



SOUTHWESTERN COMMISSION



# WNC Allied Health Workers Skill Partnership



## BACKGROUND AND PROGRESS REPORT



# Allied Healthcare Workers Skills Partnership



- Initiative is part of a statewide initiative that focuses on the allied healthcare workers
- Collaboration between Workforce Development Boards and AdvantageWest
- Funded by the Governor's Commission on Workforce Development
- Covers 26 counties and 5 Workforce Development Boards

# WNC SNAPSHOT – AGING POPULATION



- Western North Carolina's population is aging faster than the rest of the state.
- 36% of the population is over age 50
- NC's highest percentages of elderly individuals are concentrated in 5 of WNC's counties
- By 2010 35.7% of our population in WNC will be over 55
- Data for the 23 counties of AW predicts that by 2030 the largest segment of the population will be over 60

# THE AGING HEALTH WORKFORCE



- The allied health workforce is rapidly aging
- Thousands of these professionals will enter retirement in the next decade
- We could have huge gaps in the healthcare workforce
- The NC Institute of Medicine recommends increasing the supply of non-physicians and clinicians as a feasibility strategy to meet shortages

# WNC SHORTAGE OF HEALTH PROVIDERS



- 5 of 16 counties currently designated as Health Professional Shortage Areas
- Shortage of dentists is acute, 29% below the national average and has created widespread poor oral health
- Allied health vacancy rates in the Northwestern counties outstripped those in Raleigh, Greensboro, and Charlotte regions
- 15% vacancy rate for physical therapists and 8.5% for physical therapist assistants within the WNC Health Network's 16 hospitals

# Partnership Conducts Gap Analysis



- **Partnership determined the need for a Gap Analysis to ascertain:**
  1. The present and projected employment levels of allied health occupations in the 26-county region
  2. The current educational training resources available
  3. What were the High Need Occupations in the region
  4. Can our current resources provide the needed workers

# Data Sources



- **Employment Security Commission**
- **SHEP's Center at UNC**
- **NC Hospital Association**
- **WNC Health Network**
- **WNC Regional Universities**
- **Private Colleges**
- **Community Colleges**

# What We Learned



- Data lacks consistency, comprehensiveness, definitions vary, and accuracy
  - Examples:
    1. ESC is by far the most comprehensive but relies solely on employer input which can be very erratic
    2. SHEPS only tracks allied health fields that require a license
- We had to “merge” all data to make the best *professional guess* as to what occupations represent the highest need, meaning shortfall between actual employment, employment openings, and demand (PP 1-3)

# WHAT WE LEARNED CONTD.



- Seven occupational fields were identified (Page 13) as **HIGH NEED OCCUPATIONS**
  - Dental Assistant
  - Medical Lab Technician
  - Respiratory Care
  - Speech Language Pathologist
  - Physical Therapist
  - Medical Assistant
  - Physical Therapy Assistant

# EDUCATIONAL ANALYSIS



- **Data was collected & compiled regarding: (PP 4-9)**
  1. Number of students & expected graduates over the next 5 yrs.
  2. Degree programs available in the seven fields
  3. Number of part-time and full-time instructors
- **Our next step was to correlate the expected number of graduates in the “pipeline” with the expected job openings in the field (PP 10-11)**

# IN SUMMARY



- It appears, on paper, that the educational training programs currently offered in Western North Carolina **can meet the need** in terms of graduating sufficient numbers of students who will be trained and qualified in these 7 fields of employment in the Allied Healthcare field.
- What cannot be determined is how many of these students will remain in these fields, how many will actually graduate, and how many will remain in the region after graduation.

# Regional Allied Health Forums



- **Conducted two Forums:**
  - Lenoir – August 20, 2008
  - Cullowhee – August 21, 2008
  - Over 85 people attended
- **Presented Gap Analysis for accuracy**
- **Conducted Panel Discussion from both healthcare providers and educators viewpoints**
- **Discussed major issues and solutions**

# Major Concerns Identified in Forums



1. Need for Academic Health Center in WNC! (AW)
2. Impact of raising credential standards in the field
3. The need for more “generalist” that can do “special things” in most rural areas
4. The area of Home Health has a serious shortfall in training and workers
5. Health industry, universities and community colleges need to work closer with public schools to educate students about allied health careers
6. There needs to be a Pre-approval process, through background checks for criminal activity, BEFORE entering educational program - System Wide Issue!
7. “Pockets of need” exist in most rural areas both educationally and health services (AW)
8. There is a MAJOR marketing and public relations need in this field
9. There is a negative impact from the lack of clinical sites and certified staff to teach (AW)
10. Retention in the industry in all fields, particularly Certified Nurses Assistants (CNA’s)
11. Need for a change in the funding formula for CC and more funding in this field for equipment, salaries, and teaching space because this field is more expensive to provide (AW)
12. There is a major shortage of instructors in this field
13. Students attempting to enter the field have a serious lack of hands-on clinical preparation
14. Testing requirements for Nurses Aid make it difficult for public schools (AW)
15. There is a major need for Simulation Labs and new training methodology
16. Standardized Criteria should be established for “licensure” in NC (AW)

# Possible Solutions



Items #1, 7, 9, 11,14 and 16 were recommended to be assigned to an *Ad-hoc Advisory Committee* that would work with AdvantageWest because they all require policy change or state budget funding.

AdvantageWest has agreed to facilitate the Committee and request that AW leadership work with other statewide groups to ensure that these issues are placed on the table statewide

Advisory Committee recommended that AW work with the Charlotte Regional Partnership in these endeavors

# Possible Solutions



- The remaining issues should be addressed by forming a “Regional Consortium of Allied Health Care Providers and Educators”
- This Consortium should:
  - Determine how current programs could be adapted to meet the needs in the Allied Healthcare Field including:
    - ✦ Career ladder in the fields rather than increasing demands on the entry level
    - ✦ Look at Articulation Agreements for technical degrees between High Schools, Community Colleges and Universities in this field
    - ✦ Adding opportunities for continuing education in the field in most rural areas
    - ✦ Different teaching techniques
    - ✦ Paid counselors in the high school
    - ✦ Regional Training Facilities for on-line training
    - ✦ Develop new health occupation certification program, like CAN, for home health workers
    - ✦ Early assessment by moving placement into early high school years and implement Work Keys

# Possible Solutions Contd.



- **This Consortium should continued:**
  - Reimbursement for services from insurance companies to handle salaries
  - Look at new marketing tools such as podcasts, text messages, etc. to attract new students
  - Develop standardized Affiliation Agreement between hospitals and schools
  - Develop better partnerships for clinical sites to solve student/teacher ratio
  - Look at developing joint funding between hospitals and colleges to place a designated practitioner on the unit in the hospital to carry instructional load
  - Develop new staffing models to handle issues in this field
  - Develop better data sets for home health workers
  - Develop incentives for CNA's such as advancement continuing education opportunities

# Final Planning Phase - November-December



- Organize **Ad-Hoc Advisory Committee for Policy Issues** jointly with CRP: Organize Joint Meeting in November/December Lead:
- Organize a formal **Regional Consortium of Allied Healthcare Providers and Educators** with a MOU. This Consortium will address how current programs could be adapted to meet the needs in the Allied Healthcare Field and Develop Standardized Affiliation Agreement between hospitals and schools which will include guidelines for enhanced clinical site development

# Final Planning Phase



- **Develop a Marketing Plan for the Allied Healthcare Industry** that utilizes contemporary technology : website, podcasts, text message program
- **Analyze the home healthcare industry**, i.e. providers, projected needs, required skill sets, certification or licensure, in our region.
- **Identify and disseminate existing Career Ladder plans** for CNA's and other entry level Allied Healthcare Workers

# Action Plan – Year One



- **Implement MOU with educators and healthcare providers**
- **Disseminate Career Ladder information**
- **Implement Marketing Plan**
- **Formalize Policy Advocacy Strategy – Implement in Long Session**