

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 June 2022.

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

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 Counties Manukau DHB

Significant differences shown next to national average score*

Highest positive scores:

Tāngata whaiora & family/whānau treated with respect, feel supported by my manager

Lowest positive scores:

Coordination between DHB/NGO/primary care, effective systems for dealing with bullying, use of data

Engagement with tāngata whaiora and family/whānau

Statement	Year	% Positive	% Neutral	% Negative	% Don't know
My team actively incorporates tāngata whaiora needs, values and beliefs in their care/support plans (56% national average all DHBs)	2018	55%			
	2022	51%			
In this service we involve tāngata whaiora and family/whānau in efforts to improve future practice (43%)	2018	43%			
	2022	41%			
We work alongside family/whānau to understand how best to support them and their family member (56%)	2018	58%			
	2022	49%			
We work with tāngata whaiora to co-create a plan of care and support (62%)*	2018	56%			
	2022	45%			
Tāngata whaiora and family/whānau are treated with respect by the service I work for (71%)	2018	69%			
	2022	67%			

Care and support provided

Statement	Year	% Positive	% Neutral	% Negative	% Don't know
When tāngata 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) (38%)	2018	39%			
	2022	33%			
Tāngata whaiora care/support is well coordinated between DHBs and NGOs/primary care (23%)	2018	30%			
	2022	31%			
In this service it is easy to speak up if I perceive a problem with tāngata whaiora care (50%)	2018	49%			
	2022	52%			
We access kaumātua, cultural advisors or other cultural supervision to support working with tāngata whaiora Māori when appropriate (45%)	2018	57%			
	2022	49%			
Te reo Māori is used with tāngata whaiora Māori and their whānau in clinical/support sessions where appropriate (26%)	2018	36%			
	2022	33%			
Mihi and whakawhanaungatanga are used in sessions with tāngata whaiora and families/whānau where appropriate (34%)	2018	44%			
	2022	39%			
Staff in my team adhere to clinical evidence and guidelines (60%)	2018	57%			
	2022	51%			

■ % 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 (37%)	2018	40%
	2022	35%
In this service we use data to help us monitor and make improvements to our quality of care/support (34%)	2018	39%
	2022	30%
Learning from adverse events has led to positive change in this service/organisation (36%)	2018	38%
	2022	40%
In this service, recognising and reporting incidents is encouraged and valued (52%)	2018	52%
	2022	50%

Engaged, effective workforce

Everybody in this service works together in a well-coordinated way (35%)	2018	31%
	2022	33%
I feel supported by my manager(s) (54%)	2018	58%
	2022	59%
I have regular access to coaching or mentoring or supervision (53%)	2018	49%
	2022	54%
There are opportunities for professional development (including attending conferences, workshops and training sessions) (43%)	2018	50%
	2022	43%
We have effective systems for preventing or dealing with intimidating behaviour and workplace bullying (24%)	2018	29%
	2022	18%

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

In words – what would make things better for tāngata whaiora



- "More resources including funding and services"
- "More Māori clinicians"
- "If the unit was adequately staffed this would make a huge difference"
- "An environment designed for them, especially in the inpatient setting"
- "Better coordination with inpatient services and NGO"

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

- "We were limited in therapy groups, due to needing to Zoom, thus lowering quality of them"
- "Put projects on hold or delayed them"
- "Many had to be paused"
- "Has almost stopped all initiatives, as of April, these have begun to start up again"
- "Huge impact. Quality improvement and service development has been on hold for at least six of the past 12 months"

In words – what is one thing that currently works well

- "Our team work to support each other in their respective roles and have a strong tāngata whaiora focus"
- "Good team morale"
- "Genuinely caring staff who are doing their best"
- "We are a kind, caring, friendly, supportive team, keen to help whaiora"
- "Offering a range of ways to connect - phone, videoconference, in person, home/community visits"

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/

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 55 responses from your DHB.

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.