



*Serving our Neighbors with the Greatest Need*

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Testimony provided at the Michigan House Health and Human Services Subcommittee on April 10, 2024:

Good morning. I'm Matt Maskart, CEO at Pathways Community Mental Health. I am here today to provide a rural perspective on the workforce shortages and administrative challenges.

Pathways serves individuals with Severe Mental Illness, Severe Emotional Disturbances, and Intellectual and Developmental Disabilities in Marquette, Alger, Delta, and Luce Counties. Notably, Luce County is considered a "frontier" county due to its sparse population and considerable distance from larger urban centers with essential resources.

Up north in the U.P. , the task of providing specialized mental health services becomes increasingly complex due to staff shortages and the distance between population centers. According to the Health Resource Service Administration, all of Michigan's Upper Peninsula counties are designated as health shortage areas for mental health as well as primary care.

Staff recruitment has been a persistent challenge at all Pathways County offices. In the last several years, this challenge has intensified. Presently, approximately 10% of our full-time employment positions are vacant, majority being clinical positions. The team serving children in Delta County, for instance, has half of its positions vacant, one position for 650 days. We also have a position, which serves adults in Delta County that has been vacant for 878 days, or 2 and a half years. This isn't unique to Pathways either.

The inability to maintain a waiting list for Medicaid recipients has led to increased caseloads for teams with staff vacancies, resulting in burnout among remaining staff. To address the staff shortage, we have sent staff from Pathways offices those locations with shortages. This has led to weather related vehicle accidents, and exorbitant lost time for clinical care.

Compounding the issue is the growth of the state budget allocated for school-based mental health programming. As of last year, roughly half of the social work team at the Marquette-Alger Intermediate School District were former Pathways employees, with additional social workers leaving Pathways employment for the Delta-Schoolcraft intermediate school district in Escanaba. These staff were attracted by higher compensation, less challenging clinical cases, and (most of all) summers off.

The exodus of professional clinical staff has resulted in a significant loss of talent and experience. In 2015, the average experience for the Pathways' clinical team was 6.8 years; presently, it had dwindled to just 3.8 years. A drop of 45%. For most frontline clinical staff, which excludes clinical supervisors, the average experience is now only a year or so. This makes serving individuals with serious issues very difficult for these new staff members.

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The hiring problem extends beyond master's and bachelor's level clinical professionals. The challenge is also severe for direct care staff, most of whom have a high school degree. Adult Learning Systems, the largest non-profit specialized residential provider in central upper Michigan, contracts with several community mental health providers to deliver Personal Care and Community Living Support 24 hours a day for 125 individuals with developmental disabilities.

Adult Learning Systems, with an average of 270 direct care workers, experienced an attrition rate of 215 employees in FY23. This attrition wasn't evenly distributed between their residential locations either. Three homes in rural Dickenson County had a staggering 221% turnover rate.

Direct Care Workers receive an hourly wage starting at \$16/hour. They are frequently leaving employment to work in easier retail and fast food jobs for the same hourly wage.

Adding to the challenge is the burden of extensive paperwork. Clinicians in the public mental health system face significantly higher paperwork requirements compared to those in schools and private practices. Reports from the Community Mental Health Association of Michigan indicate that paperwork and administrative duties could consume up to 30% of a clinician's workday. However, a recent conversation with a Pathways clinical Director revealed that the actual percentage may be as high as 50%.

These demands not only limit the time skilled practitioners have to serve Michiganders but also contribute to driving clinicians away from the public mental health system. Thus hampering the recruitment and retention efforts.

Looking ahead to the next fiscal year and beyond, in my opinion, 3 points need consideration:

- 1)** investments in mental health services must take a comprehensive perspective, considering how additional funding in one system or solution may impact others.
- 2)** there is an urgent need to reduce administrative burdens to allow an increased percentage of time spent caring for those we serve.
- 3)** it is imperative that wage adjustments for direct care workers increase. This will help retain and recruit caring staff to serve some of the most vulnerable Michiganders.

Thank you for your attention to this important matter.