



Partnership in Action: A Collective Impact Approach to Implementing Workforce Solutions

November 7, 2023

1:00pm PT / 2:00pm MT / 3:00pm CT / 4:00pm ET

Welcome! We will get started momentarily.

Please let us know who you are and where you are from in the chat box
(click the chat icon at the bottom of your screen).

Housekeeping

- We want to hear from you! Share your **questions, comments** and “**ah-ha’s**” via the **chat box**
- Please remain on **mute** throughout the presentation
- If you have a question, please use the **raise hand** feature under **reactions**
- A **recording and slides** will be available within 24 hours - We’ll email you

Welcome



HEALTHY MINDS • STRONG COMMUNITIES

- ***Poll:*** What type of organization do you represent today?
- ***In Chat:*** What are the top workforce challenges you, your organization, or your community are facing?

The Workforce Crisis is Now a Workforce Emergency

THEY ARE WORKING EXTRA HARD, OVER TIME



WHAT KEEPS THEM STRESSED?



THERE IS A SERIOUS MENTAL HEALTH WORKFORCE SHORTAGE

In states with the lowest workforce, there's only **1 mental health professional per 1,000 individuals**



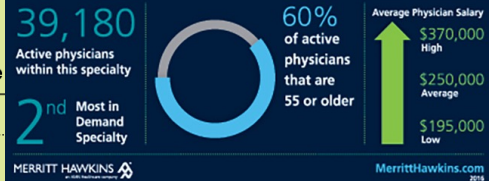
This includes psychiatrists, psychologists, social workers, counselors and psychiatric nurses **COMBINED**.

The growing shortage of behavioral health practitioners

	Practicing specialists	Demand	Shortage
2013	45,580	56,980	-11,400
2025	45,210	60,610	-15,400

Source: HHS

SPOTLIGHT • Psychiatry



THE STATE OF BEHAVIORAL HEALTH CARE IN NORTH CAROLINA

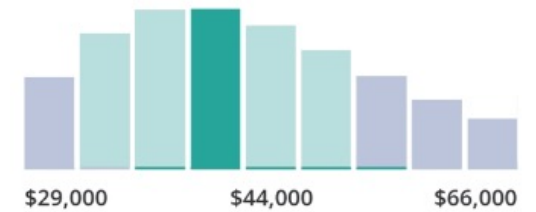
In North Carolina, there is a severe shortage of professionals to treat both adults and children with behavioral health disorders



North Carolina ranks **38th** in the United States in access to mental health care.

BEHAVIORAL HEALTH SPECIALIST

Average Salary **\$44,000** yearly
\$21.54 hourly

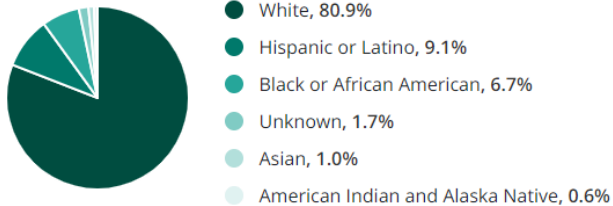


CHRONIC EMOTIONAL STRESS IN HEALTH CARE STAFF...

- SECONDARY TRAUMATIC STRESS**, also known as compassion fatigue, is emotional duress that mimics post-traumatic stress disorder caused by hearing about another person's firsthand traumatic experiences.
- VICARIOUS TRAUMATIZATION** is the cumulative effect of consistent exposure to hearing about other people's traumatic experiences.
- Indirect exposure to trauma can contribute to **BURNOUT**, a form of physical, mental, and emotional exhaustion caused by chronic work-related stress.

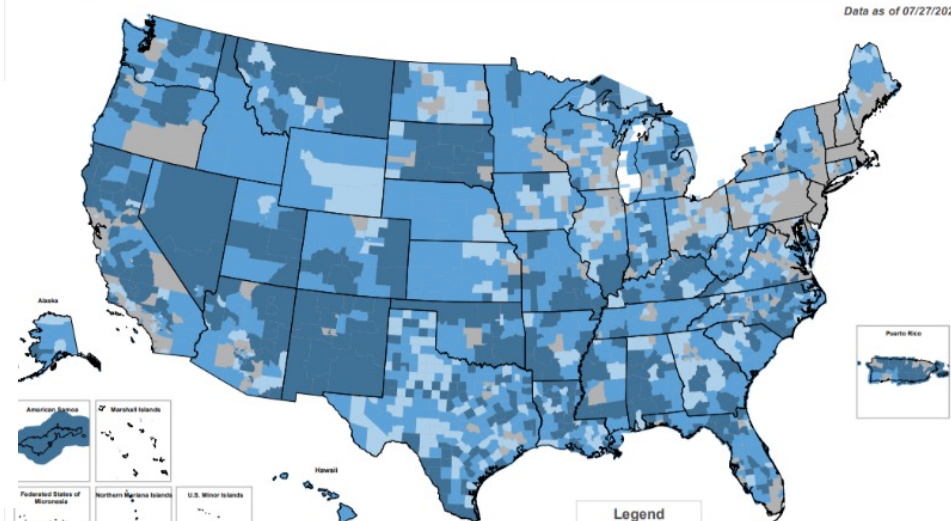
makes up 80.9% of all behavioral health specialists. Comparatively, there are 9.1% of the Hispanic or Latino ethnicity and 6.7% of the Black or African American ethnicity.

Job Title ▾



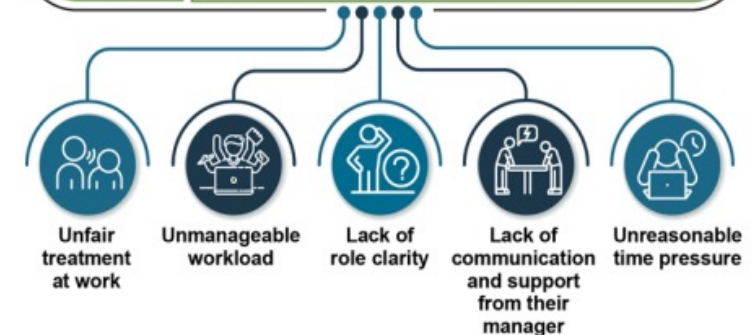
\$39 BILLION Spent by health systems, hospitals, and post-acute care providers each year on non-clinical regulatory requirements

HRSA Health Professional Shortage Areas (HPSA) - Mental Health

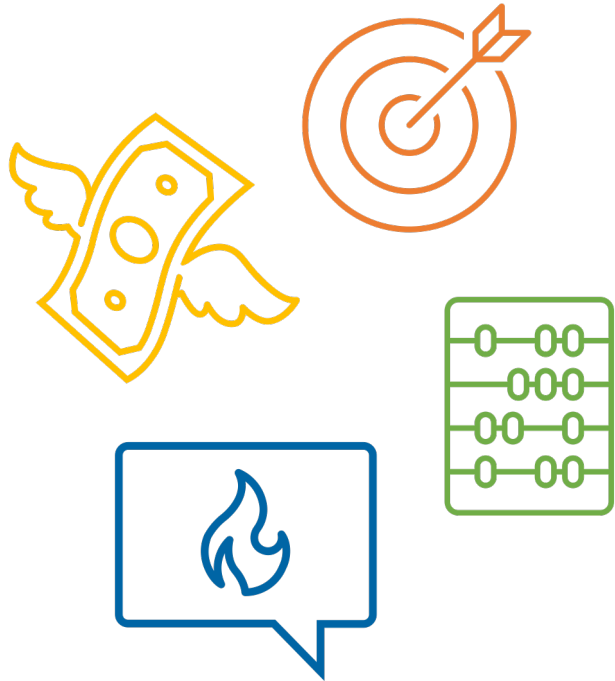


TOP 5 FACTORS

Employees in a 2018 poll identified five organizational factors of burnout:



Historical Efforts



- » The Annapolis Coalition
- » SAMHSA workforce initiatives
- » International Initiative on Mental Health Leadership (IIMHL)
- » Many others

What's Not Working?



**Expansion of the
Workforce**



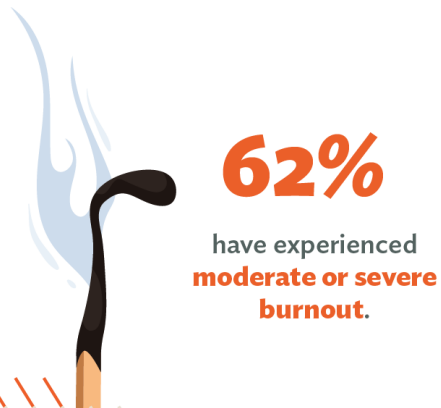
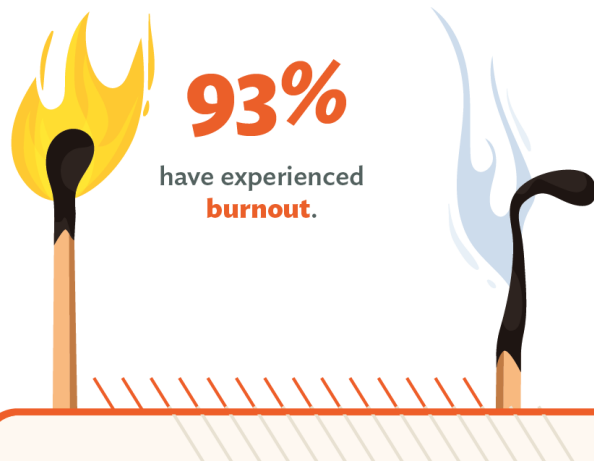
**Paperwork & Admin
Burden**



Team Based Care

- » Recommendations are often made for others (e.g., policymakers or regulators)
- » No single accountable entity to ensure recommendations move forward
- » Need for cross-sector agreement on strategies and then cross-sector implementation
- » Scale of the challenge can create overwhelm and inertia to address big gaps

Understanding Our Current State: Survey



48%
say the impacts of
workforce shortages
have caused them to
consider **other
employment options.**

83%

worry that **shortages in the mental
health and substance use treatment
workforce** will **negatively impact
society** as a whole.

1/3

OF THE WORKFORCE
report spending most of
their time on
administrative tasks.



68%

of those who provide care to
patients say the amount of time
spent on administrative tasks
**takes away from time they could
be directly supporting clients.**

**Workforce
Survey
Findings,
2023**

The research was conducted online within the U.S. by The Harris Poll on behalf of the National Council for Mental Wellbeing among 750 behavioral health employees (defined as adults age 18+ who work in the mental health and substance use treatment industry). The survey was conducted between Feb. 3-19, 2023. Data are weighted where necessary to align with their actual proportions in the population. For method details please contact: WilliamG@TheNationalCouncil.org

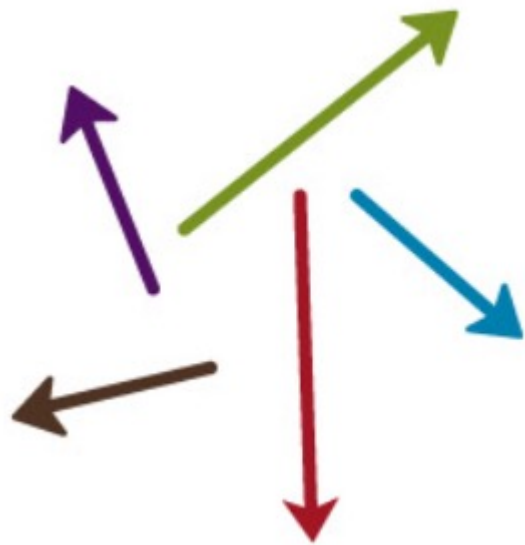
Understanding Our Current State: Policy Briefs

1. Policy, Financial Strategies, and Regulatory Waivers

2. Clinical Care Delivery Models and Digital Solutions

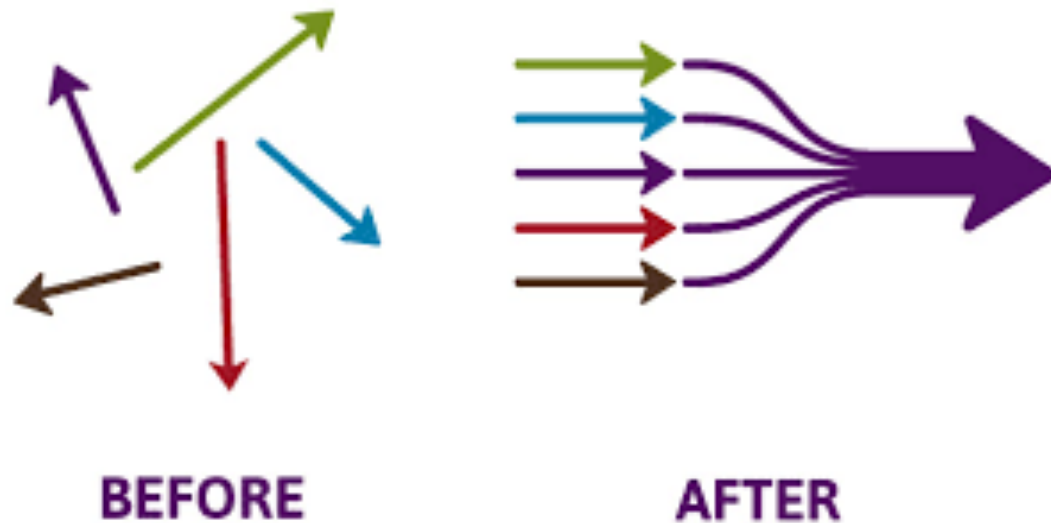
3. Strategies to address Diversity, Equity, and Inclusion

Understanding Our Current State: Addressing the Workforce Crisis



- » Multiple convenings on workforce crisis and identification of challenges
- » Multiple sets of recommendations for short-term and long-term solutions
- » Organizations working on specific areas or efforts
- » In some cases, there is limited action occurring post recommendation setting

Potential Approach to Drive Action



Moving to ACTION

- » Determine shared priorities
- » Engage organizations in working together
- » Leverage various strengths across cross sector partners
- » Reach more areas of work through collective effort

Using Collective Impact



Common Agenda

- Shared vision for change
- Common understanding of the problems

Shared Measurement

- Collecting data and measuring results
- Shared accountability

Mutually Reinforcing Activities

- Differentiated approaches
- Coordination through joint plan of action

Continuous Communication

- Consistent and open communication
- Focus on building trust

Backbone support

- Lead organization with role of support
- Resources and skills to convene and coordinate participating organizations

Draft Framework



REGULATORY CHANGES PRIORITIES

		Key Implementers					Potential Risks
Key		Regulators	States, Counties	Payers	Providers	Individuals and Families	
Now	Next	Future	Partner activities				
+		Lead Implementer					
REGULATORY CHANGES							
Recommendations	Sample Activities						
1. Work with SAMHSA and CMS to minimize intake requirements that reduce access to care	<i>Create parity of front door expectations for behavioral health with health care. Refine standard requirements for psychosocial assessment at intake to allow for more person centered approaches, symptom reduction and engagement.</i>	✓+	✓+	✓	✓	✓	<ul style="list-style-type: none"> States don't adopt changes Payers or providers maintain status quo for desire to have data.
2. Work with CMS to remove requirement for separate service plan for BH and create parity in documentation	<i>Remove separate service planning requirement for specialty behavioral health and allow for behavioral health to document a plan and next steps similarly to other health care settings (such as SOAP notes which results in more robust updates to the service plan at each session.</i>	✓+	✓+	✓	✓	✓+	<ul style="list-style-type: none"> Training of providers to adapt practice to routine updates of service planning rather than periodic Too much time is taken in design and change to impact workforce (waivers or pilots could be a solution) Information regarding changes is not spread quickly
3. Work with accrediting organizations (CARF, Joint Commission) to adapt intake requirements	<i>Parity of BH entrance to care is paramount in reducing administrative burden AND improving quality and experience of care. Initial intake aimed at symptom reduction versus history gathering can be a win for providers and patients.</i>	✓+	✓+	✓	✓	✓+	

- ***Poll:*** Of the six priorities, which are you currently working on?
- ***In Chat:*** Please expand on your response to this poll by sharing any specifics about what you are working on.

The Center for Workforce Solutions will...

- » Develop a steering committee to organize workforce efforts
- » Facilitate process for identifying shared priorities, shared measurement of efforts
- » Launch an ECHO learning collaborative with partners
- » Organize and support subcommittees focused on shared workforce priorities
- » Provide communication and connection between partners
- » Develop a hub of resources on website to highlight innovative and scalable solutions
- » Identify and seek funding to support a long-term collective effort



The Center for Workforce Solutions ECHO: Addressing the Workforce Crisis

- Designed around case-based learning and mentorship, ECHO sessions engage participants from across the country in peer-to-peer learning discussions.
 - The first ECHO will run from November 2023 - July 2024

Participant Learning Objectives

- Deepen understanding of the workforce crisis in the six core areas.
- Identify and discuss scalable solutions to address the current workforce shortage within their communities.
- Begin to implement innovative solutions and improvements.
- Gather useful information, guidance, and support from other participating organizations.

Participants

- This ECHO will bring together 35 diverse organizations in teams of 2-5 individuals:
- mental health and substance use provider organizations,
 - state associations and
 - other regional and national experts.

The Center for Workforce Solutions Website

Home / Our Work / Programs & Initiatives

The Center for Workforce Solutions

Revolutionizing the mental health and substance use treatment workforce.



The Center for Workforce Solutions

About Us

Implement

Engage

Champion

Contact Us

The mental health and substance use treatment workforce crisis is a healthcare crisis. Organizations are facing challenges with recruitment and retention, burnout and sustainable approaches to enhancing the workforce to meet the growing demand for mental health and substance use services. Developing new strategies to strengthen, diversify and expand the workforce will improve access at a time of historic demand for services.



93%

More than 9 in 10 behavioral health workers



31,000

By 2025, the U.S. will be short about 31,000 full-



88%

American Psychological Association reports that

Engagement and Communication



To stay connected to and/or participate in this collective impact effort, please complete this brief survey:

<https://www.surveymonkey.com/r/CIworkforce>

Let's talk!

- What questions or additional considerations does this conversation raise for you?
- Is there anything missing from the six priority areas?
- What is the low hanging fruit? What can/should be addressed first?

Contact Us



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