The North Carolina Mental Health and Substance Abuse Workforce

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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 licensed/unlicensed Workers

Psychiatrists per 10k



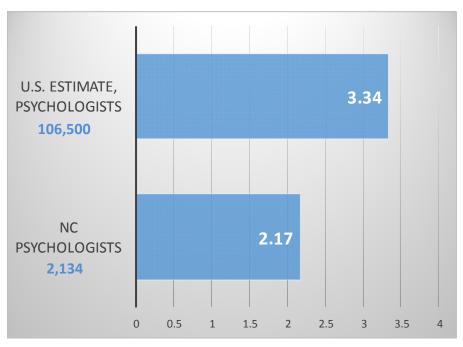
In 2013, North
Carolina had more
psychiatrists per
capita than SC, GA
and TN, but fewer
than the national
average.

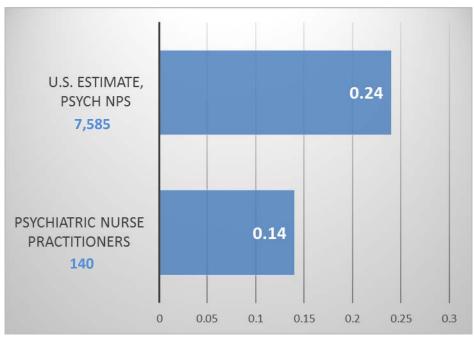
*Data derived from the 2013 AMA Masterfile

*2013 Population data from the U.S. Census Bureau



NC is lagging behind national averages



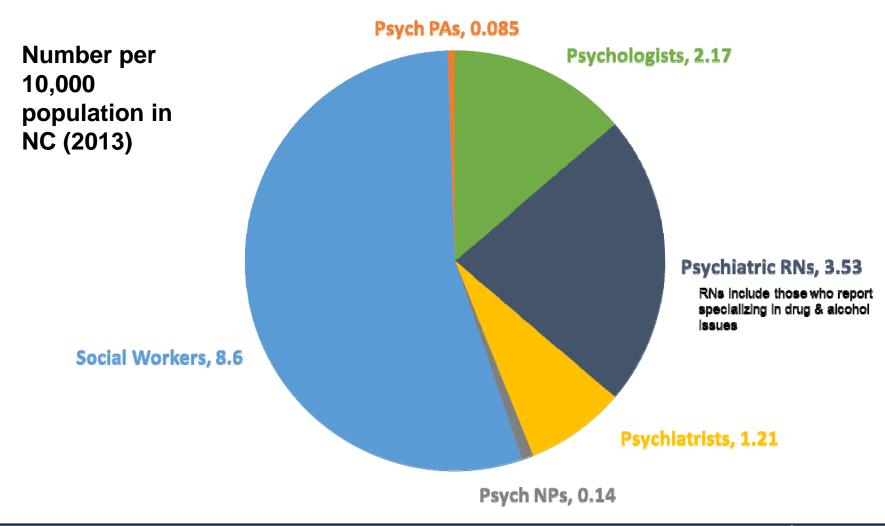


Number per 10,000 population

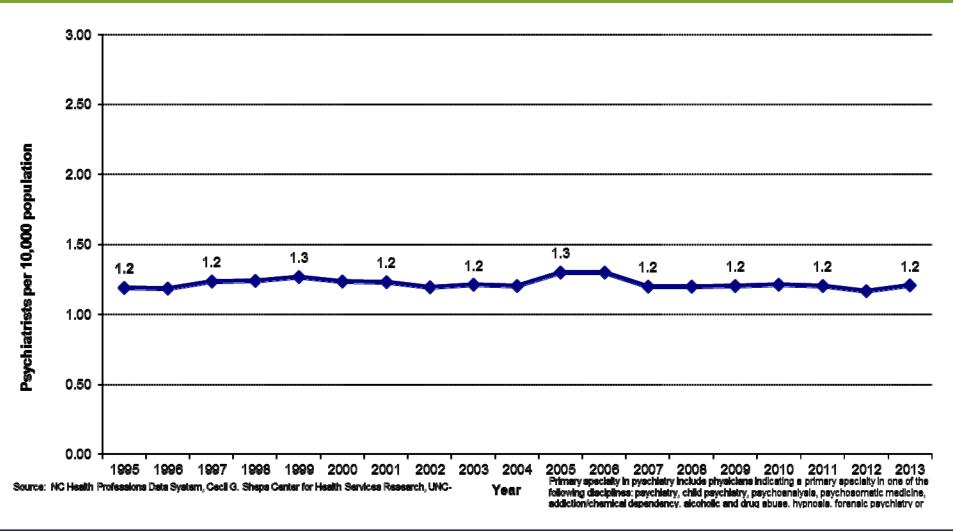
- * Population data from the U.S. Census Bureau
- * National Psychologist estimate from the APA (2014): http://www.apa.org/support/about/psych/numbers-us.aspx#answer
- * National NP (2014) data from: http://www.aanp.org/all-about-nps/np-fact-sheet
- * NC data from NC HPDS, 2013



More Social Workers, Psychologists & Psych RNs per capita in NC than Psychiatrists

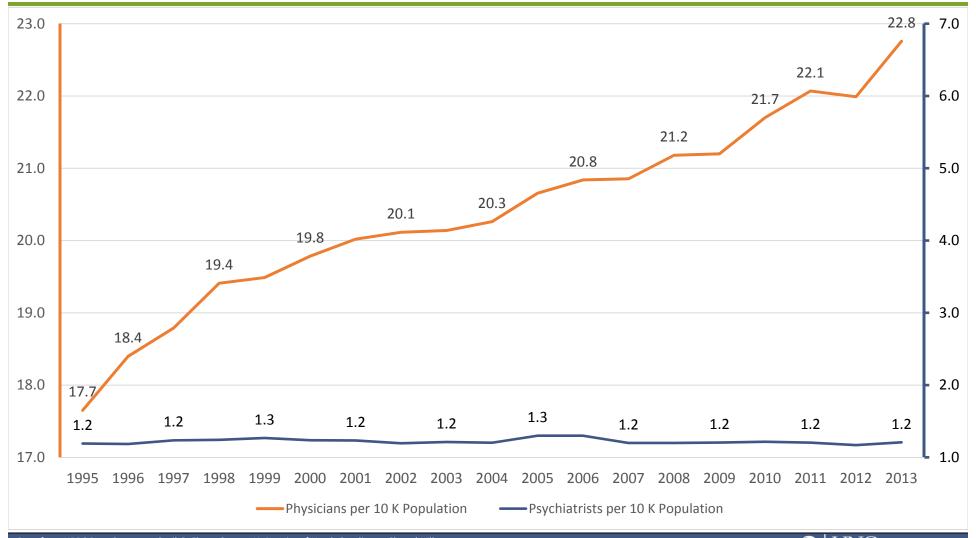


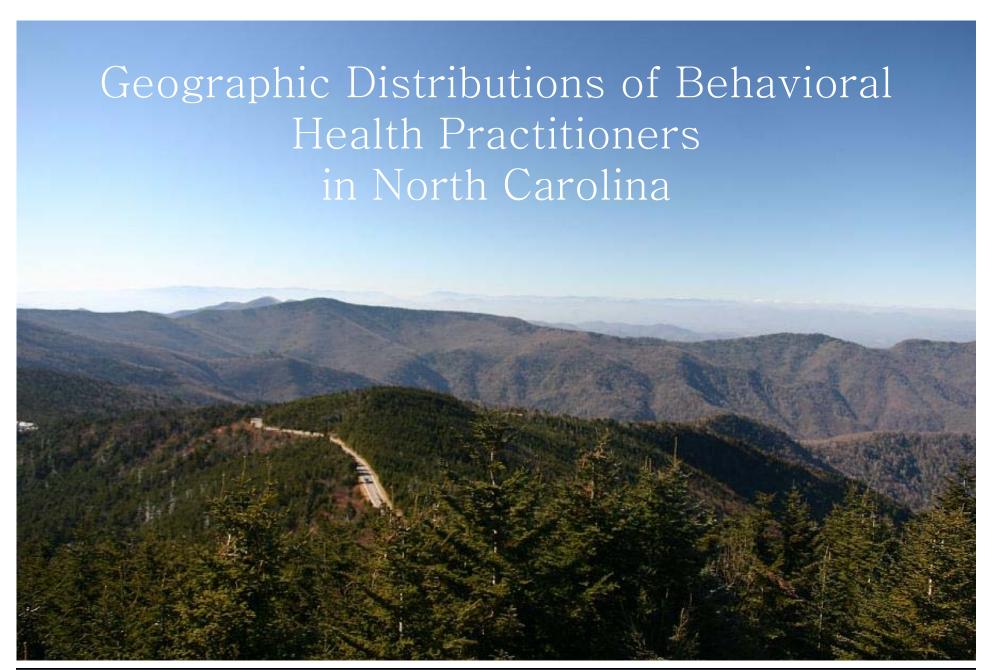
Psychiatrist numbers per capita stable over time in North Carolina 1995-2013





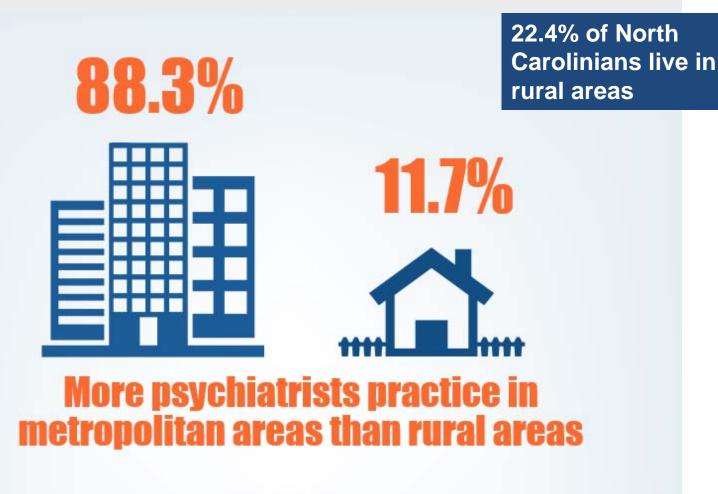
Overall physician numbers however, increase over time







Psychiatrists in North Carolina by *Rural/Urban* Status 2013



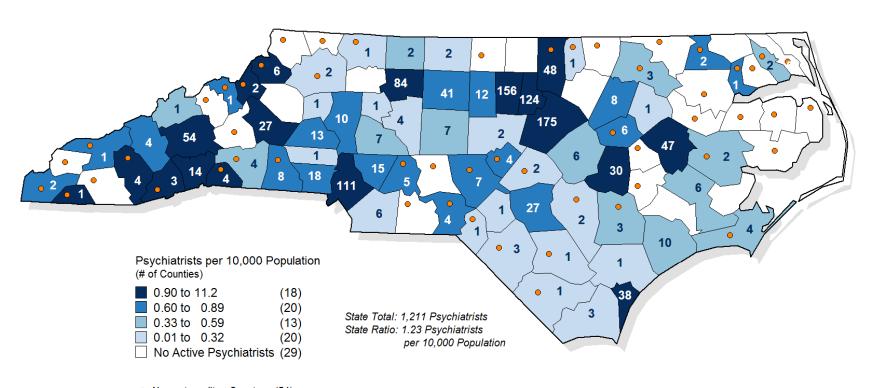
North Carolina counties without psychiatrists*



^{*}No actively working psychiatrists in North Carolina report these counties as their primary practice location.



Psychiatrists per 10,000 Population North Carolina, 2013



• Nonmetropolitan County (54)

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.

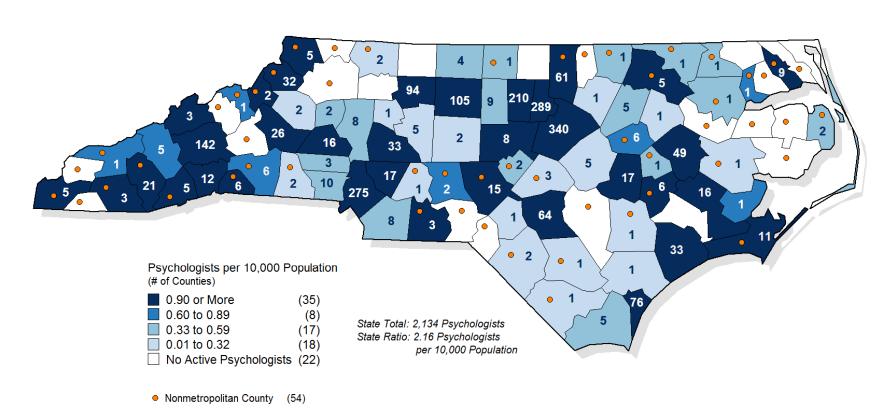
Note: Data are based on primary practice location and include active, instate, nonfederal, non-resident-in-training MDs and DOs licensed in NC as of October 31, 2013 who indicate that their primary area of practice is psychiatry, child psychiatry, psychoanalysis, psychosomatic medicine, addiction/chemical 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



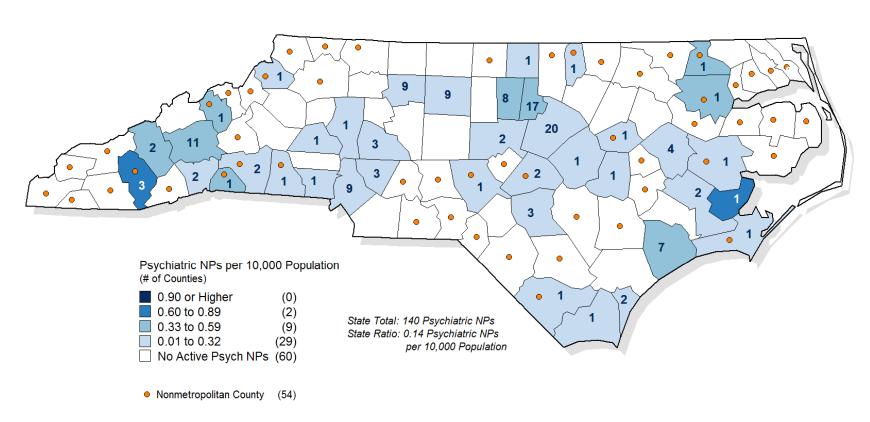
Source: North Carolina Health Professions Data System, with data derived from the North Carolina Psychology Board, 2013; US Census Bureau and Office of Management and Budget, March 2013.

Note: Data are based on primary practice location and include active, instate psychologists 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.

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 psychologists within the county.**



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



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, instate 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.

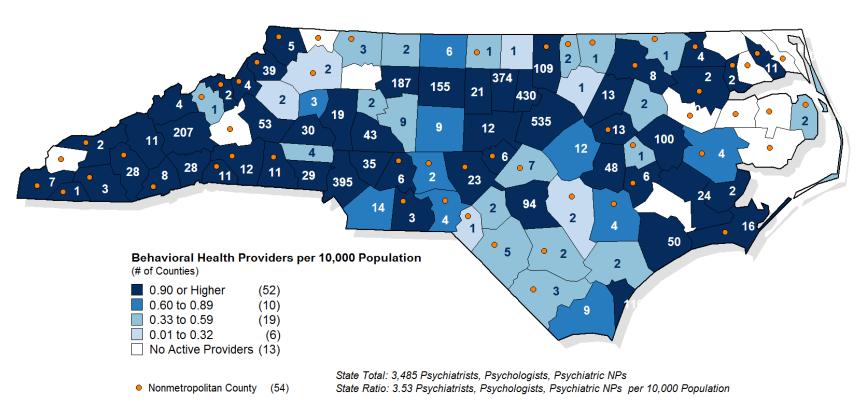
Produced by: Program on Health Workforce Research and Policy, Cecil G. Sheps Center for Health Services Research, University of North Carolina at Chapel Hill.

Map labels reflect the number of 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, instate, nonfederal, non-resident-in-training psychiatrists, and active, instate 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.

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, psychologists and psychiatric NPs within the county; map excludes psychological associates.



Challenges



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, other licensed workers
 - 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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