

Organizational Wellness: A Strategy for Rural Behavioral Health Workforce Recruitment and Retention

Rachel L. Navarro, Ph.D. & Topaza Yu

University of North Dakota

February 8, 2024



Mountain Plains (HHS Region 8)

MHTTC

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

Disclaimer and Funding Statement

This presentation was prepared for the Mountain Plains Mental Health Technology Transfer Center (Mountain Plains MHTTC) under a cooperative agreement from the Substance Abuse and Mental Health Services Administration (SAMHSA). All material appearing in this presentation, except that taken directly from copyrighted sources, is in the public domain and may be reproduced or copied without permission from SAMHSA or the authors. Citation of the source is appreciated. Do not reproduce or distribute this presentation for a fee without specific, written authorization from the Mountain Plains MHTTC. For more information on obtaining copies of this presentation please email casey.morton@und.edu.

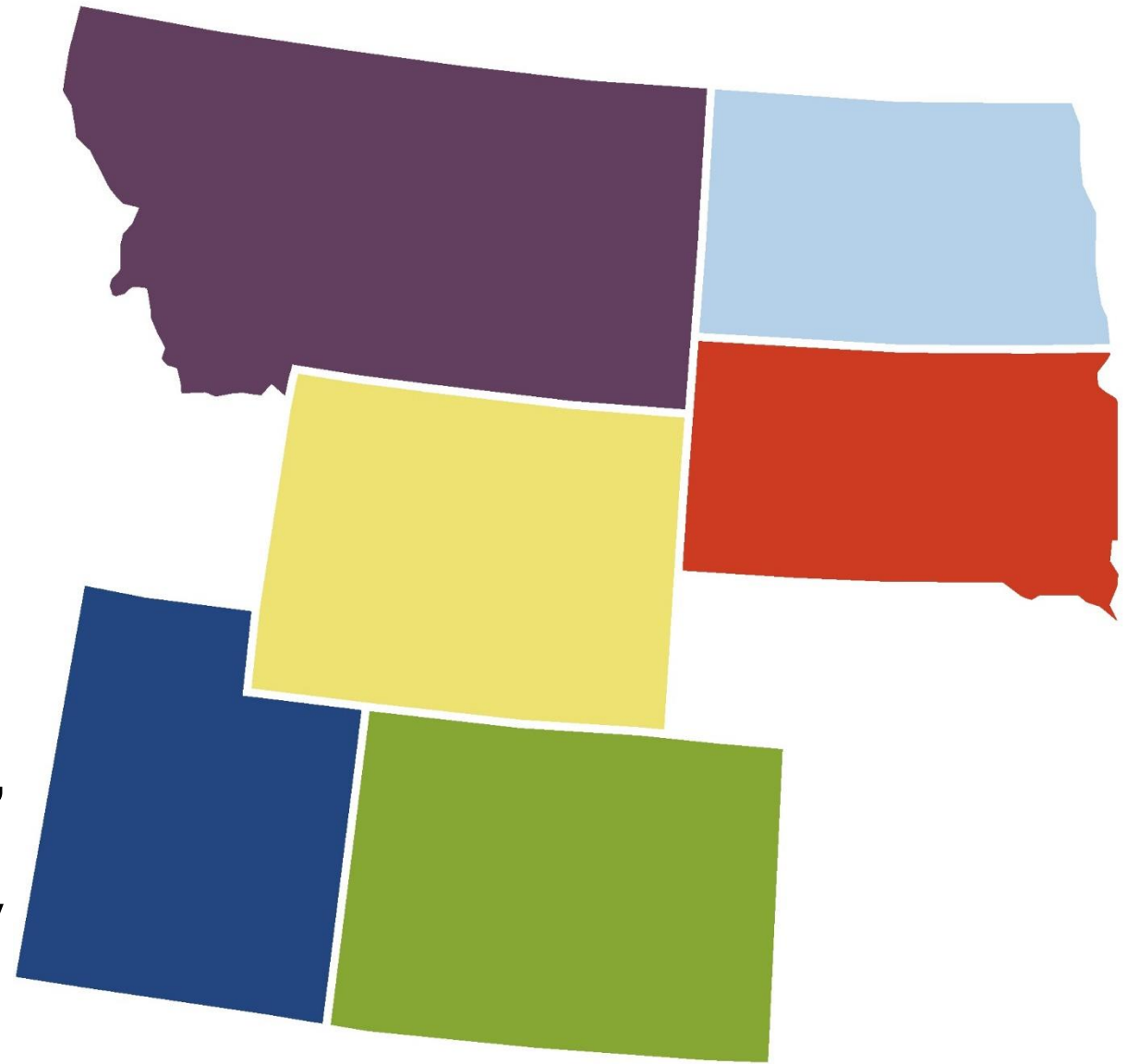
At the time of this presentation, Miriam Delphin-Rittmon served as SAMHSA Assistant Secretary. The opinions expressed herein are the views of Rachel Navarro and Topaza Yu and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred.

The work of the Mountain Plains MHTTC is supported by grant H79SM081792 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

The Mountain Plains Mental Health Technology Transfer Center

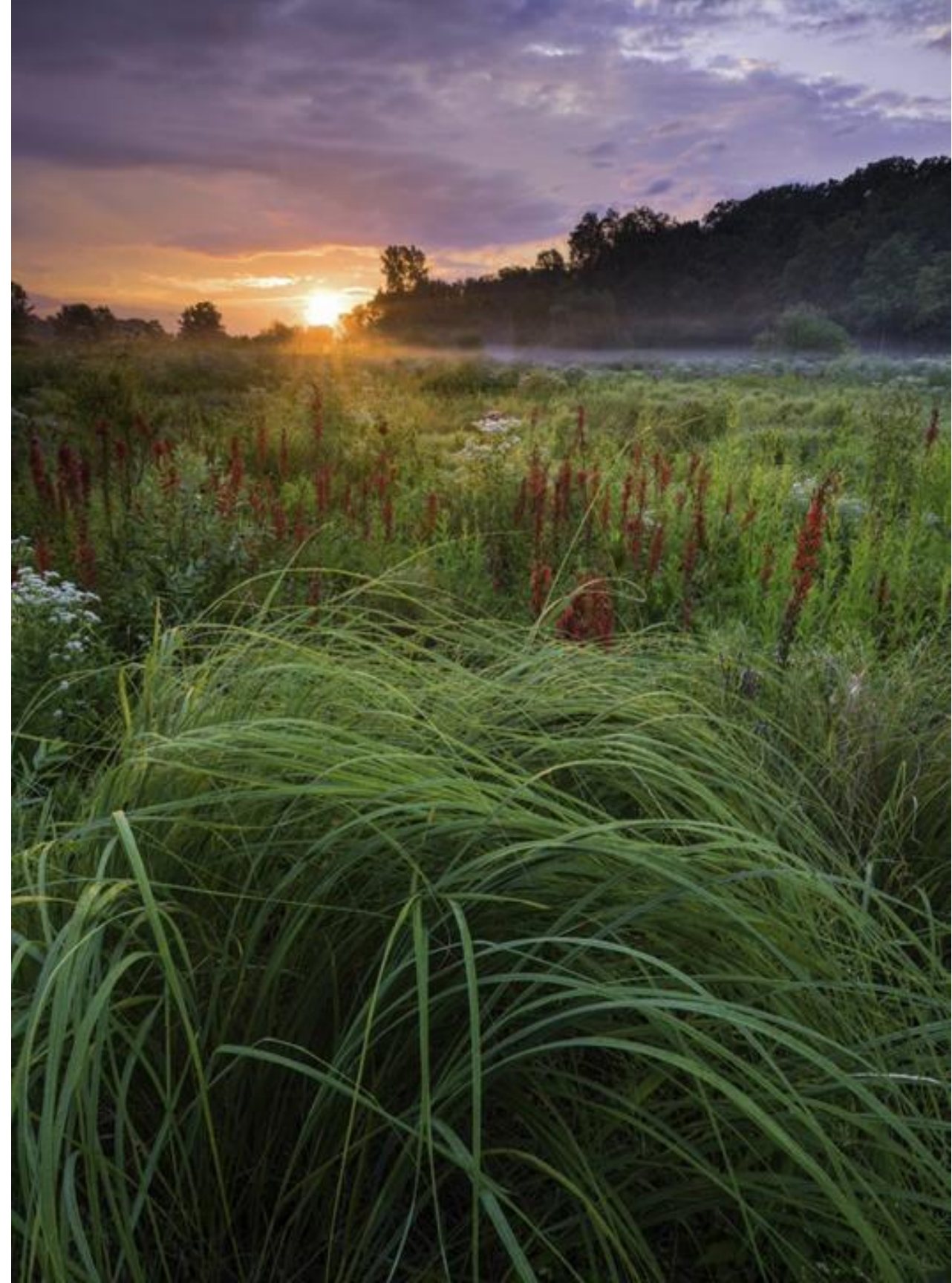
The Mountain Plains Mental Health Technology Transfer Center (Mountain Plains MHTTC) provides training and technical assistance to individuals who serve persons with mental health concerns throughout Region 8 (Colorado, Montana, North Dakota, South Dakota, Utah and Wyoming).

We belong to the Technology Transfer Center (TTC) Network, a national network of training and technical assistance centers serving the needs of mental health, substance use and prevention providers. The work of the TTC Network is under a cooperative agreement by the Substance Abuse and Mental Health Service Administration (SAMHSA).



Land Acknowledgement Statement

Today, the University of North Dakota rests on the ancestral lands of the Pembina and Red Lake Bands of Ojibwe and the Dakota Oyate - presently existing as composite parts of the Red Lake, Turtle Mountain, White Earth Bands, and the Dakota Tribes of Minnesota and North Dakota. We acknowledge the people who resided here for generations and recognize that the spirit of the Ojibwe and Oyate people permeates this land. As a university community, we will continue to build upon our relations with the First Nations of the State of North Dakota - the Mandan, Hidatsa, and Arikara Nation, Sisseton-Wahpeton Oyate Nation, Spirit Lake Nation, Standing Rock Sioux Tribe, and Turtle Mountain Band of Chippewa Indians.



The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED
AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED AND
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

PERSON-FIRST AND
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR
AND UNDERSTANDABLE

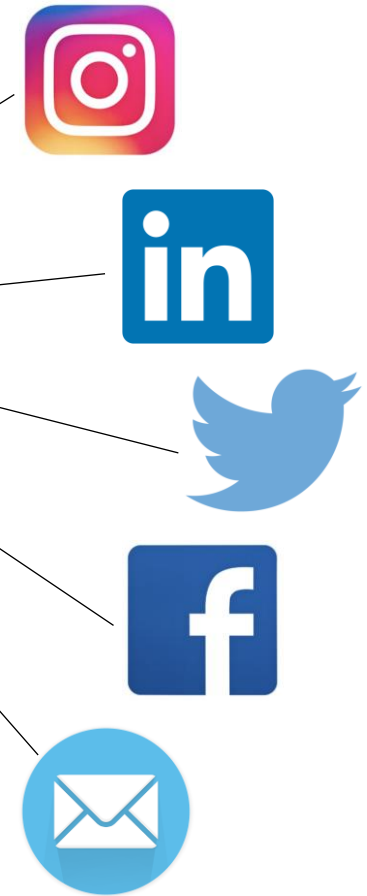
CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS

Stay Connected

Scan this QR code to follow us on Instagram, LinkedIn, Twitter, and Facebook. You can also join our e-mail newsletter!



SCAN ME



Organizational Wellness: A Strategy for Rural Behavioral Health Workforce Recruitment and Retention

Rachel L. Navarro, Ph.D. & Topaza Yu

University of North Dakota

February 8, 2024



Mountain Plains (HHS Region 8)

MHTTC

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

Today's Agenda

- Current Mental Health Workforce Trends
- Key Factors in Turnover & Burnout
- Key Factors in Retention
- Strategies for Recruitment and Retention

Current Workforce Trends

- Majority of behavioral professionals were practicing in metropolitan areas (Nguyen et al., 2016)
- Rural and frontier areas had lower ratios of providers to population (Nguyen et al., 2016)
- As of December 2023, more than half of the U.S. population lives in a Mental Health Professional Shortage Area (Mental Health HPSA) (National Center for Health Force Analysis [NCHWA], 2023).
- Substantial shortages of addiction counselors, marriage and family therapists, mental health counselors, psychologists, and psychiatrists are projected into 2036 (NCHWA, 2023).

Negative Consequences of Rural Mental Healthcare Worker Turnover & Burnout



Mental Healthcare Workers

EXTREME EXHAUSTION
AND COMPASSION
FATIGUE

INCREASED INCIDENTS
OF ISOLATION,
SUBSTANCE USE,
ANXIETY, AND
DEPRESSION

INCREASED PROBLEMS
WITH INSOMNIA, HEART
DISEASE, AND DIABETES



Patients/Clients/Consumers

DELAYS IN CARE

LOWER QUALITY CARE



Health Care System

WORKFORCE
RECRUITMENT AND
RETENTION
CHALLENGES

LIMITED-SERVICE
ACCESSIBILITY,
AVAILABILITY, AND
AFFORDABILITY

INCREASED COSTS



Community and Society

LIMITED-SERVICE
ACCEPTABILITY

EROSION OF TRUST

Key Factors in the Turnover and Burnout of Rural Mental Health Providers

Stress, Isolation, & General Lack of Focus on Worker Well-Being

High Caseloads with Lack of Resources for Complex Cases

Inadequate pay or compensation

Limited Flexibility, Autonomy, & Voice

Poor Management Support and Leadership

Lack of Quality Supervision

Lack of Professional Development Opportunities

Lack of Teamwork, Collaboration, Vulnerability, & Collegiality among Staff

Limited Resources and Funding to Implement Best Practices

Biased and discriminatory structures and practices

Cultural Differences

Workforce Retention

What is working? (Supports)

- Collaboration with organizations that can help in disseminating and implementing evidence-based behavioral health practices (Patel et al., 2022)
- Implementation of financial and technical assistance infrastructure (Hoge et al., 2013)
 - Loan Repayment Plans (Hoge et al., 2013)
 - Telehealth (Avey & Hobbs, 2013)

Workforce Retention

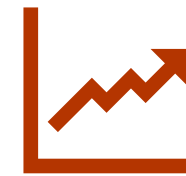
Other Reasons People Stay



Compatibility of
Values



Formal and
Informal
Relationships



Financial, Family,
and Career
Benefits

So.....How do we recruit and
retain a resilient rural mental
health workforce?

We focus on.....

Wellbeing and Wellness



A PUBLIC HEALTH CRISIS

Stress and burnout are common, and reactive approaches are insufficient



AFFECTS SYSTEMS & WORKPLACE CULTURE

Healthcare professionals are a critical factor in creating healthy systems and environments for patients



AN ETHICAL RESPONSIBILITY

We have a duty to help promote healthy workplaces and healthcare environments



RETURN ON INVESTMENT

Healthcare professional burnout leads to costly absenteeism, attrition, and hiring concerns



IMPACTS PATIENT CARE

Healthcare professional stress impacts delivery of services and patient care



A RESEARCH DRIVEN DECISION

Research suggests that programs to reduce stress and improve wellbeing are effective

Relationship of Organizational and Personal Wellbeing





Practical Strategies for Promoting Organizational Wellness

Practical Strategies for Promoting Organizational Wellness

- Organizational Commitment to a Culture of Care
- Compassionate Leadership
- Assessment of Organizational Culture & Climate



Organizational Commitment to a Culture of Care

Start with Recruitment

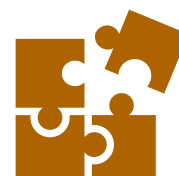
- Effective and fair human resources processes
 - Accessible and reasonable application process for the applicant
 - Equitable evaluation, interview, and selection processes of applications
- Interview day
 - set aside time for an informal meet and greet with current employees who will not be the job candidate's direct supervisors and who do not hold executive director or administrative roles

Organizational Commitment to a Culture of Care

Establish Organizational Rituals and Traditions



Starting each staff meeting with “good” or “new” news that folks would like to share with the group



Monthly social events during the workday (e.g., coffee chats, short group-based scavenger hunts, trivia games, brown bag lunch socials, etc.)



Establish birthday and work anniversary traditions (make sure to ask each staff about their comfort level with this activity)

Organizational Commitment to a Culture of Care

Make Meaningful Investments in People



GENEROUS BENEFITS



PROFESSIONAL DEVELOPMENT



ONGOING FORMAL MENTORSHIP
AND/OR COACHING

Organizational Commitment to a Culture of Care

Hold people accountable with care



Set clear expectations for yourself and your team



Maintain attention on the goal through reviewing progress in 1:1s and team meetings



Create psychological safety aka do not expect perfection



Provide coaching when needed



Provide constructive and solution-oriented responses to missteps. “What can we learn from this?”

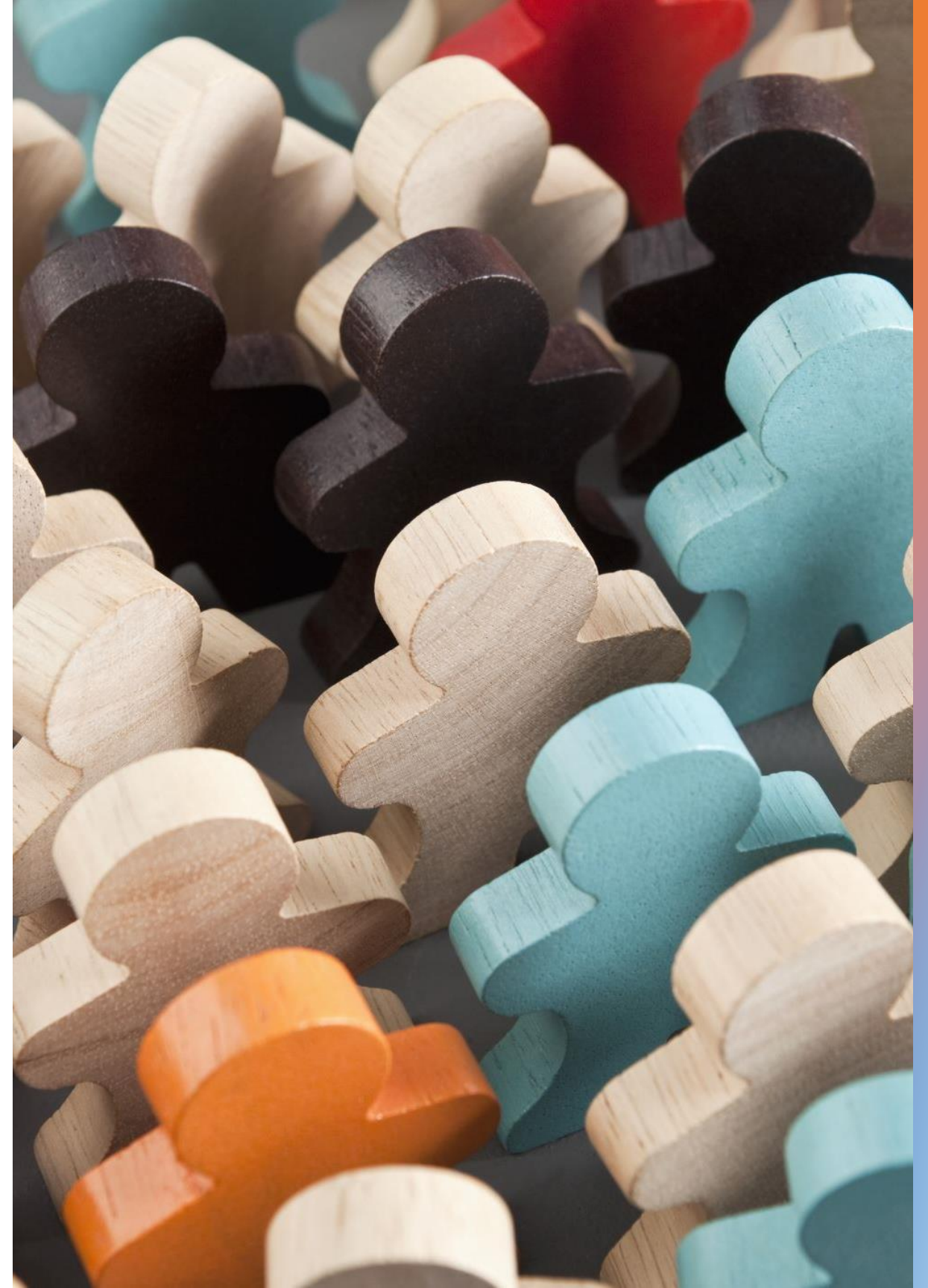
Compassionate Leadership & the Four Pillars

- Attending
- Understanding
- Empathizing
- Helping

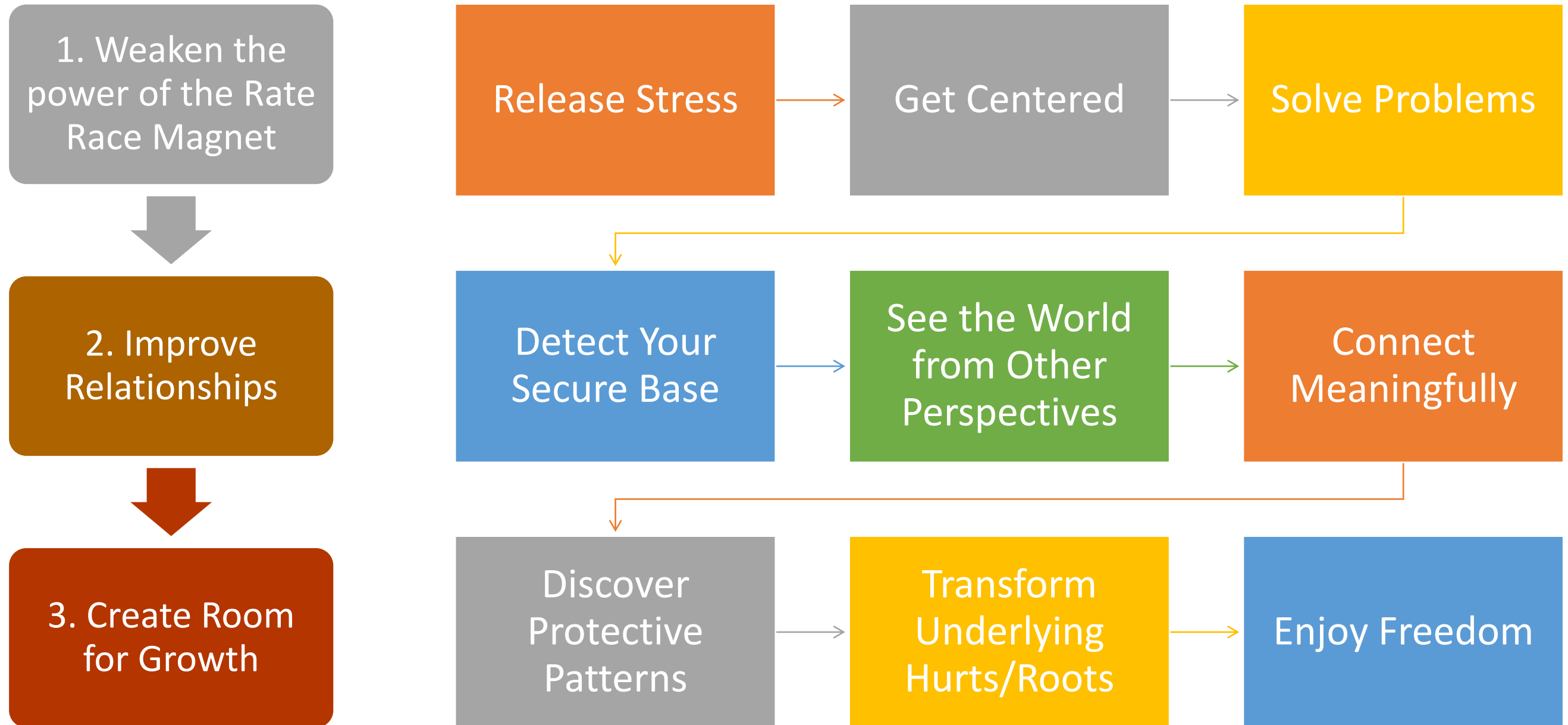


Compassionate Leadership Behaviors

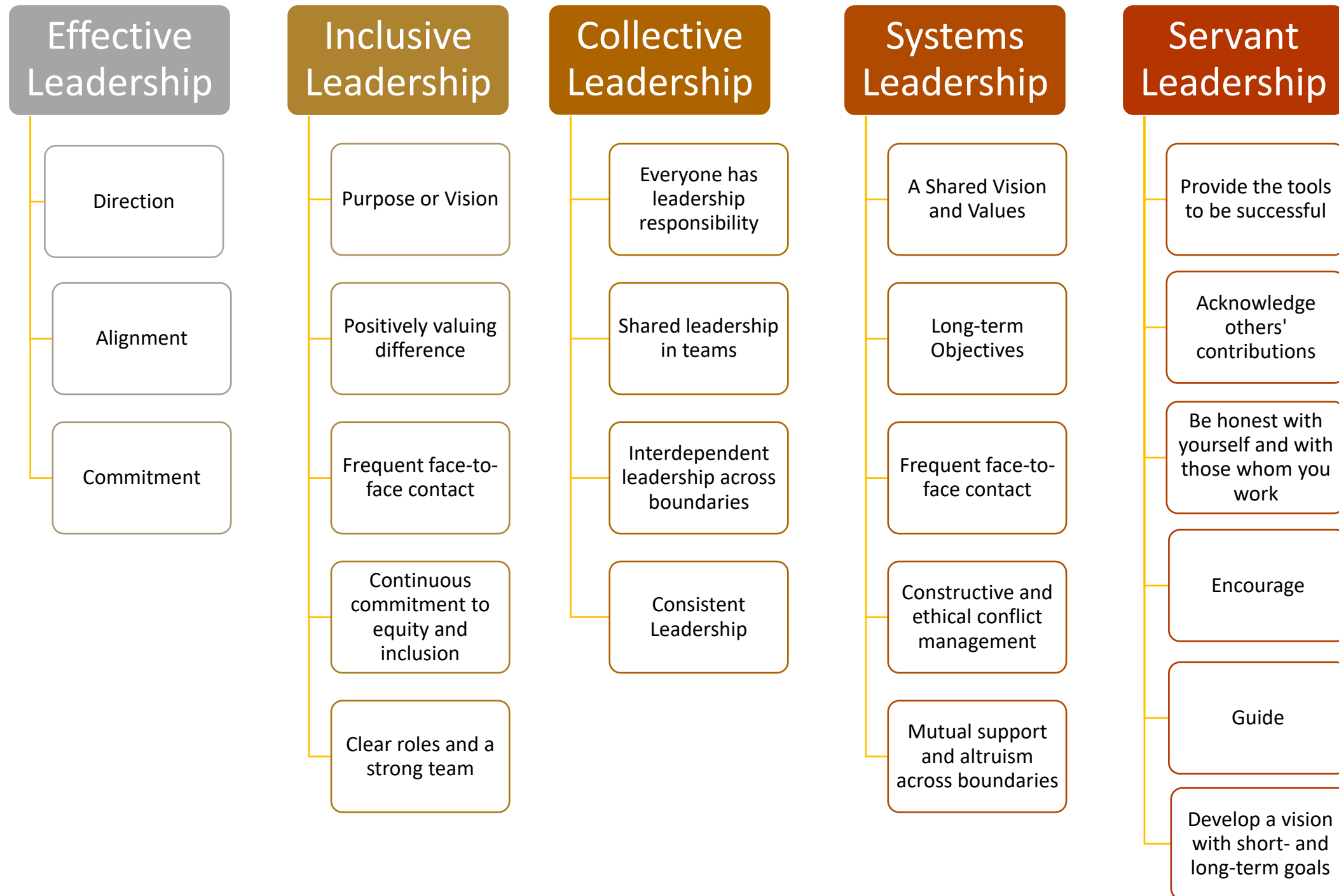
1. Dignity
2. Authenticity
3. Presence
4. Accountability
5. Empathy
6. Integrity



Compassionate Leadership Pathway



Compassionate Leadership



Assessment of Organizational Culture & Climate

- On-going and iterative process
- Multiple levels of assessment
 - Self-assessment at all levels of the organization
 - Organizational assessment



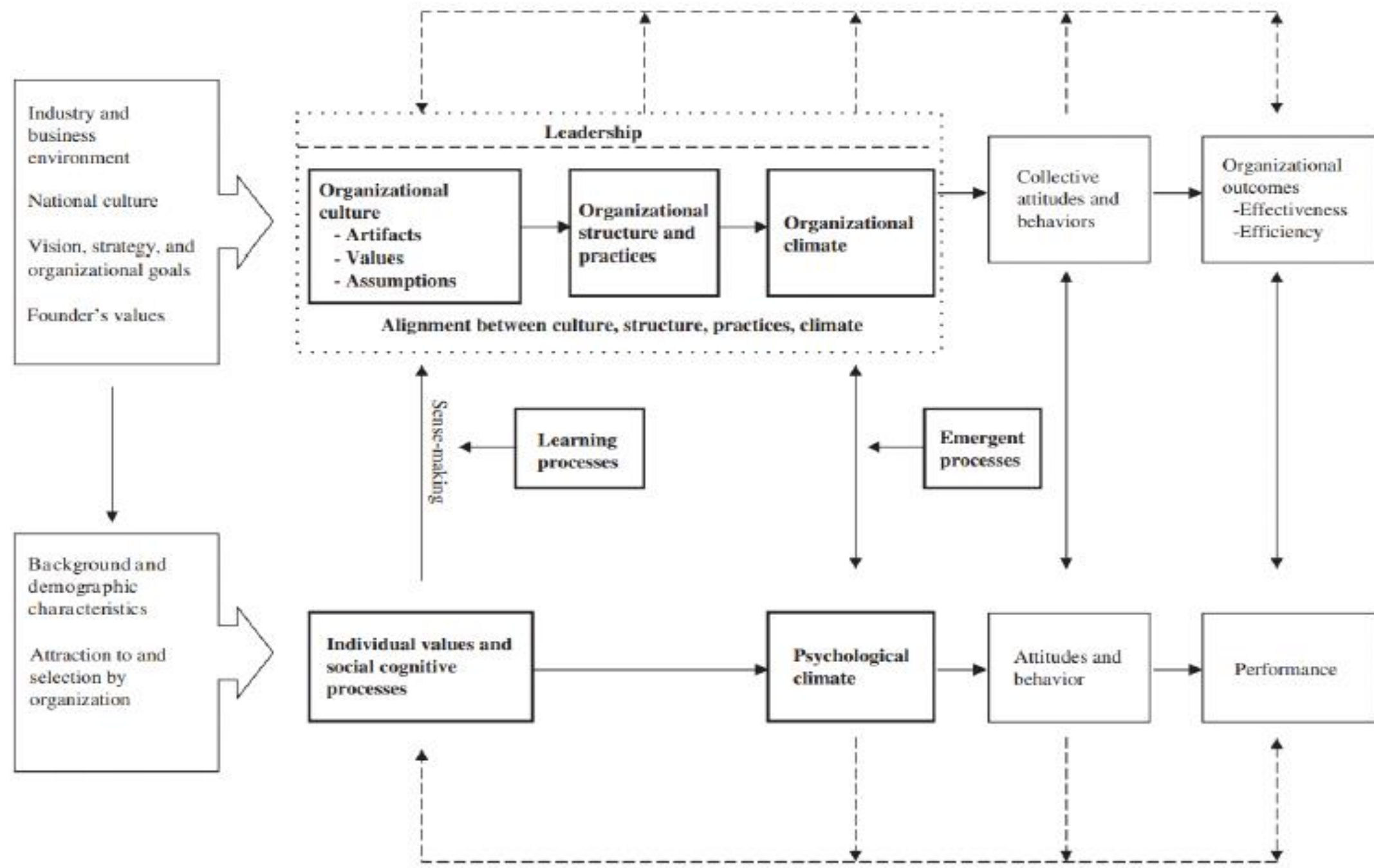


Figure 24.1 Multilevel model of organizational culture and climate

Assessment of Organizational Culture & Climate

Open Access Products and Empirical Articles of Measures

- [The Climate Assessment Toolkit](#)
- Hsiung, K. S., Colditz, J. B., McGuier, E. A., Switzer, G. E., VonVille, H. M., Folb, B. L., & Kolko, D. J. (2021). Measures of Organizational Culture and Climate in Primary Care: a Systematic Review. *Journal of general internal medicine*, 36(2), 487–499. <https://doi.org/10.1007/s11606-020-06262-7>
- Powell, B. J., Mettert, K. D., Dorsey, C. N., Weiner, B. J., Stanick, C. F., Lengnick-Hall, R., Ehrhart, M. G., Aarons, G. A., Barwick, M. A., Damschroder, L. J., & Lewis, C. C. (2021). Measures of organizational culture, organizational climate, and implementation climate in behavioral health: A systematic review. *Implementation Research and Practice*, 2. <https://doi.org/10.1177/26334895211018862>
- Friedberg, M. W., Rodriguez, H. P., Martsolf, G. R., Edelen, M. O., & Vargas Bustamante, A. (2016). Measuring Workplace Climate in Community Clinics and Health Centers. *Medical care*, 54(10), 944–949. <https://doi.org/10.1097/MLR.0000000000000585>
- <https://www.sap2.org.ar/i2/archivos/1876.pdf> Team Leader assessment tools



Take Home Messages

- There is no one-size fits all approach to organizational wellness and wellbeing!
 - Engage in developing an organizational wellness approach that works within the culture in which that you, your colleagues, and workplace are embedded
- A Culture of Care and Compassionate Leadership have both individual and organizational benefits
- Ongoing assessment of your organizational culture and climate is one step in creating and sustaining a culture of care where the organization and its people are thriving and well.

Questions?