

Queensland Health Funding and Expenditure for youth mental health

Target Population	Program Type	12-13	13-14	14-15	15-16
Child & adolescent	Community/Ambulatory	\$84,611,301	\$82,672,658	\$85,834,344	\$92,966,633
	Inpatient - Acute	\$18,197,961	\$19,562,983	\$22,257,992	\$23,649,202
	Inpatient - Non-Acute	\$4,937,668	\$3,062,331	-	-
	Total	\$107,746,930	\$105,297,972	\$108,092,336	\$116,615,835
Young persons'	Community/Ambulatory	\$2,525,085	\$2,140,365	\$2,525,686	\$2,350,720
	Inpatient - Acute	\$4,267,087	\$4,727,074	\$4,799,268	\$4,988,403
	Total	\$6,792,172	\$6,867,439	\$7,324,954	\$7,339,123
Total		\$114,539,102	\$112,165,411	\$115,417,290	\$123,954,958

Note:

1. 2015-16 data is preliminary and subject to change
2. Data extracted on 18 August 2017 from Mental Health Establishments Collection Application
3. Indirect expenditure (such as clinical governance costs) is excluded from this data.
4. The decrease in non-acute expenditure relates to closure of the Barrett Adolescent Centre.
5. Data is not yet available for 2016-17.
6. Funding to community managed organisations for delivery of mental health programs are not specific to the youth population.

RTI REQUESTS

RTI 3809 Release Notes

RTI #3809 - Data relating to budget and expenditure for all Department of Health programs and activities relating to youth mental health.

Fourth National Mental Health Plan

The Fourth National Mental Health Plan (Fourth Plan) was endorsed by Health Ministers in November 2009. The Fourth Plan, at the time, aligned with the priorities and actions of the *Queensland Plan for Mental Health 2007 – 2017*.

The Fourth Plan identified 34 actions under five priority areas. The five priority areas were:

- Social Inclusion and Recovery
- Prevention and Early Intervention
- Service Access, Coordination and Continuity of Care
- Quality Improvement and Innovation
- Accountability — Measuring and reporting progress

Some of the actions required commitments of time and effort rather than financial investment and others require new or refocused funding. Several actions required new funding and it was up to individual jurisdictions to source funding as appropriate.

The Mental Health Standing Committee (MHSC) was responsible for driving the national implementation of the Fourth Plan on behalf of Health Ministers.

Following advice from the Australian Health Ministers' Advisory Committee (AHMAC) in February 2011, MHSC, in conjunction with the Chair of the Health Policy Priorities Principal Committee (HPPPC), identified two flagship initiatives for priority implementation Social Inclusion (Flagship 1) and Children and Youth (Flagship 2).

Flagship 2 - Children and Youth was led by the Commonwealth with Queensland membership and included the following actions:

- Action 9: Implement targeted prevention and early intervention programs for children and their families through partnerships between mental health, maternal and child health services, schools and other related organisations.
- Action 10: Expand community-based youth mental health services which are accessible and combine primary health care, mental health and alcohol and other drug services.
- Action 11: Implement evidence-based and cost-effective models of intervention for early psychosis in young people to provide broader national coverage.

Queensland took a national lead in the implementation of five actions under the Fourth Plan, including:

- implementing targeted prevention and early intervention programs for children and families;
- increasing consumer and carer employment in clinical and community settings;
- expanding the level and range of services available to children of parents with a mental illness; and
- increasing the flow of communication between primary care and specialist providers.

The Queensland Mental Health Reform committee, established in 2010, was tasked to progress Queensland's implementation of the Fourth National Mental Health Plan and the *Queensland Plan for Mental Health 2007-2017*.

Queensland Plan for Mental Health 2007-2017

Through the implementation of phase 1 (2007-2011) of the *Queensland Plan for Mental Health 2007-2017*, a total of \$632.4 million was invested to improve the Queensland mental health service system. This included \$528.8 million over four years in 2007-08, \$88.6 million over four years in 2008-09, \$6.5 million over three years in 2009-10, and \$8.5 million over four years in 2010-11.

Connecting Care to Recovery 2016-2021: A plan for Queensland's State funded mental health alcohol and other drug services

This plan was publicly released by the Minister for Health on 10 October 2016. The plan guides the investment of \$358 million over five years to support Queenslanders living with mental health, alcohol and drug issues. Over five years:

- \$75M is being directed to adult mental health services.
- \$87M is for child and youth initiatives;
- \$58M is for implementation of the Mental Health Act 2016;
- \$44M is for new investment in alcohol and other drug services;
- \$31M is for perinatal and infant mental health;
- \$29M is for state-wide and specialist service enhancements;
- \$14M is for older adult initiatives;
- \$12M is for forensic and prison mental health services; and
- \$ 5M is for workforce initiatives.

Queensland Health Funding and Expenditure

Queensland services delivered by Hospital and Health Service (HHS) are funded via the HHS Service Agreements. In general funding is provided for overall programs (such as mental health) rather than explicit programs. As a result it is not possible to identify funding to specific programs.

Expenditure on Queensland's public mental health services is collected annual through the annual Mental Health Establishments Collection. Through this data it is possible to identify expenditure for child and adolescent (0-17 years) and young person (16-24) admitted patient and community/ambulatory services.