

CDO Workforce Investment Board

State of the Workforce and Strategic Plan

Sector Roundtable: Healthcare

Supplemental Insights: Workforce Situation in Healthcare

Roundtable participants added the following insights regarding the Healthcare industry beyond those reported at the Summit.

- *Sectors within the sector:* The health care sector is a very diverse sector within itself. It includes nursing homes, hospitals/acute care, clinics, home health, residential care for the disabled, along with day services and employment services for the disabled, and personal assistance. In fact, the scope of the industry is expanding as more specialty services arise both due to an aging population and specialization with technology and disease management. The healthcare sector is still largely viewed as a “local service” rather than a growth industry in its own right. However, times are changing and healthcare growth opportunities are expanding significantly for the CDO region. Because of the diversity of the industry, it is hard to narrow down on what is common, but a few priorities emerged as discussed in the next section.
- *Wages:* Wages in Healthcare are determined primarily by third parties, Medicare and insurance intermediaries. In many cases, pay rates are questionably low for the level of effort and skill required by both direct care workers and Healthcare professionals.
- *Many healthcare jobs are not appreciated by the community:* Indeed, professional jobs such as therapists, doctors or diagnosticians are highly regarded, but many patient-care jobs, such as nursing, are undervalued. In the long run, the community attitude will have to change. One can point to the improved status of school teaching as an example of how community attitudes about certain occupations can change over time.
- *Many direct care jobs are physically demanding and are not looked upon as appealing work:* Further, the work is 24/7 and does not suit those with family responsibilities and other related commitments. In fact, one of the problems for recruiting is that new entrants to the field are often assigned the most distasteful shifts. Often, after six to twelve months, new recruits quit because their personal lives are compromised.
- *Opportunities for growth:* There are special targeted opportunities for growth in Healthcare services, such as various aging markets, ranging from independent residential settings to intense care for those with chronic ailments.
- *Positioned for growth:* The three-county CDO region seems well-positioned to capitalize on growth in several segments of the Healthcare marketplace. A good cross-section of services is available, from acute care to residential and day care. What appears to be missing is a community-wide recognition of the growth opportunities and community support to enable these industries to expand and prosper, including support for various types of education and training.

- *Funding the industry:* Healthcare funding is a complex situation involving a mix of private, public and non-profit sources. State rules sometimes get in the way of creating the right incentives for Healthcare organizations.
 - *Example:* Training dollars are made available from the state, but, in turn, employers benefiting from the training dollars are assessed a levy (a tax by the state).
- *Creating a good work environment:* There is a need to not only train workers but to support employers in providing a positive work environment, especially in the first six months after hire.
- *Selective funding:* TANF funding is available for certain individuals, but the big problem is pre-qualification for benefits. For example, in an effort to move an individual off welfare, training dollars are available, but only to those with dependents.

Priorities

Two top priorities were agreed upon by the Roundtable participants.

1. A certification program for direct care workers makes a lot of sense. Almost all segments within the sector have need for direct care workers who must know certain basics of patient care, including “bedside manner,” as well as employability skills.

Direct care workers need basic training in the following areas:

- Basic life skills / customer service skills
- Hands on training for patient care
- Improvement in their own life skills

Regarding the latter, it is very important to recognize that because of the low pay structure (approximately \$6 - \$7.50 per hour), those entering direct care occupations face their own personal challenges, such as managing a budget, keeping a car running, dealing with childcare, finding affordable housing, etc. Therefore, any direct care worker preparation program must cover support services for trainees. When trainees’ support needs are taken care of, they will do a better job serving and caring for others. This is often overlooked.

2. Job and career opportunities in Healthcare are not well-understood by those in high school or even to dislocated workers who are looking for alternative career tracks. Better information needs to be made available about the local Healthcare sector as a whole and about the career paths that are available for those that enter this sector.
 - a. Regarding this second priority, career tracks and advanced opportunities are poorly understood in the region. This might be attributable to the fact that most associate Healthcare with the nursing profession. School leavers and adults in job transition overlook the variety of occupations available within the health field, ranging, of course, from direct care, therapy and diagnostic occupations, to management, information systems, and marketing. Communication vehicles need to be created and improved to open awareness to the variety of job opportunities. This could be done, not only by quality literature, but through well-documented prototypical career ladders. More job shadowing, internships and career exploration opportunities would also

help. The “candy striper” volunteer system, both for school children and adults, provides an ideal setting to send positive messages to those who attracted to Healthcare about employment opportunities. Consequently, the group is excited about a variety of creative ways to open minds about future work in a growing industry.

This Roundtable, like most others, recognized that schools face limitations in offering career-orientation programs because of the attention they must pay to preparing young people for the New York State Regent’s Diploma. Educators, thus, must focus on academic courses and regular testing. However, efforts towards career preparation in the Healthcare fields link well with New York State’s focus on growing jobs through research and development in technology-related industries, and the Innovation Economy in general. Participants recognized the need for large numbers of mid-level workers to be well-prepared academically, but also balanced in their skills and attitudes related to the world of work.

Participants would like to see more opportunity for young people in the school setting to be exposed to industry opportunities in the local area, whether or not they pursue a college track. They would like to see a combination of good industry literature, career days, job shadowing, internships, which a number of Healthcare providers are already offering in their own ways. These could be coordinated with the help of the Workforce Investment Board so schools would be able to market a variety of opportunities for young people.

A general trend, observable even in academic-track high school settings, is young people seeking out real-world experiences to help them hone in on their choice for a career future. For those who are not immediately college bound and pursuing the local diploma or the individualized education program, industry contributions to their educational experience are even more important.

General marketing materials about the local Healthcare sector should be targeted broadly at high school students, adults in transition, parents, teachers and school counselors. Structured job shadowing and internships should build off the experience already gained from similar programs: the Job Corps and the Workforce Investment Board’s early endeavors to foster internship programs. Industry participants at the roundtable appear willing to contribute to the *compilation of an internship directory*. The direct care certification should be designed in such a way that it is applicable for both high school students and adult learners. It could be a modification of the BOCES Nurses Aide Certification.

Second Order Priorities

3. Industry participants recognized continuing need for nurses, x-ray technicians, physical therapists and the like. In fact, there are two main career tracks in great demand at the professional level: patient care professions, including nursing and therapy, and the diagnostic fields, such as radiation technologist/technician.
4. Roundtable participants acknowledged that an “Occupational Trends Course” available to teachers over summer has worked well. Approximately 20 to 30 teachers learn about occupational trends and local industry structure, through a well-organized program of classroom and site-based learning. Participants would like to see that Healthcare gets good coverage in this course and recommend that the industry come together to prepare materials for use in this course.