



**New Hampshire Alcohol & Drug Abuse Counselors Association  
New Hampshire Training Institute on Addictive Disorders  
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**North Country (Region)  
January 2018 Substance Use Disorder Provider Needs Assessment**

The evidence of how stress increases health risks and compromises work quality is indisputable. The following data was collected during “normal” working conditions and taken from *Overcoming Compassion Fatigue: A Practical Resilience Workbook* (Teater & Ludgate, 2014). Mental health specialists have been found to be at high risk for burnout. Up to 85% of health care workers report Compassion fatigue (Onyett, Pilinger & Muijen, 1997). During our 2017 NHADACA Annual Meeting, it was encouraging to hear guest speakers Tim Rourke of NH Charitable Foundation and former Governor’s Commission Chairperson and Annette Escalante, Chairperson NH Governor’s Commission on Alcohol and Drug Abuse Prevention, Intervention, and Treatment, Executive Director of BDAS, former NHADACA and LADC Board Member comment on the importance of addressing practitioner well-being as part of the comprehensive workforce development initiatives currently in progress.

At this time last year, news of Maple Leaf Treatment Center in northern VT closing resonated with all of us in the North Country involved with providing SUD services <http://www.burlingtonfreepress.com/story/news/2017/02/09/maple-leaf-treatment-center-close-indefinitely/97715330/> Conversation was fueled about the impact of chronic demand and need exceeding workforce capacity on practitioner fatigue and quality of patient care. This combined with research recently shared by Dr. Tana Bridge, PhD of Western Michigan University and NHTIAS workshop presenter, and our own experiences urge Melony and I – as North Region NHADACA Representatives – to gather a collective voice on behalf of practitioner well-being. We reached out to former North Region NHADACA Representatives Elaine Davis, Jim O’Hearn, and 2017 Nominee for Counselor of the Year Karen McNamara, and drafted the attached letter.

Early in December, I had the pleasure of hosting NHADACA’s vendor table at the Bi-State Workforce Development Conference in Concord. The Keynote speaker was Yale graduate Dr. Corey Martin, MD founder of the BounceBackProject <http://www.bouncebackproject.org/all-about-stress/>. He shared from his personal journey of how he, his colleagues, and their community are coping with grief associated with sudden unexpected death of two close colleagues, one due to suicide linked to work related stressors. Concerned Human Resource Administrators spoke to challenges with recruitment and retention. Everyone seemed validated and relieved to hear Dr. Martin speak to the realities of practitioner burn-out and compromised patient care – and, yet - his message is hopeful. Together, we spoke at length about how to address the challenge of practitioner well-being during workforce crisis. He provided me with materials about becoming a partner with BounceBackProject – at no cost.

Conversations with Ammonoosuc Community Health Human Resource Director, the Coordinator of Region 7 Integrated Delivery Network (IDN), and Littleton Regional Hospital lead to a combined effort to distribute the attached **11 item survey to approximately 200 professionals including our 15 NHADACA North Country members.** While external surveys have a 10-15% response rate, **we are pleased to see we received a 17% response rate.**

Common goals associated with workforce development and retention have been reviewed with April Allin at North Country Health Consortium, Region 7 IDN contact person/coordinator <http://www.nchcnh.org/region7IDN.php> We are looking forward to continued discussion about how NHADACA and Region 7 IDN can work more closely together on this important issue.

**Survey respondent highlights:**

- 96% respondents meet at risk criteria for Compassion Fatigue (ProQOL version 5) (Stamm, 2009)
- 70.59% “ are concerned patient safety is sometimes compromised due to workforce shortage
- 61.76% “ *want training on* “Coping with moral dilemmas in today’s workforce landscape”
- 56.25% “ *want training on* “Self-monitoring and how it is an ethical response to stress”
- 46.88% “ *want training on* “Leniency bias and compassionate truth telling”
- 45.45% “ are currently or have some Supervisory responsibilities
- 41.18% respondents not credentialed as SUD treatment providers, ie;  
Police Officer, Corrections, Nurse Practitioner, MD family physician, School Counselor

**3 open-ended questions yielded the following themes for training and continuing education:**

- 1) The need for more cross-training on SUD topics and chronic care
- 2) Supervision skill development to boost self-care as a risk management resource