

2020

Behavioral Health Employee Retention Factors In the Texas Panhandle

Contributor: PBHA Behavioral Health Provider Shortage Work Group



www.PanhandleBehavioralHealthAlliance.org

Contents

Executive Summary	2
Introduction	3
Purpose and Approach.....	3
Bx. Health Employee Retention in the Texas Panhandle	4
Respondents’ Clinical Background.....	4
Demographics	4
Survey Findings and Limitations	5
Input from HR Professionals and Academics	8
Recommendations	9
Organizational Intervention.....	10
Individual Intervention.....	11
Next Steps	11
Appendix A: List of Abbreviations	12
Appendix B: Behavioral Health Employee Retention Survey Results (Supplemental)—<i>Clinician Specific Data</i>	13
Appendix C: Behavioral Health Employee Retention Survey Summary Results	14

Executive Summary

Since 2019, the PBHA Behavioral Health Provider Shortage Work Group (WG), which consists of local educators and employers, has been working to improve the recruitment and retention capacity of the behavioral health (BH) workforce in the Texas Panhandle.

One project was to identify the retention factors among the BH workforce to better understand the issues for employers, and we used a 2020 online survey distributed to BH professionals in the Texas Panhandle. The survey gathered feedback from both clinicians and non-clinicians in the behavioral health sector regarding *mental well-being at work, career development, workplace culture and environment, job retention and other*.

Although the number of respondents is small (n=33) and the survey was administered while the region was either in the Orange or Red positivity rates during the COVID-19 pandemic, the feedback gathered here can be used to further the conversation regarding improving workforce retention rates in the mental health and addiction services sector. Overall, there was generally a positive response rate with respect to employee *mental well-being at work, career development, workplace culture and environment, and job retention*. However, the respondents also suggested the following changes in the workplace:

- better communication,
- salary increase,
- flexible schedule,
- more recognition,
- workplace/management support

The responses also indicated that clinicians with 15 or more years of experience gave a lower rating for work-life balance compared to those with less experience. This raises the issue of how burnout — a result of chronic workplace stress — is being addressed in the workplace. Considering burnout stems from within the workplace, organizational interventions may be more effective compared to individual interventions alone, and more so when organizational and individual interventions are combined since support is more effective when it comes from within the workplace and from the top down. Organizational interventions may include *leadership fostering a culture of well-being in the workplace; providing a safe environment for positive emotions; making employees feel valued at work; and ensuring a balanced workload for employees*.

PBHA recommendations include:

1. Employers form an internal committee with both leadership and employees to gather additional feedback specific to their workplace and address the findings and retention issues.
2. Have employees be actively engaged with administration to collaboratively address some of the retention issues by exploring and developing organizational interventions that prevent and address employee burnout.

Introduction

Panhandle Behavioral Health Alliance (PBHA) is a community collaborative, with stakeholders from diverse sectors in the community, that seeks to improve the mental well-being of our communities in the Texas Panhandle. PBHA is not a direct services provider, but works to address access to care in our area by focusing on three key areas:

- Workforce recruitment and retention of behavioral health professionals
- Prevention and early intervention of behavioral health conditions
- Access to behavioral health care, as well as alignment with physical health care and other local systems.

The Behavioral Health Provider Shortage Work Group (WG) is convened and facilitated by PBHA consists of local educators and employers interested in improving the recruitment and retention capacity of the behavioral health (BH) workforce in the Texas Panhandle. The Texas Panhandle area is located in the northernmost part of Texas and has a population of more than 400,000 with a low post-secondary attainment and graduate/professional retention rates.

The Provider Shortage WG began meeting in 2019 and decided to address this issue by examining both the retention factors and issues, as well as designing recruitment activities and solutions that will grow our own pipeline of BH professionals who will be educated and employed in our region. The group hosts opportunities for students to learn about behavioral health career paths and connect with mentors and employers in our area. One of the group's projects was to identify retention factors among the BH workforce to help employers better understand retention issues.

Purpose and Approach

In 2020, based on feedback from the Behavioral Health Provider Shortage WG's goal to improve retention of behavioral health professionals in the region, an anonymous online survey was developed to gain a better understanding of what factors influence employee retention with a behavioral health employer, as well as other workplace aspects. The survey was targeted to local behavioral health professional networking organizations, as well as mental health and addiction services agencies, to distribute the online survey to its employees or members for completion.

Since clinicians are providers who can affect a patient's care and have a more direct impact on treatment outcomes, survey respondents were categorized as clinicians and non-clinicians. Another reason for examining clinicians versus non-clinicians is the higher post-secondary educational requirements (usually a master's level and above) combined with additional internship/training hours before clinician receive their Licensed Credential.

Responses from clinicians were looked at reviewed in more detail because of the area's critical shortage of these professionals and the need to determine the factors involved in retaining them.

The Behavioral Health Employee Retention Survey is an anonymous 43-question survey with 6 different clusters of questions including, but not limited to: *mental well-being at work, career development, workplace culture and environment, job retention, and demographics*. Survey questions were answered with open-ended, multiple choice or yes/no options. The survey was distributed electronically via SurveyMonkey to local organizations between the end of August and the beginning of November 2020.

The feedback shared in this report is meant to start a conversation among employers regarding how to improve retention factors and values in the behavioral health sector for our region. It is hoped that the responses shared here will spark conversations and internal evaluations that will lead to changes in policies and practices in the workplace leading to improved retention rates.

Bx. Health Employee Retention in the Texas Panhandle

Respondents' Clinical Background

A total of 33 respondents submitted the survey, including 17 clinicians and 16 non-clinicians (see Appendix B for a breakdown of responses for clinicians vs. non-clinicians). Since clinicians are one of the most essential resources affecting patient care, it is important to consider and differentiate the two groups when reviewing the data.

According to Centers for Medicare & Medicaid Services (CMS), clinicians are those who provide *“principal care for a patient where there is no planned endpoint of the relationship; expertise needed for the ongoing management of a chronic disease or condition; care during a defined period and circumstance, such as hospitalization; or care as ordered by another clinician.”*

The survey's clinician respondents were comprised of Licensed Chemical Dependency Counselors (LCDC), Licensed Clinical Social Workers (LCSW), Licensed Master Social Workers (LMSW), Licensed Professional Counselors (LPC), National Certified Counselors (NCC), and Registered Nurses (RN).

The survey's non-clinician respondents included Licensed Baccalaureate Social Workers (LBSW), Case Managers, Community Health Workers (CHW), Mental Health Technicians (MHT), Qualified Mental Health Professionals (QMHP), administrators, AISD Student & Family Advocates, and office managers.

Demographics

Survey respondents were also asked to share their clinical credentials, the number of years working in the BH sector (less than 1 yr; 1 to 4 yrs; 5 to 15 yrs; and 15+), highest educational level attained, and the size of their employer (Small =14 or less employees; Medium = 15 to 49 employees; and Large = 50+ employees).

Overall findings about all the respondents were:

- 82% were employed full-time
- 73% were employed at large employers (50+ employees)
- 70% had 5+ years of experience
- 70% held a master’s degree

FIGURE 1: Categorization and number of survey respondents.

Group	# of Respondents
Clinicians	17
Non-clinicians	16
Total	33
Clinicians: *License/Certification	
Clinician Credentials of respondents included: <i>LPC, LCDC, NCC, LCSW, LMSW and RN</i>	
Clinicians: Years Worked in BH Sector/Profession	
More than 15 years	6
5 to 15 years	7
1 to 4 years	4
Clinicians: Employer Size	
Large (50+ employees)	14
Small (1 to 14 employees)	3

**See Appendix A for a list of abbreviations.*

Findings for respondents who were specifically *clinicians* were that:

- 88% were employed full-time
- 82% were employed at large employers (50+ employees)
- 76% had 5+ years of experience
- 94% held a master’s degree
- 47% were Licensed Professional Counselors

Survey Findings and Limitations

The survey was administered during the COVID-19 pandemic when the community was either in the Orange or Red status for COVID-19 positivity rates, therefore, it’s helpful to contextualize the responses with the situation and the data. However, this was already a region that was marked with a low provider-to-population ratio where retention and recruitment of qualified candidates was already a key concern for area employers prior to COVID. One employer commented that due to

COVID-19, it might not have been the ideal time to ask for this feedback. Additionally, the low response rate makes it difficult to draw statistically significant conclusions.

Overall, findings for *both* clinicians (17 responses) and non-clinicians (16 responses) reported (n=33) that:

- 76% feel **valued** at work
- 69% reported they have **fun** at work
- 88% feel **mentally well** at work
- 70% were satisfied with the **perks and benefits** offered by their employer
- 69% receive ample **learning opportunities** at their current job
- 69% have a clear understanding of their **career or promotional path**
- 66% believe they will be able to **reach their full potential** at their current workplace
- 84% feel like their co-workers give each other **respect**
- 65% believe the leadership team takes their **feedback seriously**
- 83% would **re-apply** to their current job if given the chance
- 90% would **refer others** to work at their current place of work
- 80% would **not have chosen a different profession** than mental health (**satisfied with their career choice**)

The following were patterns found among clinicians vs non-clinicians, as well as clinicians that were grouped within their license/certification, years worked in the BH sector and employer size. As stated previously, a majority of the respondents worked for large employers having more than 50 employees.

Rating Scales (score between 0-10)

- Clinicians had a slightly higher rating score—between 0.5 and 1.1—regarding *happiness at work (average score of 7.8), work-life balance (average score of 7.0) and comfort level giving upwards feedback to supervisors (average score of 6.6)*, compared to their non-clinician counterparts.
- Clinicians in the BH sector with more than 15 years of experience had a rating of 6.5 for work-life balance, and those who have worked for less than 15 years had a rating of 7.3.

Mental Well-Being at Work

- Clinicians who have worked in the behavioral health field for at least 5 years reported having an overall better experience in the workplace, such as feeling valued at work and feeling mentally well, compared to clinicians who have worked less than 5 years in the behavioral health field.
- Clinicians who were counselors reported a higher, more positive rate regarding their mental health in the workplace, compared to social workers.
- 82% of clinicians felt that their employer protects their mental health, whereas 56% of non-clinicians do.

Career Development

- Clinicians who have worked in the BH field for at least 5 years reported higher positive response regarding learning opportunities and career pathway at work, as well as believing they will reach their full potential at work in comparison to clinicians who have worked in the field for less than 5 years.
- Non-clinicians had a higher positive response when it came to advancing their careers in the workplace in contrast to clinicians.
- Both clinicians and non-clinicians had similar positive responses when it came to feeling valued at work and feeling mentally well.

Workplace Culture & Environment

- Clinicians who were counselors reported higher positive response compared to social workers when asked about co-workers giving each other respect, management being transparent, and leadership taking employee feedback seriously.

Job Retention

- 90% of clinicians who were counselors are satisfied with their career choice (do not wish they would have chosen a different profession than mental health), compared to only 71% of social workers.
- 100% of respondents who were social workers said they would re-apply to their current job if given the chance and refer others to work at their current employment, whereas 80% of counselors would re-apply and 90% of counselors would refer others.
- 100% of all clinician respondents in the BH sector with more than 15 years of experience would re-apply to their current job if given the chance and refer others to work at their current place of employment.

Open-ended Questions

Respondents were also asked open-ended questions to give them opportunities to share and describe other thoughts. The responses (from both clinicians and non-clinicians) below are summarized for brevity and are listed in order of frequency, with the most frequent responses listed first.

FIGURE 2: Open-ended responses.

MENTAL WELL-BEING AT WORK	
Top 3-5 perks and benefits employees are satisfied with.	Flexible schedule, casual dress code, PTO, insurance benefits, holidays off/sick leave/vacation time
Additional benefits employees <u>would like</u> at work.	Higher pay/bonus, wellness program/mental health days, holiday pay, more PTO, performance/education-based incentives, sick leave

Biggest boost in employee mental health from their employer.	Feel valued/more praise, more time off/respect the time off, wellness program/mental health days, free meals
WORKPLACE CULTURE & ENVIRONMENT	
Frequency in receiving recognition from manager.	Some received recognition regularly (daily, weekly, monthly, often), while others not frequently (seldom, rarely, when needed, never)
Three words to describe workplace culture.	Top <u>positive</u> descriptions: Supportive, friendly, caring Top <u>negative</u> descriptions: Siloed, divided, stressful/overwhelming
Three things that should <u>change/improve</u> at the workplace.	Better communication, salary increase, flexible schedule, more recognition, workplace/management support
JOB RETENTION	
Primary reason for staying at the job the longest.	Job satisfaction/helping others, flexible schedule/work-life balance, job advancement/professional growth, need paycheck
Hypothetical reason to resign the next day.	Not enough pay, frustrated with upper management/no support from supervisor, burnout, need more flexible schedule, retirement

Input from HR Professionals and Academics

Furthermore, PBHA reached out to Human Resource (HR) professionals and academics to gain their perspective on the feedback that was shared via the survey. They commented that:

- Though the respondents seem to be acceptably happy with their work, more work-life balance and positive reinforcement from supervisors can shift the turnover rate to a more favorable percentage rate.
- *An ideal or industry average of retention rate for the Health Sector “is difficult to determine an exact value, but it is very safe to say that the health sector (particularly medical) has among the worst turnover rates across all sectors. Multiple sources suggest that the health sector has turned over a disturbing 90% of its workers over the last five years. Burnout seems to be a key issue; particularly for nurses and clinicians.”*
– Rahul Chauhan, Ph.D. and Recruitment and Selection Professor at WTAMU
- Social workers and case managers appear to have a “servant’s heart” due to them seeming to enjoy their work and plan on staying within the behavioral health field.

Recommendations

PBHA recommends the following actions to be taken into consideration for local organizations and employers to increase or improve the recruitment and retention in our area.

- Ways to reduce the turnover rate for any organization are *“leadership support, extensive and accurate recruitment and selection (R&S) processes, and flexible work schedules are all supported by modern research as critical methods of reducing turnover. It is worth noting that leader support must be genuine and active, R&S methods should include person-job and person-organizational fit alongside realistic job previews and expectation lowering procedures where relevant, and flexible work schedules are among the most salient expectations of the modern and now majority workforce of millennials.”*
– Rahul Chauhan, Ph.D. and Recruitment and Selection Professor at WTAMU
- Two factors critical for retaining good employees are *“hiring employees with a servant’s heart and managers who have good leadership skills... employees with a servant’s heart are more empathetic and compassionate in their desire is to make things better for their customer/client,”* and managers with good leadership are more likely to value employees and hope for them to be successful in their work. Research has shown that employees are more likely to leave when *“managers lack the desire to help all employees become successful... (support) has to come from the top down.”*
– Kay Acton, SPHR (Senior Professional in Human Resources) Certified

Across several studies, it was found that 21% - 67% of mental health workers experienced signs of burnout.¹ Burnout is not a medical condition, but rather a result of chronic workplace stress.² It has three components that differentiate it from stress, which are:

- *emotional exhaustion* (feeling of depleted energy; worn-out and drained),
- *depersonalization of clients* (feel detached from the situation and others/patients; not present in the moment),
- and *feelings of ineffectiveness/incompetence or lack of personal accomplishment.*³

¹ Morse at al. (2012). Burnout in Mental Health Services: A Review of the Problem and Its Remediation. Retrieved from <https://doi.org/10.1007/s10488-011-0352-1>

² World Health Organization. (2019). Burn-out an "occupational phenomenon": International Classification of Diseases. Retrieved from <https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases>.

³ Maslach at al. (1997). Maslach Burnout Inventory: Third edition.

To address burnout for behavioral health professionals, the following are interventions that can help to reduce and prevent occupational burnout.^{4 5 6 7 8}

Organizational Intervention

The survey responses appear/seem to suggest that, in terms of career development, the *early years of working in the behavioral health field for employees are more stressful* compared to later in their careers due to the employee receiving proper mentorship, establishing workplace support and networking with other professionals, and learning how to manage work-life balance as they progress in their careers and incorporate self-care in their life.

As found in the survey data, clinicians in the BH sector with more than 15 years of experience had a lower rating of 6.5 when asked to rate their work-life balance, as opposed to those who have worked for less than 15 years with a rating score of 7.3. It is worth considering whether as clinicians advance in their careers, they assume greater responsibilities that could contribute to lower work-life balance. This could also suggest that the more years an individual is in the behavioral health field, the chances are higher that they have experienced burnout in the workplace. Since burnout is a result from chronic workplace stress and stems from within the workplace, organizational interventions may be more effective compared to individual interventions alone, and more so when organizational and individual interventions are combined.

- Support from the top-down. Leadership to foster a culture of well-being in the workplace, including support, involvement and a sense of community, while also offering trainings.
- Provide a safe environment for positive emotions. Cultivate a safe and open communication at work, including negative/sad emotions.
- Feeling valued at work. Offer rewards such as words of encouragement/positive messages, and not necessarily physical materials.
- Reduce workload for the employees and encourage them to say “no” to added responsibilities that may be overwhelming.

⁴ Morris, C. W., Richey, R. M., Martin, L. F., Morris, C. D. (2014). Dimensions: Work & Well-Being Toolkit for Physicians [PDF file]. Colorado. Retrieved from <https://www.bhwellness.org/resources/toolkits/BHWP-Physician-WWB-Toolkit.pdf>

⁵ Temple, K. M. (2020). Physician Burnout: Definition(s), Cause(s), Impact(s), Solution(s). Retrieved from <https://www.ruralhealthinfo.org/rural-monitor/physician-burnout-solutions/>.

⁶ Health Resources and Services Administration. (2018). Improving Well-Being Among Primary Care Trainees, Faculty and Clinicians: Optimizing Systems to Mitigate Burnout, Promote Resilience and Drive Quality of Care [PDF file]. Retrieved from <https://www.hrsa.gov/sites/default/files/hrsa/advisory-committees/primarycare-dentist/reports/actpcmd-15-report.pdf>.

⁷ Morse, G., Salyers, M.P., Rollins, A.L. et al. (2012). Burnout in Mental Health Services: A Review of the Problem and Its Remediation. *Adm Policy Ment Health* 39, 341–352. Retrieved from <https://doi.org/10.1007/s10488-011-0352-1>.

⁸ Bagnall, A. and Jones, R. and Akter, H. and Woodall, J.R. (2016) Interventions to prevent burnout in high risk individuals: evidence review. Project Report. Public Health England. Retrieved from https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/506777/25022016_Burnout_Rapid_Review_2015709.pdf.

- Self-care for the employees. Promote and place value on the importance of employees providing self-care.

Individual Intervention

- Self-care: Any activity that takes cares of one's mental, physical, emotional, spiritual health.
- Mental training techniques: Meditation and mindfulness; having a positive mindset; breathing techniques; yoga; more sleep.
- Exercise.
- Support from family and friends by connecting and socializing.

Next Steps

1. Employers may repeat the Behavioral Health Employee Retention Survey with their own employees and/or develop a committee to address findings and retention issues internally.
Considerations:
 - a. What are the career advancement and other opportunities in your workplace that can influence job retention?
 - b. Is there less work-life balance or self-care as one advances in their field and has greater responsibilities? How can this be addressed?
 - c. Which of the organizational interventions would you like to prioritize or address in the workplace?
2. Actively engage employees in the workplace and collaborate to address some of the issues.
3. Explore and develop organizational interventions to address employee burnout.

Appendix A: List of Abbreviations

AISD	Amarillo Independent School District
EAP	Employee Assistance Program
BH	Behavioral Health
CHW	Community Health Worker
CM	Case Manager
CMS	Centers for Medicare & Medicaid Services
HR	Human Resources
LBSW	Licensed Baccalaureate Social Worker
LCDC	Licensed Chemical Dependency Counselor
LCSW	Licensed Clinical Social Worker
LMSW	Licensed Master Social Worker
LPC	Licensed Professional Counselor
MHT	Mental Health Technician
NCC	National Certified Counselor
PBHA	Panhandle Behavioral Health Alliance
QMHP	Qualified Mental Health Professional
WG	Work Group

Appendix B: Behavioral Health Employee Retention Survey Results (Supplemental)—Clinician Specific Data

Behavioral Health Employee Retention Survey Results (Supplemental)



		OVERALL			License/Certification			Years worked in BH			Employer size	
		Clinicians	Non-clinicians	Clinicians & non-clinicians	Counselor (LPC, LCDC, NCC)	Social Work (LCSW, LMSW)	Nurse (RN)	More than 15 yrs	5 to 15 yrs	1 to 4 yrs	Large	Small
n value		17	16	33				6	7	4	14	3
RATING SCALE	Happiness at work (1-10)	7.8	7.3	7.5	7.7	8.4	5.0	8.3	7.6	7.3	7.6	8.3
	Work-life balance (1-10)	7.0	5.9	6.5	7.2	7.3	3.0	6.5	7.3	7.3	6.9	7.7
	Comfort level giving upwards feedback to supervisor (1-10)	6.6	6.1	6.4	7.8	6.0	0.0	8.0	6.6	4.8	6.2	8.7
MENTAL WELL-BEING AT WORK	Feel valued at work	71%	81%	76%	80%	71%	0%	83%	71%	50%	64%	100%
	Have fun at work	75%	63%	69%	70%	100%	0%	83%	67%	75%	69%	100%
	Feel mentally well	88%	88%	88%	90%	100%	0%	100%	83%	75%	85%	100%
	Place of employment protects mental health	82%	56%	70%	80%	100%	0%	83%	86%	75%	79%	100%
	Feel like taking time off from work is encouraged	59%	50%	55%	80%	29%	0%	67%	57%	50%	50%	100%
	Does not feel guilty when taking time off	53%	31%	42%	80%	29%	0%	50%	57%	50%	43%	100%
	Employer does not contact when on leave	47%	69%	58%	60%	29%	0%	67%	43%	25%	43%	67%
	Employer provides Employer Assistance Program (EAP)	82%	63%	73%	80%	86%	100%	83%	100%	50%	93%	33%
	Satisfied with the perks and benefits offered by employer	71%	69%	70%	80%	57%	0%	100%	71%	25%	64%	100%
CAREER DEVELOPMENT	Receive ample learning opportunities at current job	65%	73%	69%	70%	71%	0%	50%	86%	50%	57%	100%
	Have a clear understanding of career or promotional path	65%	73%	69%	90%	43%	0%	83%	57%	50%	57%	100%
	Believe will be able to reach their full potential at work	65%	67%	66%	80%	57%	0%	83%	71%	25%	57%	100%
WORKPLACE CULTURE & ENVIRONMENT	Feel like co-workers give each other respect at work	76%	93%	84%	90%	71%	0%	83%	71%	75%	71%	100%
	Feel like the management team at work is transparent	59%	36%	48%	80%	43%	0%	67%	57%	50%	50%	100%
	Believe the leadership team takes feedback seriously	65%	64%	65%	80%	57%	0%	67%	71%	50%	57%	100%
JOB RETENTION	Foresee themselves working at the same employer one year from now	71%	69%	70%	70%	86%	0%	83%	71%	50%	64%	100%
	Would re-apply to their current job, if given the chance	82%	85%	83%	80%	100%	0%	100%	71%	75%	79%	100%
	Would refer someone to work at their current employment	88%	92%	90%	90%	100%	0%	100%	86%	75%	86%	100%
	Does not wish would have chosen a different profession than mental health	82%	77%	80%	90%	71%	100%	67%	100%	75%	79%	100%
OVERALL					License/Certification			Years worked in BH			Employer size	

Notes:

- Data in percentiles refer to the positive responses (e.g. if 71% felt valued at work, then 29% felt they did not)
- 5 respondents had multiple certifications/licenses
- only 33 out of the 35 survey participants responses were used for data
- clinicians are those who provide: principal care for a patient where there is no planned endpoint of the relationship; expertise needed for the ongoing management of a chronic disease or condition; care during a defined period and circumstance, such as hospitalization; or care as ordered by another clinician
- LCSW: always--almost all insurances including Medicare and MCD will reimburse for their services
- LMSW: in TX, yes--Medicare and MCD will reimburse
- LBSW: no--can not provide services that are clinical in nature without supervision
- Case management: Only if it's specified as clinical case management

Clinicians	Non-Clinicians
LCDC, LCSW, LMSW, LPC, NCC, RN	LBSW, CM, CHW, MHT, QMHP, Administration, Student & Family Adv. AISD, Office manager

Key
CHW - Community Health Worker
CM - Case Manager
LBSW - Licensed Baccalaureate Social Worker
LCDC - Licensed Chemical Dependency Counselor
LCSW - Licensed Clinical Social Worker
LMSW - Licensed Master Social Worker
LPC - Licensed Professional Counselor
MHT - Mental Health Technician
NCC - National Certified Counselor
QMHP - Qualified Mental Health Professional

Appendix C: Behavioral Health Employee Retention Survey Summary Results

Please see below for the survey results for each question with response counts, response percentages and charts, including the open-ended responses.

Q1 On a scale of 0 to 10, how happy are you at work?

0 [Not at all likely]	1	2	3	4	5	6	7	8	9	10 [ExtremelyLikely]	Total	Weighted Average
0%	0%	0%	5.88%	2.94%	8.82%	11.76%	8.82%	26.47%	17.65%	17.65%		
0	0	0	2	1	3	4	3	9	6	6	34	7.53

Q2 On a scale of 0 to 10, how would you rate your work-life balance?

0 [Not at all likely]	1	2	3	4	5	6	7	8	9	10 [Extremely Likely]	Total	Weighted Average
%	0%	2.94%	14.71%	2.94%	8.82%	11.76%	29.41%	5.88%	17.65%	5.88%		
0	0	1	5	1	3	4	10	2	6	2	34	6.47

Q3 On a scale of 0 to 10, how comfortable do you feel giving upwards feedback to your supervisor?

0 [Not at all likely]	1	2	3	4	5	6	7	8	9	10 [ExtremelyLikely]	Total	Weighted Average
8.82%	0%	0%	14.71%	11.76%	2.94%	5.88%	11.76%	8.82%	20.59%	14.71%		
3	0	0	5	4	1	2	4	3	7	5	34	6.26

MENTAL WELL-BEING AT WORK

Q4 Do you feel valued at work?

Answer choices	Responses	
Yes	75.76%	25
No	24.24%	8
Total	33	

Q5 Do you have fun at work?

Answer choices	Responses	
Yes	68.75%	22
No	31.25%	10
Total	32	

Q6 Do you feel mentally well?

Answer choices	Responses	
Yes	87.50%	28
No	12.50%	4
Total	32	

Q7 Does your place of employment protect your mental health?

Answer choices	Responses	
Yes	69.70%	23
No	30.30%	10
Total	33	

Q8 Do you feel like taking time off from work is encouraged?

Answer choices	Responses	
Yes	54.55%	18
No	45.45%	15
Total	33	

Q9 Do you feel guilty if you take time off?

Answer choices	Responses	
Yes	57.58%	19
No	42.42%	14
Total	33	

Q10 Does your employer contact you when you're on leave?

Answer choices	Responses	
Yes	42.42%	14
No	57.58%	19
Total	33	

Q11 Does your employer provide Employer Assistance Program (EAP)?

Answer choices	Responses	
Yes	73.53%	25
No	26.47%	9
Total	34	

Q12 Have you used the EAP before?

Answer choices	Responses	
Yes	16.67%	4
No	83.33%	20
Total	4	

Q13 Please provide any feedback regarding the EAP.

Responses
It was an online text therapy. I don't think I benefited from this.

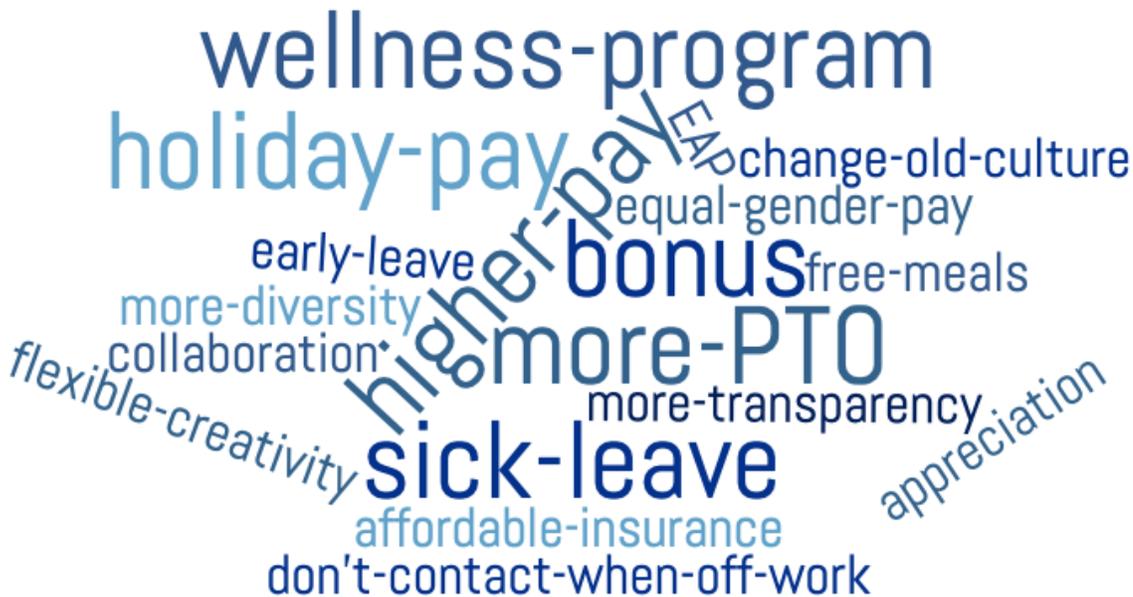
Q14 Are you satisfied with the perks and benefits offered by your employer?

Answer choices	Responses	
Yes	69.70%	23
No	30.30%	10
Total	33	

Q15 Please list the top 3-5 perks and benefits you're satisfied with.



Q16 What additional benefits would you like to see at your work?



Q17 What would be the biggest boost to your mental health from your employer?



CAREER DEVELOPMENT

Q18 Do you receive ample learning opportunities at your current job?

Answer choices	Responses	
Yes	68.75%	22
No	31.25%	10
Total		32

Q19 Do you have a clear understanding of your career or promotional path?

Answer choices	Responses	
Yes	68.75%	22
No	31.25%	10
Total		32

Q20 Do you believe you'll be able to reach your full potential here?

Answer choices	Responses	
Yes	65.63%	21
No	34.38%	11
Total		32

Q21 What new skills would you like to develop?

Responses
Any leads towards promotion. Not just minimal educational requirements.
New therapies for future use.
I am given time to develop any skills I like
working towards my masters to be able to do therapy
Better population management
DBT and CBT skills
management skills
New training opportunities for other forms of therapy.
therapy techniques and motivational interviewing techniques/more clinical experience to advance license
Would like to work on LCSW, so individual counseling skills,
better skills with children
Training and consultation for specific treatment modalities
Currently working in database development
EMDR, Biofeedback, DBT
n/a
Writing a blog, books
Unsure
Become more skilled at public speaking
unknown
More training in therapies
public speaking, managing staff
Karate
better therapy techniques
more counseling modalities
I would like to return to school to get a PhD.
program development and implementation
More knowledge.

Q22 What type of new projects would you like to be involved in?

Responses
Value based projects that have personal gratification. None like these exist for basic employees.
Advocacy for Mental Health and develop new support groups for mental health.
I don't want to be involved in any new projects but if I did, my company would support me.
none
Development of population management services and using technology to increase access
Trainings for new skills
I don't know
Creating a full integrated system for women's health and/or creating an online accessible holistic wellness program that gives anyone with a smart phone access to wellness tips, reminders, worksheets and or different professionals in a non threatening environment that is more easily accessible for busy lives.
youth intervention techniques and small groups
Safety and trauma informed care for the school district
MHFA in Youth
Trainings
Incorporating new database system for our company
Nothing comes to mind at the moment.
Mental Health for older adults
More local and surrounding areas community events.
Community projects. Learning opportunities
anything with mental health on campus
something new, innovative
Chopping boards. With my new karate skills
morale building
mentoring peer coaches
new ways to take treatment to people instead of bringing people to treatment.
Teaching, speaker, writing

WORKPLACE CULTURE AND ENVIRONMENT

Q23 Do you feel like co-workers give each other respect here?

Answer choices	Responses	
Yes	83.87%	25
No	16.13%	5
Total		31

Q24 Do you feel like the management team here is transparent?

Answer choices	Responses	
Yes	48.39%	15
No	51.61%	16
Total		31

Q25 Do you believe the leadership team takes your feedback seriously?

Answer choices	Responses	
Yes	64.52%	20
No	35.48%	11
Total		31

Q26 How frequently do you receive recognition from your manager?



JOB RETENTION

Q29 Do you foresee yourself working here one year from now?

Answer choices	Responses	
Yes	70.00%	21
No	30.00%	9
Total	30	

Q30 If you were given the chance, would you re-apply to your current job?

Answer choices	Responses	
Yes	83.33%	25
No	16.67	5
Total	30	

Q31 Would you refer someone to work here?

Answer choices	Responses	
Yes	90.00%	27
No	10.00%	3
Total	30	

Q32 Do you wish you would have chosen a different profession than mental health?

Answer choices	Responses	
Yes	20.00%	6
No	80.00%	24
Total	30	

Q33 What has been your primary reason to stay at a job the longest?



Q34 Hypothetically, if you were to quit tomorrow, what would your reason be?



Q35 What advice would you give to someone wanting to work in behavioral health?

Responses
Be open to everyone's situation. Ability to be transparent, but not manipulated. Willingness to listen.
Find ways to get self-care daily
Get your degree in social work instead of some other field of study
make sure and be religious about self-care
You are not the alone and it's ok to not know all the answers.
Please have a passion for it and have good self-care
are you sure? lol
Behavioral health is such a wonderful field with many avenues to "specialize" in and learning what area you thrive in can make all the difference.
Keep self-care and personal boundaries a priority
be prepared for a lot of paperwork, you need to be organized, it is a thankless but rewarding field you have to have conviction and appreciation for your skills and value you add to the community because most of the time no one else will tell you how valuable you are
the hours are long, the pay is minimal but when you love what you do its worth it. Make everyday count for something. Use your kindness and your gift to make a difference in the future for someone who can't help themselves right now
only do it if you're passionate about helping others
Work on yourself and listen to the words that you speak to others. Be kind to you.
what is your idea of how it will be? what is really is, think it over really well
Must be creative if you want to make money, otherwise you will most likely have low pay
it is a marathon not a race
To be prepared to have a lot of stress and responsibility.
it's a rewarding job
This can be rewarding work. Have solid boundaries. Work somewhere that helps you feel supported by your strengths
start at the bottom and work your way up to gain experience
Look at the data and research vs. information from colleagues
Don't.
need good work life balance
self-care self-care self-care!
have a strong support system that they actually use
It is difficult, the amount of work you do is not compensated for justly. Pick a good management team that you feel supported by as that is what will make it or break it in this difficult field.
Self-care

Q36 Please indicate your position/title:

Responses—*Not shared to preserve anonymity.*

Q37 Select all that apply. What certifications and licenses have you received:

Answer choices	Responses	
I am an intern	3.70%	1
Certified Family Partner	0%	0
Certified Nursing Assistant	0%	0
Certified Peer Specialist/Recovery Coach	0%	0
Clinical Psychologist	0%	0
Community Health Worker	7.41%	2
Licensed Chemical Dependency Counselor	7.41%	2
Licensed Clinical Social Worker	14.81%	4
Licensed Master Social Worker	18.52%	5
Licensed Professional Counselor	33.33%	9
Licensed Vocational Nurse	0%	0
Mental Health Technician	7.41%	2
Patient Care Technician	0%	0
Physician Assistant	0%	0
Psychiatric Nurse	0%	0
Psychiatrist	0%	0
Registered Nurse	3.70%	1
Other (please specify) working towards LMSW Qualified Mental Health Professional National Certified Counselor Educational Diagnostician, Teacher LBSW Parent Case Manager Administration	25.93%	7
Total		27

Q38 What is your jobs status?

Answer choices	Responses	
Part-time	3.45%	1
Full-time	93.10%	27
PRN or as needed	3.45%	1
Contractor (not an employee)	0%	0
Total		29

Q39 How many years have you worked in the Behavioral Health sector or in your profession?

Answer choices	Responses	
Less than a year	0%	0
1 to 4 years	20.69%	6
5 to 15 years	51.72%	15
More than 15 years	27.59%	8
Total		29

Q40 What is the highest educational level you have attained?

Answer choices	Responses	
High School/GED	3.45%	1
Associates	0%	0
Bachelors	17.24%	5
Masters	79.31%%	23
Ph.D or M.D.	0%	0
Total		

Q41 Did you receive your last credential or educational attainment while residing in the Texas Panhandle?

Answer choices	Responses		
Yes		86.21%	25
No		13.79%	4
	Total		29

Q42 Does your employer provide services only in Amarillo?

Answer choices	Responses	
Yes	27.59%	8
No	72.41%	21
Total		29

Q43 What is the size of your employer?

Answer choices	Responses	
Small (1 to 14 employees)	13.79%	4
Medium (15 to 49 employees)	3.45%	1
Large (50+ employees)	82.76%	24
Total		29