

SKILLUP WASHINGTON

HEALTHCARE LEARNING CONSORTIUM



Recognizing and
Rewarding the
Role of Entry-level
Healthcare Workers

MAY 2017



SkillUp
WASHINGTON



Acknowledgments

SkillUp Washington is thankful to the JPMorgan Chase Foundation for funding the Healthcare Learning Consortium. Entry-level healthcare jobs play a vital role in the lives of health care consumers, the healthcare workforce and economy. These jobs offer fulfilling careers, and are gateways to next step careers for many. There are numerous opportunities to partner between employers, educators and community-based organizations working to advance the skills and career aspirations of health care workers.

Partners involved in the Healthcare Learning consortium, including the Washington Association of Community and Migrant Health Centers, SEIU 1199NW Multi-Employer Training Fund, SEIU 775 Benefits Group, Seattle Central College, Literacy Source, Cross Cultural Health Care Program and the Washington State Board of Community and Technical Colleges, are leading the way in developing new pathways and opportunities for frontline healthcare workers. SkillUp Washington is grateful for the time, effort and willingness to try new things that each partner put forth as part of this initiative.

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Entry-level health care jobs play a vital role in the lives of health care consumers, the health care workforce and economy. These jobs offer fulfilling careers, and are gateways to next step careers for many. There are numerous opportunities to partner between employers, educators and community-based organizations working to advance the skills and career aspirations of health care workers.



Healthcare Learning Consortium



1. Background

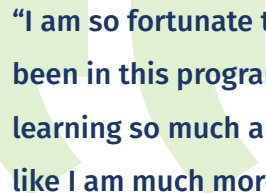
SkillUp Washington, a workforce funding collaborative at the Seattle Foundation, is grateful to the JPMorgan Chase Foundation for funding two significant capacity building initiatives. One of these initiatives, the Greater Seattle Sector Skills Academy, focuses on building the capacity of workforce development leaders and the overall workforce system and is featured in a separate [report](#).

This report describes the results of the second initiative, which was aimed at supporting the job retention and career advancement efforts of entry-level healthcare workers with low basic skills. Labor market data shows high demand for a variety of entry-level jobs in healthcare including Home Care Aide (HCA), Environmental Services (EVS) and Food Nutrition Service (FNS), as well as many mid-level jobs such as Medical and Dental Assistant.

Nationally, HCAs are considered one of the nation's "top jobs" and are considered a high demand job statewide with a projected 2.5% growth rate between 2014 and 2019¹. Roughly 27-30% of the SEIU 775 Benefits Group's 40,000 HCA members across Washington State speak a language other than English.

For many healthcare provider systems, housekeepers, janitors and other EVS workers, as well as FNS workers, constitute an important entry-level job for many low-skilled workers, including many refugees and immigrants. Service workers make up half of the over 12,000 eligible members across the SEIU 1199NW Multi-Employer Training Fund network. Of those workers,

¹ Washington Career Bridge: http://www.careerbridge.wa.gov/Detail_Occupation.aspx?soc=311011. Visited 5/16/2017



“I am so fortunate to have been in this program. I am learning so much and now feel like I am much more efficient in my job and able to do so much more to help patients. I also think that because I am in this training that the people I work with involve me much more in their work and take me and my ideas more seriously.”

20% work in the EVS and FNS departments, many who speak English as their second language, making up a significant segment of the healthcare workforce.

According to Burning Glass, the Seattle-Tacoma-Bellevue Metropolitan Statistical Area shows a much higher demand than average for Medical Assistants, and is the 7th highest hiring region in the country for this occupation. During the past year, Medical Assistants had the second highest number of job postings for healthcare jobs that pay between \$35,000 and \$75,000².

Partners in this work tested different models of skill building and career advancement for entry-level healthcare workers and collected project data to identify effective practices and make a case for scalable models. They also agreed to meet regularly to share lessons learned and engage in cross system strategies to align and coordinate resources.

As an organization dedicated to supporting workforce equity, SkillUp was particularly concerned that many low wage incumbent healthcare workers do not have an opportunity to access post-secondary training opportunities because they need to work, and require accessible, customized skill building strategies that address their circumstances. In addition, many low wage workers lack access or have limited access to training or scholarship benefits that pave the way for them to advance in their careers. Oftentimes the training they do receive focuses on tasks that they perform in their everyday work. To address these issues, SkillUp drew upon its partnerships with local healthcare training providers to form the Healthcare Learning Consortium (HCLC) and identify promising skill-building strategies which they wanted to grow or pilot.

² Labor Insight Jobs (Burning Glass Technologies), June 2017 Seattle Region Partnership analysis of healthcare industry

In particular, consortium members were acutely aware of the employment fragility of entry-level workers who need to meet new digital literacy demands in the healthcare labor force, such as those which required hospital workers to be proficient in using the new EPIC electronic medical record and operations system.



The pilot strategies were also inspired by the Washington State Board of Community and Technical College's (SBCTC) [Project I-DEA](#) (Integrated Digital English Acceleration), which promotes integrated learning opportunities to English Language Learners and teaches English in tandem with college and career skills. In turn, I-DEA was based on the SBCTC's [I-BEST](#) (Integrated Basic Education and Skills Training) program, which integrates instruction using team teaching to combine college and career skills with job training.

An aspiration of HCLC partners was that incumbent workers who do not yet have digital literacy, English language and/or basic skills to pursue I-DEA or I-BEST pathways could develop these skills while working, leading to more job security and more opportunities to advance in their careers.

SkillUp convened the HCLC in the summer of 2015. The group has been meeting since then on a quarterly basis to review and discuss the results of their pilot projects and career advancement strategies. Consortium meetings serve as a venue for HCLC partners to leverage or align resources, collectively address challenges that arise, and share lessons learned.

The HCLC partners include the Washington Association of Community & Migrant Health Centers (WACMHC), the SEIU 1199NW Multi-Employer Training Fund (Training Fund), Seattle Central College (SCC), SEIU 775 Benefits Group, Literacy Source, Seattle Central College (SCC), the Cross Cultural Health Care Program (CCHCP), and the SBCTC.

Each of the partners brings a rich array of skills, experience and connections within the healthcare sector. For example, [WACMHC](#) is a statewide industry association consisting of 28 community and migrant health center employer members, and is one of



52 State and Regional Primary Care Associations across the country. Among its many services are providing education and training services to its Community Health Center members, some of which have garnered national attention as one of the first healthcare apprenticeship programs for Medical Assistants in the United States.

The [Training Fund](#) has an impressive history of supporting innovative education and career development needs for healthcare workers and for implementing training programs that meet the needs of industry and ensure high quality patient care. Negotiated through a joint labor-management agreement in 2008, the Training Fund provides bargaining unit employees from eight Puget Sound healthcare employers skill development and career advancement opportunities. The Training Fund has a strong history of working with local community colleges, such as [SCC](#), and community organizations such as [Literacy Source](#), to further support the needs of adult learners through instruction, basic skills development and tutoring.

The [SEIU 775 Benefits Group](#) is a nonprofit school which trains 40,000 Home Care Aides (HCAs) each year in Washington State to deliver high quality care and assistance to older adults and people with disabilities. The SEIU 775 Benefits Group is a national leader in competency-based adult learning, connecting rural and isolated workers to training networks and support, and advanced training including their Advanced HCA Apprenticeship program.

The HCLC membership also includes learning partners such as the SBCTC and CCHCP. As noted above, the [SBCTC](#) has forged training partnerships that engage students in courses blending English language instruction with college and career skills, including programs such as I-DEA. The [CCHCP](#) is a nonprofit training and community organization that serves as a bridge between communities and healthcare institutions to advance quality health care which is culturally and linguistically appropriate. CCHCP supports the work of ethnically and culturally diverse medical interpreters in healthcare settings.

“I would tell all clinics to give people a chance to be in this program. I am better at my job now and have lots more questions that I ask in order to make sure that I am using my new skills differently to help patients get services faster and from someone who really cares about them. I wish I had done this earlier because I know my employer and the other staff I work with are happy that I am doing so well, combining work and study, and using what I learn right away in my job. “



The above organizations are dedicated to promoting a culturally diverse healthcare workforce and to helping entry-level healthcare workers achieve family-sustaining wages and rewarding careers. All believe their services will contribute to better care for healthcare consumers and economic benefits to incumbent workers and organizations where they work. In addition, all feel that membership in the HCLC will increase their organization’s knowledge and access to other resources and promising practices used to support entry-level workers.

Local and national interest in the work underway has been strong as organizations across the nation are looking for effective ways to support the job retention and career advancement of entry-level healthcare workers. In order to develop their own understanding of how different strategies can support the job retention and career advancement needs of healthcare workers with low basic skills, HCLC partners piloted the following four strategies and shared the results with each other: registered apprenticeship; on-the-job learning and coaching; use of digital and online learning platforms, including hybrid delivery models; and customization of English as a Second Language (ESL) curriculum for incumbent healthcare workers.

The research approach, pilot project descriptions, results, learning and next steps emerging from this work are described in the balance of this report.

2. Study Methods

Data sources for this report include: (1) Quarterly reports from The Training Fund, WACMHC and the SEIU 775 Benefits Group including demographic information and training enrollment and completion results; (2) HCLC convenings and meeting notes; (3) Interviews with a sample of WACMHC apprentices and mentors; (4) Interviews with Training Fund members engaged in the EPIC training, ESL and Basic Skills training; and (5) Information provided by EVS and WACHMC mentors, employer and ESL instructors.

3. HCLC Pilot Projects

JPMC grant funds supported the piloting of three different incumbent worker healthcare strategies and HCLC convenings, which were facilitated by SkillUp. Each of the pilot strategies prioritized services to low income healthcare workers, primarily refugees, immigrants and entry-level workers. Many need to build their technology, English and workplace communication skills in order to advance in their jobs or to have the skills necessary to enter I-DEA, I-BEST or other community and technical college Allied Health pathways.

The primary aims of the three healthcare pilots and the HCLC are outlined below.

Healthcare Pilot Project Descriptions

(1) Work-based Learning Strategy to Prepare Entry Level Healthcare Workers to be Medical Assistants

WACMHC utilized grant funds to expand their [Medical Assistant Registered Apprenticeship](#) (MARA) program. Participants in the MARA program work for 12 months as paid, full-time employees in a healthcare setting with one-on-one guidance and coaching from a Medical Assistant. The vast majority of MARA participants are incumbent workers at community health clinics working at more entry level such as MA-Registered or Certified Nursing Assistant (CNA). The program requires 364 hours of supplemental

unpaid coursework, both online and through in-person weekend lab days with an expert instructor. Student cohorts progress through the online coursework together and interact with one another on discussion forums. After completing the program, students take the Certified Clinical Medical Assistant (CCMA) test to earn both state and national certifications.

(2) Work-based Learning Strategies to Promote the Digital and Basic Skills of Entry-level Hospital Workers

The Training Fund, Literacy Source, South Seattle College and the SBCTC's Job Skills Program worked with employer partners such as Northwest Hospital to offer online learning opportunities for hospital Environmental Services (EVS) and Food Service workers to build their English and digital literacy skills. Northwest Hospital employees were paid for their time to take a comprehensive tuition-free 22-hour computer literacy course that provided them with the skills to master the EPIC technology and system.

Work-based online learning opportunities designed and implemented by the Training Fund, Literacy Source and SCC were offered to hospital EVS and Food Service workers from University of Washington Northwest Hospital, Swedish Medical Center, Highline Medical Center, University of Washington Valley Medical Center and Kaiser Permanente WA (formerly Group Health). Modules were designed by SCC to build workers' digital literacy and English Language Skills, and to help prepare workers for using Canvas, the online learning management system used by all of the community and technical colleges in Washington State. SCC based the curriculum on promising strategies from the SBCTC's Project I-DEA, with the intention that workers would be more likely to enroll in advanced training once they felt comfortable using this system. Literacy Source provided face-to-face instruction onsite at the hospitals two days a week.

“This work changes the way people see you. They don’t expect you to interpret for patients so much, though I still help with that, or to be in the background doing less important things, you are more like a true member of a healthcare team.”

(3) Digital Learning Platform Strategy to Support the ESL Skills of HCAs who are English Language Learners

The SEIU 775 Benefits Group set out to test the effectiveness of the Xenos digital learning platform with HCAs, an online game-based learning platform that includes various competency-based English learning modules. The assumption was this project would provide useful information about the pros and cons of using a digital learning platform to build the basic and ESL skills of HCAs.

Healthcare Learning Consortium

The HCLC meetings were designed to serve as a venue for members to share their experiences and coordinate and leverage resources. The intent was that HCLC members would serve as sounding boards and troubleshooting strategists for their peers.

4. Results

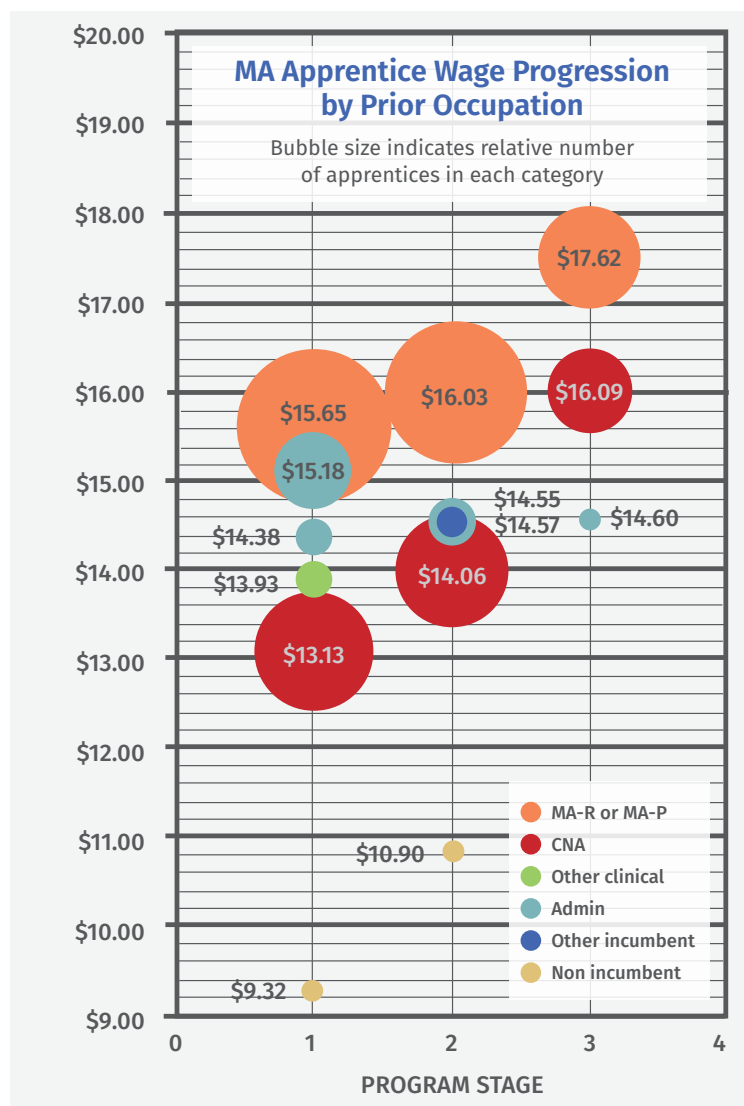
The results of the above strategies are described below. Quotes from persons associated with the WACMHC and Training Fund pilot projects are presented as well.

(1) Work-based Learning Strategy to Prepare Entry Level Healthcare Workers to be Medical Assistants

- Since the program began, WACMHC has enrolled 113 apprentices in the MARA, 50 of whom were enrolled as part of the HCLC-funded expansion. Another 25 are anticipated to start in summer 2017. To date, 97% of MARA participants have completed the program or are on schedule to complete. The overall passage/certification rate for the CCMA exam is 88% and test results are outstanding for some students. The program currently has an 81% first-time pass rate for the CMA exam, compared to 73% nationwide.
- WACHMC also launched a small dental apprenticeship pilot program. To date, 12 dental apprentices are enrolled in the program and initial responses from employers indicate that they value the quality of the program.

“I feel like this is just the beginning of my new learning. I am confident that I will pass the state certification. This makes me want to stay in this occupation but to grow even more. I had been worried before I started because I had not been in school for a long time, but this is the best way to learn. You study at home, learn new lab techniques with others, practice what you have learned at work and then have people who are there to advise you and let you know how you are doing and where you need to improve.”

- WACMHC’s impressive program completion and MA certification passage rate is garnering attention and additional funding. For instance, WACMHC received grants from the Workforce Development Council of Seattle-King County and Washington State Department of Labor & Industries to support staff salaries, expand its apprenticeship programs and network of employers, develop a pre-apprenticeship program and design a Behavioral Health Coordinator apprenticeship.
- Early wage progression results show steady increases in wages for incumbent workers who enrolled in the MARA program. As the following chart demonstrates, incumbent workers from a variety of jobs experienced wage progression over the course of their time in the program.



- WACMHC is engaged in many different expansion efforts. The program has rebranded the apprenticeship and training arm of WACMHC as In-REACH: the Institute for Rethinking Education and Careers in Healthcare. WACMHC also joined the HCAP funded National Center for Healthcare Apprenticeships and is pursuing national recognition of the MA Apprenticeship Standards. It is also putting a pilot in place to engage a cohort of recent high school graduates into the MA Apprenticeship at Providence Hospital sites. In addition, WACMHC is partnering with South Seattle College (SSC) to offer college credit to apprenticeship completers. MA apprentices will receive a total of 56 credits for the program (36 RSI and 20 OJT); completing an additional 14 credits online or at SSC will result in an AA degree, and credits can be transferred to other Washington colleges.



(2) Work-based Learning Strategy to Promote the Digital and English Language Skills of Entry-level Hospital Workers

Digital Skills

“I learned so much in the EPIC training. I was able to use a computer for the first time, and get over being scared of the new changes in my job. I am really good at my job. I am not sure without this training I would still be employed.”

- Fifty-seven (57) incumbent housekeepers at Northwest Hospital participated in the 22 hour pre-EPIC computer training. The Return on Investment (ROI) of providing pre-EPIC training was strong; 100% of the housekeepers used the computers to access EPIC on a daily basis, and increased their digital skills.
- Room turnover times at Northwest Hospital decreased, as did patient admission times from the emergency room. Northwest Hospital’s implementation of EPIC was regarded as one of the smoothest by EPIC Implementation Leaders who were introducing the technology at different hospitals.

Digital and English Language Skills

Canvas is an on line platform which teachers use to present their course content. Students access these materials through a portal. This gives them an opportunity to learn on their own time and repeat coursework if they need more practice.

- SCC prepared a Canvas-based online curriculum contextualized for work in a hospital setting. The curriculum embedded digital skills which were most pertinent to incumbent worker jobs, and was designed for students with CASAS reading levels of 3 and/or 4. By helping students learn Canvas, the learning management system which students use to access and complete online, hybrid, and web-based classes, SCC was paving the way for incumbent workers to continue their education.
- Literacy Source provided face-to-face instruction two days a week to students enrolled in the Canvas-based class, and supplemented curriculum to best serve individual needs. The face-to-face instruction was key to building students’ digital skills for working online.
- One hundred eleven (111) EVS workers enrolled in digital literacy and/or basic skills training, including pre-EPIC training at University of Washington Northwest Hospital



“I have always wanted to learn more English. And to think about getting more training. Now I have a start and I think I will soon be able to go to college.”

and online ESL/Canvas and non-Canvas training at Swedish Medical Center, University of Washington Northwest Hospital, Highline Medical Center, University of Washington Valley Medical Center and Kaiser Permanente WA. EVS workers who participated in EPIC and other work-based English language classes gained confidence, and improved their communication and self-advocacy skills. Gaining new skills had an impact on the confidence and career goal setting experiences of workers, leading some to explore next step education and promotional opportunities.

- 100% of Canvas students increased their digital literacy skills.
- Fifty-four incumbent workers with CASAS reading levels ranging from 1-6 enrolled in the new SCC Canvas module (13 students) and other onsite ESL classes (41 students). Through the support of this project, the Training Fund began issuing Chromebooks to students who complete the Canvas class or log 40 class hours and demonstrate independent computer skills. As of June 2017, forty-five of the 54 were actively working towards earning Chromebooks and 40 students earned a Chromebook. These students are already using the vocabulary needed to complete assignments and online navigation, and are gaining expertise in using the integrated, contextualized vocabulary. They are building on their earlier instruction to focus more on workplace communication issues and situations that require negotiation, e.g. how to request time off, or respond to unreasonable requests.
- 83% of students who took mid-year testing increased their reading or writing scores.
- Instructional strategies were put in place to promote the career advancement of EVS workers, some of whom were interested in patient care, office or lead positions and Food Services, and Food service workers, some of whom were interested in becoming leads, chefs or patient care workers. These included helping students explore their own strengths and existing skills, and learn what they would do to pursue different careers. Students also received education and

advancement support to progress from learning general communication skills to being well versed at articulating their professional strengths and competencies, and realizing their potential to advance within the hospital environment. They engaged in independent learning and other activities needed to promote these efforts.



(3) Digital Learning Platform Strategy to Support the ESL Skills of HCAs who are English Language Learners

The SEIU 775 Benefits Group strategy was suspended due to low recruitment numbers, and to an increasing awareness that the model, which required HCAs to attend a class at a non-work location, was not practical. Funds were diverted instead to devising strategies which would support the transition of HCAs to the WACMHC Medical Assistant pathway.

Summary Demographics of Persons Served in Pilot Projects

Across the three pilot strategies, a total of 226 individuals received training. The majority were women (82%) and 18% were men. More than three-quarters (83%) were 30 years old or older. Eighty-eight percent (88%) were people of color, with just under half (47%) identifying as of Spanish/Latino/Hispanic origin.

Healthcare Learning Consortium

The HCLC provided many opportunities for HCLC members to devise strategies to better integrate their work. The cross system (nonprofit, college, labor-management and employer) relationships formed during this work will be sustained and grown in the future. This cross system learning and sharing to date underscores the value of establishing a community of practice which invites new ideas and encourages cross system collaboration. Examples follow:

- WACMHC is working with the Training Fund as a conduit for helping workers transition into acute care/hospital environments.



- WACMHC and the SEIU 775 Benefits Group are designing career pathway options for HCAs interested in working as Medical and/or Dental Assistants at community clinics across the state.
- Literacy Source shared their experience in providing tutoring and other support to workers requiring basic skills and ESL instructional assistance – resources that are, and could be a benefit to, many other community-based organizations.
- The CCHCP shared information about cultural competence, and resources to support equity and inclusion in health services with all partners.
- All HCLC partners are developing cross-referral and screening procedures, thus expanding the types of healthcare pathways that clients can access in a streamlined, coordinated fashion.

5. Learning

The WACMHC model is strong and scalable

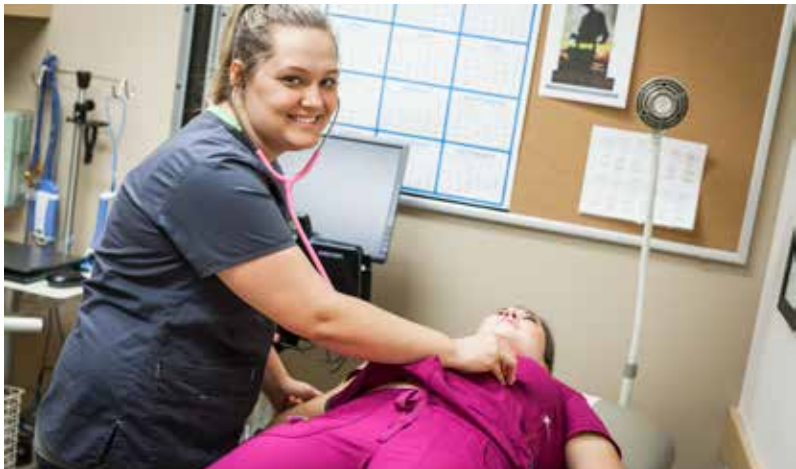
WACMHC has successfully engaged employers and trained apprentices, and the labor market demand for Medical Assistants is great. Every state has federally qualified health centers, like the one WACMHC belongs to, and every state has healthcare organizations, such as those that hire home health care workers, which would benefit from access to the MA Apprenticeship model. Furthermore, every state has community and hospital-based clinics, where there is a great need for Medical Apprentices.

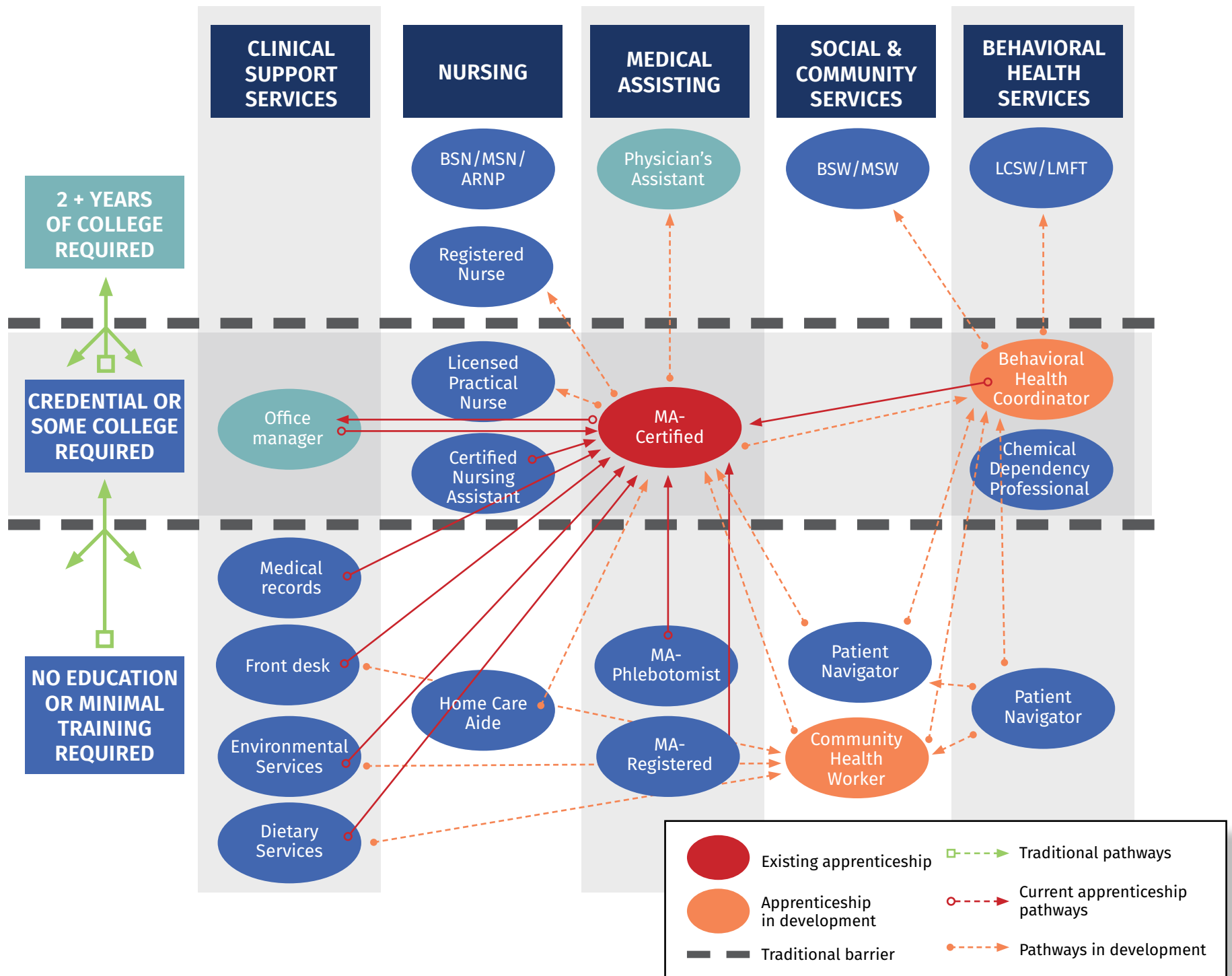
Consequently, this program is well-positioned to grow. There is a strong body of support for scaling the WACMHC model, including from national labor-management organizations that promote innovation and quality in healthcare, and the Department of Labor's Office of Apprenticeship.

The WACMHC model is a promising career pathway

As the following chart shows, there are multiple existing and developing pathways into the MARA program from other entry-level occupations within community clinics, such as Front Desk, Dietary Services and MA-Phlebotomist. The MARA program is also poised to serve as a pathway into advanced training and employment, including Physician's Assistant, Registered Nurse and Behavioral Health Services.

“Because I have learned more English I am more confident at work. Someone told me that I was supposed to do some tasks that I was not responsible for. For the first time I stood up for myself, and explained that is not something I needed to do. They listened because I could protect myself.”





Training Fund **Incumbent Workers**

Strategies to allay employer concerns about liability and worker preparedness are important to address



WACMHC is responding to employer liability concerns about employing apprentices who are not yet fully credentialed by developing detailed guidelines about what apprentices should and should not be doing at each stage of the program, and is developing a pre-apprenticeship program to provide basic training to apprenticeship candidates before they are hired by a health center.

Labor-management partnerships are instrumental to implementing multiple partner worksite learning opportunities

As a labor-management partnership, the role that the Training Fund plays in creating equitable workplace based training programs is important. This work includes, but is not limited to: (1) partnering with participating employers to identify workforce needs across the healthcare system to inform workforce planning strategies; (2) aligning supports with workers' goals to maximize the breadth of education benefits available to them under their union contract; (3) providing career and education planning to determine and prioritize the skill-building needs of workers; (4) developing, in partnership with employers, curricula and career coaching strategies to address these needs; (5) recruiting workers in partnership with union organizers and managers; and (6) offering training that is convenient for workers and creates access, including technology-enabled space at the worksite.

“Combining work and English classes is hard and tiring. But I come to class as much as I can, and now I use the computer at home to study. This is going to be a long process, but I am not giving up. Someday I want a better job.”

Adaptable course schedules, 1:1 and small group instruction, and employer engagement were essential approaches used by the Training Fund and Literacy Source

The positive results of investing in the pre-EPIC training were significant, underscoring that personalized and intense 1:1 and small group strategies are instrumental to retaining entry-level staff when new or emerging technology is a requirement of employment. Scheduling classes at times when workers could attend was the most challenging logistical problem for this strategy. For this reason Literacy Source worked with management to develop schedules that would accommodate classes for the many shifts at a hospital, including weekends. This approach is necessary to engage entry-level workers who need customized instruction to improve their English and technology skills.

“I never knew some of the most important words in my job, but now I am better at using these words. I still have to practice on the computer and do more reading and writing. I feel like I am more equal to other workers now on the computer, but still feel shy talking or asking questions, but I at least do that now. One of my co-workers even asked me my opinion about something. That never happened before.”

-- Northwest Hospital Worker

Workers who participated in all HCLC training increased their confidence, work skills, and self-identify as students, lifelong learners and/or persons who had next step career aspirations.

The importance of entry-level workers engaging in training that increases both their work skills, awareness of, and opportunities for advancement cannot be underestimated. These experiences contributed to their confidence and effectiveness as health care team members, and awareness of the steps they would need to take to advance in their careers. These efforts also sent a positive “signal effect” to colleagues that they were individuals who played a vital role in the workplace, deserved respect, had opinions, and demonstrated drive by their impressive commitment to work and learn.

Effective recruitment strategies included being on site before, during and after the day at partner hospitals to discuss the project with workers and employers, increasing the visibility of the project.

The strong worksite presence and frequent in person contact with workers and program advocates (including EVS supervisors,

union delegates and organizers) helped staff to market the training programs. Frequent conversations among pilot project staff and workers built a greater understanding of the skill-building and economic benefits of training. Staff also helped workers see how the training could be integrated into their busy lives, as many had significant family obligations or second jobs.



Time and practice contributed to student reading, writing, computer and literacy skill gains

The most successful ESL and basic skill building instructional strategies included face to face time with incumbent workers and their Literacy Source instructor to practice vocabulary, and troubleshoot computer-related technical difficulties. A learner-centered focus by instructional team members was particularly effective, as were efforts to build the transferable skills of workers, such as professional email communication.

Many workers require long term educational interventions

All partners are continuing to look for funding opportunities to support the ongoing skill-building needs of entry-level workers, knowing that for many this will require taking multiple years of study to be ready for I-BEST or other college programs. Multi-year interventions that support these types of strategies are essential to put in place.

HCLC partners observed that, in general, students often need at least 100 hours of study to advance one skill level (in reading, for example). In regards to digital skills, however, many factors contribute with wide variations depending on students' starting point, experience, prior level of education, English skills, age and access to practice. Contextualized learning for specific tasks can show skill gains quickly, but the above factors all contribute. With foundational reading and digital skills, students can gradually transition to more independent and hybrid learning environments.

Designing curriculum based on worker and employer feedback was effective at building worker problem solving and self-advocacy skills

The module created through the Training Fund/Literacy Source/SCC partnership for the canvas class “Workplace Communication” was particularly effective. This class covered topics such as: Interpersonal Communication (verbal and nonverbal); Clarifying and Checking Understanding, Using Polite Language to Make Requests and Refusals; Self-Advocacy and Resolving Conflicts and Solving Problems in the Workplace. All topics were identified by employers and workers, and were relevant to the jobs of students in the class. Students who were interviewed said that they appreciated and used this training in their everyday communications with peers and supervisors.



Ensuring that entry-level workers have opportunities to build their skills is essential to creating a diverse healthcare workforce

All HCLC partners are aware of the high level of competition for hospital jobs, most of which have good wages and benefits. Often internal candidates are competing with applicants who have years of industry experience. HCLC members are cognizant that by promoting diversity along career pathways, there will be benefits to healthcare consumers and workers alike. A review of the pilot projects reveals that looking at these challenges through an equity lens is essential to ensure that ample resources (ESL, access to computers, internet, career coaching) are available to support the skill-building needs of incumbent workers in workplace settings.

The resources available to workers through the collectively bargained Multi-Employer Training Fund maximize employers’ contributions to bring a suite of benefits to workers yet these resources must be paired with accessible training. Workers may be required to change their schedule or even reduce their hours to progress at a faster pace. Even when all partners contribute their funding resources to the effort, the reality for workers still remains. Without additional time to focus on studies,

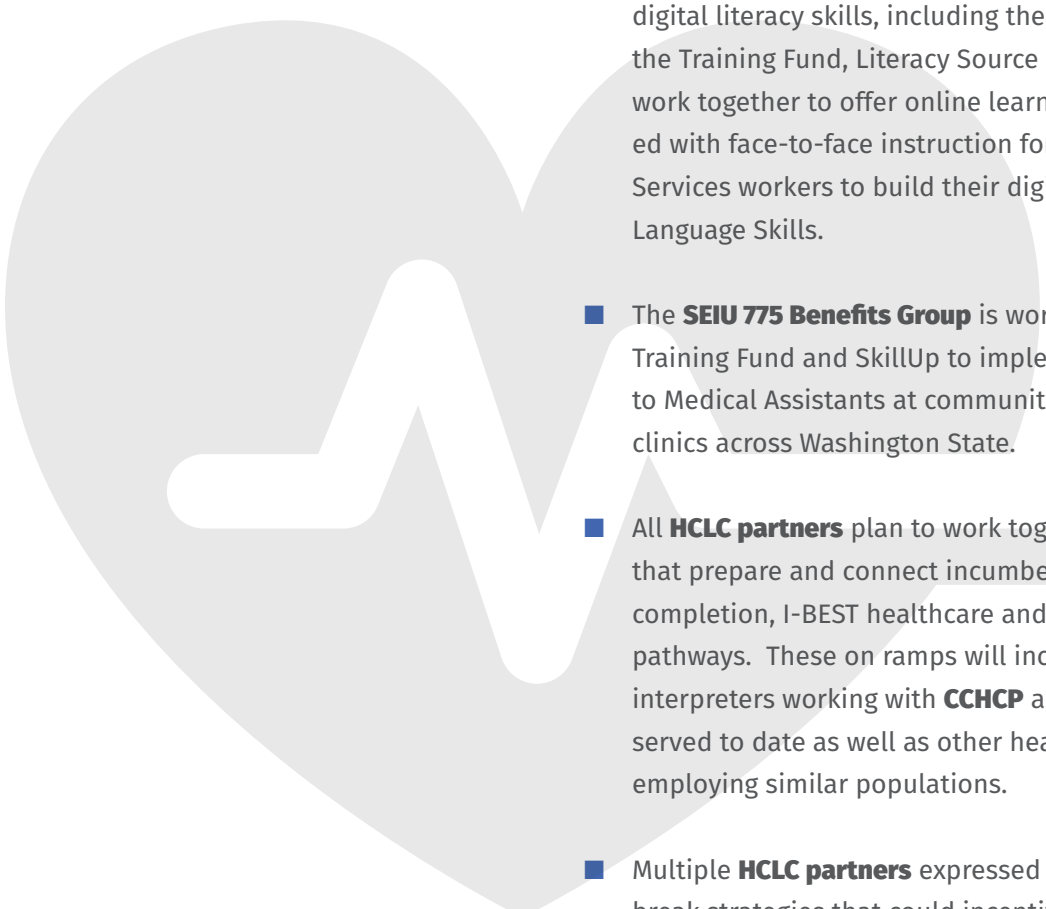


gains will be consistent with time available to dedicate toward learning. Models and funding that can free up time, including stipends, release time and backfill can make a big difference. Partnerships that routinely combine the resources of college, employer, community-based and labor-management-focused partners need to be recognized as integral Lines of Business (LOB), rather than “one-off” pilot projects.

6. Next Steps

- **WACMHC** is working with SkillUp to establish a presence as a national entity, i.e. “Institute” responsible for training, and sharing materials with other entities nationwide who want to implement MA or Dental Assistant apprenticeships. In this role WACMHC will provide states with guidance in building pipelines to MA apprenticeships. Technical assistance will include sharing tools, products, data sharing systems, and findings from the MA Apprentice work underway. Expansion of the MA model to other healthcare pathways and venues, such as tribal organizations and hospital systems are also a next step priority. Through SkillUp, WACMHC is connecting with the National Fund for Workforce Solutions’ [CareerSTAT](#) initiative and will be poised to learn from other healthcare employers across the country who prioritize skill development investments in frontline healthcare workers.

In addition, WACMHC is working with the State Office of Superintendent of Public Instruction to explore the possibility of offering healthcare pre-apprenticeships, either through regional Skill Centers or stand-alone programs for high school seniors and recent graduates. WACMHC is also establishing a partnership with the Tulalip Tribes with the dual intention of engaging tribal health centers as employers and tribal members as apprentices. Finally, WACMHC has established a partnership with the Seattle Colleges (South Seattle College’s Georgetown campus) to build college credits into the MARA program’s existing supplemental coursework.

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- **The Training Fund** is striving to build a next-step career bridge component to the online curriculum available for workers. SCC is designing an intermediate ESL course with concepts relevant to entry-level acute care jobs such as Nursing Assistant that will support workers into hospital patient care pathways after they have built foundational digital literacy skills, including the use of Canvas. In addition, the Training Fund, Literacy Source and SCC will continue to work together to offer online learning opportunities supported with face-to-face instruction for hospital EVS and Food Services workers to build their digital literacy and English Language Skills.
 - The **SEIU 775 Benefits Group** is working with WACMHC, the Training Fund and SkillUp to implement a pathway for HCAs to Medical Assistants at community and hospital-based clinics across Washington State.
 - All **HCLC partners** plan to work together to build on ramps that prepare and connect incumbent workers to high school completion, I-BEST healthcare and other allied healthcare pathways. These on ramps will include engaging the interpreters working with **CCHCP** and entry-level employees served to date as well as other healthcare industry partners employing similar populations.
 - Multiple **HCLC partners** expressed an interest in exploring tax break strategies that could incentivize employer utilization of incumbent worker skill-building training programs. They also advocated increasing employer support for work-based career advancement strategies that compensate incumbent workers and engage them in tuition free, accessible, work-based training.
 - **SkillUp** will continue to foster public-private collaborations to support workforce development programs designed to meet the unique needs of entry-level healthcare workers and the health care industry, and to disseminate best practices.



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