A Strategic Look at Building the Public Health Workforce of Tomorrow

Prepared for:
AK Public Health Summit
January 23, 2020
Alaska AHEC
Area Health Education Centers

GROWING OUR OWN CLOSE TO HOME
AHEC PROGRAM GOALS

• **Diversity**: Preparing a diverse, culturally competent primary care workforce representative of the communities we serve

• **Distribution**: Improving workforce distribution throughout the nation, particularly among rural and underserve areas and populations

• **Practice Transformation**: Developing and maintaining a healthcare workforce that is prepared to deliver high quality care in a transforming health care delivery system with an emphasis on rural and underserved communities
YOUTH PIPELINE PROGRAM
PARTNERSHIPS

• Health Science “Strand” of ANSEP Youth Academies
• Youth Camps for Allied Health & Behavioral Health at Ilisagvik College
• HOSA Club: Coordination and Chapter Advising
• Career Exploration Days at Fairbanks Memorial Hospital
• Mental Health First Aid, First Aid, CPR, Basic Life Support & Bloodborne Pathogen Certifications Statewide for Youth
BEHAVIORAL HEALTH CAREER PATHWAYS

• In response to industry needs, AHEC began to focus on Behavioral Health Workforce
  – Investments from Alaska Mental Health Trust Authority and Alaska Department of Education and Early Development via Carl Perkins Postsecondary Partner Grants
  – Created curriculum which is now available for SALE:
    • One week camp for students ages 16-18
    • Focus on BH Topics including substance abuse, self-care, grief, mental illness, career opportunities
    • Mental Health First Aid Certification
    • Optional College Credit
  – Since 2015, 21 Behavioral Health Camps or Intensives were implemented in 10 communities across the state of Alaska
    • A total of 329 students ages 16-19 took part from over 60 communities across the state
    • 88% from rural Alaska

• Evaluation Data
  – 80% reported an increased interest in BH after the camp
  – 97% reported an increase in knowledge about BH after the camp
  – 100% of participants are now certified in Mental Health First Aid
  – 17 past participants earned dual credit for introductory Psychology, Human Services or Social Work courses

• Long-term Tracking
  – 50% enrolled in higher education
  – College majors for these students include: Social Work, Human Services, Psychology, Nursing Science, Health Sciences, Dental Assisting, Radiologic Technology, Special Education and Early Childhood Education
  – First student from 2015 pilot cohort graduated from Menlo University with BA in Psychology in May 2019!
PATH ACADEMIES

- Created by the South Central Alaska AHEC (SC AHEC) in 2017 as an innovative pre-apprenticeship program to prepare interested adults and youth for healthcare apprenticeships
- Partnership with Alaska Department of Labor and Workforce Development and Alaska Primary Care Association
- One Week Intensive
  - 30-35 hours
  - Includes a certification
    - Mental Health First Aid
    - Heartsaver CPR or Basic Life Support
    - Bloodborne Pathogens
  - Targets Youth or Adults
  - Focuses on entry-level healthcare positions
- 653 Alaskans trained in over 50 PATH Academies across the state of Alaska
- Train the Trainer Course
- New 3 week version (based on industry needs) focused on Direct Support Professionals
What is it?

2-year program designed to supplement and broaden a student's healthcare training. Any student enrolled in their final two years of an Alaskan healthcare program can apply. An abbreviated form of the program, requiring half as many hours, may be available to students enrolled in a degree or certificate program taking two years or less.

Basic Requirements

Each year, students are required to complete 40 hours of classroom or online training (didactic) and another 40 hours of community-based learning out in the field. Students will have the opportunity to complete their community-based learning in an Alaskan rural community or with urban underserved populations.
In response to a market of students from the “Lower 48” interested in clinical/practicum work in rural Alaska, the RIIN program was established.

This is a social enterprise combination of rural healthcare and Alaskan tourism where students pay their own way for experiential learning which is then reinvested in Alaska Health Workforce Grow Our Own Initiatives

Since the pilot in 2016 there have been 55 participants. Open to graduate and undergraduate students from all health related disciplines
FOR MORE INFORMATION

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A Strategic Look at Building the Public Health Workforce of Tomorrow – Mat-Su

Prepared for: AK Public Health Summit
January 23, 2020
Guiding Principal -- Systems Perspective
Tools used to enhance Mat-Su Workforce

- 274 Academic & 83 Vocational Scholarship- totaling $1.76 million
- Scholarships as a strategic tool to meet healthcare occupational gaps in Mat-Su
- Provided SHARP Loan Repayment funding for 8 BH positions in the Mat-Su
- Convenings to bring together healthcare and human services employers, educators, and training providers to create a Workforce Development Network
- Target Wellness and Discovery Grants to address training needs in Mat-Su and some of the recommendations from the Mat-Su Workforce Development Assessment and Plan.
Who are the Low Risk Bucket Students?

• Most undergraduate (77%)
• Most go to University of Alaska (66%)
• Top three careers are:
  • Nurse (37%)
  • Behavioral health Provider (17%)
  • Advanced Nurse Practitioner (14%)
Mat-Su Assessment and Plan

http://www.healthymatsu.org/Learning/mshf-reports
Overall Plan Purpose

Employers: Determine the workforce needs of employers in the health and human service sector in Mat-Su, including the challenges and opportunities that exist to attract needed workers.

Residents: Identify the strengths and challenges that residents face in entering the health and human services workforce in Mat-Su at a population level.

Educators and Trainers: Identify the gaps and possible opportunities for health and human service education/training programs that serve Mat-Su residents.
Established Workforce Steering Committee with 29 members
Drafted report structure
Conducted extensive quantitative research and analysis

1st Steering Committee Meeting focused on purpose and planning
Built NEW models for data
Drafted labor assessment

2nd and 3rd Steering Committee Meeting on qualitative and quantitative data
Facilitated 2 discussion groups in Wasilla and Palmer with 19 participants
Conducted 17 executive interviews
Reviewed resident survey with 152 responses

June
July
August
September

Final Steering Committee Meeting plan work session
Revised report
Submitted report and plan to MSHF
Overview

Part I: Mat-Su Regional Health and Human Services Workforce Development Assessment
- Mat-Su Borough Demographic and Economic Analysis
- Mat-Su Borough Health and Human Services Labor Dynamics
- Mat-Su Health and Human Services Occupation Demand Assessment

Part II: Mat-Su Regional Health and Human Services Workforce Development Plan
- Vision Statement
- Goals and Strategies
## Demographics: Population Projections (‘17-25)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Current Population</th>
<th>Projected Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; Age 20</td>
<td>4,239 (+13%)</td>
<td>projected increase</td>
</tr>
<tr>
<td>Age 20-39</td>
<td>4,914 (+18%)</td>
<td>projected increase</td>
</tr>
<tr>
<td>Age 40-59</td>
<td>2,064 (+8%)</td>
<td>projected increase</td>
</tr>
<tr>
<td>Age 60-79</td>
<td>5,452 (+33%)</td>
<td>projected increase</td>
</tr>
<tr>
<td>Age 80+</td>
<td>1,313 (+72%)</td>
<td>projected increase</td>
</tr>
</tbody>
</table>

Mat-Su experiencing similar demographic changes to Alaska

- Aging population, with projected high growth in population age 60+ (2017-2025)

Unlike Anchorage, projected growth in young adult population in the Mat-Su (2017-2025)
Labor Dynamics: Labor Force/Employment

Roughly 45% of employed residents likely working outside of the Mat-Su
Labor Dynamics: Average Monthly Wages

<table>
<thead>
<tr>
<th>Sub-Industry</th>
<th>Mat-Su</th>
<th>Anchorage</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Services</td>
<td>$4,106</td>
<td>$4,832</td>
<td>-$726</td>
</tr>
<tr>
<td>Human Services</td>
<td>$2,028</td>
<td>$2,404</td>
<td>-$376</td>
</tr>
<tr>
<td>Health Care and Human Services</td>
<td>$3,531</td>
<td>$4,451</td>
<td>-$919</td>
</tr>
</tbody>
</table>

Mat-Su workers earning less than Anchorage workers, on average:
- Mat-Su health services workers earning 15% less than Anchorage workers (2017)
- Mat-Su human service workers earning 16% less than Anchorage workers (2017)
Methods to Project Workforce Demand

Latest occupation projections (2016-2026)

DOLWD model (statewide)
Health & human services projections heavily influenced by demographic change

McDowell Group extrapolation for Mat-Su, including adjustment to reflect anticipated development occurring in 3-5 years

Anticipated infrastructure developments (Maple Springs, Southcentral Foundation, MSRMC, etc.)
Leading Health Services Occupations

Current Worker Count, 2016

- Registered nurses: 625
- Nursing assistants: 175
- Medical assistants: 319
- Healthcare support workers, all other: 90
- Home health aides: 236
- Dental assistants: 183
- Medical secretaries: 166
- Medical and health services managers: 64
- Dental hygienists: 85
- Licensed practical and licensed vocational nurses: 46

Total 3,210 workers in Health Services (2016)

Projected Annual Openings, 2016-2026

- Registered nurses: 37
- Nursing assistants: 26
- Medical assistants: 19
- Healthcare support workers, all other: 14
- Home health aides: 14
- Dental assistants: 14
- Medical secretaries: 9
- Medical and health services managers: 9
- Dental hygienists: 5
- Licensed practical and licensed vocational nurses: 4
Leading Human Services Occupations

### Current Worker Count, 2016

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Worker Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal care aides</td>
<td>1,352</td>
</tr>
<tr>
<td>Childcare workers</td>
<td>549</td>
</tr>
<tr>
<td>Social and human service assistants</td>
<td>74</td>
</tr>
<tr>
<td>Child, family, and school social workers</td>
<td>143</td>
</tr>
<tr>
<td>Community and social service specialists, all Other</td>
<td>58</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3,475 workers in Human Services (2016)</strong></td>
</tr>
</tbody>
</table>

### Projected Annual Openings, 2016-2026

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Openings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal care aides</td>
<td>127</td>
</tr>
<tr>
<td>Childcare workers</td>
<td>38</td>
</tr>
<tr>
<td>Social and human service assistants</td>
<td>13</td>
</tr>
<tr>
<td>Child, family, and school social workers</td>
<td>13</td>
</tr>
<tr>
<td>Community and social service specialists, all Other</td>
<td>9</td>
</tr>
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**Total 3,475 workers in Human Services (2016)**
### Behavioral Health Occupations by Licensed Professional Shortage

#### Current Worker Count, 2016

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental health and substance abuse social workers</td>
<td>45</td>
</tr>
<tr>
<td>Mental health counselors</td>
<td>57</td>
</tr>
<tr>
<td>Substance abuse and behavioral disorder counselors</td>
<td>50</td>
</tr>
<tr>
<td>Healthcare social workers</td>
<td>75</td>
</tr>
<tr>
<td>Rehabilitation counselors</td>
<td>6</td>
</tr>
<tr>
<td>Psychiatric aides</td>
<td>3</td>
</tr>
<tr>
<td>Psychiatric technicians</td>
<td>37</td>
</tr>
<tr>
<td>Psychiatrists</td>
<td>8</td>
</tr>
<tr>
<td>Clinical, counseling, and school psychologists</td>
<td>27</td>
</tr>
</tbody>
</table>

#### Projected Annual Openings, 2016-2026

<table>
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<tr>
<th>Occupation</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental health and substance abuse social workers</td>
<td>8</td>
</tr>
<tr>
<td>Mental health counselors</td>
<td>7</td>
</tr>
<tr>
<td>Substance abuse and behavioral disorder counselors</td>
<td>4</td>
</tr>
<tr>
<td>Healthcare social workers</td>
<td>4</td>
</tr>
<tr>
<td>Rehabilitation counselors</td>
<td>3</td>
</tr>
<tr>
<td>Psychiatric aides</td>
<td>2</td>
</tr>
<tr>
<td>Psychiatric technicians</td>
<td>2</td>
</tr>
<tr>
<td>Psychiatrists</td>
<td>1</td>
</tr>
<tr>
<td>Clinical, counseling, and school psychologists</td>
<td>&lt;1</td>
</tr>
</tbody>
</table>
Prominent Stakeholder Themes

Think BIG!

Increase coordination between employers, educators, residents
- Support combined practitioner and educator opportunities

Enhance education and training
- Create a workforce that could be employed throughout the Mat-Su
- Develop formal relationship between educators and employers with feedback
- Create hands-on and exploratory experiences
- Develop soft skills
- Grow our own – succession plans for leaders
- Communication

Make Mat-Su a community where people want to work
- Improve recruiting tools used to sell the Mat-Su
- Enhance welcoming community aspects for new residents

Assist residents with education and employment goals
- Improve retention
- Create Clearinghouse of information/track students
- Address childcare professional development and needs
Mat-Su Resident Survey

Top Challenge in Getting Training, Excluding Funding

- Training not in Mat-Su: 43%
- Finding information: 42%
- Childcare: 10%
- No family support: 4%
- Transportation: 2%

Top Challenge for Finding Work in Mat-Su

- Finding competitive pay compared to Anchorage: 33%
- Finding job with right hours: 22%
- Finding job in Mat-Su: 16%
- Finding job with insurance: 12%
- Other: 8%
- Childcare: 4%
- Finding information: 4%
- Transportation: 2%
Health & Human Services Workforce Training

~250 health and human service training programs in Alaska

~146 health and human service training programs offered by 25 providers in Southcentral Alaska (including Anchorage, MSB, Valdez-Cordova, and KPB)
Plan: Vision Statement

Mat-Su will be transformed into Alaska’s healthiest place to live, work, and learn through a system-wide collaboration to education and workforce development.
Plan: Goals

Goal A.
Improve strategic communication and feedback between employers, educators, and residents

Goal B.
Enhance educational attainment and competencies for Mat-Su residents

Goal C.
Goal C. Enable community readiness to anticipate and meet employment and education needs

Goal D.
Improve Mat-Su’s reputation as community for employment, learning, and quality of life
EXAMPLE
Goal A. Improve strategic communication and feedback between employers, educators, and residents

Strategy 2: Provide formal and informal opportunities to link residents, educators, and employers

Activities

• Create a quarterly exchange between employers and educators to discuss strategic opportunities, ensuring representation from all organization sizes and disciplines
• Establish and encourage an information and feedback pipeline within and between educators, residents, and current or prospective employers
• Support resident tracking to measure job readiness and preparedness, placement, and retention
Implications for Community and Economic Development Planning

• “Mat-Su U-Med District”
• Investment strategy for enhanced growth of Mat-Su’s health and human services sector
• Public relations campaign to brand and market Mat-Su as a desirable place to live AND work
• Enhance Mat-Su workforce development training opportunities