



## Lessons in Rural Leadership

### *The Mountain Plains Mental Health Technology Transfer Center (MHTTC) Leadership Academy*

### Executive Summary

The primary goal of the Mountain Plains Mental Health Technology Transfer Center (MHTTC) Leadership Academy is to fortify and nurture existing leaders while also cultivating and preparing emerging leaders within the rural behavioral health workforce. Often, in rural behavioral health organizations, leaders are not selected through rigorous candidate searches and interviews but are appointed through what can be described as “battlefield commissions”, stepping into their roles due to circumstances such as a predecessor leaving the position. Consequently, individuals are promoted into positions with responsibilities and challenges, such as supervising former peers and friends, for which they have received no foundational leadership training to draw from. Maneuvering through these complexities poses a formidable task for seasoned leaders, and new leaders often lack the experience and network needed to develop and implement a plan to address or navigate the challenges.

Newly appointed leaders in rural public health find themselves compelled to operate with a reduced workforce, propelling them into the challenging yet frequently encountered scenario of aligning their limited resources with the substantial demands of the community. These needs encompass everything from inadequate and nonexistent public transportation to the absence of Level 1 or Level II trauma centers within their service area, along with insufficient infrastructure to support comprehensive systems of care.

To succeed in this setting, organizations need adaptable and forward-thinking leaders. Currently, there does not exist a specialized leadership program tailored to the unique needs of individual rural behavioral health leaders. The MHTTC Leadership Academy is focused on establishing a foundational skill set in leaders, enabling them to excel and make enduring commitments to the communities and organizations they serve. Additionally, the Leadership Academy program offers ongoing mentorship to academy participants. The mentoring experience intends to continue leadership maturation by advancing their knowledge base and providing them with the tools to become proficient and effective leaders.

The Leadership Academy timeline included in-person events and a pivot to a virtual event during the pandemic. The different formats reflect a response to external factors and an evolution in understanding the most effective way to support rural leaders in their nuanced roles. In retrospect, the Academy curriculum evolved organically based on feedback from participants. The curriculum moved from presenting a big-picture perspective on rural leadership to delivering an individual model of leadership that participants could customize and implement immediately. For example, at the inaugural Leadership Academy in 2019, participants learned about several successful leadership programs/models that demonstrated ways to alleviate some of the challenges found in many rural communities. These models included presentations by the Hogg Foundation for Mental Health, Alaska Behavioral Health Aides, and the Australian Orange Declaration on rural and remote mental health. The presentations provided participants with models that they could adapt to their own communities. During subsequent discussions with attendees, it became apparent that leaders in the field lacked basic leadership skills to contend with their daily internal and external challenges, much less adapt these models to their situation.

To adequately support and build rural behavioral healthcare leaders we determined that the curriculum needed to acknowledge and address the internal and external challenges participants faced, and to acknowledge that there were no easy solutions to those challenges. Some of the key internal challenges MHTTC Leadership Academy participants shared, included,

1. Recruiting and Retaining Staff
2. Managing with Limited Budgets
3. Having to Lead and Perform Clinical Duties Due to Shortage of Qualified Personnel
4. Certification and Compliance Policy and Procedures
5. Leading Change

While rural behavioral healthcare internal challenges are like the challenges encountered by urban providers, these challenges are often exacerbated by local conditions that many urban providers do not have to factor into their daily routines. These conditions included,

1. Lack of Access to Providers
2. Insurance Coverage
3. Transportation
4. Broadband
5. Housing
6. Food Insecurity

Although the challenges frequently proved to be daunting, numerous participants of the Leadership Academy were equally prompt in expressing their strong attachment to their current place of residence and employment. They held a deep sense of connection to the land and took great pride in their communities, staff, and organizations. Their passion was evident in their continuous efforts to seek ways to enhance the well-being of all. Furthermore, they were quick to affirm that there was no training that adequately prepared them for the significant responsibility of leadership.

Keeping these challenges in mind and recognizing that they will continue to be present for the foreseeable future, the Mountain Plains Leadership Academy team designed a curriculum to address the basic attributes, knowledge, and behaviors associated with effective leadership in rural environments. The content is evidence-based (see list of resources on page 21).

The curriculum is based on the adult learning model using known best practices, theories, and methods; bringing them “alive” through personal experiences and/or real-life examples; concluding with small group discussions and exercises that reinforce the stated learning objective for each module.

The first module introduces the attendees to interpersonal (IP) style and its impact on the way they are perceived by others, and how they perceive those with whom they work and interact. It includes an exercise that provides each person with the identification of her/his IP. This sets the stage for all other modules that include Introduction to Leadership; Leadership Skills and Competencies; Situational Leadership; Creating a Positive Environment; Building Strong Teams; Communications; Facilitation Skills and Techniques; Leading Organizational Change.

Individual Mentoring Sessions provide each attendee a one-on-one relationship with a seasoned practitioner of leadership and personalizes the learning experience. The assigned mentor is made available to the attendee for follow-up monthly sessions intended to facilitate professional and personal growth. This part of the curriculum has received high praise from those who have opted to use it consistently.

A third component of the Academy is the recurring “Coffee Chats”. These are quarterly virtual sessions incorporating a guest speaker and featuring contemporary topics such as Developing Personal Resilience thru Self-care, Trauma-Informed Leadership, Scenes of Leadership (a training that used movie clips to identify different types of leadership styles)

and other leadership topics. These sessions allow for past attendees to stay connected and continue learning and adapting their leadership skills to their changing environments.

As the Leadership Academy moves into its fifth year, we continue to pursue excellence for our rural behavioral healthcare leaders and workforce. Based on participant feedback and sustained levels of engagement with the year-round activities that include coaching and mentoring, and the group coffee chats, we are expanding our general leadership curriculum to include an Individual Development Plan (IDP) for Leadership Academy participants. We believe these plans will provide participants with a comprehensive set of leadership skills that will accelerate their leadership journey, enabling them to confidently navigate their unique challenges while simultaneously strengthening their organizations and communities.

On the next page is an infographic that highlights key insights from the first four years of the Leadership Academy. Following the infographic is a brief compilation of lessons learned, including understanding the biggest challenges rural behavioral healthcare leaders face, and successful strategies used at the Leadership Academy.

# BUILDING RURAL LEADERS

## Mountain Plains MHTTC Leadership Academy

*Leadership is an individual's innate response to develop, engage, and inspire others to impact and transform an organization thru the development and use of self-awareness.*

### PURPOSE

The purpose of the Mountain Plains MHTTC Leadership Academy is to strengthen and support the rural behavioral health workforce, by establishing a program that connects and nurtures new and emerging leaders.

1

2

### TIMELINE - 2019 - 2023

- 3 In-Person Events
- 1 Virtual Event (COVID accomodation)
- Next In-Person Academy - April 2024

3

### ATTENDEES

- All 6 Mountain Plains MHTTC States (CO, MT, ND, SD, UT & WY) Represented
- New & Emerging Leaders
- Empowering Change in Rural Leadership

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### LESSONS LEARNED

- In-Person Event = Deeper Engagement
- Identification Of Individual Leadership Style Critical For Successful Implementation
- Mentoring "Pods" Accelerate Connection

5

### IMPACT

- Increased Job Confidence & Satisfaction
- Renewed Commitment To Organization Mission & Vision
- Grassroots Network = New Resources
- On-Going Training = Enhanced Leadership Skills

6

### NEXT STEPS

- Application Revision for 2024 - Emphasis On Long-Term Engagement
- Curriculum Update - Incorporate Individual Development Plan For Participants
- Consider Adding Year 2 To The Program

[www.mountainplainsmhttc](http://www.mountainplainsmhttc)



Mountain Plains  
MHTTC

MHTTC

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

**SAMHSA**  
Substance Abuse and Mental Health  
Services Administration

# Challenges

Leadership in rural communities faces challenges that can be historical and are often long-standing, with no quick solution available. Understanding some of the components of these challenges has been critical to our success in establishing a program that creates innovative, resilient leaders.

## A. Resources and Access to Resources

*“In rural communities, you are linking people to people. In urban communities, you are linking people to resources – systems of care.” Dennis Mohatt, Co-Director Mountain Plains MHTTC*

Improving access to healthcare is a significant concern for leaders in rural public health. The community faces financial challenges that often overshadow an agency's efforts to deliver essential services. Given the advancements in medicine and the substantial departure of public health workers during and after the COVID-19 pandemic, the need to establish a comprehensive training system for current leaders in underserved rural areas has never been more crucial. Many rural areas lack critical access hospitals, emphasizing the responsibility of rural healthcare leaders to cultivate partnerships with various agencies that can provide assistance when needed. The ability to build and leverage such networks is a learned skill, and unfortunately, individuals assuming leadership roles in rural areas frequently haven't had the opportunity to develop this crucial aspect of their professional toolkit.

The issue of trust is of major concern in rural areas, trust for programs and services, and trust in their leaders. According to a study conducted by the NIH, it was concluded that [i]” From a clinical perspective, patients reported more beneficial health behaviors, less symptoms and higher quality of life and to be more satisfied with treatment when they had higher trust in their health care professional. There was evidence for upward bias in the summarized results. Prospective studies are required to deepen our understanding of the complex interplay between trust and health outcomes.

Leaders in rural areas often find themselves serving and even managing not just professional relationships, but also family members and friends who are considered family. The boundaries between personal and professional spheres are frequently blurred for them. It becomes crucial to provide these leaders with education in the art and skill, as perceived by seasoned leaders, of navigating and distinguishing between these two worlds. The goal is to enable them to maintain personal integrity and uphold professional authority, even during complex interpersonal dynamics.

Leadership is seldom a solitary endeavor. Throughout history, even the most exceptional leaders have surrounded themselves with teams of advisors, drawing ideas and insights from diverse perspectives. Just like facing any challenge, having the appropriate tools and a supportive team doesn't guarantee success, but it significantly enhances the probability of success compared to navigating the journey alone.

The Leadership Academy endeavors to bridge the gap for rural leaders by providing ongoing mentorship and training opportunities.

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[i] <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5295692/>

## B. Staffing

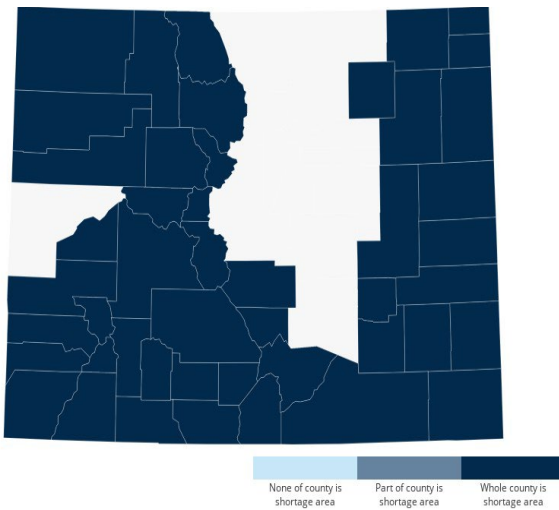
*“I have funding for 18 full-time clinicians, I have 7 clinicians that I have to make sure to meet the daily workload demands for 18.”*

*2020 Leadership Academy Participant*

Rural settings offer a variety of benefits and challenges, all of which can happen in a single day, depending on the geographic location. Clinical locations, educational institutions, local municipalities, and hospitals contend with continuous staffing challenges as the behavioral healthcare employment landscape becomes increasingly competitive.

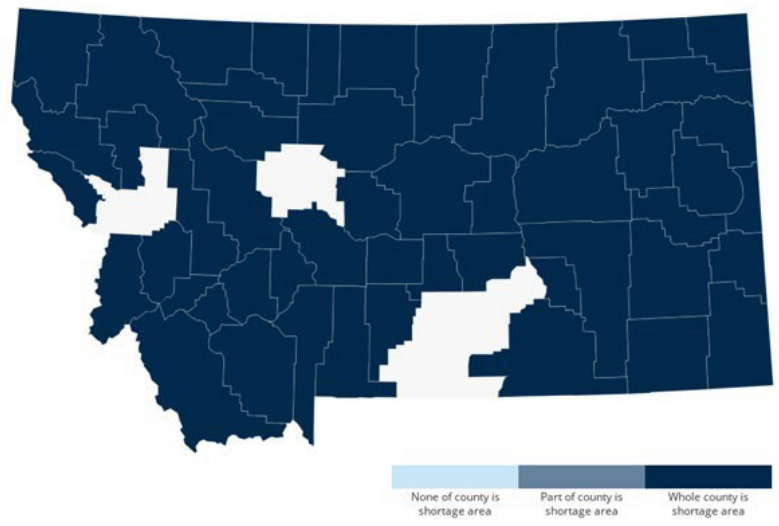
The maps below show the shortage of Mental Health Professionals in each of the HHS Region 8 states [ii] (Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming). They provide a visual understanding of the staffing challenges confronting rural communities.

Colorado



Source: [data.hrsa.gov](https://data.hrsa.gov), May 2023

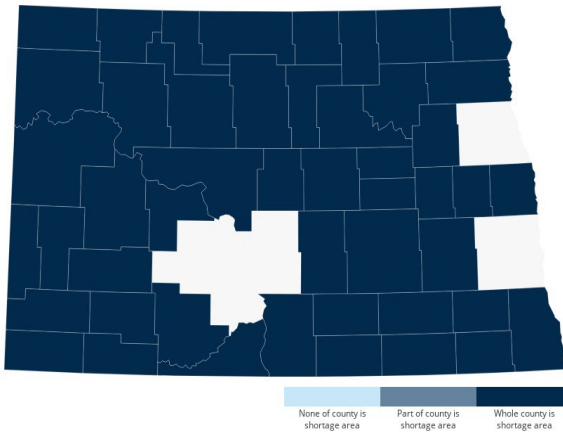
Montana



Source: [data.hrsa.gov](https://data.hrsa.gov), May 2023

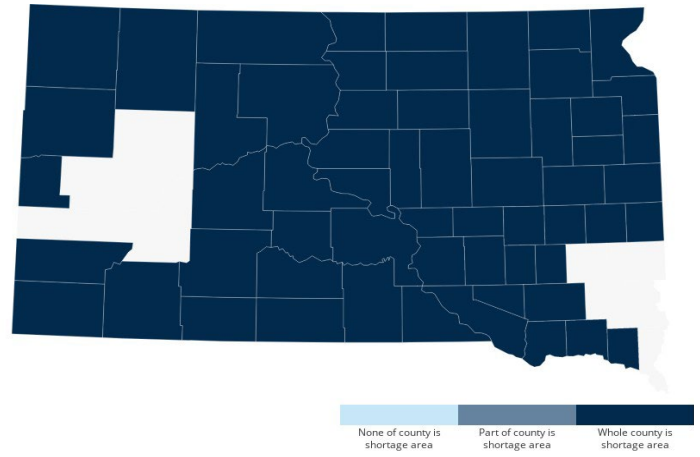


## North Dakota



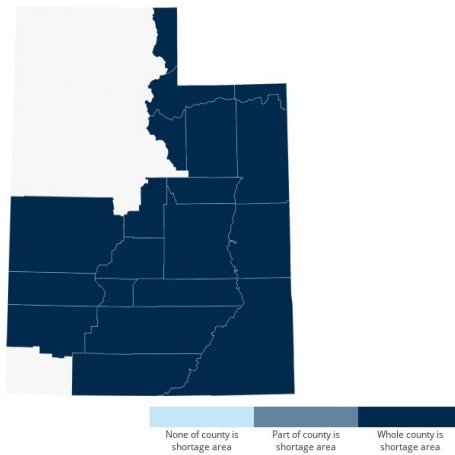
Source: [data.HRSA.gov](https://data.HRSA.gov), May 2022

## South Dakota



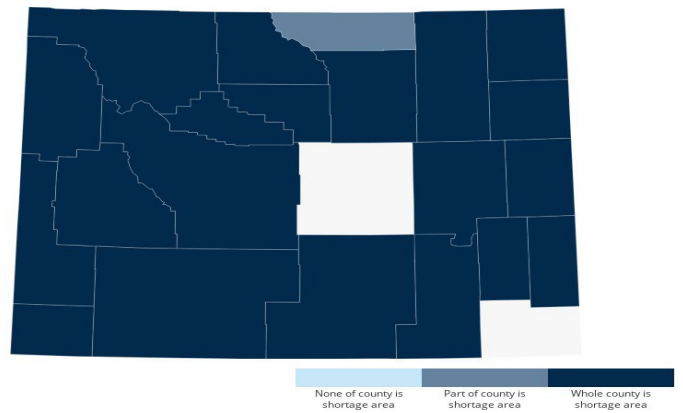
Source: [data.HRSA.gov](https://data.HRSA.gov), May 2023

## Utah



Source: [data.HRSA.gov](https://data.HRSA.gov), May 2023

## Wyoming



Source: [data.HRSA.gov](https://data.HRSA.gov), May 2023

In addition to chronic workforce shortages, institutions in smaller communities do not have the resources needed to compete with their urban and suburban counterparts because of the inverse relationship between population density and billing protocol. The number of individuals served by a rural institution is often disproportionate to the funding recouped, resulting in less available compensation for staff. In addition to less funding, workforce shortages often cause existing staff to assume responsibility for a wide variety of duties typically outside the scope of their position, and these are duties that staff may not have had any experience with within an urban or suburban community.

To help combat the workforce shortages, many organizations in the Mountain West conduct general nationwide searches for open positions without including more refined search criteria required for administrative and leadership positions. This can be an effective short-term strategy, but it can also create issues for the organization in the long term if licensure requirements, academic requirements, and a general lack of leadership or executive experience aren't initially required or considered.

For individuals who choose to relocate to a rural area, due to being recruited or as part of a workforce development initiative or strategy, there are barriers to overcome that they may not have understood before the relocation. These barriers include familiarity with a community, name recognition, local bias towards the geographic locations they have migrated from, increased cost of housing with fewer housing options, and competition for resources with landlocked communities that reside intermountain. Rural living has been romanticized recently by television shows like Yellowstone. However, popular television shows seldom capture the day-to-day reality of living in a rural location. Unfamiliarity with rural culture combined with a lack of previously available services (i.e., shopping, restaurants, gyms, or movie theaters) can make the transition difficult. Without access to the amenities, they are used to, people who relocate often struggle to maintain the ideal lifestyle they envisioned or previously experienced. This ultimately results in dissatisfaction with the decision to relocate and creates increased turnover in positions when individuals choose to leave.

Agencies and companies in rural areas also struggle with salary inequity due to many factors outside of their control. State-funded and governmental agencies often are locked into their compensation and wage scales, and it can be difficult to attract appealing candidates to their locations, based on tertiary experiences and amenities. The private industry also creates increased competition for these agencies and distance-reliant companies that utilize remote technology to connect their employees.

The individual who agrees to relocate for a job, may not only have to acquiesce to a lower wage, but their partner or significant other may also struggle to find an equitable position in rural communities where smaller population density typically results in fewer and less diverse employment options. These factors can cause families financial challenges from the beginning of the relocation, creating conflict and additional burdens for the employee.

Stress on current employees to compensate for workforce shortages is a cause of increased burnout within organizations and can often lead to rapid and continuous staff turnover. Different tactical approaches to hiring may need to be explored to combat these challenges including exploring less qualified individuals to fill open positions while providing on-site training. Working with education institutions to fill student intern roles to attract them as candidates to a community and an organization may be a possible way to fill in some staffing shortages. However, this is a long-game approach and can also place increased pressure on established employees who are then needed to train, engage with educational institution requirements, and onboard these interns. Key to establishing a successful internship program, is recognizing that there is a shortage of rental properties and affordable housing options in many rural communities. Establishing housing stipends or affordable housing agreements with the interns before beginning the program is often necessary for success.

Overworking staff, burnout, financial challenges, housing issues, lack of available candidates, and relocation issues have all been tremendously highlighted over the past few years during the COVID-19 timeframe. Ultimately, employers and employees have been expected to increase their roles and responsibilities without increasing their wages, and an indefinite timeline to refill positions can leave employers and employees feeling like there is no light at the end of the tunnel. Resources that have been previously allocated for travel budgets, salary increases to commensurately increased costs of living, and relocation stipends have been replaced with employee wellness approaches without timeframes for longitudinal studies to truly explore their effectiveness.

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[ii] <https://www.ruralhealthinfo.org/data-explorer>

## C. Battlefield Commissions

*“Congratulations, You’ve Just Been Promoted.” 80% of Leadership Academy participants.*

The US Military and major corporations such as Amazon, Chipotle, Paycor, and Marriott provide formal training programs that prepare individuals for promotion and increased responsibility and accountability. In short, there is an investment in people so that they are set up to succeed. Promotion is not a surprise, and because of the advanced preparation, assuming a higher level of responsibility is not a cause for angst or panic. There are plenty of documented lessons learned showing that investing in professional growth leads to better leaders and better organizations. “Battlefield commissions”, or “zapping” as it is often referred to, normally occurs where there is a lack of succession planning, and/or some type of formal training focused on preparing deserving employees for a leadership role.

Most leaders in rural settings become leaders by default often because of the “next person up” process that exists because of what is mentioned above. WICHE Leadership Academy participants, to date, are living examples of recipients of a “battlefield commission”. Complicating the condition of being “zapped” into the role of a leader is that once one assumes a leadership position time rarely allows for training, and there is an expectation of performance that requires the individual to learn by trial and error, on the job and on the move. In many rural facilities, because of short staffing, the individual continues to perform as a clinician while at the same time performing the additional leader tasks. Additionally, in most cases, the newly appointed leader must take that difficult step from being a team member to being the team leader. All of this leads to longer hours, increased stress, and, in some cases, the impetus for seeking employment elsewhere.

## Successes

*“The only quality that can be developed by studious reflection and practice is leadership.”*

*Dwight D. Eisenhower, 34th president of the United States*

The Mountain Plains MHTTC Leadership Academy has evolved its program each year to meet the needs of new and emerging leaders in rural communities. Using feedback from four cohorts, we have established a successful format that includes in-person events, a customized curriculum, and ongoing coaching and mentoring. Participants initially gain a foundation in leadership skills that they continue strengthening through individual coaching and mentoring sessions. The Academy provides a foundation upon which intangible qualities, including, but not limited to, confidence, humility, caring, objectiveness, and judgment are developed or honed. Additionally, strong bonds are established over the course of the 2-day in-person event, resulting in new regional grassroots networks.

### A. In-Person Events

*“This has been such a valuable experience. There is no way my organization could afford to send me to an event or training like this. After attending the Academy, I feel reinvigorated and more confident about myself as a leader.”* 2023 Mountain Plains MHTTC Leadership Academy Participant

As the Mountain Plains MHTTC Leadership Academy evolved, it became apparent that an in-person event yielded superior outcomes for participants over a virtual training program. While the Academy effectively pivoted to a virtual format during the pandemic, the consensus of trainers and participants was that the virtual training did not foster close connections between participants or promote long-term engagement. Attending an in-person event allowed participants to escape from their daily responsibilities while focusing on their personal development and establishing relationships with colleagues.

Planning for the in-person Leadership Academy involves several key strategies that have proven consistently successful for the candidates. These strategies are listed below.

- **Cost:** All costs associated with attending the Leadership Academy are covered. This is especially important for any applicant located in remote and frontier communities. Many rural behavioral health leaders come from small organizations that do not have the budget for leadership training or subsequent travel for their staff. By covering all costs, we can expand our reach.
- **Mentoring Pods:** Are small groups of individuals led by a specific coach/mentor. Each attendee is assigned to a mentoring pod. These small groups are introduced to one another when arriving for the Welcoming Dinner. They sit together at the dinner and work together on the various exercises throughout the 2-day event.

This format promotes early bonding and makes it easier for people to share their experiences.

- **Welcome Dinner:** The dinner functions as a very effective icebreaker and demonstrates the importance of connection and community in the Leadership Academy program. The Leadership Academy is not just a one-stop training experience; it is an experience that aims to foster connection and community in an ongoing effort to support sustained leadership development at the grassroots level.

## **B. Customized Curriculum**

*“I really enjoyed learning about my leadership style. It has helped me develop a broader understanding of how I can be more effective in my organization.”*

*2023 Mountain Plains MHTTC Leadership Academy Participant*

The level of leadership experience from most of the Academy participants necessitated the development of a customized curriculum that has an emphasis on cultivating individual awareness and strengths. This provides participants with an awareness of how their individual leadership style could be most effective.

- As described in the Executive Summary our curriculum is based on an adult learning model whereby a proposition is stated; it is brought to life by a personal story or experience; it is reinforced through table exercises and small group discussions. The objective of WICHE’ Leadership Academy is to cultivate personal confidence and awareness, as well as to identify individual strengths for which one can leverage, and areas where one can improve. The major takeaway of the course is a personal improvement plan (example on pages 24-25).
- There are currently nine modules, and all are evidence based (references are found on page 21). Utilizing a module approach allows for easily modifying the course when deemed necessary. Adding new modules is simplistic, and the only consideration is available time.
- The curriculum addresses the theory and practice of leadership applicable to any organization. It incorporates time-tested practices, procedures, and concepts that have proven to be meaningful and impactful in the development of leaders in a myriad of professions. In short, this course could easily be referred to as “Leadership 101” Designed to increase the knowledge of what a leader should “be”, what a leader should “know”, and what a leader should “do”.

## C. Coaching | Mentoring

*“I consider the time I spend with my coach-mentor to be an investment in myself. Sometimes it’s as simple as just having someone to talk to who understands some of the leadership challenges I’m dealing with.”*     *2023 Mountain Plains MHTTC Leadership Academy Participant*

In the first two years of the Academy, maintaining the momentum and connection established at the Leadership Academy proved challenging. Upon leaving the Academy, participants quickly became engrossed in their day-to-day routines, leaving little time for further training or conversation. In the third year, 1:1 Coaching and Mentoring for participants was initiated. Each participant met with their Coach for an introductory session during the in-person event. Upon leaving the Academy, participants were given an additional two coaching sessions as part of the Leadership Academy program. Very few people continued with the coaching. However, two participants, Josh Spinney, and Lindsey McCarthy, worked with their coach for months.

In 2023, Josh and Lindsey were invited to become part of the Mountain Plains MHTTC Leadership Academy training team. They both accepted and during the Academy gave testimonials about their valuable coaching experience. The idea of mentoring pods was implemented and participant response to continued coaching significantly increased. According to Leadership Academy attendees, some of the benefits of 1:1 coaching include,

1. Having support from someone with leadership experience.
2. Developing a broader perspective.
3. Having someone outside of the organization who listens without pre-conceived notions.
4. Being able to share challenges and frustrations with someone who is on my “Team”.
5. Brainstorming solutions.
6. Goal-setting – both personal and professional.
7. Having a confidential and safe “space” to vent and/or share challenges without the fear of those conversations being shared further.

## D. Josh and Lindsey's Stories

Josh's story:

I was promoted to a clinical supervisory role of a 16-bed coed co-occurring residential treatment program with little notice to prepare due to a leadership change that occurred within the organization I work with. Having to split time between my position as a Counselor in an outpatient setting and now a Clinical Supervisor in a residential setting left little time for me to fully grasp the reins in which I had just been handed. At first, I felt overwhelmed, and then I started to resent the decision to accept the role on an interim basis due to the lack of knowledge and supervisory skills that I had. A true feeling of Imposter Syndrome took over me and I truly felt that I was not the right fit for the position.

After spending some time in the Clinical Supervisor role, I began to understand what was needed from me and why I was asked to take on the responsibility. I began to understand the needs of the program and how I could help the clinical staff and residents of the treatment center. The center I was tasked with supervising the daily operations of, is and has been for several decades, a successful and respected program within the state of Wyoming and surrounding region. Having this newly tasked responsibility, one of my greatest fears was to not break anything within this established system. I was now asked to begin changing this system, and suffice it to say, there was some hesitation and trepidation about where to begin. Within a matter of a few months, I was given the full-time Clinical Supervisor role and within 3 weeks COVID 19 took over the world and everyone in it. There are no books, podcasts, or knowledge present when an event of that magnitude takes over, the rules change. Through this time, I found support from other supervisors within the hospital and was gifted with an email that contained an invitation to the MHTTC Leadership Academy, being held at WICHE, the first Cohort. I quickly began learning useful skills, leadership mentality, and above all comradery with others in a similar situation to myself that were also in the trenches with me. This opportunity gave me the chance to communicate with a community that was in the same situation as I was. I also worked with a mentor who helped me develop my skills and hone-in-on goals that kept me moving forward, and less afraid of the unknown.



Lindsey's story:

I have lived in rural South Dakota all my life growing up on our century old family farm. My community plays a vital role in my day-to-day life as a wife, mother, and executive director for [Southern Plains Behavioral Health Services](#), a rural community mental health agency located in south-central South Dakota.

I have always been committed to helping people in my community, so it was a natural evolution for me to become a clinician at a community mental health agency. In December 2018, I became the Executive Director of the agency and found myself in a role that I had not received any specific training for. I was now supervising staff who had, until recently, been peers. Most of the staff were supportive and accepting of my new role, but I still felt like I had knowledge to gain in building competence for the position. In some ways it felt alienating. Winner, SD is a small community and as staff members we all relied on each other for support and encouragement, both personally and professionally. When I became Executive Director, my role and those relationships had to change. I was reminded of the saying, "it's lonely at the top" and longed for companions and mentors to share ideas, resources, and guidance.

I had just become Executive Director, when I became aware of the training offered by the Mountain Plains MHTTC and I signed up for as many as I could. When I received an email about the Mountain Plains Leadership Academy, I was excited to participate and learn more about being an effective leader. I have always loved learning about leadership and have been told I am a natural leader, but I knew I needed to be skillful in my new role to earn respect from my colleagues and community.

I have been an active participant in the Mountain Plains MHTTC Leadership Academy cohort since 2021. I have seen the Academy evolve to meet the specific needs of rural leaders by training people to understand their own style of leadership. Not only have I benefited from participating in the Leadership Academy and the coffee chats, but as I learned more about how I communicated and lead, my staff and organization have also profited. My confidence as a leader has increased as I have learned how to successfully navigate and balance my needs along with the needs of the organization, the staff, and our clients. The coaching and mentoring offered to participants of the Leadership Academy is something that I really value. To be able to meet regularly with a mentor who has experience in leading organizations and can provide me with a new perspective and encouragement has helped to broaden my perspective, while allowing me to feel supported, giving me the energy to make the necessary changes and implement successful strategies. I am now excited to be able to give back to the Academy as a trainer and a coach.

Rural leaders face many of the same challenges and struggles that our urban counterparts do, but because of our unique environments, oftentimes we are more reliant on community members and building our own, and we need leaders who understand this and can successfully work closely with community members and build people up. With the help of the Mountain Plains MHTTC Leadership Academy I feel better equipped to step into the leadership role that I have been offered.



## Conclusion

It has been a privilege to develop and deliver the Mountain Plains MHTTC Leadership Academy as part of the SAMSHA funded MHTTC grant. We are committed to continuously evolving and adapting our program to support new and emerging leaders in rural communities to succeed.

In our fifth year we are continuing to refine our processes based on what we have observed and participant feedback. One of the primary targets for the 2024 Leadership Academy is to focus on increased and sustained year-long engagement. Some of the adjustments we are making to strengthen our program include,

- Revising the application to include required participation in ongoing activities such as quarterly “coffee chat” training, office hours, and coaching and mentoring.
- Concentrate on individuals working in mental health or related fields.
- Require minimum number of years in a leadership role.
- Update the curriculum to include Individual Development Plan

Many organizations consider leadership skill development as “soft” skill development and are hesitant or unable to provide this training for their leaders.

By providing training, continuous education, and critical resources for new and emerging leaders we are addressing a crucial need and creating the impetus for lasting change.

We envision the Leadership Academy training and continuous support that participants receive as the stone that causes a ripple effect when tossed into a lake. Rural communities value connection and relationships, and by working closely with individuals, who live and work in these communities, to grow and succeed, we believe our time and investment will have a ripple effect, benefiting all areas of a community.

## The Mountain Plains Mental Health Technology Transfer Center (MHTTC)

The Mountain Plains Mental Health Technology Transfer Center (MHTTC) is a partnership between the Western Interstate Commission for Higher Education's Behavioral Health Program and the University of North Dakota. The Mountain Plains MHTTC is funded by a grant through the Substance Abuse and Mental Health Services Administration (SAMHSA) to build regional mental health workforce competence by providing training, resources, and technical assistance with an emphasis on evidence-based practices to HHS Region 8 (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming). The MHTTC was awarded additional funding to further mental health and wellness in K-12 schools and support districts, school administrators and school staff to enhance student mental wellness. They were also awarded a provider-well-being supplement.

The focus of the Mountain Plains MHTTC Leadership Academy is to support the emergence and continued growth of leaders in rural communities with an emphasis on engaging leaders in the rural behavioral health workforce. The Mountain Plains MHTTC offers a yearly Leadership Academy, quarterly training or coffee chats for the cohort, and year-long coaching for each participant.



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**Rural Mental Health is the focus of the Mountain Plains MHTTC Center**

## Curriculum Resources

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## Recommended Reading:

- David Allen, *Getting Things Done*, Penguin Books, 2001
- Matthew Kelly, *OFF Balance*, Beacon Publishing, 2015
- Lodro Rinzler, *The Buddha Walks Into The Office*, Shambhala Publications, 2014
- Ronald A. Heifetz, *Leadership Without Easy Answers*, Harvard University Press, 1994
- Roger Fisher, William Ury, *Getting to Yes*, Penguin Books, 1991

## Appendix

### *EXAMPLE Individual Development Plan*

Name

Six Month Individual Development Strategies

(Date)

**Strengths-** EX: honest, engaged, dedicated, approachable, competent, candid

-Specific areas for improvement defined during the Leadership Academy

#### Developmental Areas

Development Area #1: EX: Perception of others towards you

#### Improved Skill/Behavior (Metrics)

**EX:**

1. Accept that perception is truth to others and commit to changing habits and behaviors that lead to negative perceptions.
2. Determine under what conditions do you modify your behavior in a negative manner and mitigate the opportunities for the same to happen.
3. Expand your comfort zone allowing “feedback” to flow towards you.

#### Strategies

**EX:**

1. Develop an action plan to improve the perception of others towards you
2. Create an environment where feedback is free-flowing
  - brown-bag lunch
  - walk & talk
  - regular one on ones
3. Read 3 self-help/leader development books; ex: *The Leadership Challenge*, Kouzes and Posner; *Humilitas*, John Dickson; *Leadership Without Easy Answers*, Ronald Heifetz
4. Identify a “truth teller”

#### Timetable

**EX:**

1. Institute an action plan effective, (Date).
2. Begin one or more actions to create a feedback environment effective, (Date).
3. Begin reading effective (Date)
4. Engage your truth teller effective (Date)

**Development Area #2:**

-As needed

**Improved Skill/Behavior (Metrics)**

1. As needed

**Strategies**

1. As needed

**Timetable**

1. As needed

**NOTES:**



## Authors



### **Genevieve Berry**

Program Manager, MHTTC, WICHE BHP

Genevieve received her B.A. in psychology from Memphis University and she is currently pursuing studies in somatic-based therapy and trauma. As Program Manager for the MHTTC, she has facilitated and helped develop the Leadership Academy for the past four years. She is the creator, host, and occasional trainer for the successful Mindful Monday series. This series focuses on introducing mindfulness practices to support and develop resilience in providers working in high stress environments. Genevieve also develops and implements a variety of evidence-based training for rural behavioral health providers. Prior to joining the WICHE Behavioral Health Program, she worked for the state of Colorado on the Multi-Use Network Project (MNT) and The Next Mile project, where she developed communications strategies and served as the liaison to rural communities. In this capacity, she traveled the state presenting on the benefits of broadband for rural economic development, healthcare, and education.



### **Bob Dare**

Dare Consulting

Born and raised in Michigan, Bob entered the US Army after completion of high school in 1968 and served for nearly 30 years. He completed his career serving as Command Sergeant Major, US Army Forces Command, the Army's largest organization. He had the privilege to hold every level of leadership from an infantry squad leader through Command Sergeant Major, the highest enlisted rank in the US Army, inculcating in him the importance of people and their individual contribution vital to success in any organization. He has led under a myriad of conditions including leadership in combat.

Bob was part of the very small population of leaders who remained on duty post-Vietnam and helped lead the Army from a conscription-based service to an all-volunteer force, a transition that took 25 years to complete. He served in six of the Army's 10 Divisions, deployed to 28 countries, and touched the lives of countless people. For the past eleven years, he has led workshops, created, and conducted training, and provided executive coaching. Bob's specialty is in providing leadership development and professional/personal growth services. He has served on U.S. Congressional and government panels and committees studying training, leadership, and gender integration within the US military.

Bob has coached executive level leaders from a wide range of industry, military, and government organizations. He has facilitated numerous professional growth and leadership development seminars.

Bob is currently involved with the Together with Veterans program, working with the Western Interstate Commission for Higher Education (WICHE) and the Department of Veterans Affairs to address rural Veteran suicide.

Bob holds degrees from St Leo University and Excelsior College. He is the author of "The High Ground", a narrative of Bob's maturity from a boy to a man.

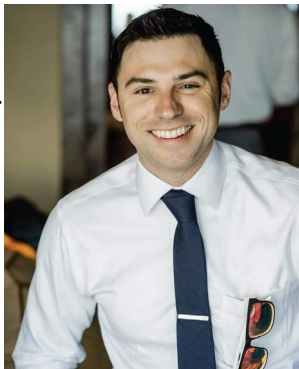




## **Lindsey McCarthy**

Executive Director, Southern Plains Behavioral Health Sciences

Since December 2018, Lindsey McCarthy has been the Executive Director of Southern Plains Behavioral Health Services, a community mental health center in south-central South Dakota. Lindsey continues to provide therapy as a dialectical behavioral therapy skills trainer while working to advance services and outcomes through the executive director role. Lindsey has been a member of the Mountain Plains MHTTC Advisory Board since 2020, and an active member of the Leadership Academy cohort since 2021.



## **Josh B. Spinney**

M.A., LPC Counselor Supervisor, Cedar Mountain Center

Josh completed his Bachelor of Art in History and Psychology from Saginaw Valley State University in 2008. Josh completed his Master of Art in Professional Counseling at Central Michigan University in 2012. Josh is employed as a Licensed Professional Counselor and Counselor Supervisor at Cody Regional Health Cedar Mountain Center. Josh is experienced with counseling families, children, adolescents, and adults, both individually and in groups. Josh's areas of specializations include family systems, substance use disorders, severe and persistent mental illness, mood disorders, and personality disorders. Josh's therapeutic approach stems from the foundations of Cognitive Behavioral Therapy (CBT), Dialectical Behavioral Health (DBT), Motivational Interviewing (MI), and Positive Psychology.



## **Ivory Tubbs**

Ph.D., Psychologist, WICHE BHP

Prior to earning his doctorate in psychology, Ivory served in the United States Air Force during Operation Desert Shield in logistics in 1991. Prior to his discharge from the military, Ivory's career in the mental/behavioral health field began in Las Vegas, Nevada as a crisis intervention specialist. After his simultaneous roles as Executive Director and Senior Public Health Investigator, Ivory began adding to his knowledge base by joining the University of Texas School of Health Sciences, Psychiatric Center working with acute and subacute psychosis patients as well as patients in the forensic psychology unit for the Houston Police Department.

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