# Payer–Provider Partnership to Identify Successful Retention Strategies for the Behavioral Health Workforce

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### What Is the Purpose of This Study?

- A managed care organization and community-based providers collaborated to gain a better understanding of workforce issues
- The result of the collaboration was actionable steps based on merging field-tested, research-backed, and provider-perceived best strategies designed to improve staff retention.

#### What Is the Problem?

- Annual staff turnover rates are high, ranging from 25% to 50% in mental health agencies and 19% to 33% in substance use disorder agencies.
- High turnover rates in the behavioral health workforce are a burden and associated with:
  - Increased cost of recruiting and training new employees;
  - Increased strain on remaining employees (i.e., decreased morale);
  - o Inconsistent services, weaker therapist-client relationships; and
  - o Decreased access to care.

#### What Are the Findings?

- Sources of best strategies for retention were not always consistent.
- Successfully demonstrated but less used strategies included use of exit and stay interviews, training in best practices, availability of electronic records and other technology, and flexible work schedules.
- Seventeen percent of provider responses emphasized the type of employment offered (full or part time, benefits, competitive wage), 13% ability to offer trainings and staff development, 10% using staff feedback.
- Who Should Care Most?
- Administrators of behavioral health services and those who facilitate quality care—payers, mental health officials, and advocates.
- The behavioral health workforce of psychiatrists, clinicians, social workers, and others.
- · Individuals who receive behavioral health services.

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### **Recommendations for Action**

- Providers desire a vehicle for sharing ideas and problem-solving issues and should be given a routine forum for this purpose.
- Providers across systems should be given the opportunity to learn successful strategies from other providers.
- Low used, low burden and highly endorsed strategies identified by this study should be implemented by providers.