# Results of mental health and addiction staff survey

Ngā Poutama Oranga Hinengaro: Quality in Context

## NGO Northern Region

Ngā Poutama Oranga Hinengaro: Quality in Context was a national survey of quality culture in mental health and addiction services. The survey was conducted in August 2018.

Thank you to the over 2,500 people around the country who participated in the survey. Here are the results for your NGO region.

### Engagement with tangata whaiora and family/whanau

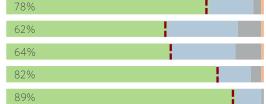
My team actively incorporates tangata whaiora needs, values and beliefs in their care/support plans

In this service we involve tangata whaiora and family/whanau in efforts to improve future practice

We work alongside family/whānau to understand how best to support them and their family member

We work with tangata whaiora to co-create a plan of care and support

Tangata whaiora and family/whanau are treated with respect by the service I work for



### Care and support provided

When tangata whaiora are transferred from one service to another, all important and necessary information is exchanged well ([NGO] Think about transfers from your organisation and other NGOs/primary care)

Tāngata whaiora care/support is well coordinated between DHBs and NGOs/primary care

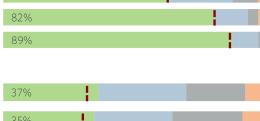
In this service it is easy to speak up if I perceive a problem with tangata whaiora care

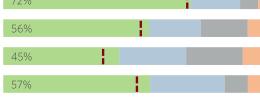
We access kaumātua, cultural advisors or other cultural supervision to support working with tāngata whaiora Māori when appropriate

Te reo Māori is used with tāngata whaiora Māori and their whānau in clinical/support sessions where appropriate

Mihi and whakawhanaungatanga are used in sessions with tāngata whaiora and families/whānau where appropriate

Staff in my team adhere to clinical evidence and guidelines





68%

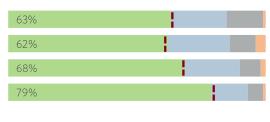
### Learning and changing the care/support provided

Senior staff in this service/organisation actively encourage staff to put forward ideas about how care/support can be improved

In this service we use data to help us monitor and make improvements to our quality of care/support

Learning from adverse events has led to positive change in this service/organisation

In this service, recognising and reporting incidents is encouraged and valued



### Engaged, effective workforce

The wider organisation has a good understanding of the type of work we do in my service

Everybody in this service works together in a well-coordinated way

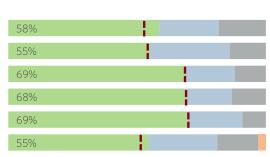
I feel supported by my manager(s)

I have regular access to coaching or mentoring or supervision

There are opportunities for professional development (including attending conferences, workshops and training sessions)

We have effective systems for preventing or dealing with intimidating behaviour and workplace bullying

% Don't know



### How to use these survey results

% Neutral

% Positive

These survey results can be used to support quality improvement in your organisation.

% Negative

We encourage frontline staff to use the results to support quality improvement projects, by:

- displaying the results in staff areas
- talking about the results in team meetings and with colleagues
- using the results to develop change ideas and test changes, as part
  of the plan-do-study-act cycle.

### Key findings for my NGO region

The results for the NGO Northern Region were consistent with the combined results across all NGO regions; there were no statistically significant differences to the all-NGO regions results.

Statistically significant difference
 No evidence of difference

Within NGO Northern Region:

All-NGO regions % positive -

- 89 percent of MHA staff who took part agreed (ie, gave a positive response) that tangata whaiora and whanau are treated with respect; this measure had the highest percentage of positive scores
- 35 percent of staff agreed that tangata whaiora care/support is well coordinated between DHBs and NGOs/primary care; this measure had the lowest percentage of positive scores.



### In words - what would make things better for tangata whaiora

# healing-methods support-services\_ourselling physical-environments activities under-pressuresmoother-transitions under-pressuresmoother-transitions under-pressuresmoother-transitions under-pressuresmoother-transitions under-pressuresmoother-transitions under-pressuresmoother-transitions under-pressuresmoother-transitions under-pressure-invigence collaboration goal-focus pathways caseloads paper-work outcome-focus Cultural-training proactive waiting-lists bureaucracy collaboration goal-focus bureaucracy collaboration goal-focus proactive waiting-lists bureaucracy collaboration goal-focus public-understanding more-psychologists Cultural-support goal-focus goal-foc

### In words - what currently works well for tangata whaiora



These word-clouds summarise the key themes from the range of responses around the country. Below are some examples of responses from your NGO region:

'As an NGO we still struggle to work alongside the DHB, not from trying on our side. It's really frustrating and doesn't lead to a great experience for our whaiora'

'Better access without the red tape. Better information sharing of critical client information'

'Encourage people with mental health issues to reconnect with whānau whenever possible'

'A more accessible residential programme'

'Collaboration, inclusion, they have a voice that is listened to and considered, the whole care plan includes whānau supporters'

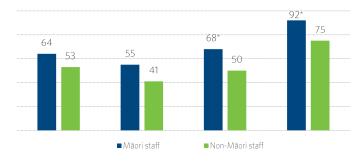
'I acknowledge the strong support from my colleagues (strong team work)'

 ${\rm ^{\prime}Our}$  open-door policy where family can communicate, visit and engage with staff

'The open communication that we have with the tangata whaiora to put forward ideas about what they would like to see in their care plan'

'Sharing personal experiences'

# Questions relating to cultural competency – comparing responses from Māori and non-Māori staff



Mihi and whakawhanaungatanga are used in sessions with tāngata whaiora and families/whānau where appropriate Te reo Māori is used with tāngata whaiora Māori and their whānau in clinical/support sessions where appropriate We access kaumātua, cultural advisors or other cultural supervision to support working with tāngata whaiora Māori when appropriate My team actively incorporates tāngata whaiora needs, values and beliefs in their care/support plans

Data in these graphs is the percentage of people who gave a positive response

Comparisons between Māori and non-Māori are shown only where there is a minimum of 20 people in each category

# Why was the survey conducted?

This survey underpins the national mental health and addiction quality improvement programme, funded by DHBs and coordinated by the Health Quality & Safety Commission.

The survey was run to help identify where knowledge, culture or communication may impact the quality and safety of mental health and addiction services. The survey findings intend to be used to inform local quality improvement initiatives.

The survey was open for the month of August 2018.

The survey was conducted by Mobius Research Ltd on behalf of the Health Quality & Safety Commission.

### Where can I find more information?

This report does not present all the information from the survey. There are a range of other reporting resources. You can find all of these resources on the Health Quality & Safety Commission website <a href="https://www.hqsc.govt.nz/our-programmes/mental-health-and-addiction-quality-improvement/projects/quality-in-context">www.hqsc.govt.nz/our-programmes/mental-health-and-addiction-quality-improvement/projects/quality-in-context</a>

Information not contained in these other resources is available by request. Refer to the above link for contact details.

### How many people in my NGO completed the survey?

The results in this document are based on 229 responses from your NGO. This number of responses for your NGO means there is a margin of error of 6 percent for each of the quality and culture survey questions.

### Significant differences

Difference between groups (such as Māori compared to non-Māori, or the NGO to the national average) are tested for statistical significance at the 95% confidence level. Statistically significant differences are indicated on the graphs.

<sup>\*</sup> Indicates a statistically significant difference