

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Additional Estimates 2011-2012, 15 February 2012

Question: E12-012

OUTCOME 13: Acute Care

Topic: SUBACUTE MENTAL HEALTH FUNDING

Written Question on Notice

Senator Wright asked:

- a) How is Commonwealth mental health funding currently allocated to acute hospital care and community care services.
- b) What proportion of funding goes towards acute hospital based care and what proportion of funding goes towards community care services?

Answer:

- a) Under the National Partnership Agreement on Improving Public Hospital Services (NPA IPHS), each state and territory has the flexibility to determine the mix of subacute service types and regional distribution of beds and services that will best meet the needs of the state or territory. States and territories are required to actively engage with relevant sectors, such as the mental health and psychogeriatric care sectors, in the development of their Implementation Plans and throughout the period of the NPA IPHS (2010-11 to 2013-14). The NPA IPHS allows states and territories to review their Implementation Plans annually to take account of changing needs, subject to Commonwealth approval.
- b) Under the NPA IPHS, states and territories are able to deliver additional subacute care beds, most of which are delivered in hospital based settings, as well as additional bed equivalents, most of which are delivered in community based settings.

The proportion of funding allocated by states and territories to subacute mental health (which includes psychogeriatric care) is as follows: 78 per cent is for beds and 22 per cent is for bed equivalents. This data is based on state and territory Implementation Plans approved by the Commonwealth for the period of the subacute element of the NPA IPHS (2010-11 to 2013-14), where funding for mental health is separately identified.