



PaxtonPartners

Taking the Pulse Survey 2018

Queensland Mental Health Commission

July 2018
Draft Report



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Executive Summary

2018 is the fifth year of operation for the Queensland Mental Health Commission (QMHC) and the fifth time that Queenslanders in the current year have been asked for their opinions on the performance of the QMHC and the mental health, alcohol and other drug system overall. This document reports on the results of the annual QMHC survey for 2018.

Key findings from the 2018 survey include:

- The respondent profile remained broadly consistent with previous years as was the number of responses. Family members of people with lived experiences of mental health issues became the largest group of respondents (37%) with people with lived experiences of mental health issues (35%).
- Continuing the positive trend of previous years, more than three-quarters of 2018 respondents reported that the QMHC is seen as a credible organisation.
- Consistent with previous years, less than half of respondents agreed that stakeholders have sufficient opportunity to provide input into the QMHC's work or that the full range of stakeholders is being engaged.
- This suggests that the QMHC must continue to provide opportunities for the breadth of stakeholders to contribute to its work. However, also consistent with previous years, 59% of respondents felt that the views of consumers, families and carers are being used to inform QMHC work, suggesting that the QMHC's efforts in this area are being recognised.
- Most respondents were positive about the QMHC's performance against its key functions. There was a notable increase in proportion of 2018 respondents agreeing that the QMHC is building collaboration and collaborative capacity in the mental health, alcohol and other drugs sector.
- Of 2018 respondents, 41% reported that a high level of collaboration with the QMHC would be required in the future to meet their strategic goals, suggesting that they saw a high degree of alignment between their goals and the QMHC's. However, only 10% reported currently being at a level of "Collaborating" with the QMHC, and 35% reported having "No Collaboration". This suggests that the QMHC must invest further effort to sufficiently engage its stakeholders and potentially formalise collaboration arrangements to meet these stakeholder expectations into the future.

At the system-level, almost two-thirds of respondents agreed that overall, there is positive reform underway towards a more integrated, evidence-based, recovery-oriented mental health and substance misuse system. However, the response to this question saw a decline from 2017 - the first decline since the beginning of the survey. Similarly in 2018, 44% of respondents agreed that the reforms driven by the QMHC will be sustainable over the longer term, which is down from 48% in 2017.

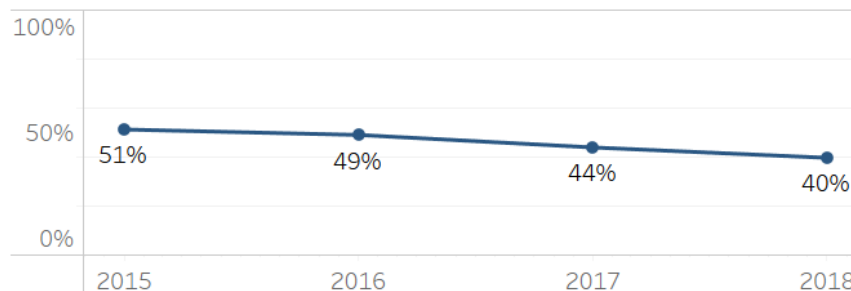
Key Performance Indicators

Thirteen Key Performance Indicators (KPIs) have been captured consistently over the last four years. They represent an overview of annual progress of the QMHC against a series of key domains. The results of these KPIs are presented over the next four slides.

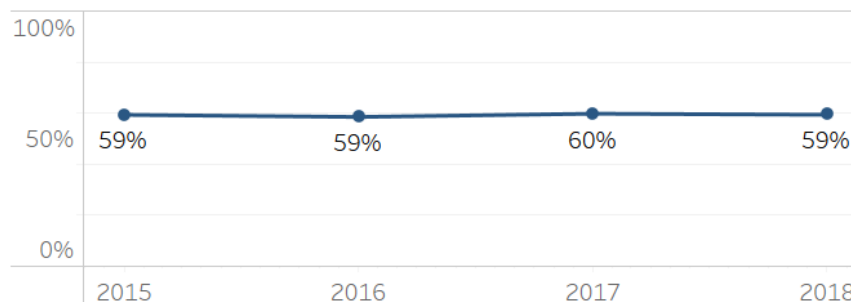
Key Findings

- In 2018, there was a further slight decline in respondents indicating they had sufficient opportunity to provide input into QMHC work. This continues a trend from 2015.
- Consistent with all previous years, approximately 60% of 2018 respondents felt that the views of consumers, families and carers are informing QMHC work
- The proportion of respondents agreeing that the full range of stakeholders is being engaged saw a very slight decline from 2017 but remained above 2016 levels. This proportion is still less than half of all respondents, suggesting that there is an ongoing opportunity for the QMHC to improve on this metric.

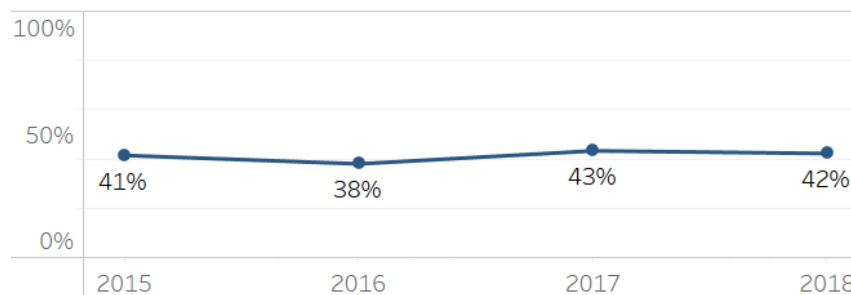
Stakeholders have sufficient opportunity to provide input



The views of consumers, families and carers inform QMHC work



The full range of stakeholders is being engaged

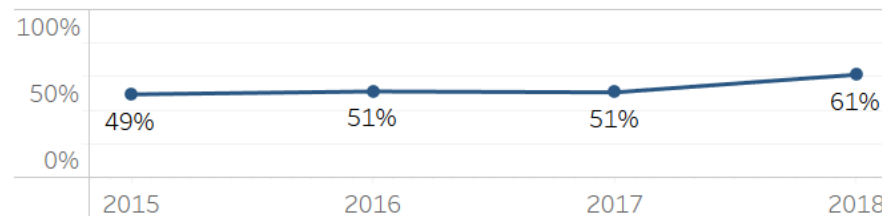


Key Performance Indicators cont.

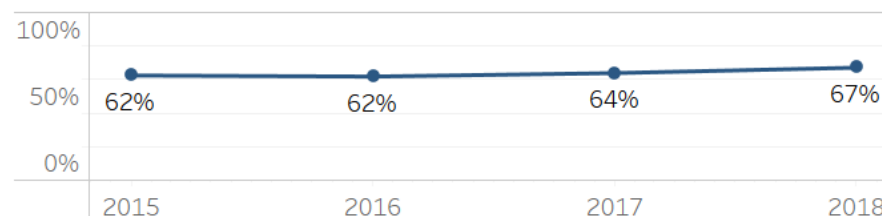
Key Findings

- Consistent with previous years, the majority of 2018 respondents were positive about the QMHC's achievements against most of its key functions.
- All metrics improved against 2017 metrics except for the relevance of QMHC research, review and report functions which remained at 58%.
- In particular there was a significant increase of respondents that agreed that QMHC is building collaboration across sectors.

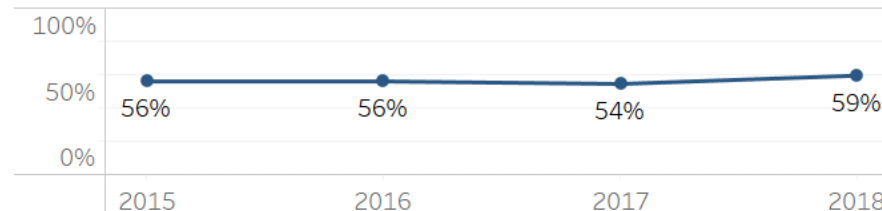
QMHC is building collaboration across sectors



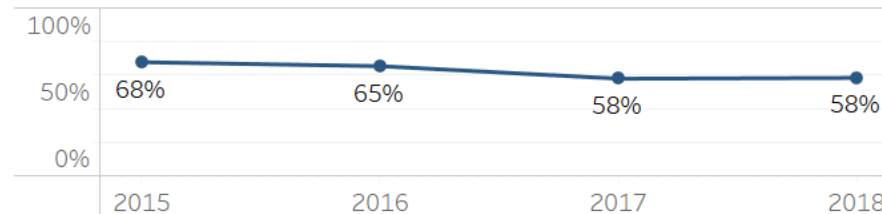
The Strategic Priorities are important



QMHC is increasing community awareness of mental health



QMHC research, review, report work is relevant

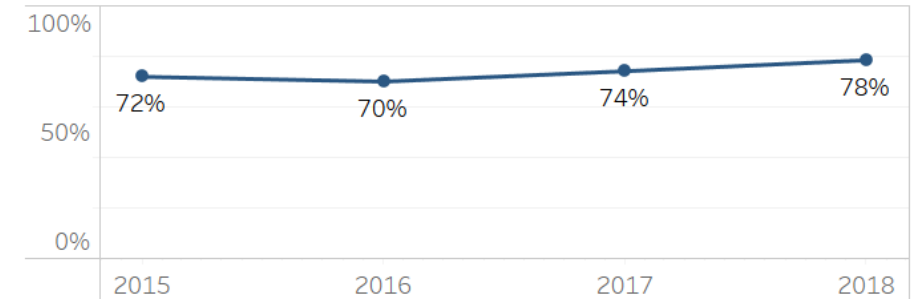


Key Performance Indicators cont.

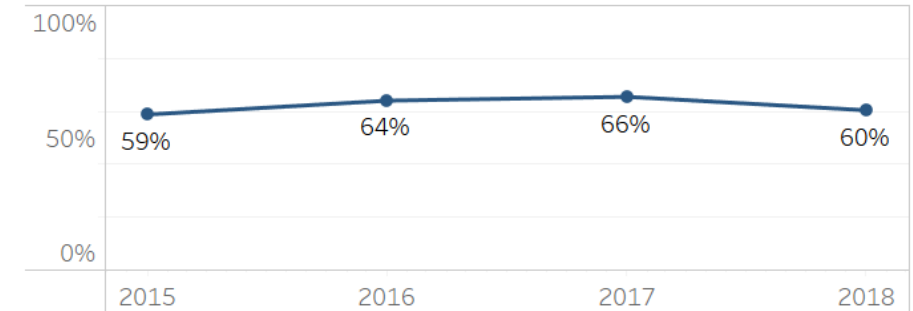
Key Findings

- 78% of 2018 respondents indicated that they see the QMHC as credible. This has continued the upward trend in this metric since the first year of the survey and represents a new highest proportion.
- The proportion of people agreeing that positive reform is underway in the Mental Health Drug and Alcohol sector has declined for the first year in this survey but remains above 2015 levels.
- There was also a decline to 44% of respondents reporting that they saw the reforms as sustainable. This is the lowest observed level for this indicator except for 2014.

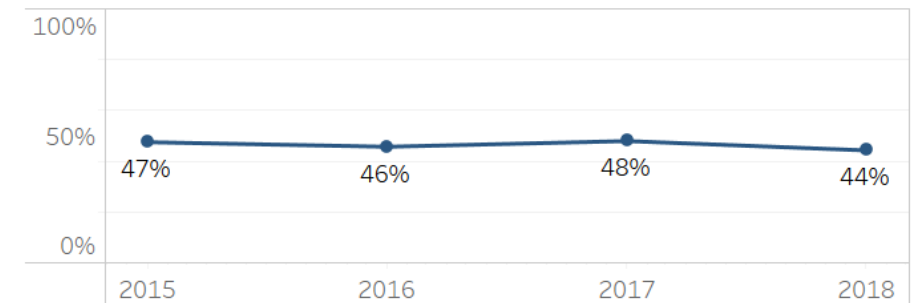
The Commission is credible



Positive Reform is underway



Reforms are sustainable



1. Project Context

This document reports on the results of the fifth annual Queensland Mental Health Commission (QMHC) survey. The survey was originally developed to support the QMHC evaluation, conducted between 2014 and 2016, inclusive.

The survey was evolved in parallel with the needs of the QMHC evaluation and in 2017 was consolidated into a smaller subset of core questions for ongoing monitoring of QMHC performance over time. In addition, in the current year, the quality of the underlying survey distribution lists has been further enhanced to improve targeting of the survey to those who have been involved with and/or impacted by the Commission and its activities.

The survey was live for responses between May 1st and May 31st 2018 and the overall response rate was approximately 43%.

The sections that follow present the key findings of each of the major sections of the survey:

- Stakeholder engagement
- Collaboration
- QMHC credibility
- QMHC functions
- Overall Reform Progress

The Appendix provides an overview of the respondent demographics.

Survey interpretation notes

- No survey question was mandatory. Therefore, each survey question was answered by a different number of respondents. The number of respondents to each specific question is noted as an 'n' value on each graph for reference.
- When referring to “proportion of respondents” in the graphs and text throughout this report, this refers to the proportion of respondents to the specific question being presented and never the overall survey respondents.
- The 2018 survey results were compared, in most cases, with the results from the prior evaluation years. However, in some cases changes to the survey structure and the wording of some questions may impact the direct comparability of specific questions on a year-on-year basis. Where this may be the case it has been noted with the corresponding analysis.
- Throughout the report, references to the sum of respondents answering in the affirmative or negative were referred to in the text according to the following table:

Respondent groups	Descriptions used
["Strongly Agree" + "Agree"]	"Total Agree" or "respondents agreeing"
["Strongly Disagree" + "Disagree"]	"Total Disagree" or "respondents disagreeing"

Where survey respondents provided free-text responses relevant to the quantitative survey results, these have been included in boxes like this throughout the report.

Note that these responses may not be representative of the entire survey sample, but serve as single comments to highlight individual perspectives.

2. Stakeholder Engagement

Engagement of the range of stakeholders in the mental health, alcohol and other drug sectors is key to the effectiveness of the QMHC.

This section presents the results of the survey questions regarding the QMHC's engagement with stakeholder.

Key 2018 survey findings:

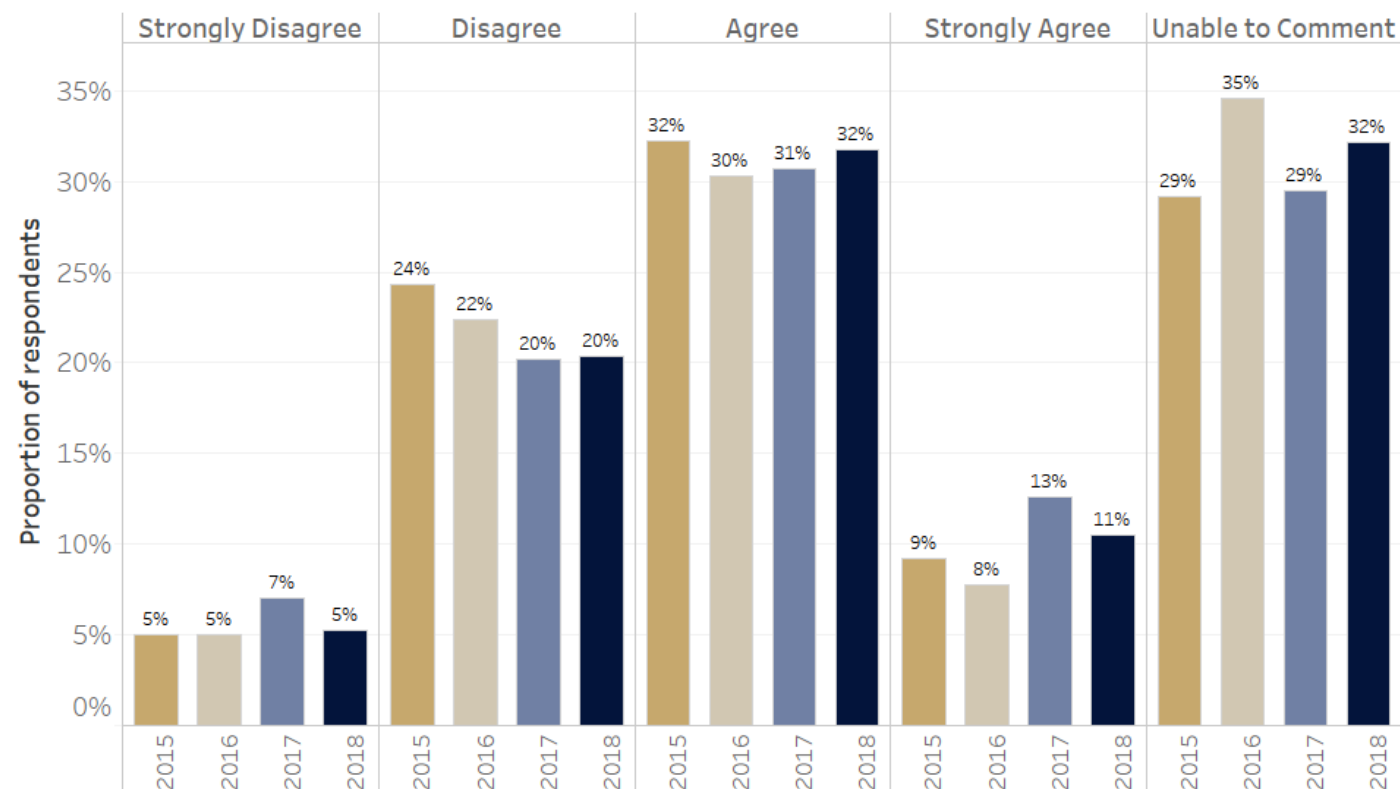
- Survey results under this domain were largely consistent with trends in previous years.
- There is still opportunity for the QMHC to improve broader awareness of its engagement approaches and activities indicated by a further decline in stakeholders reporting sufficient opportunities to provide input.
- A consistently high proportion of respondents (59% in 2018) reported that the QMHC is utilising the views of people with lived experience, their families, carers and support people to inform planning and decision making.

Key Findings

- There was a slight increase in the proportion of respondents that agreed the QMHC is engaging the full range of relevant stakeholders but also slight decrease that strongly agree, taking the total proportion that agreed slightly down to 42%.
- Consistent with previous years, almost a third of 2018 respondents reported being unable to comment on the question. This suggests that there is still opportunity for the QMHC to increase broader awareness of its stakeholder engagement activities.

Interaction with the QMHC

"The QMHC is engaging the full range of relevant stakeholders."

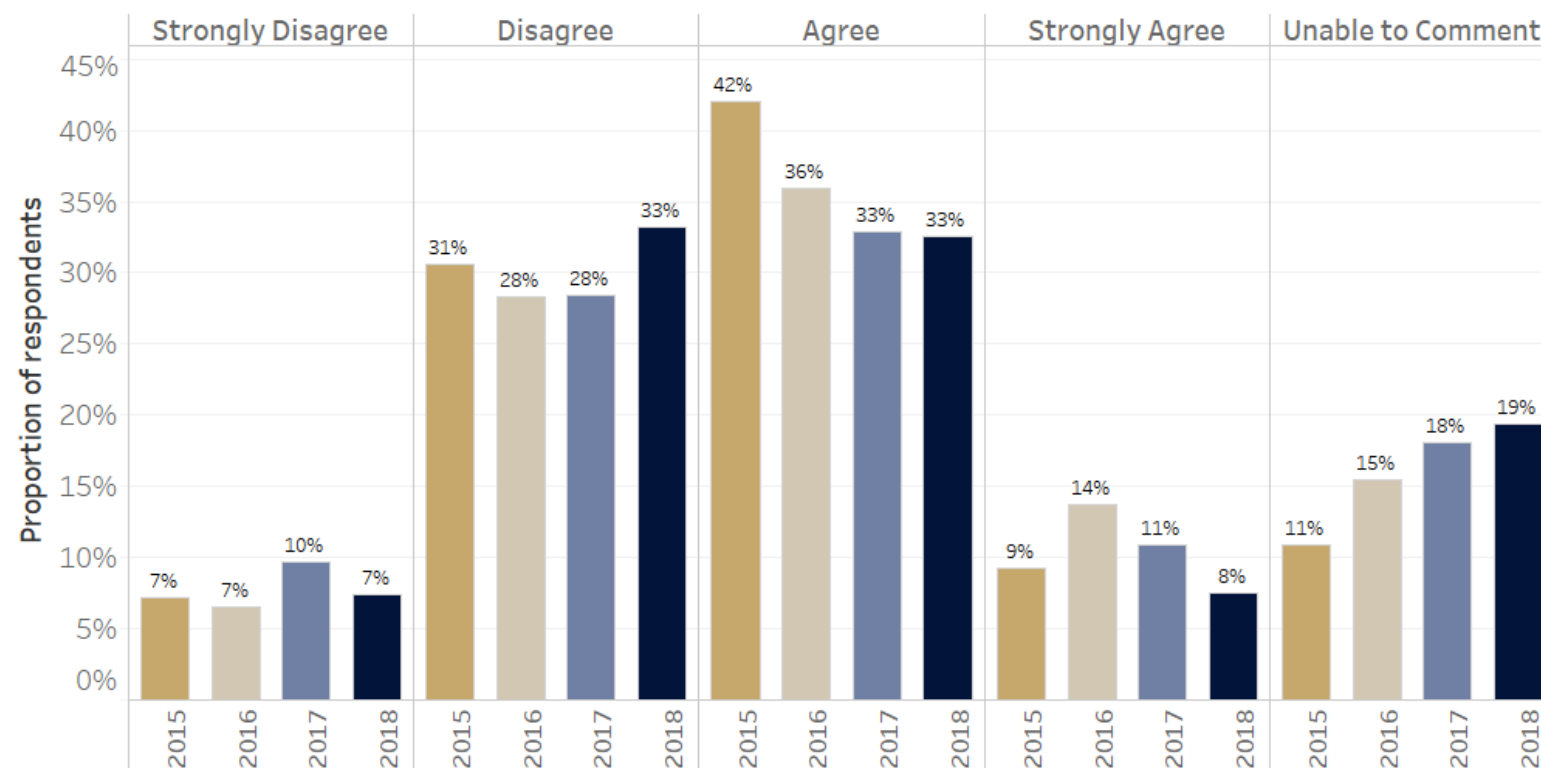


Key Findings

- There was a increase in the number of 2018 respondents who reported disagreeing with the statement that they have had sufficient opportunities to provide input into QMHC work.
- There was also a decline in those that strongly agreed with the statement continuing the decline observed in 2016 to 2017.
- In 2018 the number of people reporting being unable to comment was similar to 2017.
- These results suggest that the QMHC must create additional meaningful opportunities for stakeholders to contribute to its work alternatively, the QMHC's stakeholders expectations of engagement may be increasing.

Interaction with the QMHC

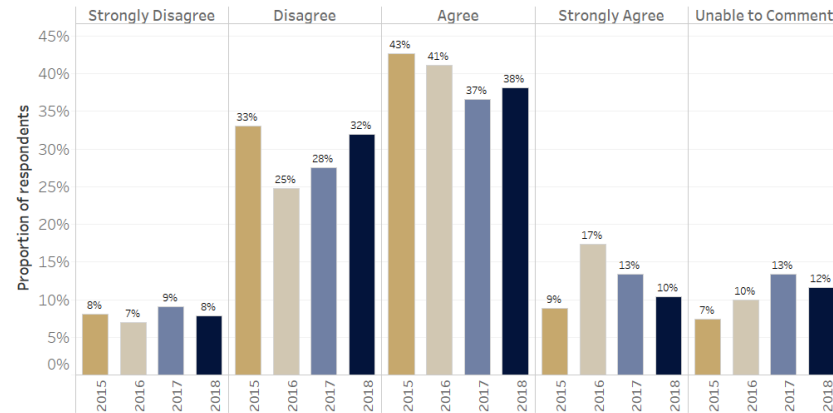
"I have had sufficient opportunities to provide input into QMHC work."



Interaction with the QMHC

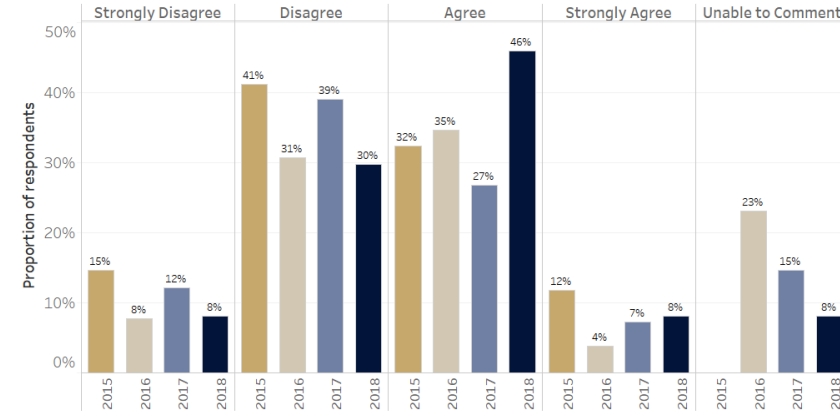
Mental Health Sector

"I have had sufficient opportunities to provide input into QMHC work."



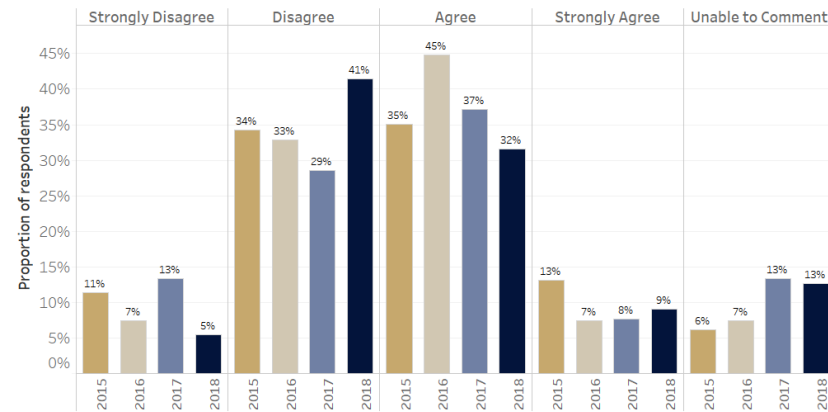
Police and Justice Sector

"I have had sufficient opportunities to provide input into QMHC work."



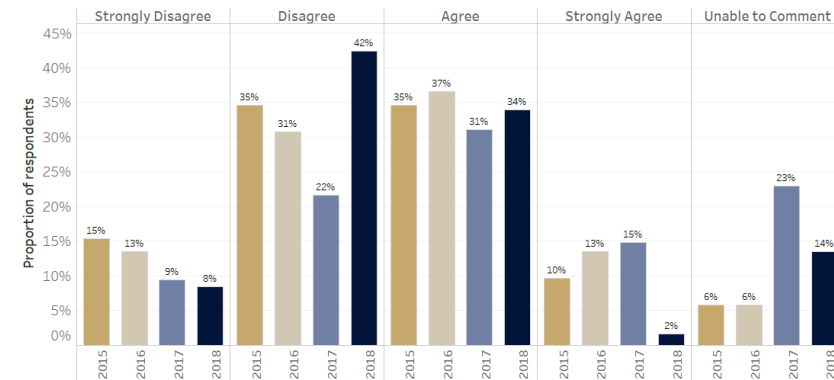
Alcohol and Drug Sector

"I have had sufficient opportunities to provide input into QMHC work."



Education Sector

"I have had sufficient opportunities to provide input into QMHC work."

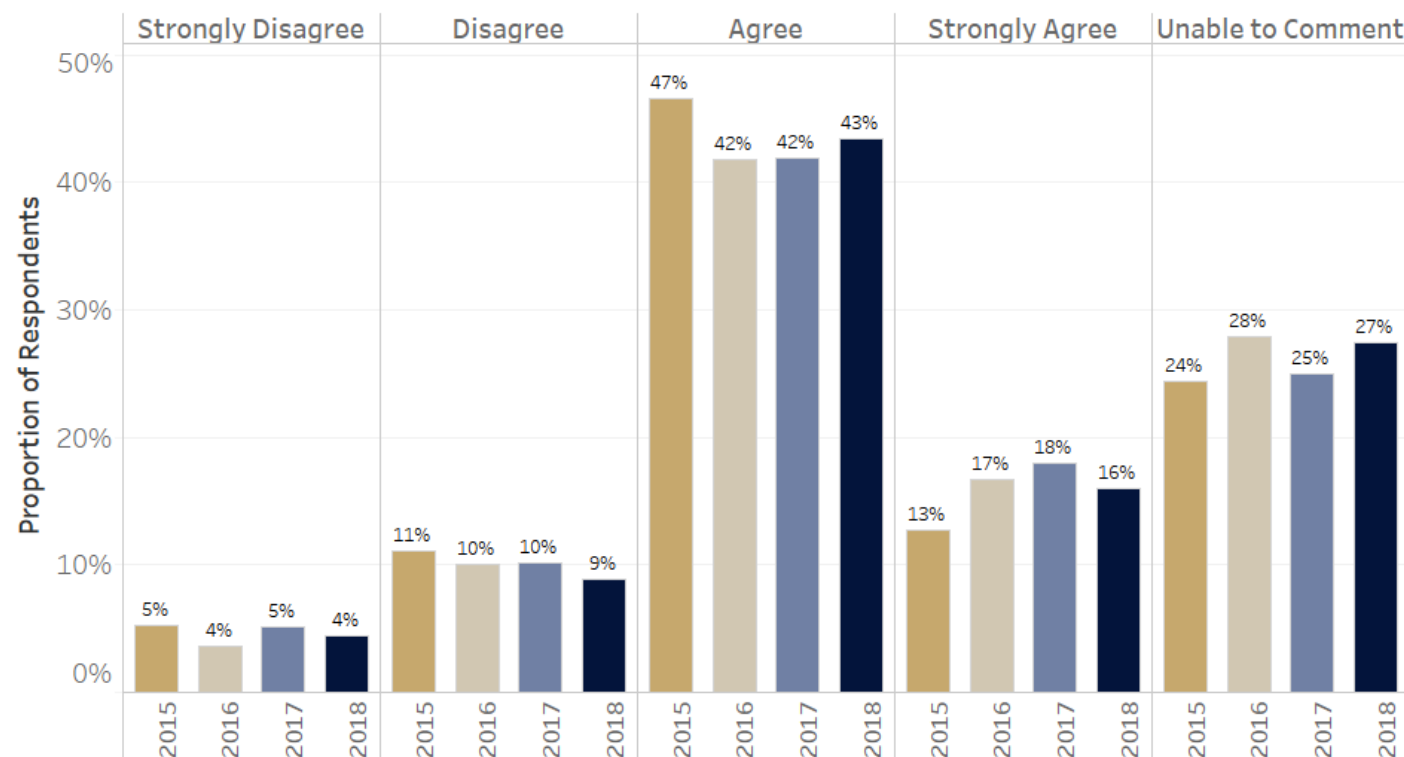


Key Findings

- Consistent with previous years, a total of approximately 60% of 2018 respondents agreed that the QMHC is utilising the views of people with lived experience, their families, carers and support people to inform planning and decision making.
- Also consistent with previous years, around a quarter of 2018 respondents reported being unable to comment on the question. This suggests that there is still opportunity for the QMHC to increase broader awareness of how it utilises these views to inform planning and decision making.

Stakeholder Engagement

"The QMHC is utilising the views of people with lived experience, their families, carers and support people to inform planning and decision making."



3. Collaboration

The *Queensland Mental Health Commission Act 2013* requires the QMHC to facilitate the contribution of multiple stakeholders towards common goals.

To drive long-term sustainable reform, the Commission must therefore build effective collaborations with government and other organisations towards achieving, not just the goals of targeted activities, but the broader outcomes articulated in the Queensland Mental Health, Drug and Alcohol Strategic Plan.

This section presents survey respondent perceptions on their current level of collaboration compared to the level of collaboration perceived as being required to meet their future strategic goals.

Further breakdown of the collaboration questions by respondent personal and organisational roles and sector is presented in the Appendix.

The progressive stages of maturity of have been defined as:

Networking: Parties exchange information for mutual benefit

Co-ordinating: Parties exchange information for mutual benefit and alter their activities for a common purpose

Co-operating: Parties exchange information for mutual benefit and share resources for common purpose/s

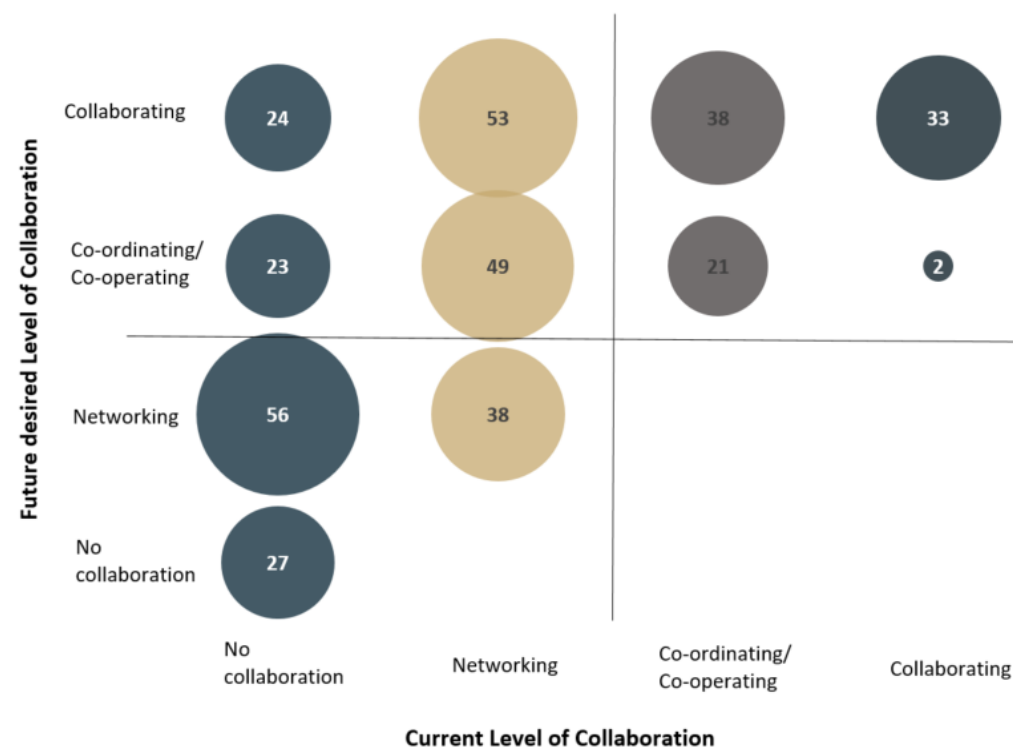
Collaborating: Parties exchange information, alter activities, share resources and work to enhance each other's capacity for mutual benefit and common purpose/s.

Key Findings

- 40% of respondents indicated that they require the highest level of “collaboration” with the QMHC in the future to meet their strategic goals. This suggests that, irrespective of current level of collaboration, stakeholders view that working with the QMHC will be key to their own future success. With only 10%, reporting currently being at a level of “Collaborating” with the QMHC, further effort must be placed on sufficiently engaging QMHC stakeholders in order to meet these expectations.
- Approximately 35% of respondents reported having “No Collaboration” with the QMHC. Of these 130 respondents, the majority (43%) indicated that “Networking” with the QMHC is required to meet future strategic goals. While 36% indicated that “Co-operating/Co-ordinating” or “Collaborating” in the future is required.
- More than a third (38%) of respondents indicated that they are currently “Networking” with the QMHC with 77% noting a future desired level of “Co-operating/Co-ordinating” or “Collaborating” with the QMHC.

Collaboration with the QMHC

Perceived current level of collaboration with QMHC versus future desired level of collaboration

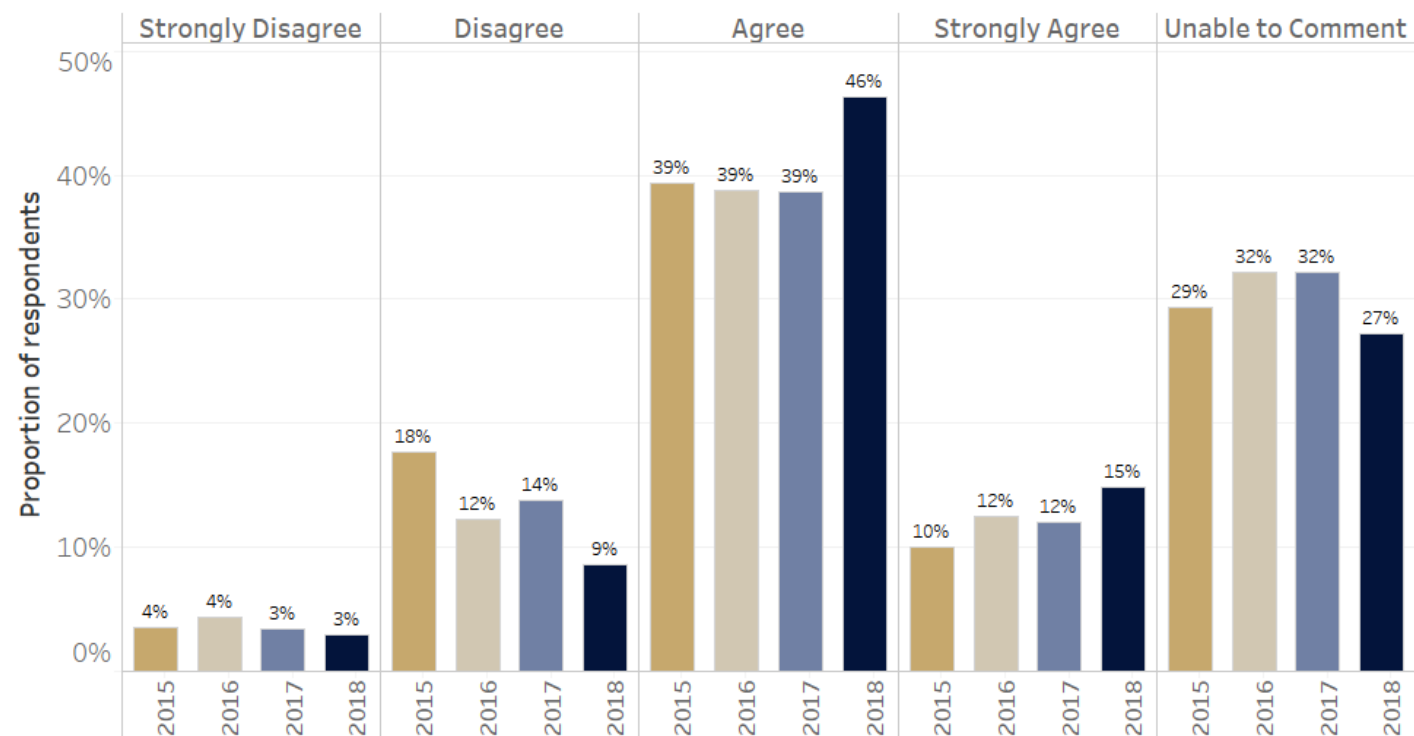


Key Findings

- There was a significant increase in the 2018 respondents that "Agree" that the QMHC is improving collaboration across sectors, from 39% in 2017 to 46% in 2018 and slight increase in "Strongly Agree", from 12% in 2017 to 15% in 2018.
- The number of respondents unable to comment on this question dropped to its lowest level (27%) since the first survey suggesting that the QMHC's efforts to improve collaboration across sectors is being recognised by stakeholders.

Cross-sector collaboration

"The QMHC is helping to improve collaboration across sectors (e.g. between health and justice, education, community, etc.)"



4. QMHC Credibility

The authority and credibility of the QMHC is paramount to its effectiveness in fostering collaboration and collaborative capacity amongst the many partners required to achieve the objectives of the QLD Mental Health, Drug and Alcohol Strategic Plan. Over the last five years, stakeholders' perceptions on the credibility of the QMHC have been tested through a core set of questions, presented in this section.

Key 2018 survey findings:

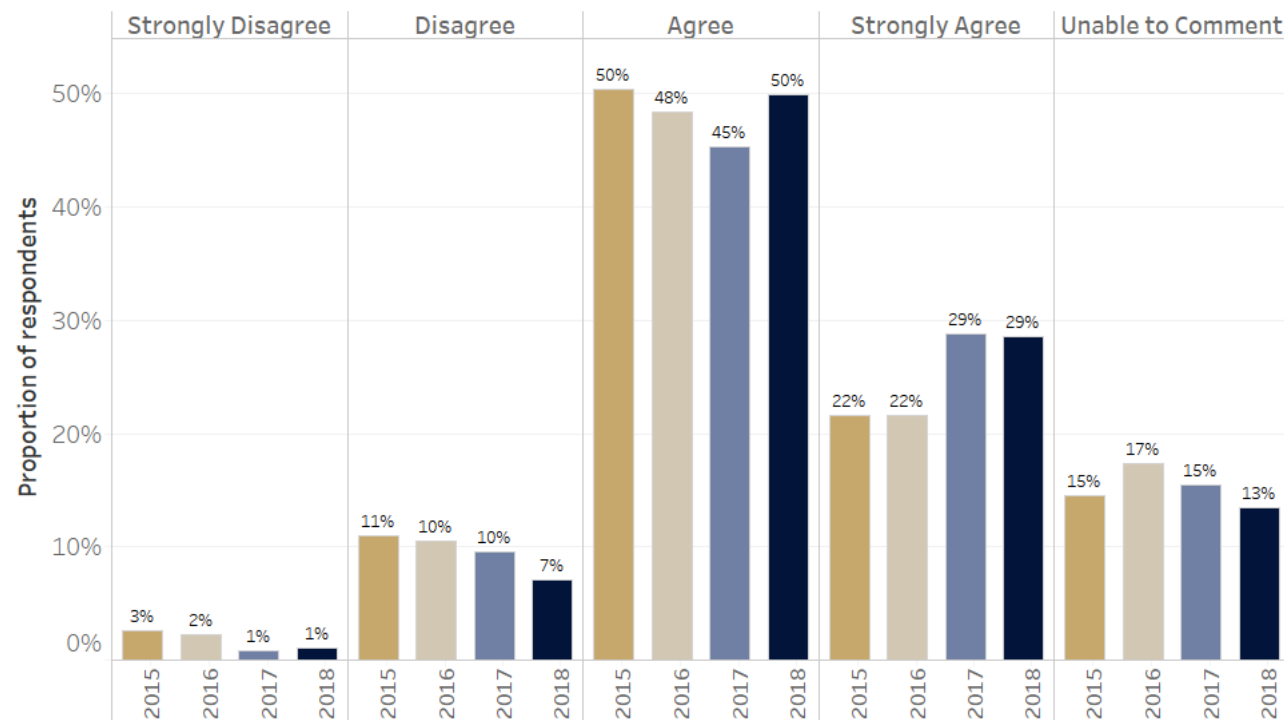
- 2018 saw the highest proportion of respondents (78%) reporting agreement that the QMHC is seen as a credible organisation.
- 2018 survey respondents also indicated a 60% agreement that positive reform is underway. This is the first year that this question has seen a decline although it remains higher than the 2015 level.

Key Findings

- More than three-quarters of all 2018 respondents (78%), reported that they view the QMHC as a credible organisation. This is the highest proportion of all five years tested.
- The 2018 increase was driven by a greater proportion of respondents reporting that they "Agree," with a decrease in "Disagree" and "Unable to Comment," suggesting a strengthening of perceptions overall.

Credibility

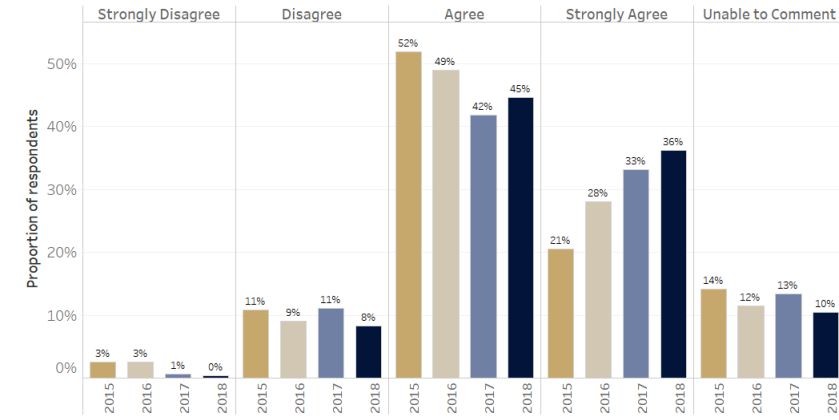
"I believe the QMHC is seen as a credible organisation"



Credibility

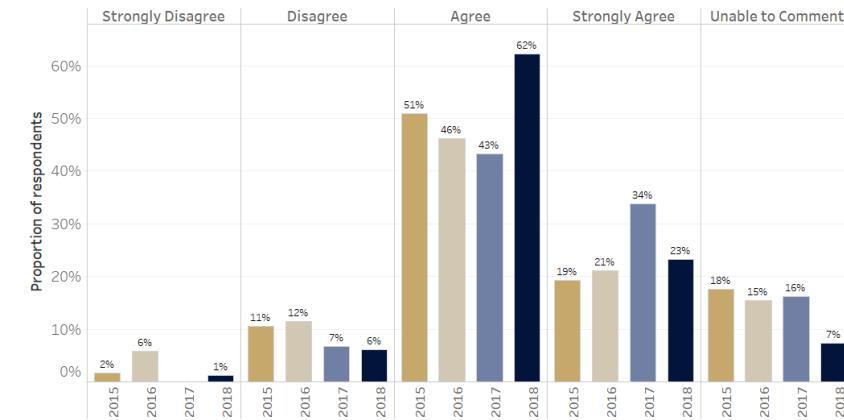
Mental Health Sector

"I believe the QMHC is seen as a credible organisation"



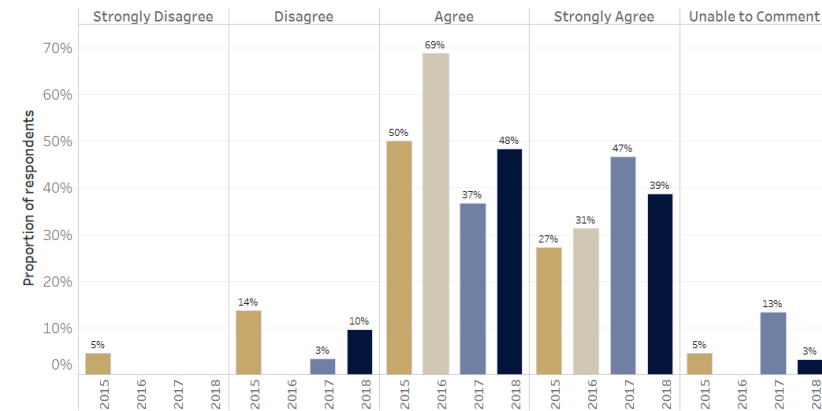
Child and Family Sector

"I believe the QMHC is seen as a credible organisation"



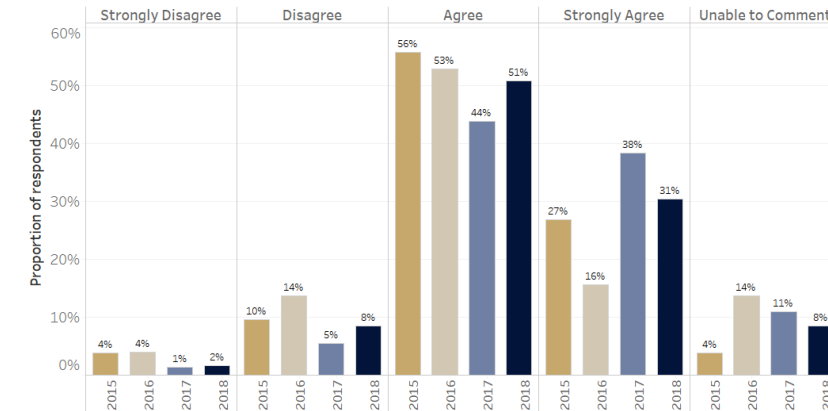
Employment Sector

"I believe the QMHC is seen as a credible organisation"



Education Sector

"I believe the QMHC is seen as a credible organisation"

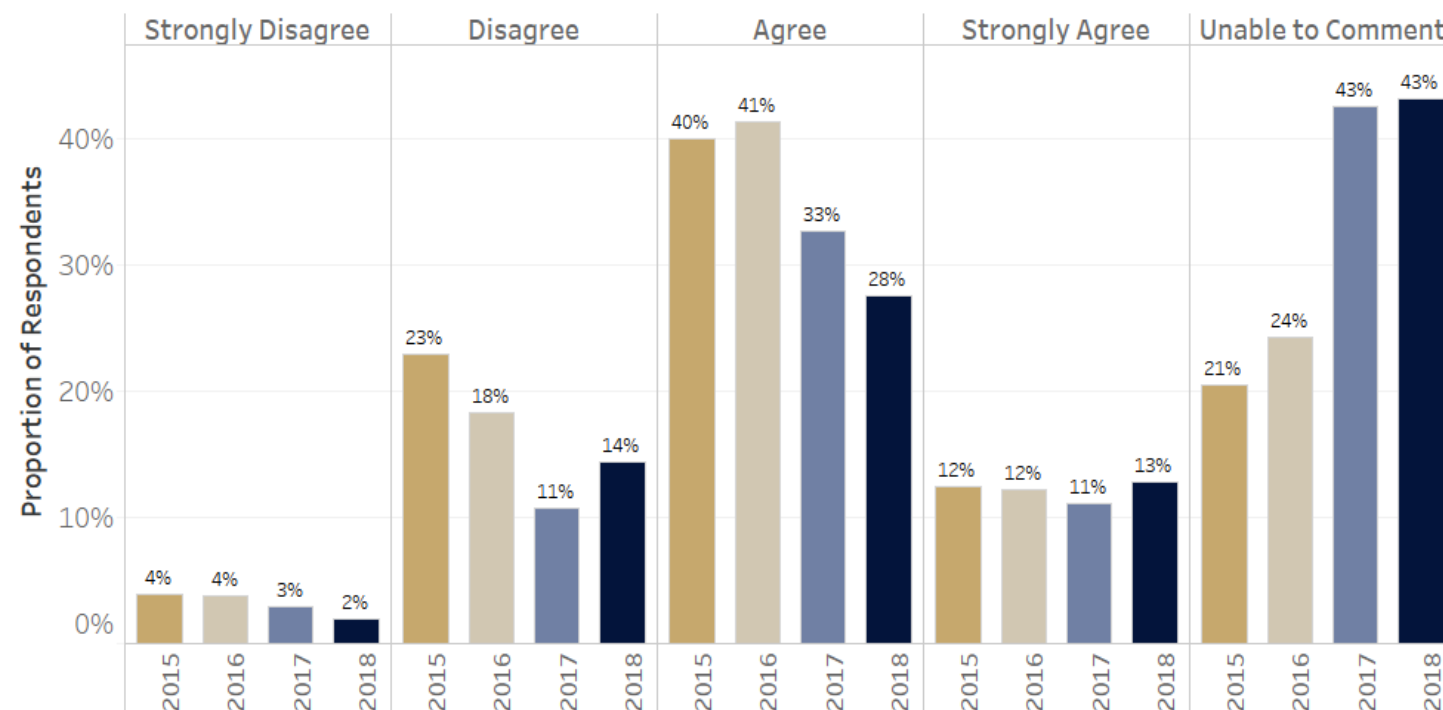


Key Findings

- A significant decline in the proportion of respondents who “Agree” the QMHC is operating independently from Government, was observed, dropping by more than 9% from 42% in 2016 to 33% in 2017 and has continued to drop to 28% in 2018.
- The number of respondents who indicated they were “Unable to Comment” was consistent with 2017 at 43%. This is a considerable rise from 2016 where 24% reported being “Unable to Comment.”
- It should be noted that the wording of this question in 2017 was slightly altered from previous years which may have influenced the proportion of respondents that felt informed enough to comment.

Credibility – Independence

“The QMHC is operating sufficiently independently of Government”

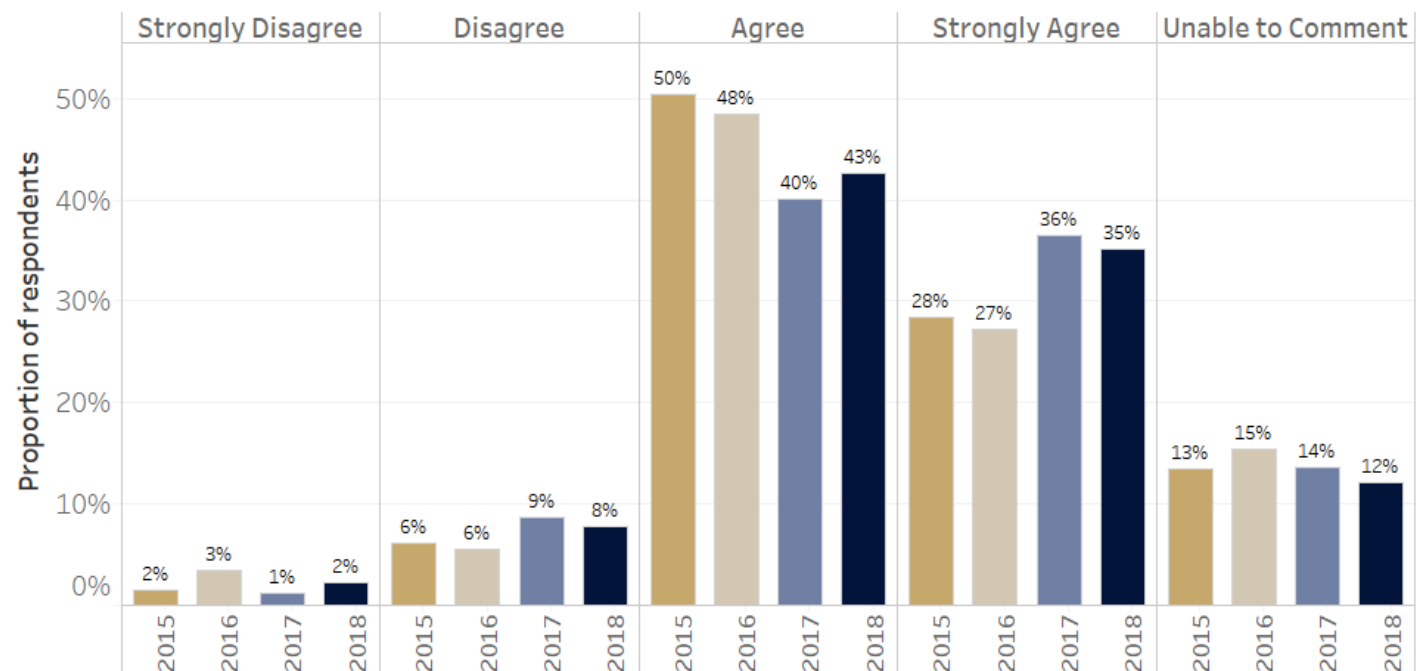


Key Findings

- Overall, 2018 responses to whether the QMHC is an important driver of reform of the mental health, drug and alcohol system in Queensland was consistent with 2017 responses. 78% of respondents either Agreed or Strongly Agreed (up 2% from 2017) and 10% either Disagreed or Strongly Disagreed (same as 2017)
- The 2017 and 2018 responses differ from the previous years survey response mainly from a shift of respondents agreeing to strongly agreeing.
- Note that from 2015 and 2016 there was a response option of 'Neither Agree or Disagree.' These responses were shifted to 'Unable to Comment' for this chart.

Credibility – QMHC as a Driver of Reform

"I view the QMHC as an important driver of reform of the mental health, drug and alcohol system in Queensland"



5. QMHC Functions

The *QLD Mental Health Commission Act 2013* outlines the main functions of the Commission which can be broadly grouped as:

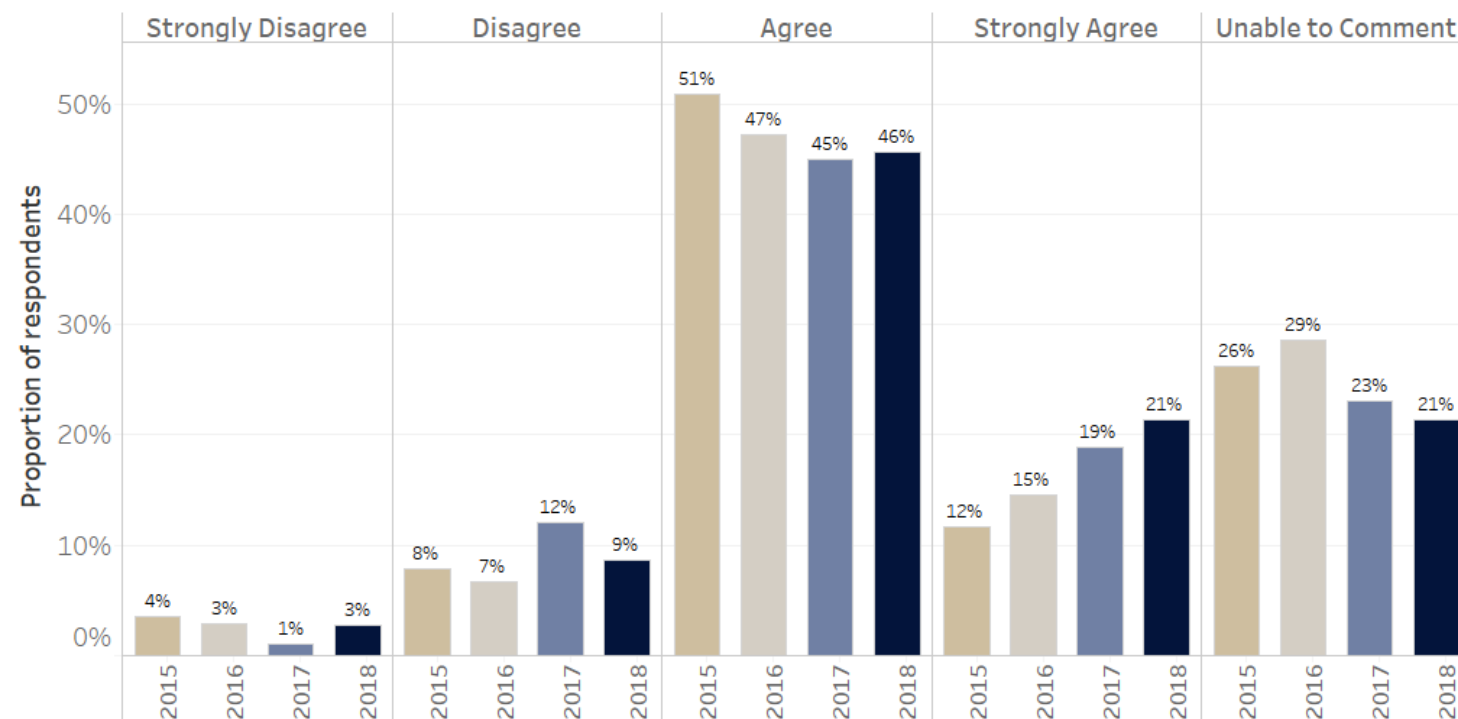
- **Strategic Planning:** including the development, monitoring, review and reporting on a whole of government strategic plan.
- **Review, Research and Reporting:** including undertaking and commissioning reviews, evaluation, reporting, advice and knowledge sharing on the mental health and substance misuse system, factors affecting relevant persons and issues affecting community mental health and substance misuse.
- **Promotion and Awareness:** including supporting and promoting strategies that prevent mental illness and substance misuse, facilitate early intervention for mental illness and substance misuse, improve the general health, wellbeing, social inclusion and recovery of people with mental illness or who misuse substances. Promotion of community awareness and understanding to reduce stigma and discrimination.
- **Systemic Governance:** focused on supporting the operation of the MHDAC and developing processes to enhance the involvement of consumers, families and carers in contributing to systemic reform.

Key Findings

- The total proportion of respondents agreeing that the Strategic Plan identifies priorities that are important to them has remained consistently high over the last four years (ranging 62%-67%). Notably, there has been a steady shift in proportions from those that "Agree" to "Strongly Agree".
- There is also an observable downward trend since 2016 on respondents "Unable to Comment"
- Progress made against the six core outcomes of the Strategic Plan is also monitored in more detail by the QMHC in its annual Performance Indicators report.

Strategic Planning

"The Queensland Mental Health, Drug and Alcohol Strategic Plan identifies priorities that are important to me"

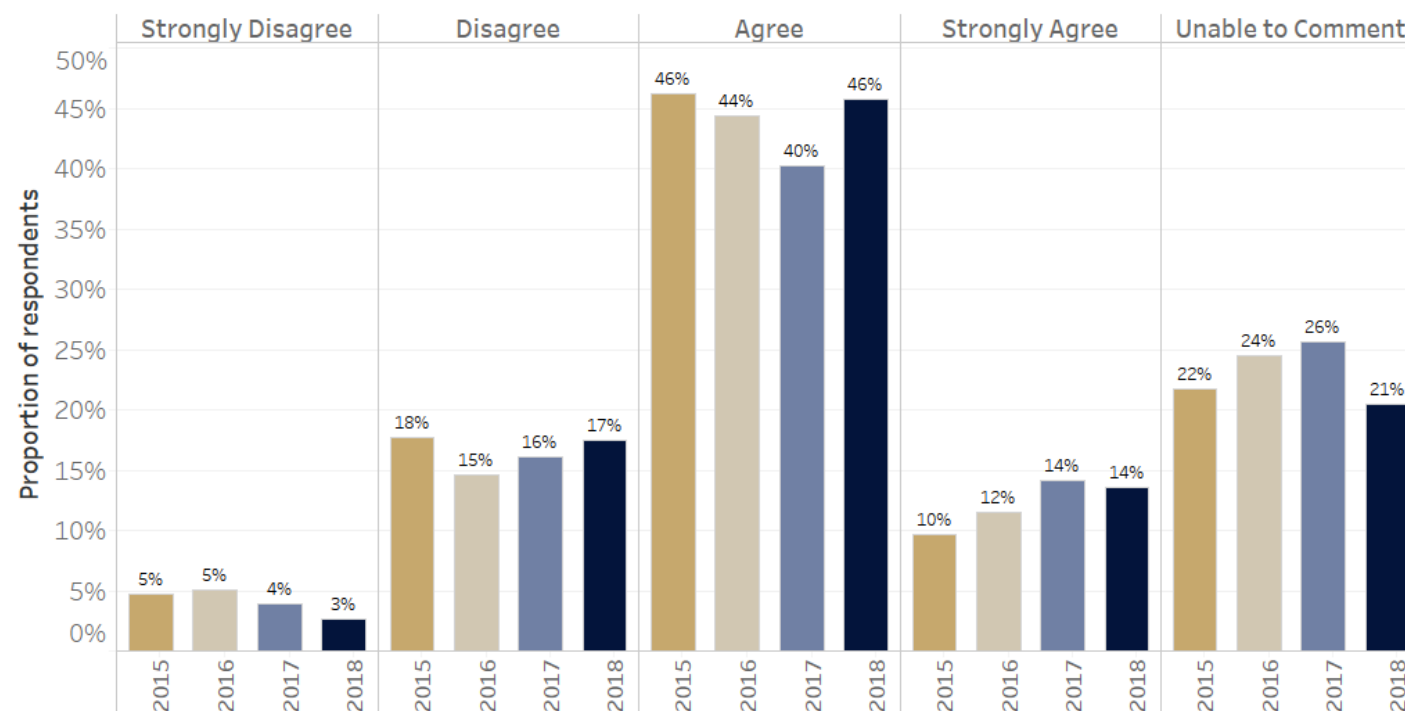


Key Findings

- The total proportion of respondents agreeing that the QMHC's promotion and awareness work is increasing community awareness and reducing stigma and discrimination increased to 60% in 2018. This was largely driven by an increase in respondents who "Agree" (46%).
- Respondents indicating being "Unable to Comment" is at its lowest level since the first survey (21%).

Promotion and Awareness Function

"The promotion and awareness work being undertaken by the QMHC is increasing community awareness and reducing stigma and discrimination"

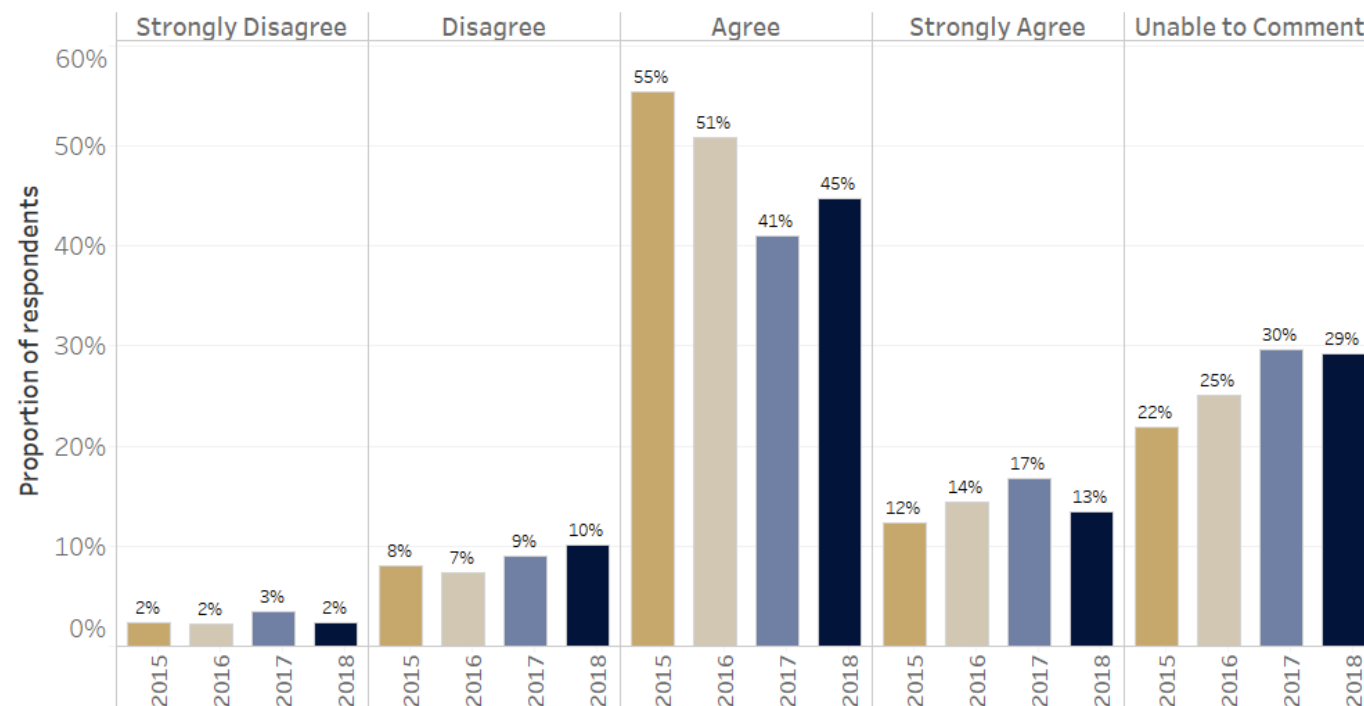


Key Findings

- The proportion of 2018 respondents who either "Agree" or "Strongly Agree" that the QMHC's research, review and evaluation work is helping to identify and respond to current issues and trends was consistent with 2017 (58%).
- However, there was a slight shift from respondents that "Strongly Agree" to "Agree."

Research, Review and Reporting Function

"The research, review and evaluation work the QMHC is commissioning helps identify and respond to current and emerging issues and trends"



6. Overall Reform Progress

While outside its direct control, with a remit to co-ordinate and drive Collective Impact, a key indicator of the QMHC's overall effectiveness is the perceived progress being made in the mental health, drug and alcohol system overall.

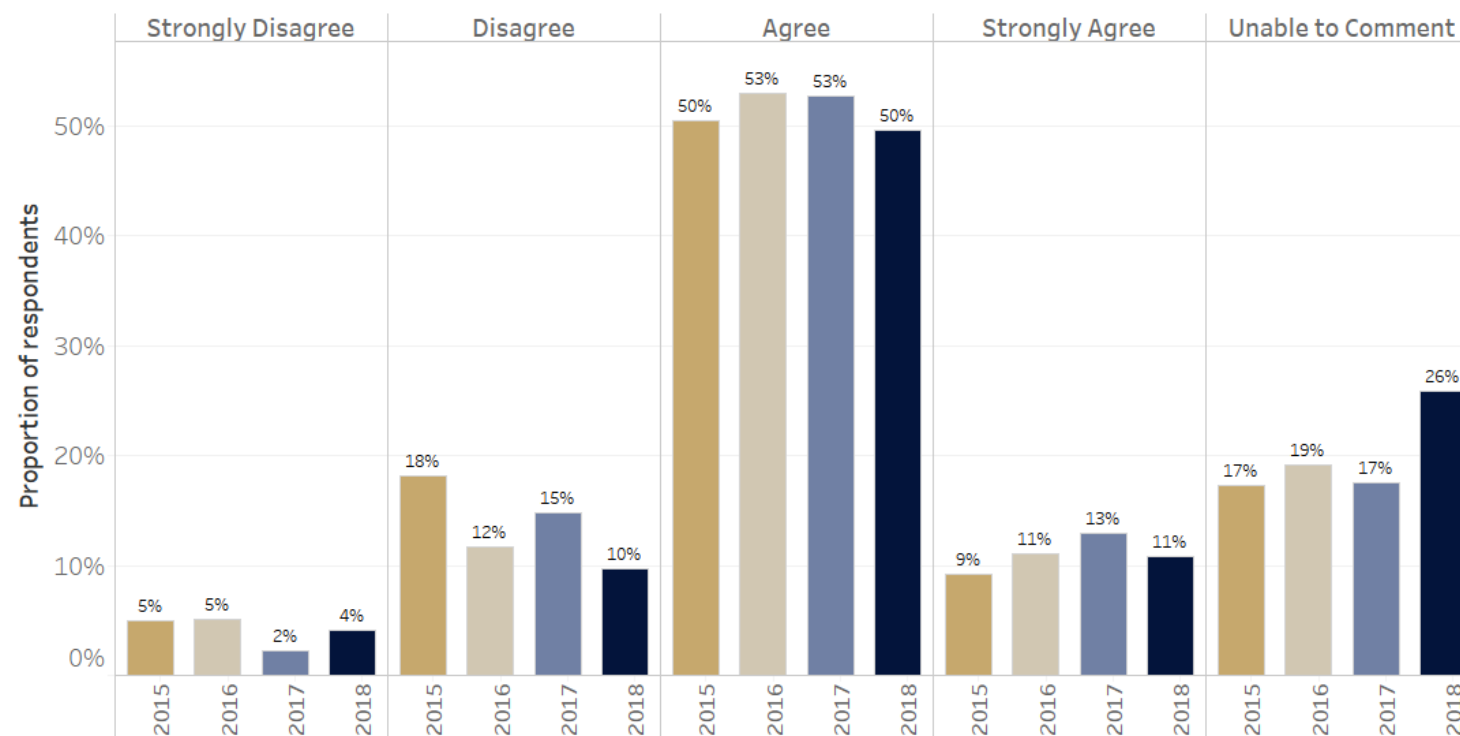
Broader system progress is monitored in more detail through the QMHC's annual Performance Indicators report. This section presents the survey results regarding stakeholder perceptions of the overall progress of mental health, drug and alcohol system reform.

Key Findings

- 2018 marked the first year of the survey where there was a decline in the proportion of respondents agreeing that positive reform is underway at the overall system level (from 66% in 2017 to 61% in 2018).
- However in the 2018, there was also a decrease in the proportion who disagree has been observed over the same time (17% in 2017 to 14% in 2018).
- There was a increase in respondents who were "Unable to comment" (from 17% in 2017 to 26% in 2018).

Overall reform progress

"Overall, there is positive reform underway"

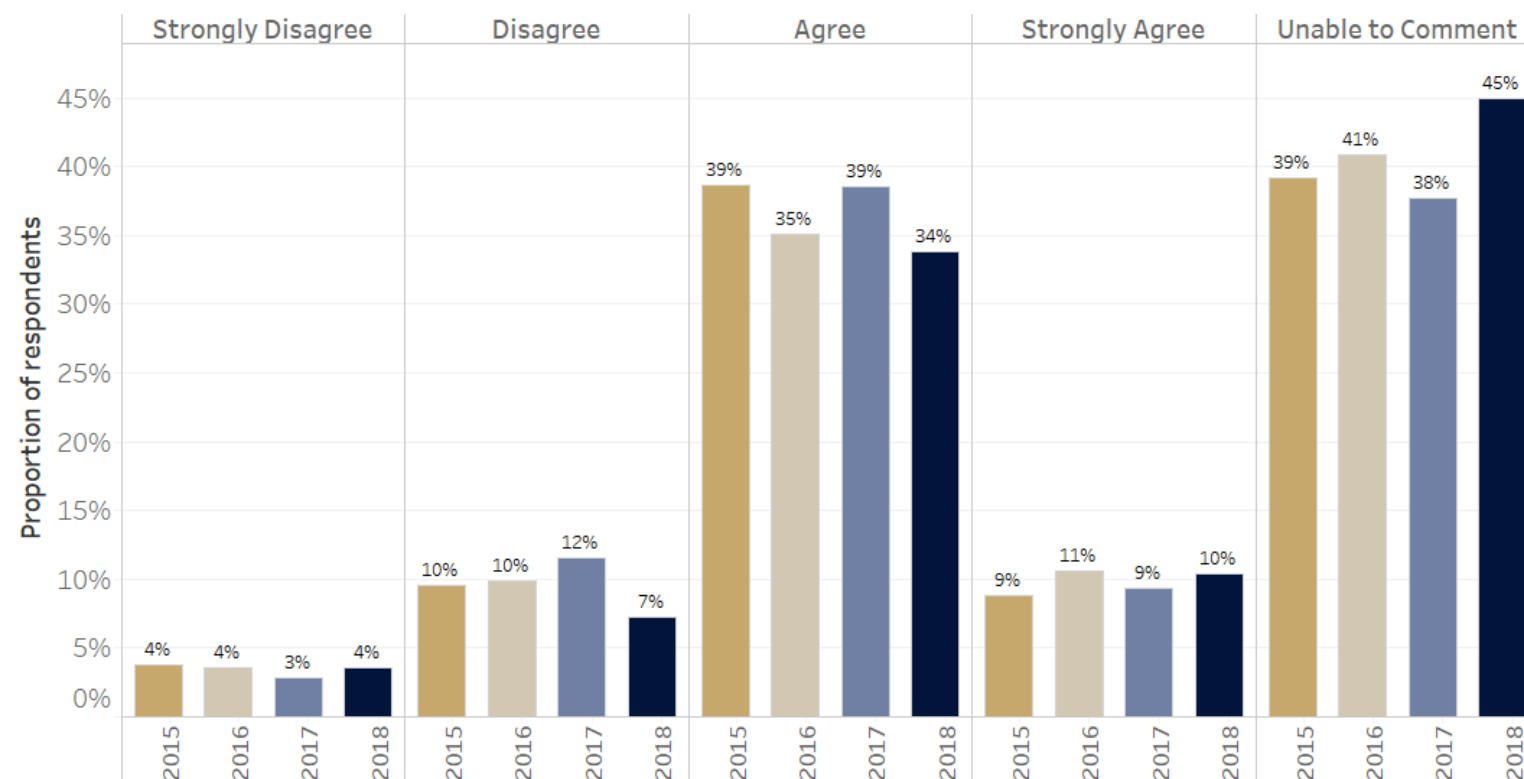


Key Findings

- The proportion of respondents that agree the reforms the QMHC is driving will be sustainable, declined to 44%, this is the second lowest after the first year of the survey.
- Similarly, the proportion that disagreed also dropped from 15% in 2017 to 11% in 2018.
- However, a there was a significant increase in the proportion of respondents that reported being “Unable to Comment” (45%). This may suggest that a large proportion of respondents feel that it is too early to tell whether the reforms will be sustainable.

Overall reform progress

“The reforms the QMHC is driving will be sustainable over the long term”



Appendices

Appendix A - Respondent Profile

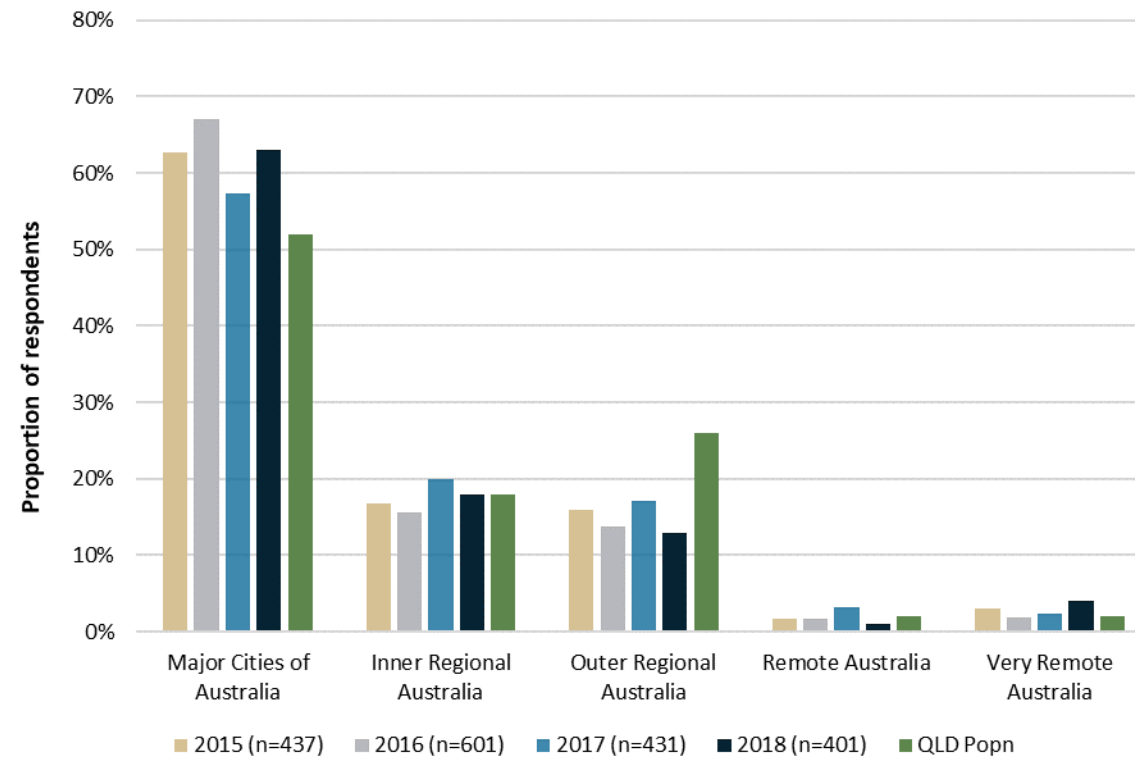
The following charts provide an overview of the respondent profiles and a gap analysis of current and future collaboration requirements of respondents.

Key Findings

- The profile of 2018 survey respondents has become less representative of the remoteness profile of the overall QLD population than 2017 but is similar to 2016 and earlier.
- Respondents from Major Cities still made up the majority of survey respondents at 63% of the total respondents.
- Survey respondents from very remote Australia increased to 4% which is higher than the QLD population profile for very remote Australia (1%).

Respondent Profile

Survey respondents by remoteness area

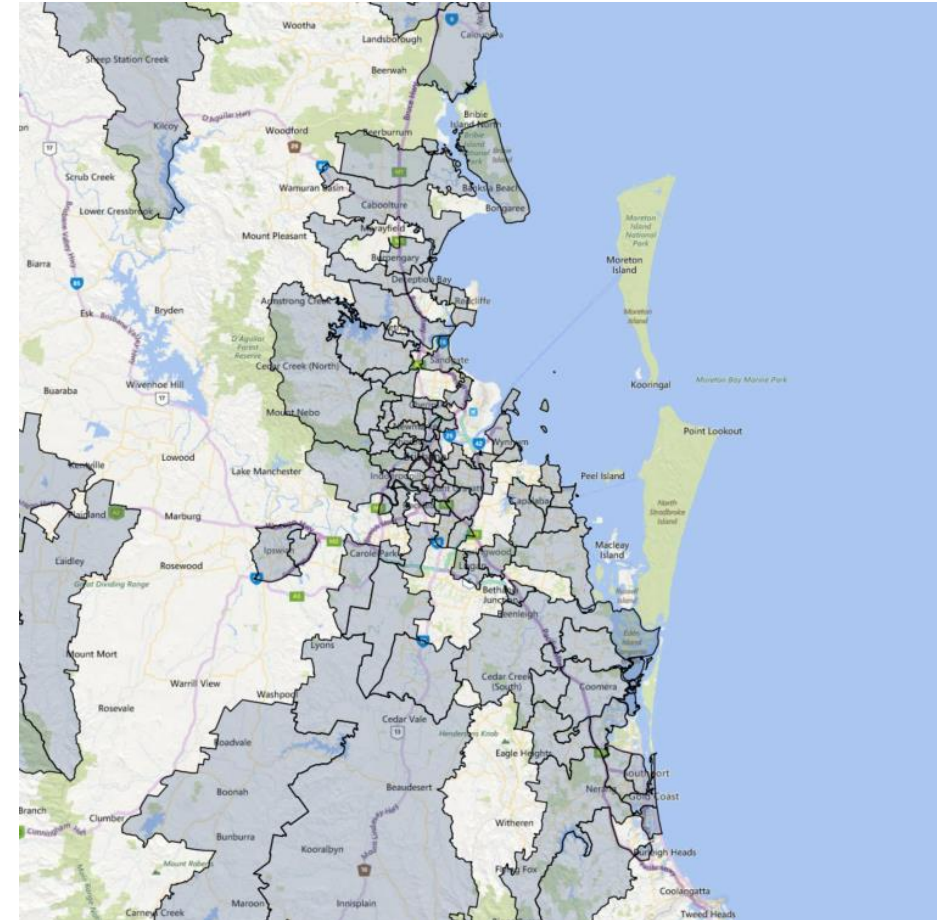
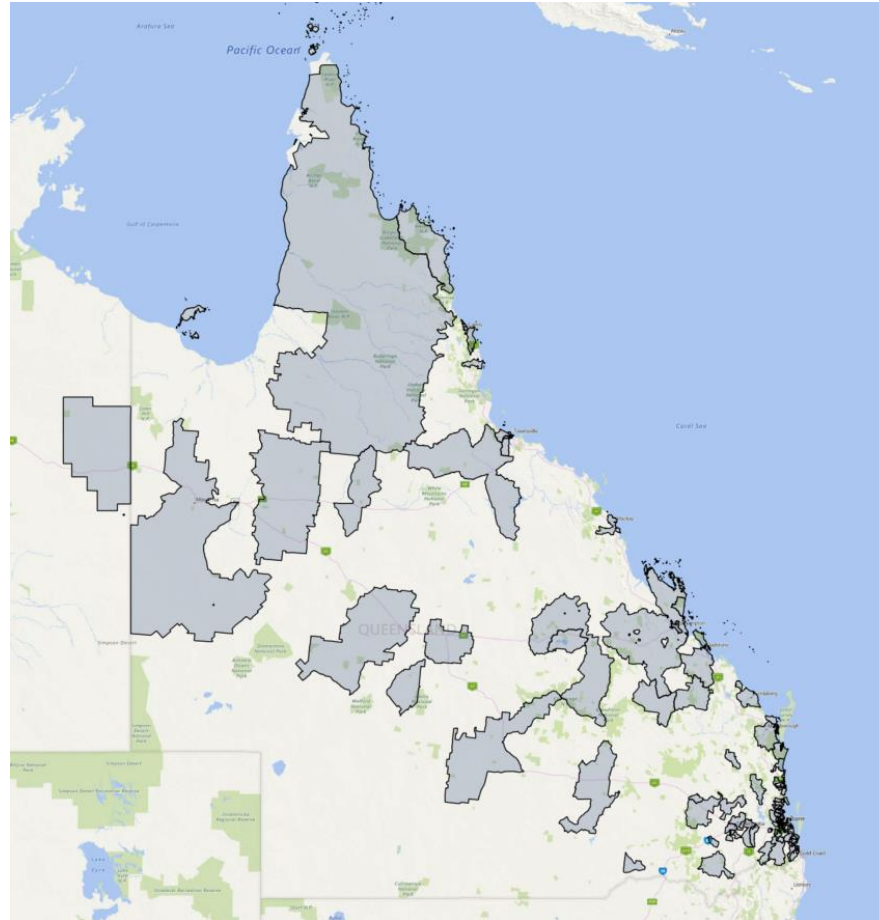


Respondent Profile

Survey respondents by Postcode

Key Findings

- Brisbane and the surrounding areas continue to be a strongly represented. However, respondents came from a variety of areas across Queensland.



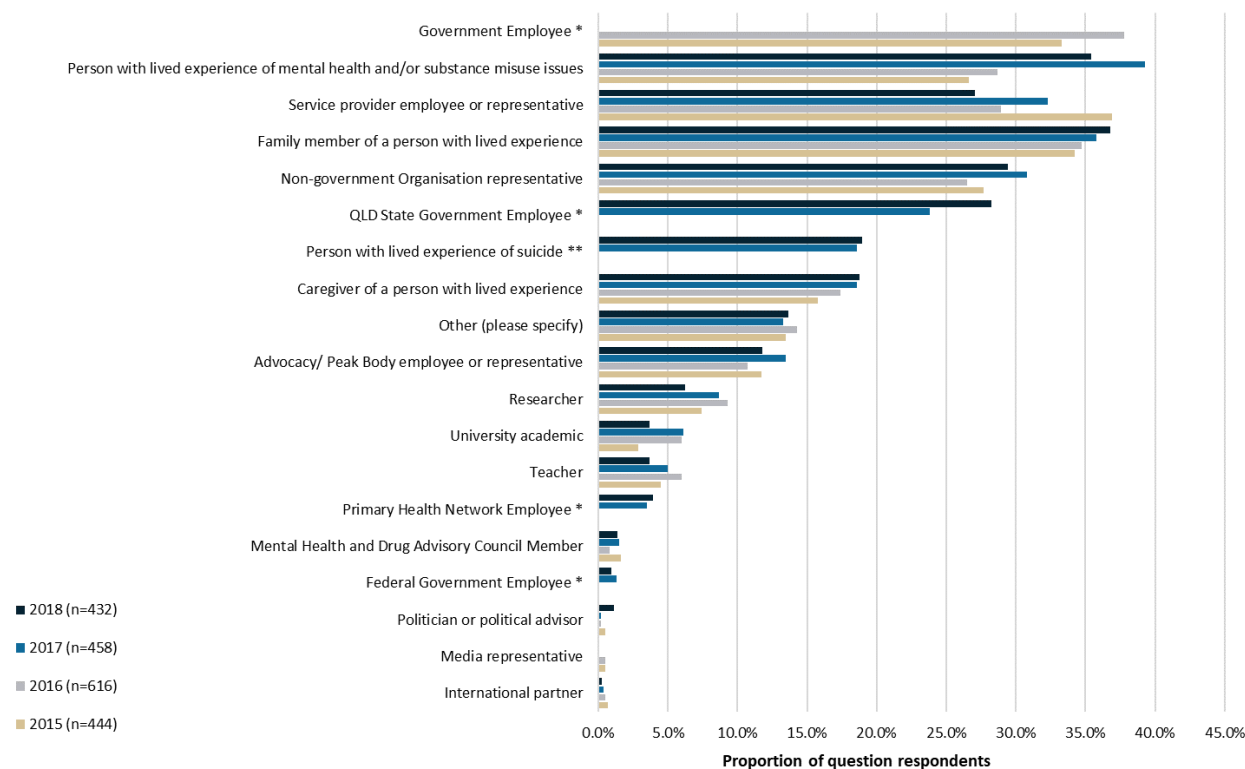
Key Findings

- Respondents continued to represent a wide cross-section of personal roles within the community.
- Family members of a person with lived experience shifted to the largest group of respondents (37%). The second most common response was "Person with lived experience of mental health and/or substance misuse issues."

* Government Employee broken down into Qld State Government, Federal Government Employee and PHN in 2017; ** New Category added in 2017

Respondent Profile

Survey respondents by Personal role

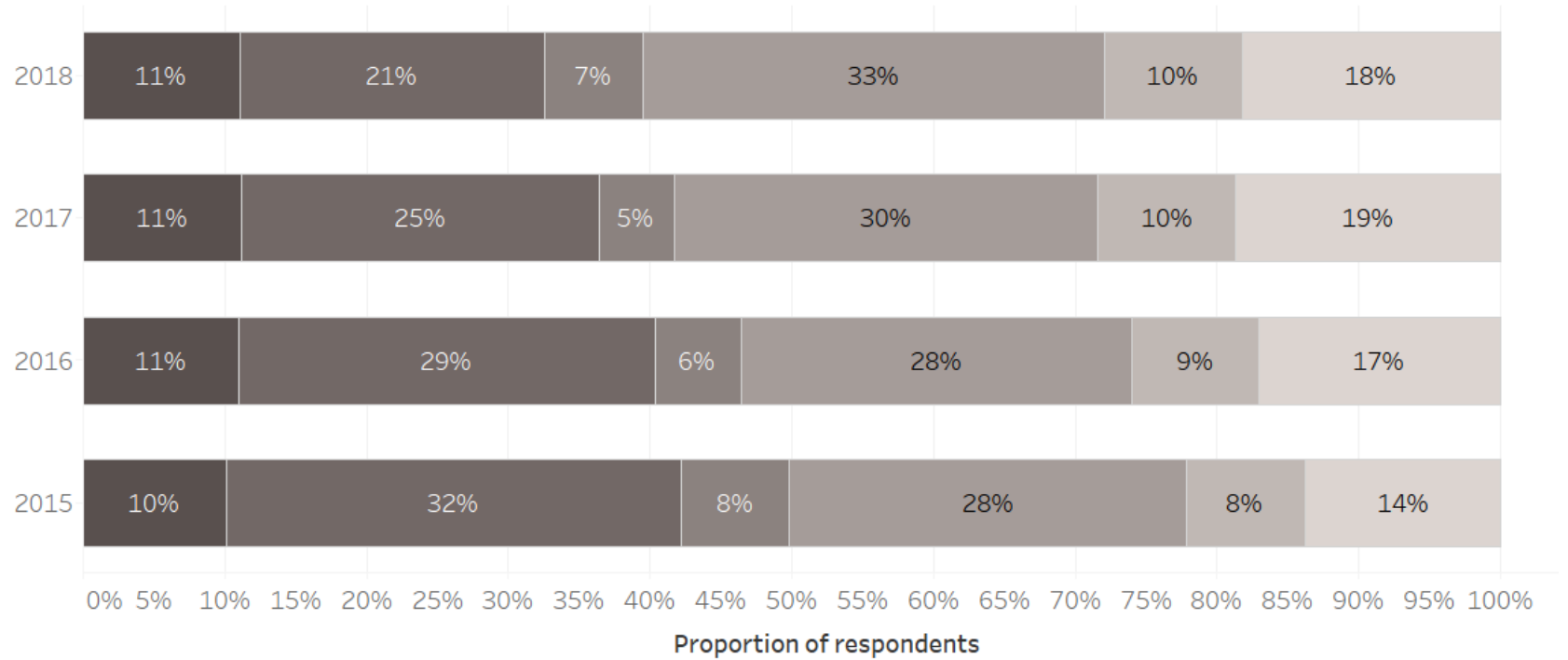


Key Findings

- Management and Frontline staff combined continue to represent the largest proportion of respondents (ranging 54% to 60%), although there was a drop of Frontline staff in 2018 respondents and an increase in Management respondents.

Respondent Profile

Survey respondents by organisational role

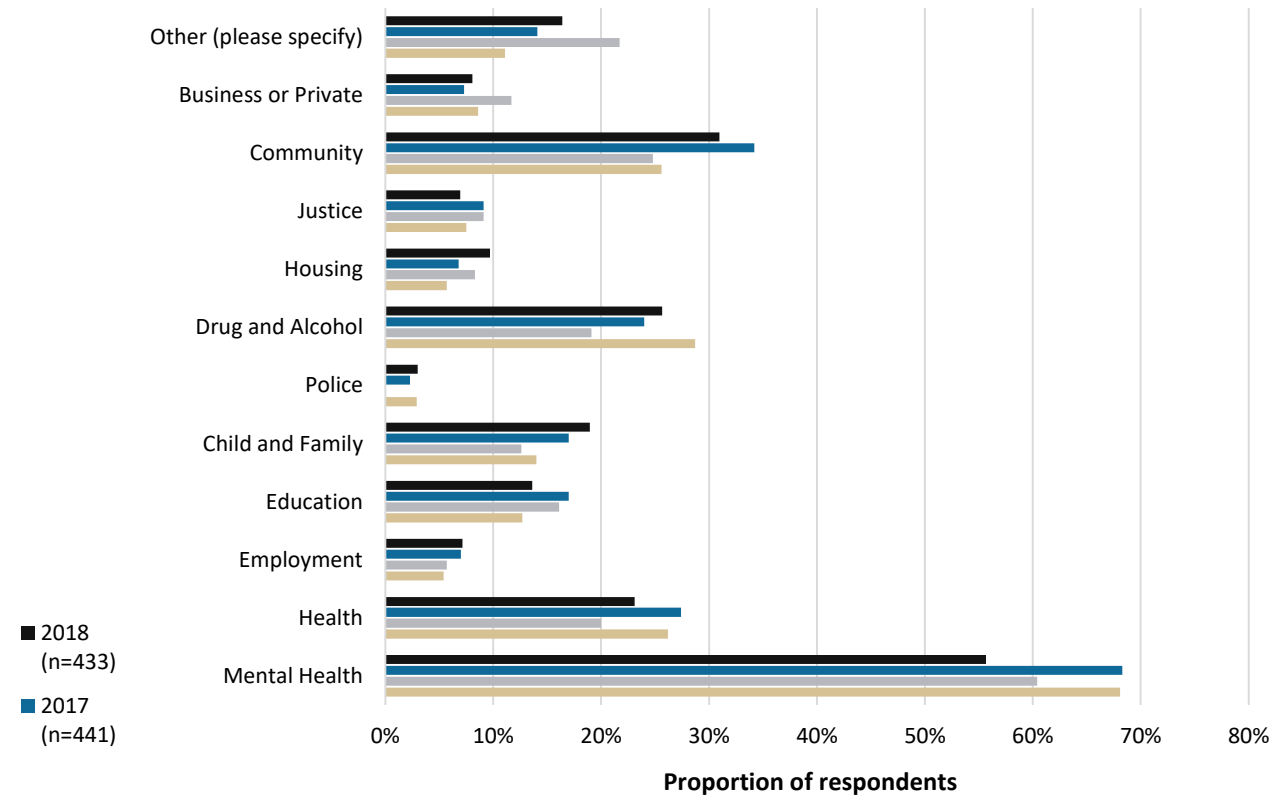


Key Findings

- Respondents continued to represent a wide cross-section of personal roles within the community.
- Compared the previous year, in 2018 there was slight increases in Community, Housing, Drug & Alcohol and Child & Family Sector Respondents.
- In 2018 there was a significant drop in Mental Health (56%) and Health (23%) sector respondents.

Respondent Profile

Survey respondents by Sector



Key Findings

- Overall, there was an increased in responses from priority population groups except for persons with a disability

* Note that this category combined persons experiencing Mental health difficulties and substance abuse only in 2018.

Respondent Profile

Survey respondents representing priority populations

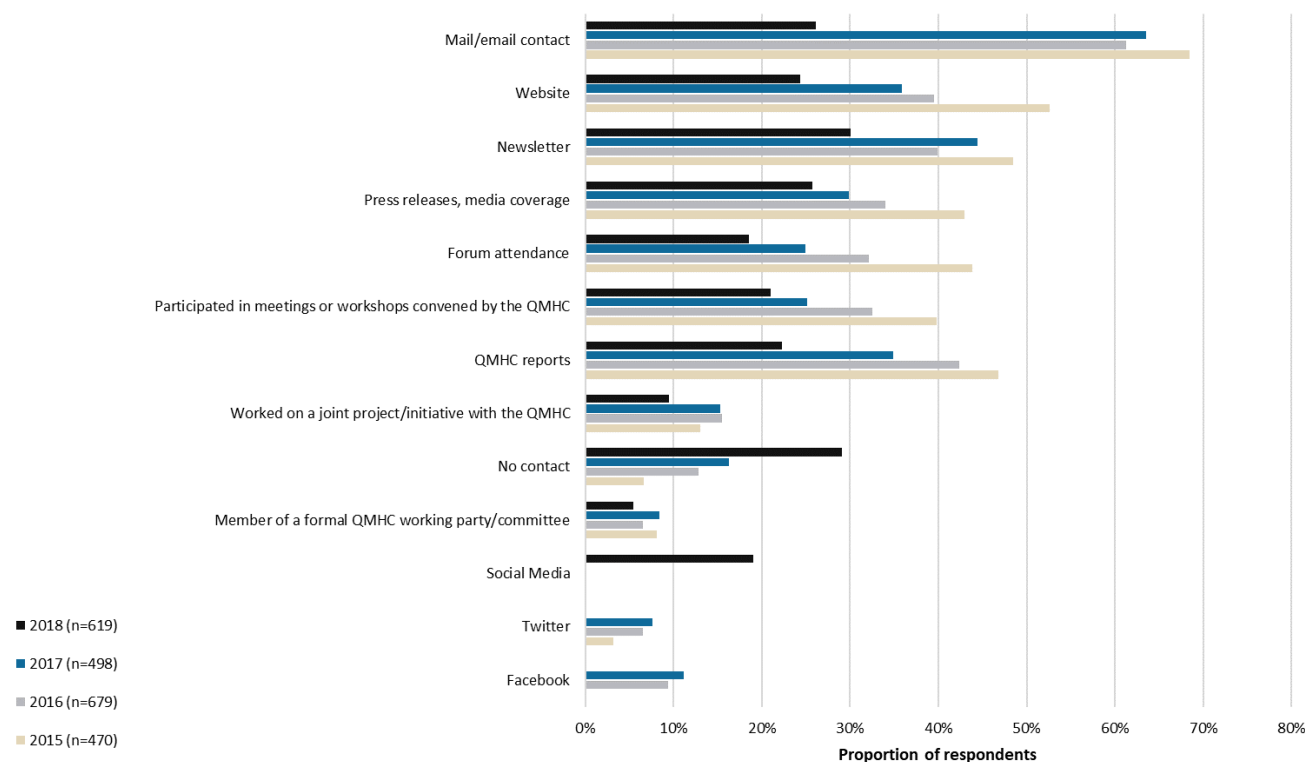
Priority population groups	2015 (n=433)	2016 (n=597)	2017 (n=674)	2018 (n=621)	Indicative QLD population rates	Source
Aboriginal and/or Torres Strait Islander background (ATSI)	8%	5%	5%	6%	4.0%	2016 Census QLD figures
Culturally and Linguistically diverse (CALD)	6%	7%	4%	5%	18.8%	2016 Census QLD figures
Person with a Disability	7%	8%	7%	6%	18.3%	2015 Survey Disability Ageing and Carer's ABS
Person experiencing both Mental health difficulties and issues related to substance use	6%	8%	5%	2%*	N/A	
Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI)	6%	4%	3%	3%	N/A	

Key Findings

- There was a significant drop across many modes of interaction with the QMHC, in particular mail/email contact dropped significantly as a mode of interaction to 26% from 64% in 2017.
- No contact increased significantly to 29% from 16% in 2017. This may explain the increase in proportion of "Unable to Comment" in some questions.
- Social media was a new category added to the 2018 survey where 19% of respondents identified this as a mode of interaction. This category replaced Twitter and Facebook, in 2017 the sum of those respondents was also 19% percent.

Respondent Profile

Survey respondents by mode of interaction with QMHC

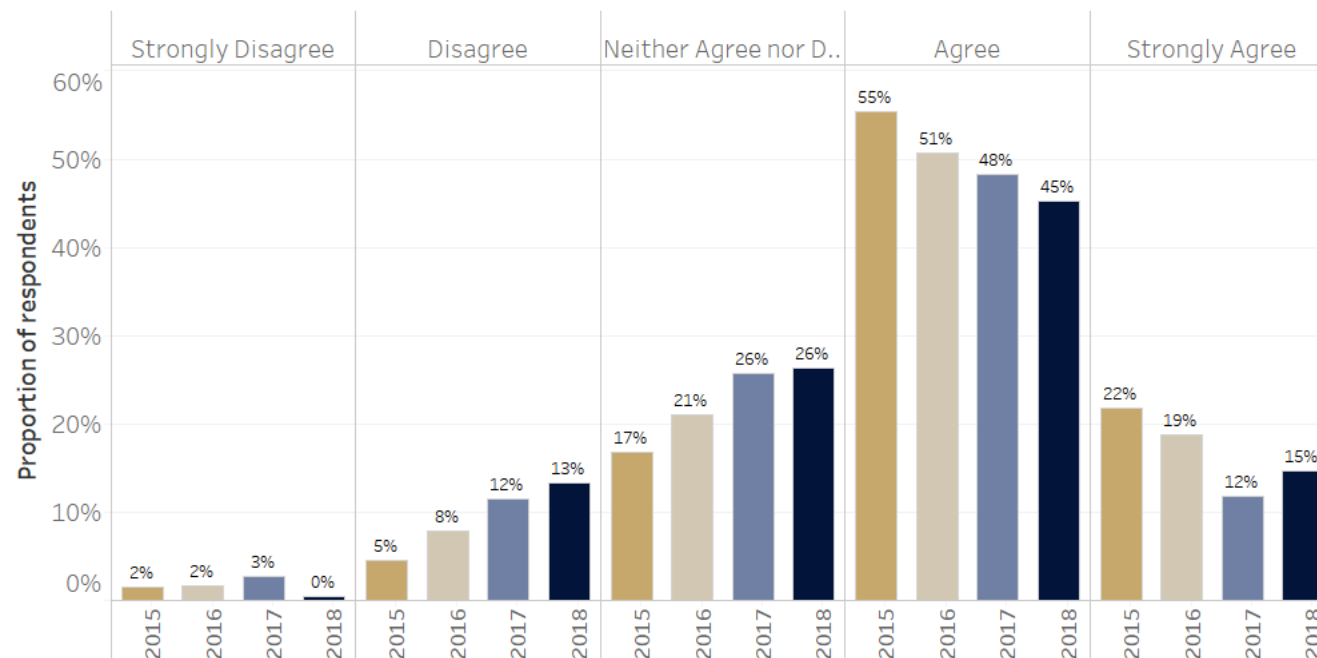


Key Findings

- Overall, the 2018 response was consistent with the 2017 year response.
- In 2018, 60% of the total respondents reported that they either "Agree" or "Strongly Agree" that they feel knowledgeable about mental health, drug and alcohol systems in Queensland, which was the same as 2017 although there was a slight shift towards those that "Strongly Agree"
- Only 2 respondents selected that they "Strongly Disagree" with the statement in 2018.

Respondent Profile

Survey respondents who *"feel knowledgeable about the mental health, drug and alcohol system Queensland"*





PaxtonPartners