

# Establishment—recurrent expenditure (salaries and wages) (psychiatrists) (financial year), total Australian currency N[N(8)]

## Identifying and definitional attributes

<b>Metadata item type:</b>	Data Element
<b>Short name:</b>	Recurrent expenditure (salaries and wages)—psychiatrists
<b>METEOR identifier:</b>	718789
<b>Registration status:</b>	<ul style="list-style-type: none"><li>• <a href="#">Health</a>, Superseded 20/01/2021</li></ul>
<b>Definition:</b>	Salary and wage payments to <a href="#">psychiatrists</a> of an establishment, for a financial year.

## Data element concept attributes

### Identifying and definitional attributes

<b>Data element concept:</b>	<a href="#">Establishment—recurrent expenditure (salaries and wages)</a>
<b>METEOR identifier:</b>	269717
<b>Registration status:</b>	<ul style="list-style-type: none"><li>• <a href="#">ACT Health (retired)</a>, Candidate 14/08/2018</li><li>• <a href="#">Health</a>, Superseded 20/01/2021</li></ul>
<b>Definition:</b>	<p>Salary and wage payments for all employees of the establishment (including contract staff employed by an agency, provided staffing data is also available).</p> <p>Generally, salary data by staffing categories should be broadly consistent with full-time equivalent staffing numbers. Where staff provide services to more than one hospital (for Public hospitals establishments NMDS) or service unit (for Mental health establishments NMDS), their salaries should be apportioned between all hospitals to whom services are provided on the basis of hours worked in each hospital.</p> <p>Salary payments for contract staff employed through an agency should be included under salaries for the appropriate staff category provided they are included in full-time equivalent staffing. If they are not, salary payments should be shown separately.</p>

**Context:** Health expenditure:

Salaries and wages invariably constitute the major component of recurrent and, indeed, total expenditure for establishments are vital to any analysis of health expenditure at the national level. The categories correspond with those relating to full-time equivalent staffing which is a requirement for any proper analysis of average salary costs.

**Object class:** [Establishment](#)

**Property:** [Recurrent expenditure](#)

## Value domain attributes

### Identifying and definitional attributes

**Value domain:** [Total Australian currency N\[N\(8\)\]](#)

**METEOR identifier:** 270563

**Registration status:**

- [ACT Health \(retired\)](#), Candidate 14/08/2018
- [Community Services \(retired\)](#), Standard 27/04/2007
- [Disability](#), Standard 07/10/2014
- [Early Childhood](#), Standard 21/05/2010
- [Health](#), Standard 01/03/2005
- [National Health Performance Authority \(retired\)](#), Retired 01/07/2016

**Definition:** Total number of Australian dollars.

### Representational attributes

**Representation class:** Total

**Data type:** Currency

**Format:** N[N(8)]

**Maximum character length:** 9

**Unit of measure:** Australian currency (AU\$)

## Data element attributes

### Source and reference attributes

**Submitting organisation:** Australian Institute of Health and Welfare

### Relational attributes

**Related metadata references:** Supersedes [Establishment—recurrent expenditure \(salaries and wages\) \(consultant psychiatrists and psychiatrists\) \(financial year\), total Australian currency N\[N\(8\)\]](#)

- [ACT Health \(retired\)](#), Candidate 17/08/2018
- [Health](#), Superseded 16/01/2020

Has been superseded by [Establishment—recurrent expenditure \(salaries and wages\) \(psychiatrists\) \(financial year\), total Australian currency N\[N\(8\)\]](#)

- [Health](#), Standard 20/01/2021

**Implementation in Data Set Specifications:**

[Mental health establishments NMDS 2020–21 Health](#), Superseded 20/01/2021

*Implementation start date:* 01/07/2020

*Implementation end date:* 30/06/2021

***DSS specific information:***

Reporting of this data element is not compulsory for non-government residential mental health services and specialised mental health services provided by private hospitals that receive state or territory government funding.

However, these services are still encouraged to report this data where available.

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