



EXECUTIVE SUMMARY

ADDRESSING THE BEHAVIORAL HEALTH WORKFORCE SHORTAGE IN COOK COUNTY

A needs assessment and framework for action to attract and retain essential behavioral health professionals



COOK COUNTY
HEALTH



Cook County ^{DEPT.} of
Public Health

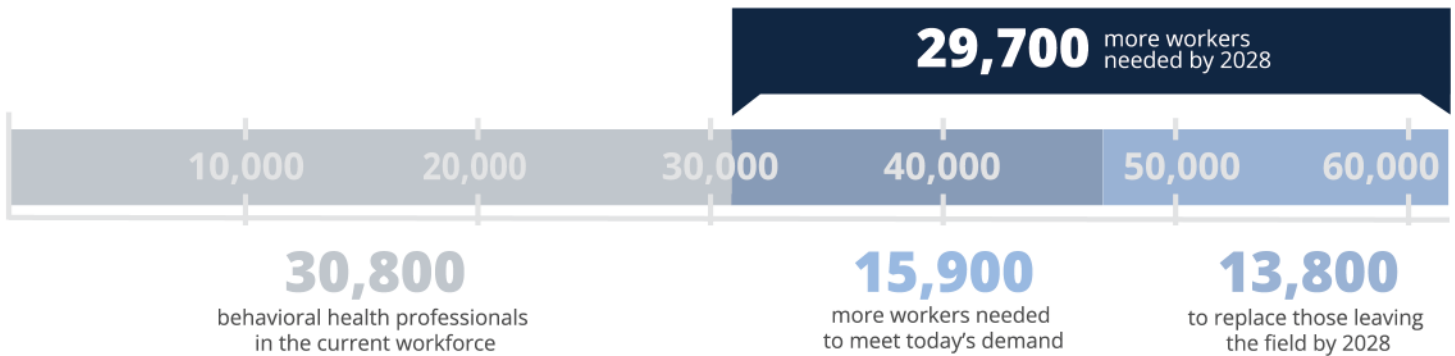
**BUILDING
HEALTHIER
COMMUNITIES**

OCTOBER 2024

HOW MANY BEHAVIORAL HEALTH PROFESSIONALS ARE NEEDED IN COOK COUNTY?



BEHAVIORAL HEALTH PROFESSIONALS PREVENT, DIAGNOSE, AND TREAT MENTAL HEALTH AND SUBSTANCE USE DISORDERS, AS WELL AS LIFE STRESSORS AND CRISES



Occupation	Workers in BH Settings (2023)	Shortage Today	Replacement Workers Needed by 2028	Total Needed by 2028
Social and Human Services Assistants*	8,140	4,203	4,018	8,221
Counselors and Therapists	8,354	4,314	4,861	9,175
Psychiatric Aides and Technicians	2,974	1,536	1,029	2,565
Social Workers	869	449	610	1,059
Psychologists (Clinical & Counseling)	3,253	1,680	999	2,679
Psychiatrists**	374	193	36	229
Medical Assistants	370	191	243	434
Nursing Assistants	973	502	580	1,082
Licensed Practical Nurses	281	145	93	238
Registered Nurses	2,501	1,292	359	1,651
Nurse Practitioners	246	127	108	235
Rehabilitation Counselors	1,367	706	299	1,005
Community Health Workers	988	510	500	1,010
Physician's Assistants	74	38	28	66
Total	30,764	15,886	13,763	29,649

*includes peer recovery specialists, outreach workers, unlicensed case workers, and similar roles.

**estimates are for psychiatrists working in settings that likely provide publicly funded care.

Behavioral Health professionals are **NOT** evenly distributed by place, race, and gender in Cook County



Most professionals work in downtown Chicago. The **further south and west** from the Loop, the **fewer** workers are employed per resident.



Most Behavioral Health workers are **female**, except psychiatrists.



Black workers are **underrepresented** among **higher** paying professions including psychiatrists, nurse practitioners, and psychologists, but are **overrepresented** among **lower** paying professions. Hispanic workers are **underrepresented** across **all** professions.

WHAT CAN BE DONE TO ADDRESS THE SHORTAGE?



1 PROVIDE COMPETITIVE COMPENSATION

48% of Cook County BH workers were dissatisfied with pay, and 75% of unlicensed professionals make below a living wage. The region's BH workers across occupations are **paid less than other workers in other midwestern metros**.

2 INCREASE AWARENESS OF BEHAVIORAL HEALTH CAREERS

Greater exposure to career opportunities at the K-12, college, and graduate level is critical. **Residents of Cook County cannot aspire to careers they do not know exist.**

3 OFFER BEST-IN-CLASS "EARN & LEARN" OPPORTUNITIES

A \$50M public / private fund to expand scholarship, apprenticeship, and fellowship programs can help new entrants join the field and existing professionals advance.

4 IMPROVE JOB QUALITY IN TARGETS SETTINGS

40% of Cook County professionals report burnout, and 36% intend to leave their job in the next year. 13,000 will leave the field by 2028. Cook County leaders, in partnership with the Illinois Behavioral Health Workforce Center and other partners, can provide support and funding to community providers focused on reducing burnout and increasing retention.

5 MAXIMIZE IMPACT OF CURRENT WORKFORCE

Reducing documentation burden, expanding integration with primary care providers, and exploring new technologies can help current healthcare professionals serve more patients.

TARGET OCCUPATIONS

Peer Recovery Specialists
Addiction Counselors
Professional Counselors
Social Workers
Licensed Practical Nurses
Registered Nurses
Nurse Practitioners
Psychiatrists

PRIORITY SETTINGS

Community-Based Providers
Federally Qualified Health Centers
Certified Community Behavioral Health Clinics
Public Schools

I actually have two jobs. My daytime 9-5 and overnight shifts for the Mobile Crisis Response team. I'm exhausted because few people want to be public servants due to unacceptable pay. I applied for loan forgiveness at my old job, but it was denied. It was a for-profit facility, but I was still serving the public, so its frustrating.

Certified Alcohol and Drug Counselor

A \$50M REGIONAL BH WORKFORCE FUND

- \$5M to train and provide stipends to 400 certified peer recovery specialists
- \$6M to establish a regional alcohol and drug counselor registered apprenticeship, employ, train, and certify 250 new counselors
- \$20M to provide 400 current professionals and students with scholarships, paid internships, and post-graduate supervision opportunities on their path to becoming licensed clinical social workers and professional counselors
- \$16M to expand nurse practitioner and psychiatry fellowship programs in community settings
- \$3M for 100 nursing students in LPN and RN programs to get didactic and clinical training in behavioral health settings



WHAT DO PROFESSIONALS SAY ABOUT JOB QUALITY, BURNOUT & RETENTION?

INFORMED BY INPUT FROM 1,000 BEHAVIORAL HEALTH WORKERS



40% are experiencing **burnout**.
37% intend to look for a job in the next 12 months.



70% have **student debt**.
40% have more debt than their annual income.



The **highest** levels of satisfaction were related to **purpose**, the **patient population**, and **colleagues**.



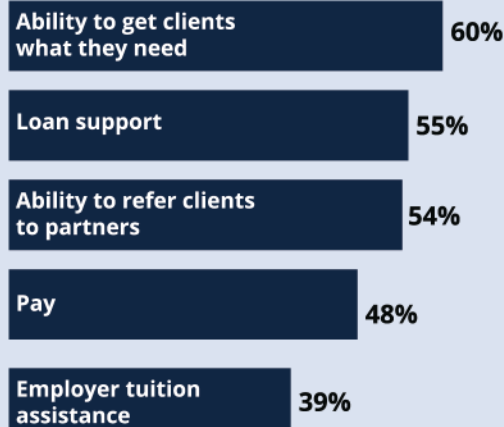
The **lowest** levels of satisfaction were related to getting clients the **services they need**, **student loans**, **pay**, and **support for education costs**.

HIGHER BURNOUT

THOSE REPORTING BURNOUT WERE MORE LIKELY TO....

Work longer hours	Be younger	Have a Bachelor's degree or graduate education
Be a Registered Nurse or Licensed Clinical Social Worker	Be female	
	Have more responsibilities	

TOP AREAS OF DISSATISFACTION (N=965)



The job is great. The benefits are great. The coworkers are great. Admin is great. The pay and student loans make my job almost impossible to stay at.

Case Manager

ACKNOWLEDGEMENTS

To the **1,000 behavioral health professionals** who shared their experiences despite being busier than ever - no workforce strategy is complete without hearing directly from workers on the frontline. Thank you.

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