Results of mental health and addiction staff survey

Ngā Poutama Oranga Hinengaro: Quality in Context

South Canterbury 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

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 South Canterbury DHB

Significant differences shown next to national average score* Highest positive scores:

Tāngata whaiora & family/whānau treated with respect, cocreate a plan of care and support, access kaumatua Lowest positive scores:

Coordination between DHB/NGO/primary care.

Engagement with tangata whaiora and family/whanau

	2018	63%
	2022	56%
In this service we involve tāngata whaiora and family/whānau in efforts to improve future practice (43%)	2018 2022	56%
		56%
We work alongside family/whānau to understand how best to support them and their family member (56%)	2018 2022	72%
		59%
We work with tangata whaiora to co-create a plan of care and support (62%)	2018 2022	75%
		76%
Tāngata whaiora and family/whānau are treated with respect by the service I work for (71%)	2018	69%
	2022	76%

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) (38%)	2018 2022	48% 50%	
Tāngata whaiora care/support is well coordinated between DHBs and NGOs/primary care (23%)	2018 2022	25% 29%	
In this service it is easy to speak up if I perceive a problem with tangata whaiora care (50%)	2018 2022	55% 67%	
We access kaumātua, cultural advisors or other cultural supervision to support working with tāngata whaiora Māori when appropriate (45%)*	2018 2022	81% 75%	
Te reo Māori is used with tāngata whaiora Māori and their whānau in clinical/support sessions where appropriate (26%)	2018 2022	34% 44%	
Mihi and whakawhanaungatanga are used in sessions with tāngata whaiora and families/whānau where appropriate (34%)	2018 2022	48% 56%	
Staff in my team adhere to clinical evidence and guidelines (60%)	2018 2022	65% 67%	







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 2022	31%		
		60%		
In this service we use data to help us monitor and make improvements to our quality of care/support (34%)	2018 2022	25%		
		60%		
Learning from adverse events has led to positive change in this service/organisation (36%)	2018 2022	34%		
		64%		
In this service, recognising and reporting incidents is encouraged and valued (52%)	2018 2022	41%		
		57%		

Engaged, effective workforce

Everybody in this service works together in a well-coordinated way (35%)	2018	38%
	2022	60%
I feel supported by my manager(s) (54%)	2018	47%
	2022	73%
I have regular access to coaching or mentoring or supervision (53%)	2018	27%
	2022	50%
There are opportunities for professional development (including attending conferences, workshops and training sessions) (43%)	2018	39%
	2022	60%
We have effective systems for preventing or dealing with intimidating behaviour and workplace bullying (24%)	2018	31%
	2022	47%
beliavious and workplace banying (2-70)		

% Positive % Neutral % Negative % Don't know

In words – what would make things better for tangata whaiora



- "Residential facilities in this area and more emergency accommodation"
- "Better understanding and embedding of equity, selfdetermination and empowerment by utilising a whole of system collaborative approach to health and wellbeing aligning with key strategic principles and Te Ao Māori"
- "More staff, clinicians"
- "Open engagement and support of equity leaders"

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

- "Unable to run meetings and the incidence of seclusion has increased due to the raised level of anxiety"
- "A delay in moving quality improvement initiatives forward. Staff sickness has resulted in us focusing on one day at a time to ensure critical services continue"
- "They are all stalled, but we continue to attempt to move forward.
 We continue to provide excellent care despite massive staff shortages"
- "COVID has limited initiatives or put them on hold"

In words – what is one thing that currently works well

- "They receive a full holistic package including help to find accommodation, food parcels, support attending appointments"
- "Access to services that are flexible, versatile and culturally focused"
- "Having support from Hauora Team to understanding cultural aspects to consider when working in partnership with Māori clients and their whānau"
- "Clinical skills of the team"

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 17 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.