

# **Establishment—full-time equivalent staff (paid) (psychiatry registrars and trainees), average NNNN.NN**

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# Establishment—full-time equivalent staff (paid) (psychiatry registrars and trainees), average NNNN.NN

## Identifying and definitional attributes

<b>Metadata item type:</b>	Data Element
<b>Short name:</b>	Full-time equivalent staff—psychiatry registrars and trainees
<b>METEOR identifier:</b>	718870
<b>Registration status:</b>	<a href="#">Health</a> , Standard 16/01/2020
<b>Definition:</b>	The average number of full-time equivalent staff units paid for all <a href="#">psychiatry registrars and trainees</a> within an establishment.
<b>Data Element Concept:</b>	<a href="#">Establishment—full-time equivalent staff (paid) (psychiatry registrars and trainees)</a>
<b>Value Domain:</b>	<a href="#">Average full-time equivalent staff NNNN.NN</a>

## Value domain attributes

## Representational attributes

<b>Representation class:</b>	Average
<b>Data type:</b>	Number
<b>Format:</b>	NNNN.NN
<b>Maximum character length:</b>	6
<b>Unit of measure:</b>	Full-time equivalent (FTE) staff

## Data element attributes

## Collection and usage attributes

**Guide for use:** Medical officers who are a recognised trainee within the Royal Australian and New Zealand College of Psychiatrists postgraduate training program.

The average is to be calculated from pay period figures. The length of the pay period is assumed to be a fortnight.

Data on full-time equivalent staffing numbers by category should be consistent with data on salaries and wages by staffing category. If the full-time equivalent for contract staff is not collected then salaries for those contract staff should be included in other recurrent expenditure data items.

Where staff provide services to more than one establishment, full-time equivalent staff members should be apportioned between all establishments to which services are provided on the basis of hours paid for in each (salary costs should be apportioned on the same basis).

**Comments:** This metadata item was amended during 1996-97. Until then, both average and end of year counts of full-time equivalent staff were included, and the end of year counts used as surrogates for the average counts if the latter were unavailable. The average count is more useful for accurate analysis of staffing inputs for establishment outputs and for assessments and comparisons of labour costs.

## Source and reference attributes

**Origin:** National Health Data Committee

## Relational attributes

**Related metadata references:** Supersedes [Establishment—full-time equivalent staff \(paid\) \(psychiatry registrars and trainees\), average N\[NNN{.N}\]](#)  
[Health](#), Superseded 16/01/2020

**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.

[Mental health establishments NMDs 2021–22](#)

[Health](#), Superseded 17/12/2021

**Implementation start date:** 01/07/2021

**Implementation end date:** 30/06/2022

**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.

[Mental health establishments NMDs 2022–23](#)

[Health](#), Superseded 09/12/2022

**Implementation start date:** 01/07/2022

**Implementation end date:** 30/06/2023

**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.

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[Mental health establishments NMDs 2023–24](#)

[Health](#), Superseded 06/12/2023

**Implementation start date:** 01/07/2023

**Implementation end date:** 30/06/2024

**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.

[Mental health establishments NMDs 2024–25](#)

[Health](#), Standard 06/12/2023

**Implementation start date:** 01/07/2024

**Implementation end date:** 30/06/2025

**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.

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