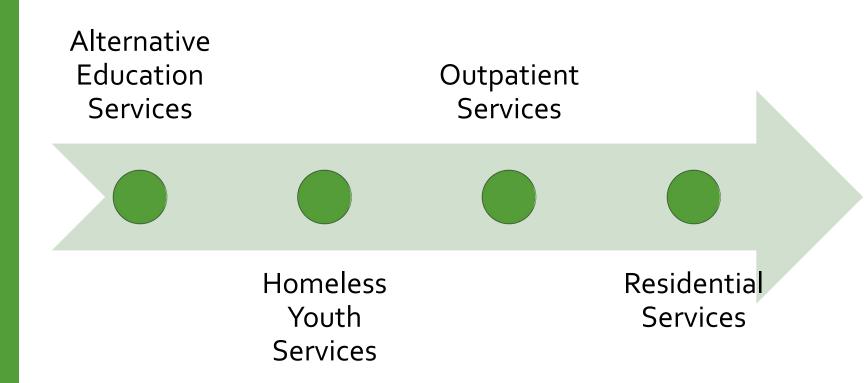


Looking Glass Community Services: Recruitment and Retention

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Services Across The Continuum of Care



Services Across The Continuum of Care

Homeless Youth Services

- New Roads (Urban)
- New Roads (Rural)
- Housing Programs
- Station 7
- 24/7 Help Line
- PEER Shelter
- BHRN Lane County Hotline
- Sex Trafficking Prevention Program

Alternative Education

- Center Point School
- Riverfront School
- Riverfront
 Career Center
- Independent Living Program
- New Roads School
- River Road
 School

Counseling Program

- Downtown Eugene
- West Eugene
- Springfield
- Junction City
- Alcohol and Other Drug Services
- School-Based Clinicians
- Psychiatry
- Skill Building
- Peer Support Services

Residential Services

- Regional Crisis Center (West)
- Regional Crisis Center (East)

Recruitment and Retention Successes for Outpatient and Residential Behavioral Health Care

- Community history/recognition.
- Administration with direct care experience.
- PTO accrual for internships.
- Range of positions for a spectrum of personal and professional experiences.
- Intensive onboarding training.
- Connections with local colleges/universities.
- Competitive pay relative to local peer agencies/stat bonuses.
- Telehealth.
- Opportunities for promotion across large spectrum of services.
- Professional development/supervision, and internal trainings.
- Agency culture that strives to support the cultural safety of staff and clients.
- Accountable to 13 different bodies of oversight.
- · Geography.

Recruitment and Retention **Barriers** for Outpatient and Residential Behavioral Health Care

- Senate Bill 710 (Loss of video recording and supine/prone restraints, loss of most effective restraint model, increased acuity of youth, increased aggression/injury of staff).
- · Acuity levels.
- Cost of insurance.
- Senate Bill 1515 (Increased fear of substantiation/litigation/reputation/investigation response time).
- Economic Considerations (Low reimbursement rates, fee-for-service models, lower wages, high cost of living).
- Marketing (No extra dollars that can be used to promote the behavioral health field).
- Workforce Considerations (Private practice competition and acuity levels. We are preparing the next generation of private practice clinicians and then losing them).
- Documentation/Oversight Requirements (Time spent to complete documentation is time away from clients; administrative time spent to respond to 13 different oversight bodies is extensive).
- House Bill 2020 (Reciprocity was never adopted, inconsistent CCO Utilization Reviews, and panel acceptance).

Lane County has a nonprofit quantity problem.

- Today, there are 3,807 non-profits in Lane County. ~ <u>Lane County</u>
 <u>Oregon Nonprofits and 501C Organizations Search and Download</u>
 <u>Lists</u>
- Just 4 are nationally accredited and one of those is our hospital.
- This creates an environment that results in accredited and licensed agencies not being able to achieve critical fundraising goals.

Oversight Bodies



Disability Rights of Oregon

Recommendations for Removing Barriers to Recruitment and Retention

- Revisions of SB 710 and SB 1515.
- Adherence to HB 2020.
- Simplify oversight.
- Cost of care reimbursement rates that match wage demands.
- Limit the paneling of private practice clinics.
- Incentivize clinicians at different tier levels who remain with CCA's post-licensure for 3,4, and 5+ years (loan payoffs, bonuses, etc.).
- Incentivize residential workers at different tier levels who remain with CCA's for 3,4, and 5+ years (loan payoffs, bonuses, etc.).
- Develop an educational track/major that is specific to facility-based care.
- Capacity Contracts.
- Change the residential mindset/reputation.
- Market/promote the work.

Questions?

Thank you for the opportunity to share about Looking Glass and thank you for your efforts to support our current and future workforce.