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Strategies to Retain Mental Health Workers in Community Mental Health Clinics

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Walden University
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Abstract

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MBA, American InterContinental University, 2006

BS, University of Phoenix, 2004

Doctoral Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

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Abstract

In 2017, the United States employee turnover rate for mental health workers with 2 or more years of experience was more than 50%. High turnover rates among these mental health workers are associated with inadequate quality of care for patients with mental health issues in community mental health clinics. Grounded in Herzberg's two-factor theory, the purpose of this qualitative multiple case study was to explore retention strategies used by health care administrators to retain their mental health workers with more than 2 years of experience. The participants consisted of 6 health care administrators who successfully implemented strategies to minimize high turnover among mental health workers in the north Fort Worth, Texas area. Data were collected using semistructured interviews and analyzed using thematic analysis. Three major themes emerged: competitive compensation and incentives, flexible scheduling options, and positive reinforcement. Health care administrators should incorporate flexible scheduling options and improve compensation and incentives for mental health workers within their organizations. The implications for positive social change include the potential for health care administrators to enhance patient care and improve the quality of mental health services by implementing effective retention strategies to increase the number of qualified and experienced mental health workers in communities.

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Dedication

I dedicate my study to my grandparents on both sides of my family. My mother's parents, the late Lewis Shambra, Jr. and Florene Shambra. My grandparents provided me with the guidance, discipline, and the roadmap to God to give me the strength and faith to know that anything can be accomplished if I set my mind to a goal. My father's parents, the late Booker T. Walton and the late Elizabeth Walton, instilled the strength and courage to defeat anything that comes your way. Both taught me to keep my head up high even in defeat; defeat in life is temporary and any defeats in life are lessons to teach and prepare us for something greater. You will be ready for life, and you will be proud of the sacrifices you made to get you where you are today. I would never have completed this journey without their presence in my life. I am genuinely thankful for my grandparents, and I dedicate this document to them. My prayer is that this accomplishment will serve as an inspiration to my family and a message in life, it is never too late, and a symbol that you can do anything if you put your mind to a goal.

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Section 1: Foundation of the Study

To maintain a competitive edge—despite changes in the economy and the competitive landscape—there is an increasing need for employees who are highly skilled in their respective professions in the field of health care (Kurnat-Thoma, Ganger, Peterson, & Channell, 2017). Therefore, organizational administrators seek to increase retention and decrease turnover. Those who are unaware of employees' needs are complicit in the dissatisfaction of their employees, whose departures cost their organizations through higher costs of recruitment, hiring, and training of new employees (Cloutier, Felusiak, Hill, & Pemberton-Jones, 2015). A shortage of skilled employees may also affect the quality of care rendered by health care organizations to their customers (Abujaber & Katsioloudes, 2015). The focus of this study was on the retention strategies that health care administrators (HCA) used to retain mental health workers (MHW) with more than 2 years of experience.

In this section, I explored the research topic through an introduction to the foundational aspects of the research study, identify the research topic, and provide the research problem through a brief discussion of the literature surrounding the research problem. Through the research problem section, I identified the need for retention strategies used to decrease high turnover rates among MHWs, which informs the purpose of the study. I derived the research questions from the purpose of the study. The nature of the research inquiry will inform the selection of the research method and the research design. In this section, I also provided an explanation of the primary research terms and

the theoretical framework, assumptions, limitations, delimitations, and significance of the study. I conclude with a summary.

Background of the Problem

High employee turnover rates influence organizational environments in multiple ways, including psychologically and financially (Cloutier et al., 2015). The employee turnover in the United States was reported as 5.5 million in June 2018, an increase from 4.7 million in July 2015 (Bureau of Labor Statistics, 2015, 2018). The employee turnover rate in the health care industry has increased gradually, from 29.9% in 2013 to 33.2% in 2017 (Bureau of Labor Statistics, 2018). The costs associated with high turnover is estimated as one of the largest accrued by an organization (Abujaber & Katsioloudes, 2015). Increasing employee retention and decreasing turnover rates has been a continuous challenge for HCAs (Cloutier et al., 2015).

The problem of employee retention has become an important area of interest because of the considerable costs associated with hiring, training, and replacing employees (Cloutier et al., 2015). Researchers have examined the influence of retention strategies across multiple industries and have provided recommendations for increasing employee retention (although the research on HCAs' strategies for MHWs is limited). The suggested strategies include job security, flexibility, provision of interesting and challenging tasks, and better training (Cloutier et al., 2015; Deery & Jago, 2015). MHWs.

Problem Statement

High employee turnover rates among MHWs with more than 2 years of experience are associated with inadequate quality of care for patients with mental health

issues in community mental health clinics (Bukach, Ejaz, Dawson, & Gitter, 2017). A

2017 report by the Substance Abuse and Mental Health Services Administration

(SAMHSA) illustrated that for the United States, the employee turnover rates for MHWs

with 2 or more years of experience was more than 50% (SAMHSA, 2017). The general

business problem was that high turnover among MHWs with more than 2 years of

experience results in higher costs and inadequate quality of patient care. The specific

business problem was that some HCAs lack knowledge of strategies to increase the

retention of MHWs with more than 2 years of experience.

Purpose Statement

The purpose of this qualitative, multiple case study was to explore retention

strategies HCAs use to retain their MHWs with more than 2 years of experience in Texas.

The research population consisted of six HCAs who successfully implemented strategies

to minimize high turnover among MHWs in community mental health clinics in Texas.

The potential implications for positive social change from the findings of this study

include improving mental health wellness for patients, innovative interventions in

behavioral health care in clinics, and continued mental health care options in

communities.

Nature of the Study

Researchers may choose from quantitative, mixed-method, or qualitative research

approaches (Rutberg & Bouikidis, 2018). The choice for this study was the qualitative

method. This method allows a researcher to identify and explore the experiences of the

participants to answer what, how, and why questions (Saunders, Lewis, & Thornhill,

2015). First, the quantitative method involves testing hypotheses on the relationship among variables using a deductive approach (Antwi & Hamza, 2015). This method was rejected because the study's research question could not be answered with quantitative data. Second, the mixed-method involves elements from both qualitative and quantitative research methods (Simonovich, 2017). Because the study did not require quantitative elements, this approach was inappropriate (Simonovich, 2017). Third, I chose the qualitative method through which I can identify and explore the perspectives of HCAs, allowing me to obtain qualitative data to answer the research question.

I considered three qualitative designs: ethnography, phenomenology, and a case study (Anderson, 2017). An ethnographic design involves exploring participants' cultures (Goodson & Vassar, 2011). This design was rejected because exploring participants' cultures would not provide the data to answer the research question. A phenomenological research design involves the meanings of lived experiences (Towers, Abushaikha, Ritchie, & Holter, 2020), which may not capture the HCAs' ability to execute policies and practices in the workplace. The case study design was selected to allow for exploring the research question through practices and policies of HCAs from multiple sources to conduct an inquiry about the effectiveness of specific strategies (Yin, 2018).

Research Question

The research question guiding the study was as follows: What strategies do HCAs use to retain their MHWs with more than 2 years of experience?

Interview Questions

1. What retention strategies do you use to retain your MHWs with more than 2 years of experience?

2. What retention strategies have you found work best to prevent job dissatisfaction through understaffing of your MHWs with more than 2 years of experience?

3. Based upon your organization's experience, how, if at all, do your retention strategies decrease job dissatisfaction by addressing the increased job demands on the MHWs with more than 2 years of experience?

4. Based upon your organization's experience, how, if at all, do your retention strategies increase job satisfaction through ongoing training processes to motivate your MHWs with more than 2 years of experience?

5. Based upon your organization's experience, how, if at all, do your retention strategies increase job satisfaction by including employee input, suggestions, needs, and demands regarding their jobs?

6. Based upon your organizations' experience, how, if at all, does your leadership staff support your current retention strategies to retain your MHWs with more than 2 years of experience?

7. What additional information can you share about your retention strategies for decreasing high turnover rates with MHWs with more than 2 years of experience?

Conceptual Framework

The conceptual framework for this study was based on the two-factor theory, which Herzberg developed in 1959, to identify the factors that lead to employee motivation or lack of motivation (Herzberg, Mausner, & Snyderman, 1959). Herzberg developed this theory by applying Maslow's hierarchy of needs theory in the context of the workplace, and suggested that the factors resulting in employee satisfaction with their work differed from the factors that lead to their dissatisfaction (Herzberg et al., 1959). Herzberg described the former factors as "motivation factors" and the latter as "hygiene factors." The motivation factors included employee achievement, recognition, advancement, and responsibility (Herzberg et al., 1959). Salary was a hygiene factor that could cause employee job dissatisfaction without influencing job satisfaction (Herzberg et al., 1959). Motivating factors, also known as "satisfiers," have a more intrinsic influence. Such factors included the type of work, achievement, responsibility, advancement, and recognition (Herzberg et al., 1959).

Herzberg et al. (1959) noted the possibility of a "relationship between job attitudes and output or productivity" (p. 6). Based on leaders' responses in the findings of this study, the efforts to increase productivity in a health care organization with higher turnover rates, and the need to retain more health care professionals, along with the effort to improve employee job satisfaction has become increasingly significant. In this regard, the satisfiers described by Herzberg are significant to the context of this study's findings. In the context of MHWs, the HCAs may foster positivity and retention by addressing both job satisfaction-related factors, which may lead to higher retention, and factors

associated with job dissatisfaction, which may decrease turnover. The data used the two-factor theory to form the conceptual framework of this study was appropriate.

Operational Definitions

The following terms are used frequently throughout the study. In this section, I clarify their use for this research.

Extrinsic motivation factors: Intrinsic motivation is behavior that an employee displays to gain external rewards. This behavior is driven by rewarding a person with praise, fame, or monetary gain. Extrinsic motivation is the opposite of intrinsic motivation and was not based on one's natural motivators (Gultekin & Acer, 2014; Nyambegera & Gicheru, 2016).

Health care administrator: An HCA is a nonclinical professional who makes decisions related to the day-to-day administrative operations of health care facilities and hospitals. The administrators balance the democracy of the health care facility through implementing new policy and policy changes, overseeing the clinical staffing of their professionals, managing the medical logistics, and budget reporting. These administrators also coordinate and resolve any issues and needs of their medical staff and patients, and ensure the adherence to health care laws and regulations are adhered to throughout all departments. These administrators may also be referred to as health care managers (Cowen et al., 2008; Guo, Berkshire, Fulton, & Hermanson, 2019; Hahn, Steinhäuser, & Goetz, 2020).

Intrinsic motivation factors: This term describes behaviors that an employee displays to gain internal rewards through natural satisfaction, responsibility, and

accountability in one's work. Internal motivation factors drive individuals' behavior with no external motivation factors (Erbin-Roesemann & Simms, 1997; Nyambegera, & Gicheru, 2016).

Occupational burnout: This is the state whereby an employee's energy shifts from high to low and displays a lack of commitment. Occupational burnout may cause an employee to become less productive because of a lack of employee recognition, a stressful work environment, or drastic shifts in workload (Freudenberger, 1974; Laeeque, Bilal, Babar, Khan, & Rahman, 2018).

Mental health worker: MHWs provide treatment, documents care, and meet the primary health care needs of patients with mental illness or behavioral problems. These workers are typically poorly compensated when compared to other health care workers (Casper, McNelis, Carey, & Oursler, 2007; Herschell, Kolko, Hart, Brabson, & Gavin, 2020).

Assumptions, Limitations, and Delimitations

Researchers who acknowledge the assumptions, limitations, and delimitations of their study have opportunities to identify factors which could affect the research process (Alluri et al., 2015; Foss & Hallberg, 2017).

Assumptions

In a research study, assumptions are beliefs by the researcher that facilitate the research process. In this study, I assumed that HCAs would not provide input regarding their retention strategies adequately based on their experiences. I also assumed that the participants answered honestly and truthfully without bias during the interviews. Finally,

I assumed that any presence of misleading accounts of their experiences would skew the outcome and the validity of the study.

Limitations

The limitations of a study can influence the validity of research. Alluri et al. (2015) defined limitations as potential issues or weaknesses that could affect the outcome of a study but which are beyond the researcher's control. The limitations of my study emerge from the qualitative research method. A qualitative method involves the exploration of participants' subjective experiences, which may be biased. Further, bias may also occur because I studied the phenomenon retrospectively, especially through those with the experience. However, the triangulation of the data increased its trustworthiness (Fusch, Fusch, & Ness, 2018; Yin, 2018). To mitigate the possibility of participants' discomfort influencing their answers, I assured them of their anonymity and freedom from censorship.

Delimitations

The delimitations define reasonable boundaries to the study or limits of the research based on the choices of the researcher (Yin, 2018). While the identification of the limitations allows the researcher to identify factors that may limit the generalizability of the findings of the research, delimitations refer to acknowledging choices made by the researcher to facilitate the study (Yazan, 2015; Yin, 2018). One delimitation of the study was the small sample size, which is an inherent aspect of the qualitative research method. A small sample size allowed me to conduct in-depth interviews with enough participants.

The sample of the study was delimited to HCAs based on the fact that administrators oversee medical staff and policies, a domain within which retention strategies fall.

Significance of the Study

Contribution to Business Practice

The findings of the study should help local HCAs by suggesting effective retention practices and policies. HCAs should have the opportunity to share their retention strategy experiences, whether positive or negative. The insights derived from the research process represent the knowledge of both the effective and ineffective retention strategies by addressing high employee turnover. The findings of the study may enhance mental health administrators' awareness of recommended practices and policies, which other HCAs may implement or adapt to increase employee retention in their organizations. Such strategies may increase value in operations to HCAs with efforts to recommend attractive work environments, insights on prevention of occupational burnout, and encourage new ways to develop competitive employee benefits for job satisfaction (Coates & Howe, 2015).

Implications for Social Change

The findings of this study are expected to promote social change by improving employee retention practices, which can help HCAs retain their MHWs with more than 2 years of experience. The findings of this study contribute to positive social change by promoting improved employee engagement practices, which, in turn, may result in the efficacy of mental health care for their patients. Understanding effective retention strategies could help patients by giving them more access to mental health care and by

improving the quality of mental health services. Improved services can benefit patients and increase mental health care options in communities.

A Review of the Professional and Academic Literature

The purpose of this qualitative multiple case study is to explore the retention strategies HCAs used to retain their MHWs with more than 2 years' experience in north Fort Worth, Texas. High employee turnover rates among seasoned MHWs have been associated with inadequate quality of care for patients with mental health issues in community mental health clinics (Bukach et al., 2017). Increasing the retention of employees and decreasing turnover rates is a continuous challenge experienced by HCAs (Cloutier et al., 2015). The themes I explored in the review centered on the conceptual framework for the study, which was based on Herzberg's (1959) two-factor theory, including the major assertions of the theory, its history, and its alternative theories.

The review also included a discussion of the research phenomenon and its themes, including employee turnover, employee retention (specifically in the mental health care field), employee job satisfaction, employee job dissatisfaction, recruitment, and administration. The themes associated with the research phenomenon also covered the conceptual framework. The search strategy was to explore and highlight the existing research and the gaps in the literature on the research topic. The review of literature is categorized into eight subsections: two-factor theory, history and criticism of the two-factor theory, alternatives to two-factor theory, employee turnover and retention, employee job satisfaction and dissatisfaction, recruitment and retention, application of two-factor theory in administration, and application of two-factor theory in health care.

The review of the literature was based on professional literature. The following research databases were used: Google Scholar, JSTOR, Taylor and Francis, PubMed, Educational Resource Information Center (ERIC), and Science Direct. I use the following keywords, either alone or in association with other keywords: *two-factor theory, Herzberg, employee turnover, employee retention specifically in mental health care, employee job satisfaction, employee job dissatisfaction,* and *recruitment administration*. The relevance of these terms to the research problem and the research phenomenon under investigation led to additional relevant studies. Further, I ensured that only the latest peer-reviewed findings included: more than 149 (85%) of the total of 173 articles used were published in the last 5 years. I included some older literature, particularly seminal research on the conceptual aspects, which consisted of 24 (13.9%) studies published in 2014 or earlier.

Application to the Applied Business Problem

The objective of this qualitative, multiple case study was to explore the retention strategies that some HCAs used to retain their seasoned MHWs in Texas. When providing mental health services, HCAs have the ability to implement new policies and change practices to retain their seasoned MHWs in their mental health clinics. Employee turnover influences an organizational environment in multiple ways, including psychologically and financially (Cloutier et al., 2015). The turnover in the United States was 5.5 million in June 2018, an increase from 4.7 million reported in July 2015 by the U.S. Department of Labor (Bureau of Labor Statistics, 2015). Employee turnover rates in

the health care industry have increased gradually from 29.9% in 2013, 30.3% in 2014, 31.3% in 2015, 31.85 in 2016, to 33.2% in 2017 (Bureau of Labor Statistics, 2018).

Two-Factor Theory

Published originally in 1959, Herzberg's two-factor theory for motivation in the workplace has contributed a theoretical foundation to multiple theories developed in the field of human resources (Herzberg et al., 1959). Herzberg's original study has been the most replicated research study in its field (Hur, 2017). The foundational assertion of this theory was that job dissatisfaction and job satisfaction are influenced by two separate types of factors (Herzberg et al., 1959). These factors are inaccurate to measure both dissatisfaction and satisfaction as part of the same continuum (Sanjeev & Surya, 2016).

The seminal work in which Herzberg et al. (1959) established the two-factor theory enjoyed full use of the workforce available in a geographic area that was dominated by heavy industry with unions. The conditions in which Herzberg's two-factor theory developed differed from those of the present, in which unionization declined. While the workforce has become more diverse, unemployment was higher, and the work environment characterizes the service jobs (De Vito, Brown, Bannister, Cianci, & Mujtaba, 2018). The findings from Herzberg's study have been discussed continuously and successfully applied to various contexts and times (Lo, Lin, & Hsu, 2016).

Herzberg et al. (1959) formulated the hypothesis that work dissatisfaction and satisfaction are impossible to assess reliably as part of one continuum. Subsequent field tests led to the further evolution of the initial hypothesis, which stated the differences in the factors associated with the job which led to negative views regarding work compared

to those which led to positive views regarding work among employees. In semistructured interviews with participants, their experiences with both bad and good aspects of their work explored. The experiences quantified on a scale, where the lowest score referred to participants experiencing a minimum amount of influence of a specific factor on their emotions, and the highest score referred to participants experiencing the maximum influence of a specific factor on their emotions (Herzberg et al., 1959). The findings were analyzed to yield results suggesting the influence of various factors on workers' views about their intensity (Herzberg et al., 1959).

The findings from Herzberg's study suggested several patterns. Specifically, the researchers found a few factors that predicted higher scores (Herzberg et al., 1959). The intrinsic nature characterized these factors about their work. Herzberg characterized the relatively long-term nature of satisfaction, rather than short-term events such as particular achievements that were not intrinsic motivation factors to work (Herzberg et al., 1959). These factors were markedly different from the factors associated with low scores. Herzberg et al. (1959) suggested that multiple sources could cause job dissatisfaction. The results led to the confirmation of the hypothesis and the introduction of the two-factor theory.

Based on the two-factor theory, the aspects which influence satisfaction with work are possible to categorize into two groups, namely motivation and hygiene factors (Hou, 2015). The hygiene factors involve the work itself, while the latter involves factors associated with work (Matei & Abrudan, 2016). For instance, following the factors would include salary, work environment, leadership, relationships between workers, work

security, benefits, and organizational policies (Matei & Abrudan, 2016). In contrast, the motivation involves factors which lead to positive work perceptions among employees through meeting their self-actualization needs. Such factors include advancement in work, job responsibility, the nature of the work, and recognition of contributions and achievements (Holmberg, Caro, & Sobis, 2017). The fundamental insight of Herzberg et al. (1959) was the fact which satisfaction and dissatisfaction were not the opposite of each other. Instead, satisfaction was antonymous of lack of satisfaction, while dissatisfaction was antonymous of the lack of dissatisfaction (Herzberg et al., 1959). Addressing hygiene requirements could help deter inefficient output and dissatisfaction; only addressing motivation requirements resulted in introduction factors, which led to higher productivity (Herzberg et al., 1959).

Herzberg et al. (1959) found that positive perception had more influence on productivity than negative perception. Regarding retention, Herzberg et al. (1959) found that negative perception led to employee withdrawal concerning work. Employee retention based on the extent of their work satisfaction. The findings of Herzberg et al. (1959) did not show an influence of perception on the participants. The contribution of the two-factor theory in the field of management in the workplace represented a more nuanced explanation regarding the factors affected job satisfaction (Gładziejewski, 2016). The theory included a clearer understanding of the factors which influenced employee perception (Alshmemri, Shahwan-Akl, & Maude, 2017). The power of the theory's assertions in explaining a more extensive range of behaviors led to significant subsequent research developing the critical aspects of the theory (Alshmemri et al., 2017). Within its

context, the two-factor theory provided a better approach to understand motivation at the workplace, which highlighted the fact the work done by managers to motivate the workers was not sufficient because of their excessive focus on hygiene factors (Alfayad & Arif, 2017). Herzberg et al. (1959) concluded that recognition, responsibility, growth, advancement, and individual achievement are necessary to inspire motivation among employees. The findings of later researchers have supported these findings, primarily regarding the differences between the factors responsible for dissatisfaction with work, known as hygiene factors, and the factors responsible for satisfaction with work, known as motivation factors (Gładziejewski, 2016; Holmberg et al., 2017; Matei & Abrudan, 2016).

History and Criticism of Two-Factor Theory

The two-factor theory was a contribution inspired by the needs and insights from the period in which it developed. By grasping the theoretical implications based on these needs and insights, I reviewed the contributions of these insights and discussed the convention of beliefs regarding the workplace aspects targeted in the two-factor theory. When the findings of Herzberg et al. (1959) were published, the explanations provided in general to understand work satisfaction was based on an understanding of work dissatisfaction and work satisfaction in the same continuum. Within this continuum, the average condition viewed as a neutral experience characterized by neither dissatisfaction nor satisfaction (Herzberg et al., 1959). Researchers believed that the views of employees changed by their experience moving in either of the two directions (Herzberg et al.,

1959). Driven by the need to increase worker productivity, firms centered their efforts toward hygiene factors.

Based on their findings, Herzberg et al. (1959) concluded this approach to be counter-productive and argued for improvements toward motivators to increase worker satisfaction. Herzberg et al. (1959) suggested reforms directed to enhance employees' ability to obtain their aims associated with their work and promote alignment between the employees' abilities and job responsibilities. Herzberg et al. (1959) further highlighted the significance of the role of leadership in increasing employee satisfaction through the recognition of their contributions. These authors also suggested that providing employees with some flexibility regarding the formulation of their goals could further enhance their experience of work achievement.

Herzberg, Mausner, Peterson, and Capwell (1957) reviewed the research conducted to measure employees' perceptions, which led to often-contradictory findings. Such findings inspired Herzberg to reexamine his conventional beliefs regarding work satisfaction. Herzberg et al. (1957) reviewed literature in multiple fields, including mental health, selection, and perception toward the job, leadership and perception toward the job, work-related social factors, aspects associated with work perception, the influence of work perception, qualities of employees dissatisfied with their work, and the rate of occurrence of dissatisfaction with work.

The review follows the major work published by Herzberg et al. (1959). The book proved to be a seminal contribution to employee behavior by highlighting and addressing the prevalent beliefs and techniques regarding employee perception of work during the

time in the field of industrial psychology. The work perception was in the works in which

Herzberg et al. (1959) specified the research conducted by Herzberg on employee

motivation and established the two-factor theory. The works published by Herzberg

following the seminal book built upon the findings first described in 1959. The third part

of the works published since 1957 by Herzberg was a book on the relationship between

humans and work published in 1966 (Herzberg, 1966). In this book, Herzberg expanded

upon the two-factor theory through additional applications based on the culmination of

work conducted with organizations across 4 years in countries across Europe, as well as

the United States. Herzberg addressed criticisms directed against the two-factor theory by

referencing the work conducted by several researchers replicating the original research

study.

The review of literature conducted by Herzberg et al. (1959) of studies in

employee motivation showed which quantitative method and instruments drove previous

studies conducted on the topic. Further, the findings of these studies remained limited to

the recognition of the characteristics of the worker (Herzberg et al., 1959). The

description of motivation in these studies was one-dimensional and lacked a focus on the

perceptions of employees or the influence of such perceptions on their work output

(Herzberg et al., 1959). Herzberg had considered multiple sources of data collection,

which included both quantitative and qualitative instruments, including interviews,

observations, and surveys (Herzberg et al., 1959). Because of the limited scope of

surveys describing the perceptions of employees regarding their work, and the possibility

of bias in findings resulting from observation, Herzberg et al., (1959) chose qualitative

interviews, justifying this selection by noting the need to study the subjective experiences of workers, their morale, and the influence of their perceptions on their work performance. Consistent with the methodology, Herzberg et al. (1959) overarching research question directs the exploring and the meaning of the behavior of employees through their accounts. The selection of qualitative research of Herzberg et al. (1959) became well-known later in studies with a focus on job satisfaction and motivation, such as the current study.

Despite its success, Herzberg's two-factor theory has been criticized by some researchers. A major criticism was the independent categorization of hygiene factors and motivation factors (Miner, 2015b). Further, researchers have criticized the notion that employee motivation was not influenced by hygiene factors, noting some extent of these factors could affect motivation (Miner, 2015b). In addition, motivation factors could affect both the satisfaction and dissatisfaction of employees. Criticism of Herzberg's methodology directed at the theory of Herzberg's being with limits to Herzberg's method about the findings. Critics have argued that the use of different methods, such as sources of data collection, than those used by Herzberg, could lead to separate findings (Miner, 2015a; Ocampo et al., 2018). Criticism has also been directed at the trustworthiness of the results, as Herzberg used a single source of data, which might limit the generalizability of the findings (Miner, 2015a). Herzberg's focus on employee perceptions, which was based on retrospective recall and self-report during interviews, was also criticized because of possible bias (Miner, 2015a). Critics have realized the significance of the theory proposed by Herzberg to explain factors associated with

satisfaction (Miner, 2015a); however, they also recognized the limits of Herzberg's contribution. The conclusion has been the two-factor theory successful within some factors associated with employee motivation, but not in picturing the process of employee motivation (Aarrevaara & Dobson, 2016; Miner, 2015a).

Another theme in the criticism directed at Herzberg's theory was the assertion where there was no necessary relationship between motivation and satisfaction at work (Miner, 2015a). One limitation was that Herzberg conducted the interviews only with participants employed in a single field and focused only on work perception (Miner, 2015a). The findings of Herzberg were bound to the characteristics of the sample and, if not replicated on a similar sample, would not yield similar results (Bexheti & Bexheti, 2016). Herzberg's findings also indicated that a single behavior theory could not exhibit simplicity, accuracy, and generalizability simultaneously, which would limit the implications of the two-factor theory (Abba, 2018).

Criticism has also directed at the specific characteristics of the profession studied by Herzberg. For instance, employees may experience differences in their perceptions toward work dissatisfaction and satisfaction by their profession (Damij, Levnajić, Rejec Skrt, & Suklan, 2015; Mangi, Kanasro, & Burdi, 2015; Rich, 2015). Employees working in professions involving business may have different perceptions compared to teachers. Based on their professions, workers may be motivated by both motivation factors and hygiene factors equally; however, critics have acknowledged the difficulty of accounting for worker motivation only through hygiene factors (Miner, 2015b).

Alternatives to Two-Factor Theory

The several theories proposed in the literature to explain the behavior of workers in the context of their work experience. Such theories can be classified into two groups by the factors they have in common, namely: process theories and content theories (Locke & Latham, 2015). Process theories contain a focus on the individual will of the workers, as well as their independent process of decision making (Locke & Latham, 2015). Motivation theories, which are alternatives to the two-factor theory in this group, include reinforcement theory, goal-setting theory equity theory, and expectancy theory (Miner, 2015a).

Expectancy theory, proposed by Vroom, was based on the assertion which motivation consists of multiple factors, including employer expectations, satisfaction needs, and outcomes expected. The expectancy theory involves identification of the awareness of workers regarding the relationship between the extent of work they direct toward their tasks and the type of outcomes it leads to, the benefits it produces, and the nature of outcomes in terms of their appeal to the individual as desirable or undesirable (Miner, 2015a). This theory suggests that individual employees constantly measure the work they do against the benefits they derive from the results (Purvis, Zagenczyk, & McCray, 2015). In work satisfaction, the insights derived from expectancy suggest managers must focus on ensuring the workers perceive the work environment, such that higher amounts of work lead to larger quality in outcomes, and larger quality in outcomes results in more considerable benefits (Yeheyis, Reza, Hewage, Ruwanpura, & Sadiq, 2016).

The expectancy theory involves the suggestion which employees continually calibrate the amount of their work input based on the results they perceive. In comparison with the benefits received by their coworkers, and the emotions associated with work done in terms of satisfaction, which cannot, by itself, explain work satisfaction and dissatisfaction (Miner, 2015a). Regarding financial benefits, employees showing a willingness to produce more work by willing to work more extended hours and take up extra work than required from them expect to receive additional pay (Yeheyis et al., 2016). In some professions, however, it was challenging to assess performance, especially when the work required involves more cooperation within a group to produce higher quality output (Purvis et al., 2015). High quality of output has not been discovered where there was a relationship between receiving financial benefits for better performance and work satisfaction across different professions (Purvis et al., 2015).

The criticism directed at the two-factor theory also included observations from Vroom, who noted that the findings obtained in the original study by Herzberg were the results of participants desiring to add motivation factors with their happiness and hygiene factors to unhappiness. Vroom argued the participants were responding to appear positively by casting the reason for unhappiness on external factors and happiness on internal. Like other authors of process theories, Vroom believed employees who were happy did not always add extra work or caused larger output. The assessment of results between different workers was diverse, with the implication factors which led to the happiness of one individual may cause dissatisfaction in other individuals. The criticism of the two-factor theory by the process theorists was the utilization of two-factor theory

in applied contexts has led to challenges as the issues related to the assessment of needs have proven difficult. The two-factor theory does not place sufficient focus on the importance of the environment.

Critics of process theories have also noted that Herzberg did not consider the significance of personal values. Based on the values of an individual, the individual may experience either dissatisfaction or satisfaction despite whether the factor involved in question was motivation or hygiene (Locke & Latham, 2015). Critics supporting process theories have noted that studies in which the two-factor theory was not replicated using the exact methodology of Herzberg resulted in not limited or no support for the theory.

Other process theories relevant in the context of work satisfaction include reinforcement theory, goal-setting theory, and equity theory. Equity theory argues that employees are constantly conducting comparisons between their colleagues and themselves, as well as between the particular situations of their colleagues and themselves (Arvanitis & Hantzi, 2016). The equity theory was based on the assumption that the effort of employees was to decrease inequity in their workplace (Inuwa, 2017). Another assumption of equity theory argues that employees do not wish for rewards less or more than their coworkers (Inuwa, 2017).

In goal-setting theory, the significance of concrete, challenging, and realistic goals highlights the performance and satisfaction of employees (Mauro, 2015). The goal-setting theory posits that such goals allow employees to experience accomplishment and direction in their work (Mauro, 2015). In this view, employees require self-efficacy and commitment in order to experience satisfaction (Neubert & Dyck, 2016). Higher self-

efficacy leads to more favorable responses to challenging tasks compared to low self-efficacy (Neubert & Dyck, 2016). The reinforcement theory, within the behaviorist approach, argues that a behavior which leads to punishment has a lower likelihood of being performed again (Haiyan, 2018), while the behavior which leads to reward has a higher likelihood of being performed again (Troussas, Krouska, & Virvou, 2017). In this context, the satisfaction and performance of workers are based on the behavior of their managers (Troussas et al., 2017).

Another process theory that was relevant to the discussion of work satisfaction and performance was job design theory. In this approach, the focus was on the characteristics of work, which inspires better performance by motivating workers. In the job design theory, introduced by Hackman and Oldham (1980), the worker satisfaction process described as the result, rather than the cause of desirable work outcomes. The theory involves a description of the work process in this context across three stages, knowledge regarding the output, the sense of responsibility, and the sense of meaningfulness (Hackman & Oldham, 1980). These stages take place following the completion of a specific job. When these stages associated with the characteristics of the job, which include feedback, autonomy, the significance of the specific work, the identity of the specific work, and employee skills, they lead to worker motivation for better output (Hackman & Oldham, 1980). Workers experience the significance of the intrinsic motivation value associated with their profession, which causes them to remain in their role (Hackman & Oldham, 1980). A motivation value also increases in this model through employee empowerment (Hackman & Oldham, 1980).

Worker empowerment as a retention strategy has supported in the literature. Favorable conditions at work, characterized by a supportive environment, along with the autonomy of employees, shape their perceptions of the work. Such support does not provide a full defense to the theory; however, as other factors, including benefits, salary, opportunities, and problems with leadership are often found to be more significant issues behind an employee's decision to leave an organization. As a result, the process theories do not provide a broader framework to understand retention strategies within the context of work satisfaction and dissatisfaction.

Besides process theories, other theories which could be alternatives to two-factor theory in the context of work motivation include content theories. The two-factor theory itself was part of the theories which termed content theories. Other theories within this group include Maslow's motivation theory. The characteristic common among these theories was a view of motivation among humans as the foundation for satisfaction (Acevedo, 2015). The focus in content theories was on the needs of individuals inspiring their motivation and satisfaction. For instance, in Maslow's theory of the hierarchy of needs, workers' needs are viewed within a single continuum which involves physical and psychological needs on the lowest end and self-actualization on the highest (Acevedo, 2015). Maslow (1943) described the hierarchy of needs theory through at least five fundamental human needs, namely: self-actualization, esteem, love, safety, and physiological needs.

In Maslow's theory, physiological needs refer to the physical wants of an individual, which include hunger and shelter, which are important as fundamental needs

(Acevedo, 2015). The lack of satisfaction of such needs results in them overpowering the motivations and thoughts of the person (Harrigan & Commons, 2015). Following the physiological needs are safety needs, which include the need to feel immunity from dangerous elements (Harrigan & Commons, 2015). Following the safety, needs are the needs of love, which include the desire to belong within a relationship characterized by personal love (Acevedo, 2015). Following love are the needs associated with esteem, which include confidence, achievement, and self-respect. The need following esteem was self-actualization, which involves the realization of one's potential (Harrigan & Commons, 2015). The needs are not separate from each other, but are interconnected. According to Maslow, when a single need unfulfilled, another need overpower the individual, and at any point in time, an individual may experience one or the other need, which would motivate them, including in their work (Harrigan & Commons, 2015). The needs of most people are only partly unsatisfied or satisfied across all categories.

Maslow's (1943) hierarchy of needs theory for motivation has been studied and expanded by multiple researchers. For instance, in 1962, L.W. Porter created and verified a quantitative instrument for measuring the specific needs described by Maslow (Porter, 1962). The questionnaire instrument was tested on a large group of managers, finding that across the different levels of managerial positions, the satisfaction of the needs in three types of needs moved from higher to lower from a higher position to lower position, namely self-actualization, autonomy, and esteem. The needs of the individual are based on the position they hold in the workplace, with leaders not explicitly focused on lower needs.

The theory was further expanded by Alderfer (1969), who developed three realms within which to place the different needs described in theory. These realms included growth, relatedness, and physiological and safety needs. The specific needs of self-actualization and esteem placed under the realm of relatedness. The needs for love placed under the realm of relatedness. Alderfer believed the needs of basic needs at the lowest level should be satisfied first to allow the attention of the individual to move, but indicated that the higher needs varied significantly. Specifically, the direction for self-actualization and growth led to higher satisfaction, while the directed back to basic needs led to dissatisfaction. The specific focus of further developments such as these was to expand the original theory by focusing on the internal factors among people.

Besides Maslow's (1943) hierarchy of needs theory, content theories also include the X and Y theory by McGregor (1960) and the motivation theory by McClelland, Atkinson, Clark, and Lowell (1976). The X and Y theory based on a different approach from the previous content theories in which the focus moves from external to internal rather than internal to external concerning the impact people's needs. In McGregor's theory, X refers to the fact that the workers need to receive motivation from the outside. In contrast, the Y refers to an inherent tendency among humans to work where outside factors serve as opportunities (McGregor, 1960). Obtaining knowledge of the internal factors which motivate people must understand which specific outside factors can provide them with the motivation which ultimately led to the behavior desired (McGregor, 1960). McClelland et al. (1976) refined and expanded upon Maslow's theory by specifying the number of needs among humans, which include the needs involving

power, affiliation, and achievement. This theory argues that all workers have specific

degrees concerning the specific needs described. Achievement needs are significant in the

context of work. Among those workers with more achievement needs, the tendency was

to develop conditions where such needs can be satisfied (McClelland et al., 1976). Such

individuals develop their own difficult but realistic goals. This theory has been

implemented in the literature to recommend promotion patterns. Ultimately, however, it

was the two-factor theory within the category of content theories that provide the

broadest and most specific view relevant for this study in which the focus involves

satisfaction, dissatisfaction, and retention.

Employee Turnover and Retention

The retention of an organization's seasoned employees may start with the hiring

of the right candidate. Deery and Jago (2015) suggested that the consideration regarding

an individual's retention possibility was one of the critical elements in the choices

regarding the hiring of an individual. The hiring of the candidate who was most qualified

for the specific work ensures their retention and the maintenance of the cohesion and the

organizational culture (Tziner, Rabenu, Radomski, & Belkin, 2015). The hiring of an

employee who may not be the right fit for the organization or the specific role could

easily lead to negative consequences for the morale and motivation of an organizational

culture. Motivation and morale are important factors in the work satisfaction of all

employees (Spence Laschinger, Zhu, & Read, 2016).

The quality of the organizational culture also affects the performance of the

employees through workplace sustainability, production outcomes related to products or

services offered by the organization, and the customer service provided (Glisson & Williams, 2015). Low employee morale can lead to high employee turnover rates and an increase in expenses associated with hiring and training of new employees, in addition to a decrease in work quality (Cameron, Sadlo, Hart, & Walker, 2016). Soundarapandiyan and Ganesh (2015) found that high turnover for an extended period can influence organizational performance through higher costs and insufficient availability of seasoned professionals. Regarding the latter finding, supportive findings can be found in existing literature suggesting the loss of output quality from high turnover rate leading to seasoned and trained employees leaving the organization and the subsequent instability in the workplace environment for remaining employees (Beidas et al., 2015a; Beidas et al., 2015b). Research findings suggest an increase in seasoned employee turnovers was an indicator of job dissatisfaction (Allen, Peltokorpi, & Rubenstein, 2016). The need to improve retention of employees was also because, as Cloutier et al. (2015) noted, high employee turnover rates contribute to inequality concerning gender, age, training, and race in the workplace.

In the field of mental health, one factor which impact the patient outcomes was the worker's ability to interact with their patients, the quality of which depends to a significant extent on the duration of employment of the worker in an organization (Olfson, Druss, & Marcus, 2015). Patient trust increases with time, and retention of workers was especially critical in mental health organizations for the provision of excellent quality services to patients. Despite this, a report by the Substance Abuse and Mental Health Services Administration demonstrated in-state employee turnover rates for

seasoned MHWs at an average of more than 50%, with associated factors such as increasing job demands, being understaffed, and the lack of continued training (SAMHSA, 2017). Such a higher turnover has significant consequences. Research on registered nurses suggests that the cost of replacing registered nurses can range from $97,216 to as much as $104,440 to businesses (Rosenbaum, 2018). High turnover of MHWs may lead patients suffering from mental illnesses to experience further mistrust or insecurity regarding their worth or their worth.

High turnover rates of employees disrupt the workplace culture of a mental health organization centered on care. An especially mental health worker in the initial phase of their careers may experience difficulties with training and work management. Such employees may also experience discouragement and lack of motivation when witnessing the departures of their colleagues. Further, high turnover in an organization or a field may cause highly skilled and qualified professionals who do not wish to enter the specific work field (Acker, 2018; Kim & Fernandez, 2016). Such a development may lead to a serious shortage of qualified professionals, caused by the departures of existing employees and the lack of arrival of new employees, in a field, affecting the quality of their services (Agyapong, Osei, Farren, & McAuliffe, 2015). Lack of qualified employees may result in an inability to achieve organizational goals (Jang et al., 2016).

Although some measures for assessing the consequences of high employee turnover rates have succeeded, it was relatively harder to assess other factors. For instance, Beidas et al. (2015b) suggest it was harder to assess how the departure of specific employees leads to performance disruption of the organization, the costs

regarding psychological impact for remaining members of a group when a member leaves. The specific costs were resulting directly from the vacant position of an employee before being replaced, the lower productivity of a departing employee before departure, and the specific negative factors resulting directly from high turnover (Beidas et al., 2015b; Kim & Fernandez, 2016).

Additionally, there are several reasons for high turnover and low retention among employees. Employee turnover decisions may influence the factors across multiple domains, including individual, market, and organizational domains (Cameron et al., 2016). Some reasons for turnover include relationship conflicts, limited career progression, unsolicited work roles, and additional responsibilities (Willard-Grace et al., 2019). Piatak (2017) noted which employee turnover rates are sustainable during stable economic conditions compared to the period of economic instability. Guha and Chakrabarti (2016) suggested issues such as being overworked, lack of flexibility with work and life, age, competition, and salary. The turnover decision of an employee may also influence the stage and position in which they are when regarding their career trajectory.

In regards to salary, it was the most significant factor concerning the turnover decision among those working in health care when accompanied by disillusionment. Employees who considered significant factors such as salary to was too low retained the perception even when a small increase in salary was provided in response to experience and performance (Jang et al., 2016). Instead of increasing satisfaction, small increases in salary have been found to lead to further dissatisfaction (Montano, Reeske, Franke, &

Hüffmeier, 2016). Based on the place in which they consider their career, employees have different expectations from their work. As a result, the reason provided for the turnover decision varies significantly (Glisson & Williams, 2015). Those at the beginning of their career, for instance, have larger morale but lower experience and the turnover decisions of such employees was based on insufficient training, lower availability of participation when deciding about patients, and lower possibility of participation in issues related to the organization (Jang et al., 2016). On the contrary, among those employees with higher experience, the decision for turnover was more likely to be related to factors associated with reward and factors related to the functioning of the organization (Tziner et al., 2015).

Motshegwa (2017) suggested that high turnover rates are related to insufficient retention strategies concerning operational tasks. Retention strategies must focus on employee motivation and work satisfaction, which ultimately affects the organizational culture and determine the attractiveness of a workplace. A specific factor which can lead to high turnover rates with consequences for retention strategies was employees' lack of engagement (Allen et al., 2016). Lack of engagement among employees makes it difficult for hiring managers to defend the goals of their retention strategies without structural improvements (Cameron et al., 2016). Although the phenomenon of employee turnover and retention has studied in multiple contexts, there has been limited research specifically in the field of mental health work. This fact, along with the high turnover rates in the field of mental health work reported, emphasizes the need to study the specific aspects associated with turnover and retention in this field. Specifically, the focus in this study

was on exploring the response to such high turnover rates from the administrators in mental health organizations, as reflected in their retention strategies.

Employee Job Satisfaction and Dissatisfaction

MHWs' work satisfaction and dissatisfaction associated with their work-related characteristics. A relationship with their colleagues, and their expectations concerning their organization and the work environment (Tudor, Cowan, Hennessy, MacEwan, & Warriner, 2018). To explore work satisfaction, researchers have implemented several variables related to work satisfaction (Lizano, 2015). Besides the two-factor theory, work satisfaction also studies through the relationship between the input and the output related to work. In this view, the output, which involves satisfaction with work, was affected by the input from the worker, which includes factors such as work culture and teams (Read & Laschinger, 2015). The input in work by an employee was affected by the resources of the individual, of the team, and the organization (Kok, Herrell, Grossman, West, & Wilk, 2016). Between input and output are mediating processes, which consist of factors such as team member actions (Itzhaki et al., 2015). Finally, output refers to results emerging from the mediating processes and inputs. Research findings suggest a relationship between the work satisfaction of employees and the culture of their organization, a process in which the team of the employee serves as a mediatory role (Grossman-Kahn et al., 2017).

Several characteristics of workers as employees are relevant in the context of work satisfaction. Specifically, some professionals themselves found to negatively associate with work satisfaction (Ammons & Kelly, 2015). In the context of mental

health work, work satisfaction was higher among psychologists and physicians. On the contrary, work satisfaction was lower in the field among social workers and nurses (Grossman-Kahn et al., 2017). Research conducted on employee characteristics also suggests which the duration of experiences, as well as the age of the employee, are also influential in their work satisfaction (Van Aerden, Puig-Barrachina, Bosmans, & Vanroelen, 2016). For instance, younger employees have a higher likelihood of experiencing high turnover through larger work dissatisfaction (Read & Laschinger, 2015). Researchers have not concurred regarding the characteristic of gender among employees and their work satisfaction in the field.

Characteristics associated with teams, especially the nature of an employee's team, are an influential factor in work satisfaction (Kok et al., 2016). For instance, if the team in which an employee works has a high turnover, it results in a more significant workload for the existing members, which leads to less work satisfaction (Khamisa, Oldenburg, Peltzer, & Ilic, 2015). A work environment may also influence the work satisfaction of a mental health worker (Grossman-Kahn et al., 2017). For instance, nurses working in mental health professionals have been found to be less satisfied with their work compared to nurses working in other environments. The stress associated with patient characteristics can explain this fact. Specifically, nurses in the field of mental health have to accommodate problematic and stressful behavior from patients with mental disorders, which leads to higher work dissatisfaction (Richardson, 2017).

Regarding mediating processes, there have been several such processes reported in the literature. Work satisfaction may influence the extent to which employees are

involved in the process of decision-making. However, their autonomy in the process of collaboration in their team, services provided for recovery, the extent of conflicts which occur within the groups, employee self-efficacy, and organizational support from relevant co-workers as well as leaders (Khamisa et al., 2015). Researchers have suggested a relationship between work satisfaction and teamwork based on the finding which works competences increases through sharing knowledge (Sancassiani et al., 2015). Support from the team, which affects work satisfaction, was associated with support from the team, collaboration in the team, and the relationship between the coworkers (Van Aerden et al., 2016). Work satisfaction has also been found to be associated with factors which emerge within the work environment as part of the work process, such as the team environment, team commitment, and trust between members (Itzhaki et al., 2015). Work satisfaction was influenced by team behaviors, which also affects the performance of the employees and their clarity about their roles (Grossman-Kahn et al., 2017). Collaboration may lead to work satisfaction through the equitable division of workload and the reduction of conflicts within teams (Ammons & Kelly, 2015).

The two-factor theory involves the assertion which works satisfaction and dissatisfaction individually based on separate aspects of work. Satisfaction was related to aspects which are intrinsic motivation factors to work itself, such as personal achievement opportunity, recognition, the difficulty of work (Al-Hamdan, Manojlovich, & Tanima, 2016). Dissatisfaction with work, on the contrary, was related to the extrinsic motivation factors aspect of work, such as work relationships, benefits, and salary (Al-Hamdan et al., 2016). An essential factor studied in the existing literature in this context

concerning retention strategies was that of employee benefits (Kok et al., 2016).

Employee benefits may determine whether a business retains or loses its seasoned

employees to their competitors, who may offer more attractive benefits and salaries

(Read & Laschinger, 2015).

Retention strategies which target internal factors to work may include offering

flexible work schedules, mentoring programs to compete for promotions, employee

awards, and flexible time off (Dizaho, Salleh, & Abdullah, 2017). These target internal

factors maneuver easier for administrators to retain employees by offering them benefits

relevant to their characteristics. For instance, employees may have to work overseas may

be easier to retain through retention strategies involving benefits relevant to them, such as

assistance with relocation, schooling, and housing benefits (Alameddine, Khodr, Mourad,

Yassoub, & Abi Ramia, 2016). Attractive employee benefits could help retain not only

the most seasoned employees but also new employees when such benefits are better than

those offered by the competitors (Itzhaki et al., 2015). Besides the immediate benefits

involving themselves, the seasoned employees of an organization may leave their

organization for better benefits for their family or career opportunities for themselves,

through possibilities of mentoring in their field or higher wages, are offered in competing

organizations (Fleig-Palmer, Rathert, & Porter, 2018; Kok et al., 2016).

Retention strategies are employee benefits that motivate seasoned employees

through benefits such as sick leaves, promotions, and flexible workplace. Additionally,

their provision of retention strategies from administrators, in addition to providing

advantages to the employee, also shows the engagement of leadership in the well-being

of their employees (Alameddine et al., 2016). Some findings suggest relationship

conflict, limited career progression, unsolicited work roles, and additional responsibilities

which may cause occupational burnout which offers as some of the most common

reasons for turnover intention among seasoned employees (Coates & Howe, 2015;

Willard-Grace et al., 2019; Wong, & Spence Laschinger, 2015). A lack of employee

engagement through administrative indifference can lead to work dissatisfaction among

seasoned employees. Cloutier et al. (2015) suggested that the process of ensuring worker

satisfaction begins in the hiring process itself through the right alignment between the

abilities of the employee and the requirements of the work. Further, work satisfaction and

retention can also improve the provision of both short-term benefits, such as recognition

of specific tasks and long-term benefits, such as further training, which allows workers to

progress in their careers within the same organization.

By addressing the specific needs of seasoned employees can lead to an

improvement in retention and work satisfaction. For instance, providing sufficient

parental leave to seasoned employees could help retain such employees for a more

extended period. Koekemoer (2014) suggested that managers should provide seasoned

employees with as much of a voice and development in their company as possible.

Businesses can avoid worker dissatisfaction by investing in their human capital through

training and employee benefits.

An important factor in increasing employee work satisfaction was ensuring high

employee engagement. Sinha and Thaly (2013) suggested that a lack of engagement

among seasoned employees may sometimes result from a lack of communication from

administrators. With the lack of opportunities for the involvement of experienced employees in decision-making regarding policy changes and during team meetings can also cause a lack of engagement. The roles of seasoned employees can vary; such employees may be in the role of ordinary employees or those in leadership positions. Such differences in the roles, access, and involvement of seasoned employees may differ and may affect their level of engagement. Jindal, Shaikh, and Shashank (2017) suggested several strategies for administrators to improve employee engagement, such as allowing employees with the opportunities to share their feedback with their managers and acknowledging employee contributions in real-time. Lack of engagement caused by manager indifference can lead to dissatisfaction among employees. For instance, managers not showing involvement in employee benefits or employee career development may cause dissatisfaction in employees and may influence their turnover intention (Grossman-Kahn et al., 2017).

Based on a review of the literature, it finds which processes associated with work satisfaction have been studied extensively across multiple fields (Kok et al., 2016; Lizano, 2015; Sancassiani et al., 2015). Several researchers have explored work satisfaction in the field of health care. The literature was limited, however, identifying which retention strategies affect the work satisfaction of MHWs.

Recruitment and Retention

As noted previously, the employee retention process begins in the recruitment stage by ensuring alignment between employee skills and requirements of the work. Carter (2015) suggested that a sound recruitment strategy was critical to ensure the

retention of employees, since the recognition in which an employee was not the right candidate for a specific work may lead to work dissatisfaction and turnover. By recruiting the right candidates can help ensure a positive organizational culture which could help retain seasoned employees (Alameddine et al., 2016). Nolan (2015) discussed the consequences of inconsistent recruitment practices for the organization in the form of high turnover rates and the associated costs, especially with millennial workers entering the workplace. The recruitment process was the first introduction of a potential employee to the organization culture. Administrators have an important role to play through the designing of the recruitment experience. Specifically, the provision of benefits which promote a balance between personal life and professional life can help attract suitable candidates to an organization (Koekemoer, 2014).

In the specific field of MHWs, the need to maintain the labor force describes as a critical task, primarily because of the higher turnover prevalent among MHWs (Durbin, Durbin, Hensel, & Deber, 2016; Tudor et al., 2018). Similar to other fields of health care, mental HCAs and patients rely on the expertise of trained professionals rather than merely on innovations and technology for relief (Hom, Stanley, Spencer-Thomas, & Joiner, 2018; Hsieh, 2015). Expanding the workforce in the field of mental health care has been described as a critical aspect of providing better mental health services around the world. Several reasons have been proposed to explain the causes of poor retention and recruitment in health care, including the risk of disease, inadequate supervision, high workloads, and poor work environment (Beidas et al., 2015a; Garcia et al., 2015; Proctor et al., 2008). Retention causes may include ties to a culture or family, productive

feedback, career opportunities, and high salaries (Vandewalle et al., 2016). In the field of

mental health, the recruitment process could hinder a negative perception among

potential health care professionals, which could reduce the number of applicants (Asad &

Chreim, 2015). For instance, the perception which the profession of mental health was

not equally respectable or financially beneficial as other health care professions could

lead to lower recruitment, which could limit the workforce size (Liu et al., 2016). The

stigma associated with mental health patients or lack of comfort in interacting with them

may discourage potential professionals from pursuing a career as a mental health worker

(Gillard et al., 2015). The causes of low workforce, however, differ across countries and

between low-income and high-income countries (Garcia et al., 2015).

Several factors inspire the recruitment and subsequent retention of workers in the

field of mental health care. These factors can be divided into factors which motivate and

factors which demotivate (Durbin et al., 2016). Factors that motivate individuals to join

organizations as professional MHWs include the drive to assist mental health patients in

need. The potential positive interactions are with the clients' interest in human behavior

and psychiatry from an intellectual viewpoint and relationships with co-workers with

similar interests (Vandewalle et al., 2016). Factors that may demotivate potential mental

health worker from joining a work environment or leaving it subsequently include

insufficient resources at the organization, the inflexible hierarchy of leadership, negative

or no feedback on performance, and limited career development opportunities (Grubbs,

Fortney, Dean, Williams, & Godleski, 2015; Liu et al., 2016; Proctor et al., 2008). These

factors are relevant for both the administrators as aspects of recruitment, which can be

changed as part of retention strategies and as factors that can be addressed during the

recruitment process itself (Hom et al., 2018).

One of the most important factors which motivate mental health work

professionals was the need of the patients for treatment (Garcia et al., 2015). The

majority of professionals believe this to be the reason for their initial decision to recruit in

the field (Grubbs et al., 2015). MHWs are often driven by the struggles of those affected

by mental illnesses, specifically with the stigma and dislike associated with such patients

from their society and their own family, which makes it harder for them to receive

treatment (Garcia et al., 2015). Some MHWs may also be driven by their religion to assist

those who are marginalized. Besides a moral sense of responsibility or duty, the

commitment of MHWs was often driven by the limited workforce in the field of mental

health care which they seek to fill (Beidas et al., 2015a). Some employees may inspire the

ability to reduce the stigma associated with mental illnesses through the possibility of

educating others and creating awareness about the possible causes and treatability of

mental illness (Grubbs et al., 2015).

Besides the ability to take care of patients, employees in the field of mental health

may also inspire positive interactions with their patients. Such interactions characterize

the close relationships with patients which resemble those in families and the specific

factors associated with patients, such as their life's stories (Liu et al., 2016). Such

interactions provided MHWs with a sense of satisfaction when recovery was attained for

their patients (Vandewalle et al., 2016). These workers may take enjoyment through the

display of normality and recovery by patients, in events such as becoming a part of their

family once again, obtaining employment, and caring for themselves (Beidas et al., 2015a). Workers often report additional satisfaction when patients return to meet with them following their recovery.

MHWs may decide to join an organization in the field of mental health driven by intellectual interest. Intellectual interest in the field has found to be an important factor expressed by professionals as one of the sources of their recruitment (Holmberg, Sobis, & Carlström, 2015; Hom et al., 2018). A sense of adventure and curiosity has often been found to be associated with intending to remain in the workplace (Liu et al., 2016). With an intellectual curiosity may be aligned to address the challenges in the field, which was often found to be a reason for recruitment and retention among those with higher education (Garcia et al., 2015). Instead of serving to demotivate, the difficulties associated with this field often motivate MHWs, especially when they describe their initial interest to be driven by the desire to understanding the workings of the human mind (Beidas et al., 2015a).

MHWs may be influenced by positive relationships with their co-workers to remain in an organization. The possibility of such interactions may also attract MHWs to specific organizations (Grubbs et al., 2015). Positive relationships serve as a motivating factor and are often formed with those who are the direct colleagues of the employees (Asad & Chreim, 2015). Among nurses, the close relationships with those working in the same ward have often been described by them as one of the most important reasons for their retention (Grubbs et al., 2015). Nurses describe their interest in their day-to-day enjoyment as partly because of the positive relationships they form with their co-workers

(Hom et al., 2018). Specifically, in the field of mental health, workers often describe a shared understanding of human behavior as a factor that bonds them (Grubbs et al., 2015). The similarities of struggles may also serve as a motivating factor in the relationship with co-workers.

On the contrary, factors which decrease motivation and retention among MHWs include inadequate resources and infrastructure at work. Such shortcomings have been described as factors which negatively affect their work and make the recruitment in an organization unattractive (Hom et al., 2018). Such issues encompass limited salaries, low staff levels, and an undesirable work environment. Workers may be more likely to describe high turnover intention when their organizations have a small staff to patient ratio, requiring them to work for longer durations without proper compensation (Liu et al., 2016). The environment of mental health work characterized by high risk, often because of the characteristics of the patients. Failure to obtain adequate compensation for such an environment may cause patients to leave their organizations or not be attracted to specific organizations (Grubbs et al., 2015). Inadequate hierarchies may also demotivate workers among the leadership, characterized by unpleasant interactions between supervisors and workers (Garcia et al., 2015). Employees may also be discouraged by a lack of positive feedback or recognition based on merit (Holmberg et al., 2015). Finally, the perception of limited opportunities in the field may discourage workers from recruitment in the field and may inspire higher turnover rates (Beidas et al., 2015b). Such opportunities include both professional and educational development opportunities.

Application of the Two-Factor Theory in Administration

Applying the two-factor theory in the context of administration in an organization involves the efforts to retain and recruit professionals who are an appropriate fit for the work tasks. Such efforts implement the analysis of the two-factor theory to direct extrinsic motivation factor strategies involving changes in the work conditions, such as policy-based changes, programs for support directed at new recruits, efficiency in the human resource processes, increases in salary, and the monetary incentive for work (Thibodeaux, Labat, Lee, & Labat, 2015). In alignment with the analysis of the two-factor theory, such strategies are directed at altering the employee work condition (Kiruja & Mukuru, 2018; Thibodeaux et al., 2015). Such factors by themselves, however, do not result in intrinsically motivating the employees. Strategies directed at addressing the extrinsic motivation factors are considered the hygiene factors in the two-factor theory of Herzberg, with the purpose of improving employee work conditions (Chu & Kuo, 2015). Such strategies fail to address intrinsic aspects, or motivation factors in the two-factor theory of Herzberg, which are important for high performance as well as work satisfaction (Chu & Kuo, 2015). One of the important implications of the two-factor theory in the context of organizational administration was the fact which employees can be both satisfied and dissatisfied simultaneously (Herzberg et al., 1959).

Among the important findings from the literature, the findings regarding the work experience of employees, when studied using the two-factor theory across professions different from those studied by Herzberg, can differ. For instance, applying the two-factor theory in the context of teachers has led to the finding which the knowledge and

perception of teachers' relationship with those who are their subordinates would in their context, refer to their students (Chu & Kuo, 2015). In contrast, in the professions studied by Herzberg et al. (1959) in the original research on the two-factor theory, it refers to the relationship of engineers with other professionals. While in the context of the teachers, the relationship with subordinates can be personal in the case of teachers, such was not the case in the context of the participants from Herzberg's study.

Applying the two-factor theory for work satisfaction and dissatisfaction can be of significance to administrators. For instance, administrators can implement the findings to target specific aspects of employees' experience for promoting retention and satisfaction (Chu & Kuo, 2015). Research findings on employees using the two-factor theory suggest which among employees, significant factors which determine work satisfaction include recognition, responsibility, and achievement (Ghaffari, Shah, Burgoyne, Nazri, & Aziz, 2017). Specifically, higher importance was placed by employees for their satisfaction on the ability to implement their skills, the opportunity to work with different colleagues, and being appreciated for good performance in their work (Jahromi, Razmjooei, Managheb, Hosseini, & Salehi, 2018). In general, the appreciation of intrinsic motivation factors employee merits was highly important for retention (Thibodeaux et al., 2015). Such findings align with the two-factor theory, in which the motivation factors like professional development and the conditions of the job itself described as significant for work satisfaction (Herzberg et al., 1959).

Researchers have also explored the specific characteristics of the workplace, which result in better employee performance using the two-factor theory (Jahromi et al.,

2018). These specific characteristics found that employees are more productive and contribute more to the organization in the form of new ideas when the motivation factors in the two-factor theory are addressed and encouraged (Thibodeaux et al., 2015). Such contribution was driven by intrinsic motivation factors, as predicted in the two-factor theory. When the motivation factors among employees are satisfied, such contributions which help the growth of the company are driven less by monetary incentives (Ghaffari et al., 2017). Such findings can be used by administrators not only to retain employees but to increase productivity.

Among professionals, the positive association between the factors described by Herzberg which was one of the most relevant to work satisfaction was work itself. Across specific professions, the specific demographic characteristics of the employees were also found to be of significance for work satisfaction (Ghaffari et al., 2017). Employees mention responsibility, career advancement opportunities, and the work itself in studies conducted on work satisfaction among professionals (Kiruja & Mukuru, 2018). Based on the factors which affect work satisfaction and dissatisfaction among employees using the two-factor theory, motivating factors for work satisfaction are of most significance for employee retention (Chu & Kuo, 2015). Demographic factors can shift the importance of hygiene factors, such as the geographical location of the employee in the rural or urban area or their gender. The hygiene and motivation factors both affect the work satisfaction of employees and also affects their retention (Thibodeaux et al., 2015). The factor of work itself was prominently influential among those working in fields serving clients with low socioeconomic status, such as teachers in schools with a majority of such

students (Ghaffari et al., 2017). Such teachers' relationship with their supervisors has also been found to have a significant influence on retention intentions (Chu & Kuo, 2015).

The assertions in the two-factor theory also suggest the influence of employee satisfaction on their productivity both regarding quantity and quality. Perceptions have also been found to play a significant role in the retention of individuals (Thibodeaux et al., 2015). For instance, the specific values of the employees could influence their decisions to remain in a job, serving as a motivating factor (Ghaffari et al., 2017). Administrators can screen for such characteristics when determining the individual fit between an employee and a job during the recruitment phase (Chu & Kuo, 2015). Although it may not be possible to obtain a clear understanding of assessing such values in the two-factor theory, the two-factor theory can improve worker productivity, quality of work, and turnover by administrators.

The research findings from studies in which the two-factor theory have implications which organizational administrators can address. Such implications include specific requirements of employees that can be ensured by administrators (Thibodeaux et al., 2015). The findings have suggested that hygiene factors may not result in positive long-term work satisfaction (Thibodeaux et al., 2015). Their absence or insufficient presence in the work environment, however, could cause work dissatisfaction (Thibodeaux et al., 2015). Such extrinsic motivation factors are important to mitigate worker dissatisfaction as they are needs employees expected to be satisfied by the organization and organizational administrators (Thibodeaux et al., 2015). Specific factors include salary, organizational policies, benefits, work conditions, employee status, work

security, and interpersonal relationships (Ghaffari et al., 2017; Jahromi et al., 2018).

Employees needed to receive a reasonable and salary for their work, in which reasonable

refers to being competitive and equal to others in a similar designation (Ghaffari et al.,

2017). The organizational policies must be flexible and fair, and address issues such as

vacation, breaks, dressing, and hours of work (Chu & Kuo, 2015). Benefits include those

provided for family members as well as health care. Working conditions include issues

related to hygiene, cleanliness, and safety. Relationships with colleagues, subordinates,

and leaders in the organization should be acceptable and appropriate (Thibodeaux et al.,

2015). Employees expect job security for their work. Such factors can be addressed by

administrators to ensure the retention of employees.

In addition to these hygiene factors, employee retention was also affected by

motivational factors, which can also be addressed by administrators. Such factors result

in positive work satisfaction and cause better productivity (Ghaffari et al., 2017). Based

on the findings of literature conducted using the two-factor theory, the hygiene factors

that administrators can address include recognition, achievement, growth opportunities,

responsibility, and work meaningfulness (Chu & Kuo, 2015). Administrators can ensure

the workers are recognized for excellence in their work by their superiors (Thibodeaux et

al., 2015). Administrators can also ensure the correct fit between the employee and their

work in order to promote satisfaction through feeling achievement. Opportunities for

growth at the organization also depend on administrators who are responsible for

ensuring such opportunities are present for all employees (Chu & Kuo, 2015). Employees

must also be trusted with responsibility for their work (Ghaffari et al., 2017). Work that

was interesting and meaningful leads to higher satisfaction and retention (Thibodeaux et al., 2015). The findings conducted in the existing literature with the two-factor theory provide important insights relevant for administrators, who were the subject of this study in the specific field of mental health work.

Application of Two-Factor Theory in Health care

In general, the need to study work satisfaction among health care professionals has been framed as crucial to obtain societal health care aims, which involve the need for high quality, viable, accessible, efficient, and effective health care services. The workforce in the field of health care serves as the most significant part of this process regarding its effect on the general performance of the health care system (Goh & Lopez, 2016). The workforce can only yield high performance; however, when it involves a sufficient quantity of professional workers who assigns to the work which they are best suited to (Wilson, 2015). Recruiting and retaining professional workers was important in order for various geographic regions to have enough working health care professionals to address patient needs (Shannon, 2017; von Knorring, Alexanderson, & Eliasson, 2016). Such allocation may not be possible in times of low retention and high turnover among health care employees. Although a high employee turnover rate was a nationwide problem in the United States (U.S. Department of Labor, Bureau of Labor Statistics, 2015), its effects on mental health organizations are specifically prominent. In 2017, the SAMHSA demonstrated in-state employee turnover rates for seasoned MHWs at an average of more than 50%, with associated factors such as increasing job demands, being understaffed, and the lack of continued training. As a result, addressing the problem of

high turnover and the factors associated with it, including worker satisfaction and dissatisfaction, in the field of mental health was an important need. The research was limited, however, on worker retention in the field of mental health field.

Features particular to the health care industry reveals from research concerning employee motivation and satisfaction, which was relevant for addressing the challenges experienced in the industry (Goh & Lopez, 2016). Specific to the health care industry, the challenge to motivation include the nature of the interactions between the system, which includes the hospitals, and those who use the health care system (Giordani, Sonobe, Ezaias, Valério, & Andrade, 2016). The diversity of the workforce in the health care system must ensure high motivation and low turnover (Liu, Aungsuroch, & Yunibhand, 2015). Health care organizations are challenged by pressures from external sources that are difficult to satisfy without changing the existing workforce. Workforce development was an essential part of the health care policy.

In the field of health care, researchers have frequently adopted the two-factor theory in the context of nurse work satisfaction. In general, studies conducted in both the public and private sectors of health care (Raziq & Maulabakhsh, 2015). Among the motivation factors, achievement has been consistently found to be one of the most impactful factors for both nurses and doctors (Shannon, 2017). Co-workers' salaries or compensation have also been found to have a significant influence on the motivation of the employees in the field of health care (Wilson, 2015). Other factors, which categorizes as aspects of work achievements which participants have described as influential on their motivation include values, pride, and self-efficacy (Liu et al., 2015), both quantitative

surveys and qualitative interviews implemented in such studies. The findings of both quantitative and qualitative inquiries have suggested the significance of non-monetary factors in influencing the motivation of the employees in health care (Goh & Lopez, 2016). Participants have highlighted the significance of community, training, colleagues, and managers in affecting their work motivation (Giordani et al., 2016). Among physicians, the factors associated with their work itself were perceived as more important than monetary rewards through motivation.

For work motivation, women nurses and doctors are more motivated by salary compared to men of the same professions (Giordani et al., 2016; Goh & Lopez, 2016; Liu et al., 2015; Shannon, 2017). For some workers, a high salary can serve as compensation for work dissatisfaction. Work satisfaction was higher among older nurses with senior leadership positions (Wilson, 2015). Work satisfaction was higher among nurses in some studies compared to doctors, although such findings have been mixed, with studies suggesting lower work satisfaction among nurses compared to doctors (Liu et al., 2015).

Researchers using the two-factor theory to study work satisfaction and motivation in the context of health care have noted which influence of intrinsic motivation factors such as respect, relationships, meaningfulness, in positively influencing the quality of the service provided at a hospital. Based on such findings, researchers have recommended that administrators consider the influence of intrinsic motivation factors and extrinsic motivation factors on retention strategies (Giordani et al., 2016; Hsieh, 2016). To improve worker retention, administrators have been provided with suggestions to

improve work satisfaction and motivation (Goh & Lopez, 2016). An important strategy in this regard was the need to set goals, which provide motivation and satisfaction.

The hygiene factors that researchers have identified as significant in the context of both medical staff and nurses include co-workers and salary (Shannon, 2017). Such factors, as previously noted, improve motivation and enhance job satisfaction (Herzberg et al., 1959). The motivation in the two-factor theory identified as significant in the context of both medical staff and nurses include achievement and work itself (Liu et al., 2015). These factors, when available to a sufficient degree, can increase work satisfaction and lead to better output. The satisfaction of hygiene factors leads to the motivation for promoting better output and work satisfaction (Giordani et al., 2016). The evidence was limited, however, of such relationships in the specific field of mental health. A lack of literature which HCAs provided with suggestions for improving employee motivation or satisfaction to improve retention in the field of MHWs. Retention strategies in the context of mental health work, further, have not been explored, suggesting a significant gap in the literature.

High employee turnover rates among MHWs with more than 2 years of experience have been associated with inadequate quality of care for patients with mental health issues in community mental health clinics (Bukach et al., 2017), in addition to the costs associated with employee retention for health care organizations. In addition to costing the organizations and affecting the quality of service, higher employee retention affects society by contributing to the increasing unemployment rates (Cloutier et al., 2015). Exploring the retention strategies some HCAs use to retain their seasoned MHWs

can help address the gap in the literature. Further, the findings can mitigate the quality-related and financial costs for the organizations. The potential implications for positive social change from the findings of this study include the possibility of improving mental health wellness, introducing innovative interventions in behavioral health care, and increasing community mental health care options.

Summary and Transition

In Section 1, I identified an appropriate business problem for a qualitative, multiple case study. This section included the research and interview questions that guided the study. I identified several operational definitions that may be uncommon to readers. Section 1 also included a review of professional and academic literature with themes based on the two-factor theory by Herzberg for job satisfaction and dissatisfaction (Herzberg et al., 1959). The specific themes discussed in the review included the two-factor theory, history, and criticism of the two-factor theory, alternatives to two-factor theory, employee turnover and retention, employee job satisfaction and dissatisfaction, recruitment and retention, application of two-factor theory in administration, and application of two-factor theory in health care.

In Section 2, I provide a more detailed outline of the project. Section 3 contains the findings, recommendations, and conclusions of the study.

Section 2: The Project

The general business problem was that high turnover among MHWs with more than 2 years of experience results in higher costs and inadequate quality patient care. The specific business problem was that some HCAs lack knowledge of the strategies to increase the retention of these MHWs. I used a qualitative methodology and a multiple case study design to address the study's problem. A qualitative methodology was appropriate for a study that involves exploring or discovering a phenomenon in its natural setting or outside of a controlled laboratory environment (Silverman, 2016).

In Section 2, I focus on the implementation and parameters of a qualitative methodology for this study. The subsections include a restatement of the purpose of the study, the role of the researcher, participants, research method and design, population and sampling, ethical research, data collection instrument, data collection technique, data analysis, and reliability and validity. A summary and transition concludes the section.

Purpose Statement

The purpose of this qualitative, multiple case study was to explore the retention strategies that HCAs use to retain their MHWs with more than 2 years of experience in north Fort Worth, Texas. The research population included HCAs from mental health clinics in the north Fort Worth, Texas, area, specifically in Denton and north Tarrant County. I define an HCA as a manager with the ability to implement new policies and change practices to retain MHWs with more than 2 years of experience in their mental health clinics. The potential implications for positive social change based on the findings of this study include the possibility of improving mental health wellness for patients,

introducing innovative interventions in behavioral health care in clinics, and continued

mental health care options in the community.

Role of the Researcher

I assumed the role of an observer for this study. As the researcher, I performed the

recruitment, data collection, and data analysis procedures to fulfill the purpose and

answer the research questions of this study. In the performance of participant recruitment

procedures, I obtained site authorization before interacting with potential participants of

the study. I first conducted a random search of local community mental health clinics in

the Denton and north Tarrant County area. I also personally invited potential participants

(e.g., HCAs from community mental health clinics in the north Fort Worth area) to be

part of the study. When identifying the potential participants for inclusion, I was cautious

to minimize any conflicts of interest. To do so, I ensured that the people invited to the

study were not part of my social circle (e.g., family, relatives, co-workers, peers, or

subordinates).

During the data collection phase, I served as the main instrument for collecting

data from the participants. In order to minimize the influence of my personal biases when

interviewing participants, I used an interview protocol that aligned with the problem and

purpose of the study (Appendix A). The protocol enabled me to avoid leading and

irrelevant lines of questioning during data collection.

Along with using an interview protocol to minimize researcher bias, I

acknowledged my beliefs, experiences, and perceptions that may have any association

with this study. I acknowledged them in order to be more mindful of them during data

analysis and interpretation. If unaddressed, sources of bias may interfere with the trustworthiness of the study.

According to the *Belmont Report*, published in 1979 by the U.S. Department of Health and Human Services, researchers must address three elements of ethical research when using human participants in a study includes respect for persons, beneficence, and justice (Adashi, Walters, & Menikoff, 2018). To ensure respect for persons, I performed an informed consent process, wherein participants were presented with a consent form before partaking in the interview session of the study (Adashi et al., 2018; Cho, Magnus, & Wilfond, 2015); Mumford, 2018). In addition, to providing a consent form to all participants, I also ensured that any identifying information of the participants was excluded from the study. To ensure beneficence, I minimized potential risks during the interviews by avoiding any sensitive topics for discussion. To ensure justice, I ensured that all study procedures were reasonable and non-exploitative. I also eliminated forceful persuasion when asking individuals to be part of this study. Participation was voluntary, and the administrators had the option to discontinue participation at any time.

Participants

Eligibility Criteria

The participants of this study included HCAs from community medical clinics in the north Fort Worth, Texas area. I recruited the sample based on a set of eligibility criteria. The criteria for eligibility for the HCAs from local community mental health clinics with the following traits which were to have experience in hiring and retaining

MHWs within their clinic, work in a mental health clinic in Denton and north Tarrant County, and have been working for the current mental health clinic for more than 2 years.

Gaining Access to Participants

This project was a multiple case study, as the participants were from multiple sites. I began the process of recruiting participants by contacting the head of the Human Resources (HR) office of local community mental health clinics in the Denton and north Tarrant County area. I asked the head of HR for someone in leadership which was the authorized signer to grant site permissions to conduct the study with their HCAs. The initial contact with the head of the HR office was by email or a telephone call using an initial contact script (Appendix B).

I sent out personal invitations to the authorized signer to identify potential HCAs to participate in the study, along with the Informed Consent form (Appendix C). In the invitation letter, I included details, including the purpose of the study, as well as and the significance or potential benefits of the findings. I also included a copy of the recruitment flyer that summarized the participation and eligibility criteria (Appendix C). I provided the potential participants who expressed interest with a copy of the informed consent (Appendix C). The informed consent form contained information about the rights and scope of participation in the study. The administrators indicated their consent by replying to the email with the words, "I consent." I obtained a copy of the consent form from each administrator before scheduling the interview with the participant for an interview. I sent each participant a confirmation email with the date, time, and location of the interview.

Research Method and Design

Research Method

Researchers have three methods to choose from when conducting research: quantitative, qualitative, and mixed (Hammersley, 2017; McCusker & Gunaydin, 2015; Mertens, 2014). In quantitative research, the purpose is to establish relationships of variables through statistical analysis of numerical data (Hammersley, 2017; McCusker & Gunaydin, 2015; Mertens, 2014). In qualitative research, the purpose is to fully understand a phenomenon within its natural environment through in-depth collection and analysis of thick and rich data about individuals' experiences and perceptions (Hammersley, 2017; Jason & Glenwick, 2016; Silverman, 2016). A qualitative methodology was appropriate when exploring a phenomenon in-depth using data from experiences, perceptions, and behavior of individuals (Creswell & Poth, 2017). In mixed methodology research, the researcher combines quantitative and qualitative components to address the purpose of the study (Brannen, 2017; McCusker & Gunaydin, 2015; Mertens, 2014).

The methodology that I used for this study was qualitative. Based on the purpose of this current study, establishing relationships between variables through statistical analysis would not have been sufficient to understand the perceptions of administrators about retaining MHWs with more than 2 years of experience in Texas. The research questions of the study could not have been answered adequately through statistical data. Instead, addressing the research questions required the in-depth collection and analysis of data about retaining MHWs with more than 2 years of experience in Texas through

administrators' perceptions. I did not collect numerical data to support the qualitative

components of the study; further, I opted against a mixed methodology that was not

appropriate for this study.

Research Design

I selected a multiple case study design to guide this investigation. A case study

was suitable as the research design for this study because it focuses on exploring the

perceptions of one homogenous group regarding a specific phenomenon (Yin, 2018). For

this study, fulfilling the purpose required the exploration of perceptions of a comparable

group composed of HCAs about the phenomenon of retention of employees in the field of

mental health work. The first description of a case study matches the requirement for this

research. Yin (2018) further claimed that using a case study design was appropriate when

the behavior of the individuals to be studied cannot be influenced. For this study, the

focus was on the administrators' perceptions and experiences, which could not be

manipulated or controlled. Yin (2018) also claimed that the phenomenon and context

within a case study usually have unclear boundaries, which was also applicable to this

research. The research parameters aligned with the requirements for conducting a case

study.

Other qualitative research designs, such as phenomenology, narrative inquiry, and

ethnography, were also considered for the study. But I determined them to be

inappropriate. A case study was preferable over phenomenology due to my focus on

exploring the perceptions of HCAs, rather than lived experiences alone (Moustakas,

1994). Lived experiences may not capture the entirety of the skills of the administrators

to execute policies and practices in the workplace. A case study was also preferred over a narrative research design because there was no need to gather and present interviews in a storied and chronological form (Dewart, Kubota, Berendonk, Clandinin, & Caine (2020). Ethnography was also not appropriate for this study because there was no need to immerse myself in the lives of individuals in order to understand their culture and way of life. A case study research design was, therefore, the most appropriate.

Population and Sampling

Target Population

The target population for this study included HCAs of mental health clinics. When providing mental health services, the HCA has access to implement new policies and change practices to retain their MHWs with more than 2 years of experience in their community mental health clinics. HCAs are responsible for overseeing medical staff and policies, which include retention strategies. The research question of this study focused on exploring the retention strategies that HCAs implement. The population of this study aligned with the research question. More specifically, the population of the study was chosen because these individuals have relevant experiences and knowledge about implementing new policies and changing practices for worker retention, which I needed to address the research question of the study.

Sample Size

The sample for this study was composed of six HCAs from community mental health clinics in the north Fort Worth, Texas area, specifically within Denton and north Tarrant County. Malterud, Siersma, and Guassora (2016) suggested that the choice of a

small sample size allows the researcher to ensure the in-depth interviews are possible to conduct. The basis for the sample size for qualitative studies was usually the point of data saturation (Fusch & Ness, 2015). Identifying the point of data saturation was based on the instant wherein the analysis of additional data does not lead to new data, new themes, or new codes (Fusch & Ness, 2015; Tran, Porcher, Falissard, & Ravaud, 2016). For case studies, Yin (2018) recommends a small sample size as well. Specifically, Yin claimed that a small sample size for case studies was sufficient, provided that the samples have relevant characteristics that address the questions for the study directly. The sample size for this study must satisfy the eligibility criteria mentioned in the previous sections to obtain a relevant individual who can provide information that can directly address the research question of this study.

Participant Selection Method

I recruited participants using purposive sampling. According to scholars, purposive sampling was a participant recruitment technique commonly used for qualitative studies, including case studies (Gentles, Charles, Ploeg, & McKibbon, 2015; Sun et al., 2016). This sampling technique involves selecting participants based on a specific set of characteristics aligned with the requirements of the purpose of the study and listed in Appendix A of the interview protocol (Gentles et al., 2015; Palinkas et al., 2015). For this study, the participants were selected based on the eligibility criteria mentioned in the previous section. This technique was used because the participants recruited are usually willing to provide complete and detailed answers to data collection questions (e.g., based on the familiarity of these individuals with the topic of interest;

Barratt, Ferris, & Lenton, 2015; Gentles et al., 2015). The use of purposive sampling as

the recruitment technique aligned with the purpose and requirements of this study.

Ethical Research

Every researcher that deals with human participants must also address ethical

issues in the data collection of a study (Denzin & Giardina, 2016; LaRossa & Bennett,

2018). The first ethical consideration was going through the approval process of the

University Institutional Review Board (IRB). For the final research, the Walden IRB

issued approval number 10-23-19-0749643. By allowing the IRB to review the study, I

ensured that the procedures for this study upheld the rights of the participants. The

second ethical consideration was the informed consent process (Blease, Lilienfeld, &

Kelley, 2016; Grady, 2015). All participants received and signed an informed consent

form by email before being considered as an official participant of this study (Blease et

al., 2016; Grady, 2015). The following information was part of the consent form which

included the purpose and possible contributions of the study, an overview of the data

collection process, length of participation, minimal risks to participants, volunteer

participants, and the confidentiality arrangements. Third, I ensured the confidentiality of

the participants by using pseudonyms instead of the real names of the administrators. I

used these pseudonyms to identify participants in the data sheets and reports of findings.

Fourth, all materials used for the study were stored properly in a locked cabinet in my

personal office, where the final study will remain for 5 years after the completion of the

study. After 5 years, I will delete all stored information through burning, shredding, and

permanent deletion. Fifth, all participants were volunteers. I provided a $10 Starbucks

gift card to those who agreed to participate, with no consequences to those who declined the invitation.

Data Collection Instruments

Semistructured interviews were the primary data collection technique for this study. Using interviews allow researchers to a collection of in-depth data about a phenomenon (DeJonckheere & Vaughn, 2019; Katz, 2015; Lewis, 2015). Through an of a semistructured interview, the researcher can be flexible with asking a question but can keep the alignment of the data collection with the topic of the study (Brinkmann, 2014; Kallio, Pietilä, Johnson, & Kangasniemi, 2016; Zander, Eriksson, Christensson, & Müllersdorf, 2015). In this process, a researcher can minimize personal subjectivity and bias while also allowing more in-depth data to be collected through follow-up questions (Kallio et al., 2016; Roulston & Shelton, 2015).

For the semistructured interviews, the main instrument was an interview protocol (Appendix A). I used the interview protocol to ensure that the questions asked during the interview aligned with the topic of the study. I developed the questions in the interview guide (Pedersen, Delmar, Falkmer, & Grønkjær, 2016; Zander et al., 2015). Existing literature about the retention of employees in the field of MHWs was the basis for the questions to be included in the interview guide (Zander et al., 2015). The context of the questions was the perspectives of HCAs as members of the decision-making body for the organizational strategies related to retention.

The questions in the interview must pertain to addressing the research question of the study. Researcher-developed questions were used to perform a field test with experts

in relevant fields to validate the questions. During the field test, I asked three HR specialists to review the questions in the interview protocol in Appendix A. These HR specialists included my co-workers who have more than 10 years of professional experience of dealing with recruitment and retention strategies for employees in the federal government, specifically in the field of health care. The experts reviewed the questions based on appropriateness of word-usage, appropriateness of sentence structure, and the completeness of questions in addressing the research questions. The experts provided feedback and recommendations regarding evaluating the interview questions. The feedback consisted of rewording questions two, four, six, and seven. I was also advised to rearrange questions four, six, and seven to ensure the questions flowed while conducting the interviews. I then assessed and implemented the experts' recommendations for changes.

Data Collection Technique

After obtaining IRB approval, the selection process for the participants began. The participants for this study included composed of six HCAs from community mental health clinics in the north Fort Worth, Texas, area, specifically within Denton and north Tarrant County. I identified the community mental health clinics via publicly available data through the Texas Health and Human Services Database. I retrieved an initial 27 mental health clinics in the area. I made a spreadsheet of the existing clinics in the selected region, with the goal of including at least three sites in this study. I contacted all 27 clinics via email or telephone. To access participants, I contacted the manager of the Human Resources (HR) office of the identified local community mental health clinics in

the Denton and north Tarrant County area based on the publicly available contact

information. I asked the manager of HR to identify an authorized signer to grant site

permissions to conduct the study with their HCAs. The initial contact with the manager

of the HR office was by email, using an initial introductory contact script (Appendix B).

Permission to use the staff at the clinics was obtained via Informed Consent. I provided a

recruitment flyer that summarized the participation and eligibility criteria (Appendix C)

for distribution across the organization via an internal email system. The criteria for

eligibility for the HCAs from local community mental health clinics required them to

have the experience of hiring and retaining MHWs within their clinic, work in a mental

health clinic in Denton and north Tarrant County, and have been working for the current

mental health clinic for more than 2 years.

HCAs, who were interested in participating, were encouraged to contact me via

email. I targeted approximately 12 HCAs, with the goal of ultimately selecting six

participants. I received 11 interested volunteers via email. Those who satisfied all the

eligibility criteria received a copy of the informed consent form (Appendix C) via email.

The informed consent form contained information about the rights and scope of

participation in the study. The HCAs read, signed, and returned the form via email by

replying to this email with the words, "I consent" within 7 days. The participants were

encouraged to ask questions or seek clarifications if required through email during this

period. After receiving the signed informed consent forms via email, I scheduled the

interviews with the participants based on the most convenient dates, times, and locations.

All the interviews took place either at a private office space in Southlake Granite Place, a

meeting room at a public library near the participant's place of work, or a preferred private space of their choosing at a time and date convenient to the participant. I conducted four interviews in a private office space at the Southlake Granite Place and the other two interviews in a preferred private office space based on the participant's request. Each interview lasted for 45–60 minutes and was audio-recorded using a Sony digital voice recorder. I also had my Samsung S9 as a backup if the digital recorder stopped functioning during the interview (Appendix A).

An interview protocol was used for each interview based on three sections: introduction, interview questions, and summary or conclusion (Appendix A). The interview session began with a greeting based on the introduction procedure, as described in the protocol, followed by a discussion involving an overview of the topic, the purpose of the study, and the rights of the participants. The participants were reminded that participation in the present study was voluntary, and that they were free to withdraw at any point without any negative repercussions (Appendix A). At this point in my study, I had no participants to withdraw from the study. The interview session was guided by the questions in the interview protocol in Appendix A.

Near the end of the interview, I discussed the process of member checking with the participants (Birt, Scott, Cavers, Campbell, & Walter, 2016). After the interview sessions, I developed a summary from the recorded audio based on my interpretations of the interviews using Microsoft Word. I used pseudonyms to identify and organize participants' data in an Excel spreadsheet. This summary was sent 3 days after the interview. The participants had 7 days to review these representations and assess my

interpretation of the interviews for possible corrections and inaccuracies. Participants

were encouraged to ensure that the recordings properly reflected their intended responses.

If there were any changes, the participants pointed them out in an email or a phone call

(Birt et al., 2016). I had one participant who requested a few minor changes a day later

and no responses from the other five participants. I then made the corresponding changes

and returned the summary for a final review until the participant was satisfied with the

final annotations (Birt et al., 2016). A similar process was conducted at a later stage as

part of member checking, following data analysis, to ensure the interpretations developed

from the responses of the participants reflect their intended meaning (Birt et al., 2016). I

made changes based on the feedback of the participants until the one participant was

satisfied with their interpretations of their responses (Birt et al., 2016). After explaining

this process, I thanked the participant for spending the time to be part of the study and

provided the incentive stated in the recruitment flyer (Appendices C).

Data Organization Technique

I uploaded the member-checked summarizes into NVivo 12 software for

preparation for analysis. The final reports related to these data do not include the

identities of individual participants, nor details that might identify participants, such as

the location of the study. I did not use the participants' personal information for any

purpose outside of this research project. All electronic data files and voice recordings

were saved in a password-protected flash drive. The files were consolidated together

under the pseudonym name X. Data were kept secure by using a fake name instead of the

participant's real name. The individual interviews were labeled by number in the reverse

order of when the interviews were performed. All data will be destroyed after 5 years from study completion by deleting the electronic data and shredding the physical copies.

Data Analysis

I analyzed the data using the thematic analysis (Braun & Clarke, 2019). The process included familiarization, coding, initial theme development, theme revision, theme finalization, and report generation (Braun & Clarke, 2019). In the familiarization phase, I read the interview written text at least twice and highlighted descriptive words related to the research question. In the context of MHWs, these descriptive words were associated with hygiene factors, as interpreted by Herzberg's two-factor theory to address HCAs' challenges.

In the coding phase, I developed a scheme of codes for one of the six interview recordings. In the coding, I provided straightforward codes to describe the descriptive words highlighted in step one. The codes were terms that described how related or similar terms address the research questions. I applied the codes to the other descriptive texts with other interview responses. In the initial theme development, I grouped similar codes to form initial themes. In the fourth step, I revised the themes, combined small themes to form more significant and rational themes, and decomposed large themes for a more concise thematic grouping.

In the fifth step, I developed the final list of themes. The themes identified in the data from at least three participants are considered major; otherwise, the themes were considered minor. The final themes were defined and described with the research questions. I compared the final themes with those from the field testing to correlate any

similarities with the final study. NVivo 12 analysis software, I used as the coding

program for this study to demonstrate the difference and similarities compared in an

Excel spreadsheet (Nowell, Norris, White, & Moules, 2017).

The two-factor theory was used as the conceptual framework to address HCAs'

challenges in developing a workplace in which there are more satisfiers and fewer issues

associated with hygiene factors. In the sixth step, I wrote a discussion of the findings,

which I present in Section 3.

<div align="center">**Reliability and Validity**</div>

Reliability

For qualitative research was reliable and valid, a researcher must ensure that

different processes are implemented to improve credibility, transferability, dependability,

and confirmability (Lincoln & Guba, 1985). In this study, I provided an audit trail to

improve dependability (Lincoln & Guba, 1985). Aside from member checking, I

performed a field test of the interview guide. I compiled relevant documents (e.g.,

consent forms, interview questions, field notes) to complete the audit trail (Lincoln &

Guba, 1985). Through this thick and rich description, I expected that the findings of this

study can be useful to other research of other studies. Hence, readers can easily assess the

reliability of the procedures performed for this study (Lincoln & Guba, 1985; Morse,

2015).

Validity

To improve credibility, I performed member checking of the interview recording

in the form of written text (Birt et al., 2016). Scholars have claimed that by conducting

testing or reviewing the contents of the interview guide, researchers can improve the validity of an interview protocol (Miles, Huberman, & Saldana, 2013). To improve transferability, I have ensured that future researchers and readers of this study can easily replicate the study or assess the applicability of the findings to another context (Lincoln & Guba, 1985). I improved transferability in this study by providing a rich and thick description of methods and findings (Miles et al., 2013). To promote confirmability, I reduced subjectivity by using a valid instrument that has been expertly reviewed (Lincoln & Guba, 1985). Researcher bias was reduced to minimize subjectivity and improve confirmability. I identified the point of data saturation based on the analysis of additional data does not lead to new data, new themes, or new codes (Fusch & Ness, 2015; Tran et al., 2016).

Summary and Transition

In Section 2, the focus of the discussion was the procedures that I implemented to address the purpose and answer the research question of the study. Based on the discussion in Section 2, a qualitative methodology with a case study research design was appropriate for this study. The participants of the study included HCAs from outpatient medical clinics in the north Fort Worth, Texas area. The sample was composed of six participants with these characteristics, who: have experience of hiring and retaining MHWs, have worked in Denton or north Tarrant County, and have worked as an HCA for at least 2 years. I recruited the participants using purposive sampling, conducted interviews to collect data, and analyzed my interpretations using thematic analysis.

Add a preview of Section 3.

Section 3: Application to Professional Practice and Implications for Change

Introduction

The objective of this qualitative, multiple case study was to explore, via semistructured interviews, the retention strategies that six HCAs in Texas used to retain their MHWs who have more than 2 years of experience. According to the responses, retaining such MHWs was possible using various strategies, including competitive compensation and incentives, flexible scheduling options, substantial benefits packages, positive reinforcement, open communication, and other efforts to ensure their well-being and satisfaction.

I also identified themes related to preventing job dissatisfaction and turnover through efforts to avoid overworking employees; incentivizing workers with bonuses, praise, or professional development opportunities; and maintaining ongoing open communication between workers, supervisors, and leadership.

In this section, I discuss the thematic analysis of the interviews, which provided a thick description and thus provided the major themes of the study. After the presentation of the findings, I explain how they are used in the mental health field and the conclusion of the results for society.

Presentation of the Findings

The research question that guided the study was: What strategies do HCAs use to retain their MHWs with more than 2 years of experience? To be eligible for participation, all participants had to be employed as an HCA at a clinic within Denton and north Tarrant County at the time of the interview; they had to have experience with hiring and

retaining MHWs, and had to have more than 2 years working at the current mental health

clinic. I maintained confidentiality and protected the participants' anonymity by

assigning them pseudonyms (Participant 1 to Participant 6). I conducted a thematic

analysis to analyze my interpretation of the summarized semistructured interviews with

HCAs from community mental health clinics in the north Fort Worth area. I used

Microsoft Word for summarizing the recorded data and NVivo 12 software to analyze the

differences and similarities in the responses in order to develop codes. Table 1 illustrates

the participants' demographic information.

Table 1

Participant Demographics

	County of employment	Role	Years at the clinic	Years in the mental health field
Participant 1	Tarrant	Mental health nurse manager	16	25
Participant 2	Tarrant	Clinical supervisor	17	35
Participant 3	Denton	Administrative director	8	15
Participant 4	Denton	Clinical operations Specialist	12	15
Participant 5	Tarrant	Executive patient advocate	14	23
Participant 6	Tarrant	Vice president	13	30

Four participants were employed in north Tarrant County and two were employed

in Denton County. Although all participants were classified as HCAs in the mental health

field, their specific roles included mental health nurse manager, clinical supervisor,

administrative director, clinical operations specialist, executive patient advocate, and vice president. The participants had been in the mental health field between 15 and 35 years and had been employed in their current clinic between 8 and 17 years. In the next sections, I present the recurring themes that emerged from their responses.

Mental Health Worker Retention Strategies

The participants discussed a variety of mental health worker retention strategies that their organizations used in an effort to improve worker satisfaction and retention. Table 2 provides a summary of the retention strategies that the participants identified.

Table 2

Strategies for Retaining MHWs

Strategy	Number of responses
Providing good benefits packages	6
Promoting the health and wellness of MHWs	5
Providing competitive salaries	3
Providing flexible scheduling options	5
Incentivizing workers with rewards and positive reinforcement	4
Open communication between workers and administrators	4

When applying a two-factor theory lens to the study, many of the retention strategies discussed by the study participants can be classified as hygiene factors, including those related to salary, benefits, and scheduling, which help to offset worker dissatisfaction (Herzberg et al., 1959). The motivating factors, or "satisfiers," discussed in the current study include training and professional development opportunities, as well as other forms of reward, recognition, or achievement.

Providing good benefits packages helps retain employees. All six participants discussed the strategy of providing good benefits packages to MHWs to retain employees. Providing competitive benefits packages was an important retention strategy according to Read and Laschinger (2015), who posited that employee benefits may determine whether a business retains or loses its seasoned employees to their competitors who may offer more attractive benefits and salaries. When the participants were asked about the strategies adopted to increase worker retention, four of the six participants included an explicit reference to their organization's benefits packages. For example, Participant 6 stated, "We offer competitive benefits and salary packages including flexible schedules when possible." Other responses included: "We offer more benefits and training" (Participant 3) and "We do yearly negotiating for raises, and we also provide benefits packages for the fully paid single insurance policy for employees" (Participant 2).

In addition to these references to benefits, two participants implicitly referred to their benefits packages as influential in their ability to retain workers and described the various components of their benefits package. Participant 4 explained, "We offer school loan repayments, paid time off (PTO), if needed, time extended for patients' treatments, flexible schedules."

Providing competitive salaries helps retain employees. Three of the six participants referenced maintaining competitive salaries and compensation in order to retain workers. Organizations may attempt to supplement compensation with strong benefits packages; however, if workers do not feel that they are being fairly compensated

for their work, it will be challenging to convince workers to remain employed in the organization. As detailed in the review of literature, it was important that employees receive a reasonable salary that was competitive and equal to others in a similar designation (Ghaffari et al., 2017). The current participants' references to competitive pay as a retention strategy included "We offer incentives and competitive pay to our workers" (Participant 1) and "We offer competitive benefits and salary packages" (Participant 6). For some workers, a fair salary may be able to compensate for their dissatisfaction with other aspects of their job (Wilson, 2015). In order to increase worker retention, therefore, HCAs should first ensure that workers are receiving fair and competitive salaries.

Promoting employee health helps retain employees. Providing support and resources to workers who are experiencing work-related stress was also a common strategy that the current participants highlighted. Five of the six participants detailed some form of mental health and wellness strategy as part of their efforts to ensure worker satisfaction and retention. Working in the mental health field can be challenging and stressful, and often influences the mental health of the workers themselves. Grossman-Kahn et al. (2017) found that due to the increased stress levels associated with their field, nurses working in the mental health field are less satisfied than nurses in other fields.

The current study's participants supported Grossman-Kahn et al. (2017) findings in their statements that providing resources and encouraging health and wellness among employees positively contributes to worker satisfaction. For example, Participant 1 stated, "Even though they are mental health professionals, these workers also need mental

health days off when they are feeling overwhelmed." Another three responses described useful resources and strategies for helping workers cope with stressful experiences. Participant 6 cited, "When there are severe cases that arise, we make sure that there was a debriefing process for those MHWs to release the stressful environment." Participant 5 explained, "We try to listen to them through several avenues of communication and be there for them when dealing with difficult and stressful cases." Such responses demonstrated an awareness of administrators that the role of the mental health worker could impact the mental health of the worker, leading administrators to view stress-relieving strategies as a path towards preventing worker dissatisfaction and improving worker retention.

Flexible scheduling options helps retain employees. Five participants highlighted providing employees with flexible schedules or sufficient paid time-off as a strategy for improving worker satisfaction and retention. Participants 3, 4, 5, and 6 each included the exact phrase "flexible schedules" in their description of worker retention strategies. For example, Participant 4 described their retention efforts as including:

> Loan repayments, paid time off (PTO) if needed, time extended for patient treatments, and flexible schedules. And we actually review their caseload to make sure workloads are balanced, a support worker with correct staffing (i.e., case managers), we offer debriefing after cases especially difficult sessions, if needed.

Participant 4's statement demonstrates the numerous factors that should be taken into consideration in an effort to ensure that workers feel fairly compensated for their work. Flexible scheduling was just one of many similar incentives provided to the MHWs in an

effort to retain employees with more than 2 years of experience, which could be classified as one of Herzberg's hygiene factors, also including salary, work security, benefits, and organizational policy (Matei & Abrudan, 2016). Idris (2014) also demonstrated the use of flexible work schedules to support worker satisfaction and retention, listing flexible work schedules, time-off, employee awards, mentoring programs, and promotions as strategies for targeting internal factors to increase worker retention.

Incentives may help to retain employees. Four participants listed incentives or bonuses as another strategy for retaining employees. According to the conceptual framework of Herzberg's two-factor theory of job satisfaction, rewarding employees was an extrinsic motivation factors and intrinsic motivation factors in the workplace (Giordani et al., 2016; Goh & Lopez, 2016; Inuwa, 2017). Bonuses or incentives can be a useful strategy for providing positive reinforcement at various times in the year or in the career of an individual. Two of the four current participants described the yearly bonuses provided to employees. In comparison, the other two participants mentioned bonuses in a more generic manner, refraining from providing any details about the frequency with which bonuses are used. This finding aligns with those of Read and Laschinger (2015), who demonstrated that the benefits offered to employees are critical to retention efforts. Organizations that do not offer such benefits risk losing their experienced employees to competitors that are willing to offer a more substantial compensation package or other incentives. Incentives such as bonuses may be useful tools for organizations, particularly those that may not find it feasible to increase salaries overall. Instead, such organizations

can offer bonuses at various times throughout the year, which has the potential to enhance workers' satisfaction with their job and role within the organization.

Open communication helps retain employees. Maintaining clear and open communication was another strategy repeatedly referenced by the current participants. Four of the six participants emphasized the role of open communication between workers and administrators in increasing worker satisfaction and retention. As Participant 5 described, "We also make sure we keep an open line of communication for our workers. We try to listen to them through several avenues of communication and be there for them when dealing with difficult and stressful cases." Open communication enables workers to provide feedback and opinions to leadership and administration. Willard-Grace et al. (2019) previously identified that a lack of employee engagement through administrative indifference could lead to work dissatisfaction among seasoned employees. By providing an outlet for workers to express their opinions and engage with leadership, organizations hope to prevent worker dissatisfaction and thereby increase retention. Sinha and Thaly (2013) offered similar suggestions, concluding that poor engagement among seasoned employees may result from poor communication between administrators and workers or limited opportunities for worker involvement in decision-making.

Strategies for Preventing Worker Dissatisfaction and Burnout

In this section, I discuss the themes related to the strategies aiming to prevent worker dissatisfaction and potential occupational burnout. Table 3 provides a summary of the identified strategies.

Table 3

Strategies for Preventing Worker Dissatisfaction

Strategy	Number of responses
Avoiding overworking of MHWs	5
Providing bonuses or incentives	4
Praising and positively reinforcing a job well done	5
Providing and encouraging participation in stress-relieving activities	3

Avoiding overworking employees helps to prevent worker dissatisfaction and occupational burnout. The strategy for preventing worker dissatisfaction that the participants discussed most frequently in the current study was the avoidance of overworking. Common phrases used within these statements include maintaining a "balanced workload" (Participants 4, 5, and 6) and preventing "understaffing" (Participant 2) or "burnout" (Participant 3). Previous scholars have noted that high turnover rates and the loss of seasoned, experienced employees within the organization can lead to instability in the workplace environment for remaining employees (Beidas et al., 2015b). The HCAs who participated in the current study recognized the risk of overworking their employees, which was often the result of understaffing and can result in dissatisfaction and occupational burnout of employees, thereby negatively impacting their ability to retain employees (Wong & Spence Laschinger, 2015).

Some participants elaborated on the need to prevent overworking by describing the specific ways in which they attempt to do so. For example, Participant 3 explained, "We provide positive reinforcement through flexible hours, so there was adequate time

out of the office for personal errands. We try splitting responsibilities among employees by cross-training or shadowing each other, and this prevents any employee from feeling burnout." Participant 2 stated, "[We] have a volunteer program that supports our MHWs so that the understaffing of our employees was not a significant job dissatisfaction." These statements are in agreement with the conclusions of Laeeque et al. (2018) that occupational burnout may be the result of stressful work environments or drastic shifts in workload, such as employee overworking resulting from staff shortages.

Providing bonuses or advancement opportunities helps to prevent worker dissatisfaction and burnout. Another strategy for preventing dissatisfaction among MHWs was the use of incentives, such as bonuses or loan-forgiveness programs, to increase satisfaction among employees. Participant 6 described the company's efforts to "keep our qualified staff happy": "We also provide workshops to deal with stress including yearly bonuses as well." Participant 1 also highlighted the bonuses and promotions that the company offers, particularly around the end of the year.

Participants 4 and 5 both referenced a loan forgiveness program for employees in order to incentivize quality hiring and retention. Participant 5 stated, "When MHWs are hired, we offer loan forgiveness or pay off for the student loan payoff program." Bonuses and loan-forgiveness programs allow the organization to provide additional compensation to their MHWs, without needing to adjust employee salaries. Additional benefits such as bonuses and loan-forgiveness programs may be used to help organizations retain seasoned employees against competitors who may offer higher salaries (Read & Laschinger, 2015). Bonuses can also be used as a reward or positive reinforcement for

ᴡorkers who have demonstrated themselves as well-qualified, further increasing worker

satisfaction. As Idris (2014) highlighted, retention strategies such as offering employee

awards may be used to target the internal motivations of employees.

Providing praise and positive reinforcement to workers helps to prevent worker dissatisfaction and occupational burnout. Strategies to increase worker

retention may not always be measurable, such as in the cases of financial compensation

or vacation time accrued; instead, they may be related to motivational factors. HCAs

have the ability to positively impact employees' motivational factors through practices

such as recognizing workers for excellence on the job (Thibodeaux et al., 2015). The

current study participants expressed similar efforts to influence worker motivations and

increase job satisfaction, highlighting the strategy of providing praise or positive

reinforcement to workers. Participants 1, 2, and 5 highlighted praise as a useful tool in

improving worker satisfaction, while Participants 3, 4, and 5 referenced positive

reinforcement.

One example of praise being described as a potential strategy for preventing

worker dissatisfaction was the response from Participant 2:

> We praise our employees…we ensure that we provide praise during monthly staff
> [meetings] to show that employees will be awarded for good work. We also make
> sure we post stuff in our break room on our corkboard to show positive customer
> service.

Providing praise to recognize and encourage staff for their good work was a technique to

enhance worker satisfaction with no additional expense to the organization. The strategy

of providing positive reinforcement to workers was a similar tactic. For example, Participant 5 stated, "We make sure we provide employee praises, positive reinforcement, and encouragement for on-the-spot successes."

Encouraging participation in stress-reducing activities helps to prevent worker dissatisfaction and occupational burnout. In describing strategies to reduce worker stresses and increase overall job satisfaction, three participants detailed activities that their organizations coordinate for their employees. Participant 1 described efforts to hold "outside work-related activities to reduce stress…This time of year, our patient intake increases, so we really try to our best to reduce the stress." Participant 6 referred to a similar strategy, stating, "To reduce stress, we like to plan outside work-related activities with family." Through the participation of employees in company de-stress and other family-oriented activities, the organization hopes to foster an environment of community among colleagues, which has been shown to affect worker motivations and satisfaction rates (Giordani et al., 2016).

In addition to hosting family-oriented gatherings for stress relief, Participant 2 provided further elaboration on alternative organizational efforts to manage workers' stress levels:

> While some of our staff members handle stress better than others, our clinic has an on-site chaplain to assist the employee in dealing with stress and help with employee retention. Also, we are a family-oriented clinic, so we always include family in our after-work events – parties, luncheons, stuff like this.

Participant 2's organization provides additional resources for workers to use during times

of stress, including the availability of an on-site chaplain. Unlike activities and events

that are intended to serve as one-time stress-relieving experiences, the presence of the

chaplain was a resource that employees may use throughout the year based on their

personal support needs. For workers in higher-stress environments, such as the mental

health field, ongoing resources and support provided by the organization may help to

offset any potential burnout or dissatisfaction (Grossman-Kahn et al., 2017).

Strategies for Preventing Worker Dissatisfaction from Increasing Job Demands

In this section, I present and discuss the themes related to the strategies aiming to

prevent worker dissatisfaction affiliated with increasing job demands. Table 4 provides a

summary of themes related to worker dissatisfaction and job demands.

Table 4

Strategies for Preventing Worker Dissatisfaction Related to Increased Job Demands

Strategy	Number of responses
Avoiding employee overworking	4
Providing professional development opportunities to workers	2
Encouraging the self-care of MHWs	2

Avoiding employee overworking helps to prevent worker dissatisfaction. The

most commonly referenced source of worker dissatisfaction related to increased job

demands was the overworking of MHWs. During periods of higher patient influx, MHWs

may become responsible for heavier or imbalanced caseloads. When organizations are

unable to provide a stable workload and environment for such employees, worker

burnout was more likely to occur (Beidas et al., 2015a). The HCAs participating in the

current study stated that increased job demands could result in employee overworking and burnout, which negatively impacts worker satisfaction and employee retention.

Participant 1 described a correlation between overworking and job satisfaction, explaining, "Most of our workers like to work for us, but some do not, due to overload on work. We strive to accommodate our workers' requests when it comes to working conditions." Participant 4 also cited a relationship between staff shortages, overworking, and lack of satisfaction, stating:

> We are continually striving to improve our communications and also make sure that integration into primary care was taken care of. We try to ensure proper supervision and support throughout the clinic, but we often lack them due to a lack of qualified staff to work in our positions. We are offering better benefits and time-off so their personal needs are met.

Participant 4's response demonstrates the importance of establishing strategies to increase worker retention. According to this participant, increasing worker satisfaction and retention was important because a lack of retention may result in an insufficient amount of staff to meet clinic needs. In turn, there was a risk of perpetuating worker dissatisfaction and poor organizational retention rates. Participant 5 also highlighted a connection between managing staff workloads during busy seasons and maintaining worker satisfaction, stating, "We offer additional training to help our employee process improvement, making sure we have qualified staff to support case influx to prevent burnout, and flexible time off with competitive benefits."

Providing professional development opportunities to workers. Another strategy that the current participants believed to improve worker satisfaction in the face of increasing work demands provided increasing professional development opportunities to support the growth of MHWs. The participants described a strategy of encouraging workers to view their role in the organization through a holistic and growth-minded lens. According to the goal-setting theory, organizations should encourage employees to experience accomplishment and goal setting and achievement within their work (Mauro, 2015). In alignment with this theory, increasing work demands or responsibilities are depicted by administration and leadership as opportunities for career and technical growth and improvement of employees. For example, Participant 5 stated, "We offer additional training to help our employees' process improvement…. We feel that providing training opportunities and certification payback gives them something to look forward to and they feel like they can grow with us throughout their career." In order to better equip workers to manage seasons of increased demand and heavier workloads, Participant 5 stated that their organization provides opportunities for additional training and career growth to its workers.

Participant 2 described their organization's experiences with combatting worker turnover, explaining:

> In our organization, our clinics in the Tarrant county area do not have a lot of problems with large turnovers. We make an attempt to include our workers into looking at work holistically and as a part of a large mission throughout our organization. We have a regular team discussion. We include contract fulfillment

and possible future careers here with our clinics.

The health care organization of Participant 2 attempts to contextualize individual employees as part of a greater whole within the organization, so that when employees are feeling additional stress or heavier workloads, they may be reminded of their role within the larger organization and its mission. In viewing the organization and the work holistically and making career growth opportunities available, this also encourages workers to envision themselves progressing their careers within the organization, thereby decreasing turnover.

Encouraging the self-care of MHWs. Worker satisfaction can be increased despite increasing job demands with the strategy of maintaining worker health and wellness, as well as by encouraging employee self-care. Working in the mental health field can be mentally and physically taxing, and the current participants recognized the importance of not only retaining staff, but also ensuring the ongoing health and wellness of these employees. Participant 3 cited their organization's strategy of supporting workers with their health needs at all times, explaining:

> Employees can reach out for assistance when it was needed, whether that be mental health, physical health, and financial health through our wellness program. The wellness program assists with helping our workers' needs on and off the workplace.

Participant 2 also described the ways in which their organization strives to ensure worker wellness by offering "a rest area for our staff, as well as free, scheduled massages for staff only on a monthly basis." The use of such strategies demonstrates that the

organization cares for the well-being of its employees, thereby increasing worker satisfaction with the organization and their job and the likelihood of retaining experienced workers. These findings mirror those of Van Aerden et al. (2016) regarding the importance of support from the team and organization of the employee, which contributes to the health of employees and increased satisfaction rates with the organization.

Increasing Worker Satisfaction through Training

In this section, I discuss the themes related to increasing worker satisfaction through ongoing training. Table 5 provides a summary of these themes.

Table 5

Strategies for Increasing Worker Satisfaction Through Training

Strategy	Number of responses
Ongoing training participation prevents worker burnout	2
Training and continuing education opportunities are welcomed by workers	3
Training provides additional skills and support to MHWs	3

Ongoing training prevents occupational burnout. Providing workers with ongoing training opportunities enables them to better manage increased workloads and higher stress levels. Jang et al. (2016) found that an employee's turnover decision may be influenced by the amount of training provided to the employee. By providing workers with adequate training throughout their career, organizations may reduce the burnout of mental health care workers and increase overall retention rates. In the current study, Participants 4 and 5 stated concisely that training helps to avoid occupational burnout.

Participant 4 cited that "training helps employees feeling burnout," while Participant 5 explained that "training helps in preventing employees from feeling burnout."

Training and continuing education opportunities are welcomed by workers. Not only does ongoing training serve to combat feelings of occupational burnout, but the current participants also indicated that MHWs welcome such training opportunities. Possessing the motivation to improve and excel within one's field was an integral part of achieving success. Acevedo (2015) found that training was a fundamental aspect of the motivational factors that drive individuals and contribute to satisfaction. Similarly, Participant 2 described their organization's experience with providing mental health worker training opportunities and encouraging participation, stating:

> We find that most of our MHWs are eager to continue their education or some training to assist them with their treatment plans. So, we make sure that we offer several training courses, seminars, or webinars quarterly. We also support individual specific ongoing training. As I mentioned earlier, we offer an online training portal, where our workers can do specific training as they feel that they need improvements. People stay longer when they know they have this ongoing training as a retention tool to increase job satisfaction.

Participant 2 recognized the benefit of supporting workers in their interests in order to develop and enhance their skills, recommending that the organization provides ample opportunities for employees to continue their training or education. Participant 1 described their organization's opinion of providing training to MHWs, stating that training "continually helps employees grow in their roles and responsibilities." This

participant continued to describe their options for meeting employee needs and interests

when it comes to participating in training, stating:

> We have tuition reimbursement for training or courses that we cannot get. If an
>
> employee wants to see additional training that was job-related, this was a benefit
>
> to our employees. We do our best to offer more training to keep up with changes.
>
> We welcome training suggestions from our employees when the need arises.
>
> Additional training assists our employees to work through complex situations.
>
> (Participant 1)

While in-house training may not be provided on a regular basis, organizations should

empower employees to seek out their desired training by providing tuition

reimbursements. The findings suggest that employees are interested in enhancing their

skills through training, looking beyond the opportunities provided by the organization in-

house by making suggestions to leadership, or seeking out the training externally. An

example was how organizations could influence employees' motivational factors, as

opposed to their hygiene factors, such as salary and flexible scheduling, in an effort to

increase organizational retention.

Training provides additional skills and support to MHWs. By providing

ongoing training opportunities, the participants indicated that their organization was able

to make workers feel better supported and equipped to handle their job. Three

participants discussed the role of encouraging ongoing training in ensuring that

employees feel valued and supported by the organization. Participant 5 stated:

> When we know employees are doing hard work, we make sure employees are
> feeling valued and supported. Our culture truly appreciates the role of our mental
> health providers… Additional training provides support. It tends to make the job
> better when they can handle cases with improved skills.

Participant 3 also described the importance of allowing workers room to grow and expand their skills through training, stating:

> We have found that offering training to our employees was always beneficial. If
> they understand that their job and role as part of the team, they are more likely to
> be happy with their job and have greater respect for their peers and leadership.

This statement suggested that additional training empowers employees to feel greater alignment with their role in the organization, as well as more respected and valued in the workplace. These findings support the recommendation of Cloutier et al. (2015) that organizations provide employees with interesting and challenging tasks, as well as enhanced training, in order to increase satisfaction and retention. When workers are provided tasks that lead them to be more engaged with their job and inspire them to grow in their knowledge of the field, they are more likely to feel satisfied in their position and elect to stay at their current organization.

Increasing Worker Satisfaction through Worker Feedback and Input

In this section, I present the themes related to the strategies aiming to increase worker satisfaction by encouraging worker feedback and input sharing are discussed. Table 6 provides a summary of themes related to worker dissatisfaction and job demands.

Listening to opinions and suggestions of MHWs aids in increasing worker satisfaction. All six of the participating HCAs described various strategies for gathering feedback, opinions, and suggestions from workers. Each participant expressed the importance of providing an outlet for workers to express their opinions and provide feedback to leadership and administration.

Table 6

Strategies for Increasing Worker Satisfaction Through Worker Feedback and Input

Strategy	Number of responses
Listening to opinions and suggestions of MHWs aids in increasing worker satisfaction	6
Taking action in response to worker suggestions increases worker satisfaction	5
Worker satisfaction was increased when supervisors and/or leadership engage with the workers regularly	5

The two most commonly listed strategies in this study were suggestion boxes (Participants 1, 2, and 5) and satisfaction surveys (Participants 3, 4, and 6). Participant 5 provided a primary example of the use of suggestion boxes to gather employee input and thereby improve worker satisfaction:

> We provide monthly meetings and an employee suggestion box. We also have a suggestion inbox via email, where employees can send in their requests, suggestions, and needs. Some supervisors and managers answer these questions and the responses are sent back to the workers directly. We have found this to be a handy tool for our workers and providing a better work environment knowing they are being heard and opinions valued.

When employees feel that they have a voice and that their opinions are valued, they are more likely to remain with the organization long-term. Jindal et al. (2017) demonstrated similar findings, suggesting that offering opportunities for employees to share feedback with managers may positively impact employee satisfaction. By providing both physical and virtual suggestion boxes, organizations can provide an easily accessible way for employees to share their feedback and opinions.

Participant 4 described their use of satisfaction surveys in order to gather employee feedback and honest input, stating:

> We do satisfaction surveys quarterly, just with our staff in response to suggestions and ideas. Our clinic responds to feedback in the form of action items that resolve or follow-up within our monthly meetings. The surveys are important and has led us to prevent offering services that make no sense to provide or support services that staff does not value. So, this direct input was valuable to our employees to have a better mood in their stressful situations.

By providing regularly issued satisfaction surveys, the organization can gauge the satisfaction of its employees on a regular basis. Surveys also enable the organization to collect feedback regarding specific topics, while still allowing workers with an opportunity to share their opinions or comments on topics that they perceive as important.

Taking administrative action in response to worker suggestions increases worker satisfaction. In addition to providing an outlet for workers to voice their opinions, the current participants expressed emphasis on the importance of ensuring that workers also feel that their opinions are valued and are being heard by administration and

leadership. Five of the six participants described the follow-up actions associated with receiving employee feedback. For example, Participant 2 explained:

> Yes, we provide a suggestion time and we also have suggestion boxes throughout our clinics. We have suggestions or input that sometimes employees feel their demands or needs have been ignored or may be laughed at. So, this let leadership know that the current strategies that we may have in place may not work. Some workers may feel like input or suggestions are null and void.

In this example, merely providing a suggestion box for workers to voice opinions was not enough to positively impact worker satisfaction. In contrast, the workers perceived that their suggestions or opinions were not valued, resulting in greater discontentment with their workplace. Sinha and Thaly (2013) demonstrated that if employees are not given an opportunity to be involved in decision-making related to policies or work environment, this may result in dissatisfaction with the organization and poor retention rates of experienced employees.

Participant 5 depicted their organization's feedback mechanisms as a positive example of both providing an outlet for employees to voice opinions, as well as for administration and leadership taking action according to suggestions in order to better support and value their employees. According to this participant:

> Yes, we provide monthly meetings and an employee suggestion box. We also have a suggestion inbox via email where employees can send in their requests, suggestions, and needs. Some supervisors and managers answer these questions and so the responses are sent back to the workers directly. We have found this to

be a handy tool for our workers and providing a better work environment

knowing they are being heard and opinions valued. (Participant 5)

Providing timely responses to employee feedback and suggestions was just one example

of ways that the administration can ensure that workers feel heard and to demonstrate

support and respect for employees. The administration must be willing to provide

thoughtful consideration to employee suggestions and to implement suggestions, where

possible, in order to empower their employees and increase worker satisfaction. The

quality of the relationship and communication between supervisors and employees have

been demonstrated to influence employee retention rates (Chu & Kuo, 2015).

Worker satisfaction was increased when supervisors and/or leadership

engage with the workers regularly. Worker satisfaction was further increased when

leadership and supervisors take time to engage with employees on a regular basis

(Northouse, 2018). The form of engagement most commonly referenced by the current

study participants was holding recurring meetings, either one-on-one between supervisors

and workers or in a group setting. Four participants mentioned a "monthly meeting"

(Participants 1, 3, 4, and 5), while Participant 2 described "regularly scheduled meetings

to make sure that needs and demands are addressed." Additional opportunities for

worker-supervisor or worker-administration engagement included open-door policies,

which encourage employees to express concerns or raise questions directly with

supervisors or leadership, as needed.

Participant 3 listed the various strategies in place to effectively collect workers'

feedback and ensure that employees' opinions are heard, stating:

> We offer periodic surveys that are anonymously sent to employees for feedback
> so that they can be open and honest. There are quarterly check-ins and monthly
> staff meetings to engage in bring forth issues and concerns among employees. We
> also provide an open-door policy with upper management. The open-door system
> tends to work well.

Through the combined use of periodic surveys, regularly scheduled check-ins and staff meetings, and an open-door policy with upper management, the organization allow workers access to all levels of leadership within the organization, enabling them to voice their opinions in the manner that they feel most comfortable or applicable. As Sinha and Thaly (2013) suggested, a lack of engagement and communication between employees and management can lead to dissatisfaction among employees; Participant 3's organization strives to combat this outcome through their regularly scheduled check-ins and meetings.

Participant 2 described another way that leadership strives to connect with and support MHWs, explaining that "leadership tends to interact often with our mental health staff and try to build a personal connection with all of them. For example, at our meetings, our leadership will pop-in to listen to the input and needs which the employees may have." Establishing personal connections helps to improve workers' satisfaction by reinforcing their perceptions that leadership values their contributions (Northouse, 2018). Giordani et al. (2016) demonstrated similar findings, with their study's participants highlighting the significance of community, colleagues, and managers as influencing work motivation and satisfaction.

Applications to Professional Practice

Through the findings of the study, I developed themes that provided insight into effective retention strategies and practices used by mental health care facilities in the Denton and north Tarrant counties. Local HCAs may apply these findings in order to increase mental health worker retention within their organizations. According to the interview responses of the six participating HCAs, I determined that organizations may increase worker retention by applying positive reinforcement strategies such as competitive compensation packages, flexible scheduling to maintain a healthy work-life balance of employees, and other rewards or incentives, including bonuses and tuition reimbursement plans.

Decreasing worker dissatisfaction also increases worker retention, which may be possible through the application of the strategies for combatting such dissatisfaction among workers detailed through the presentation of findings. The most commonly referenced were overworking and occupational burnout which threatens worker satisfaction; however, these factors were also described as manageable through practices including the enhancement of training and professional development opportunities, positive reinforcement of workers, and encouraging employee self-care and wellness. The current findings indicated the importance of ensuring that employees are provided an opportunity to voice opinions and express suggestions or feedback to administrators and leadership. The current participants depicted the necessity of providing an outlet for employees to express their opinions and suggestions.

While the insights derived from this study may not be directly applicable to individual organizations, they serve as additional knowledge on the various factors and strategies that influence worker retention within the field of mental health. Based on these findings, comparable mental health organizations may choose to adopt the practices described throughout this study when seeking to increase employee satisfaction across their facilities.

Implications for Social Change

Beyond providing increased awareness and insight into mental health facility strategies for increasing worker satisfaction and retention of MHWs with more than 2 years of experience, the findings of this study may have further reaching implications within society. An inability to retain MHWs negatively impacts the facilities that demand MHWs and their services, as well as the health care field on a broader scale. The application of these findings may improve employee retention practices, which will benefit MHWs through increased job satisfaction and more substantial compensation packages and wellness resources. The findings may also benefit the organizations that employ MHWs by enabling them to reduce turnover and mitigate the impact of staff shortages which are often associated with low retention rates of experienced MHWs.

The application of these findings may promote positive social change through the strengthening of the mental health field, resulting in more efficacious mental health services and care provided to patients. High employee turnover rates among MHWs with more than 2 years of experience are associated with inadequate quality of care for patients with mental health issues in community mental health clinics (Bukach et al.,

2017). By understanding and implementing effective retention strategies, the findings of
this study may help organizations increase the number of qualified and experienced
MHWs, thereby providing enhanced patient care and improving the quality of mental
health services. An improvement in the quality of service can benefit the patients and
increase mental health care options in communities.

Recommendations for Action

HCAs of mental health facilities should review the findings of this study when
adopting policies and procedures in order to increase mental health worker retention. I
recommend that HCAs should use the presented findings to assess current organizational
strategies for supporting MHWs and increasing job satisfaction rates among employees
and thus determine which factors may be impacting their organization's ability to
successfully retain MHWs with more than 2 years of experience in the field.

Decisions of whether to implement strategies discussed in the presentation of
findings should revolve around the job satisfaction levels of MHWs within the
organization, as well as an assessment of current retention strategies in practice. Upon a
thoughtful assessment of organizational satisfaction rates, administrators may choose to
implement enhanced compensation packages, offer more flexible scheduling and PTO
options, or adopt incentivization strategies to support the satisfaction and retention of
MHWs. Each of these strategies provides positive contributions to employee satisfaction
and retention. Administrators may also choose to adopt stress reduction practices in order
to enhance the health and wellness of MHWs, thereby reducing job dissatisfaction and
preventing occupational burnout. Additional practices that may be used according to the

findings of this study include providing increased opportunities for training and professional development conferences, enhancing strategies for welcoming and action upon worker feedback and suggestions, or increasing accessibility and engagement between MHWs, supervisors, and administrators.

The study may be beneficial to the field of health care administration and mental health services to disseminate the study's findings through publication in health care literature and journals. In order, to promote a shared awareness among shareholders in the health care field, the factors that influence the ability of health care organizations to retain quality MHWs. HCAs should use the findings of this study to guide policy and procedural changes within their organizations. Upper administration of organizations should encourage administrators, particularly those who are involved in hiring, managing, and engaging with workers within the mental health field, to consider the potential implications of the current study's findings, conclusions, and recommendations.

Recommendations for Further Research

In considering the limitations of this study, I explored the potential for the duplication, adaptation, and enhancement of this study in order to gain further insight into strategies for retaining experienced workers in the mental health field.

Expansion of the Field of Study

First, future investigators interested in this topic may benefit from using a different population of participants. Such researchers could expand the field of study beyond the two north Fort Worth counties from which I selected the population of this particular study was selected. By expanding the field of study to include facilities outside

of Denton and Tarrant counties, the applicability of the study findings can also be farther

reaching. Researchers could also expand the cities of Denton and north Fort Worth. The

field of study through the inclusion of a wider array of mental health facilities, such as

state and government-operated facilities, in order to gain insight into worker retention

rates and strategies for ensuring job satisfaction across different types of mental health

facilities.

Alternative Methods

Future researchers may also choose to alter the qualitative methods used in order

to expand population size and study scope. The population size of this study was

intentionally small, in alignment with the method and design chosen for data collection

and analysis. Conducting semistructured interviews among a larger population of

participants would have required additional time and resources for the study. In

consideration of research goals and available resources, researchers considering future

studies may wish to conduct surveys among study participants, rather than in-person

interviews, in order to effectively and efficiently increase the population and sample size

of the study. Technological tools, such as electronic surveying platforms or video and

conferencing calling services, may also allow researchers to access study participants

from a broader geographical area.

Alternative Study Population

In order to gain insight into another perspective within the mental health care

field, future researchers could use MHWs as the primary population of the study.

Collecting data related to the experiences and perceptions of MHWs would provide

valuable insight into the mental health field, providing an alternative perspective to the findings that resulted from using HCAs as this study's population. Changing the population of the study would require adjustments to research instruments and participation criteria in order to align the research methods with the goals and research questions of the new study.

Reflections

Conducting this qualitative research project has provided me with a fresh perspective regarding the challenges associated with working in the mental health field. The two-factor theory proved an effective lens for considering the dichotomy existing within many MHWs, who are often intrinsically motivated to serve mental health patients but also feel dissatisfaction with their job as a result of challenges such as being overworked and facing occupational burnout. Engaging with HCAs has provided a unique insight into the various factors that must be taken into consideration when coordinating the administration of health care facilities and ensuring the success and well-being of both MHWs and patients. These same factors would be interesting to conduct a future study using MHWs as the primary study population, in order to compare the perceptions and experiences of MHWs with HCAs.

One lesson that I have learned over the course of this study was the impact of timing upon study results. In future studies, I will strive to be more intentional with the coordination of the research timeline to better align with convenient times or seasons for the study population. I collected the data for this study during the busiest season within the mental health field, during which time suicide and depression rates are high, resulting

in increased patient influx and heavier workloads for mental health employees. Thus, it was challenging to secure participants that were willing and able to participate in the study. In future studies, I will give greater consideration to the timeline that best suits the study and its participants, in addition to suiting myself and my institution.

Conclusion

In this section, I presented the findings of the current qualitative case study regarding the strategies used to retain experienced MHWs. The discussion included the ways in which the study findings may be applied in mental health organizations and the field of health care, as well as the implications for mental health stakeholders, including health care facilities and administrators, MHWs, and mental health patients. Next, I provided recommendations for action and for future research regarding the mental health field and strategies for decreasing employee turnover.

According to the participating HCAs, mental health organizations may employ strategies to decrease mental health worker turnover. The participating administrators provided insight into the various strategies that their organizations use in order to increase job satisfaction and retention of MHWs with more than 2 years of experience in the field.

The participants indicated that health care organizers should consider competitive compensation and benefits packages a priority in ensuring worker satisfaction and retention. Enabling workers to better manage work-related stress by avoiding overworking, providing sufficient training and professional development opportunities, and ensuring that workers feel both valued and heard will contribute positively to

establishing a positive work environment and decreasing worker turnover. While some amount of worker turnover rates is inevitable, the application of retention strategies discussed in the findings of this study may result in enhanced support for MHWs and increased retention rates within health care organizations, which would result in overall enhanced continued care for mental health patients in the community.

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Appendix A: Interview Protocol

1. **On the day of the interviews, I will arrive at least 30 minutes ahead of the first scheduled interview to do:**
   - Arrange the room temperature appropriately
   - Ensure that the Sony digital Voice Recorder works well in the location. My Samsung S9 will be a backup should the voice recorder stop functioning during the interview
   - Layout the refreshment drinks and snacks
   - Place a sign on the interview room door stating: MEETING IN PROGRESS - DO NOT DISTURB
   - Locate restroom facilities
   - Remind library personnel of interview activity
   - Have notebooks, writing utensils and paper available
   - Have copies of the Informed Consent available for review
   - Be prepared to start promptly on time

2. **Before starting the interview:**
   - Check the ID of the participant to confirm the identity
   - Begin Introduction Script
   - Follow with Interview Questions

Introduction

Good morning/afternoon. My name is Debbie Young, and I am a doctoral candidate with the Doctor of Business Administration program at Walden University. I am conducting a doctoral case study entitled *Strategies to Retain Mental Health Workers in Community Mental Health Clinics* to explore retention strategies HCAs use to retain their mental health workers with more than 2 years of experience. On the table are refreshments, you may take any of them if you would like to. Thank you for agreeing to participate in the interview. Before starting the interview, I want to reconfirm your permission to voice record this interview, could you please confirm that you continue to consent to this?

[Put the voice recorder on record]

For the benefit of this recording, the date, time, and participant number are [speak date, time, and participant number]. Will you please provide verbal consent to this recording and subsequent interpretations to allow me to capture your consent on record? Once the summarized representation of this interview has been created, you will be offered an opportunity to review the responses to ensure that your intent and meanings were accurately captured.

All information that you provide me will be kept confidential; your name, company, and geographic location will not be used in the study findings. I will be using your responses to examine themes and strategies used to retain your mental health workers with more than 2 years of experience. Please remember that your participation is voluntary and you have the right to stop this interview at any time. If at any time you would like to take a break, please let me know. And I will put the recorder on pause during that period. Do you have any questions before we begin? We will now start the interview.

Interview Questions

Ice Breaker: What is your role in your clinic? How long have you been with this clinic? How long have you worked in your current field?

1. What retention strategies do you use to retain your mental health workers with more than 2 years of experience?
2. What retention strategies have you found work best to prevent job dissatisfaction through understaffing of your mental health workers with more than 2 years of experience?
3. Based upon your organization's experience, how, if at all, do your retention strategies decrease job dissatisfaction by addressing the increased job demands on the mental health workers with more than 2 years of experience?
4. Based upon your organization's experience, how, if at all, do your retention strategies increase job satisfaction through ongoing training processes to motivate your mental health workers with more than 2 years of experience?
5. Based upon your organization's experience, how, if at all, do your retention strategies increase job satisfaction by including employee input, suggestions, needs, and demands regarding their jobs?
6. Based upon your organizations' experience, how, if at all, does your leadership staff support your current retention strategies to retain your mental health workers with more than 2 years of experience?
7. What additional information can you share about your retention strategies for decreasing high turnover rates with mental health workers with more than 2 years of experience?

3. **Concluding the Interview session**
   - Interview Closure Script
   - Give $10 Starbucks gift card for participating

Interview Closure and Thank You

I would like to thank you again for your time and your invaluable answers. I will be summarizing this information during the next 3 days; if you are willing, I would like to send you a copy via email to review to ensure that I have accurately captured the intent

of your answers based on my interpretation of the interviews and allow you to clarify any of the information that you provided today. This feedback is also voluntary; would you like me to send you the written data for you to review or are you comfortable with not reviewing them? Do you have any additional questions for me? Again, thank you for participating; I appreciate your time and thoughts. If you have any questions or additional comments, please do not hesitate to reach out to me as I am happy to resolve any needs you may have.

[Stop the voice recorder]

4. **After the interviewee has left the room**
    - Immediately make/complete any field notes
    - If any written notes, place the written documents into an envelope, marked with the code number of the participant and secure it in a locked briefcase
    - Place the voice recorder into a secure mode to avoid accidental erasure

    Check to assure the room is ready for the next participant/closeout for the day

Appendix B: Initial Contact

Initial Email to Human Resources for Authorized Signer: Attachment: Appendix C:

Recruitment Flyer

Good Morning/Afternoon,

My name is Debbie Young, and I am a doctoral candidate from Walden

University and pursuing my degree as a Doctor of Business Administration. I am

reaching out because I am interested in using your organization in my study. And I would

like to send out an official invitation to your organization to participate in my research

study about retention strategies used to maintain your mental health workers. Your

organization would be a good fit for this study because your organization hires and

maintain a staff of mental health workers. I will need an authorized signer to grant me

permission to interview personnel who are HCAs. Could you please provide me with the

email address of a leader in your organization that would be an authorized signer to allow

me to request permission to recruit a to HCAs managers to participate in this study?

Email Invitation to Authorized Signer/Potential Participant: Attachment: Informed

Consent & Appendix C: Recruitment Flyer

Good Morning/Afternoon,

My name is Debbie Young, and I am a doctoral candidate from Walden University and

pursuing my degree as a Doctor of Business Administration. I am reaching out because I

am interested in using your organization in my study. And I would like to send out an

official invitation to your organization to participate in my research study about retention

strategies used to maintain your mental health workers. Your organization would be a

good fit for this study because your organization hires and maintain a staff of mental health workers. I will need an authorized signer to grant me permission to interview personnel who are HCAs (See Attachments). Participation is purely voluntary and you and the participant reserve the right to withdraw from this study at any time. If you agree to allow me to interview one of your HCAs, please reply to this email with the words, "I consent" and provide the name and contact information for administrators you feel would have extensive knowledge on strategies retention strategies used to maintain your mental health workers.

Appendix C: Recruitment Flyer

Email Invitation to Authorized Signer Identified Participant

Research participants needed!

The aim of the research is to find out what you do to keep the mental health workers with more than 2 years of experience from leaving clinic.

Title of Study: Strategies to Retain Mental Health Workers in Community Mental Health Clinics

Purpose of this Study: The purpose of this study is research to find out what you do to keep the mental health workers with more than 2 years' experience from leaving the clinic.

Criteria for Participating: To participate in this study, you must have
- experience with hiring and retaining of mental health workers in your clinic,
- work in a mental health clinic in Denton and north Tarrant County, and
- been working at the current mental health clinic for more than 2 years.

Activities include:
- Confirm participation either by telephone or email to confirm if you may take part in the study (10 minutes),
- Reading and signing the informed consent form (about 20 minutes), (Attachment B: Informed Consent)
- Partake face-to-face voice recorded the interview (about 60 minutes) in a meeting room of your choice at either a public library or office space near you, and
- At a later stage check if I captured the information correctly (member checking) lasting about 30 minutes.

Participating is strictly voluntary, and you will receive a $10 Starbucks gift card as compensation for participating.

Interested? Any Questions?
Please email the researcher at debbie.young@waldenu.edu
Mobile: (254) 421-4134
I am looking forward to hearing from you!