

PUGET SOUND BUSINESS JOURNAL

Behavioral Health Workers Deserve Better



One of the key priorities for the Washington Legislature this session has been overhauling our community behavioral health care system.

One area that is in vital need of increased funding is the behavioral health care workforce. If our behavioral

health care system is in a state of crisis, then its community-based workforce must be where significant investment is made.

It is a well-known fact that the need for behavioral health care treatment greatly exceeds the resources available. Inadequate numbers of psychiatric beds and aging, outmoded and limited community mental health facilities make the problems clear. But an underpaid community-based workforce presents an even more troubling trend for the industry, and the hundreds of thousands of people served.

According to the 2017 Washington State Behavioral Health Workforce Assessment, a report that outlined key issues facing behavioral health care, the

retention and recruitment of behavioral health care workers was reported as among our community's highest priorities. Low Medicaid rates cripple our workforce recruitment and retention efforts, and the meaningful, yet challenging nature of our work, coupled with stiff competition within the health sector, is proving too much.

Without something significant being done about Medicaid case rates, we will continue to lose legions of talented, dedicated and passionate people.

Too often, we lose talented, highly trained and experienced professionals to state and community hospitals — or even other sectors — that are able to pay higher salaries and wages. As an example of the disparities in compensation that master's level community behavioral health care professionals face, baristas at Starbucks are able to earn 100 percent tuition for first-time bachelor's degrees. We are unable to provide such benefits to our workforce.

Of those team members who do stay with their community behavioral health care organizations, the skyrocketing cost of living continues to drive them further from the city core, increasing commutes and burnout. This has, for years, been an issue with which the entire community behavioral health care industry has had to contend and one in which the gap is only widening.

With the continuum of behavioral health care being a priority on the legislative agenda, I strongly encourage our elected officials to back up the rhetoric around community behavioral health care — and push for the types of rate increases that ensure that behavioral health professionals receive a fair and equitable wage.

Community behavioral health care clinicians, case managers and social workers are the front-line providers — often serving our community's most acute, complex and costly patients. These professionals are critical to our community — yet exit interviews and employee surveys reveal what we already know: Pay is the single most prevalent reason talented people leave our industry.

When these talented, dedicated people leave after one, two or three years, we lose valuable people who have gained vital health care experience. Because of the critical shortage of behavioral health care workers, replacing departing staff is exceedingly challenging and time consuming, which increases the caseloads for our remaining staff.

As concerning as that is, even more troubling is that clients experience a significant loss. They lose someone with whom they've built a deep and trusting relationship, sometimes having to "start all over" with a new clinician. The loss of a trusted professional, coupled with the stressors associated with working with someone new, creates challenges for our clients and may result in regression in their pathways to recovery. If these breaks in continuity of care happen often enough, as they do, the client's experience suffers, hope is lost and their health can often get worse. When this happens at an industry-wide scale the effect is catastrophic.

When your most vulnerable lose support, lose hope and begin to regress, the rest of the taxpayer-funded social services system — emergency care, law enforcement, criminal justice, housing and health care systems — inevitably take up the slack. The increased burden strains the system and costs taxpayers more.

We realize that a number of priorities face our legislators. Education funding, infrastructure and other issues require attention. But if investing in community behavioral health care is the priority we all believe it to be, then our legislators must work to increase Medicaid rates to a level that enables the industry to pay our workforce a wage that reflects the true value they bring to our community every day.

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