

CBHC BOARD POSITION STATEMENT 23: *Behavioral Health Workforce Development*

Position Statement

Colorado must utilize comprehensive strategies to achieve a robust and sustainable behavioral health workforce capable of meeting the needs of every community.

Background

Nationwide, concerns regarding shortages in behavioral health workforce are pervasive in raising questions regarding the healthcare systems ability to meet growing demand and need for behavioral health treatment and services. Colorado experiences substantial workforce challenges in behavioral health with both providers of mental health (MH) and substance use disorder (SUD) services facing ongoing challenges in effectively recruiting, training, and maintaining an effective workforce. As demand for services continues to rise across the state, urban and rural communities face diverse challenges in executing comprehensive strategies to create a full workforce.

Many complex factors contribute to workforce shortages, high turnover rates, and difficult recruitment including low salaries, stressful conditions, and strict regulations. These are often only partial priorities for policy makers as they examine multi-faceted workforce solutions.

In SAMHSA's 2013 Report to Congress, the administration highlighted disparities that contribute to behavioral health workforce shortages, including the stigma and discrimination that mental health clinicians face which may result in recruitment difficulties or lower pay. SAMHSA noted that at a mental health center, a master's level social worker earns \$45,344 and an entry level social worker earns \$30,000 while in a general health care agency, a social worker earns \$50,470. A registered nurse working in a behavioral health organization makes \$52,987 while the national average for nurses is \$66,530. Further, SAMHSA cited a 2011 study that found the median salary for a direct care worker in a 24-hour residential treatment center was \$23,000 compared to \$25,589, the median salary for an assistant manager at Burger King.

Strategies between rural, frontier, and urban communities must be salient to meet the unique challenges that every region faces. Lack of data on workforce retention efforts, and the need for varying strategies make it difficult to pinpoint exact roadmaps to enhancing the behavioral health workforce. In SAMHSA's 2013 report to congress, incentive programs (such as loan repayments and forgiveness), competitive salaries, anti-stigma campaigns (especially an understanding of addiction as disease), and adequate career progress rewards (e.g., recognition, promotions, and continuing education) are all listed as common and promising workforce strategies across the nation.

CBHC members have long leveraged their community-responsive strategies to implement recruitment strategies that support both emerging and seasoned clinicians in sustaining a career in behavioral health service delivery. Mental health centers utilize competitive benefit packages when possible and maintain eligibility for loan forgiveness programs to support the workforce in light of historically low salaries and stressful environments. Policies and funding structures create barriers in allowing providers to maximize their creativity to design recruitment and retention programs that can help compete with for-profit sector opportunities.

Beyond fiscal and personal challenges, Colorado's behavioral health workforce is hindered by overly strict regulations that create hardships for individuals who want to enter the field, require extensive and burdensome administrative efforts, create silos in the workforce, and reduce the communities' ability to utilize providers to their full potential. CBHC members are committed to advocating on behalf of our communities for state-wide initiatives that help the behavioral health workforce thrive and grow with the rest of Colorado's booming economy.

Policy Priorities

23.1 Comprehensive Recruitment and Retainment Strategies

To truly begin addressing Colorado's behavioral health workforce needs, diverse and comprehensive strategies must be pursued that leverage opportunities for financial support as well as creating locally responsive solutions to support emerging and seasoned clinicians and other staff working within Colorado's safety-net system.

- ❖ CBHC supports policies, funding reform, and regulations that provide behavioral health providers with the flexibility to pursue various strategies towards recruitment and retainment.
 - Increasing the non-profit workforce prioritization for financial support programs such as student loan forgiveness and financial aid for education advancement or licensure.
 - Enhancing provider flexibility to offer competitive benefits packages, including relocation assistance and other employment incentives.
 - Supporting creative strategies for behavioral health retainment and allowing providers to utilize resources to offer staff mental health promotion benefits.

23.2 Inclusive Policies

Colorado's behavioral health workforce benefits tremendously from inclusion of individuals who have personal lived experience with behavioral health disorders and the healthcare system.

- ❖ CBHC supports policies that enhance the role of peers and individuals with lived experience in the behavioral health workforce.
 - Creating alignment and formalizing the role of peers in healthcare delivery to allow for more peer involvement.
 - Reducing discriminatory practices that create barriers for individuals with lived experience from gaining licensure or gainful employment in the behavioral healthcare delivery system, including for the provision of SUD services.
- ❖ CBHC supports policies that reduce barriers to employment in the behavioral healthcare delivery system.

- Promote open state reciprocity regulations to encourage clinicians from other states to fill open positions.
- Examine and streamline telehealth regulations to fill workforce shortage areas
- Create opportunities to assist emerging clinicians through the costly, complicated, and lengthy licensure process.

23.3 Financial Strategies to Support the Behavioral Health Workforce

Colorado's safety net providers often face difficulties in attempting to compete with large, out of state, for-profit systems that can offer higher pay to workforce. If Colorado hopes to continue comprehensively serving the most vulnerable individuals in our state, community providers must be empowered to support their staff.

- ❖ CBHC supports policies and legislation to increase the community behavioral health systems purchasing power and ability to pay competitive salaries.
 - Ensuring a steady increase to cost of living adjustments for community providers to align with Colorado's economy at large.
 - Allowing flexibility in funding mechanisms so that providers can prioritize supporting staff with the understanding that a healthy and secure workforce yields best clinical outcomes.
 - Increasing reimbursement parity across public and private health plans, to allow behavioral health providers to pay salaries comparable to primary care providers.

23.4 Aligned Education, Training, and Professional Policies

Across Colorado, there are several legitimate pathways to gain the education and pursue licensure in the behavioral health field with certain population specialties and licensure types often existing in silos. Too often, impractical regulations and policy decisions create limits in clinicians' abilities to practice to the full scope of their licensure. Further, silos in professional policies create inconsistencies for individuals that treat diverse individuals presenting with complex concerns.

- ❖ CBHC supports policies that enhance the behavioral health workforce ability to practice to its full potential.
 - Supporting masters level and higher clinicians in utilizing the majority of their time on clinical services appropriate with their licensure level.
 - Creating alignment between professional board policies to promote uniformity in professional standards regarding the delivery of care and telehealth services.
 - Modernizing coverage and billing policies across all state departments to ensure that services are being delivered by clinically appropriate level of professionals.

Effective Period

The Colorado Behavioral Healthcare Council (CBHC) Board of Directors approved this policy on 04/19/2018. It is reviewed as required by the Public Policy Advisory Committee.

Policy Updated

Updates to this policy position were approved by the CBHC Board of Directors on 04/19/2018.

Expiration: 04/19/2018.