing people with a mental illness through specialised mental health services that treat mostly low prevalence but severe illness.
- Real government recurrent expenditure of around \$5.6 billion was allocated to mental health services in 2008-09 (p. 12.40). State and Territory governments made the largest contribution (\$3.5 billion, or 62.1 per cent), although this included some Australian Government base grant funds under the previous Australian Health Care Agreements (p. 12.40). The Australian Government spent \$2.1 billion or 37.9 per cent (p. 12.40).

Broad objectives of National Mental Health Policy

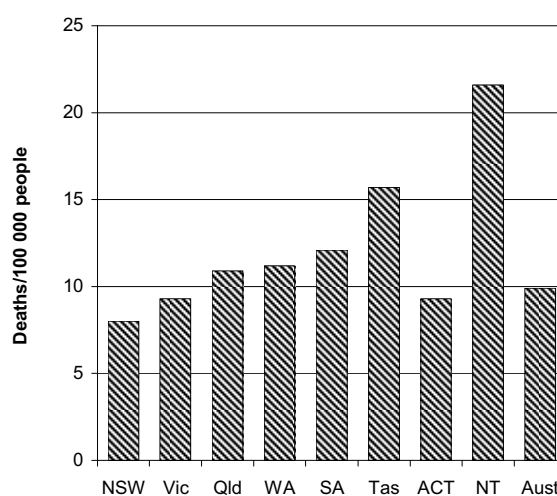
- The broad objectives of Mental Health Policy include to: improve the effectiveness and quality of service delivery and outcomes; prevent, where possible, the development of mental illness; undertake early intervention for mental health problems and mental illness; promote recovery and reduce, where possible, the impact of mental illness on individuals, families and the community; and improve mental health and facilitate recovery from illness through more stable accommodation and support and meaningful participation in recreational, social, employment and other activities in the community.

Selection of results

Average recurrent cost per inpatient bed day, public hospitals, by hospital type, 2008-09^a (p. 12.80)

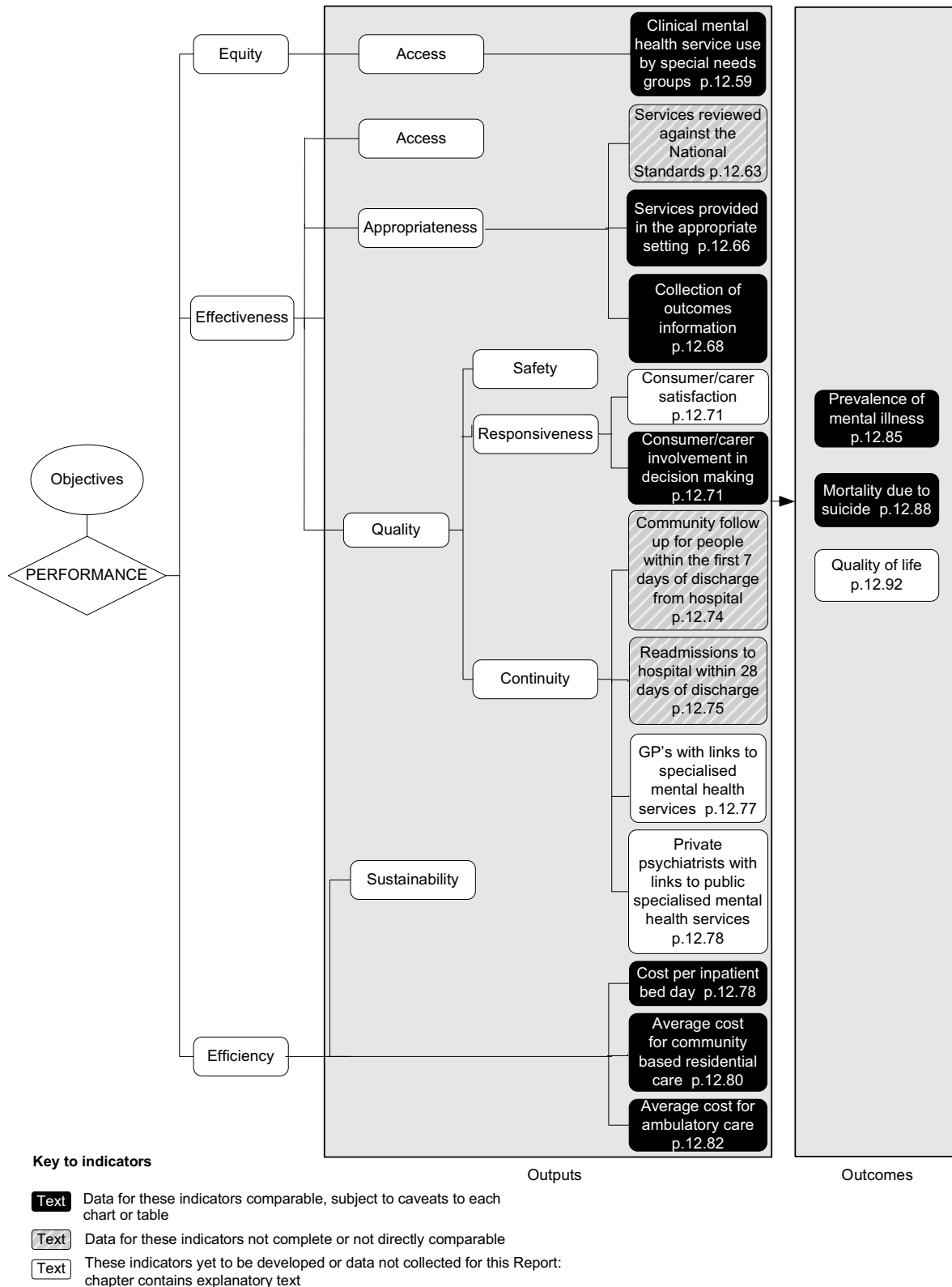


Suicide rates, 5 year average, 2004–2008^a (p. 12.90)



^a Data and caveats for these figures are available electronically from the website for the Review of Government Service Provision (www.pc.gov.au/gsp/reports/rogs/2011). Data may be subject to revision. The most recent data will be available on the Review website.

Performance indicators for mental health management (figure 12.29, p. 12.58)



Developments in reporting since the 2010 Report

- A new indicator ‘clinical mental health service use by special needs groups’ has been added to the framework and data are reported.

[MORE]

- The following three indicators previously considered not complete or not comparable are now considered comparable with caveats:
 - services provided in the appropriate setting
 - average cost for community-based residential care
 - average cost for ambulatory care.
- A new measure under the 'Collection of outcomes information' indicator is reported on the estimated proportion of episodes for which completed consumer outcome measures were collected.
- Reporting on the 'Services reviewed against the National Standards' indicator has been improved by the inclusion of data on additional categories relating to the achievement of standards.

[END]

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Tables with an 'A' suffix (eg table 12A.5) are in the attachments on the Review website.