

# Results of mental health and addiction staff survey

## Ngā Poutama Oranga Hinengaro: Quality in Context

### Waikato 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 Waikato DHB

Significant differences shown next to national average score\*

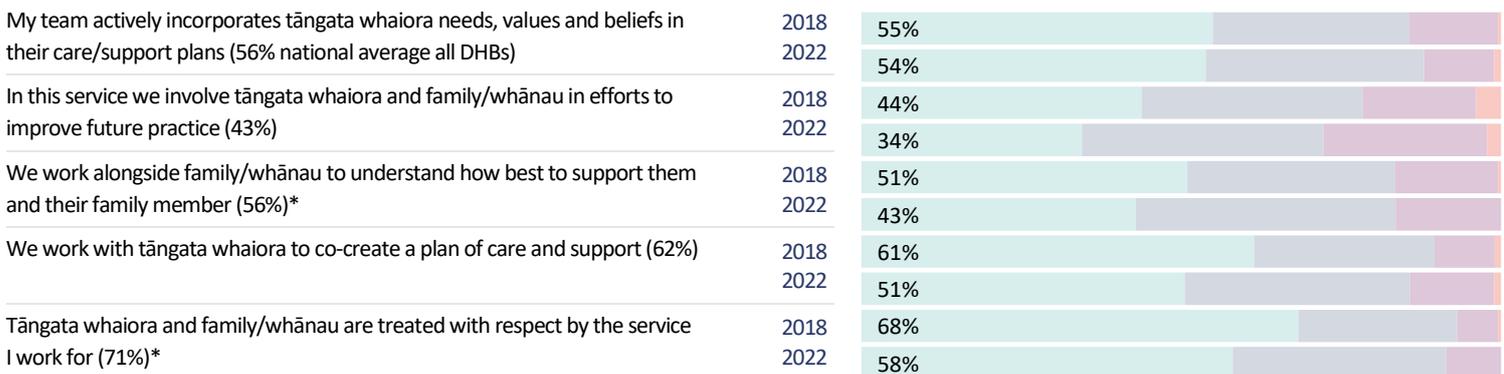
Highest positive scores:

Adhere to clinical evidence and guidelines, tāngata whaiora & family/whānau treated with respect

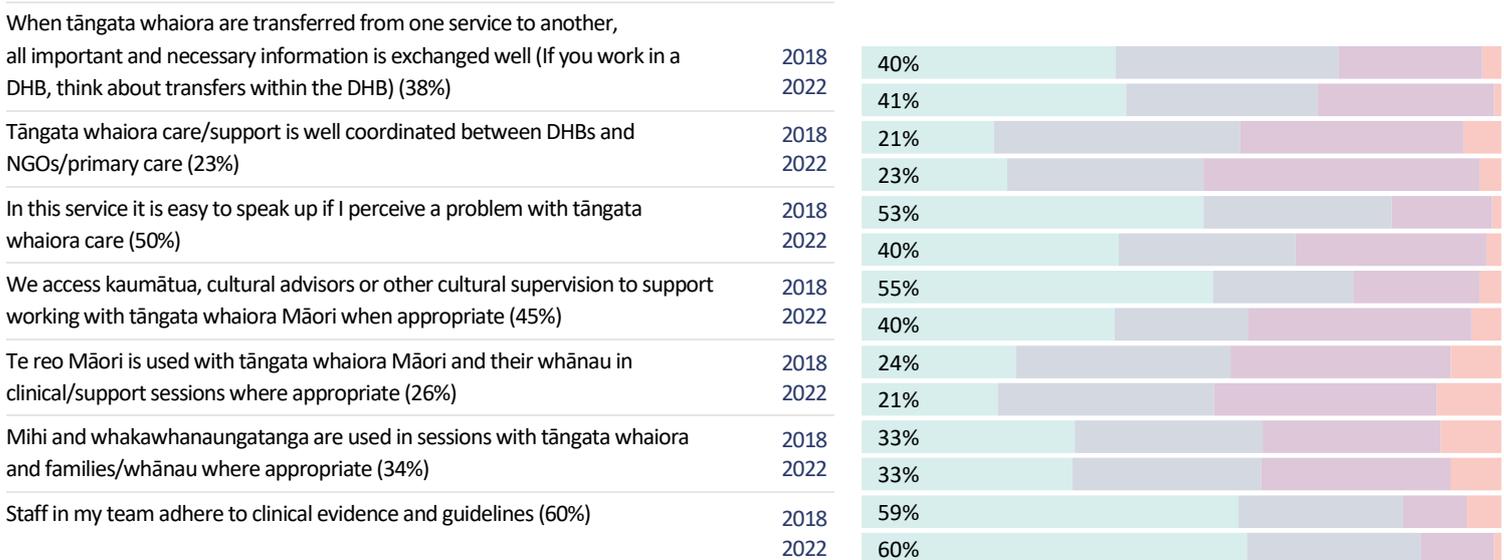
Lowest positive scores:

Coordination between DHB/NGO/primary care, use of te reo.

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



#### Care and support provided



■ % 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 | 37% |
|  | 2022 | 38% |
| In this service we use data to help us monitor and make improvements to our quality of care/support (34%)                            | 2018 | 32% |
|  | 2022 | 37% |
| Learning from adverse events has led to positive change in this service/organisation (36%)   | 2018 | 35% |
|  | 2022 | 30% |
| In this service, recognising and reporting incidents is encouraged and valued (52%)  | 2018 | 50% |
|  | 2022 | 44% |

## Engaged, effective workforce

|   |      |     |
|---|------|-----|
| Everybody in this service works together in a well-coordinated way (35%)  | 2018 | 26% |
|   | 2022 | 26% |
| I feel supported by my manager(s) (54%)   | 2018 | 61% |
|   | 2022 | 47% |
| I have regular access to coaching or mentoring or supervision (53%)   | 2018 | 62% |
|   | 2022 | 51% |
| There are opportunities for professional development (including attending conferences, workshops and training sessions) (43%) | 2018 | 54% |
|   | 2022 | 37% |
| We have effective systems for preventing or dealing with intimidating behaviour and workplace bullying (24%)                  | 2018 | 22% |
|   | 2022 | 25% |

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

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



- "Staffing levels are low and too many tāngata whaiora are on a waiting list until a keyworker can be allocated"
- "More access to cultural workers (Kaitakawaenga), we need to flood inpatient services with these roles"
- "An appropriate, safe environment that's fit for purpose"
- "More staff. Access to formal cultural support"
- "Increase staff FTE - so much more could be provided for tāngata whaiora!"

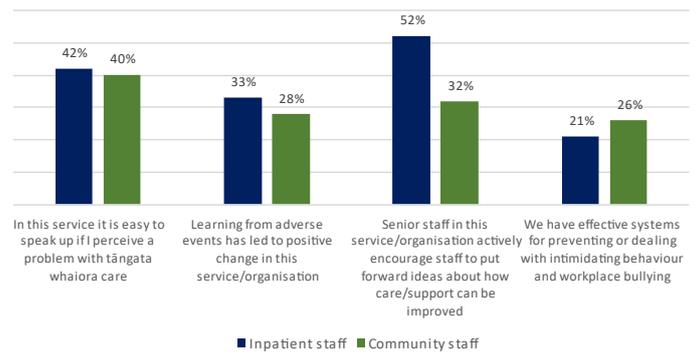
## In words – what has been the impact of COVID-19 on quality improvement initiatives

- "There are significant challenges regarding staffing. Staff loss has resulted in difficulties creating time for quality activities"
- "Major impact. With leading to multiple education sessions initially being cancelled"
- "We are so short staffed due to resignations that we are simply trying to keep our heads above water and other initiatives have been largely placed on the back-burner"
- "Service delivery and quality has deteriorated"
- "Lack of resources to implement and support changes"

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

- "The passion the clinical staff have for tāngata whaiora/whānau they work with"
- "A very committed and skilled clinical team"
- "Good supportive legal representation and DI services. Good rapport with many of frontline staff (nursing, allied health)"
- "Staff are caring and enthusiastic about caring for our tāngata whaiora"
- "Having support from NGOs"

## Questions with the largest difference between inpatient and community 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 DHB completed the survey?

The results in this document are based on 94 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.