



Mental Health Grants for Health Care Professionals

2024 REPORT TO THE LEGISLATURE

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Mental Health Grants for Health Care Professionals

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Executive Summary

The Mental Health Grants for Health Care Professionals program was created by the Minnesota Legislature in recognition of the need to support the mental health of health care professionals as a critical step toward addressing workforce shortages by reducing burnout and strengthening retention in these essential health care roles. Authorized by Minnesota 2022 Session Laws Chapter 99, Article 1, Section 46, and amended in 2023 Session Laws Chapter 70, Section 94, the program awards grants to health care entities for the purpose of establishing or expanding evidence-based or evidence-informed programs focused on improving the mental health of health care professionals. The program was funded for 2023 and 2024 and will end unless action is taken to renew the program.

The program is administered by the Office of Rural Health and Primary Care (ORHPC) at the Minnesota Department of Health (MDH). The authorizing legislation directs MDH to evaluate the impact of the grant program on health care professional burnout and retention and report the results to the Minnesota Legislature, along with any recommendations for improving the grant program. This report is submitted in response to that requirement.

The Mental Health Grants for Health Care Professionals program has awarded two rounds of grants, in 2023 and 2024. Since the program began, requests for funding have greatly exceeded the available funding of \$1,000,000 per fiscal year. For the 2023 grant cycle, MDH ORHPC received 60 applications requesting over \$4.6 million, and 13 were awarded grants. In the 2024 grant cycle, MDH ORHPC received 48 applications requesting nearly \$5.7 million, and 12 were awarded grants.

Grant-funded projects include peer-to-peer support programs, employee wellness programs, initiatives to address structural barriers, and training and resources for health care professionals across Minnesota. To date, 2,467 health care professionals have participated in 2023 grant-funded programs. Most 2023 grantees were able to provide baseline employee retention data from previous years, as well as retention data for 2023 and the first half of 2024, when participation in grant programs was underway or completed. The data show a positive trend in retention at these health care workplaces. In addition to retention statistics, 2023 grantees provided feedback from participants. The 2024 grant projects have just begun, so evaluation data are not yet available.

Evaluation results and feedback from grantees after the first cycle of grants have been strongly positive. Grantees have seen success with employee wellness programs and peer-to-peer support programs in a range of health care settings. Many health care professionals participating in grant programs have reported feeling more supported by their employers, supervisors, and peers, and better equipped to recognize and respond to mental health concerns among their colleagues. Some have described how the grant programs have allowed them to do their jobs more effectively and impacted their decision to stay in their health care role. Grant programs may have contributed to improvements in overall retention rates at grantee organizations.

Renewing funding for the Mental Health Grants for Health Care Professionals program, based on its early successes, would sustain this support for health care workplaces and professionals to create solutions to burnout, barriers, and stigma harming health care professionals' mental health. This grant program supports

promising strategies to improve the mental health of health care professionals, address structural barriers, and strengthen retention in our state’s health care workforce.

Introduction

In recent years, burnout and other mental health concerns among health care professionals, exacerbated by the COVID pandemic, have contributed to high turnover and severe workforce shortages in many health care professions across Minnesota. Supporting the mental health of health care professionals is critical to improving job satisfaction, reducing burnout, and strengthening retention in these essential health care roles.

A 2022 report from MDH ORHPC, *Minnesota’s Health Care Workforce: Pandemic-Provoked Workforce Exits, Burnout, and Shortages*, captured the increased numbers of health care professionals, across nearly all health care professions, who planned to leave their professions for any reason within the next five years. Figure 1 shows results from the annual health care workforce survey conducted by MDH ORHPC and illustrates the increased percentage of health care professionals across several professions who reported an intention to leave their profession within the next five years.

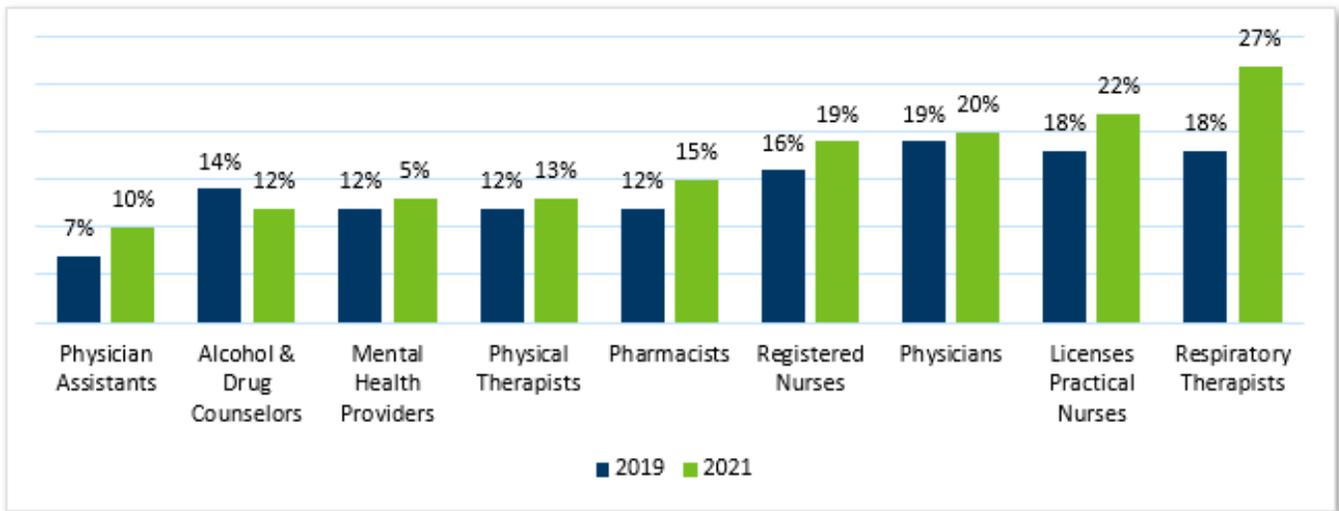


Figure 1. Share of licensed providers who plan to leave their profession within the next five years by profession type and year. From the 2022 report *Minnesota’s Health Care Workforce: Pandemic-Provoked Workforce Exits, Burnout, and Shortages*.

Another key finding from the health care workforce survey was that the share of individuals planning to leave their professions due to burnout was much higher in many professions than it had been in previous years, with up to a quarter of all planned exits related to burnout in some professions. Figure 2 shows the significant rise in planned exits due to burnout across several health care professions.

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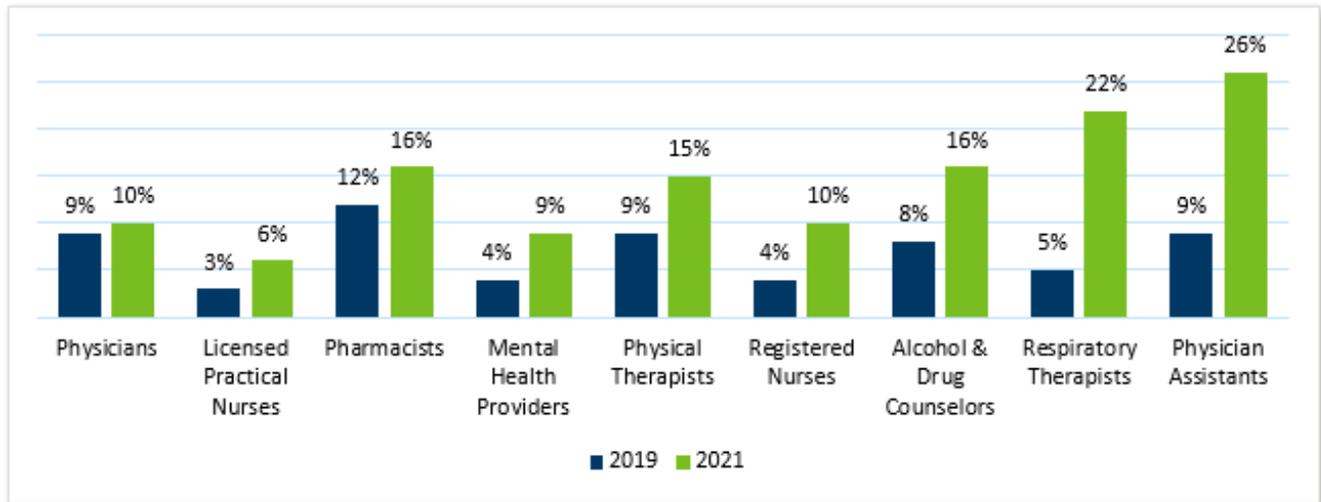


Figure 2. Share of planned exits that are due to burnout or job dissatisfaction. From the 2022 report *Minnesota's Health Care Workforce: Pandemic-Provoked Workforce Exits, Burnout, and Shortages*.

The report highlighted the need for employers to focus on retention, in part by addressing factors contributing to burnout. As the data showed, retention efforts must encompass a range of health care providers.

The Mental Health Grants for Health Care Professionals program was created by the Minnesota Legislature in recognition of the need to support the mental health of health care professionals as a critical step toward addressing workforce shortages by reducing burnout and strengthening retention in these essential health care roles.

The program awards grants to health care entities for the purpose of establishing or expanding evidence-based or evidence-informed programs focused on improving the mental health of health care professionals. Grant-funded programs achieve this by:

- Identifying and addressing barriers to and stigma among health care professionals associated with seeking care, including mental health care and substance use disorder services.
- Encouraging professionals to seek support and care for mental health and substance use disorder concerns.
- Identifying risk factors associated with mental health conditions and suicide.
- Developing and making available resources to support health care professionals with self-care and resiliency.
- Identifying and modifying structural barriers in health care delivery that create unnecessary stress in the workplace.

The authorizing legislation directs the Commissioner of Health to conduct a periodic evaluation of the impact and outcomes of the Mental Health Grants for Health Care Professionals program on health care professional burnout and retention. The legislation further directs the commissioner to submit the results of the evaluation

and any recommendations for improving the grant program to the Minnesota Legislature. This report is submitted in response to that requirement.

Eligible Health Care Entities and Professions

The authorizing legislation provided a list of health care entities eligible to apply for a grant and left room for additional types of health care entities to be added to the eligibility list. MDH included the following entities as eligible applicants for the Mental Health Grants for Health Care Professionals program:

- Clinics
- Community Health Clinics
- Community Mental Health Clinics
- Consortium of Clinics or Other Health Care Entities
- Federally Qualified Health Centers (FQHCs)
- Health Care Systems
- Health Professional Associations
- Hospitals
- Indian Health Services
- Nursing Facilities
- Rural Health Clinics

Grantee health care entities use their funding to establish or expand programs and resources for health care professionals. In keeping with the scope of the legislation and the data showing burnout and workforce shortages across many health care professions, MDH defined eligibility among health care professionals broadly. Grant funding may be used to cover costs for the following types of health care professionals to participate in programs and use resources:

- Advanced Practice Registered Nurses
- Dental Assistants
- Dental Hygienists
- Dental Therapists
- Dentists
- Licensed Practical Nurses
- Marriage and Family Therapists
- Nursing Assistants
- Patient Care Technicians
- Pharmacists
- Pharmacy Technicians
- Phlebotomists
- Physical Therapist Assistants
- Physical Therapists
- Physician Assistants
- Physicians
- Professional Counselors
- Psychologists
- Radiation Technicians
- Registered Nurses
- Respiratory Therapists
- Social Workers
- Surgical Assistants

Eligible Grant Activities

Eligible activities include, but are not limited to:

- Programs to modify structural barriers in health care delivery that create unnecessary stress in the workplace.

- Support programs for health care professionals experiencing mental health concerns and substance use disorders, including peer-to-peer programs.
- Development and implementation of tools and services to support self-care and resiliency.
- Research costs to identify actions the health care entity can take to modify structural barriers that cause unnecessary stress in the workplace.
- Programs to reduce the stigma associated with seeking mental health care.
- Consultant fees associated with program implementation or research.
- App purchase and implementation to support health care professionals experiencing mental health concerns and substance use disorders.

Application Review

In their grant applications, health care entities described the current mental health environment for the health care professionals working in or with their organization, detailing factors impacting these professionals' mental health, including everyday stressors, systemic stressors, and any known risk factors for burnout and mental health conditions. They discussed barriers to and stigma among employees associated with seeking and accessing care for mental health and substance use disorder concerns and how their project would address those barriers and stigma.

Applicants also identified upstream factors, such as the structure of our health care delivery system and institutions, and root causes of mental health concerns and burnout among health care professionals. They described how their project would address upstream factors and root causes. Applicants cited evidence informing their project and its potential to achieve grant program outcomes.

Some key evaluation criteria used by the review committee included:

- Application demonstrates insight into factors impacting health care professionals' mental health, including upstream factors and root causes, and barriers to care.
- Proposed project includes big-picture solutions that address upstream factors and root causes of burnout and mental health concerns among health care professionals.
- Application presents compelling evidence to show why the project has the potential to achieve one or more grant program outcomes.
- Project includes meaningful peer-to-peer component(s).
- Applicant has a clear plan for maintaining the project after the grant period ends.

Award Information

The Mental Health Grants for Health Care Professionals program has awarded two rounds of grants, in 2023 and 2024. Since the program began, requests for funding have greatly exceeded the available funding of \$1,000,000 per fiscal year, as noted in the table below. The table below also summarizes the outcomes of the two funding

cycles. The next section of this report provides details on grantees and award amounts, as well as summaries of grantees’ projects.

Overview of Grant Applications and Awards					
Funding Cycle	Number of Applicants	Number of Applicants Recommended for Funding	Number of Applicants Funded	Total Funding Requested	Total Funding Awarded
2023	60	34	13	\$4,645,607	\$1,000,000
2024	48	26	12	\$5,682,792	\$1,000,000
Total	108	60	25	\$10,328,399	\$2,000,000

Grant-funded Projects

The tables below summarize the 2023 and 2024 grant awards and projects, including peer-to-peer support programs, employee wellness programs, initiatives to address structural barriers, and training and resources for health care professionals across Minnesota.

2023 Grantees			
Grantee Name	Grant Award	Project Type	Project Summary
Allina Health	\$100,000	Peer-to-peer support program	Compare provider well-being outcomes, knowledge of how to access supportive resources, and likelihood of accessing resources across peer support groups and a control group.
Critical Care Services, Inc. - Life Link III	\$50,000	Peer-to-peer support program	Implement an employee-driven resource team to provide peer-to-peer support to health care professionals involved in air medical transport for critically ill and injured patients. Provide professional mental health services to employees and an app for mental health support.
Essentia Health	\$94,500	Peer-to-peer support program	Expand a peer support program into rural clinics, critical access hospitals and regional hospitals. The program provides crisis support and stress

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2023 Grantees			
Grantee Name	Grant Award	Project Type	Project Summary
			management interventions following stressful situations.
Fairview Health	\$100,000	Peer-to-peer support program	Expand a peer support program in clinics and hospitals, responding to adverse events, encouraging health care professionals to seek support and care for mental health and substance use disorder concerns, and making self-care and resiliency resources available.
Fernbrook Family Center	\$94,260	Employee wellness program	Provide job coaching and reflective consultation to mental health professionals and trauma-effective leadership training to supervisors, as well as holding conscious conversations to better support staff through an equity, diversity, and inclusion lens.
Gillette Children’s Specialty Healthcare	\$100,000	Peer-to-peer support program	Train new peer supporters and refresh training for current supporters to reduce the risk of second victim syndrome, burnout, and suicide. Support leaders across the organization in implementing initiatives to reduce burnout and stress.
Kittson Memorial Hospital Association	\$40,551	Employee wellness program	Offer educational opportunities and stress reduction activities, peer-to-peer support, and a mental health app. Integrate other wellness measures into the workplace.
Knute Nelson	\$100,000	Peer-to-peer support program and employee wellness program	Provide group therapy and self-care coaching to supervisors of caregiving staff, who will also form a cohort for peer-to-peer support. Train Licensed Practical Nurses in Mental Health First Aid.
LeadingAge Minnesota Foundation	\$72,346	Peer-to-peer support program	Offer Mental Health First Aid Training and Train-the-Trainer opportunities to long-term care professionals across Minnesota.
Nexus Family Healing	\$34,238	Employee wellness program	Implement a virtual mental health support platform, accessible and free to all employees and their families. The platform includes sessions with therapists and psychiatrists, as well as self-care resources.
University of Minnesota - Community University Health Care Center	\$82,356	Employee wellness program	Support employees and reduce stigma through an employee wellness program that promotes available mental health resources and provides training, wellness activities, and staff recognition. Address the stress of documentation challenges by enhancing employees’ skills related to electronic health records and documentation.
Sanford Health of Northern Minnesota	\$99,250	Employee wellness program and	Bring on a full-time licensed mental health professional to provide individual services, facilitate critical incident debriefings, and support the peer-to-peer program.

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2023 Grantees			
Grantee Name	Grant Award	Project Type	Project Summary
		peer-to-peer support program	Hold quarterly peer-led support groups and promote available mental health resources.
St. Luke's Foundation	\$32,500	Employee wellness program	Provide dedicated spaces for employees to rest and recharge with yoga, meditation and other quiet activities. Offer yoga and meditation classes and other wellness supports.

2024 Grantees			
Grantee Name	Grant Award	Project Type	Project Summary
Amherst Wilder Foundation	\$160,000	Modifying structural barriers	Minimize unnecessary stress and improve work-life balance for behavioral health professionals by implementing technology to streamline documentation.
Bethesda	\$67,000	Employee wellness program and peer-to-peer support program	Offer no-cost therapy sessions to health care professionals and facilitate access to resources for needs such as daycare and transportation. Launch peer-to-peer support networks. Use regular check-ins, surveys, and training to identify risk factors for mental health conditions and link employees to appropriate services.
Children's Minnesota	\$78,000	Peer-to-peer support program	Enhance and grow a peer support program overseen by a multidisciplinary steering committee. The program includes monthly training opportunities.
Crescent Cove	\$57,000	Employee wellness program	Provide internal and external resources, training, and tools to support employees' skill development and mental health as they work with pediatric hospice patients.
Critical Care Services, Inc. - Life Link III	\$50,000	Peer-to-peer support program	Enhance and expand an employee-driven resource team to provide peer-to-peer support to health care professionals involved in air medical transport for critically ill and injured patients. Provide professional mental health services to employees and an app for mental health support. Enhance program with mental health trainings for leadership and staff and making more self-care resources available.
Fernbrook Family Center	\$68,000	Employee wellness program, modifying	Increase leadership and supervisor capacity to support staff during a mental health crisis by providing training and coaching. Expand on equity, diversity, and inclusion efforts to continue addressing structural barriers.

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2024 Grantees			
Grantee Name	Grant Award	Project Type	Project Summary
		structural barriers	
Gillette Children’s Specialty Healthcare	\$160,000	Employee wellness program	Undertake a multifaceted initiative to reduce stress related to electronic health record use, routinely assess health care professionals to identify risk factors for mental health conditions, provide individual and group therapy onsite, and refresh leadership training.
Hennepin Healthcare	\$120,000	Modifying structural barriers	Develop and implement a holistic curriculum to enhance health care professionals’ skills for communicating with patients and colleagues and cultivating emotional awareness, to strengthen connections and reduce burnout.
Minnesota Pharmacists Association	\$35,000	Training and resources for pharmacy professionals statewide	Train pharmacy professionals as Mental Health First Aid trainers through a train-the-trainer program. Develop, compile, and promote resources supporting mental health for pharmacy professionals across Minnesota.
Minnesota Medical Association	\$57,000	Peer-to-peer support program, resources for health care professionals statewide	Create and launch a peer-to-peer education and support campaign informed by a multidisciplinary clinician advisory committee and aimed at physicians, nurse practitioners, and physician assistants, among other health care professionals.
Relate, Inc.	\$68,000	Peer-to-peer support program, employee wellness program	Support mental health professionals through a peer mentoring program; diversity, equity, and inclusion initiatives; and employee recognition and advancement.
Southside Community Health	\$80,000	Peer-to-peer support program, employee wellness program, modifying structural barriers	Train health care professionals in psychological first aid and have them serve as ambassadors, connecting peers to supportive resources and services. Promote utilization of mental health resources and make wellness apps available to employees. Improve electronic health record system and enhance training to reduce unnecessary stress in the workplace.

Evaluation: Retention Data

The initial plan for evaluating the Mental Health Grants for Health Care Professionals program was to use the results of the [Health Care Workforce Survey](#) administered by MDH. This survey, which is completed by licensed health care providers in over 20 professions each time they renew their license, captures professionals’ satisfaction with their career and intention to stay in or leave their profession. Advantages of using existing data from this survey included minimizing the data collection burden for grantee entities and their employees and having consistent data points across grantee entities. However, in early meetings with MDH grantees noted a significant challenge to using data from this survey. This approach would have required each grantee to track participation in their programs using professionals’ license numbers. Grantees advised MDH that precisely because of the stigma surrounding mental health concerns and seeking mental health care among health care professionals, requiring individuals to provide their license numbers when accessing programming and services would have deterred many from participating. Protecting anonymity and confidentiality were high priorities for grantees and their employees.

After receiving this feedback, MDH worked with each grantee entity individually to determine the best sources of data to evaluate the effectiveness of their programs. Most 2023 grantees were able to provide baseline employee retention data from previous years, as well as retention data for 2023 and the first half of 2024, when participation in grant programs was underway or completed. Retention data are for all employees of an organization, not only those who participated in grant programs, but many programs focused on changing the culture of the entire organization and making resources available to all employees. Among the many factors influencing retention rates, grant programs may have been one contributor to the trend of improving retention at these organizations.

Four projects from the 2023 grant cycle are ongoing, ending in January 2025, so data on the total number of participants and the effectiveness of the programs are not yet available. Two other grantees were not able to provide retention data. The 2024 grant projects have just begun, so evaluation data are not yet available. To facilitate evaluation of the 2024 grant projects, applicants in this round were required to provide retention rates and job satisfaction data for their health care professional employees or associates for 2021-2023.

The table below shows the number of participants in each program and available retention data for the 2023 grantees. To date, 2,467 health care professionals have participated in 2023 grant-funded programs.

Pre- and Post-Program Retention Data for 2023 Grantees			
2023 Grantee	Number of Participants	Retention Rates Pre-Program	Retention Rates Post-Program
Allina Health	Ongoing; 79 so far	-	-

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Pre- and Post-Program Retention Data for 2023 Grantees			
2023 Grantee	Number of Participants	Retention Rates Pre-Program	Retention Rates Post-Program
Critical Care Services, Inc. - Life Link	150	Life Link III - Flight Paramedics 2020: 84% 2021: 85% 2022: 95% Life Link III - Flight Nurses 2020: 79% 2021: 75% 2022: 85%	Life Link III - Flight Paramedics 2023: 87% 2024: 94% as of June 2024 Life Link III - Flight Nurses 2023: 93% 2024: 92% as of June 2024
Essentia Health	Ongoing; 335 so far	-	-
Fairview Health	55 trained as peer supporters	No data available	No data available
Fernbrook Family Center	106	2020: 74% 2021: 65% 2022: 72%	2023: 66% 2024: 95% as of June 2024
Gillette Children's Specialty Healthcare	785	2020: 89.29% 2021: 84.48% 2022: 84.32%	2023: 88.18% 2024: 93.86% as of June 2024
Kittson Memorial Hospital Association	73	2021: 80.79% 2022: 72.58%	2023: 79.62% 2024: 82.95% as of June 2024
Knute Nelson	Ongoing; 73 so far	-	-
LeadingAge Minnesota Foundation	161	Statewide long-term care workforce retention statistics: Registered Nurses 2020: 69.4% 2021: 67.7% 2022: 71.2% Licensed Practical Nurses 2020: 73.1% 2021: 76% 2022: 76.6% Nursing Assistants 2020: 62.6% 2021: 64.7% 2022: 63.8%	Statewide long-term care workforce retention statistics: 2023: Registered Nurses: 73% Licensed Practical Nurses: 76.8% Nursing Assistants: 66.3%

Pre- and Post-Program Retention Data for 2023 Grantees			
2023 Grantee	Number of Participants	Retention Rates Pre-Program	Retention Rates Post-Program
Nexus Family Healing	363	2021: 66% 2022: 66%	2023: 64%
University of Minnesota Community-University Health Care Center	Ongoing; 103 so far	-	-
Sanford Health of Northern Minnesota	122	No data available	No data available
St. Luke’s Foundation	62	2020: 82.67% 2021: 80.41% 2022: 79.81%	2023: 84.33%

Evaluation: Feedback from Grantees

In addition to retention statistics, each 2023 grantee was asked to provide a summary of feedback from participants in their programs. Here is the feedback from the grantee organizations that completed a post-grant survey:

Critical Care Services, Inc.

Positive Feedback

“Feedback on the Life Link III CARES Program overall has been overwhelmingly positive. Eligible employees who have participated have expressed their appreciation for the program and the organization’s prioritization of mental health. A significant amount of praise has gone to the members of the CARES Team for volunteering their time to provide peer support and their willingness to listen, as well as share, with those who have requested outreach. The peer driven nature of the program has been well received across our employee population as employees feel the program was created with a strong understanding of their experience. Employees have also expressed appreciation for the accessibility of the program’s resources. We have heavily promoted the program within our overall internal communications plan and created multiple channels through which employees can request support. While we are still focusing on increasing the number of employees who have downloaded the app, those that have articulated a positive experience using the tool to request connection with a CARES Team member or access the library of mental health resources available. Overall, this positive feedback helps validate the program’s direction and build for the program’s future.”

Negative Feedback

“Negative feedback on this program from eligible employees who participated has been fairly minimal. Most have expressed gratitude for the resource and the ability to access it. The only area of feedback for improvement revolved around the coordination of outreach when someone requested peer-to-peer support from a CARES Team member. Depending on the request method (phone, email, app), there were varying times that a CARES Team member was able to reach out to them. As a result, the CARES Team is more closely monitoring who a peer-to-peer request is assigned to and their availability to respond to the request.”

Workplace Culture

“The Life Link III CARES Program has had a very positive impact on our organizational culture. From the onset of the program, a primary objective was to embed this work and the prioritization of mental health in all that we do. As articulated in progress reports throughout the grant period, one of the challenges we faced as an organization with a lot of processes and procedures was getting employees to embrace the value of the program and not dismiss it as another administrative directive. The peer-to-peer nature of the program has been instrumental in overcoming this challenge as employees see this work being driven by others who share their experience. Employees are supportive of CARES Team members and want to see them succeed, which reduces barriers to receptivity. The result is an openness that has allowed this program to progress within our organizational culture effectively. Additionally, MDH funding has been key to validating this work within our organization. The funding provided helped our employees see that there are entities outside of our organization that believe in this work enough to support it with critical resources. The grant generated attention for the program, which helped significantly during the rollout of program components.

Elevating the conversation around mental health in our organization and reducing barriers to accessing support when it is needed has also been apparent within our culture. This is supported by the volume of requests for support from the CARES Team, which have steadily increased throughout the grant period through both individual requests and referrals for outreach from peers or managers. While utilization is a key measure, we also look at how the program is complementing other organizational initiatives in the wellness space. As an example, before every shift our paramedics and nurses take a risk assessment that evaluates their physical and mental state. These assessments are an important tool for safety to ensure that everyone is in a functional space to deliver care in an air medical environment. Historically, pressure to power through physical or mental challenges was not uncommon in the air medical industry. The CARES Program has helped our employees prioritize their wellness, which complements components like the risk assessment process. Similarly, we continue to see increased discussion and idea generation when it comes to mental health as a result of this program. Employees are seeing the benefits of this resource and offering helpful feedback and suggestions around where this program can go next. We see this as a strong foundation we can build on to strengthen our culture and cement this work as a key aspect of our mission.”

Fairview Health Services

Positive Feedback

“Staff who engaged in the training felt it would be helpful to the teams and departments they work in. They did provide ongoing suggestions for process improvement that we were able to integrate into our practices. For example, staff were looking for improved ways of providing outreach so that staff that could potentially benefit were aware of the program. Peer supporters provided the feedback that most peer support services they provided were 10 minutes or less, but all were under 45 minutes. Peer support was most often activated due to acts of violence. Peer supporters indicated that every support service was helpful to reduce subjective units of distress by an average of about half the original rating of distress.”

Negative Feedback

“The length of the training was a barrier for some departments in participating. Leaders expressed some concern about the unbudgeted departmental cost to relieve staff to attend the training. Additionally, leaders had concern that the peer support work would take staff away from assigned duties or become too burdensome. The departments that have participated have seen this hasn’t been a large barrier in practical application.”

Workplace Culture

“Peer support has provided another option to help frontline teams with stress and burnout. Leaders have appreciated having another tool to offer to their team members. The departments that have peer support implemented have given teams more control over the support they receive immediately following an event. Staff can initiate peer support without waiting for leadership to learn of specific events and request formal support from EAP or other supportive services.”

Fernbrook Family Center

Positive Feedback

“Staff felt validated, heard, and supported. Staff reported appreciating having a space to reflect, process their work, and learn/grow with peers.”

Negative Feedback

“None.”

Workplace Culture

“This program has helped improve overall morale of our staff, decrease burnout, and increased their reflective capacity.”

Gillette Children’s Specialty Healthcare

Positive Feedback

“Those who interacted with [the program] felt that the resources provided were useful in practice, the information was relevant, and the leadership training allowed time for conversations about how people could support each other in various situations. Leadership training attendee ratings are outlined below:

- 88% of participants rated 7 to 10 out of 10 in terms of likeliness to recommend this training.
- 84% of participants feel more comfortable talking about mental health at work.
- 87% of participants have a better understanding of mental health.
- 85% of participants feel better equipped to support a colleague around their mental health.
- 86% of participants feel better equipped to create a safe and supportive culture for mental health for their team.

The Employee Resource Group shared that [program partners] helped them better express their ‘why,’ inspiring them to focus on storytelling, with an aim to combat stigma associated with talking about mental health in the workplace. This led to better connections and support for staff who previously had not sought help for past traumas.

Clinical staff expressed excitement about the potential of the Wellness Program Coordinator roles and the commitment that Gillette Children’s has made structurally to protect staff from burnout. Peer support trainees said [a program partner] provided detailed, well-organized training with good content. Participants especially appreciated the real-life examples that the facilitator provided and described her as exceptional. Overall, people felt peer support was needed in the organization, and appreciated that the organization offered the training and prepared them to have these conversations.”

Negative Feedback

“Leadership training attendees who have been involved in this type of work shared that there were similarities between this training and other trainings Gillette Children’s provides (peer support training, crucial conversations, etc.) and that they were hoping for more challenging, Gillette specific scenarios as compared to academic examples.

Scheduling the peer support training at a convenient time for all disciplines was challenging. Some participants wanted a virtual option to the in-person training format.”

Workplace Culture

“Overall, the program has heightened our awareness of employee mental health. We are much more likely to talk about employee mental health and well being as a consideration whenever we are looking at making changes as an organization. Our organization structure has shifted with two clinically trained Wellness Program Coordinators. The SMART goal partnership has introduced wellness impact into goal setting. Additionally, wellness was highlighted in a recent town hall meeting and has been incorporated into our new employee orientation program.”

Kittson Memorial Hospital Association

Positive Feedback

“The mental health grant activities helped us understand just how important it is that mental health in our rural area needs to be addressed. Also, to help people be aware there is assistance and resources available should they need it.

Employees felt it was important for staff to know the signs and symptoms to see someone that is our coworker/employee to help them through their life struggles. They expressed it felt good knowing you work in a place that cares about you as a whole and not looked down on if you need time off from work for mental health issues. It’s the same thing, maybe even more important than any other health issue a person is off work for. Because of our rural location, staff felt any services we can receive are beneficial to our workforce as we don’t have as many options as those in large communities. We feel that facilitating group activities centered around mental health helped to ‘normalize’ the topic more than anything. The more we talk about it, the more it becomes part of our regular life and something that we strive to ensure we tend to as well as pay attention to in our families, coworkers, friends, residents, and patients. Many staff felt the added events and trainings helped employees to feel cared for by the facility.

“Staff feel more appreciated ... Thank you so much for making this possible.”

Employees enjoyed the app and used it for assistance with stress, relaxation, meditation, and for improved sleep. Employees appreciated having the relaxation rooms available to take their breaks to just sit, calm themselves, and relieve tension from their mind and bodies. This was considered a very good asset to our workplace.

“The relaxation rooms are BRILLIANT!! They help both physical and mental fatigue!”

The mental health-based trainings were found beneficial as employees learned a lot about themselves as well as their co-workers such as different learning and leadership styles with tips and tricks on how to interact best with the different styles, recognizing the signs and symptoms of burnout, and resiliency in the healthcare system.

Employees expressed appreciation for the free provider appointments (when they were available) as they felt their mental health is just as important as or more important than other health issues.”

Negative Feedback

“It was hard for certain departments to attend some of the events, trainings or activities because they were short staffed and seldom had time to take scheduled breaks or because of conflicts with the scheduled times of trainings. The location/proximity of the relaxation rooms and/or onsite employee massage was too far away from some of the departments and made it harder to get away. There was extreme disappointment and even some anger that a fair chunk of our team was not [eligible for] mental health grant benefits as we all face

immense work stress and support the direct care staff on a daily basis. We tried our hardest to smooth this over as to not create any divide or any ill feelings within our company morale and culture. Limited resources for us is and will always be a challenge due to our size and location.”

Workplace Culture

“The grant has given employees an opportunity to relax and come together in a social atmosphere in which they can chat openly and honestly as well as form connections with co-workers. Some of the events provided an opportunity for more staff interaction between departments, even if it was short. We feel that was a positive impact as it’s hard to get to know co-workers in an organization where we work in so many separate areas. We feel staff appreciated the support and that any increased support and ‘extras’ we can do for each other boosts morale and gives employees something to look forward to. Next, we feel like people are working more as a team and that has been a good thing towards improving workplace culture. And again, when we share that the activities are focused on mental health of our employees, it goes back to assisting us in normalizing the conversation.”

LeadingAge Minnesota Foundation

Positive Feedback

LeadingAge Minnesota Foundation completed 12 virtual Mental Health First Aid sessions in partnership with Winona State University (WSU). Of the 161 eligible health care professionals that attended, 41 completed the digital post-survey from WSU. Below are quotations from participants:

- *“I use these skills nearly every day with the ... residents that I serve. I now feel more confident that I am doing the most helpful things rather than just hoping I have done the right things.”*
- *“I feel better equipped to handle and recognize changes earlier in residents and staff alike.”*
- *“I have a plan for how to invite people to receive help and have practiced so I am better prepared.”*
- *“I will keep in mind the effects of mental health and the tools I've learned in engaging in conversations with people.”*
- *“I will use my MHFA skills to be more aware of my co-workers’, staff’s, and residents’ mental health and be a touch point for them as needed.”*
- *“I believe that what I have learned will help me every day at work dealing not only with our residents but also our employees.”*

- *“With the course, I am more aware of behaviors and outward signs of people in mental health crisis. This will give me a chance to be able to help/able to approach. I will be more aware of them and not ignore or pass by those who are doing things out of ordinary. Be sure to ask them about it and show concern.”*
- *“I really believe this is valuable learning that everyone could use to get along with people better and how to understand what others are going through.”*
- *“Honestly I believe that all of our different areas could use this information. As such I will be taking this information to our board and see if we can get something set up for them.”*

Negative Feedback

“Negative feedback regarding the course was mainly around course delivery, which cannot be altered since the course is an evidence-based course through the National Council of Wellbeing with national standards in place.”

Workplace Culture

“Since this project supported professionals from a number of long-term care organizations across the state, LAMF is not able to speak on the impact on workplace culture for individual organizations. However, we have heard positive feedback and even some organizations have decided to train their entire staff in Mental Health First Aid (outside of the grant project) after understanding its significance. This indicates a positive and sustainable impact on the workplace culture within those organizations.”

Nexus Family Healing

Positive Feedback

“Employees appreciated the easy access to the platform, the anonymity, and the availability of services to family members. They also like the option of text, voice, or video sessions.”

Negative Feedback

“Some users experienced transition in providers, which was challenging when it occurred after an employee had established a good rapport with the first provider.”

Workplace Culture

“The implementation of [the program] and its subsequent promotion has illustrated the commitment Nexus Family Healing has on supporting the mental health needs of its employees. This has been part of an overarching focus on employee recruitment, wellness, and retention as well as key initiatives to enhance workplace culture.”

Sanford Health of Northern Minnesota

Positive Feedback

“This program has been successful beyond what we had anticipated; the [mental health professional’s] schedule is typically full and employees are self-disclosing how this is benefitting them. Departments served include behavioral health, OB, pediatrics, Med/Surg floor, ICU and critical care.

Our employee wellness score has increased since the implementation of this role; Employee Wellness and Well-being categories improved with mention of this role in many of the comment boxes available.

In addition to the above information, employees have wanted to share their feedback in hopes this position continues. Feedback has included statements such as:

- *I would have left the field without this support.*
- *I would not have been able to continue to see patients as I navigated a significant life change without [the mental health professional].*
- *I didn’t realize how much stored trauma I had just by being a therapist. The amount of release, relief from pressure, and energy I have after completing sessions is indescribable and I couldn’t be more grateful.*

The mental health professional has been invited to the critical care team meeting to review the effects of trauma in the workplace, and continues to complete critical incident and code debriefings.”

Negative Feedback

“Given the success of this, we have incrementally increased awareness of this position within the Bemidji region. Toward the end of the performance period, we focused on expanding into the medical center, which has proven successful in debriefings completed and medical personnel seeking support outside of debriefings. This service will likely need another therapist to be able to fulfill the needs of the region, once fully made aware to the outlying clinics. Both a positive and a negative include that additional medical center employees had been reaching out for services (approximately 5 per week). Employees were disappointed that Sanford wasn’t selected for the new year of funding as the program was just gaining momentum.”

Workplace Culture

“The mental health professional position has been successful and brought renewed strength, energy, and healing to employees. Unsolicited, employees have shared with leadership that having immediate access to a mental health professional to process and address work-related stressors and exposure to traumatic material has significantly shifted their ability to be present for patients, remain at work, and feel energized in their work. One employee shared that they spent 17 minutes with the mental health professional and completed [a

treatment exercise] and the traumatic material had completely cleared ... [they] stated that otherwise [it] would have resulted in 2-3 missed days of work to ground and practice self-care in order to return to work.

The peer group facilitators reported out that it is helpful to have a debriefing option for them outside of leadership, which had been the established option prior to this position. It gives them a layer of confidentiality to process their experience in the facilitator role. We have seen a positive shift in the workplace culture.”

St. Luke’s Foundation

Positive Feedback

“We’ve had wonderful feedback from yoga class participants. They have praised the classes for giving them strength, balance and flexibility. Many have commented on how fortunate we are to have this opportunity in our workplace and the convenience it offers. Another famously described themselves as ‘yoga-reluctant’ and have moved to the ‘yoga-enthusiastic’ camp after the gains she made in her fitness.”

Negative Feedback

“I don’t believe we’ve had any negative feedback from participating eligible employees other than wishing there were more classes at different times. The overwhelming sentiment has been one of gratefulness for the fact the classes are convenient and available at no cost.”

Workplace Culture

“Because the number of participants has been lower than expected, the impact on overall workplace culture would be minimal but a larger impact could be argued on each participant’s particular workplace.”

Recommendations to Improve Grant Program

Results from the Mental Health Grants for Health Care Professionals program, including its impact on burnout and retention, are just beginning to emerge. A second cycle of grants has just begun. And the scale of the program, with just \$1 million available for grants in each of the two funded years, is small relative to the need to address mental health concerns for a very large and complex statewide health care workforce. In addition, four grantees from the first round of grant awards have been given an extension to continue working on their projects and spending down their grant funds through January 2025.

These grant programs involve changing workplace culture, retraining leadership, providing ongoing support to health care professional employees, and – among 2024 grantees – modifying structural barriers. The programs take time to develop and fully implement, and both short- and long-term outcomes of these programs should be evaluated.

Grantees that have finished their grant agreements with MDH are seeking ways to sustain their projects. This is evidence of the need for more funding in this area to support structural changes and practices to promote mental health and wellness among health care professionals. Recommendations for improving this program include:

1. Continue to refine and streamline evaluation measures across all grantee entities to better understand the program's impact. MDH adapted requirements for the 2024 grant cycle based on lessons from the 2023 cycle and will work with grantees to enhance data collection and program evaluation as long as the program continues. These practices will make it easier to identify the most effective programs practices and share them more widely.
2. Renew funding for the Mental Health Grants for Health Care Professionals program. While there are early signs that statewide health care retention rates and workforce shortages may be improving due to a range of new investments and supports, the need to support the mental health of Minnesota's health care workforce remains. Based on its early successes, this program is supporting the creation of solutions to barriers and stigma that harm health care professionals' mental health.
3. Increase funding for a continuation of the Mental Health Grants for Health Care Professionals program. Applications for both cycles have far exceeded the funding available. In recognition of the high demand for this program and the urgent needs it addresses, funding could be increased as well as renewed.

The Mental Health Grants for Health Care Professionals program supports promising strategies to improve the mental health of health care professionals, address structural barriers, and strengthen retention in our state's health care workforce. Findings and best practices from this program will be shared with others in the health care field to inform further efforts.

Conclusion

The Mental Health Grants for Health Care Professionals program has had a positive effect on the health care professionals and workplaces reached by grant-funded projects. This has been true across varied types of health care facilities and providers.

Evaluation results and feedback from grantees after the first cycle of grants have been strongly positive. Grantees have seen success with employee wellness programs and peer-to-peer support programs in a range of health care settings, including urban and rural hospitals and clinics, air medical transport, mental health clinics, and long-term care facilities. Many health care professionals participating in grant programs have reported feeling more supported by their employers, supervisors, and peers, and better equipped to recognize and respond to mental health concerns among their colleagues. Some have described how the grant programs have allowed them to do their jobs more effectively and impacted their decision to stay in their health care role. Grant programs may have contributed to improvements in overall retention rates at grantee organizations.

These results indicate that the grant program has successfully advanced its goals. Grantee organizations have encouraged health care professionals to seek care for mental health and substance use disorder concerns and have addressed barriers to seeking care by, for example, offering therapy sessions onsite at no cost to employees. Feedback from participants and leadership shows that grantees' ongoing efforts have raised

awareness of mental health concerns and normalized discussion of mental health, helping to reduce stigma among health care professionals around caring for their mental health. Making resources available for self-care and resiliency is a component of many of the grant-funded projects. Grantees have trained supervisors and peers to recognize mental health risk factors and are assessing health care professionals more frequently and intentionally to identify risk factors associated with mental health conditions and suicide. Grantee organizations are also working to modify risk factors within the workplace. For example, feeling supported by one's supervisor and peers is a protective factor against burnout, and employees have reported feeling more supported as a result of peer-to-peer support programs and employee wellness programs.

As the current grant cycle progresses, and as additional grantee feedback and data on grant program outcomes become available, the impact of the grant program on burnout and retention among health care professionals in Minnesota can be more fully assessed. MDH will share findings and best practices from this grant program with others in the health care field to extend its impact and inform further efforts. Renewed funding would provide the opportunity to evaluate the results of the Mental Health Grants for Health Care Professionals program over a longer timeframe and with an expanded reach encompassing more settings and health care professionals.

Appendix

Minnesota Session Laws 2023 Chapter 70, Sec. 94. Mental Health Grants for Health Care Professionals.

Subdivision 1. Grants authorized. (a) The commissioner of health shall develop a grant program to award grants to health care entities, including but not limited to health care systems, hospitals, nursing facilities, community health clinics or consortium of clinics, federally qualified health centers, rural health clinics, or health professional associations for the purpose of establishing or expanding programs focused on improving the mental health of health care professionals.

(b) Grants shall be awarded for programs that are evidence-based or evidence-informed and are focused on addressing the mental health of health care professionals by:

- (1) identifying and addressing the barriers to and stigma among health care professionals associated with seeking self-care, including mental health and substance use disorder services;
- (2) encouraging health care professionals to seek support and care for mental health and substance use disorder concerns;
- (3) identifying risk factors associated with suicide and other mental health conditions;
- (4) developing and making available resources to support health care professionals with self-care and resiliency; or
- (5) identifying and modifying structural barriers in health care delivery that create unnecessary stress in the workplace.

Subd. 2. Allocation of grants. (a) To receive a grant, a health care entity must submit an application to the commissioner by the deadline established by the commissioner. An application must be on a form and contain information as specified by the commissioner and at a minimum must contain:

- (1) a description of the purpose of the program for which the grant funds will be used;
- (2) a description of the achievable objectives of the program and how these objectives will be met; and
- (3) a process for documenting and evaluating the results of the program.

(b) The commissioner shall give priority to programs that involve peer-to-peer support.

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Subd. 2a. Grant term. Notwithstanding Minnesota Statutes, section 16A.28, subdivision 6, encumbrances for grants under this section issued by June 30 of each year may be certified for a period of up to three years beyond the year in which the funds were originally appropriated.

Subd. 3. Evaluation. The commissioner shall evaluate the overall effectiveness of the grant program by conducting a periodic evaluation of the impact and outcomes of the grant program on health care professional burnout and retention. The commissioner shall submit the results of the evaluation and any recommendations for improving the grant program to the chairs and ranking minority members of the legislative committees with jurisdiction over health care policy and finance by October 15, 2024.