

Written Briefing

Inquiry into the opportunities to
improve mental health outcomes for
Queenslanders

Supplementary information for Sections 14.2 Per capita expenditure and
14.3 Workforce and FTE

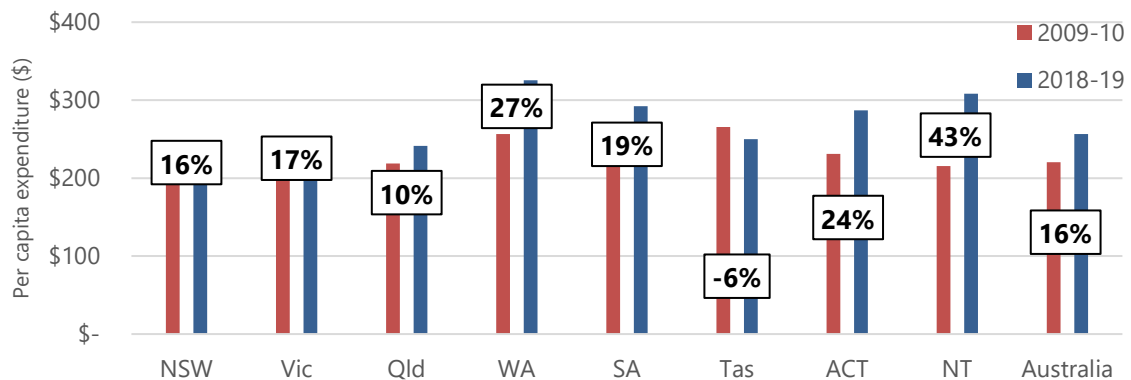


14.2 Per capita expenditure

Historically, Queensland has had one of the lowest per capita expenditure on mental health services in Australia, being below the national average for the past ten years.

The 2021 Report on Government Services, shows that in 2018-19, Queensland had the lowest per capita expenditure in Australia. Furthermore, while nationally, there was a sixteen per cent growth in per capita expenditure between 2009-10 and 2018-19, Queensland investment grew at ten per cent, the second lowest level of growth in Australia.

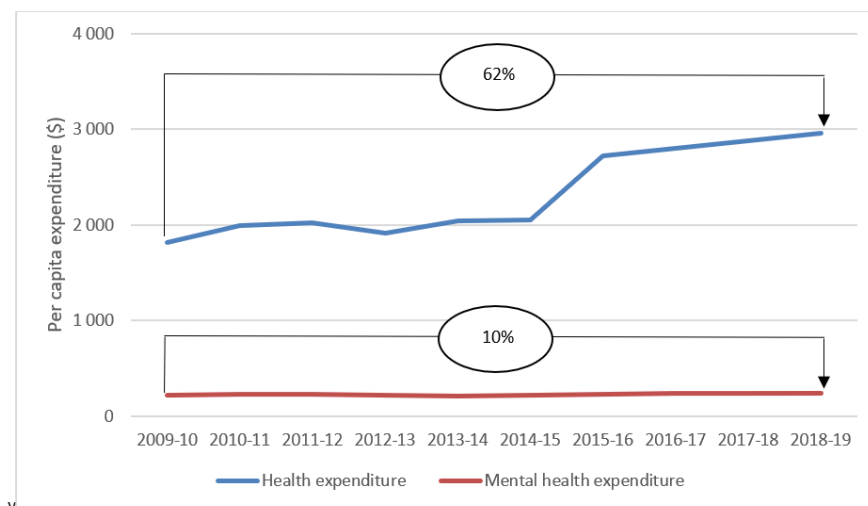
Graph 1: Per capita expenditure Australia's public mental health service 2009-10 to 2018-19.



Source: Report on Government Services 2021, PART E, 13 Services for mental health: Released on 28 January 2021. Table 13A.6. Percentage reflects change between 2009-10 and 2018-19 per capita spend.

Furthermore, the report shows that between 2009-10 and 2018-19 there was a 62 per cent increase in per capita expenditure on public hospital and health services in Queensland, whilst for mental health services there was a ten per cent increase over the same period.

Graph 2: Queensland per capita expenditure growth on overall public health compared to per capita expenditure growth on public mental health, 2009-10 to 2018-19.



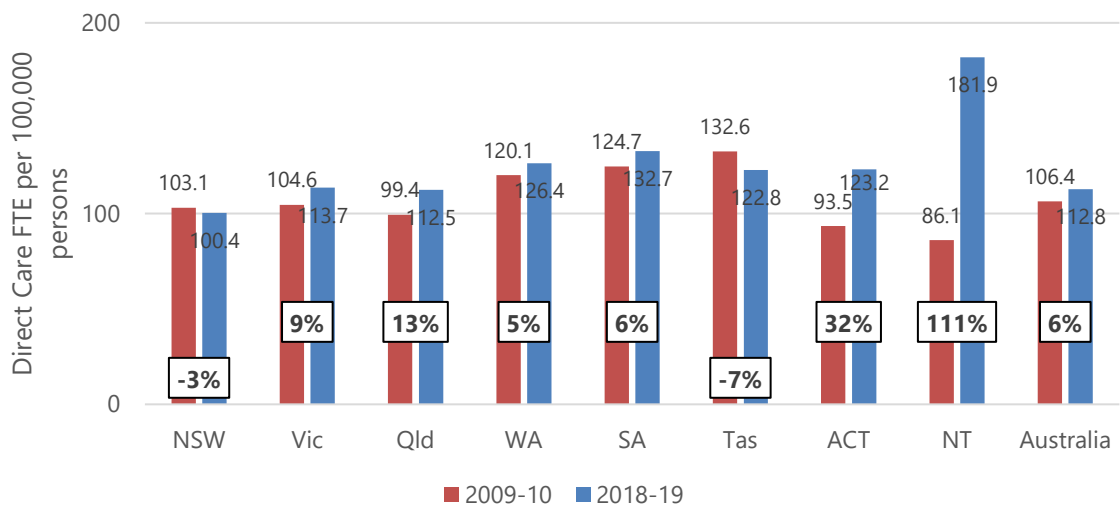
Source: Report on Government Services 2021, PART E, Section 13 Services for mental health: Released on 28 January 2021. Table 13A.6. Section 12 Public hospitals: Released on 28 January 2021. Table 12A.2. Percentage reflects change between 2009-10 and 2018-19 per capita spend.

14.3 Workforce and FTE

Queensland has consistently had one of the lowest direct care FTE per 100,000 persons for mental health service provision in Australia, being below the national average for most of the last decade.

The 2021 Report on Government Services, shows that in 2018-19, Queensland had the second lowest direct care FTE per 100,000 persons in Australia. This is despite a growth in Queensland's investment in direct care FTE (13 per cent) which was just over double the national growth rate (six per cent) between 2009-10 and 2018-19.

Graph 3: Direct care FTE positions per 100,000 persons, States and Territories and Australia, 2009-10 to 2018-19.



Source: Report on Government Services 2021, PART E, Section 13 Services for mental health: Released on 28 January 2021. Table 13A.12. Percentage reflects change between 2009-10 and 2018-19 direct care FTE.

Securing a workforce to meet current and future service delivery demands is a challenge across the MHAOD service system. There are current significant or looming shortfalls across psychiatry, medical addiction specialists and nursing and allied health, but also for the psychosocial support workforce and ongoing challenges in attracting and recruiting and AOD workforce.