



# CHEO Career Coach Professional Development Workshop 2015

Building a Resilient Healthcare Workforce by  
Creating and Enhancing Workforce System –  
Community College Strategic Partnerships



March 7, 2015

# The Vision

“The H2P Consortium will dramatically improve health professions training via *career pathways* and the development of *core curriculum and core credentials* in collaboration with *workforce partners*.”

*“Individually we Innovate  
Collectively we Transform”*

## Kentucky



## Minnesota



## Ohio



## Texas



El Centro College

DALLAS COUNTY COMMUNITY COLLEGE DISTRICT

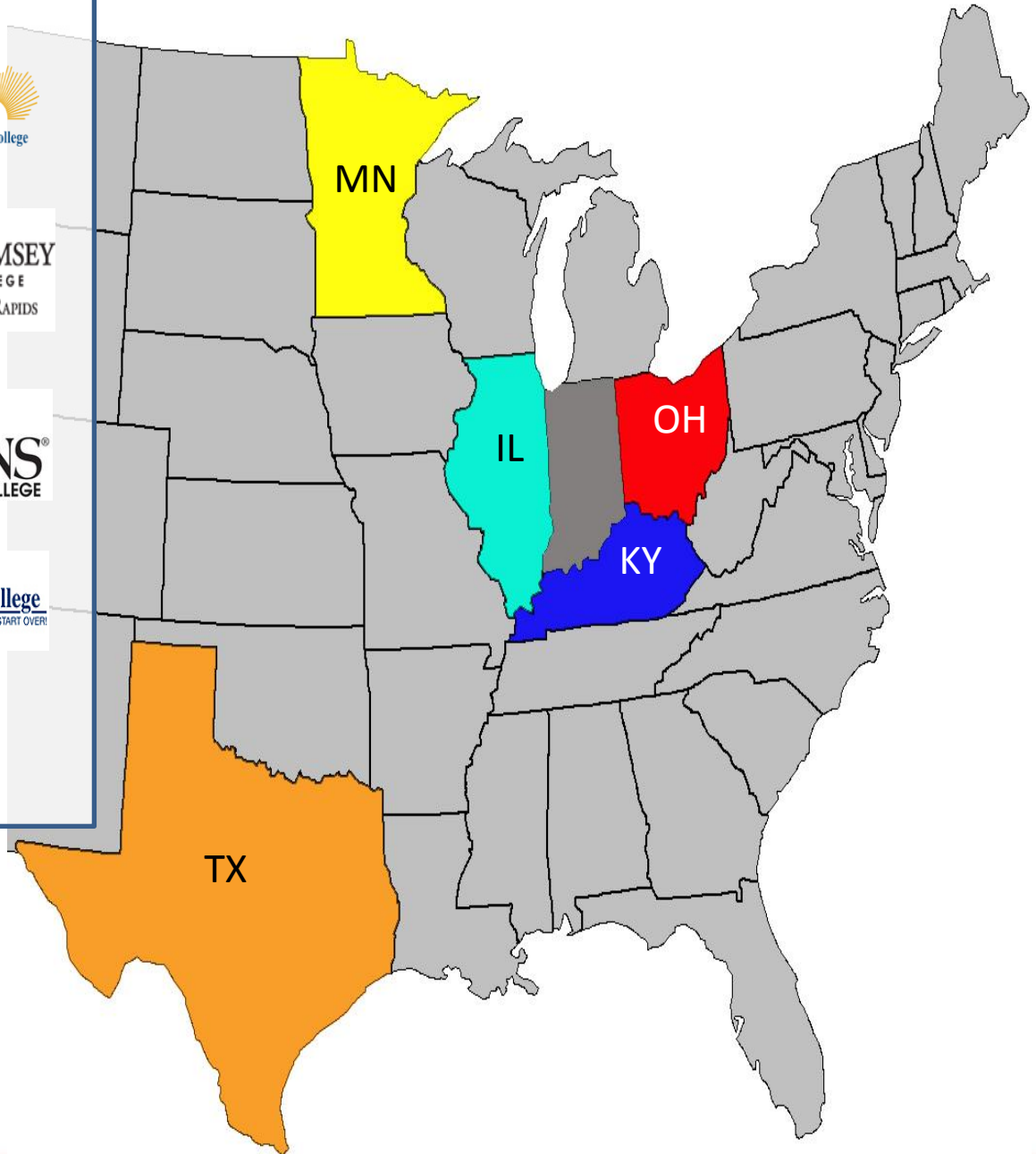


Texarkana College  
A GREAT PLACE TO START, OR START OVER!

## Illinois



health  
professions  
pathways














# National Imperatives & Trends: Healthcare Education and Employment

- Bureau of Labor Statistics estimates **unmet demand** of 300,000 associate degree graduates
- GNP for **healthcare spiraling** out of control
- **Healthcare demands for service** will continue to increase
- **Supply** of trained professionals will **not meet demand** at current pace
- Time to training is increasing: **degree creep**
- Community College **retention/graduation** statistics - < **25%**

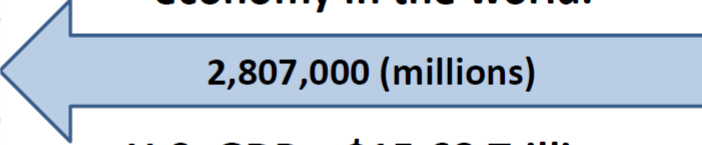
# Health Care is BIG

- Health care is a \$2.8 Trillion industry
- Health care is more than 50% labor

Rank	Country/Region	GDP (Millions of \$US)
	<i>World</i>	71,830,000
	 <i>European Union<sup>[n 4]</sup></i>	16,417,100
1	 United States	15,680,000
2	 China	8,227,000
3	 Japan	5,964,000
4	 Germany	3,401,000
5	 France	2,609,000
6	 United Kingdom	2,441,000
7	 Brazil	2,396,000
8	 Russia	2,053,000
9	 Italy	2,014,000
10	 India	1,825,000

### Healthcare is Important

**If the U.S. Healthcare industry was an independent country, it would be the 5<sup>th</sup> largest economy in the world.**



**2,807,000 (millions)**

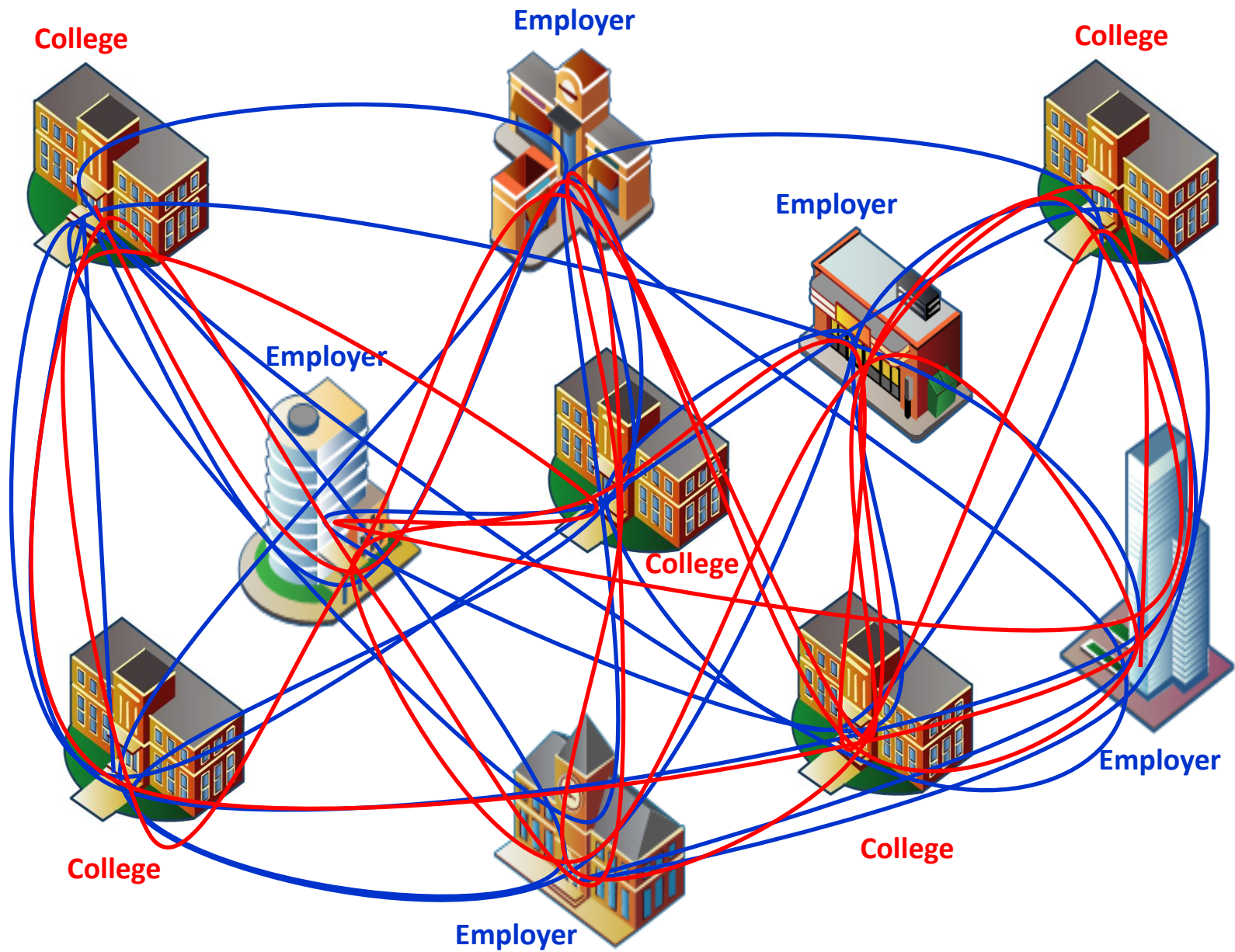
**U.S. GDP = \$15.68 Trillion**  
**Healthcare/GDP = 17.9%**  
**15.680 x 17.9% = 2.807**

**2.807/71.83 = 3.91% Global**

# IS THERE A SOLUTION??

- **General Agreement: Solution to the Dilemma can be found in Strategic Partnerships between:**

- ❖ **Workforce**
- ❖ **Employer**
- ❖ **Job Seeker**





# However: What Educators say about Employers...

**72%** of education leaders say newly educated workers are ready for work.

**42%** of employers think these same workers are ready for work.

*-Bersin Study reported in CLO Magazine 3.22.13*

- We invite them and ask what they need, but they don't talk. They just sit.
- They want things done immediately.
- They just don't understand:
  - What our accreditation requires
  - How few resources (ie: money) we have
  - Our internal processes

**-CAEL, 2014**



# However: What Employers say about Education...

**96%** of college and University chief academic officers were confident in their ability to prepare students for workforce success.

**11%** of business leaders strongly agree that today's graduates have the skills and competencies their businesses need.

*-Chronicle of Higher Education, 2.26.14*

- Takes way too long to get things finished
- They ask for our advice after the courses are already developed
- We tell them what we think, but we never know what they do with it

**-CAEL, 2014**

# AND JOB SEEKERS/NEWLY EMPLOYED ARE JUST CONFUSED!

- I did exactly what I was supposed to do  
- why don't I have a job?
- This job is not what I am prepared for.
- They have unrealistic expectations of me...



wah wah wah wah  
wah wah WAH  
WAH wah

wah wah WAH  
wah wah WAH  
Wah wah  
wah wah



# The 8 H2P Strategies - Building Blocks to Reform Healthcare Training

1. Prior Learning Assessment and Career Guidance →
2. Contextualized Education →
3. Competency-based Core Curriculum →
4. Industry Recognized Stackable Credentials →
5. Enhanced Retention Support →
6. Training programs for Incumbent Health Professions Workers →
7. Enhanced Data and Accountability Systems →
8. Galvanizing a National Movement to Improve Health Professions Training



# Improving Student Outcomes

Prior Learning Assessment and Career Guidance →

- ✓ *Virtual Career Network*
- ✓ *Work keys, Fit and Talent*
- ✓ *Pre-Assessment Tutoring*



Enhanced Retention Support →

- ✓ *Intrusive Advising by College and Employer personnel*



# H2P Colleges

## Implementing the Pathway Model

- **ACT Work Keys Assessments**, including National Career Readiness Certificate (NCRC). Nationally recognized, evidenced based portable credential.
  - **NCRC – over 3,000 credentials earned by participants with silver being predominant.**
- **Intrusive Academic Advising**, Preadmission, program of study and employment support and services.
  - **Over 6500** new students served since Spring 12
  - **Credit Completion Rate – 87%** as of 12.31.14
- **Prior Learning Assessments** completed with participants.
  - **426** students granted **1970.5 credit hours**, representing ~ **600 classes avoided**





# Improving Student Outcomes via Implementation of Pathway Model

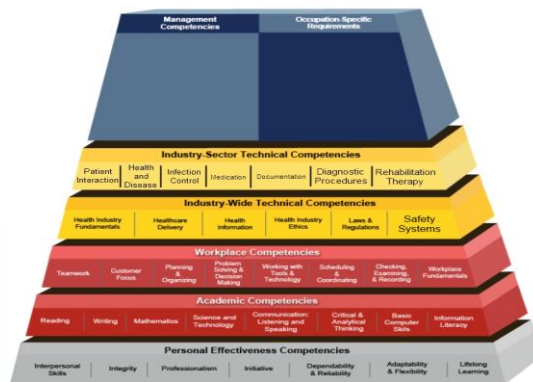
*Decreasing  
time to  
completion =  
increased  
credential  
attainment*

Contextualized Education →

- ✓ Integration of Core Content
- ✓ Employer validated
- ✓ Decrease time, increase retention



Competency Based Core Curriculum →



- ✓ Assures basic knowledge
- ✓ Reduces Repetition/Costs
- ✓ Employer validated
- ✓ Exposure to Healthcare Team



# Enhancing Employer/WIB Relationships

## Industry Recognized Stackable Credentials →

- ✓ *Community College/Community Collaboration*
- ✓ *Creating Jobs that meet industry needs*
- ✓ *Building skill sets through credentials*



## Training programs for Incumbent Health Professions Workers →

- ✓ *School at Work*
- ✓ *Grow Your Own*



# Role of Workforce Investment Boards (WIB's)

400 Employers evaluated which workforce issues are an “important” strategic challenge for them:

**Need to build talent & leadership: 94%**

**Missing skills for promotion: 87%**

**Hard to find well-qualified applicants: 85%**

*College for America - 2014*

- All 9 Community Colleges are required to engage with their local and State WIB's.
- Assisting with identifying Target Populations: TAA Workers, Displaced Workers and Veterans
- Provide guidance and input on design of education pathways
- Source for Labor Market Information and Trends relevant to planning education pathways to employment
- Create opportunities to convene key industry and community stakeholders to improve pathways for employment

# Best Practices: WIB/H2P Collaboration

***The majority of future employment opportunities will require the kind of degrees and training most commonly offered by community colleges.***

*- Georgetown University's Center on Education and the Workforce*

## **Anoka-Ramsey Community College – Greater Minneapolis**

- **Contractual relationship between WIB and College for on-site WIB personnel to provide intake and assessments for H2P participants.**

## **Cincinnati State Technical and Community College**

- **Launched Pathway to Employment Center and co-located with WIB to provide direct integration of services, funded with combination of grant, College, city and county funds.**

## **Owens Community College – Toledo, OH**

- **Lucas County WIB “The Source” provides ACT-National Career Readiness Certificate (NCRC), College certificates and training on-site at the WIB.**

## **Pine Technical College - Pine, MN**

- **Strong relationship with WIB**
- **Employment and Training Center on-site providing direct TANF services.**

# Best Practices: Employer Partnerships

## Cincinnati State Technical and Community College

- Health Careers Collaborative of Greater Cincinnati - serves to create **incumbent worker training, stackable credentials** and inform regional **training needs**.

## El Centro Community College – Dallas TX

- **“Grow Your Own”** incumbent worker training programs with several regional healthcare systems

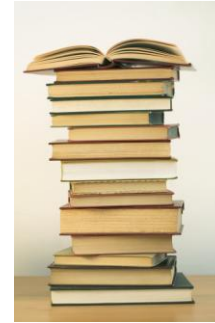
## Jefferson Community and Technical College - Louisville KY

- **“Grow Your Own”** incumbent worker training programs with regional health care systems
- **Stackable credentials** developed based on **employer needs**.



# The H2P Health Career Training Transformation

**From:** Education Silos based upon Courses and Curriculum →



**To:** Meaningful Programs of Study identified and validated by the Workforce Community → Leading to high demand Health Care Jobs



# Partnerships That Work : Profiles

- **Greater Cincinnati Health Careers Collaborative**
- **Greater Louisville Health Careers Collaborative**
- **CHE/Trinity Health**

# Health Careers Collaborative of Greater Cincinnati

## Established in 2003

- Increase awareness/access to healthcare careers
- Increase diversity of health care workforce in Greater Cincinnati
- Identify and implement employer practice system changes
- Develop the talent supply chain

## 2010 – 2013 DOL ARRA grant - sustained

- Employer-based job coaches
- HCC Cohort advisors at Cincinnati State
- School at Work<sup>®</sup>/CareerCare<sup>®</sup>
- Sustainability



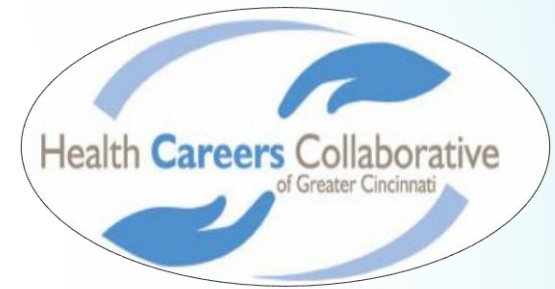


## HCC Mission Statement:

The vision of the Health Careers Collaborative is to build a *dynamic healthcare career pathway* reflective of employer workforce needs and responsive to individual participant needs.

Recognizing that career advancement can often be stymied by various barriers, the HCC partners work together to create *innovative policies, supportive services and training and education* designed to enhance student success.

# Guiding Principles



1



**Focus on job creation & educational advancement for low income adults that meet employer needs**

2



**Build health care career pathways responsive to the region's future needs**

3



**Improve diversity of healthcare workforce in Greater Cincinnati**

# Employer –Led Industry Responsive



- **Employers Chair of the Executive Committee**
- **Employers, Staff and Greater Cincinnati Health Council define current workforce needs**
- **Partners sign MOU to signify commitment**
- **Collaboration, not competition in training and hiring**
- **Policy and process accommodations**  
(tuition, assessments, academic readiness)

# Why Does It Matter?

## DOL Estimates Average Turnover Cost 33% of Employee Wages

### SAW® Participant Profile:

- Average Hourly Salary: \$14.20
- Annual Salary/Wage: \$27,264
- Cost of Turnover: \$8,997

**\$44,985 per year**

**SAW® Treatment Turnover Rate: 5.56% OR \$17,994**

**SAW® Control Turnover Rate: 18.995% OR \$ 62,979 (scaled for comparison)**

### Greater Cincinnati Health Council Vacancy/Turnover Data

- 2012 GCHC for Similar Job Codes: 12.7%
- SAW® Annual Turnover Rate **5.56%** vs. 18.99%

# Return on Investment

## Initial Return-on-Investment (ROI) Research

Associate Degree Cohort Programs ROI projected at 11.9%

- Cost savings due to promotion of employees to in-demand occupations

Certificate Training Programs demonstrated lower turnover/reduced recruitment costs for the employer

- Net benefit for employer per HCC participant was approximately \$4,869

*-The New Growth Group/UC Health (2011)*

# Performance Counseling and Evaluation Scores (HCC Cohorts)

	HCC Treatment (n=56)	HCC Control (n=3,676)
<b>Overall Evaluation Score Average</b>	<b>3.96</b>	<b>3.82</b>
<b>Average Evaluation Score With Performance Counseling</b>	<b>3.83</b>	<b>3.69</b>
<b>Average Without Evaluation Score Performance Counseling</b>	<b>4.02</b>	<b>3.92</b>
<b>Number with Performance Counseling</b>	<b>20 (36%)</b>	<b>1,181 (32%)</b>
<b>Number without Performance Counseling</b>	<b>36 (64%)</b>	<b>2,495 (68%)</b>

**Higher overall evaluation scores, higher evaluation scores for those with and without performance counseling, nearly equal rates of performance counseling**



# Why Incumbent Training Programs Matter

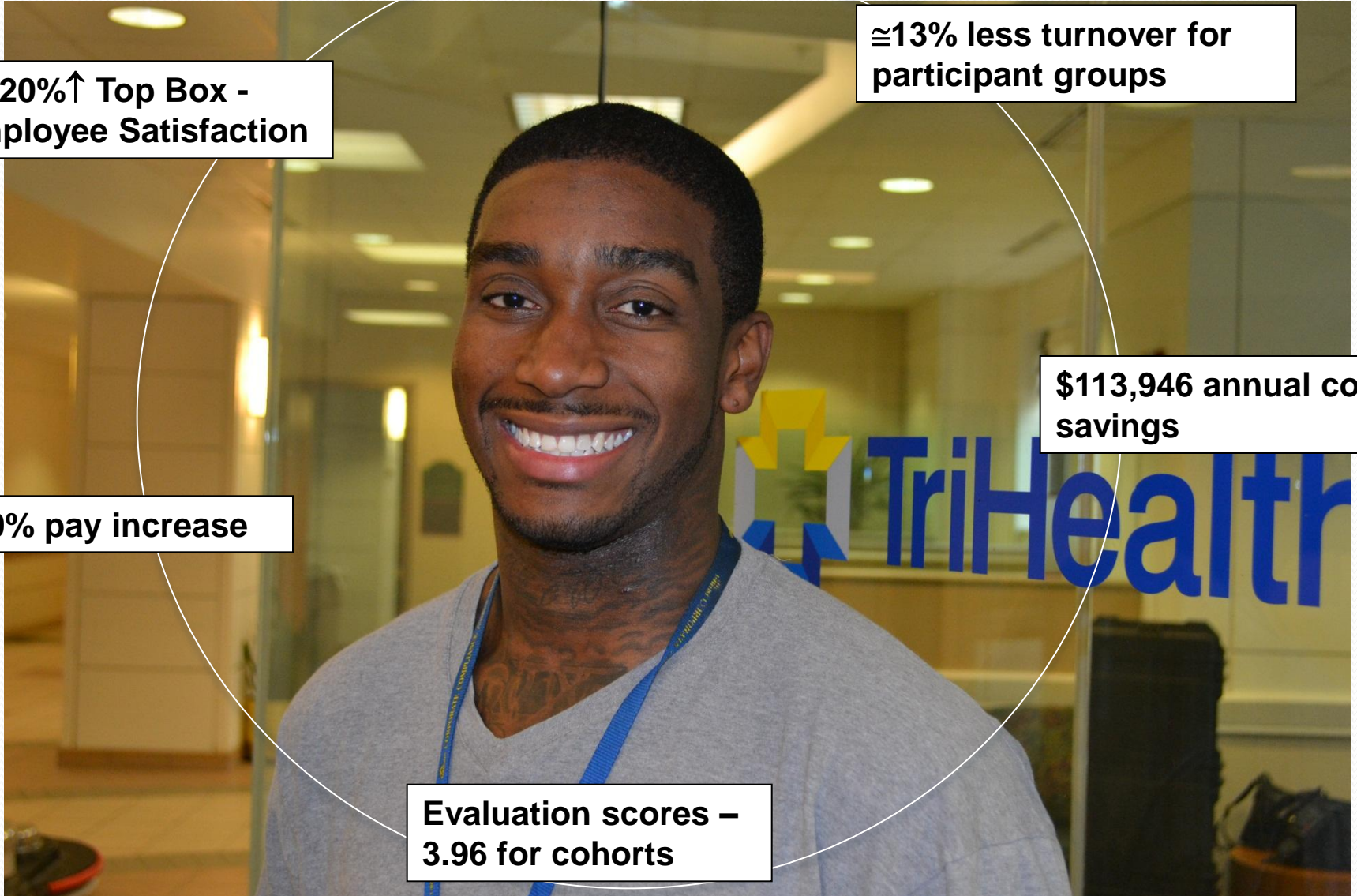
10-20%↑ Top Box -  
Employee Satisfaction

≈13% less turnover for  
participant groups

\$113,946 annual cost  
savings

50% pay increase

Evaluation scores –  
3.96 for cohorts





# School at Work Programs Making a Difference for Employees



# Norton Healthcare – Louisville, KY

Not-for-profit hospitals and health care system

- 12,500+ employees
- 3<sup>rd</sup> largest private employer
- ~50% market share
- Patient Revenue: \$1.8 billion
- Nearly 140 locations
- 5 hospitals (1,327 beds)
- 12 Immediate Care Centers
- Approximately 600 Medical Providers
- Over 2,300 Physicians on medical staff





# Entry Level Workforce Certificates



## Basic Health Care Foundations

The first level of the new Health Care Foundations stackable certificate program will be piloted in the spring. Students can complete this certificate by taking four courses:

- NSG 299 (for HST 101) – Health Care Core Curriculum: Basic Skills I (3)
- RCP 299 (for HST 102) – Health Care Core Curriculum: Healthcare Delivery & Management (3)
- MAI 299 (for HST 103) – Health Care Core Curriculum: Healthcare Communications (2)
- AHS 115 or 120 – Medical Terminology (1-3)

## Intermediate Health Care Foundations

The second Health Care Foundations Certificate (Intermediate) is to be added in the summer and/or fall.

- HST 121 - Health Care Core Curriculum: Pharmacology (2)
- HST 122 - Health Care Core Curriculum: Pathophysiology (3) (A&P is prerequisite)
- HST 123 - Health Care Core Curriculum: Basic Skills II (2)

★ *These two certificates will be applicable toward the Health Science Technology Degree, but can also help better prepare students for other health career programs.*

## Grow Your Own- Workforce Advancements Favor Front Line Workers

Group	Degree	2-year Graduates				Total	
		Advancements		No Advancement			
		#	#	#	%	#	%
Frontline	Associate	37	71.2%	15	28.8%	52	12.4%
	Bachelor	182	83.1%	37	16.9%	219	52.0%
	Certificate/Diploma	6	27.3%	16	72.7%	22	5.2%
<b>Frontline Total</b>		<b>225</b>	<b>76.8%</b>	<b>68</b>	<b>23.2%</b>	<b>293</b>	<b>69.6%</b>
Above Frontline	Bachelor <sup>2</sup>	10	13.9%	62	86.1%	72	17.1%
	Doctorate	1	16.7%	5	83.3%	6	1.4%
	Master	11	22.0%	39	78.0%	50	11.9%
<b>Above Frontline Total</b>		<b>22</b>	<b>17.2%</b>	<b>106</b>	<b>82.8%</b>	<b>128</b>	<b>30.4%</b>
<b>Grand Total</b>		<b>247</b>	<b>58.7%</b>	<b>174</b>	<b>41.3%</b>	<b>421</b>	<b>100%</b>

**76.8%**



NORTON HEALTHCARE IS A FIRM BELIEVER IN GROW YOUR OWN!





# Retention = Positive Financial Impact

## Norton Scholar RN Retention (3-year)

Term Category	2010		2011		2012		2013 YTD		Total #	Total %
	#	%	#	%	#	%	#	%		
< 1 yr	8	5.3%	5	4.5%	3	2.8%	0	0.0%	16	3.6%
1-2 yrs	9	6.0%	5	4.5%	3	2.8%	0	0.0%	15	3.4%
2-3 yrs	8	5.3%	2	1.8%	0	0.0%	0	0.0%	10	2.3%
3-4 yrs	2	1.3%	0	0.0%	0	0.0%	0	0.0%	2	.4%
Turnover	27 (18.0%)		12 (10.7%)		4 (3.7%)		0 (100%)		43	(9.7%)
Current	123	82.0%	100	89.3%	104	96.3%	72	100%	399	90.3%
Grand Total	150	100%	112	100%	108	100%	72	100%	442	100%

## Non-Scholar Experienced RN Retention (3-year)

Term Category	2010		2011		2012		2013		Total #	Total %
	#	%	#	%	#	%	#	%		
< 1 yr	28	31.1%	39	30.0%	37	28.7%	18	20.5%	122	27.9%
1-2 yrs	11	12.2%	15	11.5%	12	9.3%	0	0.0%	38	8.7%
2-3 yrs	7	7.8%	4	3.1%	0	0.0%	0	0.0%	11	2.5%
3-4 yrs	1	1.1%	0	0.0%	0	0.0%	0	0.0%	1	.3%
Turnover	47 (52.2%)		58 (44.6%)		49 (38.0%)		18 (20.5%)		172	(39.4%)
Current	43	47.8%	72	55.4%	80	62.0%	70	79.5%	265	60.6%
Grand Total	90	100%	130	100%	129	100%	88	100%	437	100%



# CHE Trinity Health – Coast to Coast

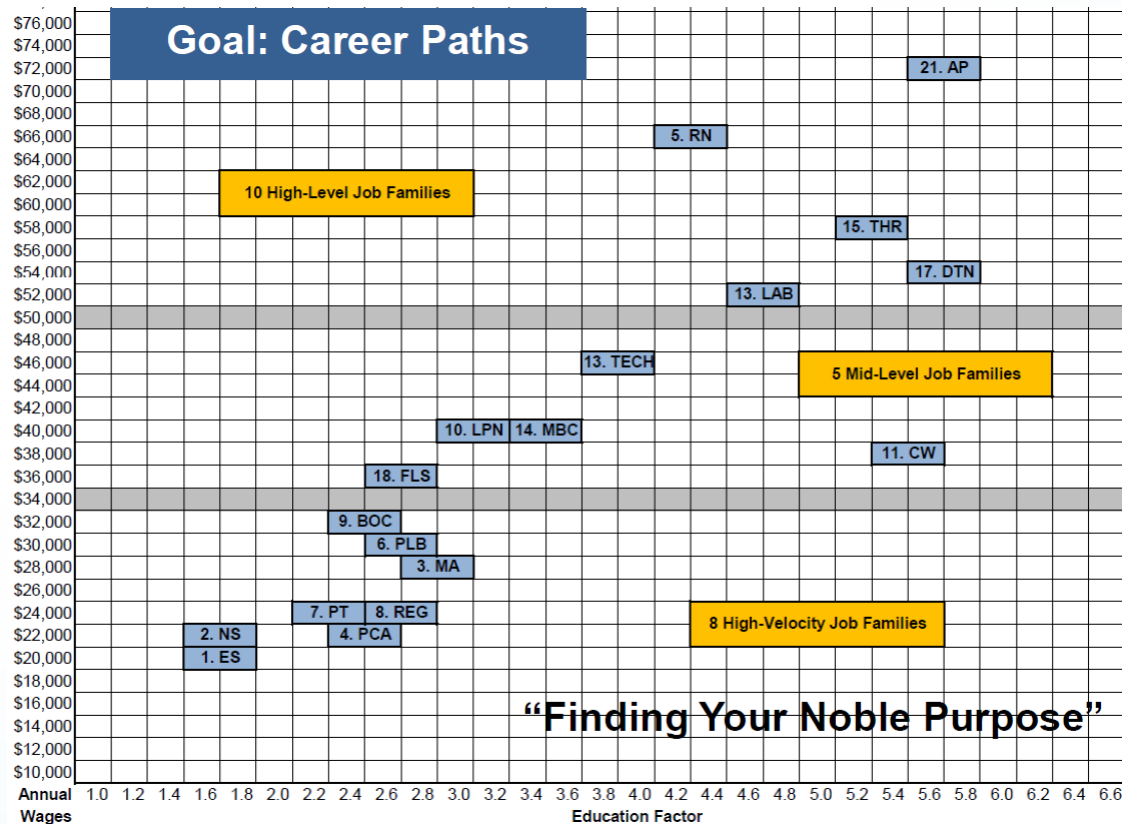
- 20 States, 86 Hospitals
- \$13.3 billion revenue, 87,000 employees
- 109 Senior care facilities, 2.8 million home care visits
- 4<sup>th</sup> Largest system



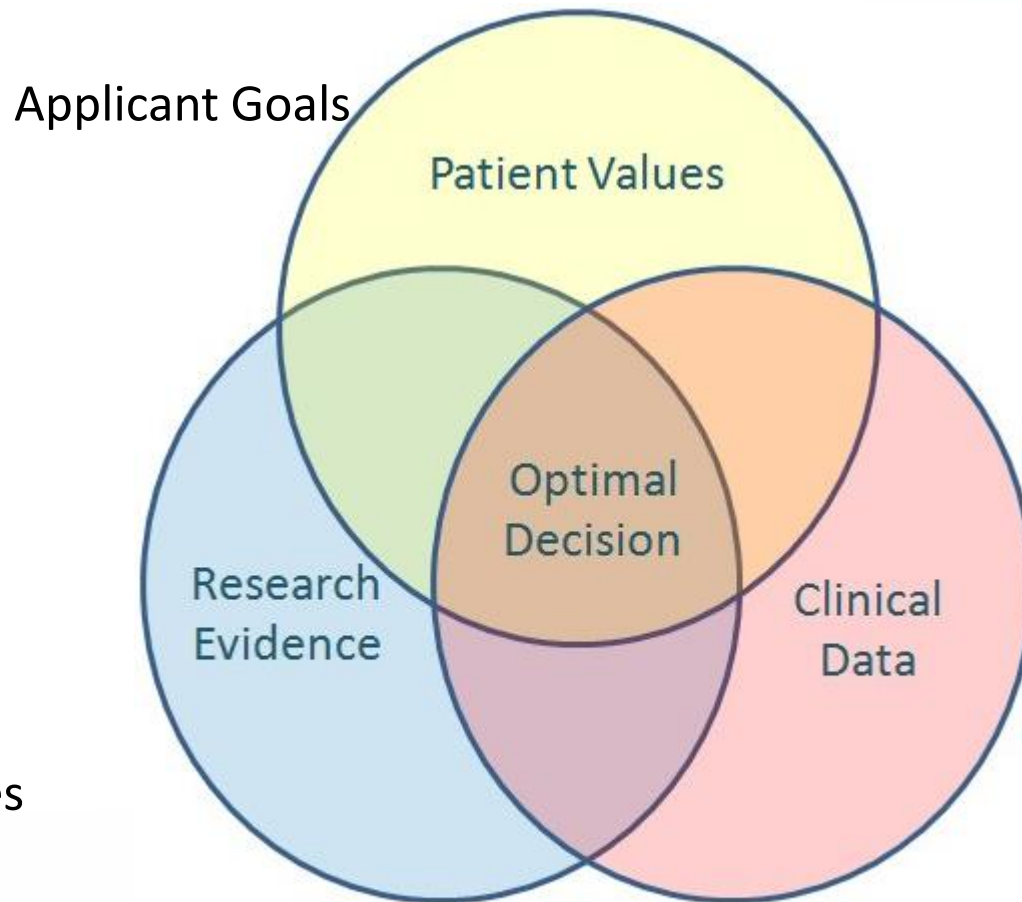


# We have mapped jobs and career paths

- 23 Job families frame career opportunities
- Career coaching provides support
- Everyone needs to find their “noble purpose” at work



# Evidence-Based Selection and Evidence-Based Medicine



**Evidence Based Medicine:** when best evidence from research meets clinical information and patient values, optimal decisions are possible.

# Collective Impact

[Collective Impact Video](#)

# Strategic Partner Assessment

- Strategic Partnership Assessment – Level of Importance
- Strategic Partnership Assessment – Current State
- Partnership Activities
- Strategic Partnership Assessment-Summary/Observations

For more information:

National Association of Workforce Boards

[www.NAWB.org](http://www.NAWB.org)

Greater Cincinnati Health Careers Collaborative

[www.healthcareerscollaborative.com](http://www.healthcareerscollaborative.com)

Health Professions Pathways Consortium

[www.nn2.org](http://www.nn2.org)