

The North Carolina Mental Health and Substance Abuse Workforce

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About Me



Presentation Overview

- The North Carolina Health Professions Data System (HPDS)
- Supply of Behavioral Health Workers
- Geographic Distribution
- Data Gaps and Challenges
- Future Directions

North Carolina's health workforce data is the envy of the other 49 states

- Over 30 years of continuous, complete licensure (*not survey*) data on 19 health professions from 12 boards
- Data are provided *voluntarily* by the boards—there is no legislation that requires this, there is no appropriation
- Data housed at Sheps but remain property of licensing board, permission sought for each “new” use

The North Carolina Health Professions Data System (HPDS)

Mission: to provide timely, objective data and analysis to inform health workforce policy in North Carolina and the United States

Based at Cecil G. Sheps Center for Health Services Research at UNC-CH but mission is statewide

Three main service lines:

1. Provide data and research
2. Conduct policy analyses
3. “Engaged scholarship” that serves state and nation

Professions in the HPDS

- Certified Nurse Midwives
- Chiropractors
- Dental Hygienists
- Dentists
- Licensed Practical Nurses
- Nurse Practitioners
- Occupational Therapists
- Occupational Therapy Assistants
- Optometrists
- Pharmacists
- Physical Therapists
- Physical Therapist Assistants
- Physician Assistants
- Physicians (MDs & DOs)
- Physicians in Residency Training
- Podiatrists
- Practicing Psychologists
- Psychological Associates
- Registered Nurses
- Respiratory Therapists

Who are we Missing?

- Social Workers
- Licensed Professional Counselors
- Licensed Clinical Addiction Specialists
- Marriage & Family Therapists
- Peer Counselors
- Other Unlicensed Workers

Behavioral Health Practitioners Tracked in the HPDS, 1979-2013

- Psychiatrists
 - All Psychiatrists
 - Child Psychiatrists
 - Geriatric Psychiatrists
 - Addiction Focused Psychiatrists
- Psychologists
- Psychiatric Nurse Practitioners

Now, let's dive into the data!



In 2013, North Carolina had more psychiatrists per capita than SC, GA and TN, but fewer than the national average

State	Number of Psychiatrists	No. Per 10,000 Population
NC	1191	1.21
SC	509	1.07
VA	1005	1.22
GA	958	0.96
TN	575	0.88
Total U.S.	47,205	1.49

*Data derived from the 2013 AMA Masterfile

*Population data from the U.S. Census Bureau

	Number	No. Per 10,000 Pop	Population Used
Child Psychiatry	235	1.03	Ages 0-17
Geriatric Psychiatry	82	0.59	65+
Addiction Medicine	70	0.07	Total Population

*Data derived from the HPDS

More Social Workers and Psychologists per capita in NC than Psychiatrists

2013	Number	No. Per 10,000 Pop
NC Psychologists	2,134	2.17
U.S. Estimate, Psychologists (2014)	106,500	3.34
Psychiatric Nurse Practitioners	140	0.14
U.S. Estimate, Psych NPs (2014)	7,585	0.24
Social Workers	8,441	8.6

But, NC is still lagging behind the national average

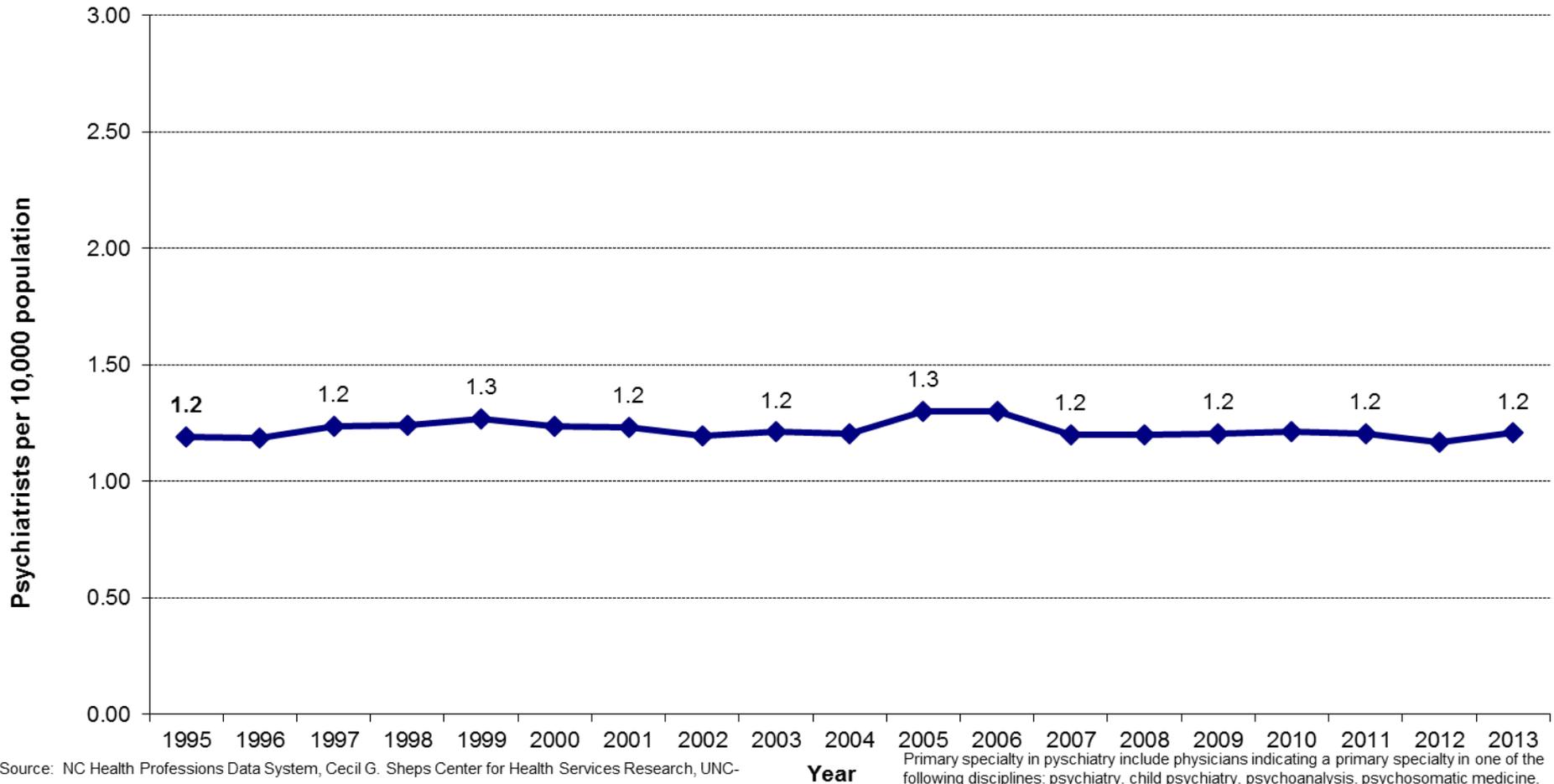
* Population data from the U.S. Census Bureau

* National Psychologist estimate from the APA (2014): <http://www.apa.org/support/about/psych/numbers-us.aspx#answer>

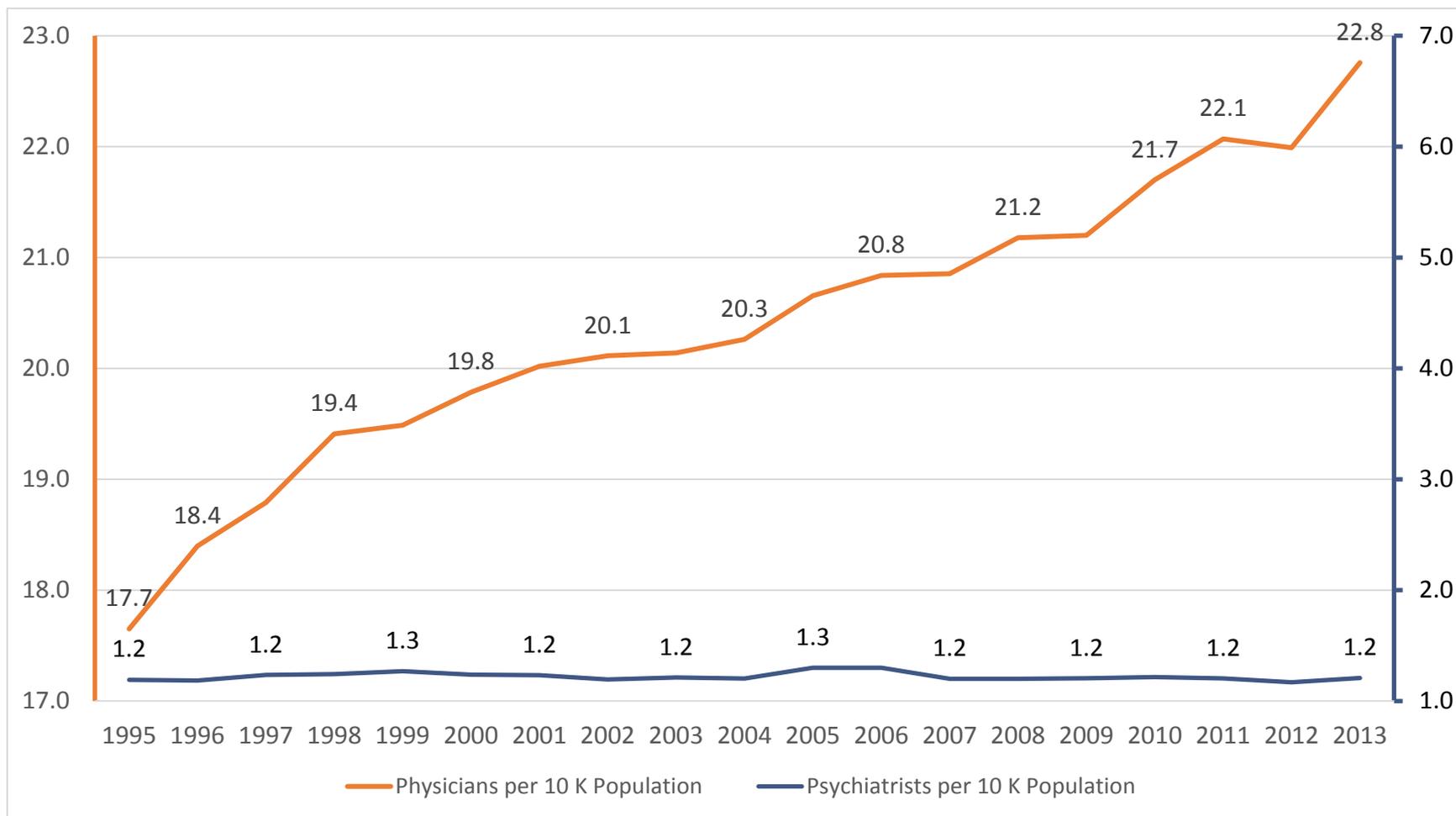
* Social work data from the NASW, includes LCSW & LCSW-A

* National NP data from: <http://www.aanp.org/all-about-nps/np-fact-sheet>

Psychiatrist numbers per capita stable over time in North Carolina 1995-2013

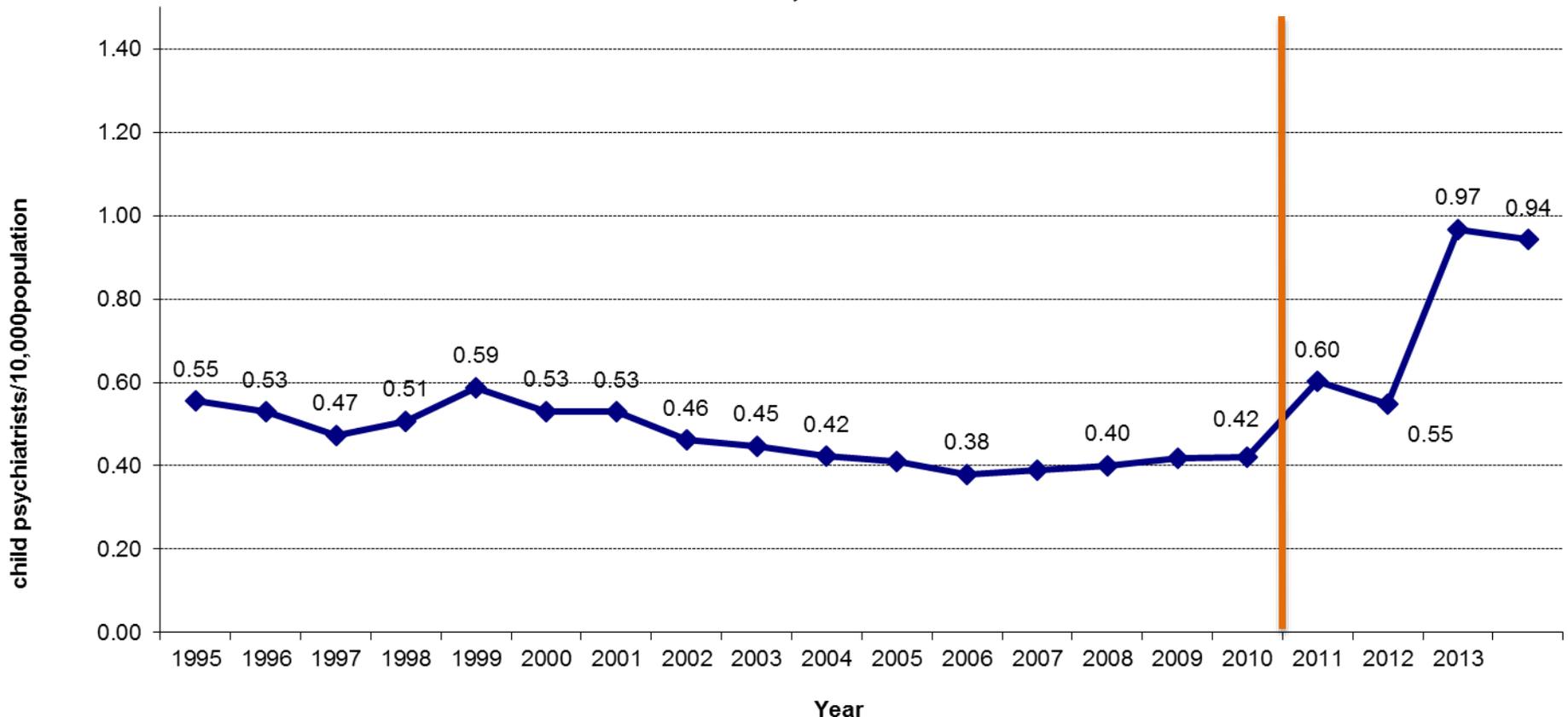


Overall physician numbers however, increase over time



Recent increase in child psychiatrists likely due to changes in reporting methods

Child Psychiatrists per 10,000 Child Population, North Carolina, 1995-2014



Source: NC Health Professions Data System, Cecil G. Sheps Center for Health Services Research, UNC-CH, with data derived from the NC Medical Board and NC Medical Society, 1995-2008.

Geographic Distributions of Behavioral Health Practitioners in North Carolina



Image from www.imagesofnorthcarolina.com



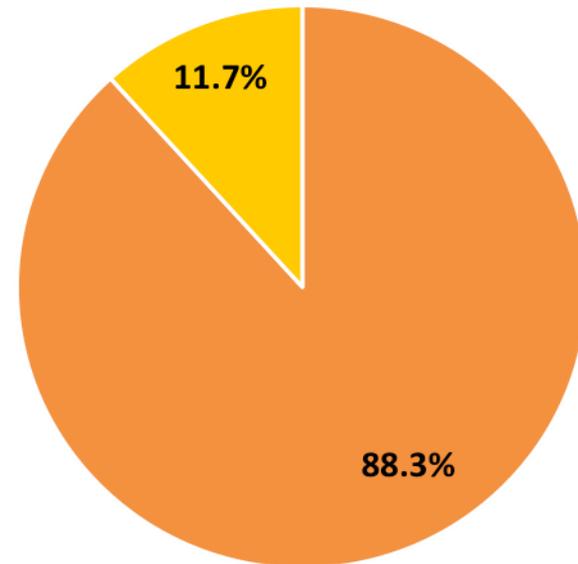
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11.7% of Psychiatrists in rural areas compared to 22.4% of the population

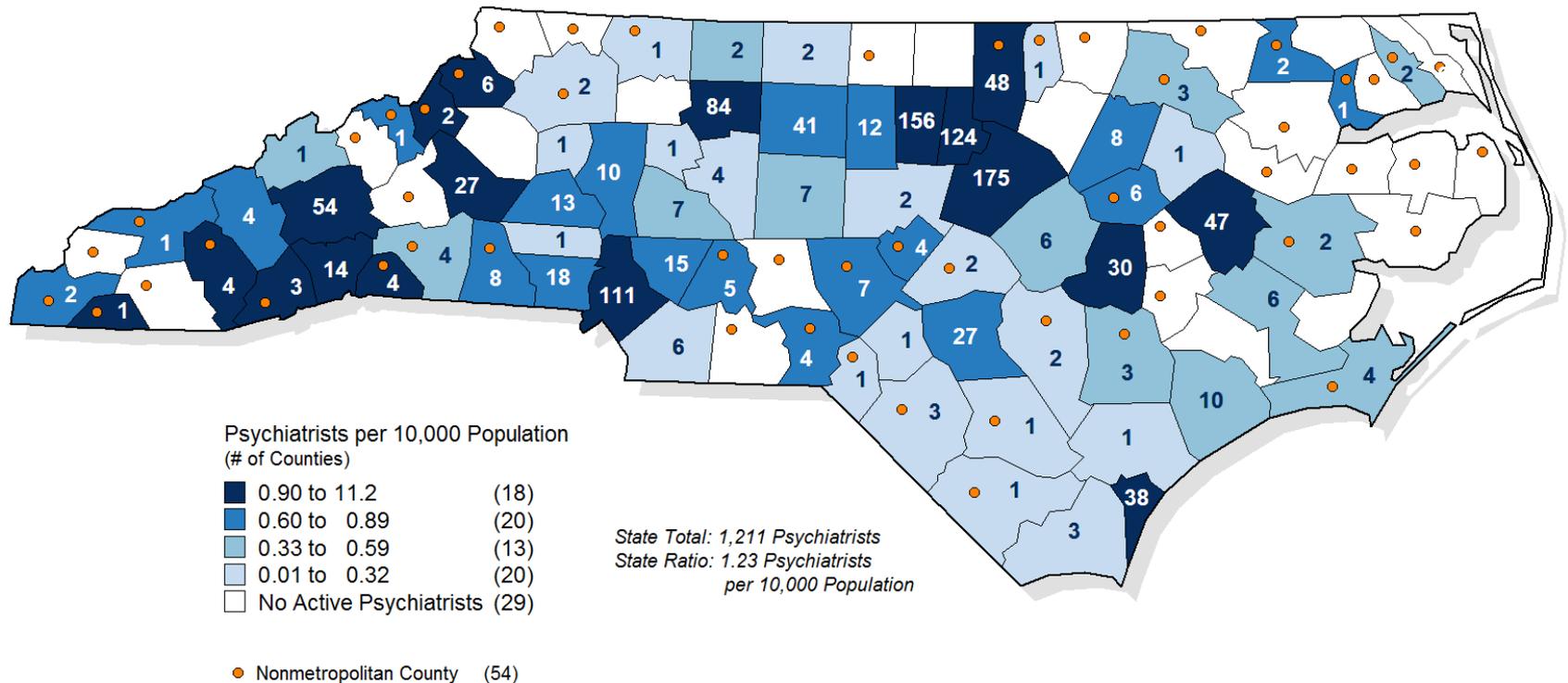
Psychiatrists in North Carolina by Rural/Urban Status 2013

22.4% of North Carolinians live in rural areas



Urban Rural

Psychiatrists per 10,000 Population North Carolina, 2013



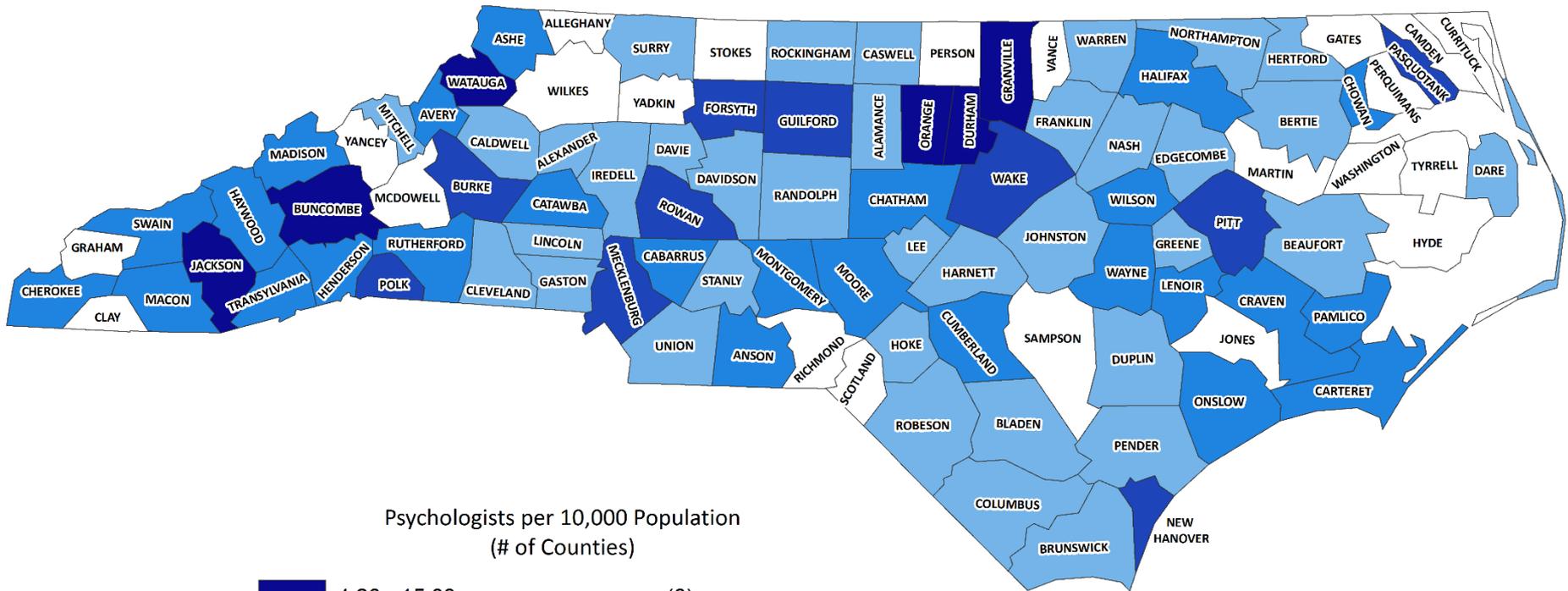
Source: North Carolina Health Professions Data System, with data derived from the North Carolina Medical Board, 2013; US Census Bureau and Office of Management and Budget, March 2013.

Note: Data are based on primary practice location and include active, in-state, nonfederal, non-resident-in-training MDs and DOs licensed in NC as of October 31, 2013 who indicate that their primary area of practice is psychiatry, child psychiatry, psychoanalysis, psychosomatic medicine, addiction/chemical dependency, forensic psychiatry or geriatric psychiatry. "Core Based Statistical Area" (CBSA) is the OMB's collective term for Metropolitan and Micropolitan Statistical areas. Here, nonmetropolitan counties include micropolitan and counties outside of CBSAs.

Produced by: Program on Health Workforce Research and Policy, Cecil G. Sheps Center for Health Services Research, University of North Carolina at Chapel Hill.

Map labels reflect the number of psychiatrists within the county.

Psychologists per 10,000 Population North Carolina, 2013



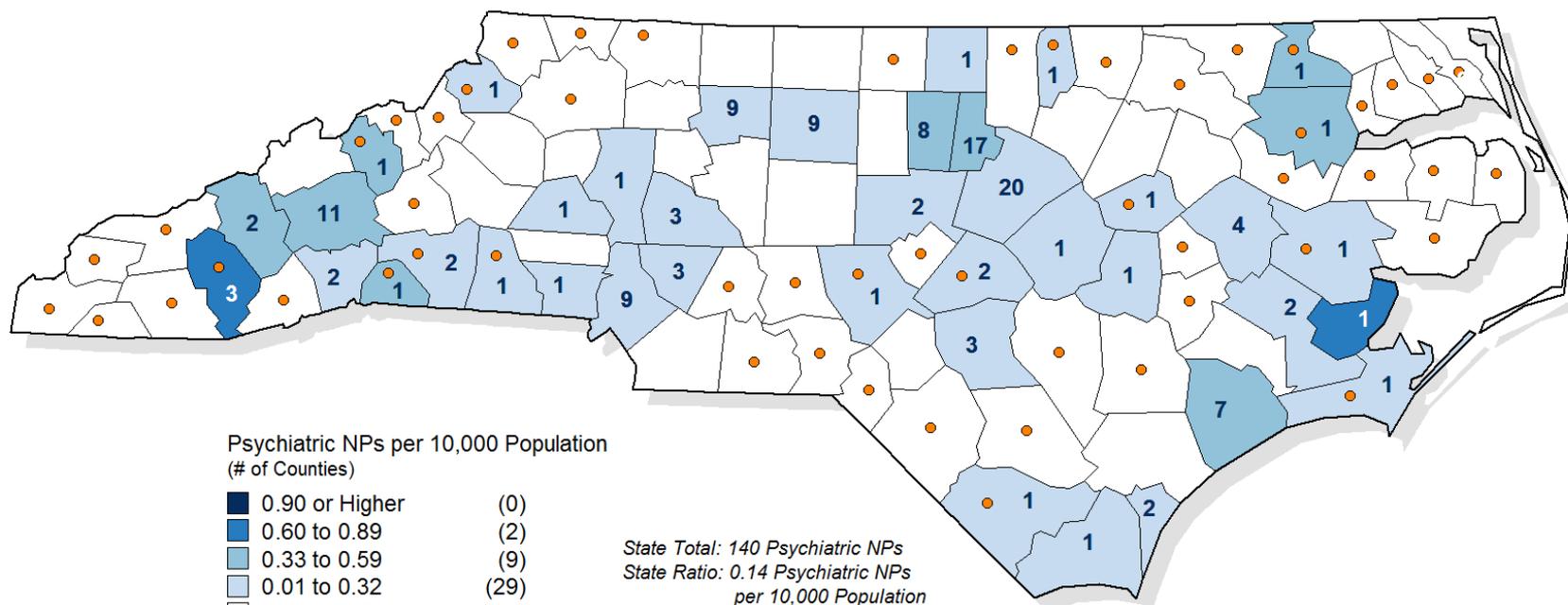
Psychologists per 10,000 Population
(# of Counties)

	4.26 - 15.03	(6)
	2.06 - 4.25	(10)
	0.66 - 2.05	(26)
	0.01 - 0.65	(36)
	No Active Psychologists	(22)

N=2,134

NC rate= 2.16

Psychiatric Nurse Practitioners per 10,000 Population North Carolina, 2013



Map labels reflect the number of psychiatric NPs within the county.

Source: North Carolina Health Professions Data System, with data derived from the North Carolina Board of Nursing, 2013; US Census Bureau and Office of Management and Budget, March 2013.

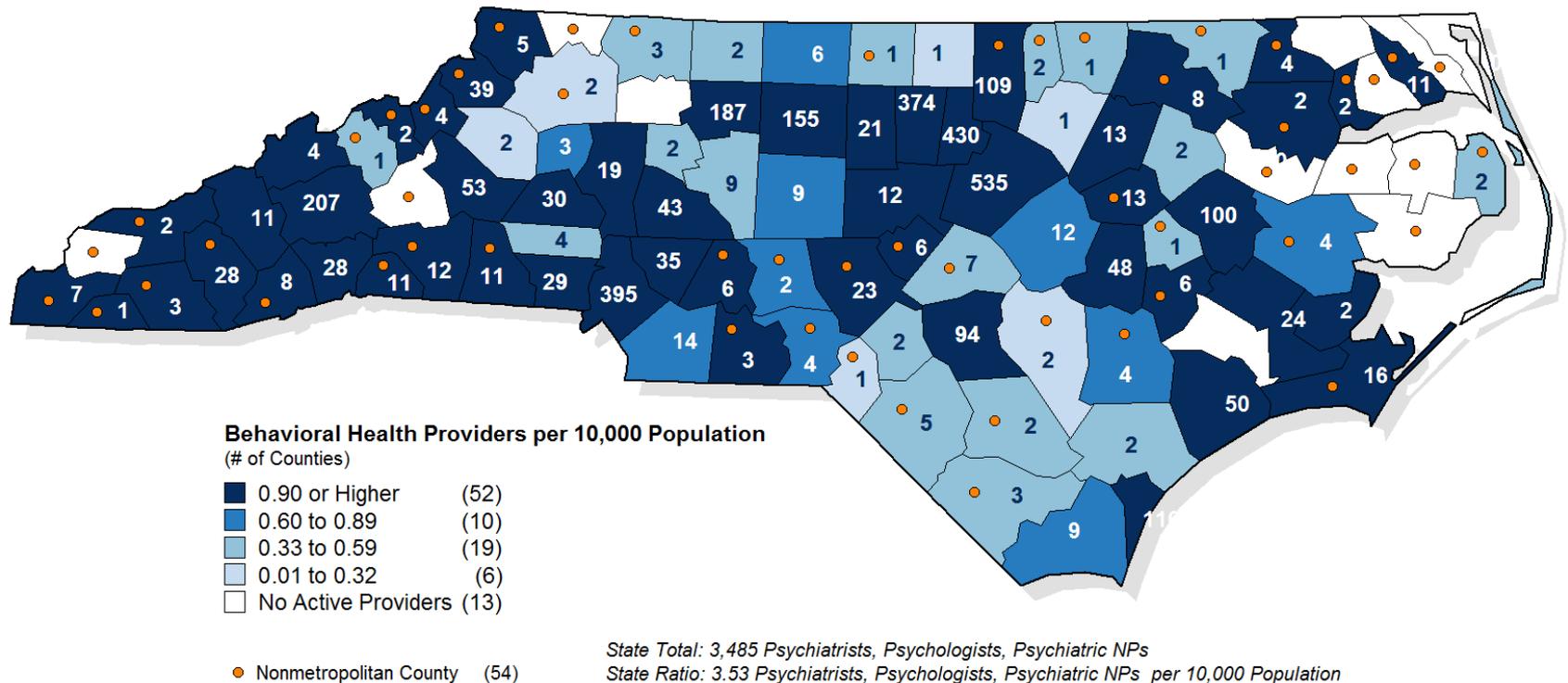
Note: Data are based on primary practice location and include active, in-state nurse practitioners licensed in NC as of October 31, 2013 who indicate an education credential of "psychiatric mental health nurse practitioner." "Core Based Statistical Area" (CBSA) is the OMB's collective term for Metropolitan and Micropolitan Statistical areas. Here, nonmetropolitan counties include micropolitan and counties outside of CBSAs.

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Map labels reflect the number of psychiatric NPs within the county.

Where are the gaps?

Selected Behavioral Health Providers per 10,000 Population, North Carolina, 2013



Source: North Carolina Health Professions Data System, with data derived from the North Carolina Medical Board, North Carolina Board of Nursing, and North Carolina Psychology Board, 2013; US Census Bureau and Office of Management and Budget, March 2013.

Note: Data are based on primary practice location and include active, in-state, nonfederal, non-resident-in-training psychiatrists, and active, in-state psychologists and psychiatric NPs licensed in NC as of October 31, 2013. "Core Based Statistical Area" (CBSA) is the OMB's collective term for Metropolitan and Micropolitan Statistical areas. Here, nonmetropolitan counties include micropolitan and counties outside of CBSAs.

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Map labels reflect the number of psychiatrists, psychologists and psychiatric NPs within the county; map excludes psychological associates.

Challenges



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North Carolina Faces Important Data Gaps

- We only have data on primary practice sites, not on other practice locations
- HPDS data don't include important elements of the behavioral health workforce
 - Social Workers are largest group of clinicians with behavioral health training
 - LPCs, MFTs, LCAS
 - Unlicensed Workers
- Emerging Roles: Peer Counselors, Substance Abuse Counselors, etc.
 - Current data do not capture how many we have, where they are practicing or types of services they provide

Challenges: Emerging Roles and the Changing Healthcare System

- Need more community based psych rotations for medical students, nursing students and others
- And more clinical placements in team-based, integrated models of care
- Social workers increasingly being deployed in Patient Centered Medical Homes
- Next year, our Health Workforce Center will investigate emerging roles for social workers in PCHMs, the knowledge and skills required of social workers, and the barriers and facilitators to deploying social workers on interprofessional teams

How do we get where we need to be?



We need a comprehensive mental health workforce study in the state

- Analyze data on existing health professions in HPDS—psychiatrists, psychologists, psych NPs and PAs
- Collect and analyze data on social workers, licensed professional counselors and licensed marriage therapists
- Study would fit with National Governors Association project focused on workforce needed to serve Medicaid population

Much more research is needed, here are a few “hot topics”

- Need better understanding of workforce needs in integrated delivery models—what are the variants, workforce development needs and how are they working?
- Quantifying the shortage of mental health workers needed to address growing need for geriatric health services.
- Lack of racial/ethnic diversity of the workforce and the need for more cultural competency training
- Workforce challenges in the criminal justice system (shortages are the main issue but followed closely by recruitment, retention and workforce development challenges)
- Quantifying the child mental health crisis—who is providing services and where? Where are the gaps and how might we address them?

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