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Health Care Workforce Initiative A Strategy for Change

Health care employers operate in every workforce region of the Commonwealth. It is essential to understand the environmental factors that impact nursing homes and hospitals to determine what factors the Association could systematically affect through strategic planning and advocacy.

The health care industry is highly focused on improving the quality of patient care. They are also concerned with an increase in industry regulations, smaller operating margins, a growing aging population needing health care services, and a shrinking labor market that requires significant investment in basic skill development and English-language competency in addition to technical training.

Coordinating connections among workforce development and health care employers can increase statewide advocacy with the Legislature and State leadership on funding decisions and policy development. It would also provide opportunity to broaden the current discussions around health care financing and regulations to incorporate perspective on their impact on workforce development.

The health care industry is already funding some workforce development, whether through tuition assistance, loan forgiveness, internship programs, or on-site training. Current practice of providing public funding through the competitive grant process recognizes neither the size of the industry nor the extent of the pipeline problem. Some funds are available only to employers who make unemployment insurance deposits with the State, and not to those who are self-insured for risk. Other funds are available only to public institutions, or to train incumbent workers but cannot be used for recruiting new employees.

Support from all possible sources must be coordinated with a long-term view and a sustainability plan. The Association is positioned to serve as a catalyst to lead to a more strategic approach to respond to these challenges. We will identify programs and potential funding in both the public and private sectors that, if coordinated, could enhance the value of work being done by health care institutions and help address industry infrastructure needs. In addition, this research will help determine ways to include smaller health care employers operating with limited administrative staff, and those serving smaller, less urban communities.

Background

The Massachusetts health care industry is the state's largest employer, representing 400,000 jobs, 14% of all employment. (*Board of Higher Education Nursing Initiative, Nursing Education/Practice Survey*). During the period of 2000 to 2004, health care was the primary generator of jobs and the Department of Workforce Development projects an expansion of 12,000 new nursing positions by 2010 (*The Nursing Faculty Shortage: A Public Health Crisis*). At the same time there are more than 16,200 job vacancies in the health care industry as of June 2005, representing a vacancy rate of 3.8%, the largest number of openings of the state's 20 major industries an increase of 17.5% from the previous year. (*Department of Workforce Development Job Vacancy Survey 2nd Quarter 2005*)

Although this growth will provide many new employment opportunities, it also creates the significant challenge of quickly developing a skilled workforce to fill these jobs. Most of the high-demand jobs require two to four years of post-secondary education, with a strong foundation in math and science before entering post-secondary training. "The current nursing shortage impacts all levels of health care in every region of the state from the major teaching hospitals in Boston to the rural and community hospitals in the Berkshires and encompasses long-term care facilities and health care agencies." (*Nursing Survey, Executive Summary*) A growing U.S. and Massachusetts elderly population combined with the decrease in nursing school graduates pressure the industry's resources. According to the Department of Workforce Development most recent Job Vacancy Survey, for the first time the percentage of job postings that asked for an associate's degree or higher surpassed the percentage of positions requiring high school or vocation training. Of the 72,813 positions posted during the 2nd quarter of 2005, 42 percent required an associate's degree or higher and 39 percent required high school and vocational training.

Each of the 16 workforce investment areas Workforce Board (WIB) members of the Massachusetts Workforce Board Association (MWBA) has been directly involved in efforts to address this issue, including through participation with Commonwealth Corporation's *Extended Care Career Ladder Initiative* (ECCLI), the *Nursing Career Ladder Initiative* (NUCLI) and the BEST/BayState Works Initiatives. Based on regional labor market research, WIBs have worked in partnership with area hospitals, nursing homes, community health centers, home health programs and community colleges to develop recruitment and retention programs that would bring 1,000 new nurses into the pipeline by advancing nurse training programs through fast-track training, career coaching, support services, and targeted outreach to youth and older workers. Through the three-year project period, with \$2.9M in funding from the US Department of Labor and \$8.9M from partner organizations, the number of workers assisted through NUCLI has exceeded 1,700.

ECCLI has focused its work on increasing the education and skills of incumbent workers in long term care, while creating an environment where the workers receive career coaching and soft skills support to enhance the quality of care provided to residents. Local WIBs have convened representatives of area providers and assisted in development of partnerships to create career ladder training programs designed to reduce high turnover and absenteeism, reduce reliance on outside agency staff, and increase staff morale. Programs placed emphasis on English language literacy, effective communication, remedial education, case management, and opportunities for career advancement. Since 2000, more than 175 long term care facilities and home health programs have participated in 75 ECCLI projects operating in all 16 WIB regions across the Commonwealth.

In its 2000 report: *New Skills for a New Economy: Adult Basic Education's Key Role in Sustaining Economic Growth and Expanding Opportunity*, MassINC. revealed that nearly one third of Massachusetts' workforce lacked the necessary literacy, education, and critical thinking skills for promotion beyond entry-level positions. Businesses were already experiencing lower productivity and higher turnover in their workforce; the problem would only worsen without a coordinated response. Through 4 rounds of funding under the Building Essential Skills through Training (BEST) and BayState Works Initiatives, the Commonwealth mobilized to enhance workers' skills by offering basic education and sector-specific skills training. Employers developed partnerships with workforce investment boards, unions, community-based organizations, and education and training providers to create industry-targeted training programs. More than 3,000 entry-level and newly hired workers have built on their essential skills and education through 13 BEST and BEST Older Youth projects led by Workforce Investment Boards. Eighteen new projects currently focus on providing remediation and career development opportunities for older youth, adults, and older workers in industries ranging from health care, manufacturing, human services, hospitality, and culinary arts to finance and banking, aerospace, commercial drivers, automotive and other trades, education, information technology, and nursing.

These initiatives along with the activities of the 41 health care organizations, which are members of Massachusetts WIBs, represent significant time and investment in addressing the Commonwealth's health care workforce shortage. In total, the WIB members represent institutions that employ more than 79,000 people in a range of health care occupations.

The Massachusetts Workforce Board Association will seek to: **maximize resources, shape future policy and improve practice regarding health care workforce development through a multi faceted Healthcare Workforce Initiative** that includes the following:

I. Conduct an inventory of the Association's membership WIB and industry led health care work force development programs/strategies and evaluations already completed. This survey will identify key issues and problem areas, as well as applications and programs that can increase labor market training opportunities, documented by region.

II. Develop a statewide approach to advocate for system wide consistency addressing health care labor market issues. The Association will seek to begin organizing the health care industry as a consumer of educational services, and build a constituency for change. The Association will report on applications and programs that have effectively increased labor market-training opportunities.

III. Presentation of key findings to Health Care Roundtable. The Workforce Board Association will convene a Health Care Strategy Roundtable in April 2006 inviting key decision-makers from industry, public agencies, labor organizations, higher education, and the legislature, and other stakeholders who will help identify one major health care workforce development issue around which to build statewide advocacy to effect system-wide change, and a strategy to achieve it. The Roundtable participants will help develop a Health Care Workforce White Paper for presentation to key policy makers and candidates for Governor, in an effort to document and encourage the prioritization of an effective response to the health care workforce crisis and the

involvement of a broad base of private sector industry leaders, labor organizations and public officials.

WIBs will assist in development of the multi-level strategy for their region, convening the regional decision-makers and stakeholders who can help move the issue to the forefront and build regional advocacy supporting the strategy for system-wide change.

IV. Based on Phases I – III, Development of coordinated strategies that can be implemented by the state and materials that can be easily customized by WIBs across the state. For example:

- Strategic integration of existing public workforce development funds to address the continuum of education and skills training needs
- Common recruitment and advertising for position vacancies including the creation of a web based health care jobs database
- Develop curriculum on health careers for middle and high school students that includes a video and hands-on experience
- Organize internships for high school students
- Develop an academic enhancement model in math and science at the workplace for students in the workplace who are interested in pursuing higher education in health care
- Design career materials and workshops for career changers at the career centers
- Organize career coaching models and materials for incumbent workers in health care settings
- Review regulations that present barriers to education and training
- Develop sustainability beyond grant funding