



HEALTHCARE WORKFORCE REPORT

*A Report from the Montgomery County
Workforce Investment Board*



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Montgomery County Workforce Investment Board

2006

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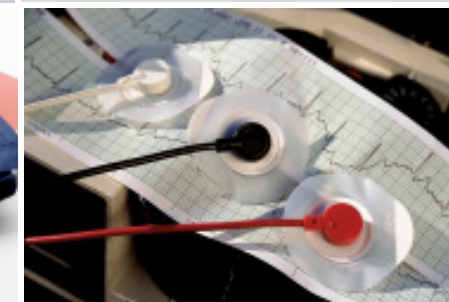
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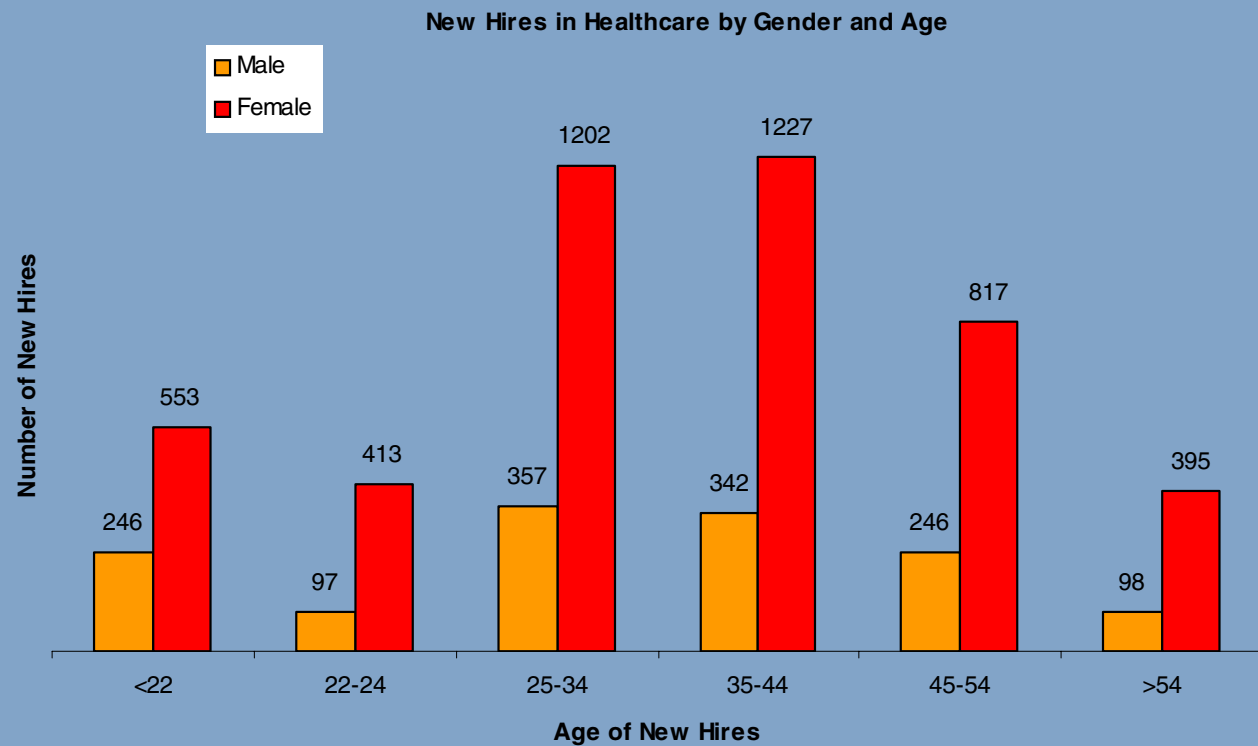
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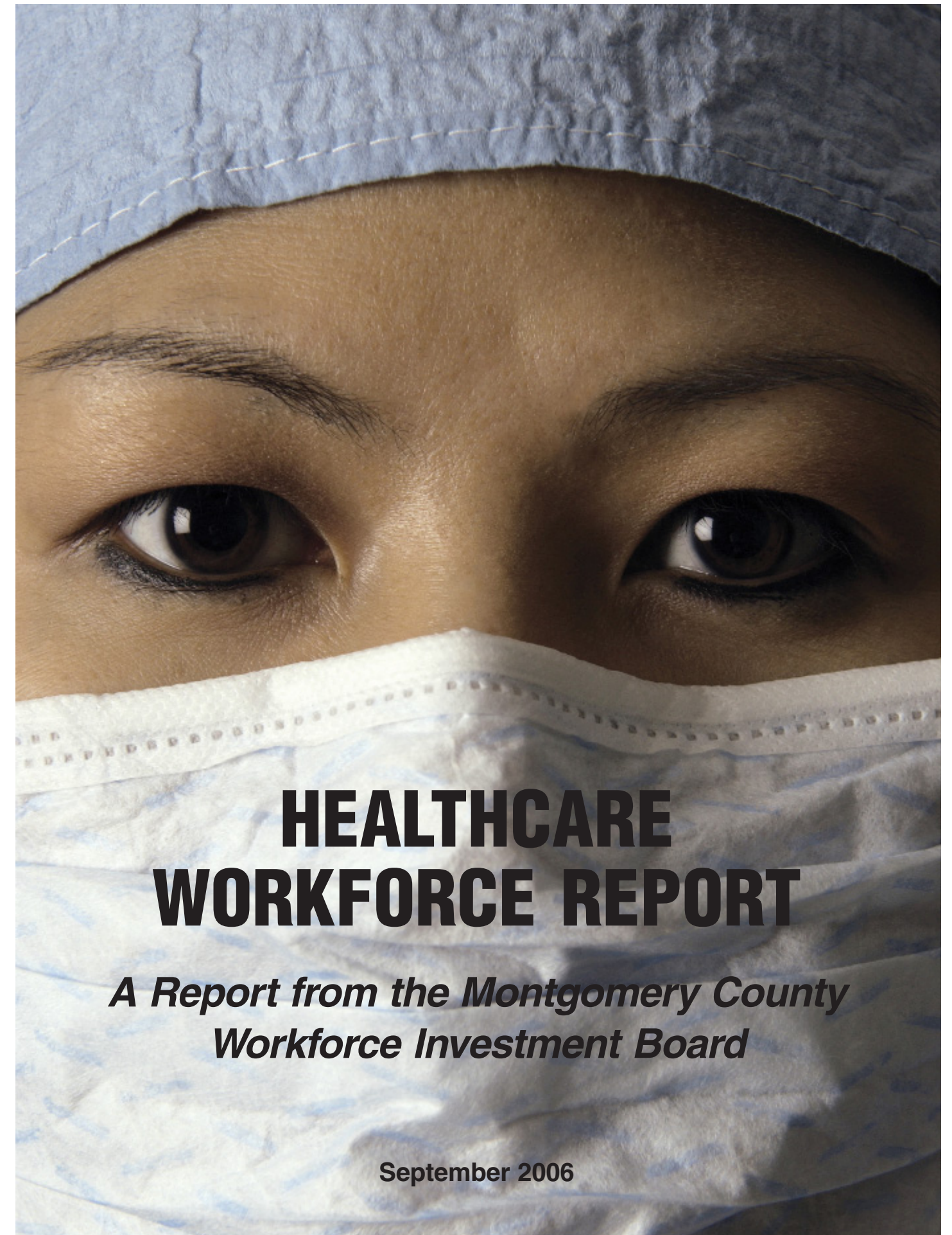


Quarterly Hires Within Healthcare by Gender and Age

Fifty-one percent of new hires in Montgomery County's healthcare industry are between 25 and 44 years old. Across all age groups, women represent 77% of new hires in healthcare. Gender and age mix varies among the healthcare sub-sectors (not shown here), and even more so at the occupational level.



LED Data for 2004, 4th Quarter



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The need for direct patient care workers, especially for those with advanced nursing degrees, competes against Montgomery County's wealth of opportunities for health professionals in high technology, research and consulting positions – including those in the Federal sector and the Military.



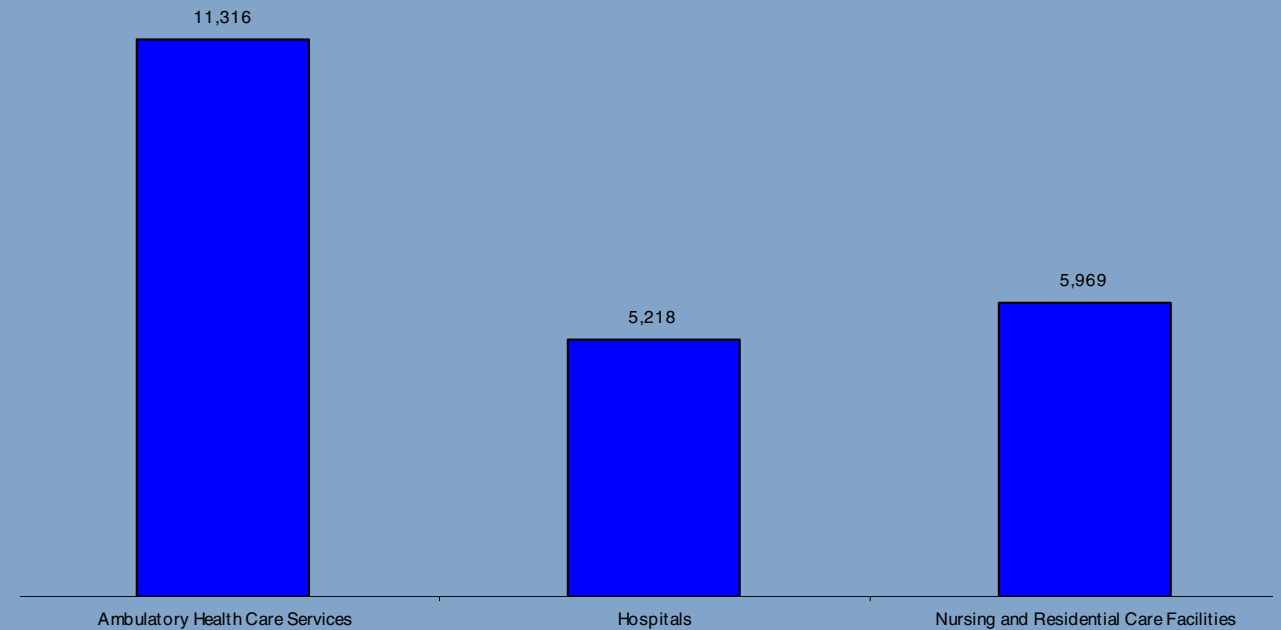
Montgomery County has strengths that can attract a continuing stream of qualified individuals to meet current and future healthcare workforce needs.



Annual Hires and Net Growth/Loss Within Healthcare

Almost half of Montgomery County healthcare new hires in the year shown were in Ambulatory Healthcare Services. Although Nursing & Residential Care Facilities was the smallest sub-sector in terms of employment, it outpaced Hospitals in new hires by 30% for the year, and also featured much more solid job growth. The number of new hires far exceeded the net employment growth or loss in each sub-sector, and the ratio of new hires to job growth was 22:1 for the industry as a whole.

New Hires in Healthcare for Montgomery County

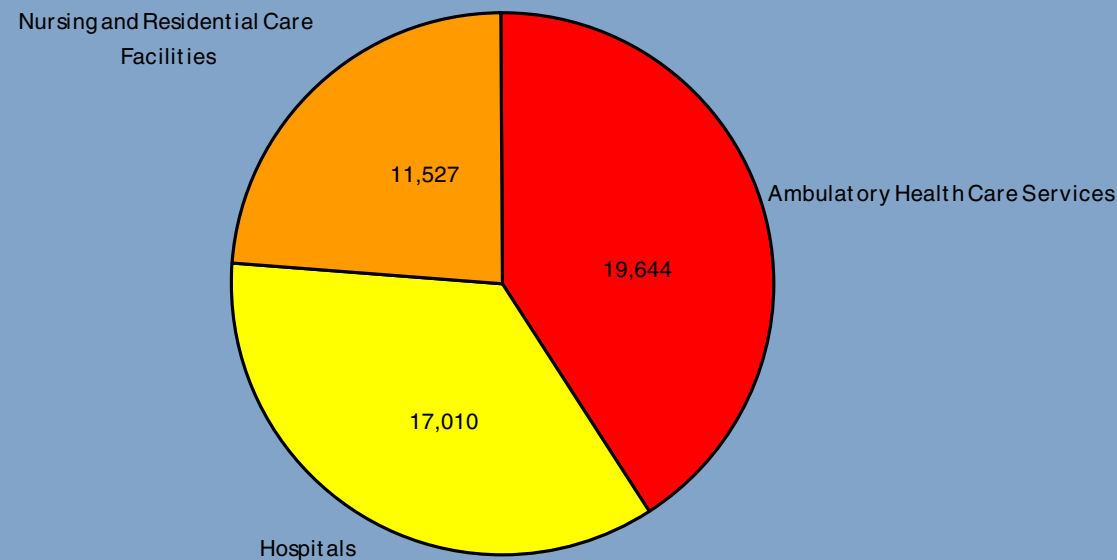


LED Data for 2004

Employment Distribution Within Healthcare

Forty-four percent of Montgomery County healthcare employment is distributed among physician, dentist, chiropractor, optometrist, and mental health professional offices, physical and occupational speech therapists, outpatient care facilities, home healthcare and medical diagnostic laboratories – all included in the Ambulatory Healthcare Services sub-sector. Nearly one third of healthcare workers are employed in Hospitals, with the remaining 24% employed in Nursing & Residential Care Facilities.

Montgomery County Healthcare Employment



U.S. Census Bureau Local Employment Dynamics (LED) Data for 2004



DEPARTMENT OF ECONOMIC DEVELOPMENT

Douglas M. Duncan
County Executive

David W. Edgerley
Director

September 2006

A Message from the Workforce Investment Board:

Thank you for taking the time to review this important report on healthcare workforce issues in Montgomery County. "HEALTHCARE WORKFORCE REPORT" was prepared on behalf of the Montgomery County Workforce Investment Board's Healthcare Workforce Committee.

The mission of the Montgomery County Workforce Investment Board (WIB) is to ensure that Montgomery County has a well-prepared, educated, trained, and adaptable workforce to meet the current and future needs of business, and that the county's workforce has the tools and resources to successfully compete in a competitive global economy. The WIB is a 30-member business driven workforce advisory board, composed of business representatives, community leaders and public officials. Members are appointed by the County Executive in accordance with the federal Workforce Investment Act (WIA) of 1998.

The shortage of skilled workers has been identified by the Healthcare industry as a "crisis" throughout the nation. Healthcare employers, educators, trade associations and workforce organizations are developing strategies to solve workforce shortages resulting from demographic changes, lack of capacity of healthcare training systems, lack of diversity, and worker turnover. Montgomery County, Maryland, with a population approaching 925,000, and home to five major hospitals and scores of other healthcare facilities, is also experiencing significant worker and skills shortages in this industry. The Healthcare industry is a major employer in the County, accounting for 11% of the County's total employment, yet there are great concerns regarding the recruitment and training of the future healthcare workforce as the County expects to need over 15,000 new or replacement healthcare workers through 2012. To ensure that Montgomery County has an adequate pipeline of qualified, diverse healthcare professionals for the future, the Workforce Investment Board's Healthcare Workforce Committee was tasked with assessing the healthcare workforce issues within the County and developing recommendations for the future.

The WIB prepared "HEALTHCARE WORKFORCE REPORT" to provide practical information to policy makers and practitioners and to guide the work of the WIB and other healthcare stakeholders on healthcare workforce activities in Montgomery County. This report provides helpful information about the local healthcare system and identifies issues and common problems identified by those most involved with healthcare workforce development activities. In addition, the report provides recommendations for future action in strengthening workforce development activities for one of our County's most important industries – healthcare.

We hope you find "HEALTHCARE WORKFORCE REPORT" useful in your understanding of our local healthcare workforce needs. We welcome your comments, input and support in developing our future healthcare workforce in Montgomery County.

Carrie Shelton
GEICO
Chair, Montgomery County Workforce Investment Board

Workforce Investment Services

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Patricia Vorus
Consultant

Special appreciation to Patricia Vorus for her contributions to this report.

This report was prepared on behalf of the Montgomery County Workforce Investment Board's Healthcare Workforce Committee in cooperation with the Department of Economic Development, Division of Workforce Services.

Conclusions and Recommendations

The partnerships developed through the sub-committee will serve as a solid foundation for future progress but there is much work and advocacy yet to be done. Additional and redirected resources are needed.

Creating a skilled, diverse workforce for the future will require all parties to look at the continuum of needs. To engage the future workforce at the earliest point and sustain their commitment to healthcare as a long-term profession requires the involvement of the educational systems from K-12 to the college level, healthcare industry employers, and government as represented by the Public Workforce System. This is an issue of economic development and workforce quality that has a dramatic impact on the quality of healthcare in Montgomery County.

The Healthcare Workforce Sub-Committee is committed to establishing Montgomery County as a national Model for resolving the healthcare workforce challenges faced by many communities. This will require continued efforts by healthcare industry employers to seek opportunities for joint initiatives that will increase the pool of potential employees across the industry, and retain experienced workforce members by providing opportunities for advancement or career movement. The committee will continue its work to put in to place a framework that will provide employers with well-trained and culturally competent candidates and to utilize the available skill training for incumbent workers to support career advancement for the healthcare workforce.

This approach recognizes the value of a close partnership and working relationship among employers, educators and the One-Stop system. The committee also recognizes the continued need to support efforts to increase the number of nurse educators as faculty to ensure adequate advanced degree training for healthcare professionals.

As a result of the work of the committee, the critical partners of education, healthcare employers and the public workforce system are working more closely together and have engaged in new strategies to overcome healthcare workforce challenges to address both skill and personnel shortages in the healthcare fields. There is a new understanding of the challenges and benefits of this unique collaboration in meeting the needs of all partners, as they seek to meet current and future community needs for healthcare services and supports.

Committee members recommend the continuation of the committee to serve as an advisory body to the WIB. The committee recommends quarterly meetings to continue to build on the achievements that have been realized. This is consistent with the WIB's designation of Healthcare as a high priority, high-growth industry. The members believe that the committee offers a unique on-going forum to share information and collaborate, as well as continue to shine the spotlight on healthcare needs and issues.

The Advisory Committee will continue to focus on:

1. Accessing untapped labor pools to increase and retain the number of qualified, culturally diverse healthcare professionals.
2. Increasing the capacity of education and training providers, aligning training with industry identified needs.
3. Developing specialized skill sets, including Career Lattices, to address the needs of specialty nursing areas and the allied health fields, and areas of critical skills shortages.

The long-range goal of the Healthcare Workforce Sub-Committee is to create a sustainable infrastructure for the healthcare workforce system, creating a more effective and integrated employment and training system founded on industry identified needs through a strong partnership of healthcare employers, educational institutions and the public workforce system.

¹ Maryland Department DLLR, "Maryland Career and Workforce Improving Occupational Information – Health and biosciences, Cluster 29," www.dllr.state.md.us.

Local Priorities/Strategies To Move Forward

1. Maximize utilization of WIB funding to develop Healthcare Workforce Skills
 - Continue to dedicate 25% of the WIB's Workforce Training Funds toward healthcare.
 - Focus on incumbent worker up-skill training. Encourage industry partners to utilize available WIB funding for incumbent worker training. WIB can fund 50% of incumbent worker training for healthcare facilities—up to \$30K per facility.
2. Increase collaboration, coordination and leveraging of resources among healthcare providers, education providers, and the Workforce system to build a diverse, skilled workforce for the 21st Century.
3. Support expansion of early career exploration programs for youth, including advocating for work experience internships and employment for youth.
4. Secure funding for Healthcare Marketing - Outreach, Publicity, Recruitment campaign to attract out-of-state healthcare professionals for industry-wide impact.
5. Advocate for expansion of Nurse Educator capacity.
6. Develop cooperative job fairs as joint recruitment effort for area hospitals.
7. Continue to build career ladders and career lattices for existing and newly recruited healthcare workers, based on industry needs.
8. Continue to seek funding for Healthcare Workforce Career Center at Montgomery College, building on existing initiatives. This industry-specific healthcare workforce center that would provide career guidance, training, education resources and job placement services to job seekers, while concurrently linking well trained, skilled and qualified job seekers with the employment needs of the local healthcare employers. Such a Center will serve as a focal point for recruitment, training, job placement and coordination of resources that would benefit Healthcare Industry employers and current and potential healthcare professionals. The Center will serve all healthcare workforce areas, including nursing and allied health professions.
9. Transition the Healthcare Workforce Subcommittee to become the Healthcare Workforce Advisory Committee to the WIB.



“Three out of four new healthcare employees are women, and just over half are between 25 and 44 years old.”

Summary

The shortage of qualified healthcare workforce members at all levels of practice has been identified as a looming crisis at the national, state and local levels. Issues such as the maturing of the healthcare workforce and pending retirements, inadequate capacity of educational institutions to train the workforce due to lack of faculty, space and clinical placement sites, increased use of technology, the aging of society, and rising cultural/language diversity have converged to create increased demands for services and increased stress on the industry's workforce capacity to meet those needs. The issue is broader than nursing and involves both personnel shortages and skills deficits throughout the healthcare workforce system. Communities throughout the country are seeking new strategies to meet this crisis.

In August 2003, the Maryland Governor's Workforce Investment Board held a Healthcare Workforce Summit to address these issues and issued a report of its findings and proposed strategies in "Charting New Directions." Local representatives from industry, workforce and education participated in the summit.

As a result, in February 2004, the Montgomery County Workforce Investment Board (WIB) convened a Healthcare Workforce Sub-Committee to examine the local impact of healthcare workforce shortages. The WIB has designated Healthcare as one of four high priority demand industries. The WIB is serving as a catalyst to identify and address local healthcare workforce issues that have an impact on the county's ability to meet current and future demands for healthcare professionals to provide the highest quality healthcare services to the county's diverse population. Historically, there have been many well-intentioned disparate groups working to achieve the same outcomes. The Healthcare Workforce group was established as an ad hoc committee to bring these groups together for more effective planning and action. The sub-committee is designed to bridge education, local healthcare industry and government - the critical stakeholders needed to effect change. Committee members represent healthcare industry employers, local educational systems, and workforce specialists. Sub-Committee Membership included representatives from Adventist HealthCare, Columbia Union College, Hebrew Home, Holy Cross Hospital, Montgomery College Health Sciences, Montgomery General Hospital, Primary Care Coalition, Suburban Hospital, University of Maryland School of Nursing, Montgomery County Public Schools, and the Montgomery County Department of Economic Development, Workforce Services, and MontgomeryWorks.



“11.4 % of Montgomery County employment is classified as healthcare.”

Source: MD DLLR

Conclusions and Recommendations

These are long-term issues that require long-term efforts. The partnerships developed through the sub-committee will serve as a solid foundation for future progress but there is much work and advocacy yet to be done. Additional and redirected resources are needed.

Creating a skilled, diverse workforce for the future will require all parties to look at the continuum of needs. To engage the future workforce at the earliest point and sustain their commitment to healthcare as a long-term profession requires the involvement of the educational systems from K-12 to the college level, healthcare industry employers, and government as represented by the Public Workforce System.

The committee will continue its work to put in to place a framework that will provide employers with well-trained and culturally competent candidates and to utilize the available skill training for incumbent workers to support career advancement for the healthcare workforce. This approach recognizes the value of a close partnership and working relationship among employers, educators and the One-Stop system. The committee also recognizes the continued need to support efforts to increase the number of nurse educators as faculty to ensure adequate advanced degree training for healthcare professionals.

The report includes the following recommendations.

- Maximize utilization of federal, state and local workforce funding to develop Healthcare Workforce Skills programs.
- Focus on incumbent worker skills training.
- Increase collaboration, coordination and leveraging of resources among healthcare providers, education providers, and the Workforce system to build a diverse, skilled workforce for the 21st Century.
- Support expansion of early career exploration programs for youth, including advocating for work experience internships and employment for youth.
- Secure funding for Healthcare Marketing - Outreach, Publicity, Recruitment.
- Advocate for expansion of Nurse Educator capacity.
- Develop cooperative job fairs as joint recruitment effort for area hospitals.
- Continue to build career ladders and career lattices for existing and newly recruited healthcare workers, based on industry needs.
- Continue to seek funding for a collaborative Healthcare Workforce Career Center between MontgomeryWorks, Montgomery College and local healthcare providers.



“The public workforce system, healthcare employers and educational systems would benefit from increased collaboration, including identifying funding sources within each system that can be leveraged or pooled to benefit all of the partners.”

Type of Training Provided

- Advanced Patient Care Skills
- Information Technology/MS Office
- Basic Cardiac Life Support
- Medical Billing
- Certified Nursing Assistant
- Medical Office Professional Program
- Clinical Research
- Medical Records
- Command Spanish for Nursing
- Medical Surgical Certification
- Critical Care RN Certification
- Medical Transcription
- Dental Assistant
- Nursing Assistant
- ESOL for Healthcare
- PCCN Review
- FDA Audit Prep
- Pharmacy Technician
- Geriatric Nursing Assistant
- Phlebotomy Technician
- GNA Peer Mentoring
- Physical Therapy
- Healthcare Occupations
- Sterile Processing Technician

Organizations Receiving Training Grants

- Adventist Healthcare
- Potomac Pediatrics
- CVS Pharmacy
- Primary Care Coalition
- DP Clinical Associates
- SEEC
- Holy Cross Hospital
- Social & Scientific Systems
- Inter ACC-DD Training Collaboration
- Suburban Hospital Healthcare System
- Matthews Media Group
- The Endocrine Society
- Montgomery General Hospital
- The Jubilee Association of Maryland
- Orthospot



Building a Pipeline: MCPS Medical Careers Class

The Medical Careers class offered by Montgomery County Public Schools is an academically challenging program which combines science with technology. It is open to juniors & seniors who have a double period class that includes work in a clinical setting. Students spend their first semester in the classroom gaining knowledge about anatomy & physiology, diseases processes and nursing care skills. The learning environment includes a classroom, computer lab and clinical lab with hospital beds, patient care mannequins and supplies to train nursing care basics in including CPR.

The second semester, students use their attained skills to provide direct patient care in a local skilled nursing facility. After the nursing home rotation, students then shadow health care professionals in local hospitals. The hospitals involved provide 16 different clinical experiences for the students. Upon successful completion of the course and passing the Maryland state test, they can be certified as Nursing Assistant or Geriatric Nursing Assistants. They are ready for work in entry-level positions.

This program was initially piloted in 1972 at Sherwood High School with the students completing their clinical experience at Montgomery General Hospital. There are now four more school sites involved, Thomas Edison High School, Kennedy High School, Paint Branch High School and Watkins Mille High School. Students travel to all of Montgomery County's Hospitals and four long-term care facilities to complete their clinical experiences. Approximately 150 students complete the program each year.

3. Positioning the County for Funding

The Subcommittee recognizes the importance of being positioned to utilize all appropriate funding resources to help achieve its goal to enhance and improve the county's Healthcare workforce. The Committee believes that Montgomery County should establish its readiness to serve as a pilot site for grant and other funding, moving in sync with shared state and federal priorities. In addition, the Committee recognizes that funding from multiple sources, both public and private - including other government agencies and private foundations - will be needed to achieve the county's goals. Further research is needed in this area.

4. Increasing Collaboration and Leveraging of Resources

To ensure that Montgomery County has an adequate pipeline of qualified, diverse healthcare professionals for the future, a new and innovative demand-driven approach is required. The public workforce system, healthcare employers and educational systems would benefit from increased collaboration, including identifying funding sources within each system that can be leveraged or pooled to benefit all of the partners.

Achievements of Subcommittee

- 1) Collected and reviewed state and local healthcare workforce data/occupational projections and initiatives in other jurisdictions.
- 2) Established collaboration with Latino Health Initiative.
 - The subcommittee agreed to work on two of LHI's Goals from their "Blueprint for Latino Health in Montgomery County, MD, 2002-2006":
 - Partnership with the Latino Healthcare Initiative to serve and train foreign-trained Latino Healthcare workers.
 - WIB is enrolling LHI customers in programs and spending federal workforce funds to provide ESOL training, credential verifications and skills assessments.
- 3) Developed a federal grant application for the concept for a collaborative Healthcare Workforce Center.
- 4) Submitted three grant applications.
- 5) Established linkage with Maryland's Career & Experiential Learning (CAEL) healthcare career lattice project.
- 6) Established linkage with Governor's Workforce Investment Board (GWIB) healthcare grant committee.
- 7) WIB Healthcare Workforce Funding:
 - The WIB funded several Maryland Healthcare Partnership Training projects with Adventist Healthcare and are now working with Holy Cross and Suburban on 5 other incumbent worker training projects.
 - Based upon a Committee recommendation, 25% of federal Workforce Investment Act training funds for FY06 and FY07 have been directed toward healthcare training by the WIB.
 - Focused on Incumbent Worker Training with Maryland Business Works and the Maryland Healthcare Partnership — over the last 18 months (since the committee has been meeting) the WIB, through its MontgomeryWorks One Stop Career Center has invested over \$285,026 and trained 1,063 incumbent workers from 5 local hospitals, 3 long term care facilities, 1 major pediatric practice, and a major pharmacy chain — average cost of \$268 per trainee.

Healthcare Training Summary 2005-2006

New and Incumbent Healthcare Workers Trained	1,063
Total Cost of Training	\$285,026
Average Cost per Trainee	\$268

Purpose of the Subcommittee

The Subcommittee was established to research local issues, identify actions that can be taken to improve the status of the local healthcare workforce, and position Montgomery County to be ready to utilize state/federal and partner resources that may become available. The committee focused on identifying issues and strategies with the potential for short-term success in addressing local workforce shortages throughout the healthcare industry, including nursing and allied health professions.

The WIB charged the Subcommittee with the following responsibilities:

- Assess the workforce needs of Montgomery County's healthcare providers.
- Determine labor shortages of the healthcare industry in Montgomery County.
- Determine recruitment and training strategies to address shortages.
- Assess the capacity of local healthcare education and training providers.
- Assess career pathways and other training opportunities for entry level and incumbent healthcare workers.
- Develop recommendations to the WIB and other stakeholders on how to address identified need areas.
- Establish readiness for implementation of State Actions - move in sync with the State, position Montgomery County to be a pilot site.

The committee initially focused on assessing Montgomery County's Healthcare workforce needs and determining specific local labor shortages, based on workforce data and the perspective of the members.

The committee reviewed possible overarching strategies to improve recruitment in the identified shortage areas, and to provide training and career pathways to support workforce development over time. The committee then moved to take appropriate actions that would have an immediate impact on the shortage of qualified labor, and begin to develop a long-term strategy to meet anticipated future shortages in nursing and other allied health care professions.



"Between 2002 and 2012 Montgomery County total employment was projected to grow 18%, while Health Industries employment will grow about 31%."

Source: MD DLLR

Context for Subcommittee Work

The committee set forth the following principles for its work:

- Be effective in finding local solutions by complementing-not duplicating-existing effective efforts and taking a leadership role in other areas.
- Link supply-side with demand side to address skills shortages.
- Focus on learning from best practices across the country and adapting them locally.
- Project industry demand to 2012.
- Bring together relevant local initiatives; coordinate efforts, link local best practices.
- Select a few issues that can result in improving the local situation and position Montgomery County to utilize and leverage state, federal and local partner resources.
- Focus on actions with high potential for success within 1 year.

The committee placed a high priority on reducing duplication and maximizing/leveraging resources. The committee has worked for the past two years to develop strategies through a cooperative, cross-program, system-wide approach. The committee is issuing this report as a summary of its findings, actions and progress, defining the challenges that remain and recommendations for the future.

Increasing Cultural Competency:

Latino Healthcare Initiative

The Pilot Program for Licensure of Foreign-Trained Nursing Professionals is a multi-institutional collaboration of the Latino Health Initiative, Montgomery College, the Holy Cross Hospital, the Washington Adventist Hospital and the Workforce Investment Board. The program provides a comprehensive, integrated, and coordinated approach to effectively address the needs and decrease the challenges and barriers Latino nurses encounter in Maryland to obtain the nursing license. The program incorporates four components: support and guidance system; academics; practical exposure to the U.S. health-care system and mentoring; and employer links.

Based on the work done by the Latino Health Initiative and Montgomery College to identify foreign trained healthcare workers, the Montgomery County Workforce Investment Board will dedicate discretionary training funds to be used by the MontgomeryWorks One Stop Workforce Center to fund the costs of credential verification and other fees for pilot program participants. In addition, MontgomeryWorks staff will screen and assess all identified participants of the Latino Nurses' Pilot Program to determine eligibility for additional workforce services that will expedite their return to work in the local healthcare system. If determined eligible for WIA services, participants could receive additional no cost services such as ESOL, resume workshops, job readiness training, occupational skills training, and job placement assistance.



Healthcare Industry Overview

Within the healthcare industry, occupations can be divided into healthcare practitioners and technical occupations, which generally require advanced degrees, and healthcare support occupations, which range from non-degree with on-the-job training to two-year degrees. Those healthcare occupations with the highest occupational demand ratings include: registered nurses, health professional and paraprofessional/technicians, receptionist/information clerks, and licensed practical nurses.¹ These allied health positions (with the exception of reception/information clerks) require training beyond on-the-job training. Wages associated with healthcare positions have a broad range and are dependent on education and training levels and demand for the specific positions.

State Healthcare Industry Overview

According to the 2003 State of the Workforce Report issued by the Governor's Workforce Investment Board, healthcare has been identified as one of five industry clusters vital to the state's economy and workforce. According to the GWIB report the industry accounts for 9% of total employment. In the state, employment in the healthcare industry is expected to grow by 47,522 or 19.43% between 2000 and 2010. According to the April 2004 Maryland Monthly Labor Review, between April 2003 and April 2004, healthcare industry employment increased by 2.5%.

Statewide healthcare employment projections for 2006 indicate a need for:

Registered Nurses	48,654
Administrative Services Managers	7,544
Licensed Practical Nurses	10,012
Dental Hygienists	3,177
Reception/Information Clerks	29,797
Health Professionals/ Paraprofessionals/ Technicians, and all others	11,169

Statewide Healthcare Occupational Projections (MEETS Brief MCM.2005-4), highlight two facets of healthcare employment: 1) Some occupations in the healthcare industry are not found in this industry alone, such as reception and information clerks, and 2) occupational earnings vary widely.

Montgomery County has strengths that can attract a continuing stream of qualified individuals to meet current and future healthcare workforce needs. This includes a high level of technology, a large number of foreign trained professionals and entry-level pool, and retirees and second career individuals. The County should seek to create opportunities for professionals wishing to improve their skill levels and develop a career lattice for related health professions, as well as encourage those leaving military or federal careers to fill rewarding direct patient care or faculty professional positions.

2. Healthcare/Workforce Issues Related to the Multicultural Community.

Montgomery County has experienced a rapid increase in the number of residents from other cultures and the impact of individuals with Low English Proficiency on the healthcare industry is significant. While this has included people from many language minorities, the most significant and therefore most urgent identified need is related to Spanish speaking residents. In recent years, the County's most rapid growth has been in the Hispanic population, which is currently the largest minority population in the county. The committee recognizes that the limited availability of Spanish-speaking and culturally competent healthcare providers affects the community's capacity to meet the healthcare needs of this population. For example, the percentage of bilingual nurses does not match the 12-14% service population. There are comparable deficits in other allied



"Those healthcare occupations with the highest occupational demand ratings include: registered nurse, health professional and paraprofessional/technicians, receptionist/information clerks, and licensed practical nurses."

Source: MD DLLR

health professions. Montgomery County must address the needs, issues, strengths and resources of the growing Hispanic community as we address healthcare workforce issues. This includes both the patient and the potential workforce resource perspective.

The region has an insufficient number of bilingual and bicultural healthcare personnel to meet the language and cultural needs of this community. According to the recent report from the Brookings Institution, Montgomery County is the 5th largest immigration "portal" in the U.S.

Montgomery County is now 40% minority and almost 27% are immigrants (born outside of the U.S.). A significant number of these residents have Limited English Proficiency, which affects the capacity of the healthcare industry to both provide culturally appropriate care and to recruit qualified multicultural workers. In addition, experienced, qualified foreign-trained individuals have encountered financial, language and other system barriers to translating their foreign credentials for U.S. certification. In January 2004, the Montgomery County Latino Health Initiative (LHI) identified 180 trained potential healthcare workers who were educated in Spanish speaking countries but were unable to get their credentials accepted in Maryland. Assisting this cohort obtain the required credentials will give Montgomery County employers a stream of qualified multicultural and bilingual healthcare workers.

To build on existing initiatives, the Sub-Committee identified two goals in the Montgomery County's Latino Health Initiative's "Blueprint for Latino Health" relevant to the work of the Sub-Committee. Priority C: Ensuring the Availability of culturally and linguistically appropriate health services. Priority G: Increasing the Number of Latino health care professionals working in the county.

The committee recognizes that there are many other initiatives related to language and culture that can support the development of a multi-cultural workforce. Focus has been placed on expanding language competency of current healthcare staff and providing financial support for qualification review and certification for qualified healthcare professional with training and certification in another language, and low English proficiency.

Addressing the healthcare issues related to the Hispanic community will be a first step in providing a model for addressing the needs of other language minority groups within the County.

Building Capacity: Montgomery College Health Sciences

Montgomery College's Health Sciences Programs, both Credit and Non-Credit, have been instrumental in answering the needs of the Healthcare Workforce crisis to Montgomery County and the surrounding area. Montgomery College has continued to increase their number of students, clinical sites, courses, and faculty to answer the public's need for healthcare workers.

In 2002, Montgomery College's Health Sciences, Non-Credit Workforce Programs, offered a total of 129* courses which had 996* student enrollments who participated in the Continuing Education and Workforce Development Programs (e.g. Certified Nursing Assistant, Phlebotomy, and Dental Assistant). In 2005, the number of courses increased to 242* to accommodate the student enrollments of 1466*.

In 2002, Montgomery College's Health Sciences credit programs totaled 383* student enrollments. In 2005, the credit programs had increased their enrollments to 518 students. With growth came the need for an increase in faculty and clinical rotation sites. Full and Part-Time Faculty increased from 45* in 2002 to 58* in 2005. Clinical Rotation Sites increased from 2004 to 2006 by an additional 61 Clinical Affiliations, some affiliates with multiple clinical sites, for both Credit and Non-Credit programs (49 additional for credit program and an additional 17 for non credit programs).

We have also introduced a new program, Fire Sciences and EMT. This program attracts those who are interested in EMT work, Arson Investigation and Fire Science. In 2002 Montgomery College had 2 students enrolled in the program. In Fall 2006, enrollment has risen to 22 students.

Montgomery College continues to increase their number of faculty and clinical sites in order to accept larger numbers of students each year, in a hope of being a positive contributor to the workforce shortage.

June 9, 2006

Montgomery County faces an additional challenge. The need for direct patient care workers, especially for those with advanced nursing degrees, competes against Montgomery County's wealth of opportunities for health professionals in high technology, research and consulting positions – including those in the Federal sector and the Military.

The Committee also recognizes the significance of capacity constraints in healthcare education and training resources to prepare adequate numbers of future healthcare professionals. Unlike some other communities, Montgomery County and Maryland do not lack individuals interested in the healthcare fields. Yet hundreds of well-qualified candidates for nursing school are turned away every year due to inadequate numbers of faculty. Barriers including current demographics of healthcare professionals, variations in compensation between faculty and direct patient care positions, and system barriers such as space and availability of scholarships are of paramount importance. An additional barrier is the lack of clinical practice sites for professionals during their training. Current healthcare facilities are strained to provide both space and appropriate supervision under current guidelines. All of these barriers are compounded by issues related



to the needs of linguistic minorities, both as workforce members and patients.

Recognizing that interest in Healthcare as a profession of choice requires nurturing interest at an early age, there are not sufficient resources and educational programs that introduce youth to a range of Healthcare professions. Career

exploration programs offered by the Montgomery County Public Schools need additional clinical sites, internship opportunities, and employment of youth to address "pipeline" issues.

Local Healthcare Industry Overview

Healthcare is a major economic force in Montgomery County, where the Healthcare industry is a major employer. Four of the 25 largest employers in the county are health care providers based on March 2005 data. The county expected to add a total of 11,643 healthcare workers from 2002 to 2012, an increase of 31%. • 11.4 % of Montgomery County employment is classified as healthcare.

- Healthcare employment rose almost 6.5 times as much as total employment (2003-2004).
- Forty-one percent of this healthcare employment is Ambulatory Healthcare Services.
- Nearly thirty-five percent of healthcare workers are employed in hospitals.
- The remaining 24% employed in Nursing & Residential Care Facilities.
- Montgomery County healthcare employers hired over 22,503 new employees in the most recent full year of data coverage, despite modest growth in new healthcare jobs. This is indicative of high turnover, low job retention, and the aging healthcare workforce which requires a high number of replacement positions.
- Across all age groups, women represent 77% of new hires in healthcare, and just under half (41%) are between 25 and 44.
- Fifty percent (50%) of Montgomery County healthcare new hires in 2004 were in Ambulatory Healthcare Services.
- Although Nursing & Residential Care Facilities was the smallest sub-sector in terms of employment, it outpaced Hospitals in new hires by 26% in 2004.
- The number of new hires far exceeded the net employment growth or loss in each sub-sector, and the ratio of new healthcare hires to job growth was 22:1 for the industry as a whole.

Local Health Industry Employment Trends

Between 2002 and 2012 Montgomery County total employment was projected to grow 18%, while Health Industries employment will grow about 31%. Projected health industry growth will be led by Nursing and Personal Care Facilities (38%), Offices & Clinics of Medical Doctors (26%), Hospitals (20%), and Miscellaneous Health and Allied Services (9%). Between 2000 and 2010, Montgomery County is expected to realize about 14,360 health openings. About 54% will be due to growth, and 46% will be due to replacement.



"The public workforce system, healthcare employers and educational systems would benefit from increased collaboration, including identifying funding sources within each system that can be leveraged or pooled to benefit all of the partners."

Opportunities for future job growth exist at all levels, from professional to paraprofessionals, from support personnel to direct patient care, supporting a need for career ladder (upward mobility training) and career lattice (cross training) movement. In light of the fact that Montgomery County is home to a highly multi-cultural population, special focus is placed on the need to provide culturally competent and linguistically appropriate care at all levels.

To ensure that Montgomery County has an adequate pipeline of qualified, diverse healthcare professionals for the future, a new and innovative demand-driven approach is required.

Assessing Healthcare Workforce Needs

The subcommittee found that local healthcare needs and challenges are consistent with those identified at the national and state level.

National Issues

Industry-Identified Workforce Challenges reported by the U.S Department of Labor in its “Partnership-Based Solutions to Healthcare Workforce Challenges” include:

Pipeline: Recruitment and Retention Issues:

- Increasing the Labor Pool
- Increasing Diversity
- Seeking workers from non-traditional labor pools, and
- Reducing turnover.

Skill Development Issues:

- Entry-level worker preparation
- Incumbent worker training, and
- Targeted and specialized skills development.

Capacity of Education and Training Providers Issues:

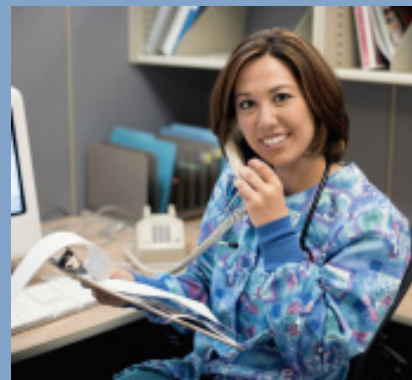
- Lack of academic and clinical instructors
- Lack of facilities and resources, and
- Lack of alignment between employer requirements, curricula and specialized skills areas.

State Issues/Strategies

Maryland’s Healthcare Workforce Strategy Initiatives include:

Attraction and Recruitment, including Military Transitions

- Project an image of healthcare as a viable career choice and give those with interest in the field the information they need to make good decisions about education and training options and services.
- Facilitate the transition of military healthcare personnel and spouses to practice in the State of Maryland.



“Montgomery County faces an additional challenge. The need for direct patient care workers, especially for those with advanced nursing degrees, competes against Montgomery County’s wealth of opportunities for health professionals in high technology, research and consulting positions – including those in the Federal sector and the Military.”

Systems Capacity and State Policy

- Expand the capacity of secondary and post-secondary education programs to increase the emerging pipeline of qualified healthcare graduates.

Retention

- Provide systems to help create a meaningful quality of work-life for those individuals working to heal others by applying management training programs to address and improve workplace culture and supervisory dynamics.

Professional Development

- Focus in career development by expanding career pathways to other populations and at all levels of employment (pre-employment, entry, technical, and professional); including advertisement, mapping, and coaching.

Local Montgomery County Issues

The Healthcare Workforce Subcommittee identified several overarching high priority issues: the labor force pipeline, education/training capacity, and workforce diversity.

1. Capacity/Pipeline for Healthcare Professionals

The committee reviewed local workforce needs and resources based on local data and organizational information. It also identified potential sources for future healthcare professionals at all levels, including nursing and allied health professions, along the continuum from junior and senior high school to undergraduate and advanced degree programs.

Identifying “pipeline” capacity involves:

- Identifying new people not currently in the field who are interested.
- Identifying current professionals who want to move up in their careers.
- Identifying people who are qualified but not currently practicing, including those moving from federal positions or those trained and licensed in other countries.

The anticipated growth in healthcare industry positions cannot be met effectively in the workforce and educational systems as currently designed. These disparate systems need to be aligned to create one market system, to improve access and coordination for employers and workers. Training offerings and employment opportunities have historically been fragmented and not coordinated in a central location, resulting in duplication of efforts and spending by education and industry and undersubscribed course enrollments. This impacts the speed with which critically needed personnel are brought into the healthcare workforce. In addition, demographic changes such as the aging of the current healthcare workforce and worker turnover require flexible strategies that engage non-traditional groups to consider healthcare as a career and support healthcare professionals to enhance their skills and progress to retain them in the field.



“Montgomery County must address the needs, issues, strengths and resources of the growing Hispanic community as we address healthcare workforce issues. This includes both the patient and the potential workforce resource perspective.”