



Massachusetts Department of Public Health

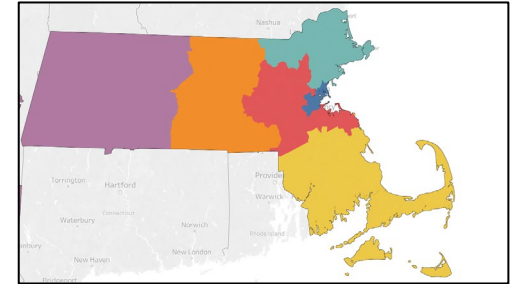
Bureau of Substance Addiction Services Treatment Program Workforce Data Update

FY 2017 - 2024

BSAS & DMA Health Strategies
Workforce Development Teams

Introduction

BSAS analyzes Treatment System Program Staff information in order to monitor workforce trends. This presentation offers Statewide analysis.*



BSAS Regions

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*Additional presentations available comparing Statewide with individual BSAS Regional analysis.

To use this information for your own presentation, policy or program development, please contact Jen Parks at BSAS (refer to slide 38).

Background

Purpose:

To describe workforce trends in the BSAS Treatment System (not including other BSAS services such as Prevention, Harm Reduction, or Recovery Support Services)

Data source:

Data retrieved from program licensure renewal applications submitted via the electronic licensing system administered by BSAS (eLicensing) for Fiscal Years (FY) 2017-2024

- Programs renew licenses every two years
- Some programs renew early or late
 - For analysis purposes only, Reporting Period may be shifted to reflect continuous program operations.

Key Terms:

Position: Role reported for each program, independent of the individual that occupies it.

Staff: Individuals that are listed in an application's "Staff Information" section.

Role: Position Category listed in treatment program regulations 105 CMR 164.00 ("Staff Role Type" in eLicensing).

Reporting Period: A two-year snapshot of application data.

Current Reporting Periods: FY 17/18, FY 19/20, FY 21/22, & FY 23/24

Cohort: People working in the System during a specific Reporting Period. (e.g. Cohort FY 23/24)

Level of Care: High level grouping of treatment types.

Limitations

- eLicensing fields are periodically updated; thus, some data has not been collected for all reporting periods.
- eLicensing only captures BSAS Treatment Programs; other BSAS services such as Recovery Supports, Housing, Harm Reduction, and Prevention are not included.
- Some free-text responses result in data exclusion.
- All information, including demographics, is reported by program representatives, not individual staff members.
- Some programs renew late or early, causing gaps in reporting despite continuous program operations.
- There is no unique identifier for individual staff in raw data. Programs report staff by name; linking individuals across applications is a manual process.
- Vacancies are not uniformly reported.
- Programs only report on positions required by regulations; programs may employ staff not reported.
- Data only provides a snapshot of program activity; workforce hiring/loss between applications is not captured.

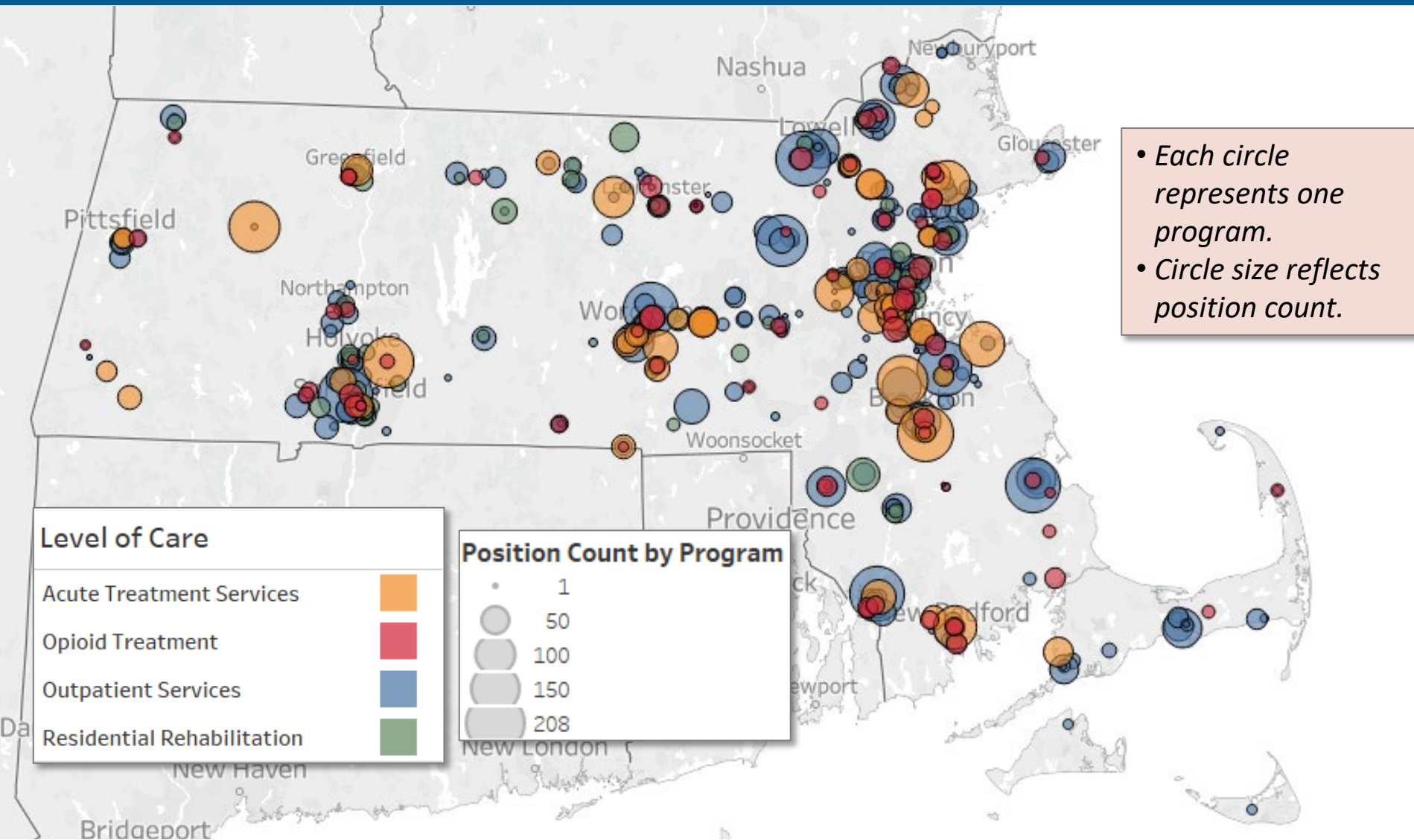
Some sections include specific notes.

Section 1:

Program and Staffing Trends

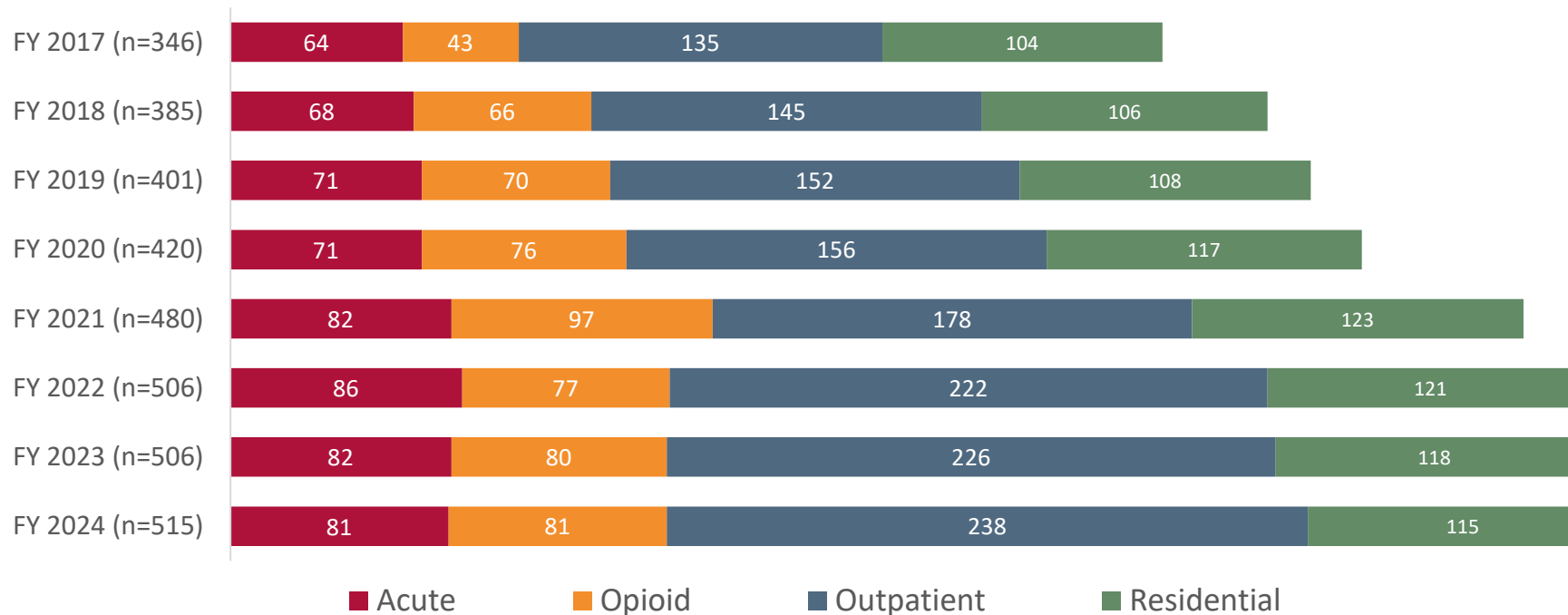


Distribution of Programs by Level of Care (FY 23/24)



System Landscape

Programs by Level of Care



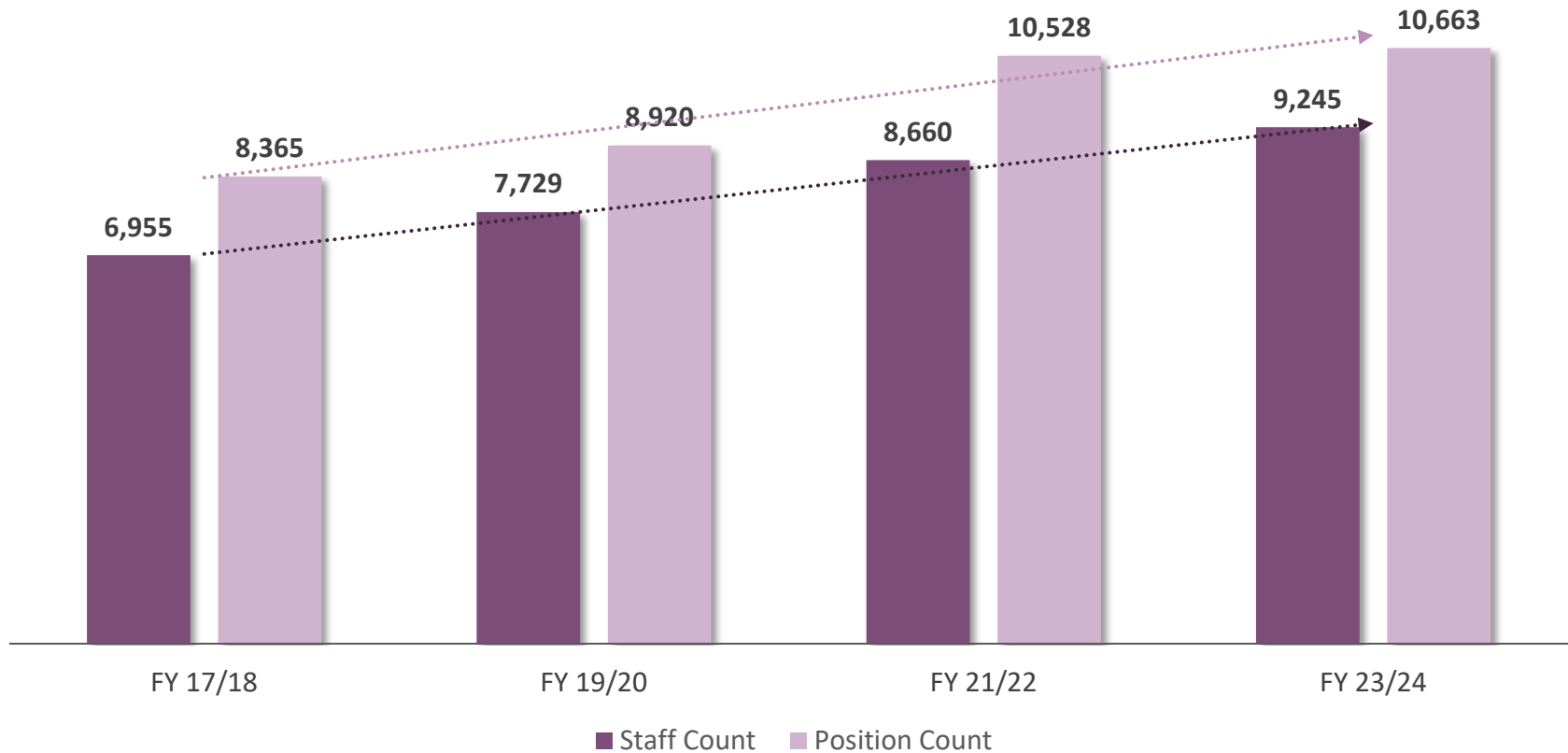
Overall, there has been a **49%** increase in programs in the Massachusetts Treatment System since FY 2017 with an average increase of **6% net growth** per year, slowing in recent years.

1. Amendments to 105 CMR 164 were promulgated in 2022, reconfiguring how BSAS licenses certain services, which may impact the numbers in this chart.
2. Chart provides count of existing and new programs based on service setting licensure applications approved by BSAS during each time period. During these times, programs opened and closed, creating a variance in counts at any given time.

Many factors affect workforce trends, including COVID-19 in 2020.

Staff and Position Growth

Historical Staff and Position Counts



Staff have continuously grown since FY 17/18, but Position growth plateaued in FY 23/24.

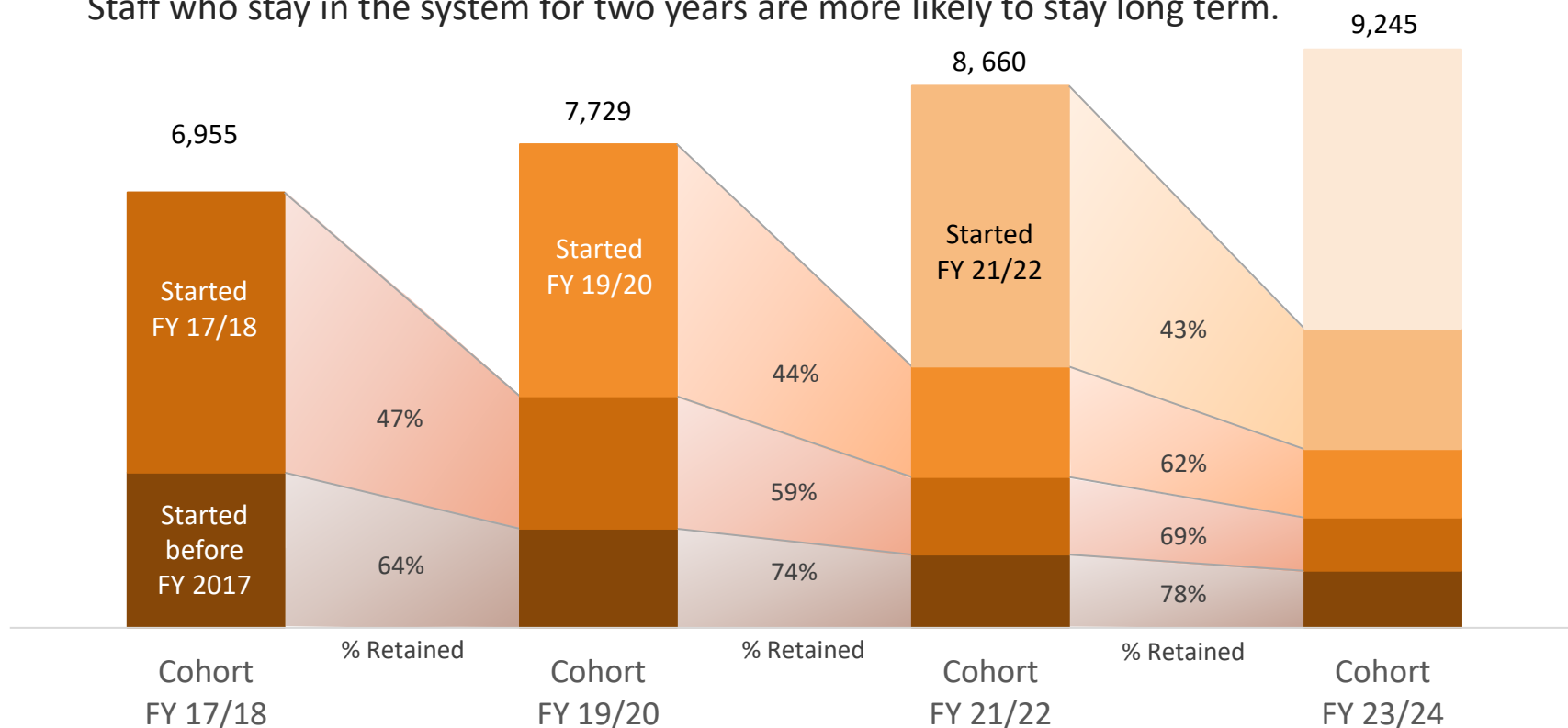
Many factors affect workforce trends, including COVID-19 in 2020.

Historical Cohort Composition

Historical Cohort Composition by Start Date

(Overall System Retention: 54%)

Staff who stay in the system for two years are more likely to stay long term.



- Almost 50% of the current workforce is new (two years or less in System).
- Ten percent of the current workforce has been in the system before FY 2017 (longer than eight years).

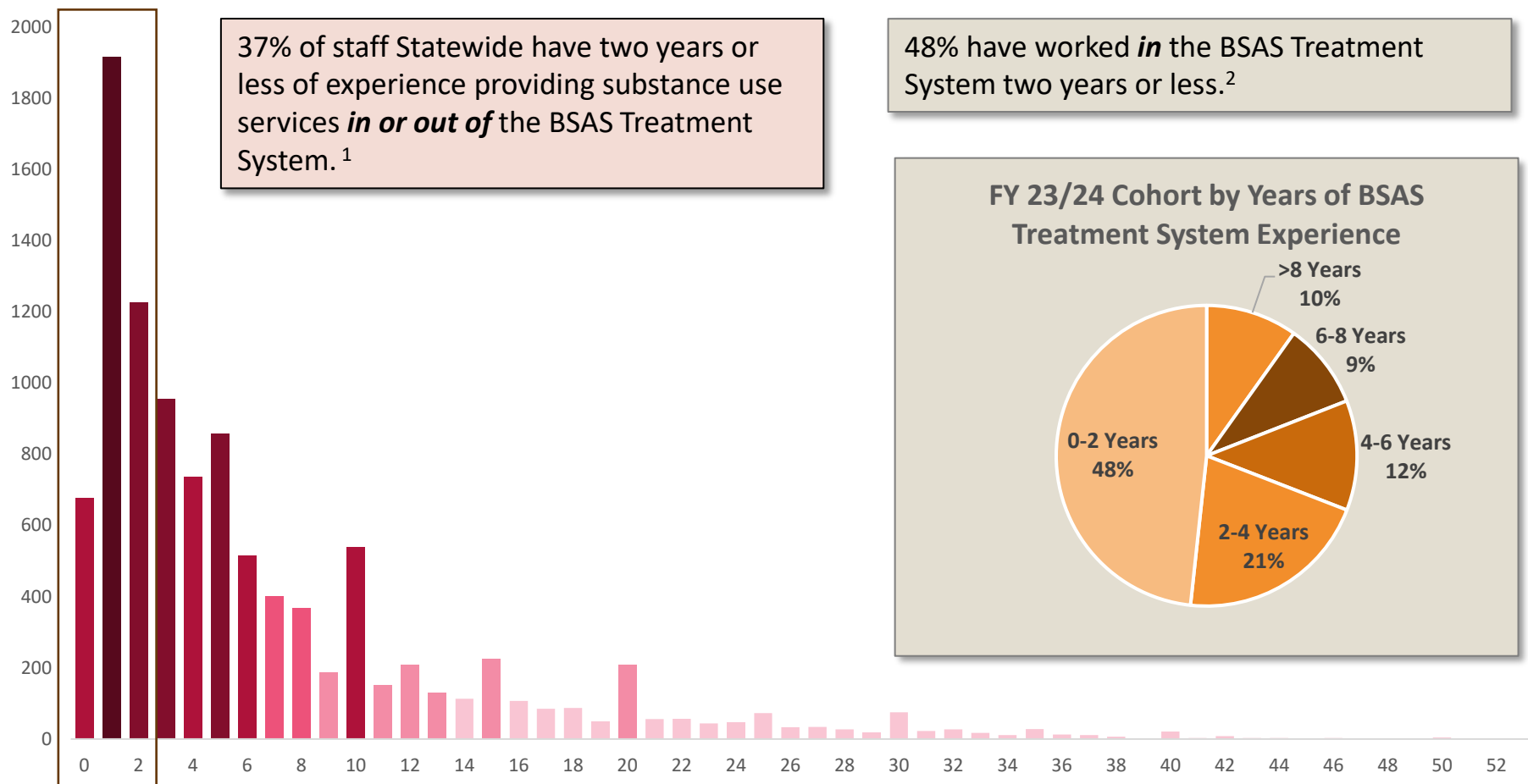
Please refer to slide 3 for terminology reference.

Many factors affect workforce trends, including COVID-19 in 2020.

Years of Experience

Providing Substance Use Services

Reported Years of Experience (FY 23/24) (N=9,245)



1. Reported Years of Experience (FY 23/24) sourced from eLicensure application data field titled "Years in Addiction Services" from FY 2022 or FY 2023.

2. FY 23/24 Cohort by Years of BSAS Treatment System Experience sourced from ongoing eLicensure application data tracking individuals across applications from FY 2014 through FY 2023.

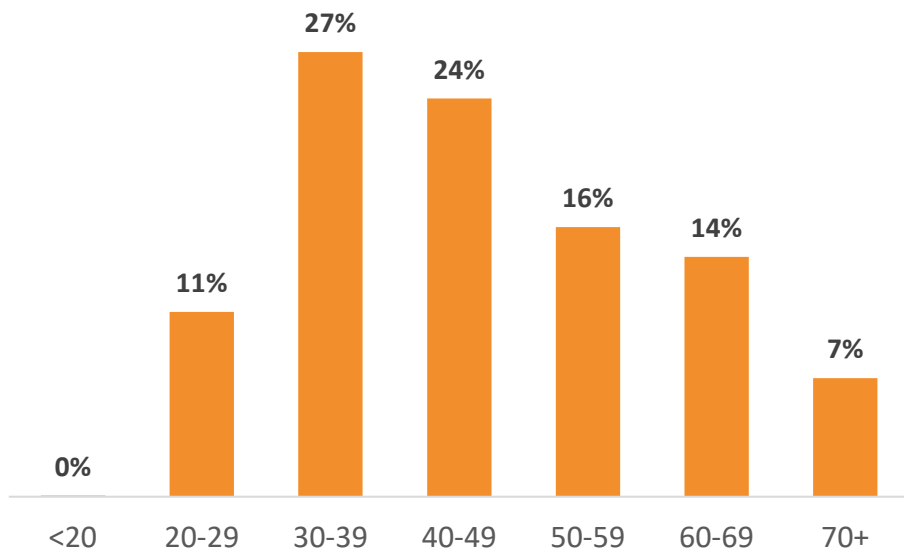
Section 2:

Staff Characteristics FY 23/24



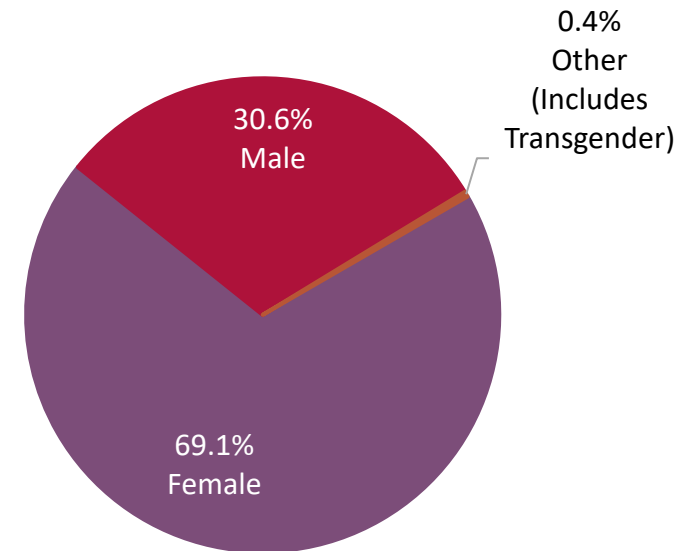
Staff Age and Gender

Age Distribution FY 23/24
(N=8,721)



Over 60% of the workforce is age 40 or older. The proportion of staff aged 40 or older is growing compared to prior years.

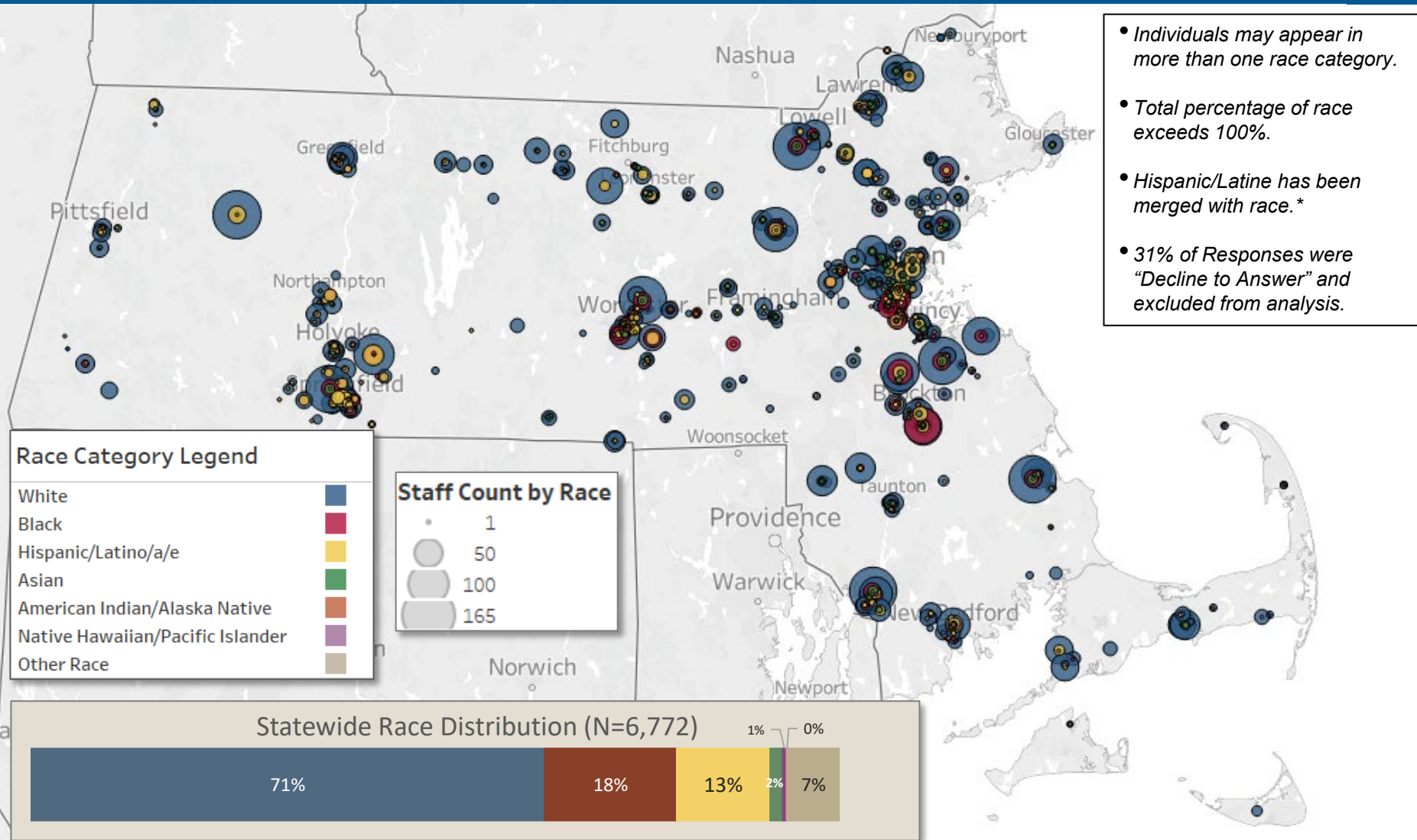
Gender Distribution FY 23/24
(N=8,711)



Almost 70% of the workforce was reported as Female.

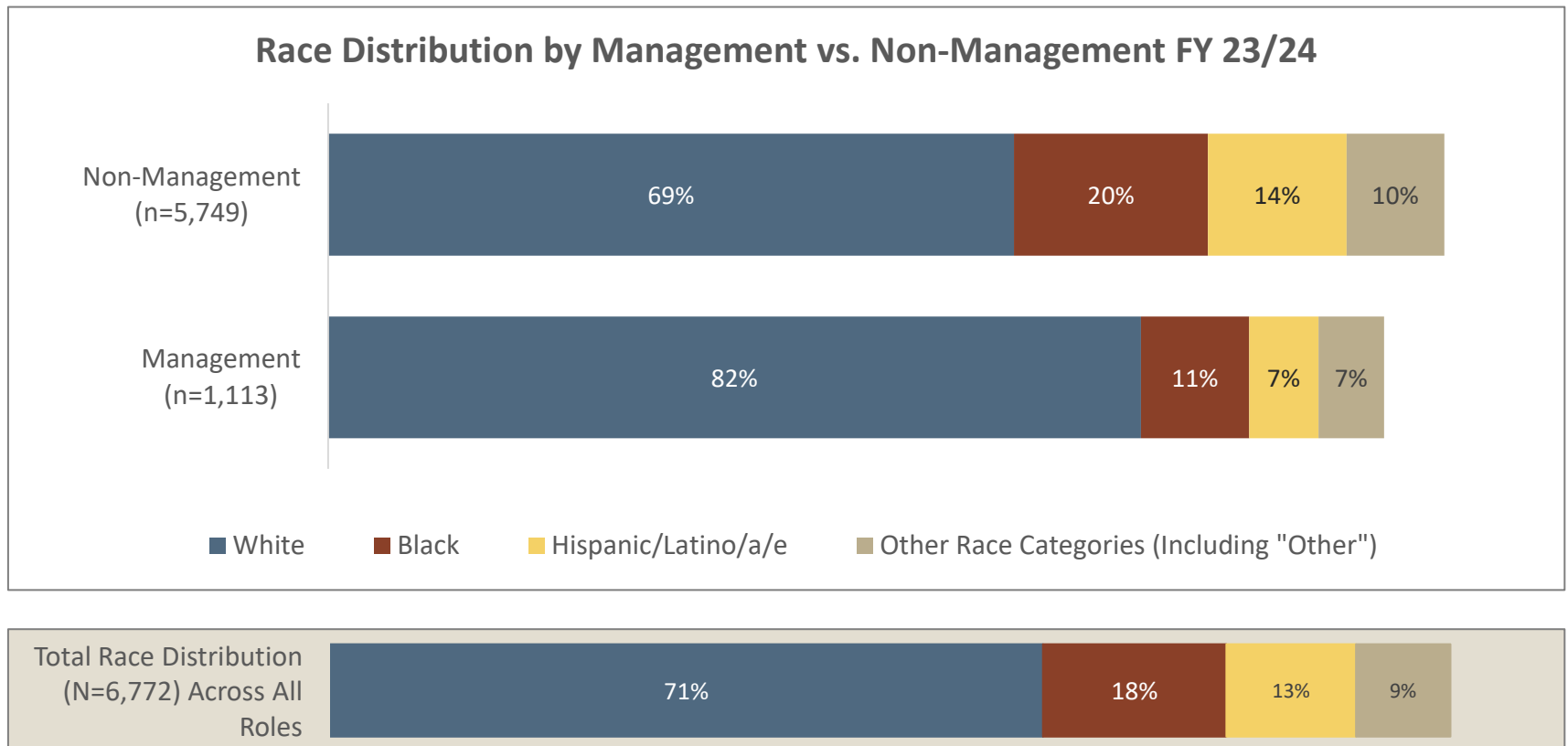
All demographic information is reported by program representatives, not individual staff members.

Distribution of Staff by Race



All demographic information is reported by program representatives, not individual staff members. *Some individuals identify their race as Hispanic/Latine.

Management Status and Race



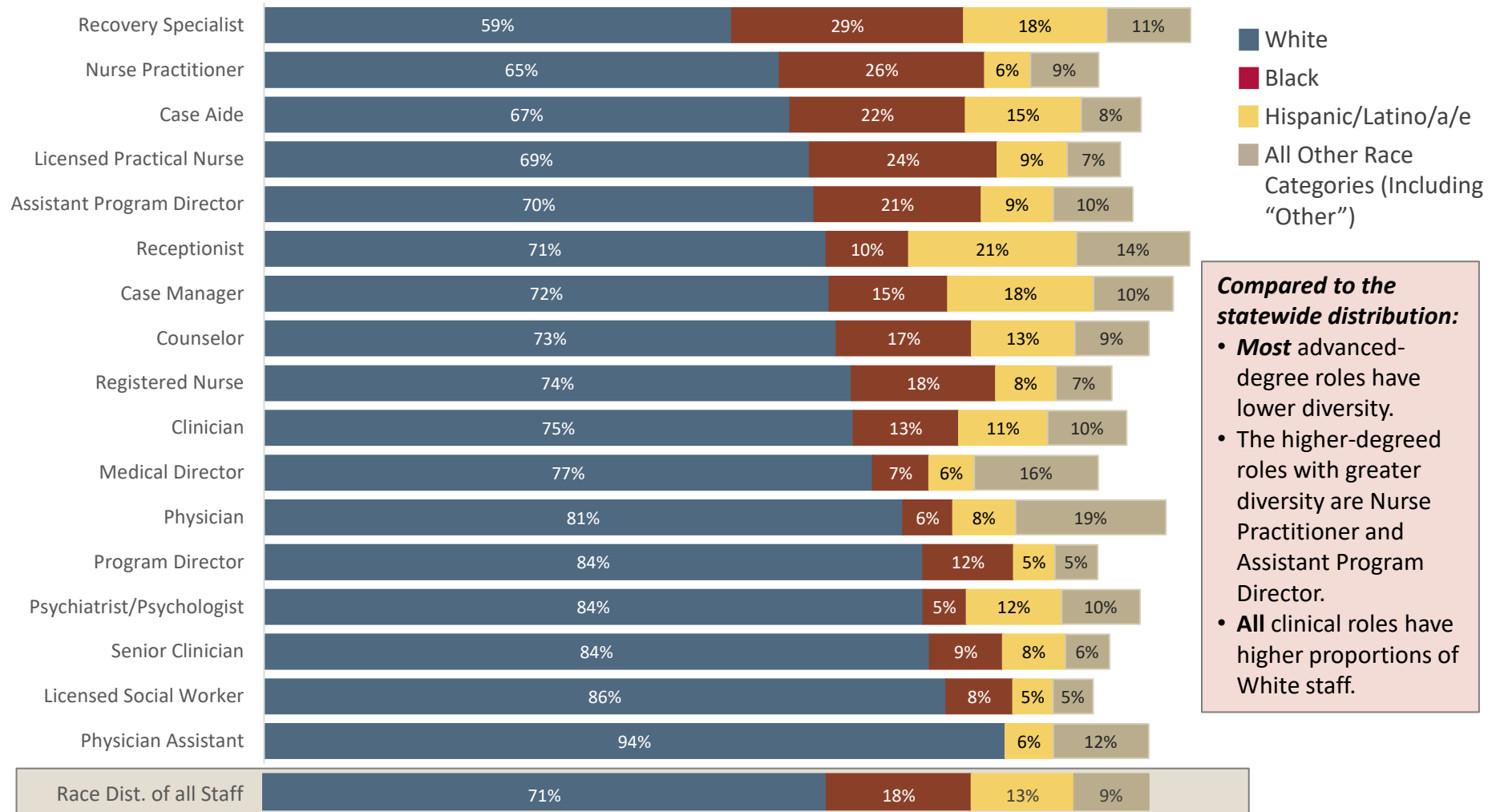
In Management Roles,

- Staff reported as White are **over**-represented
- Staff reported as Black or Hispanic/Latine are **under**-represented *compared to Non-Management and Total Race Distribution.*

All demographic information is reported by program representatives, not individual staff members.

Roles and Race

Race Distribution by Role FY 23/24



*Clinical Director/Clinical Supervisor/Senior Clinician
 *Psychiatrist full Label: Psychiatrist/Psychologist

All demographic information is reported by program representatives, not individual staff members.
 Roles with <5 reported positions are excluded from analysis.

Section 3:

Staff Income FY 23/24



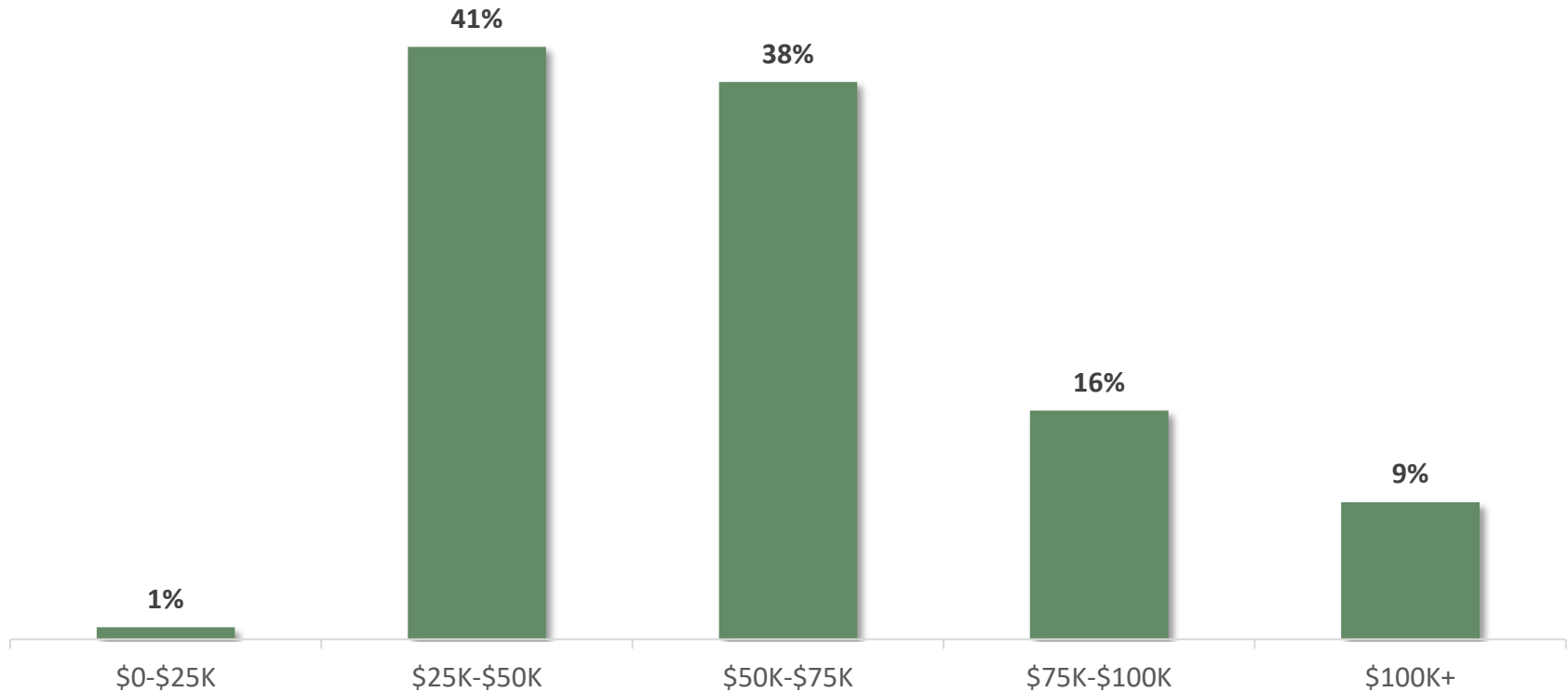
Section 4:

Section-Specific Notes

- Salaries are reported in selected ranges. Salary ranges are not exclusive.
- Salary range is based on annual salary rather than an hourly wage for both full-time and part-time employees.
- Income analysis is limited to full-time employees only.
 - BSAS defines “full-time” work as 37.5 hours or more per week.
- Individuals may be reported in more than one salary category if they appear in multiple program applications in FY 2023 and FY 2024.
- Results for income analysis by race categories are suppressed for small groupings to protect confidentiality.

Annual Income

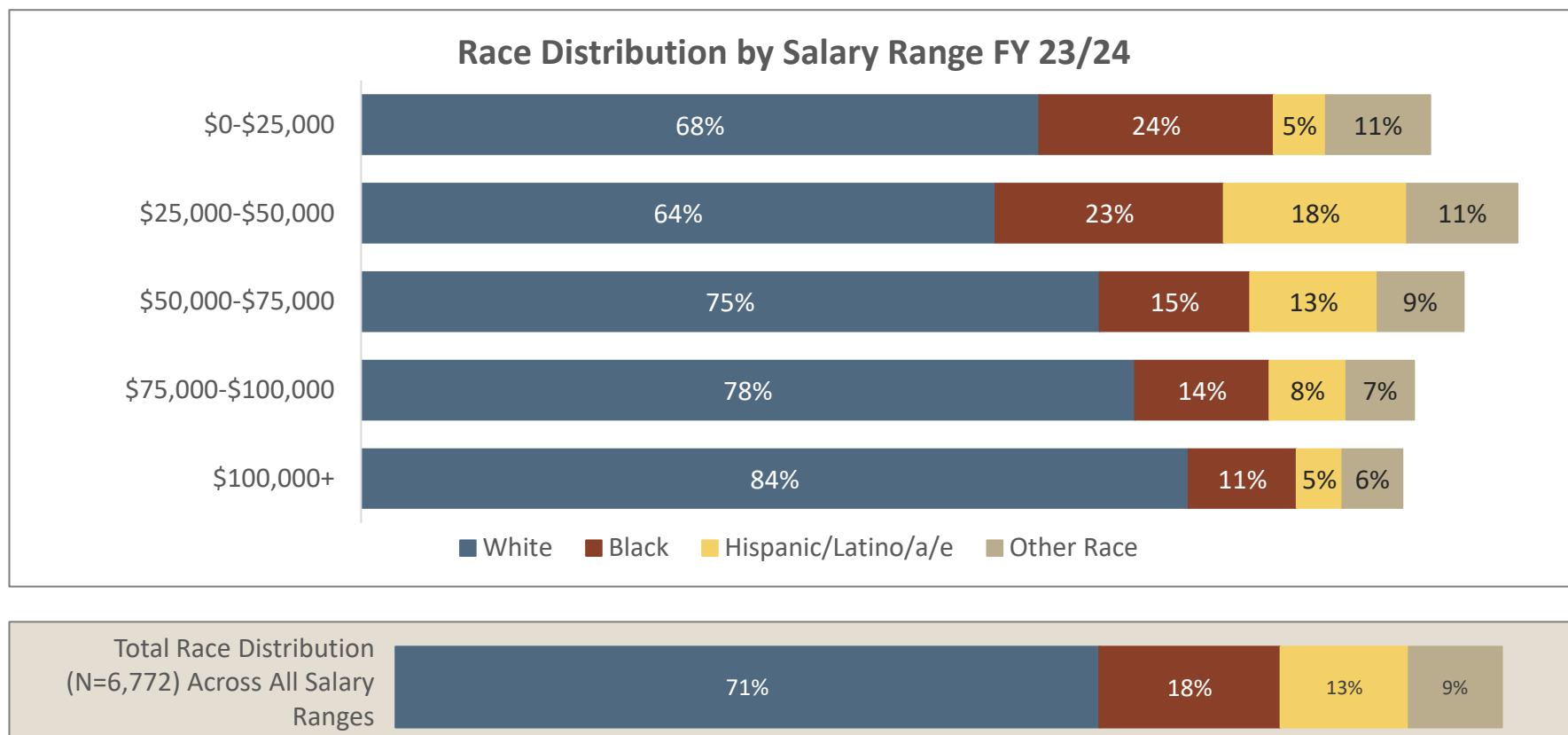
Full-Time Staff Income Distribution FY 23/24 (N=7,045)



- The average annual salary in FY 23/24, based on salary range mid-points, was **\$65,700**.
- **42%** of the full-time workforce reported making \$50,000 or less per year.

Please refer to slide 17 for section notes.

Salary Range and Race Distribution



Compared to their proportion in Total Race Distribution:

- Staff reported as White are **over**-represented in **higher** salary ranges and **under**-represented in **lower** salary ranges.
- Staff reported as Black or Hispanic/Latine are **over**-represented in **lower** salary ranges and **under**-represented in **higher** salary ranges.

*All demographic information is reported by program representatives, not individual staff members.
Please refer to slide 13 for description of race categories and slide 17 for section notes.*

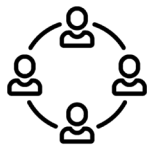
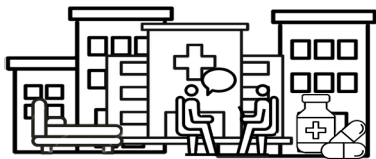
Section 4: Retention



Section 2:

Section-Specific Definitions

Retention is defined as reporting of a given individual across multiple renewal applications over time.



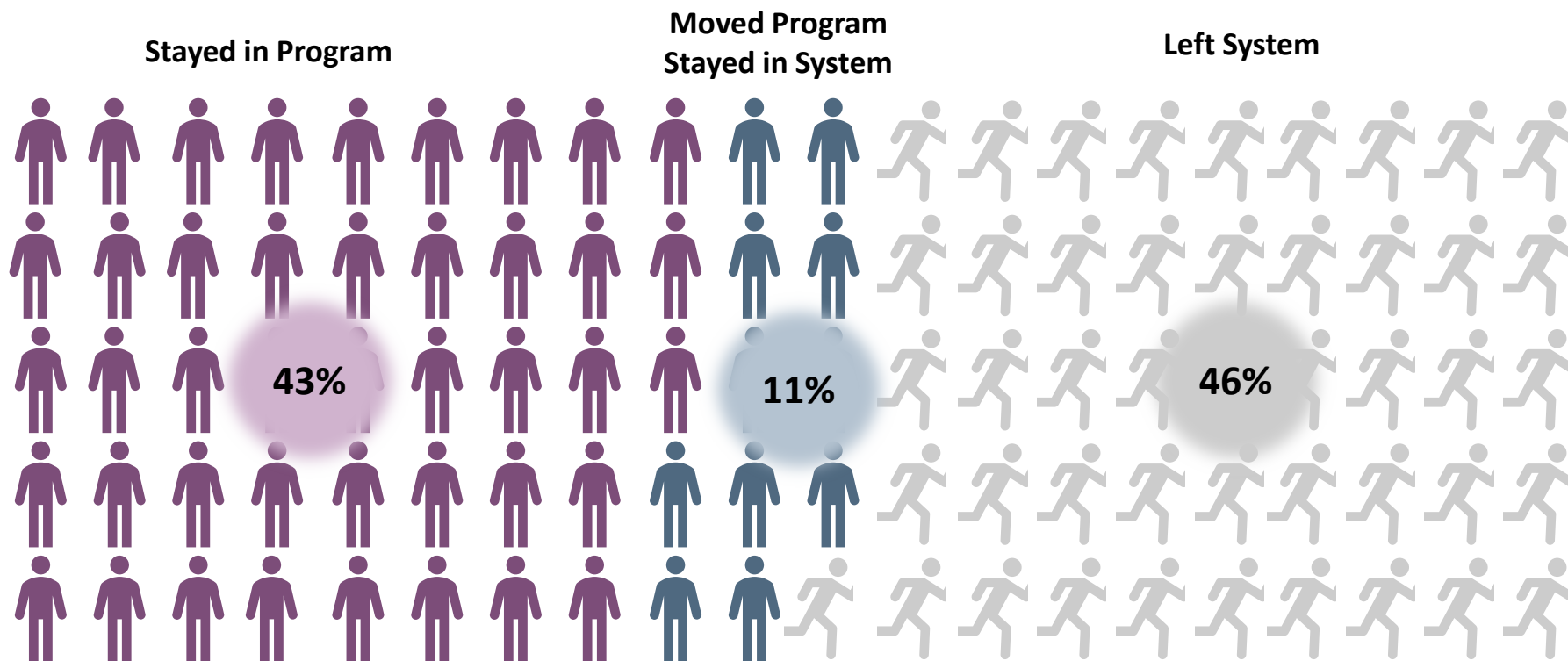
Retention is analyzed on multiple levels:

- **System Level:** Staff who remain in the BSAS Treatment System (even if they change program or role).
- **Program Level:** Staff who remain in the same Program (averaged across all Programs within the Treatment System).
- **Role Level:** Staff who remain in the System in the same Role (even if they change programs).

System and Program Retention

54% of staff were retained in the system from FY 21/22 into FY 23/24.

- 43% of employees stayed in the same program*
- 11% of employees moved to a new program

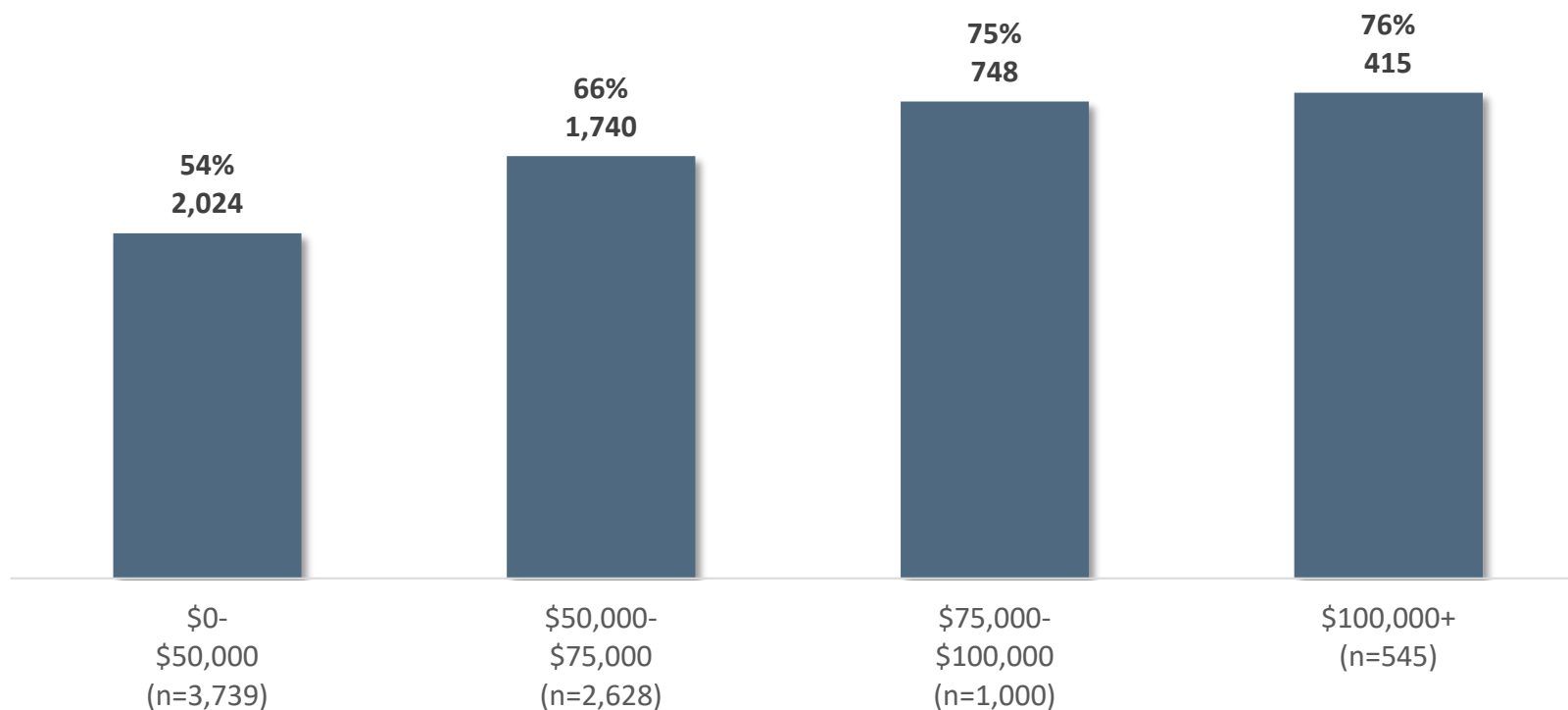


**Some staff were reported in more than one program in FY 21/22. If an individual reported in multiple programs was retained in at least one program into FY 23/24, they are categorized in "Stayed in Program."*

System Level Retention by Income

System Level Retention by Income FY 21/22 into FY 23/24

(Overall System Level Retention: 54%)

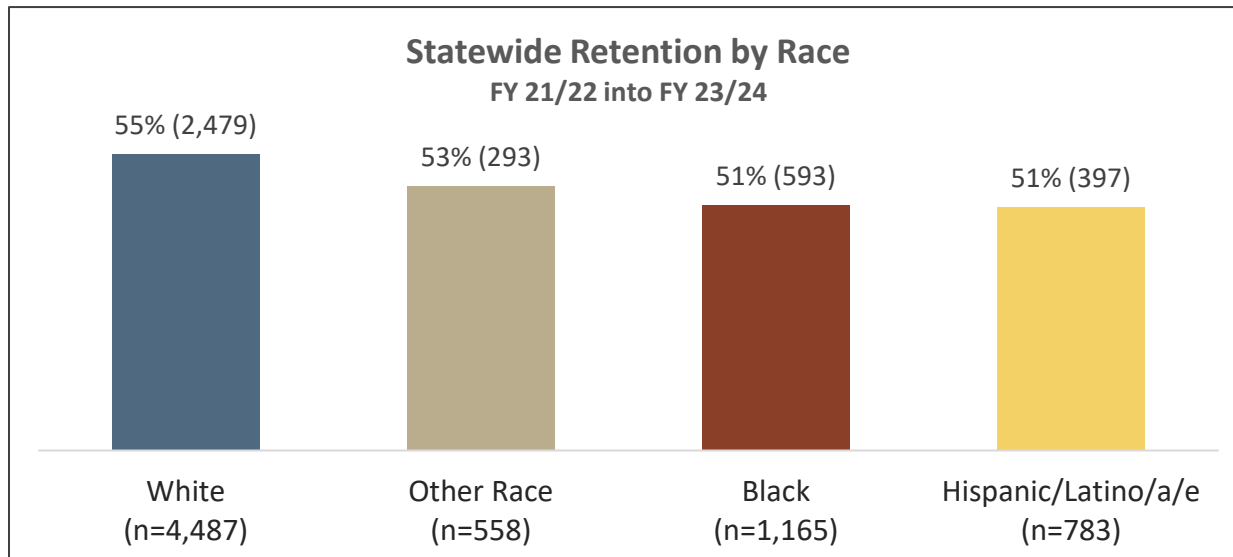


Retention generally **increases** as salary range increases and plateaus at \$75,000 around 75%.

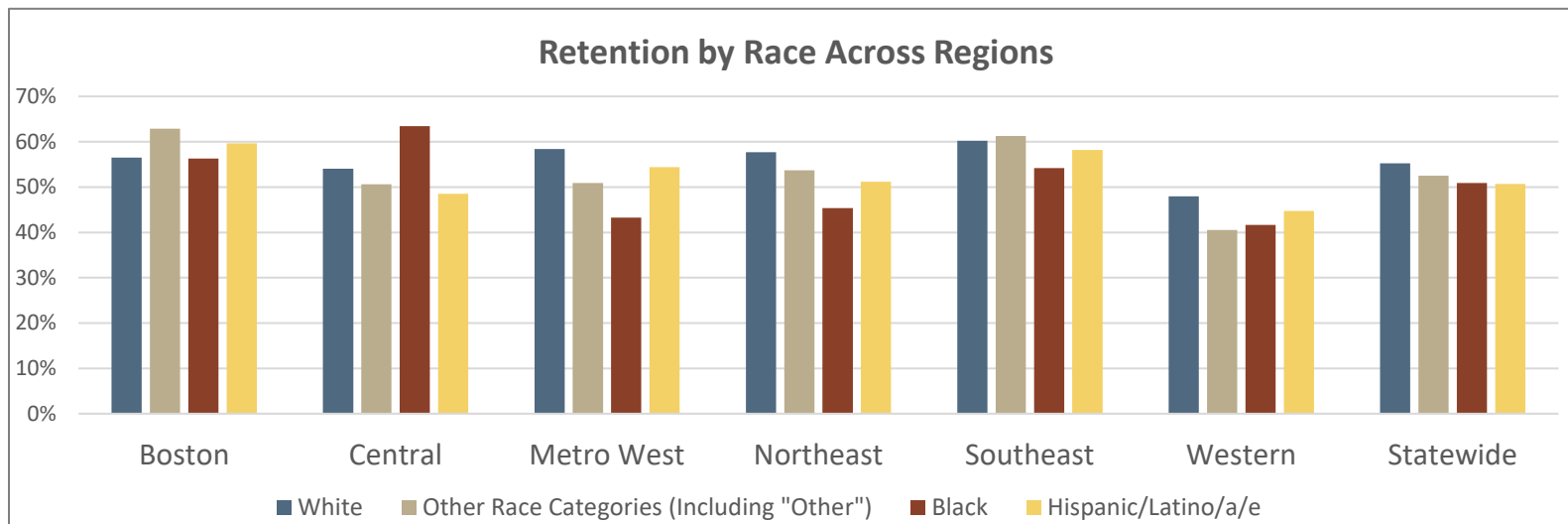
Please refer to slide 21 for section notes.

System Level Retention by Race

Overall System Retention: 54%



Staff reported as White were retained in the system at a slightly **higher rate** than staff reported as Black and/or Hispanic/Latine.



Retention patterns based on race vary from region to region.

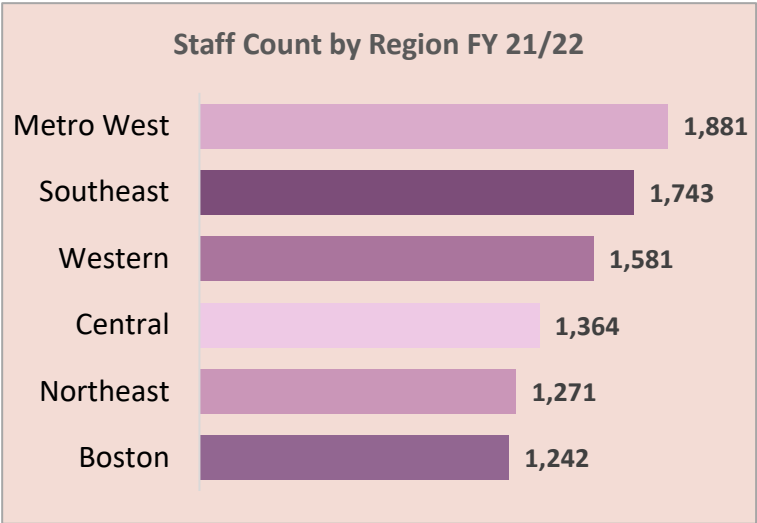
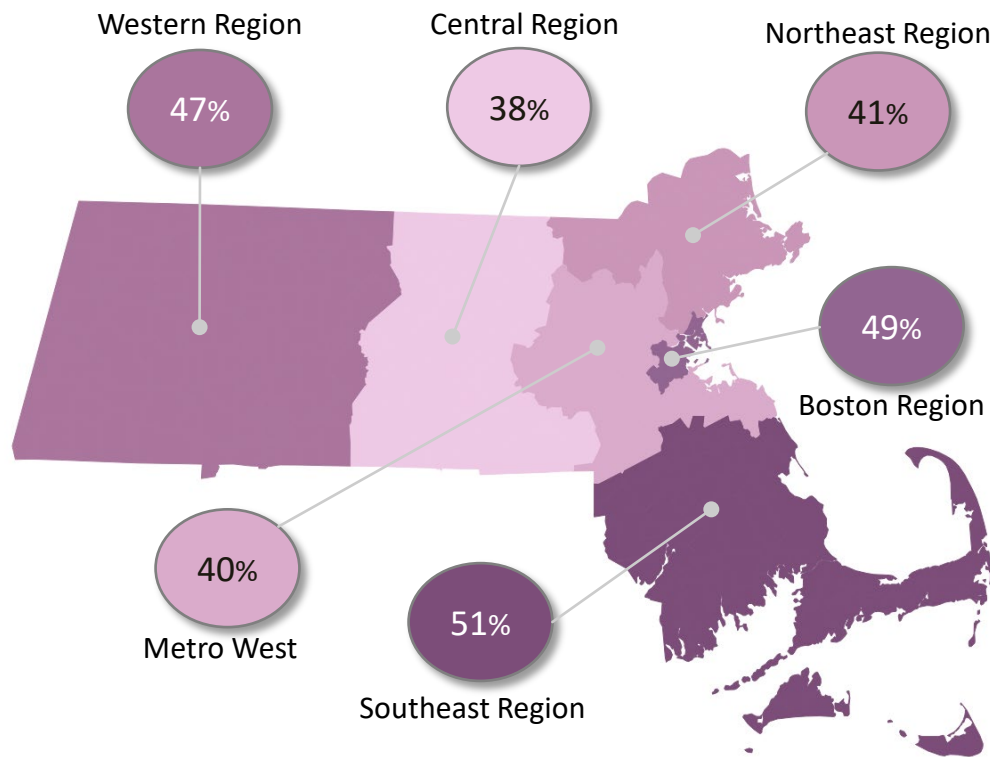
All demographic information is reported by program representatives, not individual staff members.

Program Level Retention

On average Statewide, programs retained 45% of staff from FY 21/22 into FY 23/24.

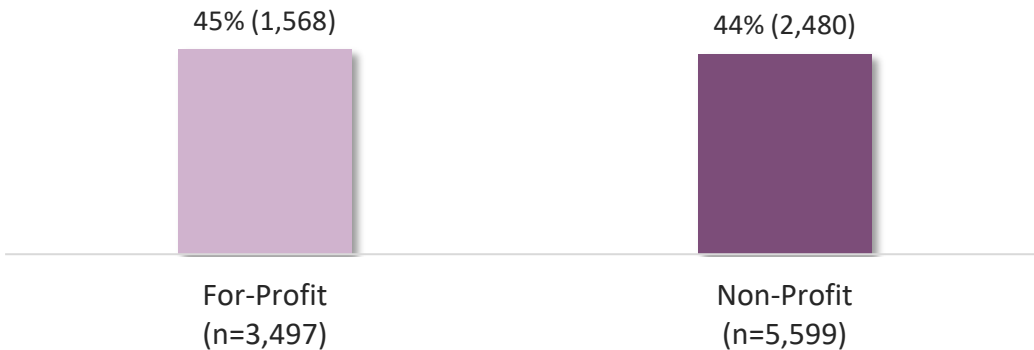
Note: Program level retention analysis excludes programs that have closed since FY 21/22.

Program Level Retention by Region



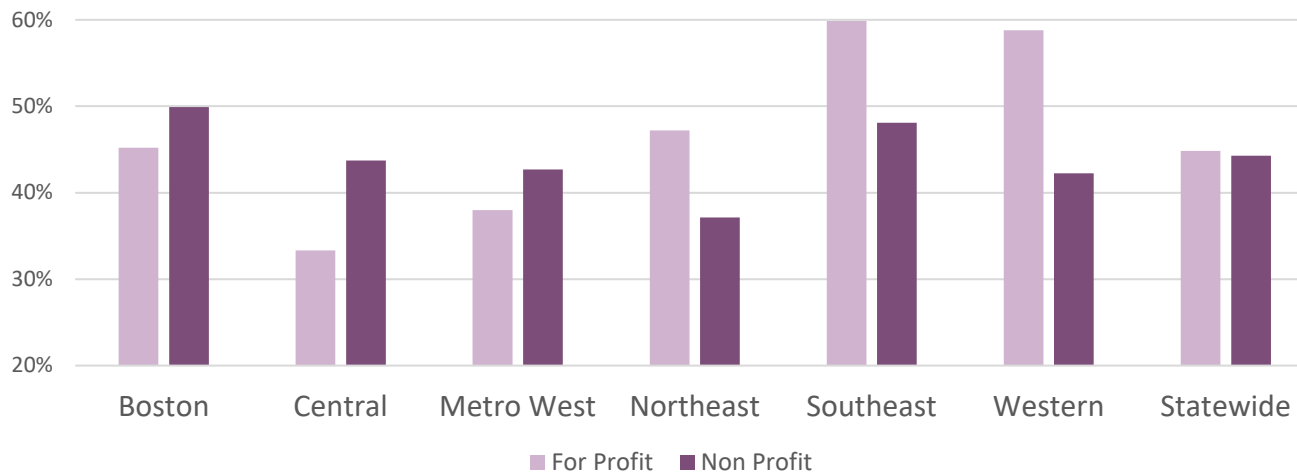
Program Level Retention by For Profit/Not For Profit Status

Statewide Program Retention by For Profit/Not for Profit Status
FY 21/22 into FY 23/24



Statewide, For-Profit and Not-For-Profit programs retain staff at **nearly the same rate**.

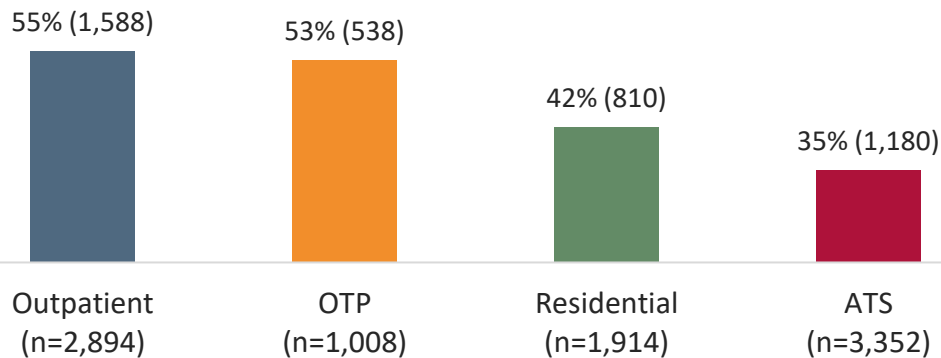
Program Retention by For Profit/Not for Profit Status Across Regions



Regional retention patterns **vary widely** from the Statewide pattern and from region to region.

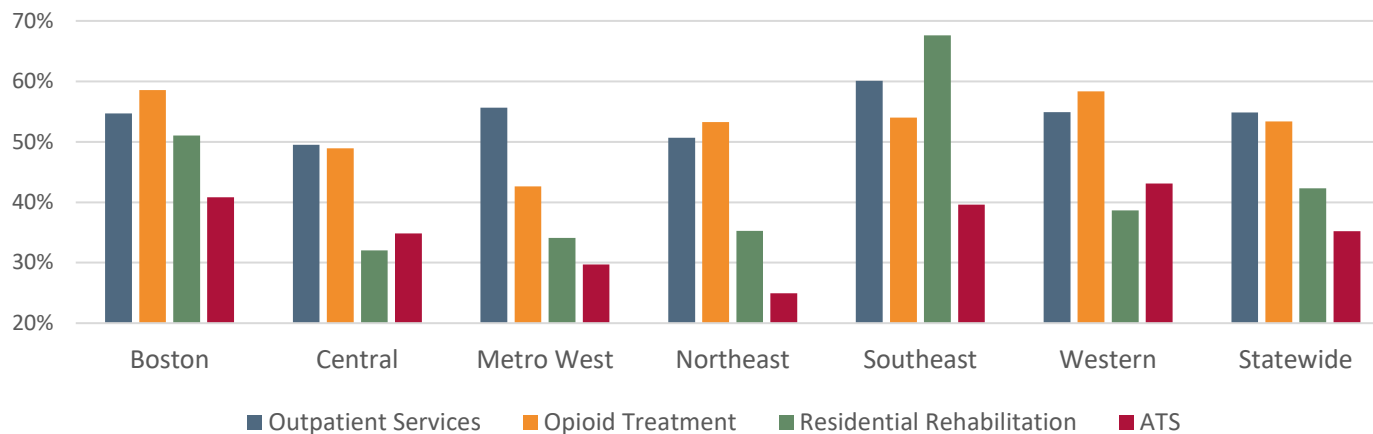
Program Level Retention by Level of Care

Statewide Program Retention by Level of Care
FY 21/22 into FY 23/24



Overall, **inpatient services** retain their staff at a ***lower rate*** than outpatient services.

Program Retention by Level of Care Across Regions



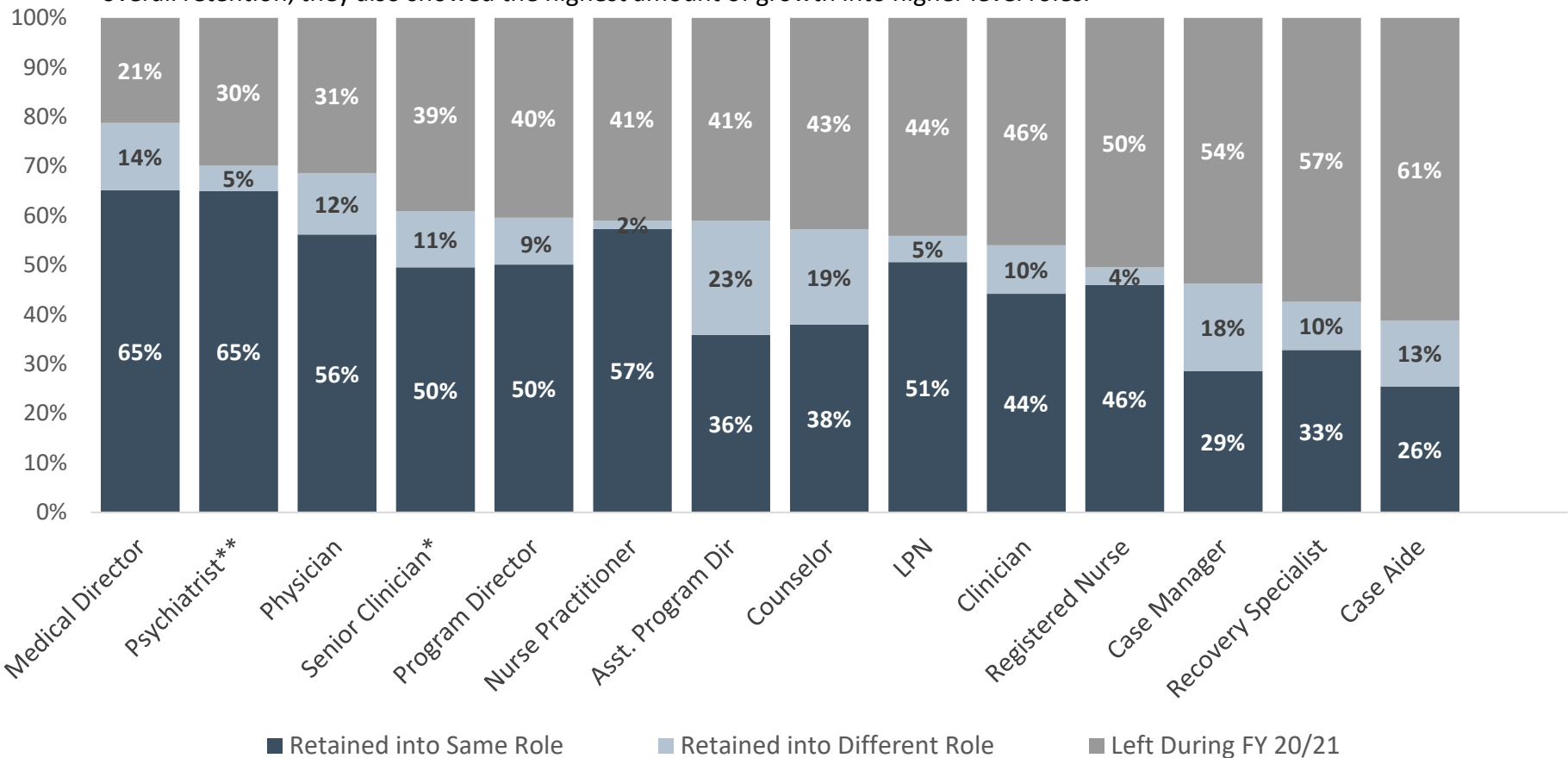
Regional retention patterns **vary widely** from the Statewide pattern and from region to region.

Role Level Retention

System Retention by Role from FY 21/22 into FY 23/24

(Overall System Retention: 54%)

Directors and higher degreed professionals showed the highest overall retention. While Case Managers had some of the lowest overall retention, they also showed the highest amount of growth into higher level roles.



■ Retained into Same Role

■ Retained into Different Role

■ Left During FY 20/21

*Clinical Director full Label: Clinical Director/Clinical Supervisor/Senior Clinician

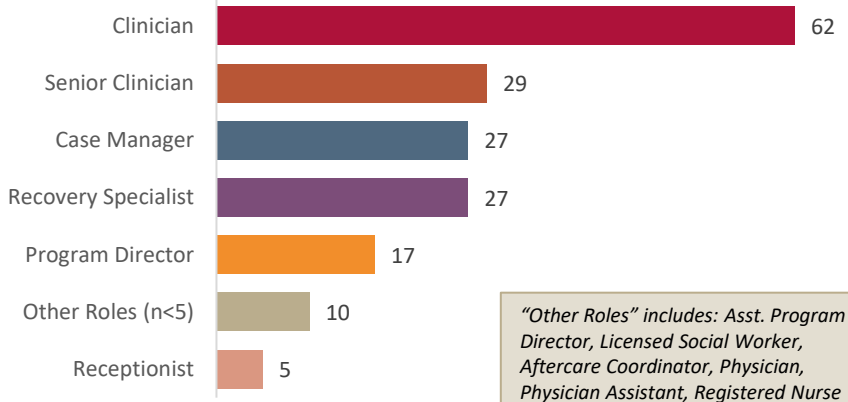
**Psychiatrist full Label: Psychiatrist/Psychologist

Many factors affect workforce trends, including COVID-19 in 2020.

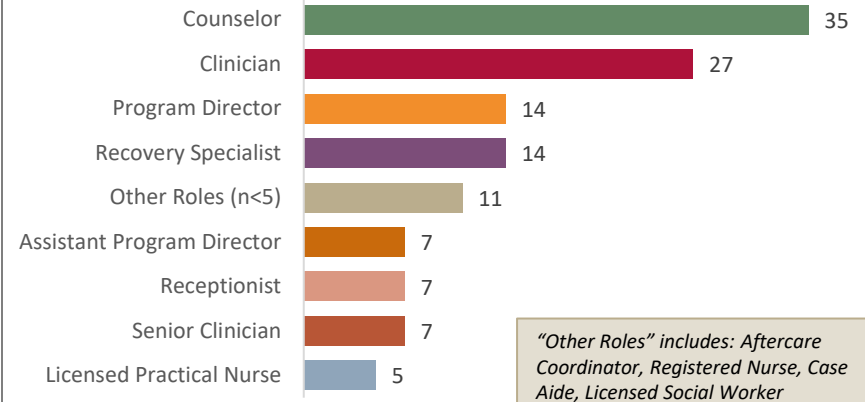
Retention into New Roles

FY 21/22 into FY 23/24

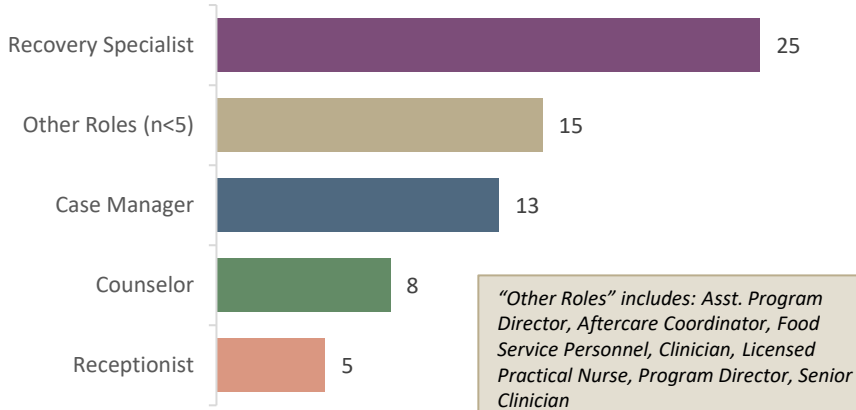
Counselors become... (n=177)



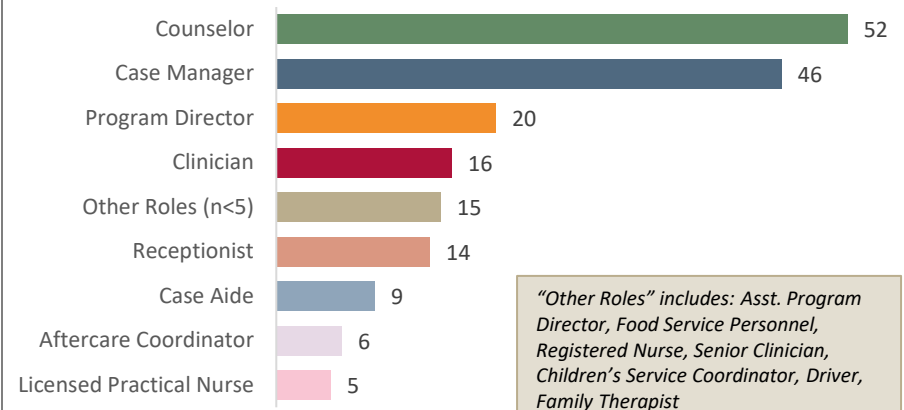
Case Managers become... (n=122)



Case Aides become... (n=66)



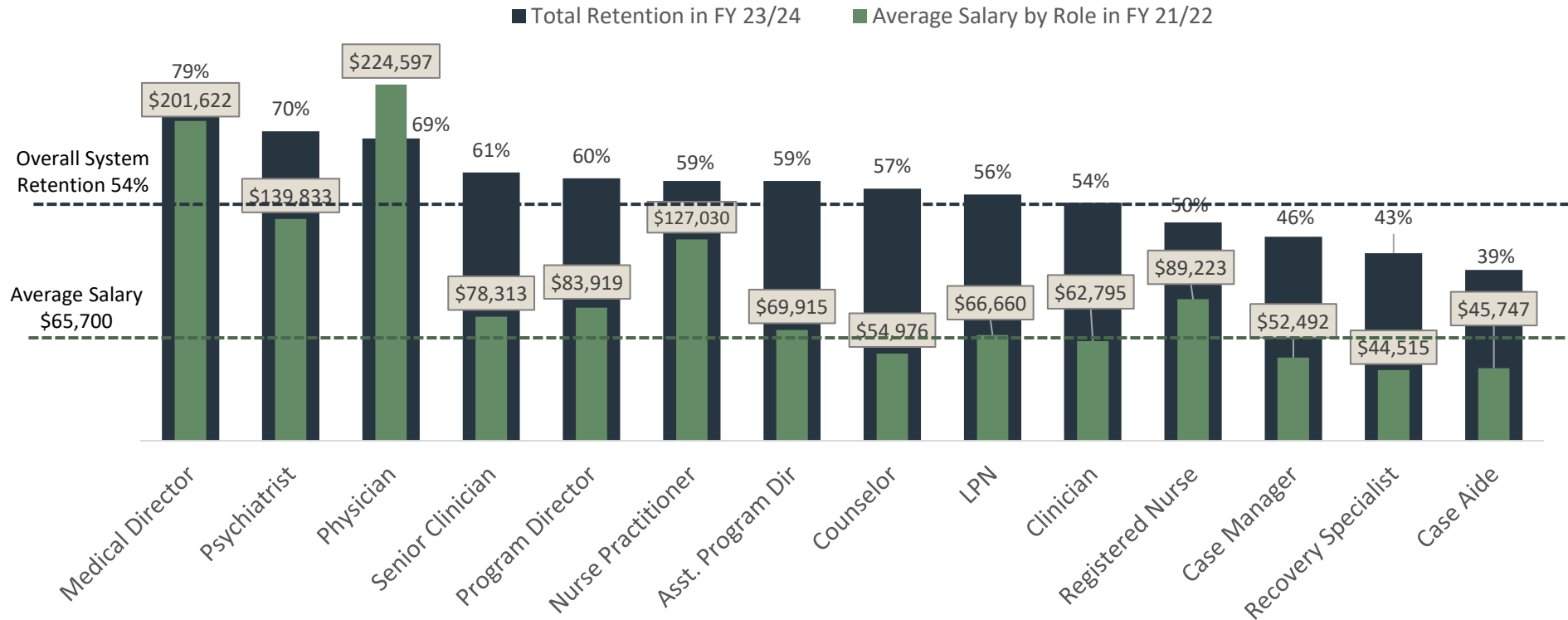
Recovery Specialists become... (n=183)



Charts show new roles taken by individuals who were **retained into a different role** between FY 21/22 and FY 23/24 (refer to slide 28). Movement reflects both within and between program changes.

Role Level Retention and Salary

Retention Rate and Average Salary by Role (FY 21/22 into FY 23/24)



Generally, retention rates by role follow salary patterns with some exceptions:

- **Nurse Practitioners** have almost double the overall average salary, but only slightly higher than average retention.
- **Registered Nurses** have a salary higher than the overall average, but a below average retention rate.
- **SUD Counselors** have a salary lower than the overall average, but slightly higher than average retention.

*Clinical Director full Label: Clinical Director/Clinical Supervisor/Senior Clinician

*Psychiatrist full Label: Psychiatrist/Psychologist

Please refer to slide 21 for section notes.

General Takeaways

Program and Staffing Trends

- Massachusetts Treatment System growth has slowed in recent years.
- 48% of the workforce have worked in the System two years or less.

Retention

- 54% of staff were retained in the system, and 43% of staff were retained in their respective program.
- Statewide system retention varies by Role, Income, and Race. These trends vary within each region.
- Staff with higher salaries are generally retained at a higher rate.
- Program Level retention varies slightly by Level of Care. Generally, Statewide **inpatient services** retain staff at a **lower rate** than outpatient services. These patterns also vary by region.

Income

- 41% of the workforce were reported to earn \$50,000 or less annually.
- The average annual salary for full-time employees (37.5+ hours/week) is \$65,700.
- There are proportionally more White staff in higher salary ranges, and proportionally more Black and Hispanic/Latine staff in lower salary ranges, compared to the overall distribution.

To use this information for your own presentation, policy or program development, please contact Jen Parks at BSAS (refer to slide 38).

BSAS Workforce Initiatives

FY 26 BSAS Equity Initiatives

Supporting Culturally Responsive and Affirming Service Provision

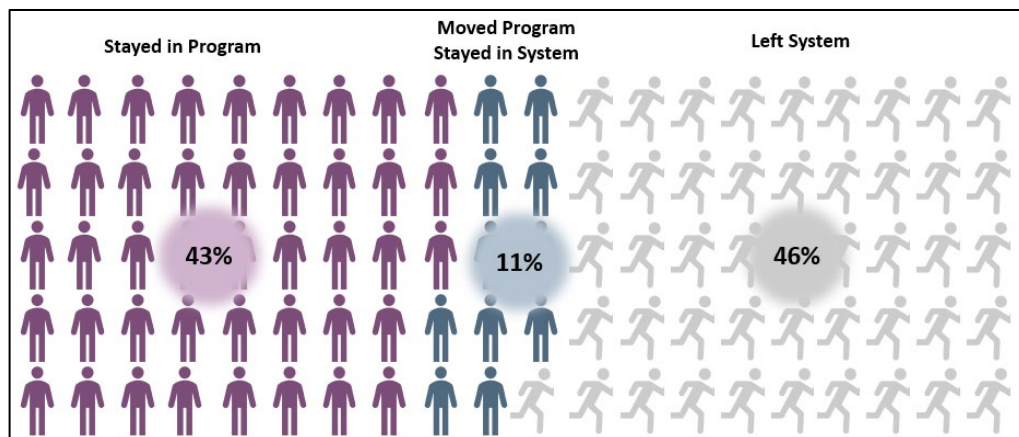
- Piloted the Living Expertise Advisory Pool (LEAP) to engage with community members
- Reviewed and analyzed results of the Culturally Responsive Education Request for Information – creating recommendations
- Funded a Women and Nonbinary Re-Entry Program
- Used a Racial Equity lens throughout BSAS organizational development process (including hiring)
- Continued making anti-racism and other equity-focused trainings available and encouraged for internal and external workforce



Ongoing Use of Data for Quality Improvement

Provider Data Gathering and Analysis

- Licensed treatment program workforce data – ongoing since 2014
- Career Pathway Retention Toolkit in development – to be piloted in FY27
- Retention rates at licensed programs currently being analyzed



Training/Technical Assistance Quality Improvement

- Training/TA Evaluation and QI project with HRiA
- T/TA Trainer & Facilitator Training

FY26 BSAS Capacity Building Initiatives



CAREERS OF SUBSTANCE

Workforce Recruitment & Retention

- [Careers of Substance](#) website
- Credentialing collaborations with Schools of Social Work
- Cross systems collaborations

Training & Technical Assistance (T/TA)

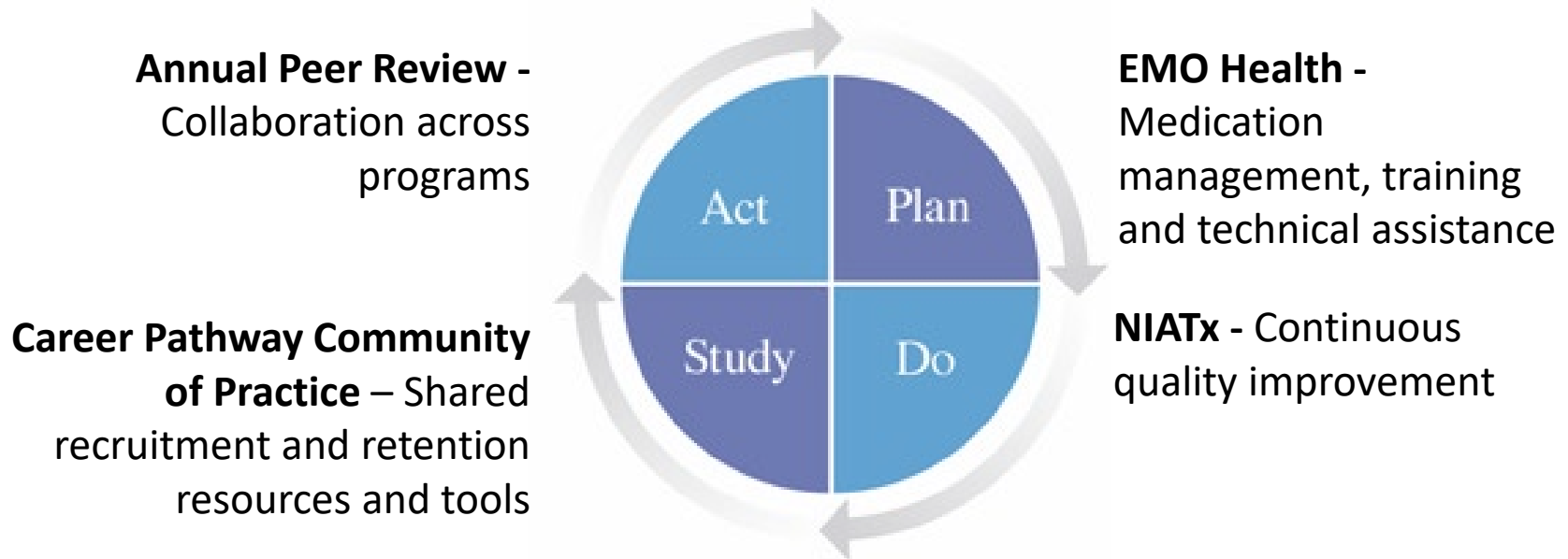
- Recovery Education Collaborative
- Addiction Education Advisory Group
- Supervisor Learning Communities for clinical and non-clinical supervisors



RECOVERY EDUCATION COLLABORATIVE

Practice Improvement Throughout the BSAS System

Organization/Program Practice Improvement Training & Technical Assistance



Evaluation of workforce development activities, through **Appreciative Inquiry**

Resources

Careers of Substance: www.careersofsubstance.org

Careers of Substance Trainings and Events:

<https://www.careersofsubstance.org/trainings-and-events>

The Massachusetts Substance Use Helpline: Helplinema.org

BSAS Website: www.mass.gov/dph/bsas

MA Health Promotions Clearinghouse:

massclearinghouse.ehs.state.ma.us

EMO Health: www.emo.health

NIATx (Process Improvement for Behavioral Health): niatx.wisc.edu

Contact Us

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