

IMPACT OF COVID-19 ON BEHAVIORAL HEALTH WORKFORCE

National Council for Mental Wellbeing

SEPTEMBER 2021



KEY FINDINGS

- 1. Demand for behavioral health organizations' services has continued to increase. Three quarters of members (78%) say demand for their organization's services have increased over the past 3 months. Over the past year, since August 2020, this percentage has increased 26%. Demand has specifically increased over the past 3 months for organizations offering mental health treatment, crisis services, social support services, and youth services.
- 2. Increased demand is causing patient waitlist to grow. Three in five (62%) member organizations say their patient waitlist has grown over the past 3 months, a 17% increase since February 2021.
- 3. Organizations are having trouble recruiting and retaining employees. Nearly all member organizations surveyed (97%) say it has been difficult to recruit employees, including 78% who say it has been *very difficult*. In an open-end question, organizations say the main obstacles they're facing recruiting employees include a lack of applicants overall, specifically a lack of qualified applicants, along with being able to offer a competitive salary and burnout from COVID-19.
- 4. When asked about short-term policy solutions to meet increased demand, member organizations reference additional funding to hire qualified staff, continuing to offer telehealth services, updating reimbursement rates, and reducing the amount of paperwork/regulation that causes a burden to staff.

Methodology

AGENDA

COVID-19 IMPACT ON STAFF

COVID-19 IMPACT ON SERVICES

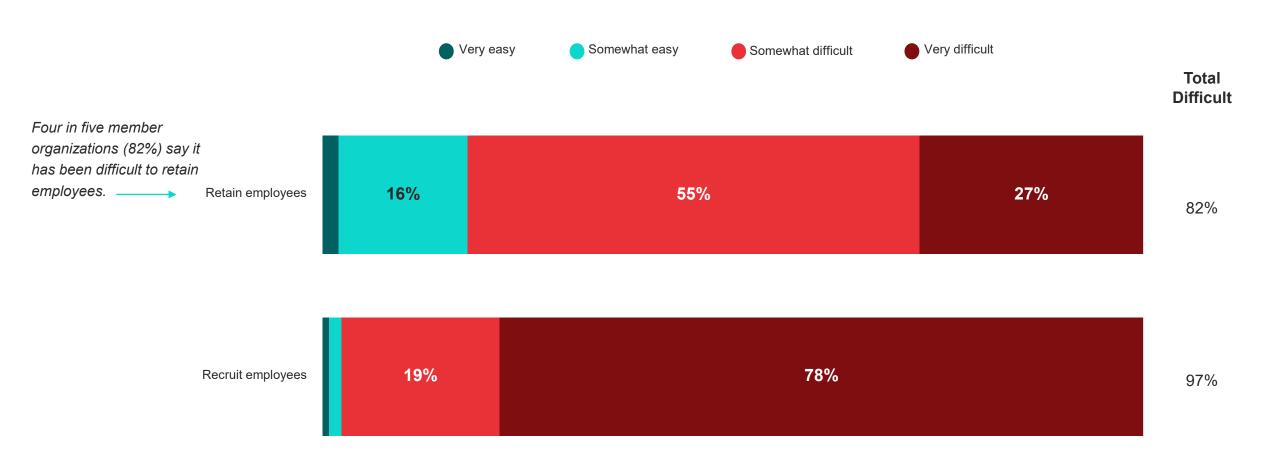
DEMOGRAPHICS





Nearly all member organizations surveyed (97%) say it has been difficult to recruit employees, including 78% who say it has been *very difficult*.

Overall, how easy or difficult is it for your organization to recruit and retain employees right now?



When asked what obstacles they're facing in recruiting employees, organizations reference the lack of applicants, specifically the lack of qualified staff, being able to offer competitive pay, and the impact of COVID-19 related stress on staff.

What are the main obstacles your organization faces in recruiting employees?

ORGANIZATIONS WHO SAID IT IS DIFFICULT TO RECRUIT EMPLOYEES, N=254

LACK OF APPLICANTS

"Lack of applicants, lack of applicants willing to work, people afraid of Covid, going to work in other fields, pay too low."

- "Lack of applicants. Lack of qualified applicants. Lack of applicants of diversity."
- "No applicants despite increased advertising on multiple websites & platforms. We presented at local colleges & universities, connected with Indiana Dept. Workforce Development, and reached out to former/retired employees. Nothing seems to increase the applicant pool."
- "We're getting very few applicants. When we contact the applicants to schedule an interview, most aren't returning our calls.

 When they do, they do not show for interview. When they show and we offer a job, many are turning down the offer.

SALARY/PAY

"Others have increased salaries and we are not able to compete."

- "As a small nonprofit, we have a hard time competing on the salaries big organizations or governments can offer."
- "Our pay scale is outdated due to no cost of living increases in our State contracts for 30 years"
- "Compensation level is low for entry level, and challenging, positions. Individuals can make the same, or more money, doing jobs not near as difficult/dangerous."

QUALIFIED STAFF

"We are having to hire more bachelors level clinicians to meet consumer needs but then leaves us short staffed for oncall crisis services."

- "Lack of qualified applicants, especially for clinical positions. Unable to pay competitive wages given current funding levels. Unable to find clinicians who are willing to work face to face, on site."
- "Workforce shortage, people have left the SUD field due to low pay and benefits and there are new people entering field. This is due to historically low reimbursement rates that have forced agencies to pay low wages and people to find other sources of work."
- 'There is a shortage of clinicians at every level. Additionally, we run a program for Spanish speaking clients and it is extremely difficult to find qualified counselors."

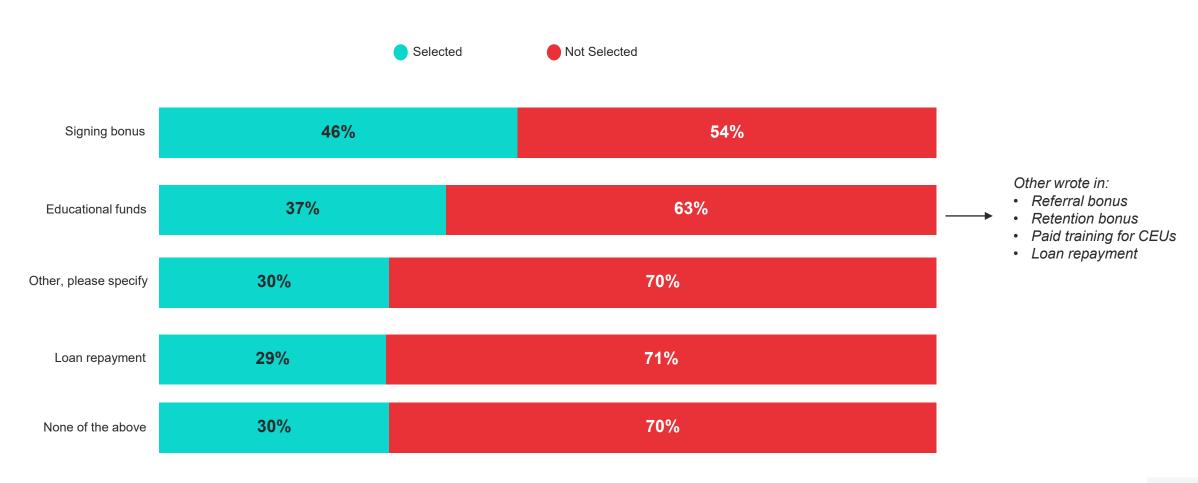
COVID-19 BURNOUT

"High caseload and high acuity clients can lead to burnout"

- "Burnout from providing prolonged virtual behavioral health services."
- "Diverse student body of highly qualified candidates"
- "COVID related stress and burnout of staff makes retention difficult."

The most common hiring incentive member organizations are currently offering is a signing bonus (46%), however 30% are not currently offering hiring incentives.

Is your organization currently offering the following hiring incentives? Please select all that apply.



Organizations not offering hiring incentives say they are not because they cannot afford to, are unsure of the effectiveness of incentives, and the impact offering incentives would have on current staff.

Why is your organization not currently offering hiring incentives?

ORGANIZATIONS NOT CURRENTLY OFFERING HIRING INCENTIVES, N=77

CANNOT AFFORD IN BUDGET

66

"They are not offered at this time, our budget doesn't allow for this.

UNSURE OF ROI

"Unsure if hiring incentives lead to long term retention."

IMPACT ON CURRENT STAFF

66

"It damages credibility and morale of current staff. Not fair to them and we couldn't give enough of a ""boost"" to make up the difference in pay."

STAFF SHORTAGES

"We don't have the internal capacity to manage incentive programs. We have lots of ideas, but given such staff shortages and running from crisis to crisis on the work force/recruiting front, our team has been unable

to rule out incentives.'

66

"Flat budgets prevent us from doing so there's not a lot of wiggle room in our budgets." 66

"Hiring bonuses are not effective. For example a local refuse company is offering \$7500.00 sign on bonus to drive a garbage truck! We cant compete with that..."

66

"Because our current/loyal staff would should also receive an incentive which makes it financially impossible." 66

"The loan
reimbursement option is
too complicated, and we
do not have the
administrative staff to
manage another
program."

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COVID-19 IMPACT ON SERVICES

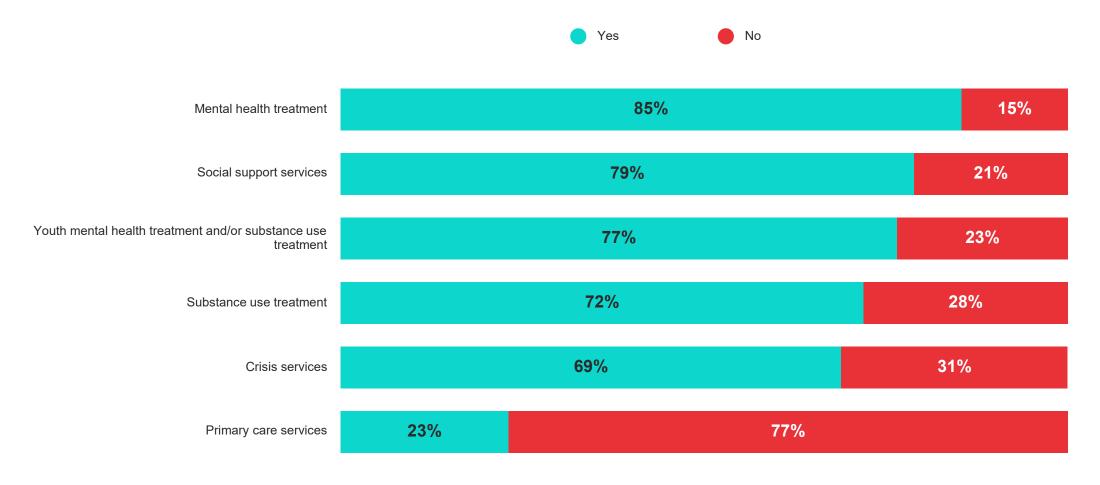
DEMOGRAPHICS



COVID-19 IMPACT ON SERVICES

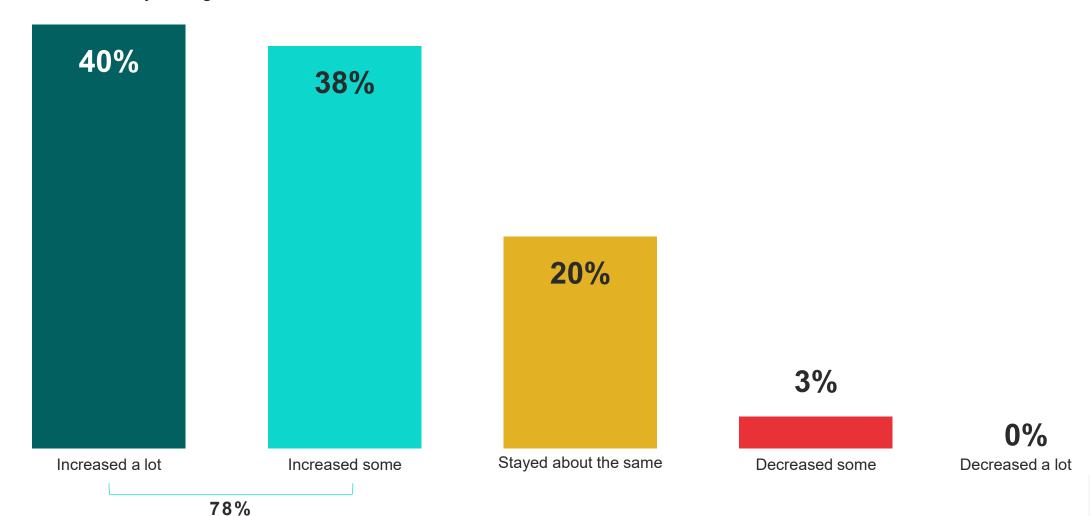
A majority of organizations surveyed offer mental health treatment (85%), social support services (79%), youth services (77%), substance use treatment (72%) and crisis services (69%).

Does your organization offer services for the following?



Three quarters of members (78%) say demand for their organization's services have increased over the past 3 months.

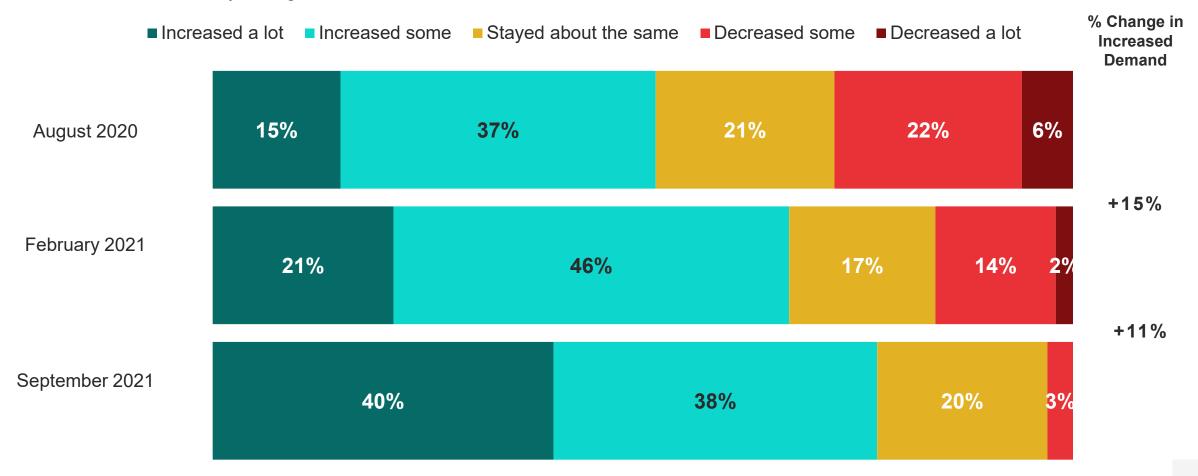
Has the demand for your organization's services increased, decreased, or remained the same over the last 3 months?



COVID-19 IMPACT ON SERVICES

Demand for behavioral health organizations' services has continued to increase. Since August 2020, there has been a 26% increase in organizations who say demand for their services has increased over the past 3 months.

Has the demand for your organization's services increased, decreased, or remained the same over the last 3 months?



Organizations top concerns in meeting increased demand include staff burnout and shortages, having qualified staff, and being able to meet client needs in a timely manner.

You mentioned demand for your organization's services has increased over the past 3 months. In a few words, what are your top concerns in addressing the increase in demand?

DEMAND FOR ORGANIZATION'S SERVICES INCREASED, N=202

STAFF BURNOUT

overburdened with having to cover for the open positions that we have. Being able to address the increased demand adds to this. Staff are overly stressed, overwhelmed, and tired."

STAFFING SHORTAGES

We've closed intakes for new patients because staff are at full capacity therefore having to turn down services to people in need. Staff are burning out, have high case loads, and are covering for others."

QUALIFIED STAFF

of openings in our 30 year history, currently 10% of our workforce. Applications are not coming in at the normal rate and candidates that we do find are turning our offers down for higher pay - typically 15% or more higher. With colleges not being in person last year, we also have a smaller pool of new incoming people starting their careers."

CLIENT NEED

"The volume of people requesting services has increased slightly but the level of distress and crisis that people are experiencing is infinitely higher. We see more people in severe crisis due to homelessness, substance abuse and lack of hope. In our rural community, we don't have much in the way of housing or housing supports."

66

"Caseloads are too high and supervision loads are too large. People are overwhelmed and overworked, leading to more turnover and burnout." 66

"Staff turnover often creates a gap in services for people, this gap than creates a cycle of clients cycling through services. This has also created an increase in individuals accessing crisis services."

"We don't have enough staff including MD, masters level clinicians, case managers, and peers. We don't have many linkage and referral options because other CMHCs are in the same position."

66

"Clients not receiving mental health care in a timely manner."

COVID-19 IMPACT ON SERVICES

When asked what short-term policy would help organizations meet increased demand for services, members reference additional funding, continuing funding for telehealth services, updating reimbursement rates, and reducing paperwork requirements.

What short-term policy or regulatory relief would be helpful for your organization to meet the increased demand for your organization's services?

DEMAND FOR ORGANIZATION'S SERVICES INCREASED, N=202

ADDITIONAL FUNDING

TELEHEALTH SERVICES

REIMBURSEMENT RATES

PAPERWORK/REGULATION

66

"Increased funding that would support staff pay raises and bonuses."

"Continue to allow for full telehealth services. access and billing for such services. We need this flexibility."

'Increases in reimbursements for Medicaid and Medicare. differentiation in reimbursement for telephonic, virtual and inperson services (there are differences in the amount of risk staff are taking), relief funding that doesn't come with so many strings and regulations that we essentially need to hire additional accounting staff to do reporting.

"Lower requirements for some of the billable codes, increased rate of payment from Medicaid and Medicare, less paperwork for our agencies to have to complete, more money to improve technology."

66 "Increased funding to attract AND maintain excellent team members...we need more team members, but are not willing to just get bodies...we need the resources to also train team members to deliver the level of quality services the community is accustomed to and should

expect."

"Continue to fund telehealth services fund substance abuse programming at the same rate as mental health services."

66

"This is not a short-term policy fix. Reimbursement rates are not high enough to justify necessary pay increases."

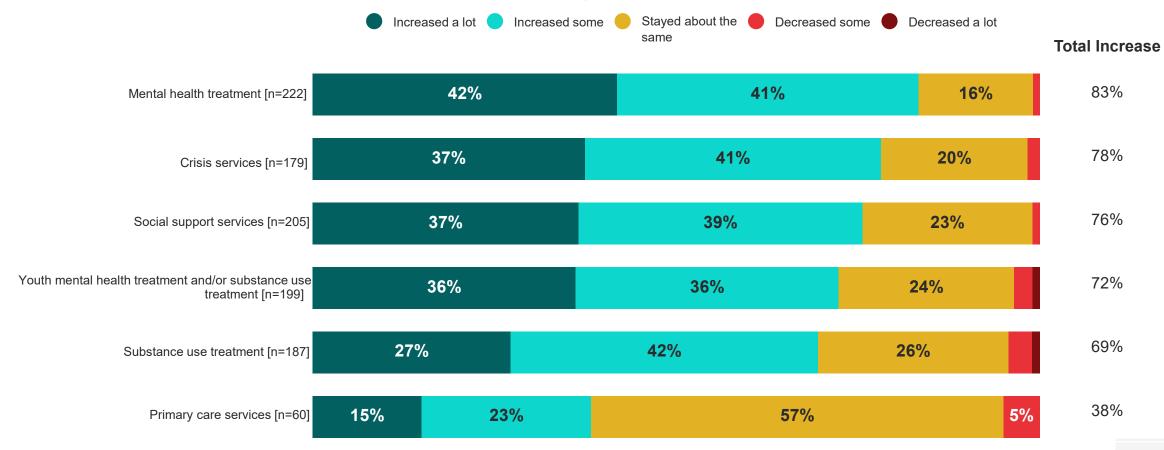
"We have lost staff due to increased paperwork requirements with Medicaid. Staff have other options where they don't have to spend hours on paperwork. Getting staff to work for a CMHC when there are so many other options without all the requirements.

COVID-19 IMPACT ON SERVICES

Organizations offering mental health treatment, crisis services, social support services, and youth services are most likely to say demand for these services has increased over the last 3 months.

Has the demand for the following services at your organization increased, decreased, or remained the same over the last 3 months?

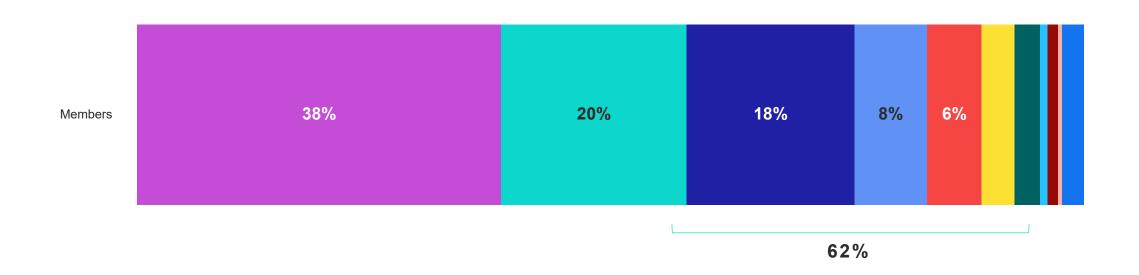
AMONG ORGANIZATIONS WHO SAY THEY OFFER TESTED SERVICES, N SIZE VARIES



Three in five (62%) member organizations say their patient waitlist has grown over the past 3 months.

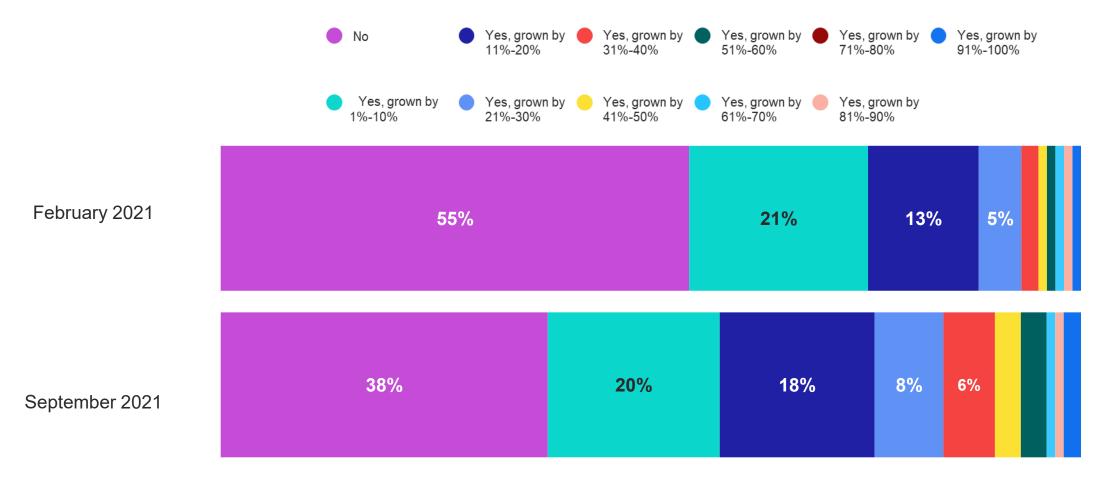
Has your organization's patient waitlist grown in the past 3 months? If yes, by what percent has your waitlist grown?





Since February 2021, the percent of Member organizations who say their waitlist has grown in the past 3 months increased 17%.

Has your organization's patient waitlist grown in the past 3 months? If yes, by what percent has your waitlist grown?



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COVID-19 IMPACT ON STAFF

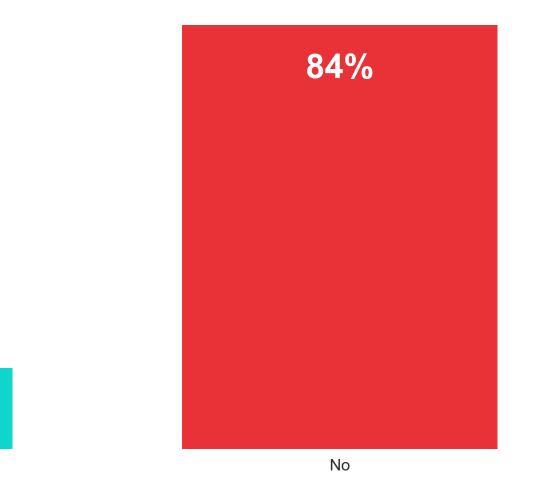
COVID-19 IMPACT ON SERVICES

DEMOGRAPHICS



About a sixth (16%) of member organizations surveyed say their organization is a CCBHC.

Is your organization a Certified Community Behavioral Health Clinic (CCBHC)?



Yes

16%

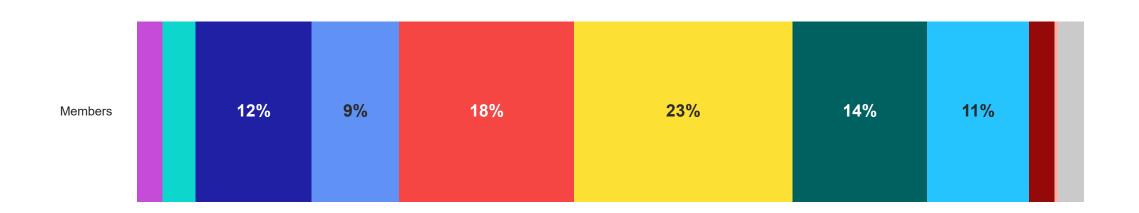


DEMOGRAPHICS

Member organizations with a variety of operating budgets were surveyed.

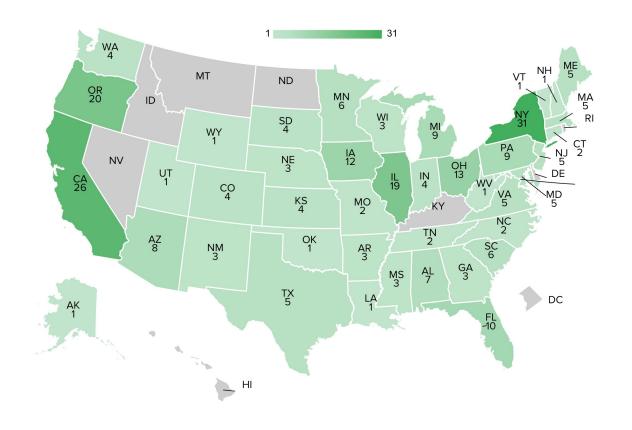
What is the size of your organization's annual operating budget?





Member organizations surveyed spanned the country, with the most surveyed in California and New York.

Location:



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