Results of mental health and addiction staff survey

Ngā Poutama Oranga Hinengaro: Quality in Context

Counties Manukau DHB

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 DHB.

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 (If you work in a DHB, think about transfers within the DHB)

Tangata 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 tangata whaiora and families/whanau where appropriate

Staff in my team adhere to clinical evidence and guidelines

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:

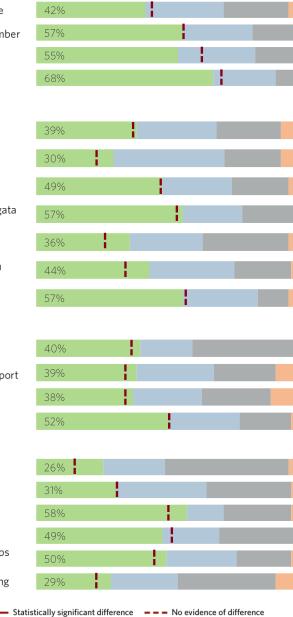
- displaying the results in staff areas
- talking about the results in team meetings and with colleagues
- using the results to develop change ideas and test changes, as part of the plan-do-study-act cycle.

Key findings for my DHB

The results for Counties Manukau DHB were consistent with the combined results across all DHBs; there were no statistically significant differences to the all-DHB results. Within Counties Manukau DHB:

- 68 percent of MHA staff who took part agreed that tangata whaiora and whānau are treated with respect; this measure had the highest percentage of positive scores.
- 26 percent of staff agreed that the work of their MHA service is wellunderstood by their organisation. Twenty-nine percent agreed there are effective systems in place for preventing/dealing with workplace bullying. These two measures had the lowest percentage of positive scores.

Health Quality & Safety Commission New Zealand



In words - what would make things better for tangata whaiora

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 DHB:

'We lost our kaumatua in a restructure so don't have easy access to cultural services'

complementary-services

'Ensuring that we have the appropriate facilities for tangata whaiora. This includes a safe, clean and friendly environment and easy access'

Better coordination of care particularly between community and inpatient, adequate staffing levels, adequate follow-up in community'

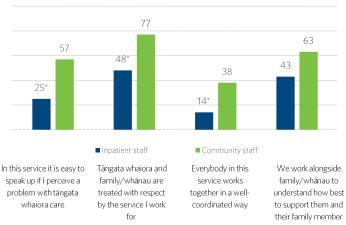
'Communication and having more support from senior management when there is a concern'

'Individual tangata whaiora often receive good care depending on which clinicians they work with. Approaches, skills and level of commitment differ, yet there are many caring clinicians providing a good service'

'Currently awaiting the completion of the new inpatient unit which is designed for our model of care to enhance cultural reference for Māori and Pacific based on the Mason Durie model Whare Tapu Wha'

'Fairly swift access to assessment and treatment'

Questions with the largest difference between inpatient and community staff



^{*} Indicates a statistically significant difference

Data in this graph is the percentage of people who gave a positive response

Comparisons between community and inpatient 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 www.hgsc.govt.nz/our-programmes/mental-health-and-addiction-quality-improvement/projects/quality-in-context

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

How many people in my DHB completed the survey?

The results in this document are based on 83 responses from your DHB. This number of responses for your DHB means there is a margin of error of 11 percent for each of the quality and culture survey questions.

Significant differences

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