

How Boards Can Support Workforce Behavioral Health

In this document, we define behavioral health disorders as both mental illness and substance use disorders. Mental illnesses are specific, diagnosable disorders characterized by intense alterations of thought, mood and/or behavior. Substance use disorders involve the recurrent use of alcohol and/or drugs, including medications, which cause clinically significant impairment. Persons with behavioral health care needs may experience one or both conditions, as well as physical co-morbidities.

People working in health care face incredible challenges that take a toll on their physical and mental health every day. A significant number of health care professionals experience burnout, depression and other forms of distress, and are at increased risk for suicide. These challenges, exacerbated by the pandemic, have heightened the importance of making the behavioral health of health care workers a priority and providing easy access to awareness, prevention and treatment resources.

This document, developed by AHA Trustee Services and AHA's Behavioral Health teams, intends to educate and raise awareness for trustees about suicide prevention and the role that hospital and health system boards can play in this very important public health issue. It also provides useful resources for boards to initiate a conversation about reducing the risks of and preventing suicides in the health care workforce.

In September 2022, AHA's Committee on Governance and the Committee on Behavioral Health met in person to discuss suicide prevention and what resources would help boards be better educated on options to support the mental well-being of their health care workforce. Experience

has shown that health care workers appreciate a work environment that supports their mental well-being, and a positive impact of such an environment often reduces the risks of suicide in the health care workforce.

Burnout vs. Depression

It is important to understand the difference between burnout and behavioral health disorders. Burnout, a workplace phenomenon, is a long-term stress reaction defined by having at least one of the following symptoms: 1) emotional exhaustion; 2) depersonalization, including cynicism and a lack of empathy; and 3) a low sense of personal accomplishment. Burnout can be a contributing factor or trigger for mental illness, but individuals can be burned out without having a psychiatric or substance use disorder.

Governing boards are responsible for setting the strategy for their hospitals or health systems, including the organization's ability to create and sustain a culture of psychological safety for the organization's health care workforce. A culture of psychological safety is important for many reasons. It can reduce behavioral health stigma, increase the likelihood that health care workers will seek treatment, and reduce the risks of workforce burnout and suicide.

Boards should be engaged in discussion about suicide prevention to ensure there is an organizational strategy in place to keep their hospital and health system health care workforce healthy. When there is awareness and acknowledgement of the importance of this issue and commitment at the highest level of the organization, including the board, that commitment can be turned into actionable steps that can be meaningfully undertaken by all parts of the organization and its strategic community partners. Strategic community partners may also provide

resources to support the mental well-being of hospital and health system workforce by addressing the social drivers of health needed by the workforce, including but not limited to housing, community based behavioral health services, and addressing family needs such as childcare and/or older adult care.

Boards can inspire hospital and health system leadership to reexamine their organization's comprehensive approach to support workforce mental well-being and reduce suicide risks. Board members who understand the

prevalence of behavioral health disorders, and consistently message the value and effectiveness of treatment can have multiple positive impacts such as improved workforce satisfaction and reduced absenteeism. Boards can be extremely important in supporting wellness not only for the patients under the organization's care but also for staff at all levels.

The questions below offer an opportunity for boards to begin the conversation on behavioral health supports for the workforce.

Trustee questions for discussion of your organization's workforce well-being efforts

1. What are your organization's current well-being efforts? Are you aware of what's available to the workforce at the individual level, such as employee assistance programs, the unit or department level, and /or those at the organizational level?
2. For programs currently in place, does the workforce find them valuable and/or can the organization define and track success?
3. What is your organization doing to reduce the risk of suicide for its health care workforce? This work may be a part of a much larger initiative to engage and support the mental well-being of your workforce.
4. Does your organization focus on creating a culture of psychological safety for its workforce, perhaps as part of its recruitment and retention strategies?
5. How much do you know about the mental health and well-being of your staff? How many die by suicide? What can we do to help? Does your hospital or health system have any data on the health of its workforce? If yes, how are you using this data and is it included in an organizational workforce strategy?
6. How is your hospital/health system management team engaging trustees in suicide prevention as an organizational strategy?
7. What are some of the barriers — logistical, legal or perceived — to implementing steps to support the reduction of the risks of suicide and support the mental well-being of the workforce?
8. Are your organization's managers aware of and trained in the steps to take if they are concerned about a colleague or employee? If not, what steps should be taken to remedy this situation?
9. Who will lead and champion the implementation of a comprehensive initiative to support the mental well-being of the entire workforce, and through that, reduce the workforce's risks of suicide?
10. What internal resources, both staff and financial, will be required?
11. What external resources will be necessary?
12. What is the anticipated timeframe for launching each intervention?
13. How will executive leadership and management gain buy-in from the workforce for these initiatives?
14. How does executive leadership plan to evaluate progress and scale up the program?

AHA Resources:

- AHA released “Suicide Prevention: Evidence-Informed Interventions for the Health Care Workforce,” a **resource** to support hospitals’ and health systems’ efforts to prevent suicide in the health care workforce. The report describes key drivers of suicide and provides evidence-informed intervention strategies and metrics. The resource is coupled with a new **AHA webpage** dedicated to preventing health care worker suicide, and featuring leaders of AHA member hospitals
- **AHA People Matter Words Matter**
- AHA launched the **Stress Meter™**, a hub of curated, vetted resources featuring stress-relief information and techniques. The Stress Meter™ is not a diagnostic tool and does not provide behavioral health care; instead, it is a resource to help people self-identify their level of stress and access helpful resources with as few as two clicks.
- **Section One** of the Workforce Guide
- **AHA Behavioral Health web page**
- **AHA Digital Toolkit:**

AHA Articles:

- **How Boards Can Support Suicide Prevention Initiatives: Hartford HealthCare’s Marissa Sicley-Rogers and Jennifer Ferrand discuss their Zero Suicide Initiative**
- **Health Systems Making Suicide Prevention a Priority: AFSP’s Christine Moutier and Maggie Mortali discuss programs and tools that support health care workers**
- **Why Boards Should Focus on Suicide Prevention: Addressing challenges and priorities through the trustee role**

Other Resources:

- www.afsp.org
- www.apafdn.org/APA Foundation — As the nonprofit programming arm of the American Psychiatric Association, we complement the professional work of the APA by administering public outreach programs and support—all aimed at eliminating stigma, overcoming mental illness, and advancing mental health.
- **Thrive Global** has some great resources and information, including a video and a graphic explaining the difference between stress and burnout.
- This **New York Times article** also does a good job of explaining the difference between burnout and depression.
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