

# Results of mental health and addiction staff survey

## Ngā Poutama Oranga Hinengaro: Quality in Context

### Midland Region NGOs

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 June 2022.

Thank you to the over 1,800 people around the country who participated in the survey. Here are the results for your NGO region.

#### How to use these survey results

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

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

No significant differences compared to the national results

Highest positive scores:

Tāngata whaiora and family/whānau treated with respect, co-create plans of care and support

Lowest positive scores:

Coordination between DHB/NGO/primary care, transfers between services.

#### Engagement with tāngata whaiora and family/whānau

My team actively incorporates tāngata whaiora needs, values and beliefs in their care/support plans (82% national NGO average)	2018	80%
	2022	85%
In this service we involve tāngata whaiora and family/whānau in efforts to improve future practice (66%)	2018	66%
	2022	66%
We work alongside family/whānau to understand how best to support them and their family member (67%)	2018	62%
	2022	70%
We work with tāngata whaiora to co-create a plan of care and support (84%)	2018	80%
	2022	89%
Tāngata whaiora and family/whānau are treated with respect by the service I work for (89%)	2018	87%
	2022	95%

#### Care and support provided

When tāngata whaiora are transferred from one service to another, all important and necessary information is exchanged well (Think about transfers from your organisation and other NGOs/primary care) (29%)	2018	26%
	2022	21%
Tāngata whaiora care/support is well coordinated between DHBs and NGOs/primary care (27%)	2018	24%
	2022	15%
In this service it is easy to speak up if I perceive a problem with tāngata whaiora care (69%)	2018	69%
	2022	72%
We access kaumātua, cultural advisors or other cultural supervision to support working with tāngata whaiora Māori when appropriate (50%)	2018	53%
	2022	53%
Te reo Māori is used with tāngata whaiora Māori and their whānau in clinical/support sessions where appropriate (42%)	2018	41%
	2022	37%
Mihi and whakawhanaungatanga are used in sessions with tāngata whaiora and families/whānau where appropriate (57%)	2018	51%
	2022	55%
Staff in my team adhere to clinical evidence and guidelines (68%)	2018	64%
	2022	63%

■ % Positive
 ■ % Neutral
 ■ % Negative
 ■ % Don't know

## 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 (63%)	2018	62%
	2022	71%
In this service we use data to help us monitor and make improvements to our quality of care/support (54%)	2018	60%
	2022	51%
Learning from adverse events has led to positive change in this service/organisation (62%)	2018	68%
	2022	54%
In this service, recognising and reporting incidents is encouraged and valued (76%)	2018	81%
	2022	69%

## Engaged, effective workforce

Everybody in this service works together in a well-coordinated way (58%)	2018	56%
	2022	59%
I feel supported by my manager(s) (73%)	2018	69%
	2022	75%
I have regular access to coaching or mentoring or supervision (69%)	2018	66%
	2022	72%
There are opportunities for professional development (including attending conferences, workshops and training sessions) (70%)	2018	74%
	2022	67%
We have effective systems for preventing or dealing with intimidating behaviour and workplace bullying (53%)	2018	51%
	2022	53%

■ % Positive
 ■ % Neutral
 ■ % Negative
 ■ % Don't know

## In words – what would make things better for tāngata whaiora



- "Listening more to them about what they need. Working with them where they are at instead of focusing on meeting KPIs"
- "More access to community/natural supports which are open (not discriminatory) to people from all walks of life"
- "Agencies to work together more collaboratively"
- "Flexibility about ages for admission. Sometimes people need residential support in the community and can be excluded because of their age"

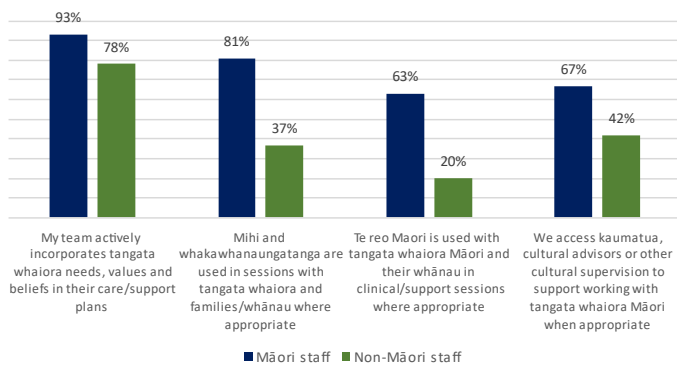
## In words – what has been the impact of COVID-19 on quality improvement initiatives

- "Working remotely has impacted the way we connect with whānau whaiora and our wider kaimahi whānau. This has made it difficult to drive initiatives initially but we're now at a place where this is becoming easier"
- "Added pressure to respond, therefore quality improvement activities were out on hold as we had to balance business as usual with the response and well-being to COVID in our community"
- "Limited training opportunities"

## In words – what is one thing that currently works well

- "The staff on the ground are passionate about the work that they do"
- "Peer and lived experience understanding"
- "The overall culture of responsiveness and care that our agency and staff deliver including peer support and spaces to be"
- "That there is no restriction of time in our service, it is up to the person using our service when they feel they are ready for discharge"

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



### Why was the survey conducted?

This survey underpins the national mental health and addiction quality improvement programme, funded by DHBs and coordinated by Te Tāhū Hauora 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 June 2022.

The survey was conducted by Mobius Research Ltd on behalf of Te Tāhū Hauora 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 Te Tāhū Hauora Health Quality & Safety Commission website [www.hqsc.govt.nz/our-work/mental-health-and-addiction-quality-improvement/projects/quality-in-context-survey-of-mental-health-and-addiction/](http://www.hqsc.govt.nz/our-work/mental-health-and-addiction-quality-improvement/projects/quality-in-context-survey-of-mental-health-and-addiction/)

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 region completed the survey?

The results in this document are based on 79 responses from NGOs in the Midland Region.

### 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.