

# ***F a c t s h e e t***

## ***Mental health management (Chapter 12)***

**Steering Committee for the  
Review of Government  
Service Provision**

Under embargo until 1.00am on Tuesday, 31 January 2012

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### **MENTAL HEALTH MANAGEMENT (CHAPTER 12)**

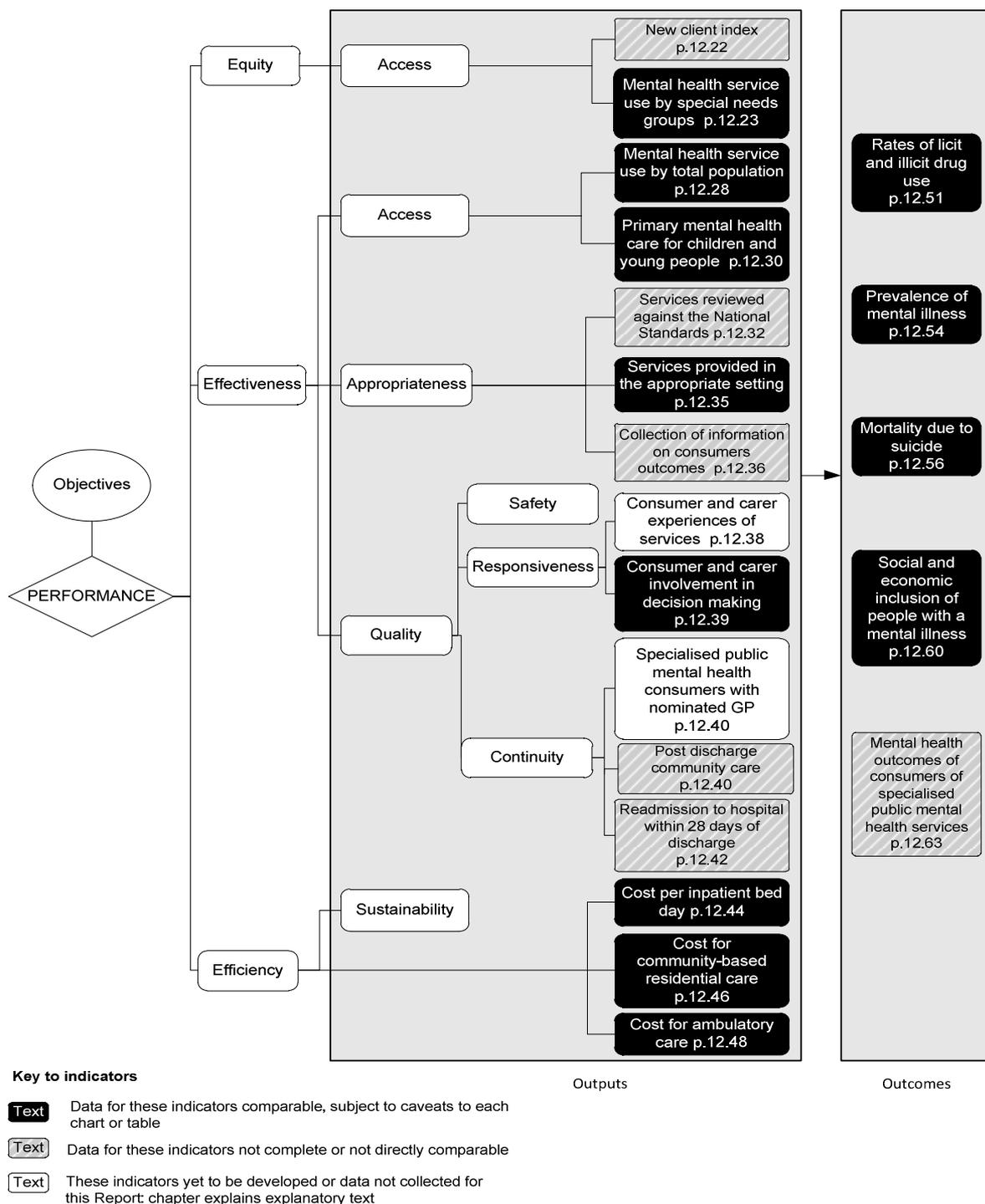
- The focus of this chapter is on the performance of governments in the management of mental health. Mental illness is a significant cause of morbidity and mortality in Australia and is identified by governments as a national health priority area **(p. 12.2)**.
- Governments provide or fund a range of mental health management services. The key services are Medicare Benefits Schedule (MBS)-subsidised mental health services; admitted patient care in hospitals; and community-based services that provide ambulatory care, residential care and support services for people with a mental illness living in the community **(pp. 12.11-12)**.
- Real government recurrent expenditure of around \$6.1 billion was allocated to mental health services in 2009-10 **(p. 12.7)**. State and Territory governments made the largest contribution (\$3.9 billion, or 63.5 per cent), although this included some Australian Government funds under the National Healthcare Agreements Specific Purpose Payment **(p. 12.7)**. The Australian Government spent \$2.2 billion or 36.5 per cent **(p. 12.7)**.
- In 2009-10, 6.3 per cent and 1.6 per cent of the total population received MBS-subsidised and State and Territory governments' community-based ambulatory care services, respectively **(pp. 12.28-29)**. Most people who received care from a community-based ambulatory service have also been admitted to hospital or received a community-based residential care service. The number of beds in public hospitals or community-based residential settings was 39.9 per 100 000 people in 2009-10 **(p. 12.16)**.

### **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 health problems and mental illness
- undertake early intervention for, and promote recovery from, mental health problems and mental illness
- reduce the impact of mental health problems and mental illness, including the effects of stigma on individuals, families and the community
- assure the rights of people with mental illness
- 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.

# Mental health management performance indicator framework (figure 12.9, p. 12.21)



[END]

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Tables with an '12A' prefix (eg table 12A.1) are in the attachments on the Review website.