





### Northwest ATTC presents: **Behavioral Health Workforce Support: Current State and Future Opportunities**

## Thank you for joining us! The webinar will begin shortly.

- Participants are automatically muted during this presentation
- **Got questions?** Type them into the chat box at any time and they will be answered at the end of the presentation.
- An ADA-compliant recording of this presentation will be made available on our website at: <a href="http://attcnetwork.org/northwest">http://attcnetwork.org/northwest</a>





### **Summer Webinar Series**

### Innovative and Successful Approaches to Staff Recruitment and Retention

#### Part I

Behavioral Health Workforce Support: Current State and Future Opportunities



Thomas Bialozor
July 27

#### Part II

Recruitment & Retention Strategies for Culturally Specific Behavioral Health Staff



Fernando Peña, Jerrod Murray August 31

#### Part III

Find, Hire, & Keep:
Applying NIATx Process
Improvement Tools and
Principals to create staffing
solutions



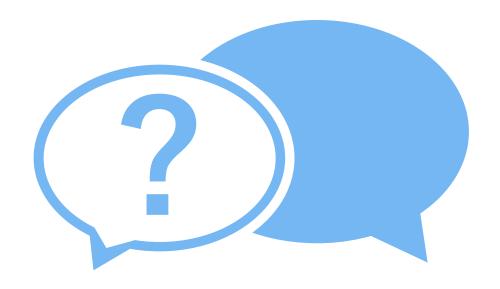
Mat Roosa September 28







## Questions? Please type them in the chat box!







### Surveys

### Look for our surveys in your inbox!

We greatly appreciate your feedback! Every survey we receive helps us improve and continue offering our programs.

It only takes 1 minute to complete!







### Certificates

## Certificates of Attendance are available for live viewers!



### Viewing Groups:

Please send each individual's name and email address to northwest@attcnetwork.org within 1 business day.

Your certificate will be emailed within a week to the address you registered with.





### Northwest Addiction Technology Transfer Center

2022 Summer Learning Series

PART 1: BEHAVIORAL
HEALTH WORKFORCE
SUPPORT: CURRENT
STATE + FUTURE
OPPORTUNITIES

Thomas Bialozor, MSW, LCSW, EMBA



### ABOUT THE PRESENTER

Thomas Bialozor, MSW, LCSW, EMBA



Behavioral Health Director, CareOregon

20 Years as Social Worker; Program Manager; Behavioral Health Plan Administrator

Professional focus on quality management; clinical outcomes in behavioral health; behavioral health integration / whole person care; and more recently, behavioral health workforce support

#### 1. The term 'behavioral health'

Umbrella term inclusive of Mental Health and Substance Use Disorders

### 2. Take care of yourself

Eat lunch; stand; doodle; take a walk, or whatever you need to do

3. New Ideas + Shared Ideas + Your Ideas

Strategies I've used or researched will be discussed, along with time for hearing ideas from colleagues, and sharing your own ideas

4. TW: Next 5 min on Pandemic Impacts

Feel free to step away for 5 min. if that is what is best for you

### BEFORE WE GET STARTED...



FEAR / ANXIETY	Fear of contracting COVID-19; Impacts from contracting COVID-19; increased economic and social stressors
LOSS / TRAUMA	Losing family, friends, co-workers, neighbors too soon; individual and collective trauma
SOCIAL	Especially acute for children and older adults
RETURN TO USE / OVERDOSE	Spike in overdose deaths and return to use in first year of pandemic

### COVID-19 PANDEMIC IMPACTS -> BEHAVIORAL HEALTH

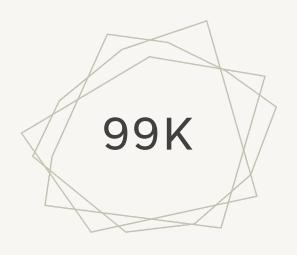
### INCREASE IN SUBSTANCE USE DURING COVID-19 PANDEMIC

ACCORDING TO NIDA/NIH, DATA HAS SHOWN THAT THERE HAVE BEEN INCREASES IN MANY KINDS OF DRUG USE SINCE MARCH 2020.

NIDA/NIH reports increases in the number of positive drug screens ordered by health care providers and legal system.

These reports shows that positive screens for fentanyl, cocaine, heroine and methamphetamine have all increased from previous years.

### NATIONAL OVERDOSE DEATHS IN FIRST YEAR OF COVID-19 PANDEMIC (2020) ACCORDING TO CDC



PEOPLE DIED AS RESULT OF DRUG OVERDOSE



**INCREASE FROM 2019** 



OF OVERDOSE DEATHS
INVOLVED SYNTHETIC
OPIOIDS

# THE IMPACT OF THE 'GREAT RESIGNATION' ACCORDING TO BUREAU OF LABOR STATISTICS

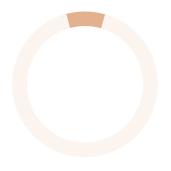
- The healthcare field has lost an estimated 20% of its workforce over the past two years.
- This includes an estimated 30% of nurses.

### BEHAVIORAL HEALTH WORKFORCE LABOR DEFICIT ANALYSIS BY MERCER



800,000

BH workforce in US in 2022



900,000

'Demand level' for BH workforce in US by 2026



400,000

Forecast on how many BH workers will leave occupuation by 2026



510,000

Total projected BH workforce vacancies that will need to be filled by 2026



### BEHAVIORAL HEALTH WORKFORCE TRENDS – RECRUITMENT

#### CHANGES TO EMPLOYEE MARKET

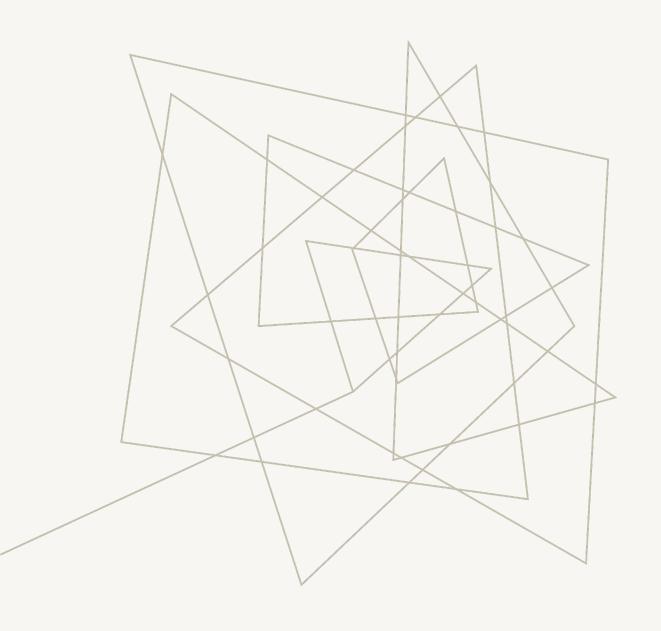
Candidates are accepting positions with higher average total compensation

#### EVERYTHING IS MOVING FASTER

Candidates are accepting positions that have a shorter timeline from interview to offer process

### CANDIDATE PREFERENCES ARE SHIFTING

Candidates may express preferences for telehealth work – versus in-office work



## PROVIDER-LEVEL RETENTION IDEAS



### PROVIDER-LEVEL **RETENTION** IDEA #1: COMPENSATION MATTERS

#### Salary

Is salary competitive and current relative to market?

Shift / Community-Based differential?
In-Office Differential?

#### **Benefits**

Employee cost-share for healthcare
Employer healthcare coverage & networks
Employer Retirement Contribution Levels

#### Paid Time-Off

How generous are PTO benefits?

When was they last evaluated relative to market?

Are long-term PTO benefits possible (e.g. sabbatical?)

### Additional Compensation

**Annual Bonus?** 

Cost of Living Increase?

Wellness Reimbursement?

### PROVIDER-LEVEL **RETENTION** IDEA #2: BALANCE; FLEXIBILITY; AND BOUNDARIES

#### **Work-Life Balance**

Can employees realistically use PTO?

Are alternative work schedules possible?

### **Flexibility**

Is a later start/end time possible to accommodate employee needs?

Perm. or temp. flexibility during workday for appts. to support employee wellness or family needs?

### **Ongoing Employee Development**

Prioritize intentional onboarding with an emphasis on relationships; systems; and support

Identify targeted trainings to help employees feel competent and support learning more in areas of knowledge gaps

#### Time Outside of Work

Review after-work-hours expectations (e.g. crisis coverage; calls)

Consider how 'always on' mentality is unintentionally reinforced (e.g. texts; emails after working hours or on days off)

### PROVIDER-LEVEL **RETENTION** IDEA #3: GO FURTHER WITH YOUR HR DATA

#### **Review Data on Turnover**

Review at every credential type – if possible, at five-year; three-year; one-year and 6 mo. intervals

Pay special attention to the last 6 mo.

Are specific positions turning over at higher/lower levels than others?

#### **Review Exit Interview Data**

What are the themes in why employees are leaving?

How do those themes intersect with your action plan to address retention?

Do the themes change your org. priorities with retention efforts?

#### **Review Current Exit Interview Questions**

Are you getting information that speaks to critical areas such as:

1. Compensation / Benefits 2. Workload 3. Org. Culture 4. EDI

## PROVIDER-LEVEL **RETENTION** IDEA #4: ENGAGE, ENCOURAGE, AND ADAPT TO FEEDBACK

- 1. Understand employee engagement drivers
- 2. Find new ways to offer recognition to individuals and to teams
  - 3. Embrace organizational 'culture of feedback'

### YOUR RETENTION IDEAS: MANAGING WORKLOAD

### WHAT IDEA(S) HAVE BEEN THE BIGGEST 'DIFFERENCE MAKER' FOR MANAGING WORKLOADS IN YOUR SETTING?

TWO WAYS TO PARTICIPATE:

CLICK ON THE LINK IN THE CHAT BOX

SCAN THE QR CODE WITH SMARTPHONE CAMERA AND CLICK ON WEB LINK

https://www.menti.com/rrtugs6j9b

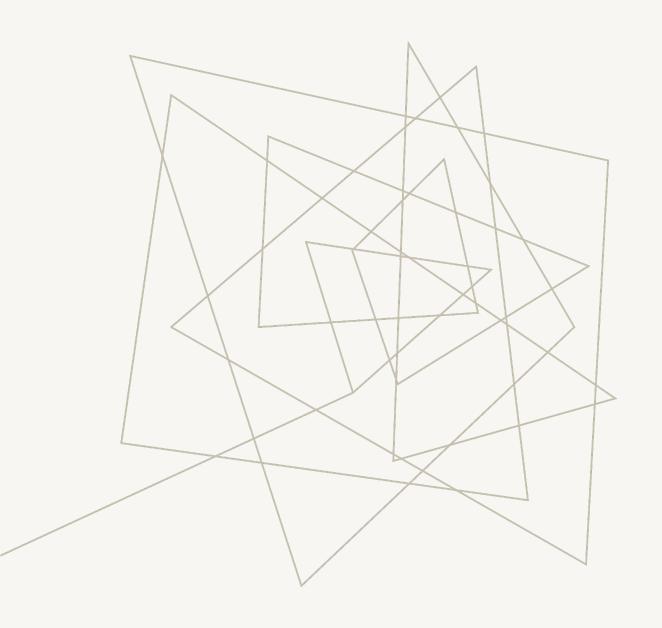




Go to www.menti.com and use the code 68 96 14 1

### What idea(s) have been the biggest 'difference maker' for managing workloads in your setting?

Mentimeter



## PROVIDER-LEVEL RECRUITMENT IDEAS

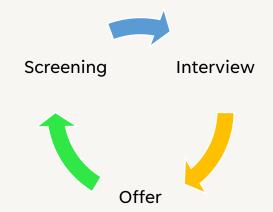


### PROVIDER-LEVEL **RECRUITMENT** IDEA #1: GO FURTHER W/ HR DATA AND PROCESSES

### Change the 'Cycle Time'

How what is the time between:

- 1. Application screening
- 2. Interview scheduling/process
  - 3. Offer stage



#### Track the Delta

- How far apart is organization on declined offers?
- This is valuable data to help quantify how the local market has changed
- Are there factors other than compensation that are causing candidates to decline offers (e.g. schedule; lack of affordable housing)?

### PROVIDER-LEVEL **RECRUITMENT** IDEA #2: ADDITIONAL MARKETING RE: JOB INCENTIVES

#### Loan Repayment

NHSC Loan Repayment Program (HRSA) awards between \$50,000 – \$100,000 in exchange for a two-year commitment to provide behavioral health services at approved sites

Individual states may also have programs with different eligibility criteria from the HRSA program.

### **Licensure Supervision**

Does your organization offer licensure supervision toward CADC, LCSW, LPC?

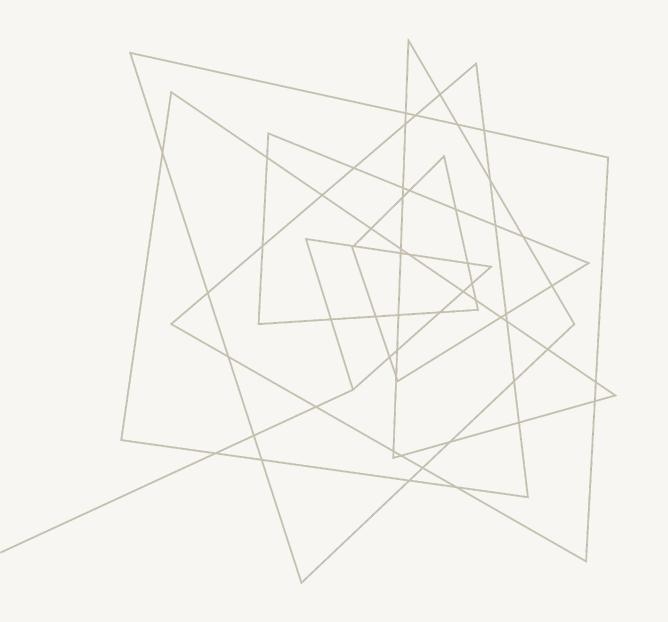
#### **Tuition Assistance**

This is an employer-paid benefit where an employers pays all or part of the costs of an employee's cost to attend college or university classes.

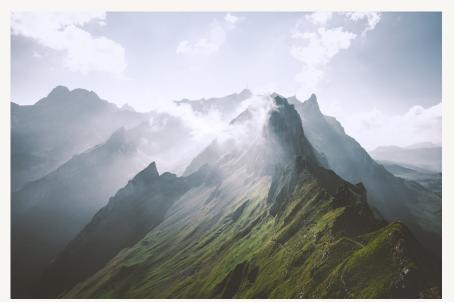
#### Other 'Perks'

Wellness reimbursement

Pathways for career growth and development



# SYSTEM-LEVEL RECRUITMENT AND RETENTION IDEAS



### SYSTEM-LEVEL **RETENTION** IDEA #1 THIRD-PARTY WELLNESS SUPPORT ORGANIZATIONS

#### Survey Leadership & Staff

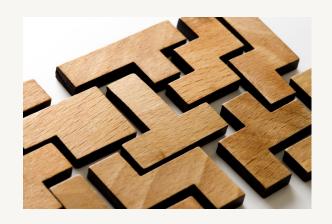
- Leadership survey on current strategies and organizational emphasis on employee well-being
  - Anonymous survey for employees on well-being

### Offer Recommendations to Agency

- Additional training for leadership
- Strategies to sustain intervention at organizational-level

### **Deliver Targeted Supports**

- Discuss secondary stress
- Recognize and address burnout
- Bring mindfulness into practice



### SYSTEM-LEVEL **RECRUITMENT** IDEA #1 THIRD-PARTY RECRUITING FIRM(S)

### **Benefits of Third-Party Firms**

- 1. Local and National third-party recruiters can help provider networks recruit for highpriority vacancies
  - 2. Using recruitment firms to support hard-to fill vacancies, can help 'buy back' organization HR bandwidth for recruiting for other vacancies

#### **Local Firms**

Local firms often understand local dynamics and can have more data on local market trends, such as compensation

Fee structures often function as a fixed perrecruitment fee (can be lower-cost)

#### **National Firms**

National firms may have access to networks which support out of area / out of state recruitments

Fee structures often function as a smaller percentage of one year of annual salary (can be higher-cost)

### SYSTEM-LEVEL **RECRUITMENT** IDEA #2: UNDERSTAND THE PIPELINE & TREND THE DATA

### **Understand the Pipeline**

How many graduates are expected from local / state universities with related degrees?

How strong are the connections between internship/practicum programs and community organizations?



#### **Advocate for Better Data**

Can your state aggregate workforce vacancies by credential type and trend over time?

Can your state licensing entities produce reports on the number of retirements?

Can your state licensing entities produce reports on the number of new licensure applicants and number of out of state applicants and trend this information?

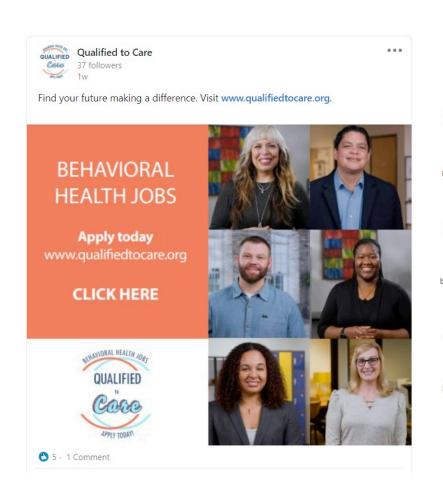
### SYSTEM-LEVEL **RECRUITMENT** IDEA #3: WORKFORCE MEDIA CAMPAIGN

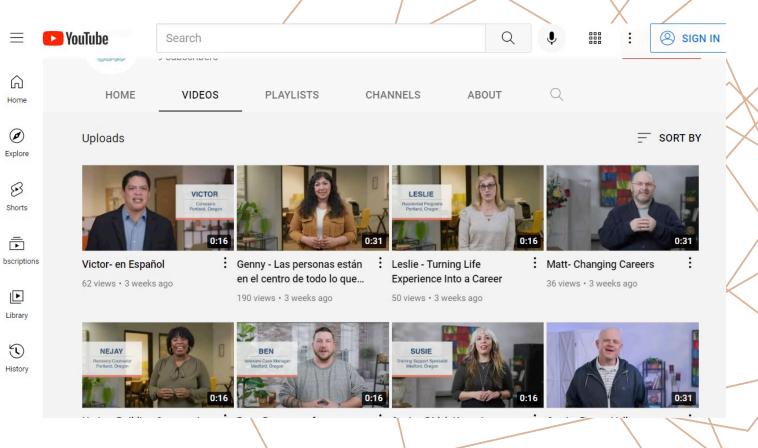
### What is a workforce media campaign?

- Content is created several different kinds of media outlets, including radio, video ads for social media, and streaming television.
- The content focuses on workforce recruitment by showcasing actual behavioral healthcare staff and why they value about working in Behavioral Healthcare and their journey to get there.
  - Can also include information toolkit for providers on social media and job posting best practices.



### QUALIFIED TO CARE CAMPAIGN: LINKEDIN & YOUTUBE





### QUALIFIED TO CARE CAMPAIGN - EXAMPLE VIDEO #1



### QUALIFIED TO CARE CAMPAIGN - EXAMPLE VIDEO #2



## ADDITIONAL SYSTEM-LEVEL WORKFORCE SUPPORT IDEA: FLEXIBLE FUNDING FOR ORGANIZATIONS

#### **Relocation Assistance**

One-time assistance available to new employees moving from outof-state or from out of your region

### **Short-Term Housing Assistance**

Assistance with housing costs for short-term to assist new or existing staff for whom local housing may be a barrier to accepting or staying in a position

#### **Retention Bonus**

Paid retroactively to recognize work done throughout the pandemic

Paid as an advance if employees make a term-of-service commitment

### Sign-On Bonus

One-time bonus for new employees (can include term of service agreement)



**DISCUSSION** 

Q&A

REFLECTIONS



### REFERENCES - 1

CDC report on overdose stats during COVID-19:

<u>Products - Vital Statistics Rapid Release - Provisional Drug Overdose Data (cdc.gov)</u>

HRSA Loan Repayment Program Information:

NHSC Loan Repayment Programs: One Application, Three Programs | NHSC (hrsa.gov)

Mercer Whitepaper on Healthcare Labor Shortage:

us-2021-healthcare-labor-market-whitepaper.pdf (mercer.us)

Recruiting and Retaining Behavioral Health Workers in Rural America: A Toolkit for Action

Recruitment-and-Retention-of-BH-Providers-Toolkit-2.21.2020-.pdf (chrt.org)

State of Oregon Report on Recruitment/Retention:

https://www.oregon.gov/oha/HPA/HP-HCW/Documents/Recruitment-Retention-Recs-%20Oregon-BH%20Workforce-April-2019.pdf



### REFERENCES - 2

Wainwright JJ, Mikre M, Whitley P, et al. Analysis of drug test results before and after the US declaration of a national emergency concerning the COVID-19 outbreak. *JAMA*. 2020;324(16):1674-1677. doi:10.1001/jama.2020.17694

Volkow ND, Blanco C. Research on substance use disorders during the COVID-19 pandemic [published online ahead of print, 2021 Apr 8]. *J Subst Abuse Treat*. 2021;129:108385. doi:10.1016/j.jsat.2021.10838





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