



Rhode Island's Healthcare Workforce:

Assessing the skills gap and providing recommendations
to meet the industry needs

Prepared by The Governor's Workforce Board Healthcare Industry Partners:

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Thank you to the following high schools, colleges, and universities: New England Institute of Technology, Rhode Island College, University of Rhode Island, Community College of Rhode Island, Brown University, RIDE Multiple Pathways Office, and Davies Career and Technical High School.

Introduction

Dear Readers:

As Healthcare Industry Partners of the Governor's Workforce Board Rhode Island, it is our pleasure to present this healthcare industry skills gap study. We would like to thank those organizations and individuals who completed our survey and offered professional input through focus groups or one-on-one interviews.

Our work began in October 2013 with extensive literature research in the topics of job skills, economics, and labor market statistics pertaining to the healthcare workforce. In January 2014, we reached out to Rhode Island healthcare employers across the continuum of care with a 25-question survey. Employers identified what percentage of their business is in the following sectors: acute care, long-term care, assisted living, behavioral health, community health, primary and specialty care, and adult day care. Thirty-six employers completed the survey. These employers span all sectors of healthcare, represent over 24,000 healthcare employees, and range in size from 9 employees to 14,000.

In February, we facilitated an employer focus group to refine and qualitatively examine details from the survey. We held focus groups with job seekers enrolled in the Stepping Up Healthcare Career Orientation program. One-on-one interviews took place with deans and provosts of those colleges in Rhode Island which offer healthcare programs, as well as with directors at RIDE's Multiple Pathways office.

This report incorporates national and local labor statistics, survey results, perspectives from many stakeholder groups, career maps, summaries of discussions about experience and internships, and final recommendations.

As the Affordable Care Act (ACA) implementation continues, occupational forecasts in this report may change. Little is known nationwide about how the healthcare workforce will be impacted by the implementation of the ACA, but several experts' projections are included in this report.

We appreciate your interest and hope you find the contents of this study useful.

Sincerely,

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The Healthcare Workforce Landscape in Rhode Island

In the United States, the healthcare industry is growing faster than all other industries. Likewise, in Rhode Island, healthcare is forecasted to be the fastest-growing industry. Our workforce must be prepared to fill current and anticipated demand for healthcare professionals.

The 2013 Rhode Island Employment Trends and Workforce Issues Publication reports that healthcare and social assistance organizations employ the greatest number of individuals in RI's private sector, accounting for 78,578 jobs in 2012, of which 25,256 are employed in ambulatory health services, 23,859 at hospitals, 18,246 in nursing and residential care facilities, and the remaining 11,213 are employed in social assistance. The industry accounts for 20% of Rhode Island private sector jobs and has also added the most jobs between 2002 and 2012 at 7,746, or a growth rate of 11.0%.

Healthcare Industry Sectors in RI

We define the healthcare landscape with seven sectors in which the healthcare workforce is employed (Figure 1). The healthcare landscape includes acute care facilities, long-term care facilities (includes rehabilitation), assisted living, behavioral health, community health (includes home health), primary and specialty care, and adult day care; these categories comprise the bulk of the Rhode Island healthcare industry. Each sector has employees in direct patient care, administration, and technical positions.

Detailed healthcare career overviews outlining examples of jobs in these categories can be found on pages 9-11 of this report.

Workforce Demographics

In 2012, there were 3,548 active, licensed physicians in Rhode Island¹ and in May 2012, The Bureau of Labor Statistics estimates there were 9,390 nursing assistants working in Rhode Island², 1,110 licensed practical and vocational nurses (LPNs/LVNs), 11,840 registered nurses (RNs), 1,130 physical therapists, and 190 physician assistants (PAs).

There are over 19,000 healthcare support workers in Rhode Island. Most are employed as home health aides, nursing assistants, occupational and physical therapy assistants and aides, dental assistants, medical assistants, pharmacy aides, and phlebotomists. For a full listing of health occupations in Rhode Island by employment and wage estimates, refer to the May 2012 OES State Occupational Employment and Wage Estimates at the Department of Labor Statistics.³

Figure 1. Healthcare Industry Sectors



¹ AAMC Center for Workforce Studies. 2013 State Physician Workforce Data Book. https://www.aamc.org/download/152172/data/rhode_island.pdf

² Occupational Employment and Wages, [http://www.bls.gov/oes/current/oes311014.htm#\(1\)](http://www.bls.gov/oes/current/oes311014.htm#(1)), May 2012

³ Occupational Employment Statistics, Bureau of Labor Statistics, 2012

Rhode Island’s hospitals employ over 4,000 full-time RNs,⁴ 1032 certified nursing assistants (CNAs), 75 LPNs, and 130 nurse practitioners (NPs). As of 2013, per diem workers in Rhode Island hospitals included 156 CNAs, 11 LPNs, 702 RNs, and 21 NPs.⁵

Age

Nationwide, the workforce is aging. The healthcare sector is especially susceptible to the aging workforce, because the supply of healthcare workers will decrease as the population ages and increases demand for services.⁶ The “baby boom” generation, defined as those born between 1946 and 1964, is straining the health care system by increasing demand, and projections indicate the population of Americans age 65 and older will approach 54 million by 2020⁷ (figure 2). With the retirement of Baby Boomers and healthcare reform bringing millions more into the healthcare system, effective and efficient workforce planning models for healthcare organizations must be developed.

US Population 65+ by Age: 2000-2050

Source: U.S. Bureau of the Census

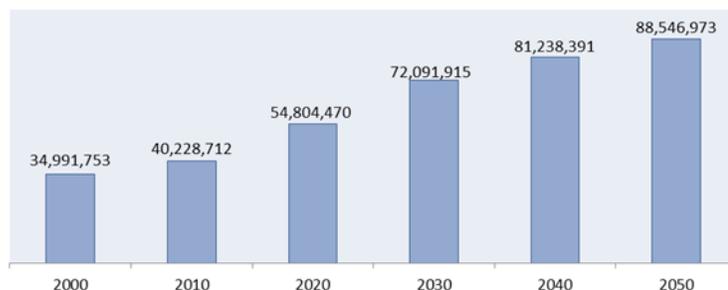


Figure 2

According to the Rhode Island Department of Labor and Training, the largest age group of healthcare and social assistance workers is 14-35 year-olds, who account for 30.8% of the sector’s workforce.⁸ This percentage has shrunk from 32.3% in 2002. The second-largest age group represented is the 45-54 group, making up 25.1% of the workforce, followed by the 55 and older age group (23.3%) and the 35-44 age group (20.8%). The 55 and older age group represented only 14.9% of the workforce in 2002⁹. This growth demonstrates how the local healthcare workforce has aged over the past decade, as this age group of workers has almost doubled in the healthcare workforce since 2002. The average age of RNs in the US is 44.5 years old and the average age of RNs in Rhode Island is 47.8 years old.¹⁰

Age of RI Healthcare Workforce

Source: RI Labor Report, 2013

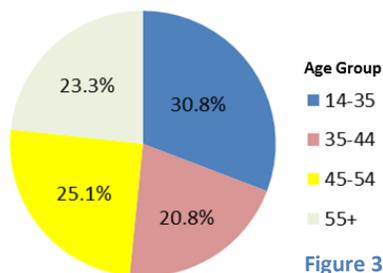


Figure 3

Education

An individual’s level of education can play a large role in obtaining employment. According to US Census data, 37.1% of the US population aged 25 and older has at least an associate’s degree. Comparably, 40.3% of Rhode Island’s population aged 25 and over has at least an associate’s degree; however, just 27.2% of all jobs in Rhode Island require at least an associate’s degree¹¹. A higher percentage (38.5%) of jobs in the healthcare and social assistance sector require this level of education. For example, of Rhode

⁴ Center for Health Professions at the Hospital Association of Rhode Island

⁵ Center for Health Professions at the Hospital Association of Rhode Island

⁶ *The Impact of the Aging Population on the Health Workforce in the United States: Summary of Key Findings*. Rep. Center for Health Workforce Studies School of Public Health, University at Albany, n.d. 26 Mar. 2006.

⁷ U.S Bureau of the Census

⁸ *Rhode Island Employment Trends and Workforce Issues*. Rep. Rhode Island Department of Labor & Training Labor Market Information Unit, Nov. 2013. Web. 28 Feb. 2014.

⁹ *Rhode Island Employment Trends and Workforce Issues*, 2013.

¹⁰ Center for Health Professions at the Hospital Association of Rhode Island

¹¹ *The Impact of the Aging Population on the Health Workforce in the United States: Summary of Key Findings*. Rep. Center for Health Workforce Studies School of Public Health, University at Albany, n.d. 26 Mar. 2006.

Island hospital employees, 36% hold an associate degree, while 9% hold bachelors, 4% masters, 2% doctoral, and 5% hold professional degrees.¹²

In addition to formal education, certifications and vocational education can also contribute to obtaining employment within the healthcare industry.

The healthcare career overviews on pages 9-11 of this report detail healthcare jobs by education requirement in the following three categories: technical positions; patient care positions; and administrative positions.

“...27.2% of all jobs in Rhode Island require at least an associate’s degree. A higher percentage (38.5%) of jobs in the healthcare and social assistance sector require this level of education.”

Healthcare Salary and Wages

The average annual salary for a healthcare employee in Rhode Island in 2010 was \$44,446.¹³ Wages vary by job position, organization, and experience.

According to the Center for Health Professions at the Hospital Association of Rhode Island, new RNs earn an average hourly wage of \$28.¹⁴ The Bureau of Labor Statistics estimates that as of 2012, Nursing Assistants working in Rhode Island earn a mean hourly wage of \$13.75, LPNs earn a mean hourly wage

of \$24.58, RNs earn a mean hourly wage of \$35.13, Occupational Therapists earn a mean hourly wage of \$37.09, Physical Therapists earn a mean hourly wage of \$40.75, PAs earn a mean hourly wage of \$53.97, and Family and General Practitioners earn a mean hourly wage of \$94.04. When the healthcare industry is split into practitioners and support roles, the mean hourly wage tells

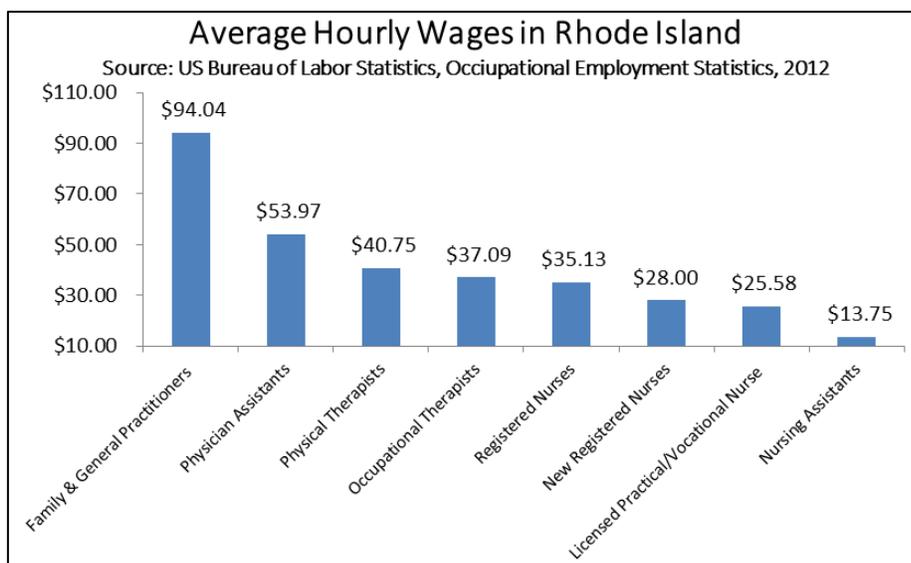


Figure 4 the story: \$39.13 per hour in 2012 for healthcare practitioners and technicians versus \$14.55 for healthcare support employees. However, in general healthcare employees in Rhode Island make about 12-15% more than the average healthcare employee in the United States.¹⁵

RI Employee Residency

In our quantitative survey of 36 healthcare facilities, we asked organizations what percentage of their employees live in Rhode Island. About four in five organizations report that 90-100% of their staff lives

¹² Center for Health Professions at the Hospital Association of Rhode Island
¹³ Bureau of Labor Statistics, Occupational Employment Statistics, 2010
¹⁴ Center for Health Professions at the Hospital Association of Rhode Island
¹⁵ Bureau of Labor Statistics, Occupational Employment Statistics, 2012

in Rhode Island, while just fewer than one in six report 50-79% of their staff live in Rhode Island. No organizations reported that less than half of their employees live outside of Rhode Island.

Healthcare Staffing and Turnover

Staffing agencies are available to fill facility needs, although 70% of facilities who responded to our survey reported that they never use agency staffing to fill vacant positions or shifts. Most remaining organizations declared they only use staffing agency on a monthly basis. Half of respondents have employees in their facility who are contracted through another company. In October 2013, hospitals in Rhode Island reported having 5 CNAs and 64 RNs as contracted, agency or travel workers. Turnover is well-documented in nursing facilities. According to the American Health Care Association, in 2010 the overall turnover rate in nursing facilities was 35.1% and the turnover rate for CNAs was 42.6%. In Rhode Island as of 2012, the turnover rate for long-term care facility employees was 33.1% and was 38.2% for CNAs.¹⁶

Turnover among staff can make it difficult to provide consistent and quality care to patients as resources are drained by activities such as recruitment, orientation, and training. Turnover adds strain on remaining employees and can create low morale in the workplace. Employment context is important in determining turnover, although it can also be addressed through stable communication patterns and leadership.¹⁷

Healthcare Career Overviews

The following charts provide a sample of healthcare jobs and their related education levels, within patient care, technical and administrative positions. These career overviews were developed, with the help of the healthcare industry partners, by Workforce On-Ramps, a State Career Pathways Initiative. These can be found at <http://www.gwb.ri.gov/CareerPathOnRamps.htm>.

¹⁶ American Health Care Association, 2010

¹⁷ Anderson, R.A., Corazzini, K.N., & McDaniel, R.R. (2004). Complexity science and the dynamics of climate and communication: reducing nursing home turnover. *Gerontologist*, 44, 378-388.

HEALTH CARE CAREER OVERVIEW:

Patient Care Jobs

Rhode Island jobs and careers within the health care industry require different education, experience, and training. The industry has careers in the following three areas:

- 1) Patient care
- 2) Technical
- 3) Administrative

Click on any of the jobs listed to learn more.

For licensing requirements, visit the Department of Health's website at www.health.ri.gov/licensing

Work Experience

Education Level

Jobs requiring a master's, PhD, or professional degree are also available. Please check with your career coach for more information.

Moderate-Term Training

- Nurse Manager

Internship/Residency

- Registered Dietician and Nutritionist

Bachelor's Degree

- Registered Nurse (BSN)
- Activities Director/Recreational Therapist
- Health Educator
- Medical and Health Services Manager
- Mental Health and Substance Abuse Social Worker
- Recreation Worker
- Rehabilitation/Vocational Specialist
- Substance Abuse and Behavioral Disorder Counselor

Associate's Degree + Certification

- Certified Dental Hygienist
- Occupational Therapy Assistant
- Physical Therapist Assistant
- Radiation Therapist
- Respiratory Therapist

Associate's Degree

- Registered Nurse (ADN)
- Residential Case Manager

Post-Secondary Non-Degree Award

- Certified Nursing Assistant
- Dental Assistant
- Licensed Chemical Dependency Professional
- Licensed Practical Nurse
- Massage Therapist
- Medical Transcriptionist

Long-Term Training

- Advanced Chemical Dependency Professional

Moderate-Term Training

- Medical Assistant
- Physical Therapist Aide

Short-Term Training

- Community Health Worker
- Laboratory Animal Caretaker
- Occupational Therapy Aide
- Patient Care Attendant/Orderly
- Psychiatric Aide
- Social and Human Services Assistant
- Central Transport Aide
- Direct Support Provider

High School Diploma

< High School

Short-Term Training

- Food Server
- Home Health Aide
- Personal Care Aide



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Nov. 14, 2013

HEALTH CARE CAREER OVERVIEW:

Technical Jobs

Rhode Island jobs and careers within the health care industry require different education, experience, and training. The industry has careers in the following three areas:

- 1) Patient care
- 2) Technical
- 3) Administrative

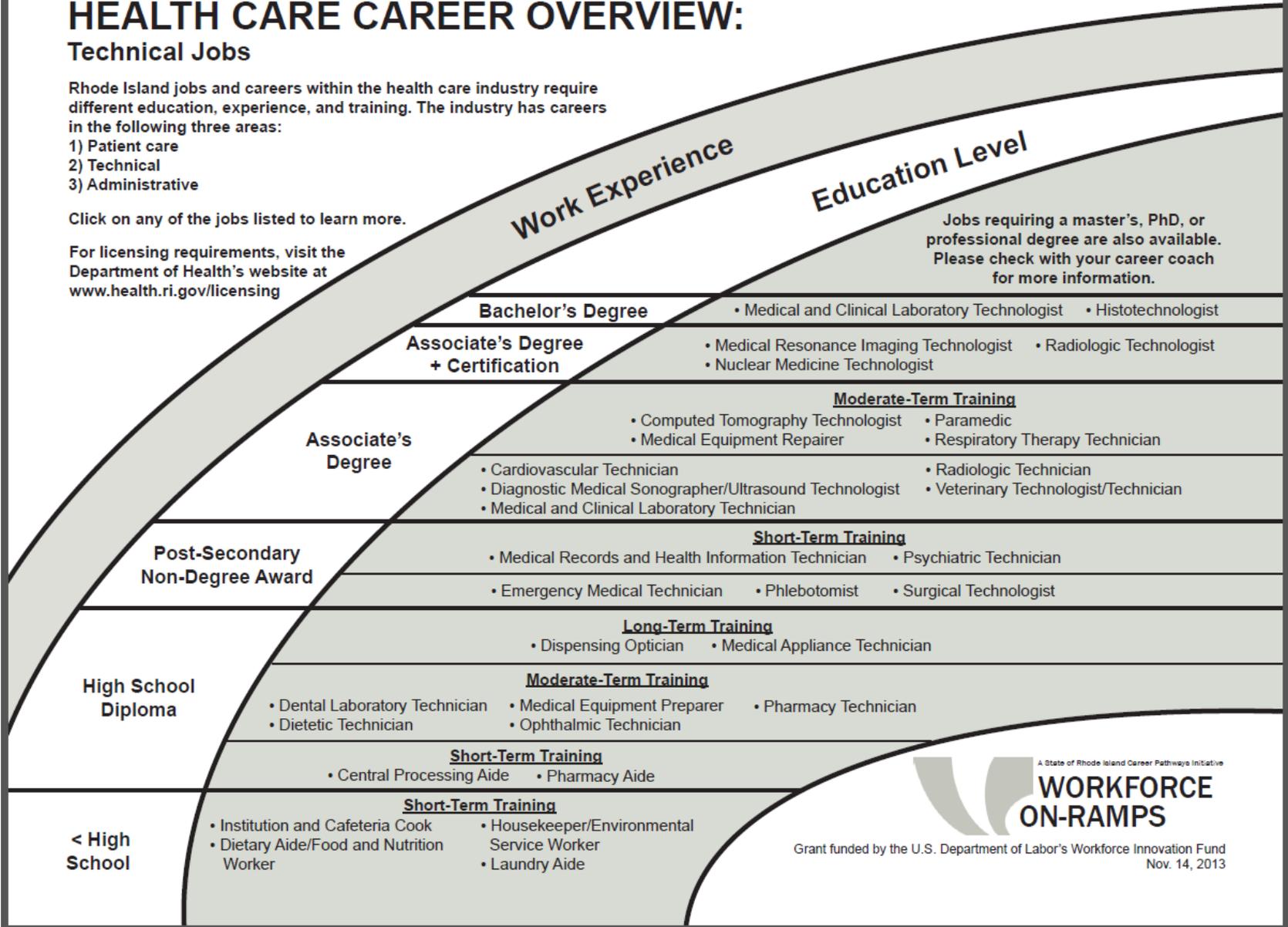
Click on any of the jobs listed to learn more.

For licensing requirements, visit the Department of Health's website at www.health.ri.gov/licensing

Work Experience

Education Level

Jobs requiring a master's, PhD, or professional degree are also available. Please check with your career coach for more information.



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HEALTH CARE CAREER OVERVIEW: Administrative Jobs

Rhode Island jobs and careers within the health care industry require different education, experience, and training. The industry has careers in the following three areas:

- 1) Patient care
- 2) Technical
- 3) Administrative

Click on any of the jobs listed to learn more.

For licensing requirements, visit the Department of Health's website at www.health.ri.gov/licensing

Work Experience

Education Level

Jobs requiring a master's, PhD, or professional degree are also available. Please check with your career coach for more information.

1-5 Years of Experience

- Compensation and Benefits Manager
- Human Resources Manager

Bachelor's Degree

- Clinical Data Manager
- Departmental Manager
- Medical and Health Services Manager

Associate's Degree

- Coding and Billing Specialist

1-5 Years of Experience

- Executive Secretary/Administrative Assistant
- First-Line Supervisor of Office and Administrative Support Workers

Moderate-Term Training

- Bill and Account Collector
- Bookkeeping, Accounting and Auditing Clerk
- Data Coordinator
- Insurance Claims and Policy Processing Clerk
- Medical Secretary
- Outpatient Services Representative
- Patient Accounts Representative
- Payroll and Timekeeping Clerk

High School Diploma

Short-Term Training

- Billing and Posting Clerk
- Customer Service Representative
- General Office Clerk
- Information and Record Clerk
- Receptionist and Information Clerk

- Gift Shop Clerk



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Nov. 14, 2013

Job Projections and Forecast

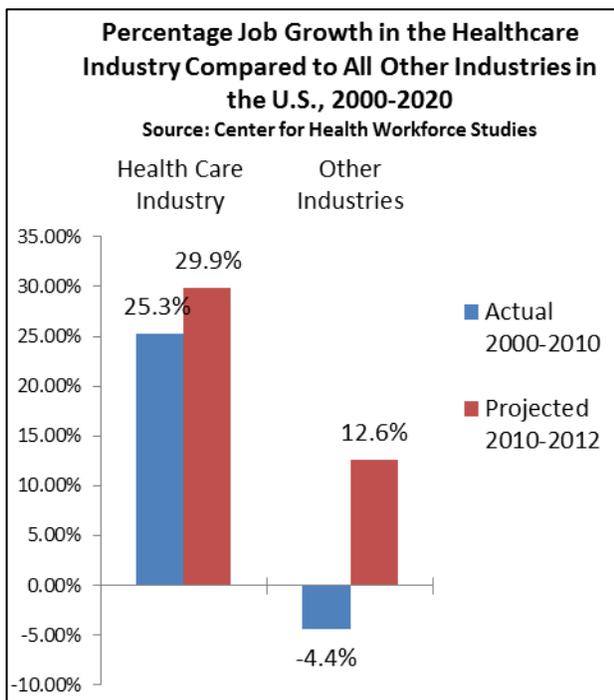
Nationally, workforce growth is expected in occupations that require at least some college education or post-high school certifications; growth will be higher in occupations that do not require prior industry-relevant experience than in those positions which do. Causes include the aging of the U.S. population and growth in the healthcare and social assistance industry.

National Healthcare Workforce Growth

Since 2000, about 2.84 million healthcare jobs have been added to the healthcare workforce.¹⁸ Jobs with the highest growth include home care jobs, which grew by 70.7%; ambulatory care, which has grown by 83.2%; and offices of health practitioners, which have grown by 23.2%.¹⁹

“Employment in the healthcare industry is expected to grow from over 14 million jobs in 2010 to nearly 18.3 million jobs in 2020, representing an overall increase of 30%. This is more than double the growth of all other employment sectors at 13%.”

Healthcare is a major segment of the U.S. workforce. About 13% of all jobs are in healthcare or



14,000,000 jobs. The national trend in healthcare occupations is toward growth. Employment in the healthcare industry is expected to grow from over 14 million jobs in 2010 to nearly 18.3 million jobs in 2020, representing an overall increase of 30%. This is more than double the growth of all other employment sectors at 13%.²⁰ In general, about four out of five jobs available will be replacements, and one out of five will be due to industry growth.

About 4.8 million healthcare jobs are expected to be added to the healthcare workforce between the years of 2010 and 2020 at an annual growth rate of 3.0%. The most growth will be found in jobs that require some level of clinical application, or preceptorship in order to readily enter the workforce as that occupation. The expectation of preceptorship has begun to apply for entering the healthcare workforce as a medical assistant or an RN.

Figure 5

¹⁸ Center for Health Workforce Studies; Bureau of Labor Statistics; U.S. Department of Labor

¹⁹ Center for Health Workforce Studies; Bureau of Labor Statistics; U.S. Department of Labor

²⁰ Center for Health Workforce Studies; Bureau of Labor Statistics; US Department of Labor

Nationally, five of the ten highest growth jobs are healthcare-related. Overall, the demand for RNs is expected to be the greatest. Home health aides, personal care aides, nursing aides, medical secretaries, LPNs, physicians, surgeons, and MAs all land in the top 30 highest-growth occupations in the U.S. for this decade.²¹

About half of the top 30 fastest-growing jobs are in healthcare and healthcare support. The top three fastest-growing jobs are personal care aides, home health aides, and biomedical engineers. Other rapidly growing jobs include physical therapist assistants, diagnostic medical sonographers, occupational therapy assistants, medical secretaries, interpreters and translators, physical therapists, dental hygienists, health educators, medical scientists, mental health counselors, and veterinarians.²²

The Bureau of Labor Statistics anticipates that there will be 711,900 job openings for RNs, the third-highest quantity of demand for any individual position in the U.S. Also, by 2020, 80% of RNs employed will be credentialed at the BSN level.²³ Other healthcare-related

occupations with high demand are primarily support positions, including food serving and preparation workers, home health aides, janitors and cleaners, and nursing aides.

In the offices of healthcare

practitioners, about 1.4 million jobs will be added by 2020 with an annual growth rate of 3.2%. For hospitals, about 878,000 jobs will be added by 2020 with an annual growth rate of 1.7%. The highest rate of growth is in home healthcare services. Annual rate of growth is expected to be 6.1% as the number of people working in the industry nearly doubles between 2010 and 2020. Other growing sectors include nursing and residential care, family services, child daycare services, and outpatient, laboratory, and other ambulatory care services.

In general, those healthcare support occupation jobs will grow by 34.5% by 2020; personal care and service occupations will grow by 26.8%; and healthcare practitioners and technical operations will grow by 25.9%, with a lower anticipated rate of growth in lower-level healthcare support jobs.

“None of the top 30 jobs in decline are in healthcare.”

None of the top 30 jobs in decline are in healthcare. None of the 20 industries with the largest projected wage and salary employment declines are in healthcare.

Healthcare-Related Jobs with the Highest Growth

Figure 6

- Registered Nurses
- Home Health Aides
- Personal Care Aides
- Nursing Aides
- Medical Secretaries
- Licensed Practical Nurses
- Physicians
- Surgeons
- Medical Assistants

²¹ Bureau of Labor Statistics

²² Bureau of Labor Statistics

²³ The Future of Nursing Leading Change, Advancing Health Report Recommendations. Institute of Medicine. (2010)

Impact of Health Reform on the Healthcare Workforce

The Affordable Care Act (ACA) adds an unknown element to these projections, but many experts agree that the demand for frontline workers will increase, and the skill set of existing workers will expand. Career STAT issued a report in February 2014 which compiles case studies of workforce development initiatives across the country. It states that occupations connected to new care delivery models include health coaches or educators, care coordinators, patient navigators, care transition managers, and case managers.²⁴

These roles emerge from the ACA's aim of a system that delivers more efficient and patient-centered care with better quality outcomes, expands accessibility and coverage, and lowers costs. Percentage of growth of individual occupations at this time would be speculation, however, studies do exist projecting an increase in healthcare jobs in the sectors of home health, out-patient, laboratory, and other

What is a Community Health Worker?

- Community health workers, defined by the RI Department of Labor and Training, are generally considered to be frontline public health workers who have a close understanding of the community they serve. These workers often minimize barriers between community, health, and social service institutions, while acting as a bridge to enhance the work performed by other health and social service professionals

ambulatory care services, health practitioner offices, hospitals, and nursing and residential care facilities by 2020.²⁵

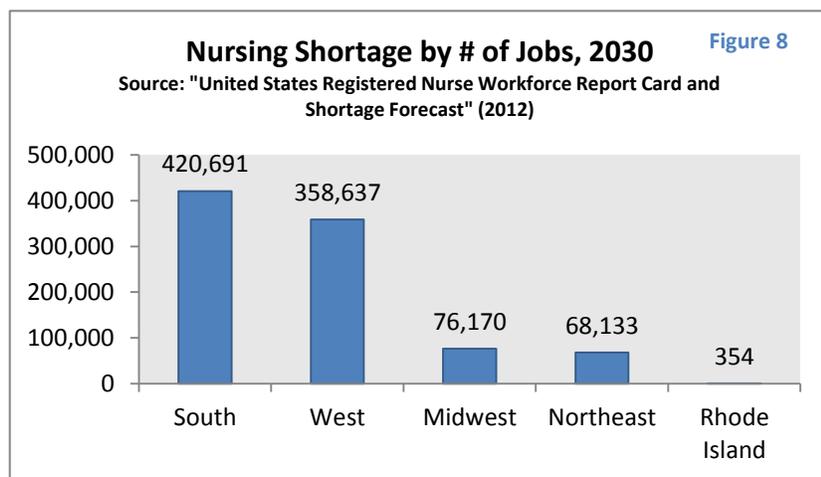
Some healthcare employers across the nation are assigning these new roles to existing staff such as nurses, social workers, medical assistants, patient representatives, and community health workers (figure 7). Others are addressing the tasks by creating new positions with various non-uniform job titles. Overall, the community health worker model is being implemented, but more so

Figure 7

through institutional avenues than the traditional community-based design because it is more sustainable than the most-often grant-funded model of community-based organizations. The organizational structure emerging is that of licensed providers such as social workers and nurses, supervising care coordinators and care navigators.

Nursing Shortage

Since 1998, there has been a growing national deficit of RNs, primarily due to growth in the elderly population and the aging of the RN workforce.²⁶ If there is no industry-wide change, models predict a shortage of 300,000-1,000,000 RNs by 2020. Nationally, the Northeast and Midwest will have lower shortages than the South and West. For every 100,000 RNs in the northeast, there will be a shortage of 118 RNs. In general, Rhode Island is expected to fare better than



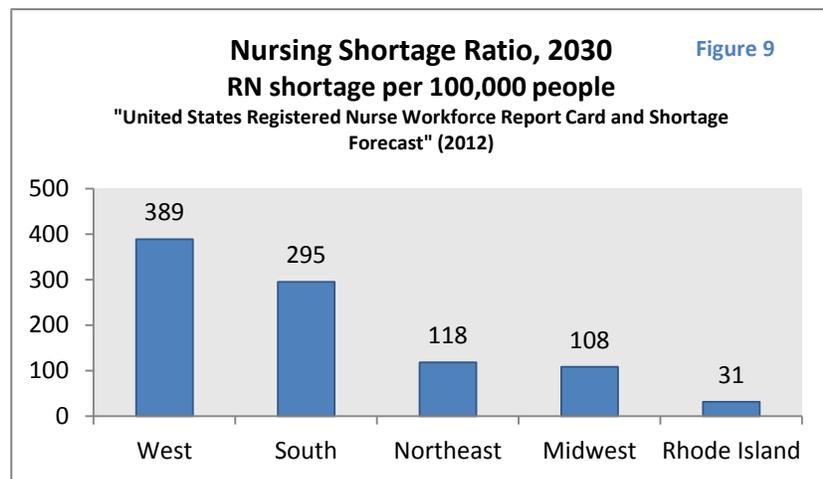
²⁴ Wilson, Randall, "Implementing the Patient Protection and Affordable Care Act: Impacts on the Frontlines of Caregiving" (2014)

²⁵ U.S. Bureau of Labor Statistics, OES

²⁶ Juraschek, Stephen P.; Zhang, Xiaoming; Ranganathan, Vinoh K.; and Lin, Vernon, "United States Registered Nurse Workforce Report Card and Shortage Forecast" (2012). Public Health Resources. Paper 149. <http://digitalcommons.unl.edu/publichealthresources/149>

most states, with about 354 RN positions expected to be vacant in the year 2030.²⁷ Rhode Island will also fare better than nearby Connecticut, but Massachusetts is expected to have a surplus of RNs versus available nursing jobs by the year 2030.

With the expanded healthcare system through the Affordable Care Act, there will be a greater need for RNs. Conversely, the Great Recession has resulted in a reduction of RN jobs in the workforce. These competing forces have created a highly volatile environment for RNs, especially with the anticipated retirement of the Baby Boomers²⁸, who make up 40% of the current healthcare workforce.



While there is an anticipated 41% replacement rate out of all RN job placements between now and 2020, the rate for home health aides is 16%, and that same rate for personal and home care aides is 10%.²⁹ The delayed, yet imminent retirement of a generation of nurses is a major reason for projected declines in the nurse workforce.

Generational differences may also arise as nursing demographics change. To examine potential differences between nurses and their new employers, Yurdin (2007) conducted interviews with new nurse graduates, preceptors, managers and educators, as well as exploring skills that new graduates possess and lack. The issue of bridging the skills gap was also raised with employers and how this can be successful.

Sherman and Letvak describe older nurses as demonstrating more organizational loyalty, having more respect for authority and possessing a strong work ethic since work is a defining part of their self-worth. "These characteristics, plus experiential knowledge, signify that aging nurses are expert and valuable professionals"³⁰ (Fitzgerald, 2007). Aging nurses are needed not only for their skills and experience, but because there are not enough younger nurses to replace them.

Studies have demonstrated that higher rates of nurse staffing are associated with reductions in adverse patient outcomes. Exiting, through retirement or other means, is also expensive as it strains the provision of health care services. The loss of an expert, the cost of recruiting and orienting another nurse, plus negative effects related to patient care are more expensive in both money and human value. Aging and experienced nurses represent the present and future of nursing and their valuable experiential knowledge is necessary for provision of optimum health care services. As the Millennials enter the workforce, they bring with them valuable skills and behaviors, which their employers and colleagues can benefit from. The Millennials are socially sensitive, ambitious, and technologically adept.

²⁷ Juraschek, et al., 2012

²⁸ U.S. Department of Health and Human Services.

²⁹ Center for Health Workforce Studies

³⁰ Fitzgerald DC, "Aging, experienced nurses: their value and needs," *Contemporary Nurse*, vol. 24, no. 2, pp. 237–243, 2007.

The Healthcare Workforce: State Projections and Forecast

As Rhode Island’s largest private sector, continued growth in the healthcare workforce is anticipated. All following statistics are from the Rhode Island Department of Labor and Training. The healthcare and social assistance industry is expected to grow by 16.2% between 2010 and 2020, adding 12,833 much-needed jobs to Rhode Island. Ambulatory healthcare services will add nearly 5,200 jobs; hospitals will add about 2,610; nursing and residential care facilities will add about 3,000; social assistance services

“The aging population, medical advances, and new technologies will drive this growth; about one-quarter of all job growth in Rhode Island is expected to occur in healthcare.”

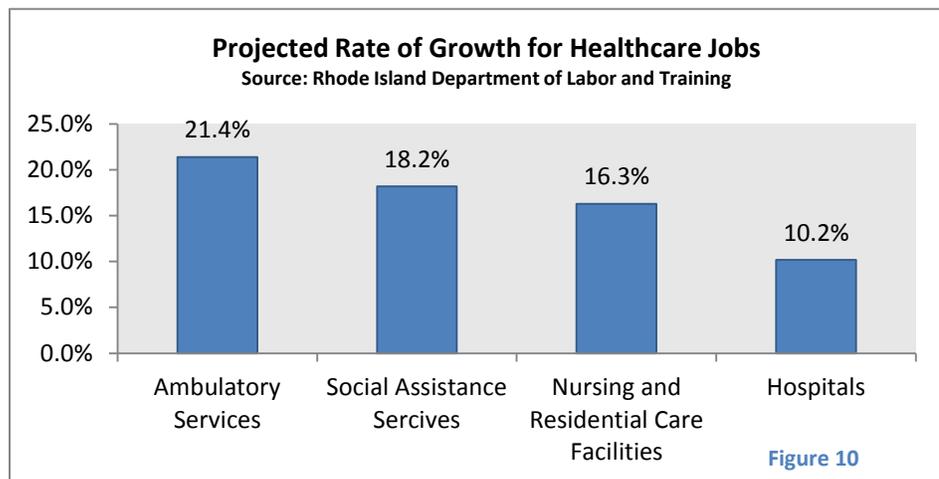
will add about 2,000 jobs. The aging population, medical advances, and new technologies will drive this growth; about one-quarter of all job growth in Rhode Island is expected to occur in healthcare.

Between now and 2020, the forecasted rate of growth in healthcare jobs is 21.4% for ambulatory healthcare services; 10.2% for hospitals; 16.3% for nursing and residential

care facilities; and 18.2% for social assistance services. No healthcare jobs are expected to face decline in Rhode Island in the next decade.

Of the anticipated new jobs added to the healthcare workforce, 11,001 are expected to be due to industry growth while 12,662 are expected to be replacements. The highest growth positions include RNs, home health aides, medical assistants, medical secretaries, and nursing aides. Jobs with many replacements anticipates include RNs, where 2,346 nurses will need to be replaced; nursing aides, with 1,207 positions

needing a replacement employee; dietitians, in which 75% of job openings will be replacements; and physicians, where 69% of job openings will be replacements. Nearly 700 RN job openings are expected each year between now and 2018.



Healthcare jobs have seen steady growth in Rhode Island as the state recovers slowly from the Great Recession. However, in 2011, even healthcare saw a slight decline in the number of individuals employed in the industry. As recently as late 2013, the numbers tell a different story—one of growth but in which there remain more qualified applicants than jobs for many lower-level positions. The following data is from EmployRI, a web based employment tool for job seekers. It is unknown whether this data is a true reflection of hiring data or rather low employer usage of EmployRI, as it does not reflect postings from other job sites. On the EmployRI website, there were 150 job postings in personal care and service, but 386 claimants of unemployment who previously worked in that sector; in healthcare support, there were 301 job postings for 526 claimants of unemployment.

For healthcare practitioners and technicians, which require higher, more specialized education, there were 1,846 EmployRI postings and only 465 claimants of unemployment who had previously worked in that sector. According to the Rhode Island Department of Labor and Training, “Those statistics indicate that employers seeking to hire workers to fill vacancies in those occupational groups would have more difficulty finding qualified workers than those employers attempting to fill vacancies in occupational groups for which there are significantly more claimants than online postings.”

The occupation with the most postings was Registered Nurses, with 848 job postings versus only 113 claimants of unemployment looking for work in that sector. The more education needed for the position, the more steep the ratio of postings versus

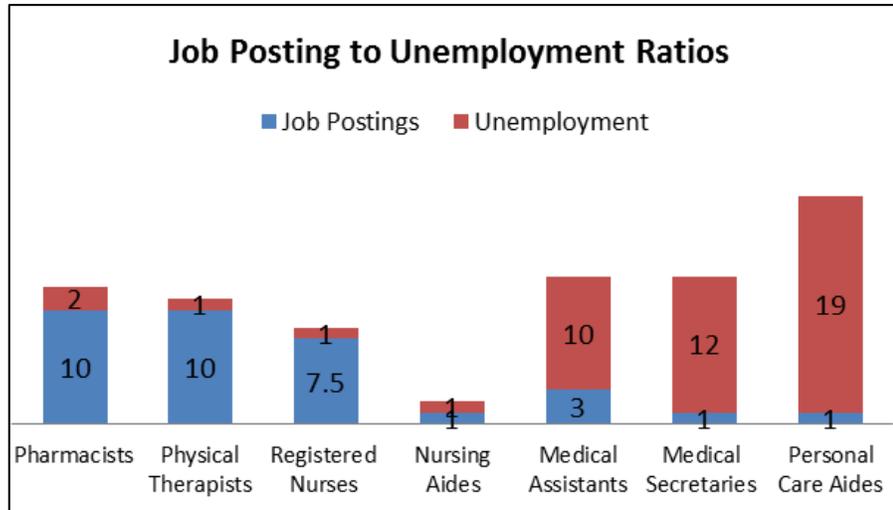


Figure 11

claimants becomes. For every 10 pharmacist job postings, there were 2 pharmacists on unemployment; for every 10 physical therapist job postings, there was only 1 on unemployment. The ratio of nursing aide positions versus unemployed was nearly 1 to 1, slightly in disfavor of nursing aides on unemployment.

However, EmployRI statistics have shown a different story for many other healthcare jobs. For every 12 medical secretaries on unemployment, there was only 1 job; for every 10 medical assistants on unemployment, there were only 3 jobs; and for every personal care aide position, there were about 19

There is a negligible amount of labor shortage anticipated for jobs requiring only a high school degree—just five positions—but there are over 1,000 jobs that are hard to fill that require at least an associate’s degree.

personal care aides on unemployment. Most of these jobs do not require any postsecondary education. There is a negligible amount of labor shortage anticipated for jobs requiring only a high school degree—just five positions—but there are over 1,000 jobs that are hard to fill that require at least an associate’s degree.

Skills Gap Analysis

We conducted a quantitative survey of 36 healthcare providers which are partners of Healthcentric Advisors and Stepping Up. We also held a qualitative focus group with five healthcare providers at which we discussed forecasts for their organizations.

Respondents said that they are most likely to hire CNAs, office personnel, medical assistants, housekeeping, laundry aides, physicians, and RNs educated at the BSN level or higher. Conversely, radiology professionals, physical therapists, respiratory therapists, surgical technicians, pharmacy

The most significant skills gaps that employers identified include communication, critical thinking, teamwork, clinical skills, professionalism, and customer service.

technicians, and RNs educated at the ADN level were the least likely positions to be hired.

Survey respondents also declared that an overwhelming majority intend to replace professional staff that leaves for any reason in the next 24 months; however, only 31% said that they would be adding

professional staff to new positions, and 11% said that they have no forecasted need for hiring professional staff. This was surprising considering the national and state-level forecasts call for growth.

About five out of six employers have identified skills gaps in the healthcare employees they hire. The most significant skills gaps that employers identified include communication, critical thinking, teamwork, clinical skills, professionalism, and customer service. In our focus group, managers said the most surprising and consistent skills gap they find in potential hires is their inability to present professionally and communicate effectively. Managers cited examples in which interviewees did not remember to go to their interview; did not remember applying for the job when the employer called for an interview; showed up to interviews with poor presentation and an inappropriate sense of entitlement; negotiating unreasonable wages early in the interview process; and grammar and spelling errors in their cover letters and résumés. These skills gaps present a barrier to employment.

Experience vs. No Experience

Focus group employer participants were asked about their thoughts on hiring experienced versus inexperienced applicants, while the same questions were posed to job seekers in a classroom environment. Interestingly, many of the same themes have been identified by both employers and job seekers about the pros and cons of experience versus no experience in prospective employees. The responses are helpful for job seekers who fear that inexperience is a barrier to finding employment and provide insight to employers on how job seekers view job postings.

Job seekers identified similar benefits of hiring individuals with no experience or limited experience as employers, such as open-mindedness, ambition, and eagerness to learn.

Employer Perspective

According to employers, one major benefit of hiring an inexperienced employee is being able to mold and train a motivated, eager to learn

individual into their organization’s system, methods, and culture. Allowing new hires, who often come on board with no preconceived notions of what work will be like, to learn from experienced mentors is often the best way to learn about the specific work environment and structure of their organization.

However, some organizations may require short on-the-job orientation and have less structure in place for mentorship. Hiring experienced individuals is often important for employers who need to fill openings immediately with employees who can jump straight into work with little training and supervision.

Employers noted hiring experienced or inexperienced employees is highly dependent on the organizations. Large organizations may have the resources to properly train and mentor inexperienced employees, while small organizations and facilities may not have enough staffing to do so, requiring experienced job seekers to fill their current needs.

Job Seeker Perspective

Job seekers identified similar benefits of hiring individuals with no experience or limited experience as employers, such as open-mindedness, ambition, and eagerness to learn. Additionally, job seekers note that employers have more leverage on compensation of inexperienced hires. Reported drawbacks to hiring individuals with no experience include high onboarding costs, a large learning curve and on the job training.

Job seekers said some benefits of hiring an experienced candidate for a job include less on-the-job training, less time between orientation and the ability to work independently, and needing less direction and oversight. Drawbacks include salary expectations, feelings of entitlement, being resistant to changing their personal systems and methods, and difficulty conforming to their new position.

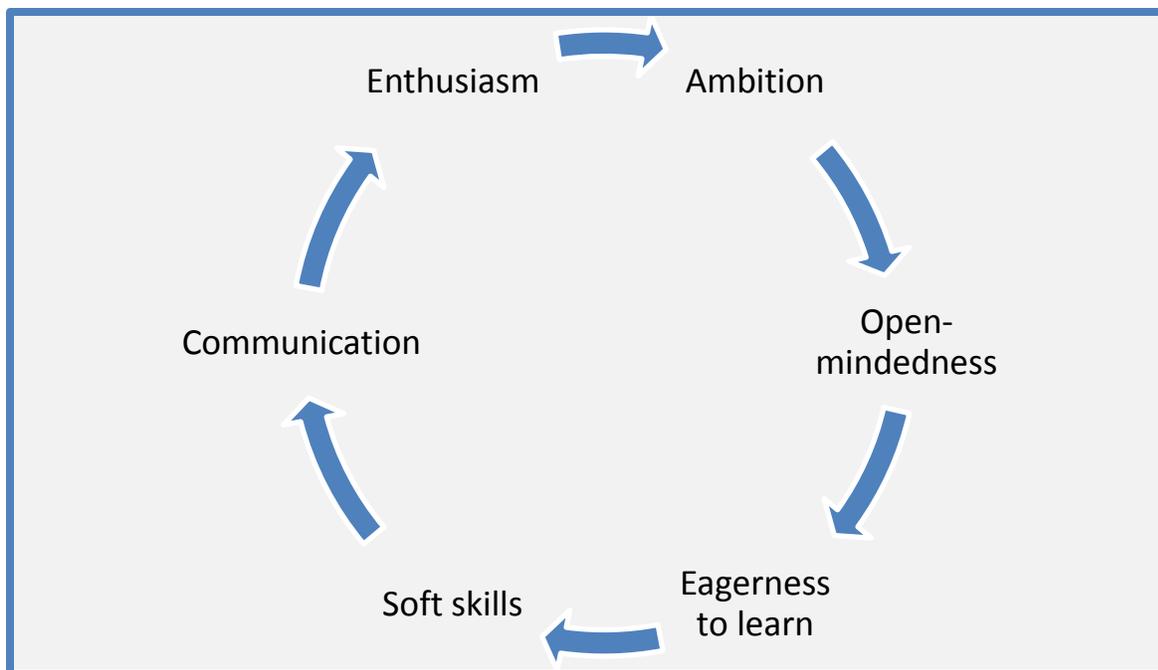


Figure 12. Skills identified by both employers and job seekers as beneficial in experienced and inexperienced employees

Internship Opportunities

Internships are critical learning and networking opportunities that often serve as a gateway to full time, permanent employment. The demand for internship positions is growing, yet internship placement continues to stagger despite the proven value of the experience. During our employer focus group the importance and value of internship placements was discussed.

According to survey results, recruitment and onboarding costs can be enormous. Due to this many employers feel internships are a valuable resource that is two-fold:

- *Helps to vet potential new employees, therefore mitigating onboarding costs, recruitment costs, while reducing turnover*
- *Allows potential new employees to explore the position and the agency without having a long term commitment or investment*

Internships provide a trial run which is beneficial for both the job seeker and employer. Evaluating potential employees during internships allows the employer to gage an intern’s soft skills, trainability, punctuality and whether or not their “heart” is in the position, in addition to their general job knowledge and skills. Prospective employers noted that even a short term job shadow can be beneficial for the prospective employee, while also serving as an informal interview for the employer.

Internships in specific settings, such as long-term care and home and community based care, provide essential training and eye opening experiences for job seekers, providing training in other areas, such as:

- Effective discipline
- Human resource practices
- Prioritizing tasks
- How to deal with difficult people
- Provides hands on experiences

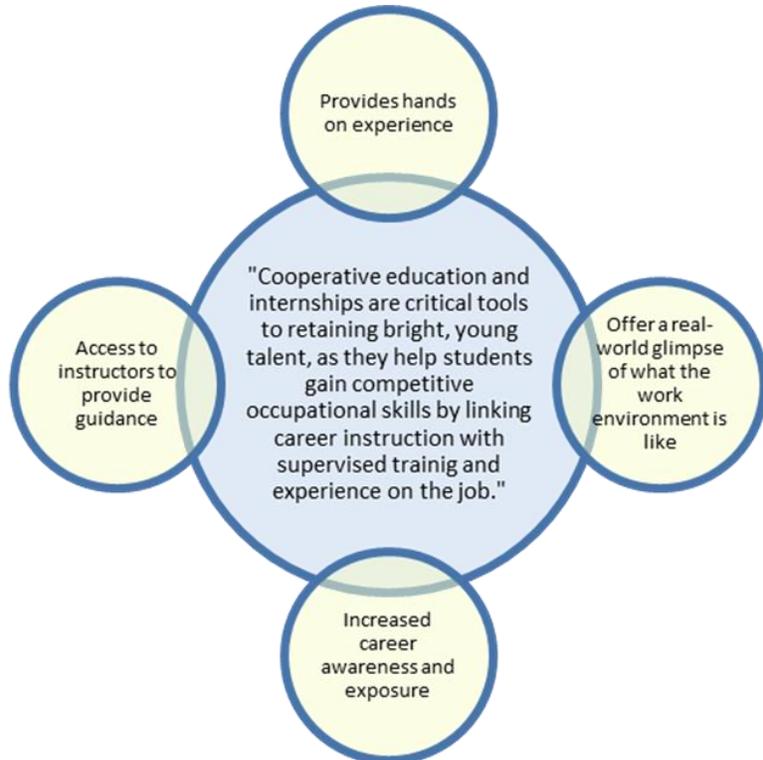


Figure 13. Internship benefits, as defined by focus group participants.



Figure 14

- Access to instructors to provide guidance
- Offer a real-world glimpse into what working life would be like
- Benefits to post-grad job hunt
- Intern receives mentoring and training
- Companies have the opportunity to complete side projects and other work while becoming familiar with a person they may hire
- Increased career awareness and exposure development of workplace readiness

Internship Spotlight

Santiago Nino is a recent graduate of the Stepping Up Healthcare Career Orientation program and his intern manager was so impressed with him that she worked diligently to create a position for Santiago. Santiago applied the skills he had identified as his strongest in being his best while at his internship. Santiago recognized the importance of the core competencies and soft skills which he and his classmates learned during the classroom portion, which he seamlessly demonstrated during his internship. Santiago's maturity and intelligence continues to develop as he gains valuable experience and is able to learn specific skills related to the healthcare industry. When Santiago was asked "Why did you not go straight to college?" He said that he wanted to be sure that he had what it took to be successful as a surgeon and that it was a right fit for him!

"Personally this experience has yielded more than I could have imagined. I came into this program with a set goal in mind and certain expectations as to what it would mean for me. I come out now both having achieved far more than I had expected, and having grown and experienced more than I could have imagined." - Santiago Nino (Intern at RIH Central Transport).

Figure 15

Generational Diversity

"You simply do better as a company when you recognize that people bring unique and multi-dimensional perspectives to the table and can engage diverse employees in a way that they feel comfortable sharing their perspectives."³¹

As Millennials enter the workforce, there is a clash of values occurring with the older generations. Due to the fact that the Millennial generation was raised with technology and the ability to receive rewards and recognition, they often lack dedication to one employer, as well as lack the development of organizational citizenship, culture, and assimilation. This skill of dedication is vital to the growth and marketing of the organization and can in turn create tension among organization employees if it is undeveloped or lacking altogether.

There is increasing evidence that inter-professional healthcare practice approaches can be effective in improving patient outcomes and reducing health care costs; however there are a number of barriers to establishing effective integrated teams, including a lack of mutual understanding of roles and of inter-disciplinary training among providers. To operate effectively as part of these teams, students need to be trained to provide inter-professional care and to participate as a member of inter-professional teams. Therefore the skill set that each generation brings to the table may vary, and is specific to the generation and their core values, which can benefit health care facilities and inter-disciplinary teams. "All health professionals should be educated to deliver patient-centered care as members of an inter-

³¹ Ellin, Abby, "The Beat (Up) Generation." Psychology Today (2014).

disciplinary team, emphasizing evidence-based practices, quality improvement approaches and informatics.”³² However there are both those skills and core values which overlap with the various generations (Figure 17) and those skills which are lacking overall (Figure 16).

Currently there are four distinct generations who make up the workforce, however one generation is slowly retiring and one generation is just beginning to enter the workforce. The generational diversity among these four groups is significant enough that companies, both large and small are currently researching how best to simultaneously retain current staff while recruiting new and talented staff. In meeting the diversity of the various generations, companies need to be flexible and open minded to the needs and requests of the generations.

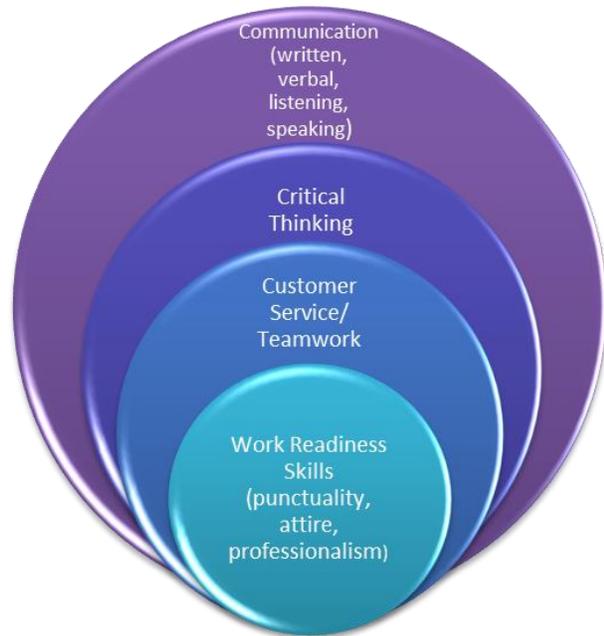


Figure 16. Skills Lacking in New Employees

Validating and meeting the expectations of the current workforce is necessary in order to retain and recruit from the current pool of applicants. The beliefs, experiences and world occurrences are what

shapes a generation and it is important that employers validate each generation and the current generational diversity in the workforce. Employers and human resource staff of healthcare facilities need to work together in order to redesign how their core values can reflect the various generations values, as well as building benefit packages that will be desirable to what each generation finds valuable. However this will be difficult as flexibility, open mindedness and growth will be needed, as each generation has requirements specific to their recruitment and retention.



Figure 17. The Venn Diagram above displays the shared skills and core values of the Baby Boomers, Generation X and the Millennials.

The traditionalist generation is currently of retirement age, and as they leave the healthcare field along with their traditional methods and wealth of knowledge, healthcare facilities need to figure out how to best replace this staff and retain the knowledge and expertise of the retiring workforce.

³² Institute of Medicine, 2003

Baby Boomers are traditionally considered to be “individual rights” oriented and an “indulged generation”. However they are very dedicated to their place of work, and in fact historically have stayed with one organization throughout the entire length of their careers. This group lives, eats and sleeps work, they are considered to be “work-a-holics”. For healthcare employers to retain this valuable generation, a supportive environment that will allow them to juggle careers, children and aging parents, while meeting their needs to achieve and acquire. Also by providing stress management tools and schedules that will respond to their physical and family needs are valuable retention tools.

The Baby Boomers are the largest cohort in the workplace and the one with the most power by virtue of their high numbers in leadership positions. Due to their loyalty and competitive nature they tend to have a dedicated attitude, and expect this to be across the board with all employees. The prosperity of World War II and the social changes caused by Vietnam also influenced and shaped this generation which strengthens’ this generation in their determination and loyalty.

Generation X strives for higher education, continues to seek self-fulfillment, and may be seen as overly self-consumed. This generation strives to strike a balance between work and their personal lives. They see work as part of their life, yet leisure and family life is of the utmost importance to this generation. A flexible ‘non-traditional’ work schedule is very appealing to this generation, allowing them autonomy and the ability to design their own work schedule in order to meet their workload while balancing family and leisure. An adequate income is expected as a by-product of work, an expected outcome, rather than earned.

Another term that Generation X has been dubbed is “latch-key kid,” with both parents earning incomes, which led to self-reliance, independence, also fun-loving and less loyalty. They also witnessed a high number of divorces and corporate downsizing. “Unable as a generation to enjoy the career successes of their predecessors; more concerned with career options, balance of work and non-work lives and express cynicism toward corporate America.”³³ (Gibson et al. 2009)

The Millennial generation is entering the workforce with vigor and what seems to be a specific goal oriented agenda, which is sending shockwaves through the older generations, in particular the Baby Boomers. Where Baby Boomers deem the 9-5 work day important, Millennials strive for flexibility. The benefits this generation brings are a fresh face to social sensitivity, optimism, ambition, curiosity, technologically adept, yet they get bored easily.

The technology boom significantly affected the Millennial generation, where they are very much “at home” with instant communication and social networking. This generations’ use and understanding of

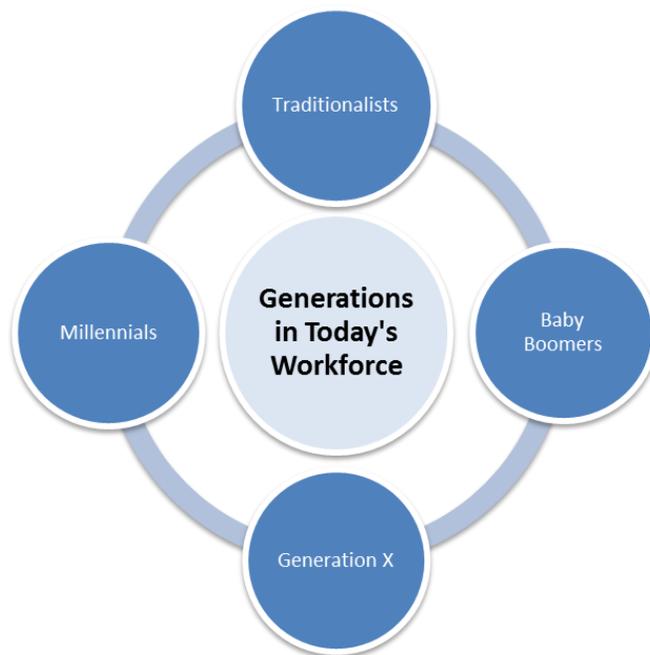


Figure 18. Generations

³³ Gibson, J. W., R. A. Greenwood and E. F. Murphy Jr. 2009. “Generational Differences in the Workplace: Personal Values, Behaviors, and Popular Beliefs.” Journal of Diversity Management. Vol. 4, Iss. 3: 1-8.

social networking is vast and can be utilized for the greater good as they build online reputations as a way of branding themselves. They recognize the importance of self-promotion as a way to stand out from the crowd. “Because of social networks, everyone has to think, ‘what’s my reputation?’” Results-oriented and data driven, at times this generation can seem to be a bit aggressive to the older generations, especially when their need for constant feedback is seen as interruptive to others in their work environment. “In the workplace Millennials can try the patience of their boomer generation bosses and Generation X colleagues. Their entrepreneurial, answer-seeking behaviors, coupled with their sense of personal responsibility and need for feedback, can be diminished by their dissatisfaction with entry-level jobs and their tendency to change jobs frequently.”³⁴ (Gibson et al. 2009)

³⁴ Gibson, et al. 2009.

Training and Education Innovation

Incumbent Worker Training

Of those healthcare facilities that participated in the survey, all indicated they offer in-house paid trainings. Fewer than 20% offer trainings on unpaid time. More than half utilize some type of external training resource and offer this form of skill building in a group/cohort model. About 55% of survey respondents offer tuition reimbursement. Fewer than 10% utilize grant funding, whether public or private, for incumbent worker training.

In the survey, employers identified barriers to incumbent worker training. Nearly all employers declared the top barrier is that on-

the-job training takes away from employees' primary job responsibilities. Most employers also said the cost of training was a hindrance to offering training. About half said that there is a concern with ensuring that training content accurately matches the requirements of the industry.

Training topics offered by more than 50% of survey respondents:

- Team Building Skills
- Mandated In-serve Training
- Clinical Enhancement Training
- Customer Service Training
- CPR/Basic Life Support
- Electronic Health Record/Computer Training

Training topics offered by less than 50% of survey respondents:

- Cultural Competence
- Management/Leadership Training
- Continuing Education Units (CEUs)

Training topics offered by 0% of survey respondents:

- General Education Diploma (GED)
- English for Speakers of Other Languages (ESOL)

Figure 19

College Degrees and Employment in Rhode Island

The following lists are based on interviews with Rhode Island college deans and provosts. This is not a comprehensive list, but rather commentary based on experience. They show which graduates today from the Health and Allied Health majors tend to have an easier or harder time than other majors of finding jobs in Rhode Island:

Graduates from these Health and Allied Health majors have an easier time finding jobs in Rhode Island

- **Associate Degree Programs**
 - Nursing- ADN
 - Dental Assistant
 - Occupational Therapy Assistant
 - Physical Therapy Assistant
 - Histotechnician (jobs in RI or other states)
 - Opticianry
 - Therapeutic Massage (independent or with a company)
 - Emergency/Disaster Management (part-time jobs in RI; full-time in other states)
 - Clinical Medical Assistant
 - Surgical Technology
 - Respiratory Technology
 - Veterinary Technology
 - Veterinary Practice Management
 - Health Information Management
- **Bachelor Degree Programs**
 - Nursing- BSN (more marketable than ADN)
 - Nuclear Medicine
 - Healthcare Management

Graduates from these Health and Allied Health majors have a harder time finding jobs in Rhode Island

- **Associate Degree Programs**
 - Radiography : Very few positions opening up, most hires happen after 6-8 months and are per diem
 - Diagnostic Medical Sonography: Getting jobs, but not in RI
 - Dental Hygiene: Most of the jobs are per diem
 - Emergency Medical Technician : Hired by ambulance services, but usually need to achieve Advanced EMT or EMT Paramedic for best job opportunities
 - Healthcare Interpreter: Most students enrolled are incumbent employees
 - Medical Resonance Imaging: Most students enrolled are incumbent employees
- **Bachelor Degree Programs**
 - Dr. Eric Hall of Rhode Island college points out that "general degrees may be more flexible, but degrees that end in licensure lead more directly to employment."

College Perspectives on Expanding Nursing Experiences Outside of Hospitals

Nursing colleges were criticized for not quickly adapting to changes in the job market. Nursing jobs are trending away from acute care and into community-based, non-hospital settings. During the 2012-13 academic year, Rhode Island schools of nursing utilized 1,267 clinical placements for their students. Only 75 of these placements, less than 6%, were hosted by non-acute care facilities (nursing homes, schools, senior centers, etc).³⁵ Here are some ways local colleges are working to prepare nursing students for work in all types of healthcare settings.

Community College of Rhode Island (CCRI)	University of Rhode Island (URI)	Rhode Island College (RIC)	New England Institute of Technology (NEIT)
<ul style="list-style-type: none"> •Nursing students spend the first half of their first clinical nursing course in a long term care facility before switching to acute care. LPNs do two week rotations in acute care medical/surgical units, long term care, psychology, pediatrics, and obstetrics. CCRI hired a consultant to review the second-year nursing curriculum. Part of this review is to add a long term care rotation and expects to see the redesign by spring 2015. 	<ul style="list-style-type: none"> •URI points out its participation in the RI Nurse Residency Passport to Practice program, a statewide effort to address the need for nursing experience across the continuum of care. Other curriculum changes have been underway, and the list of non-hospital clinical placements now exceeds the number of hospital placements. 	<ul style="list-style-type: none"> •Nursing students are placed in long term care settings, schools, and community settings. The college also uses simulation to address care in the home and community, as well as in the hospital environment. Recognizing the shift in nursing care, RIC is increasing student experiences in non-hospital settings. 	<ul style="list-style-type: none"> •NEIT’s Clinical Coordinator is currently adding more long term care rotations. Curriculum revisions are underway to make long term care a key component while maintaining rotations in medical/surgical, pediatrics and OBGYN. Other community rotations are planned.

Innovative Education Programs

Brown University M.D/Sc.M Program in Population Medicine

- In 2015, Brown University is launching an innovative, dual-degree program, in which students will graduate with a Doctor of Medicine and a Master of Science Degree in Population Medicine. The purpose of this new program is to retain primary care physicians in Rhode Island. MD students will become part of inter-professional teams (nurses, social workers, physical therapists, etc.), and spend time at community healthcare facilities. Students are exposed to in-patient, out-patient, and family medicine/pediatric practices throughout their 4 years. Brown has a nearly 100% placement rate of graduates into paid residencies.

Figure 20

³⁵ Data gathered from the Centralized Clinical Placement Registry, housed at the Center for Health Professions of Rhode Island

Passport to Practice: Rhode Island Nurse Residency Program

- In response to the need for nurse preceptorship the Passport to Practice program was established in 2014, led by the Rhode Island Action Coalition and Stepping Up, with principal funding from the Robert Wood Johnson Foundation and the Governor's Workforce Board RI. The aims are to help unemployed or underemployed newly-licensed RNs gain more clinical experience and expand their network. The program offers incredible networking opportunities, innovative seminars, one-on-one time with a Nurse Preceptor in various settings, and assistance with transitioning to a BSN program for those who do not already have a BSN.

Figure 21

Innovations at Davies Career & Technical High School

- Davies offers a structured program starting in the 9th grade. It involves strong employer partnerships with organizations such as St. Antoine Residence, CVS Pharmacy, and a developing relationship with the Rhode Island Disaster Medical Assistance Team (RIDMAT). A ribbon-cutting was held this year to celebrate a new mock pharmacy right on the high school campus. By senior year, students have the opportunity to earn the following certifications:
 - CPR/AED
 - First Aid
 - Certified Nursing Assistant
 - Alzheimers certification
 - Pharmacy Technician
 - Electronic Health Records (certification of program in process)
- Davies also offers assistance through the Business & Education Partnership Office for students to explore work-based learning, and receive help in the transition to college and/or a career.
- In 2013, 57% of Davies graduates went on to college, 23% went directly into careers, 5% joined the military, and 15% were undecided. A strong majority pursue health-related majors and occupations.

Figure 22

Soft Skills Gap: Perspective from Colleges, CTE, and K-12 Education

Employers overwhelmingly comment that new graduates/job seekers lack “soft skills” (such as conflict resolution, accepting feedback and correcting actions, listening, teamwork, etc.). How are colleges and the Career and Technical Education system addressing this skills gap?

- Community College of Rhode Island: Some of these topics are addressed in a course called Introduction to Healthcare Careers. A simulation lab is used to practice skills such as teamwork, conflict resolution, and problem solving.
- University of Rhode Island: Although soft skills are not formally addressed in curriculum, students have opportunities for non-traditional experiences such as international health missions, an inter-professional education initiative, and two in depth study of issues like the social determinants of health. URI credits the Student Nurse Association for Rhode Island (SNARI) for their involvement of nursing students in the discussion of these important skills.
- Rhode Island College: Soft skills are not a formal part of curricula in most RIC programs, but RIC actively engages employers and students in internships in order to develop those skills. Some

programs requiring internships include Food Safety Management, Human Services, Dental Hygiene, and Respiratory Therapy.

- New England Institute of Technology: NEIT had a grant from the Davis Educational Foundation specifically focused on integrating soft skills, quantitative reasoning and critical thinking into the classroom. Twenty faculty members were trained, and faculty development days are used to deliver the training to the other 100 faculty in a peer mentor model.
- Brown University: First and second-year Brown MD students are required to take a course called Doctoring. In this class, students learn communication skills such as how to deliver bad news to patients. The third-year family medicine clerkship gives students the opportunity to apply soft skills, and an inter-professional education initiative with other health science colleges develops teamwork skills.
- K-12 Educational System:

Career & Technical Education (CTE) schools utilize program advisory boards (comprised of postsecondary partners and business/industry representatives) to identify soft skills. One of the major ways students gain these is through visits to employers to observe firsthand the importance of appropriate behavior in a work environment. School and program staff also try to model those skills. By nature, K-12 education is very structured, and similar in many ways to a workplace.

It is important to share that the adult education system, and in particular community-based work readiness

programs, have curricula that focus highly on soft skills. Much of this is employer-influenced and demonstrated during work experiences.

Rhode Island High Schools with Healthcare Pathway Programs:

- ACE (Academy for Career Exploration)
- Chariho CTE Center
- Coventry CTE Center
- Cranston CTE Center
- Davies CTE Center
- Rhode Island Nurses Institute Middle College Charter High School
- Warwick CTE Center
- Woonsocket CTE Center

Figure 23

Voices from the workforce community...

To the Workforce System from Colleges and CTE Schools...

What could the workforce system do to help colleges meet industry needs and fill skills gaps?

- Utilize Industry Partners of the GWB RI as liaisons between colleges and employers to ensure that colleges are offering the right degrees, and the right supply of graduates
- Issue reports on industry trends and new/changing credentials to help colleges stay ahead of the curve
- High schools could enhance career introductions and college readiness so that students know what they are getting into, and are successful, once they enter college or the workforce
- Develop a residency for LPNs in long term care facilities; build on other states' success in utilization of LPNs
- Build pipeline projects for youth to increase unrepresented minority student population in healthcare majors
- Help foster an interest in science and math early on in education
- Develop a mentorship program between healthcare professionals and students; mentors would guide a student through middle-school, high-school, and college

To Employers from Colleges and CTE Schools...

What can employers do to help colleges better prepare graduates for rapidly changing industry needs?

- Large healthcare employers should participate in curricula planning and technical advisory groups to inform colleges what they need
- Formalize a method of communication between non-acute care facilities and colleges
- Invite college deans, department chairs, and faculty to acute care facility internal advisory board meetings
- Employers should include high schools in the career ladder and include them in conversations about industry needs
- Submit satisfaction surveys about how graduates from various colleges do on the job
- Provide internships and/or shadow opportunities
- Initiate dialogue with colleges
- If employers are planning to hire a large number of new employees, and will consider new graduates, plan start dates around college graduations (after Fall/Spring semesters)
- Provide professional development opportunities for high school teachers, college faculty, adult education providers, and administrators

To Students and Job Seekers from Colleges and CTE Schools...

How can students help ensure their own success, and that of future graduates?

- Seek a well-rounded education in order to develop a strong soft skill foundation
- Spend time on career exploration and know what subjects you will need to excel at in order to be successful in college
- Take advantage of tutoring; serve as a tutor after graduating
- Use college career services
- Submit alumni feedback surveys to help colleges understand successes and challenges of job seeking after graduation from specific programs
- Serve on academic advisory committees or student governance organizations

To Students and Job Seekers from Employers...

How can job seekers and students help ensure their own success in finding employment and in new positions?

- Take advantage of internship experiences
 - Start the job search early and be thorough
 - Seek out informational interviews for practice and exposure
 - Role play prior to interviews
 - Arrive prepared at interviews; arrive on time, demonstrate knowledge of organization and position, appropriate dress, appropriate etiquette
 - Pay attention to detail in applications, resumes, and cover letters; specifically grammar mistakes and make sure to follow directions
 - Follow up with a thank you note
-

Workforce Activities

In the employer survey, respondents were asked to rate the following workforce activities either not helpful, somewhat helpful, or very helpful in developing a competent, skilled healthcare workforce.

All activities averaged in the somewhat or very helpful range, and are displayed here in order of most to least helpful:

- 1) Nurse residency program
 - 2) Providing clinical placements for RN and APRN programs
 - 3) Scope of practice standardization
 - 4) Apprenticeships
 - 5) Credentialing non-licensed occupations such as medical assistants, phlebotomists or community health workers
 - 6) Building high school career pathways
 - 7) Creating a single web-based resource of CNA training programs
 - 8) Workforce readiness credential
 - 9) Employ people with disabilities into healthcare field
 - 10) Business Workforce Center at Department of Labor and Training
-

Many employers participating in the survey were simply not aware of the Business Workforce Center. A list of services the BWC provides can be found on their website: <http://www.dlt.ri.gov/bwc/>.

Workforce Training Popularity

Healthcare Industry Partners of the Governor's Workforce Board RI asked employers which types of training programs, if made available, would be most beneficial to their organizations.

More than 50% favored the following training program offerings (listed in order of most popular to least popular):

- 1) Soft Skill Competencies
 - 2) Cultural Competency
 - 3) Regulatory Compliance
 - 4) Basic Computer Skills
 - 5) Individualized Care
 - 6) Interdisciplinary team approach
 - 7) QAPI/Quality Improvement
 - 8) Accessing services & resources from the state workforce investment system
 - 9) ICD-10 Conversion
-

44% to 50% favored the following training program offerings (listed in order of most popular to least popular):

- 1) EHR Implementation/usage
 - 2) Skills gap training for ACA (Affordable Care Act) implementation
 - 3) HIPAA Security Audits
-

The above listed trainings are offerings of one of the Healthcare Industry Partners of the Governor's Workforce Board Rhode Island: HARI, Healthcentric Advisors or Stepping Up.

Recommendations

In order to bridge the healthcare workforce skills gap in Rhode Island, communication and collaboration among stakeholders is essential. The following recommendations should be considered by all:

Accountability for soft skills development

With the implementation of the Affordable Care Act, healthcare employers' reimbursement models are changing. New scoring measures present in the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) link provider payments to patient satisfaction. Providers will be rated on such topics as responsiveness to needs, communication, and pain control. Soft skills of the care providers factor in significantly. It would be wise for *employers* to invest in soft skills training in order to provide the best possible patient experience, but also maximize reimbursements.

These skills have been, and are increasingly more important in new employees for the reasons stated above. *Job seekers* would be wise to access their local community training and education centers to register for soft skills trainings. The Stepping Up Healthcare Career Orientation training is one such program that provides 7-8 weeks of intensive contextualized curriculum, including a variety of techniques to develop soft skills and demonstrate core skill competencies. The PACE Program at CCRI and On-Ramps program at NetworkRI are additional training resources.

High schools, colleges, and universities could develop a soft skills communication course tailored to healthcare professions. Since there are communication course options to fill Humanities electives, a workplace professionalism and communication requirement could be designed for students in the clinical majors. The healthcare industry partners could collaborate on the curriculum and instruction of this course.

Development and expansion of internship opportunities

Internships have been documented as an essential development and learning opportunity for students and job seekers. The continued expansion of internships will not only benefit the intern's development, but will also benefit the employer. Employers, college students, and job seekers are encouraged to utilize <https://bridge.jobs/> when looking for interns or internship opportunities.

Investment in pre-employment and workforce programs to fill skills gap

Investing in pre-employment and workforce programs includes identifying potential funding opportunities for skills development, investing in incumbent worker training programs, and utilizing a centralized database of existing resources in Rhode Island.

Formalize communication from industry to health sciences educators

Communication between industry and health sciences educators (K-12, community-based trainings and colleges alike) needs to be formalized in order to make the best use of resources and ensure educators are up to date on workforce needs. This could include inviting employers to educational discussions and educators to workforce discussions. An open stream of communication will assist in identifying and solving the healthcare workforce skill gap.

About the Healthcare Industry Partners

Healthcentric Advisors

Healthcentric Advisors is a nonprofit healthcare quality improvement and patient safety advisory organization providing its clients with effective education, consulting, research, analytical, and project management services.

- Collaborated with RI healthcare providers to identify training and workforce needs
- Provided pre-CNA training classes for adults with ESOL and ABE needs to assist them in meeting the entry criteria to participate in and be successful in a CNA training program
- Worked with the Department of Health to increase access to a database of CNA training programs for potential students
- Collaborated with NEIT to provide free opportunities for incumbent healthcare workers to obtain electronic health record national certifications (CEHRS & CPEHR)
- Working closely with HARI and Stepping Up to update and expand upon the healthcare industry skills gap studies originally authored by Healthcentric Advisors and HARI in 2006
- Expanding our pre-CNA training to include high school juniors and seniors in a health careers alternative learning program

Hospital Association of Rhode Island

The Hospital Association of Rhode Island (HARI) assists member hospitals in serving the health care needs of Rhode Island, through advocacy, representation, education and services.

- Utilize healthcare human resource professionals to ensure training is aligned with the healthcare industry's needs
- Conduct two healthcare employer surveys annually
- Collect, analyze and distribute RN supply and demand data annually
- Developed and maintain the RI Centralized Clinical Placement Registry; a partnership between all RI schools of nursing, hospitals and other healthcare facilities
- Increased student nurse clinical rotations annually from 726 in 2009 to more than 1260 in 2013 with an annual student enrollment averaging 2,200 participants
- Created and maintain the Common Orientation Project which streamlines nursing students through mandatory training in preparation for their clinical rotations
- Conducted 60 industry awareness workshops at netWORKri for more than 500 displaced workers
- Secured \$200K from private funders to support scholarships to recruit and retain more than 20 RI nursing school faculty

UNAP RIH Education Fund (Stepping Up)

Stepping Up is a state-wide healthcare workforce development partnership of the UNAP/RIH Education Fund and Women & Infants Hospital consisting of healthcare providers, education, community-based organizations, labor unions and funders.

- Offered 359 internships leading to 326 job placements to unemployed/underemployed Rhode Island community resident
- Offered 73 CCRI healthcare pre-college and pre-requisite courses to 320 healthcare employees and community residents
- Managing state's first Nurse Residency Program for newly licensed unemployed/underemployed Registered Nurses with the RI Action Coalition and 15 healthcare employers
- Produced and distributed *Realigning the Medical Assistant Career Ladder: Recommendations to Meet Healthcare Industry Needs* in 2013
- Developed a Medical Assistant skills gap training curriculum with Coastal Medical Group and University Medicine, and implemented training