YES-CMO

Your Experience of Service Community Managed Organisations

What consumers say about the services they receive from community managed organisations in New South Wales 2022 - 2023









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MHCC acknowledge and express their appreciation to the Working Group and Participant Organisations, as well as lived experience peaks BEING Mental Health Consumers and Mental Health Carers NSW. We thank them all for sharing their knowledge, expertise and experience and assisting the original project successfully moving towards full implementation.

Working Group 2022 - 2023

Mission Australia

Buttery

Coast & Country Primary Care

Flourish

Grand Pacific Health

Independent Community Living Australia

Neami

New Horizons One Door Open Minds

Stride Unitina Wellways

BEING Mental Health Consumers

Mental Health Carers NSW NSW Ministry of Health

Mental Health Coordinating Council

Glossary

Aboriginal Within this report, the term

'Aboriginal' is used to represent

First Nations people.

Carer A family member, partner or

> friend of someone living with a mental health condition that has a role in supporting that person's

care and recovery.

Consumer A person with lived and living

> experience of a mental health condition, who uses mental health and/or psychosocial disability support services.

Participant Some CMOs call users of their

services participants rather than

consumers.

Peer People with lived and living

> experience of mental health conditions who are considered

experts by experience.

YES-CMO returns

The number of YES-CMO questionnaires returned in a period.

Score

Net Promoter A metric used in customer experience programs which measures the loyalty of customers

or clients to an organisation.

Acronyms

AMHOCN Australian Mental Health

Outcomes and Classification

Network

СМО Community Managed

Organisation

CLS Community Living Supports **HASI** Housing and Accommodation

Support Initiative

InforMH NSW Ministry of Health, System

Information & Analytics Branch

MHCC Mental Health

Coordinating Council

NPS Net Promoter Score

YES Your Experience of Service

YES-CMO SNAPSHOT 2022-2023





of consumers rated their experience as excellent or very good.

The highest rated domains were

Respect & Individuality

Returns increased by 852 or

+160%

compared to the previous year Returns provided feedback about

50 services



NPS rating maintained at

67%

The most common highlight mentioned in free text are the



Caring & NTM Supportive St

The consumers who rated their care most positively were:

- Aboriginal consumers
- Aged 25-34
- Engaged with the service for 4-6 months

ABOUT YES-CMO

Background

1 Context

Your Experience of Service (YES) is a nationally developed questionnaire designed to gather information from consumers about their experiences of care when accessing mental health services. Over the past ten years, a suite of national consumer and carer experience tools have been developed and implemented in Australian mental health services. The Your Experience of Service (YES) questionnaire was originally developed for public specialist mental health services. It was co-designed and named in partnership with consumer advocates and is based on the recovery principles described in the Australian National Standards for Mental Health Services (2010).

2 YES development

The YES questionnaire was developed and tested between 2011 and 2013 through extensive national consultation and was released to SW public mental health services in 2015.

3 Updated for CMOs

Following the finalisation of the YES survey, the national Mental Health Information Strategy Standing Committee (MHISSC) agreed that capturing experience of care was also important for the mental health CMO sector. The Australian Mental Health Outcomes and Classification Network (AMHOCN) led a project to develop the YES-CMO survey. The YES-CMO was made available in late 2016.

4 Partnership

In 2017, NSW Ministry of Health and peak bodies Mental Health Coordinating Council (MHCC), BEING-Mental Health Consumers and Mental Health Carers NSW partnered in a co-design process to pilot the YES-CMO in NSW CMO services.

5 NSW Pilot

In 2018 the YES-CMO pilot project commenced to gather data about consumer experiences of services received from MHCC member organisations. The pilot phase ran for 15 months, from October 2019 to December 2020 with all responses provided on paper surveys. The survey was and continues to be collected anonymously and services are identified using a service code. No information collected can be used to identify individuals or organisations and the data is not used to benchmark participating organisations.

6 Evaluation

In June 2021 an evaluation report of the <u>YES-CMO pilot phase</u> was published. The working group reviewed the results of the pilot and determined that YES-CMO should continue to be offered to support service improvement. The NSW Ministry of Health agreed to facilitate implementation and the live phase of YES-CMO commenced in January 2021. The online version of YES-CMO was launched in April 2022.

7 Implementation

The YES-CMO remains a joint initiative between the NSW Ministry of Health, MHCC and member organisations. The activity demonstrates the ongoing commitment of the NSW Ministry of Health and Community Managed Organisations (CMOs) to work in partnership with consumers to improve the quality of the services they receive. The CMO services invited to participate in the YES-CMO are those services that provide specialist mental health support and care that are funded by the NSW Ministry of Health (either directly or via Local Health Districts).

The Ministry of Health have agreed to collect data from programs that receive Commonwealth or ad hoc funding. When collecting data from these programs it is separated from the aggregated data reports representing Ministry of Health funded programs. The YES-CMO Working Group originally established to support the pilot study, continues with representatives from all the participating CMOs as well as MHCC, BEING-Mental Health Consumers, Mental Health Carers NSW, and the NSW Ministry of Health.

This Working Group meets regularly to discuss the analysis of quarterly data; the progress of implementation, promotional strategies and address any challenges and opportunities arising for the service delivery and environmental circumstances.

Aims of YES-CMO

The primary purpose of the YES-CMO is to support quality improvement. While it can inform organisations about how their teams are progressing in terms of meeting expectations and improving outcomes for the consumers and carers they support; its main objective is to support organisations longitudinally identify and track specific areas to address, to improve service delivery and build workforce capacity.

The data analysis reports are an invaluable mechanism though which the MHCC can advocate on behalf of its members and the sector to the NSW Government. It provides the evaluative evidence necessary to inform policy and practice reform. When considered alongside other consumer outcome measures, it may also assist in advocacy for additional funds for services and capacity building. The YES-CMO aims to enhance operational areas that may support quality care. By supporting staff to continually look for opportunities to improve how they work with participants, it can help to build and sustain the workforce for the future.

Research collaboration

Universities have expressed an interest in utilising YES-CMO data for studies that focus on certain areas covered by the survey. One such example is the University of Newcastle, School of Psychological Sciences that since 2021/22 has been investigating the extent to which CMOs provide physical health related programs to consumers accessing their mental health support services, and the outcomes of those activities. The research team requested use of data from specific YES-CMO questions, including demographic data. This data specifically relates to consumer engagement with health initiatives provided by CMOs. In July 2023 consent was sought from participating organisations, and permission was granted by most to share their de-identified data.

The YES-CMO Survey

The YES-CMO survey asks consumers about their experience of receiving services from community-managed mental health services.

The survey is available in a paper version or via an online portal. Whichever method of collection is used, a consumer can choose to complete the form independently or request the assistance of a support worker. Paper surveys have been offered since the pilot commenced in October 2019. Online collection commenced in April 2022.

Both versions of YES-CMO are anonymous, and information collected cannot be used to identify individuals. Additionally, in the data collection, participating services remain unknown to the analysis team at the NSW Ministry of Health. Only MHCC had access to both service codes and names for the collection of data. It was a key requirement at the start of the project to ensure that data collection would not lead to benchmarking organisations' performance, and potentially lead to competition regarding tendering processes for future funding. Since implementation, the NSW Ministry of Health has established a secure system internally with two teams handling different aspects of implementation. One team handles the administrative activities, and another analyses the data. In this way the data remains anonymous and protects participating organisations.

Questions in YES-CMO differ somewhat from those in the public services YES in that several questions in YES-CMO have been modified to better reflect the practice approach and way care is provided in CMO settings.

A question was also added to evaluate how likely consumers would be to recommend the service to family or friends. This question is used to calculate the Net Promoter Score (NPS), an internationally recognised measure of customer experience.

Although consumer responses to YES-CMO are anonymous, demographic questions are included to help identify if different groups of people that respond and their varied experience of service.

YES-CMO contains a total of 38 questions, comprised of:

- 23 experience questions
- 5 outcome questions
- 2 free text questions
- 7 demographic questions
- 1 question (Question 29) used to calculate the Net Promoter Score

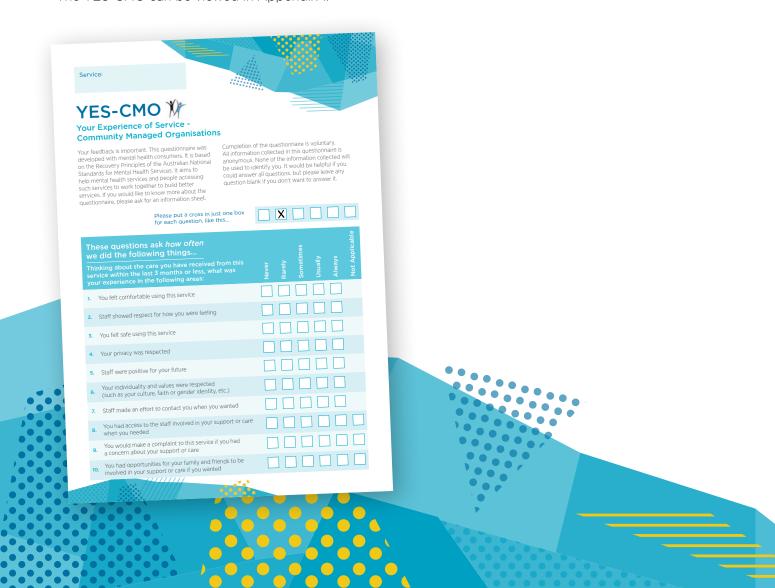
The questions use 3 rating scales:

- Questions 1 to 18 use a Frequency scale: Never, Rarely, Sometimes, Usually and Always and Not applicable.
- Questions 19 to 28 use a Performance scale:
 Poor, Fair, Good, Very Good and Excellent.
- The Net Promoter Score question uses a Likelihood scale, offering a Likert rating from 0 to 10.

The YES-CMO can be viewed in Appendix 1.

This Report

This report summarises YES-CMO responses received from consumers in 2022-23. The report is cautious when comparing data from the previous year and the pilot study as both were impacted by the COVID-19 pandemic.



How many YES-CMO surveys were returned in 2022-23?

In 2022-23, a total of 1,384 YES-CMO surveys were received. This is an increase of 852 returns or +160% on the previous year during which return rates had been heavily impacted by the pandemic. Although it is encouraging to have seen returns increase beyond pre-pandemic levels, the volatility means it is challenging to compare results over time. Therefore, this report focuses on comparing results between groups within the year 2022-23.

Number of surveys returned each year



Responses provided feedback from 50 services across 11 participating CMOs. The COVID-19 pandemic affected the way CMO services delivered support services as well as how consumer feedback was collected. Early in the pandemic, YES-CMO was only offered on paper which resulted in a lower number of surveys being completed. The online version launched in April 2022 and quickly increased the number of surveys, with more than half (53%) being completed online in 2022-23.

List of participating organisations

- Buttery
- Coast & Country Primary Care
- Flourish
- Grand Pacific Health
- · Independent Community Living Australia
- Neami
- New Horizons
- One Door
- Open Minds
- Stride

Uniting Wellways

Ensuring consistent returns

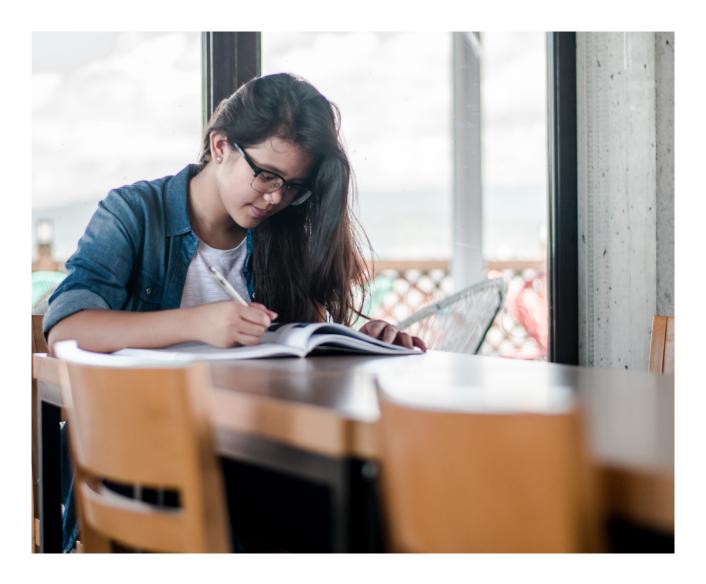
MHCC invited members to tell us about how they have embedded the process of collecting returns into practice. What we heard was:



- Staff are using and updating a spread sheet for every quarter and documenting each participant's completion and offer of assistance or refusal.
- This year we designated one staff member who calls participants to offer the survey and assistance to complete it.
- All participants are offered the survey with staff encouraging participant feedback. The number of participants who accept the survey vs declined to complete are tracked by the team in a shared document.
- One team implemented focus months-February, May, August and November, during these months we provide staff with weekly reminders at team meetings.
- We were not getting consistent returns of the YES-CMO surveys, so we made some changes in our process. We now have each participant's name on a list, and workers tick each participant off as they are offered a survey in the allocated months, this has helped keep on top of returns.
- We also had a large turnover of staff and educating the staff to stamp the surveys was sadly missed, so we lost valuable data. We are now making sure all forms are pre-stamped.
- We have implemented a time management plan of nominated 3 monthly cycles for completion. Staff are notified by calendar invite and reminded during team meetings.
- Using a multi-faceted approach to have the surveys remembered and completed has taken time to build and implement.



WHICH CONSUMERS COMPLETED A YES-CMO IN 2022-23?



The YES-CMO includes several demographic questions to help identify how well different groups are represented in YES-CMO feedback. Since YES-CMO was implemented, a broad range of people have provided feedback.

In 2022-23, there was a relatively even split of returns from both male and female consumers. Around 2% of surveys were completed by people who were non-binary/gender fluid or specified a different identity.

Most respondents identified as heterosexual, English speaking and aged between 35-64 years. Most consumers had been engaged with the service for more than six months which may reflect the type of care typically provided by CMOs.

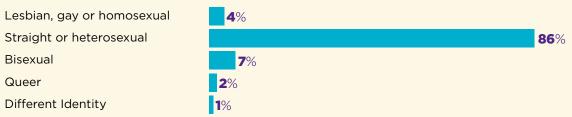
Approximately 16% of surveys were completed by Aboriginal people. While we do not have data about the number Aboriginal people engaged with the services participating in the survey, approximately 17% of consumers accessing HASI, HASI Plus and CLS services in 2022–23 identified as Aboriginal. This suggests that Aboriginal consumer experience is well represented in YES-CMO.

Proportion of returns by demographic group





Sexuality



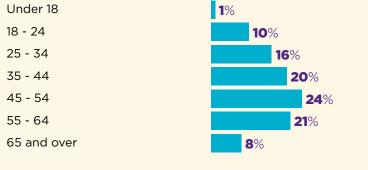
Language spoken at home



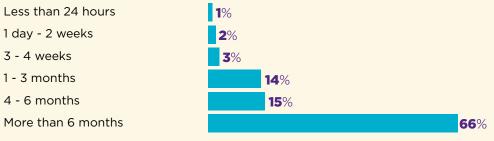
Aboriginality



Age group (years)



Duration of care





HOW DID CONSUMERS RATE THEIR EXPERIENCE IN 2022-23?

Overall experience is measured using an experience index which combines the scores of questions 1 to 23. This method ensures that different areas of experience are included in the overall score. The measure is then expressed as the percentage of consumers reporting an excellent or very good experience. YES-CMO questions are grouped into six domains which are consistent with other national consumer and carer experience measures.

In 2022-23, 92% of consumers rated their experience of care with CMOs as excellent or very good. The highest rated domains were Respect and Individuality. Fewer people rated their access to information and support and the Making a difference domain as excellent or very good. It is challenging to compare experience over time, due to changes in the number of surveys completed each year and the impacts of the COVID-19 pandemic. However, the percentage of people rating their overall experience as excellent or very good has increased slightly each year (89% in 2020-21; 91% in 2021-22).

Consumers rated their overall experience in domains as excellent or very good

Overall experience

Overall experience	
	92%
Respect	
	95 %
Individuality	
	95%
Participation	
	94%
Safety and fairness	
	92%
Information and suppo	rt
	78 %
Making a difference	
7	2%

Comparing CMO domain scores to public mental health services

Caution is needed when interpreting any comparisons between public community mental health services and CMO services. There are differences in the number of respondents who completed the surveys, the mix of consumers accessing service and the types of services provided. For example, in public community mental health services, consumers may be treated and supported involuntarily, and this group typically report a less positive experience.

In 2022-23 there were 6,447 surveys completed about public community mental health services and 1,384 completed about CMO services. The percentage of consumers rating their experience as excellent or very good was higher in CMOs (92%) compared to public community mental health services (81%).

Experience across the domains was similar with Respect and Individuality rated most positively and Information and support and Making a difference rated less positively.

Experience across the YES-CMO domains

95%

Showing Respect

Respect reflects how welcome consumers feel when engaged with services, exploring if they feel recognised, valued and treated with dignity.



HIGHEST RATED QUESTION

Q4. Your privacy was respected



Q13. You had opportunities to help improve the service if you wanted

95%

Valuing Individuality

How the service meets the individuals needs including sensitivity to culture, gender, faith and the importance of personal values and beliefs.



HIGHEST RATED QUESTION

Q6. Your individuality and values were respected.



Q18. Staff talked with you about your physical health in a way that was useful

94%

Supporting Active Participation

How the service provides opportunities for engagement, choice and involvement in the process of service delivery.



HIGHEST RATED QUESTION

Q16. You had opportunities to discuss your support or care needs with staff.



Q10. You had opportunities for family/ friends to be involved in your support if

92%

Ensuring Safety & fairness

How the service provides individuals with a physically and emotionally safe environment that treats them reasonable and fairly.



HIGHEST RATED QUESTION

Q3. You felt safe using this service

LOWEST RATED QUESTION

Q9. You would make a complaint to this service if you had a concern

78%

Providing Information and support

How the service works for the individual consumer including resources such as written information, a care plan and access to peer support



HIGHEST RATED QUESTION

Q20. Explanation of your rights and responsibilities

LOWEST RATED QUESTION

Q21. Access to peer support

72%

Making a difference

How the service contributed to outcomes for individuals including social and emotional wellbeing and physical health.



HIGHEST RATED QUESTION

Q28. Overall how would you rate your experience in the last 3 months

LOWEST RATED QUESTION

Q26. The effect the service had on the management of your physical health

WHAT WERE THE HIGHEST AND LOWEST RATED QUESTIONS IN 2022-23?

Consumers rate the questions using a scale ranging from 1 to 5, where higher scores indicate a more positive experience. Reviewing the highest and lowest rated questions can highlight to services what they are doing well and areas for improvement.



In 2022-23, the 5 questions with the highest average rating out of 5 were:

Q04	- Your privacy was respected	4.87
Q06	- Your individuality and values were respected	4.86
Q02	- Staff showed respect for how you were feeling	4.85
Q03	- You felt safe using this service	4.84
Q05	- Staff were positive for your future	4.83



The 5 questions with the lowest average rating out of 5 were:

Q21	- Access to peer support	4.26
Q27	- The effect of the service on your overall well-being	4.25
Q24	- The effect of the service on your hopefulness for the future	4.23
Q25	- The effect of the service on your ability to manage your day-to-day life	4.20
Q26	- The effect of the service on the management of your physical health	4.10

DO SOME GROUPS OF CONSUMERS REPORT A DIFFERENT EXPERIENCE?

Services aim to meet the needs of all consumers, so it is important to consider if some groups report different experiences. To understand variations in experiences we compared the overall experience of different groups with the average experience of all consumers.

Whilst there were variations in the overall experience reported, in 2022-23 there were no statistically significant differences within groups.

Gender

The difference in experiences reported by males and females in 2022-23 was minimal. The largest difference was in the **Making a difference** domain, where females reported a slightly less positive experience (70%) than males (75%). The small number of returns (23) from consumers with a gender other than male or female means the data was insufficient to evaluate this group's experience.

Sexuality

A higher share of heterosexual consumers rated their overall experience as excellent or very good compared to non-heterosexual consumers. People who were bisexual rated the least positive experiences, with the largest differences in the domain of **Respect**. Lesbian, gay or homosexual people rated **Participation** lower than other groups. There was a small number of surveys returned from queer people and those who listed a different identity. In this report, these groups have been combined.

Language spoken at home

Consumers who spoke English were more likely to rate their overall experience as excellent or very good compared to those who spoke English and other languages. The largest difference was in the **Participation** domain where 94% of English only speakers rated their experience as excellent or very good compared to 88% of people who spoke English and other languages.

Aboriginality

Aboriginal consumers were slightly more likely to rate their overall experience as excellent or very good compared to non-Aboriginal consumers. All YES-CMO domains were rated the same or higher by Aboriginal consumers, except for the Making a difference domain which was rated 71% by Aboriginal consumers and 73% by non-Aboriginal consumers. The largest difference between Aboriginal and non-Aboriginal people was in in the Information and support domain which was rated 80% by Aboriginal consumers, and 78% by non-Aboriginal consumers.

Age group (years)

Overall experience ratings varied by age. The highest ratings for overall experience were provided by consumers aged 25–34 years. Across domains, there were differences across age groups. In particular, people aged 65 years and over reported a less positive experience of Information and support and Making a difference compared with other age groups.

Duration of supports

Consumers who had been engaged with supports for between 1 and 6 months reported the most positive experience, whereas those engaged for less than 1 month reported a slightly less positive experience. People engaged with services for less than 1 month rated the domains of Information and support and Making a difference lower than other groups.

Overall experience by groups	2022-2023
Gender	
Female 92%	
Male92%	
Non-binary/gender fluid	.
Different Identity	
Coverality	
Sexuality	
Lesbian, gay or homosexual	······
	93%
Bisexual 80%	
Queer	
Language spoken at home	
English 92%	
English and other	<u></u>
Aboriginality	
	94%
No	
Age group (years)	
Haday 10	
18 - 24	96%
25 - 34 89 %	3070
35 - 44	
45 - 54	94%
55 - 64	34 70
65 and over	
Duration of care	
2 weeks or less	
3 - 4 weeks	
1 - 3 months	96%
4 - 6 months	96%
More than 6 months 91%	

What do free text questions inviting responses tell us about consumer experiences?

YES-CMO includes two free text questions inviting people to say what would have made their experience better and what they felt was the best thing about the service. Responses to these questions provide information about what services are doing well and what they could improve.

Most of comments had a positive sentiment with around 500 consumers commenting on Q30 - what could be better; compared to almost 800 commenting on Q31- what was best. The most commonly noted highlight was that staff were described as friendly, supportive and helpful.

Themes around what could be better were varied, reflecting the diversity of service models measured within the collection. Some consumers noted they would prefer to work with one dedicated staff member rather than multiple support workers. Some provided feedback about the service's complaints process: either noting that they did not feel comfortable to make a complaint, or that complaints were not dealt with as they would have liked. Some commented on activities, requesting more face to face rather than online delivery, or more options outside work hours.

Reflections from the frontline

MHCC invited members of the YES-CMO Working Group to share their experience about how data has been used to help quality improvement in their service. What we heard was:



- We have expanded the variety, availability and consistency of group activities for psychosocial, daily living skills, social and community goals for participants.
- We are researching and going to include groups such for LGBTQIA+, CALD, and Aboriginal people.
- We make sure communicating with participants is a priority.
- Staff are much more purposeful around using the Recovery Star and initiating reflective discussions with participants about how far they have come.
- Staff discuss positive feedback and are encouraged to adopt the same well-received approach with all participants.
- Likewise negative feedback is discussed to improve on points made.
- We are encouraging more reflective practice amongst staff, and to be open to improving their practice. We review these approaches through weekly and monthly meetings.
- We are providing training to make improvements to our group activities.
- We've recruited more peer workers.
- We are opening-up outside business hours.
- We are developing programs and activities to address participants health needs and implementing a health screening tool.
- We use peer workers to enhance engagement and encourage meetings between participants and peer workers prior to exiting the service to better understand their experience of our service.

HOW LIKELY WAS IT THAT CONSUMERS WOULD RECOMMEND CMO SERVICES?

YES-CMO includes a net promotor score which asks people "How likely would you be to recommend this service to your family or friends if they required a similar service?". This question is rated from: 0 (not at all) to 10 (extremely likely).

Following the conventions of NPS research, those consumers unlikely to recommend a service are known as Detractors (scores 0-6), and those who are likely to recommend the service are known as Promoters (scores 9-10). Passives are people who are satisfied, but unlikely to recommend the service (scores 7-8).

To calculate the NPS, the percentage of people who are unlikely to recommend the service (scores 0-6) are subtracted from the percentage of people who are likely to recommend the service (scores 9-10).

Net Promotor Score Performance Ranges

Range	Performance
Less than O	Poor
0-20	Good
21 to 50	Favourable
51 to 70	Excellent
Greater than 70	World class

Net Promotor ratings 2022-23

The NPS Score for 2022-23 was 67% reflecting the difference between the 75% of consumers who were Promoters and the 7% who were detractors. This rating has been maintained over time and is in line with the NPS performance grade of Excellent.

We explored the differences in experience for people who were likely to recommend the service compared to those who were unlikely to recommend the service. The largest difference in question ratings between Detractors and Promoters was for the following questions:

- Q22. Development of a plan with you that addresses all of your support or care needs
- Q24. The effect of the service on your hopefulness for the future
- Q27. The effect of the service on your overall well-being
- Q28. Overall, how would you rate your experience with this service in the last 3 months?



Red: Detractors Grey: Passives Green: Promotors

CONCLUDING COMMENTS

In conclusion, it is fair to say that MHCC, the Ministry of Health/ InforMH and most importantly the participating organisations in this initiative are delighted with the positive outcomes described in this report. Whilst there is always room for improvement, and quality improvement of services to consumers is what the YES-CMO is all about, we believe that this initiative has been an outstanding example of co-design, partnership and collaboration. Underpinned by a robust methodology, YES-CMO has demonstrated that it is a quality improvement activity of value to all stakeholders.

From MHCC's perspective, YES-CMO is now firmly embedded in the service delivery culture of its member organisations delivering NSW Health funded services and provides the data MHCC needs to progress its advocacy endeavours. For so long we have been told that as a sector we lack data providing the evidence of best practice; and that we need to be able to demonstrate positive outcomes to support our proposals for enhanced service funding to meet the needs and aspirations of consumers, their families, carers and support persons.

The data in this report clearly shows that a significant percentage of consumers rate their experiences of services as excellent or very good. It is invaluable that we can also track improvement over time and demonstrate that services have made quality adjustments to their approach and delivery of programs. The percentage of people rating their overall experience as excellent or very good has increased slightly each year (89% in 2020–21; 91% in 2021–22) and now stands at 92%.

Additionally, this data reporting is vitally important because it acknowledges the work undertaken by the sector and helps workers recognise the significance and effectiveness of what they do. The data is also critical because we need to sustain the workforce and provide the evidence they need, to make quality improvements and innovate where necessary. The data demonstrates to workers that they are valued, that their work is important and how they can do it better.

This has been such an important and rewarding and endeavour. MHCC look forward to sharing the findings in the report with the sector and to continuing to work with all parties concerned long into the future.

LEARNING FROM EXPERIENCE

Tales and Tips

Tales

The MHCC Working Group were requested to ask their managers what they had learnt from the experience of implementing the YES-CMO in their service team. What we heard was:



- You must be willing to make changes, innovate and respond to participant's feedback.
- We realised just how much we wanted to hear how we are doing.
- I sense much more workplace satisfaction, staff sharing their views and ideas more openly.
- Make sure all staff know how important feedback is, to the participant- because they get the service they want, to the service because it enables us to evaluate our work, and to the sector because it helps MHCC advocate for more resources.
- Share the data regularly, make reporting 'business as usual' – make time to debrief and discuss ideas for QI with all the team.
- Staff have become more engaged, feel encouraged and excited about the opportunities to grow and do their work better.
- Participants seemed to become more engaged because they know we really listen.



Tips

This process has created an organic community of practice across the Working Group and their teams who kindly shared some tips with us all.



- Let participants know that their opinions matter and that these changes have occurred because of what they told you.
- Offer support to assist consumers fill in the survey, in their time and in an environment that respects their privacy.
- Thank participants for their feedback whether positive or negative.
- Consistently offer both formats and ensure participants are comfortable with the mode of responding.
- Offer to talk a participant through the questions especially if you know they have literacy issues.
- Share data results with teams across the organisation, not to benchmark the teams, but to learn from each other.
- Encourage reflective practice let's look at how we work..
- Discuss the YES-CMO when recruiting an onboarding new staff - let everyone know YES-CMO is reflective of the culture of the organisation.
- Talk about how best to support participants complete the survey.
 - Pick the right time and place,
 - Ask participants how you can improve supporting them,
 - Explain why it is important to you and hopefully they will see how it could affect them,
 - Offer a face-to-face discussion with a manager about their experiences if they have a problem or aren't interested in completing the survey,
 - Explain and offer your complaints process when the need arises.

APPENDIX 1: YOUR EXPERIENCE OF SERVICE SURVEY

Service:								
YES-CN Your Experienc Community Ma		ns						
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service within the your experience in 1. You felt comfortate 2. Staff showed resp 3. You felt safe using 4. Your privacy was r 5. Staff were positive 6. Your individuality (such as your culture) 7. Staff made an efform when you needed 9. You would make a	last 3 months or less, what the following areas: ble using this service ect for how you were feeling this service respected e for your future and values were respected ure, faith or gender identity, etc. ort to contact you when you wa the staff involved in your supp	c.) anted ort or care	Never Never	Rarely Rarely	Sometin	Usually	Always	Not Api

	ese questions ask <i>how often</i> e did the following things			mes			Not Applicable
ser	nking about the care you have received from this vice within the last 3 months or less, what was ur experience in the following areas:	Never	Rarely	Sometimes	Usually	Always	Not Ap
11.	Your opinions about the involvement of family or friends in your support or care were respected						
12.	The facilities and environment met your needs (such as cleanliness, private space, toilets, access to facilities to make a drink, meeting rooms, etc.)						
13.	You had opportunities to help improve the service if you wanted (such as attending meetings to give your opinions or views)						
14.	You were listened to in all aspects of your support or care						
15.	Staff worked as a team in your support or care (for example, sharing information and attending meetings with you)						
16.	You had opportunities to discuss your support or care needs with staff						
17.	The support or care available met your needs						
18.	Staff talked with you about your physical health in a way that was useful						
	ese questions ask <i>how well</i> did the following things				po		licable
ser	nking about the care you have received from this vice within the last 3 months or less, what was ur experience in the following areas:	Poor	Fair	Good	Very Good	Excellen	Not Applicable
19.	Information available to you about this service (such as how the service works, what to expect, how to make a complaint, upcoming changes that may affect you, etc.)						
20.	Explanation of your rights and responsibilities						
21.	Access to peer support (such as information about peer workers, referral to peer programs, advocates, etc.)						
22.	Development of a plan with you that addresses all of your support or care needs (such as accommodation, advocacy, employment, health, etc.)						
23.	Convenience of the location of the service for you (such as access to parking or transport, distance from your home, etc.)						

As the	a result of your experience with the service in last 3 months or less please rate the following:	Poor	Fair	Poob	Very Good	Excellent
24.	The effect of the service on your hopefulness for the future					
25.	The effect of the service on your ability to manage your day to day life					
26.	The effect of the service on the management of your physical health					
27.	The effect of the service on your overall well-being					
28.	Overall, how would you rate your experience with this service in the last 3 months?					
29.	How likely would you be to recommend this service to your family c a similar service?	or friend	ds if th	ey req	uired	
	at all 0 1 2 3 4 5 6 7 ase provide any extra comments My experience would have been better if	8	9	10	likely	
	3 - p					
31.	The best things about this service were					

	also tells us if some groups of p owing this helps us focus our e n this section will be used to ide	fforts to improve services.
What is your gender?		
Male	Female	Non-binary
I use a different term		I prefer not to answer
How do you describe your sexua	I orientation?	
Lesbian, gay or homosexu	Straight	Bisexual
I use a different term		I prefer not to answer
What is the main language you s	peak at home?	
English	Other (please specify)	
Are you of Aboriginal or Torres S	trait Island origin?	
No	Yes - Aboriginal	Yes - Torres Strait Islander
Yes- Aboriginal and Torres	s Strait Islander	
What is your age?		
Under 18 years 18 t	to 24 years 25 to 34 years	45 to 54 years
35 to 44 years 55 to	to 64 years 65 to 74 years	75 years and over
How long have you been receiving	ng support or care from this service?	
Less than 24 hours	1 day to 2 weeks	3 to 4 weeks
1 to 3 months	4 to 6 months	More than 6 months
How much of your care with this	service was by phone or teleconfere	ncing?
None A little	Some Most A	II
Did someone help you complete	this questionnaire?	
No	Yes - family or friend	Yes - language or cultural interpreter
Yes - consumer worker	Yes - another staff	



the envelope provided and return by mail:

YES/CES Reply Paid 3975 Sydney NSW 2001





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APPENDIX 2: TECHNICAL INFORMATION

YES-CMO development and validation

Information about the development, validation and psychometric properties of the YES-CMO questionnaire is available at:

https://www.amhocn.org/your-experience-service-survey-cmo-version

Analysis

- Missing, invalid or duplicate answers are recorded as null.
- YES-CMO returns with less than 12 of the first 23 questions completed are excluded when calculating the overall experience index and domain scores.
- Overall scores and domain scores are constructed following the methods prepared during the national YES development.
- Testing of significant differences between groups is conducted using 95% confidence intervals. These are calculated using the WALD formula for proportions.
- Non-overlapping confidence intervals are used to identify significant differences.

YES-CMO questions use three scoring scales:

- Frequency scale
- Performance scale
- Numerical score

The Net Promotor score (NPS) is rated on a scale of 0 (Not at all) to 10 (Extremely likely). To calculate the NPS, the percentage of detractors (scores 0-6) are subtracted from the promoters (scores 9-10).

APPENDIX 3: YES-CMO DOMAIN MAPPING

Questions grouped into 6 Domains covering Questions 1 to 28

Respect

How the service provides the individual with a welcoming environment where they are recognised, valued and treated with dignity

- Q1. You felt comfortable using this service
- Q2. Staff showed respect for how you were feeling
- Q4. Your privacy was respected
- Q5. Staff were positive for your future
- Q7. Staff made an effort to contact you when you wanted
- Q13. You had opportunities to help improve the service if you wanted
- Q14. You were listened to in all aspects of your support or care

Individuality

How the service meets individual's needs. It includes sensitivity to culture, gender and faith and the importance of personal values and beliefs.

- Q6. Your individuality and values were respected
- Q17. The support or care available met your needs
- Q18. Staff talked with you about your physical health in a way that was useful

Participation

How the service provides opportunities for engagement, choice and involvement in the process of service delivery.

- Q8. You had access to the staff involved in your support or care when you needed
- Q10. You had opportunities for your family and friends to be involved in your support or care if you wanted
- Q11. Your opinions about the involvement of family or friends in your support or care were respected
- Q15. Staff worked as a team in your support or care
- Q16. You had opportunities to discuss your support or care needs with staff

Safety and fairness

How the service provides individuals with a physically and emotionally safe environment.

- Q3. You felt safe using this service
- Q9. You would make a complaint to this service if you had a concern about your support or care
- Q12. The facilities and environment met your needs

Information and support

How the service works for the individual. It includes resources such as written information, a care plan, and access to peer support.

- Q19. Information available to you about this service
- Q20. Explanation of your rights and responsibilities
- Q21. Access to peer support
- Q22. Development of a plan with you that addresses all of your support or care needs

Impact (also referred to as Making a difference)

How the service contributed to outcomes for individuals. It includes social and emotional wellbeing and physical health.

- Q24. The effect of the service on your hopefulness for the future
- Q25. The effect of the service on your ability to manage your day-to-day life
- Q26. The effect of the service on the management of your physical health
- Q27. The effect of the service on your overall well-being
- Q28. Overall, how would you rate your experience with this service in the last 3 months?

Note: Question 23 (convenience of the location) is excluded from the Domains but contributes to the overall experience score.





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