



# Jobs to Careers

*Promoting Work-Based Learning  
for Quality Care.*

## Jobs to Careers Peer Learning Session: Career Ladder Project

Development at the Baltimore Alliance for Careers in Healthcare  
Webinar • February 27, 2007

# Agenda

- Introduction of Staff and Facilitators
- Introduction to Baltimore Alliance for Careers in Healthcare (BACH)
- Workforce challenges for the community and Baltimore's hospitals
- Critical workplace challenge: hiring and retaining “Nurse Extenders”
- Organizational Needs Assessment
- Approach to career ladders, training, and system change
- Next steps and BACH’s approach to Work-based learning

# Introductions

- **Rebecca Starr**, Deputy Director of the NPO, (National Program Office), Jobs to Careers  
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- **Neil Silverston**, President, WorkSource Partners, Site Liaison to BACH, Baltimore Alliance for Healthcare (as well as SSTARR and Owensboro Community and Technical College),  
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# Introduction

- BACH presents an example of how one Jobs to Careers project is changing its training design, internal career paths and institutional systems.
- By doing so, it meets the needs of frontline workers for greater opportunities, and solves an employer challenge of high turnover, job vacancies and a limited pool of qualified staff.

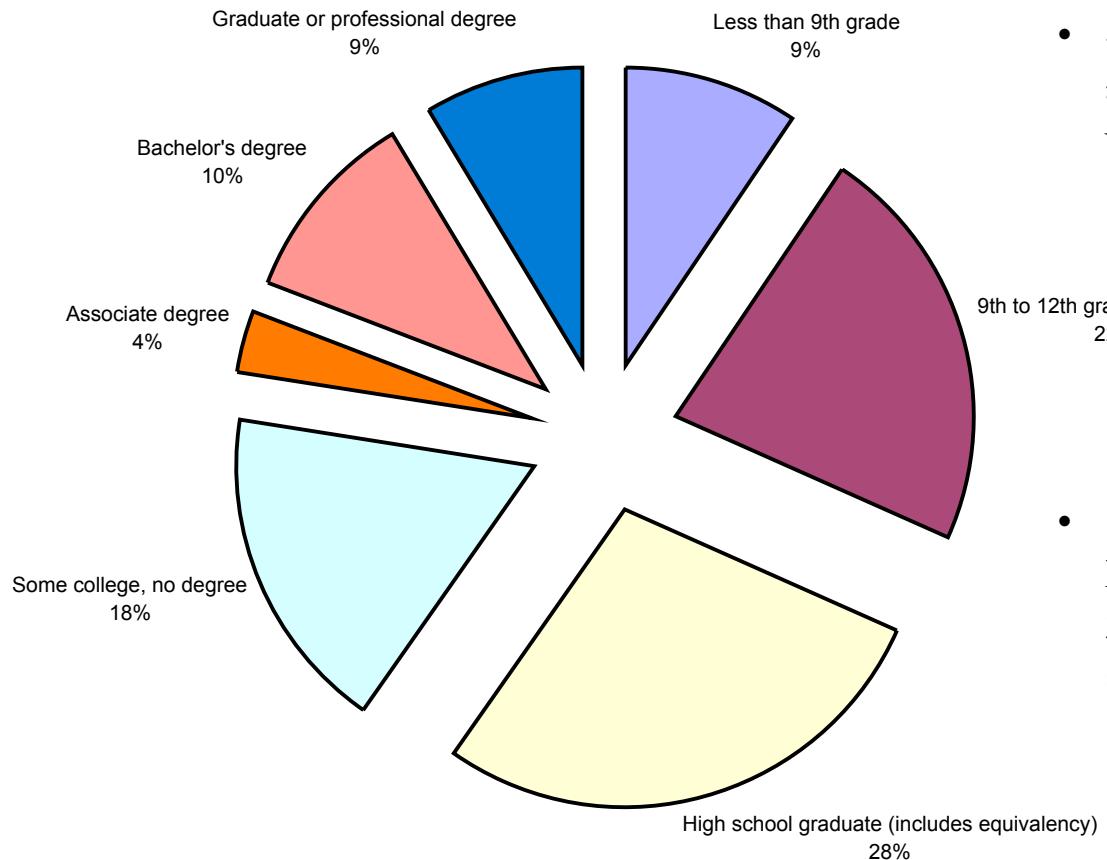
# Facts About the Alliance



- **About Us:** Founded in 2005, the Baltimore Alliance for Careers in Healthcare is a nonprofit corporation dedicated to eliminating the critical shortage of qualified healthcare workers in Baltimore by working with local agencies, organizations and healthcare institutions to create opportunities for residents to pursue careers in health professions.
- **Our Mission:** To address unemployment, underemployment and healthcare workforce shortage issues in Baltimore by identifying healthcare career pathways leading to economic independence and training city residents to enter into and advance in them.
- **Our Vision:** To improve Baltimore's economic health and reverse its shortage of healthcare workers by developing a system for preparing residents for skilled positions in healthcare organizations with critical workforce shortages.

# GAP Analysis: The Supply Side

## Many Baltimore residents are neither prepared for the workforce nor participating in it



- 43% of city residents 16 and older are not in the workforce
- 31% of city residents lack a H.S. diploma; only 23% have a post-secondary degree

Source: Md. Dept of Planning; Census 2000, [www.factfinder.census.gov](http://www.factfinder.census.gov)

# GAP Analysis: The Demand Side – Turnover and vacancies have far outpaced job growth

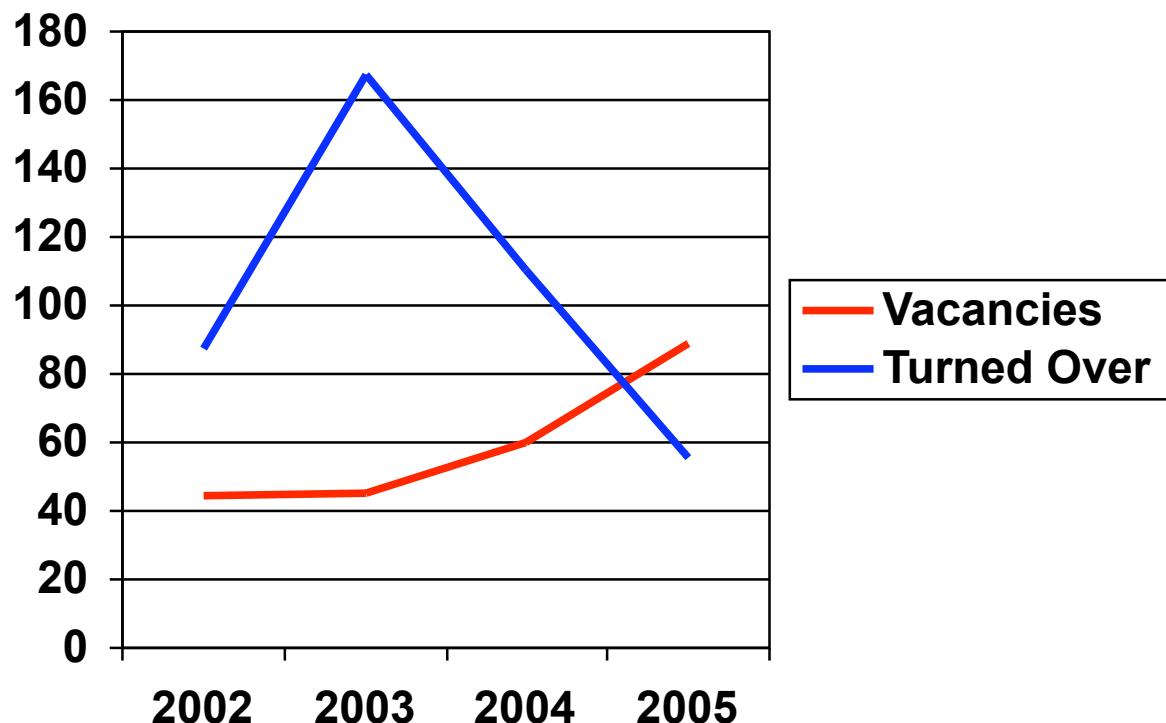
While hospitals increased staffing for 8 entry-level, skilled healthcare positions by 3 percent between, 2002 and 2005, the number of these jobs turned over or vacant increased by 12 percent and 22 percent, respectively, during the same period.

FTEs	2002	2005	Change '02-'05
Budgeted	2,588	2,672	3.3%
Vacant	221	270	22.2%
Turned over	269	302	12.3%

*Source: Md. Hospital Association. Positions include: Lab Technician, Nursing Asst., Nurse Extender, Pharmacy Tech, Radiographer, Resp. Therapist, Resp. Therapy Tech., Surg. Technologist. Hospitals include: Good Samaritan, Johns Hopkins, Maryland General, Mercy, Sinai, St. Agnes, Union Memorial, Univ. of Maryland.*

# High vacancies, opportunity for growth lead BACH to focus on the Nurse Extender position

Although the Alliance's coaching program has helped reduce turnover, vacancies have nearly doubled



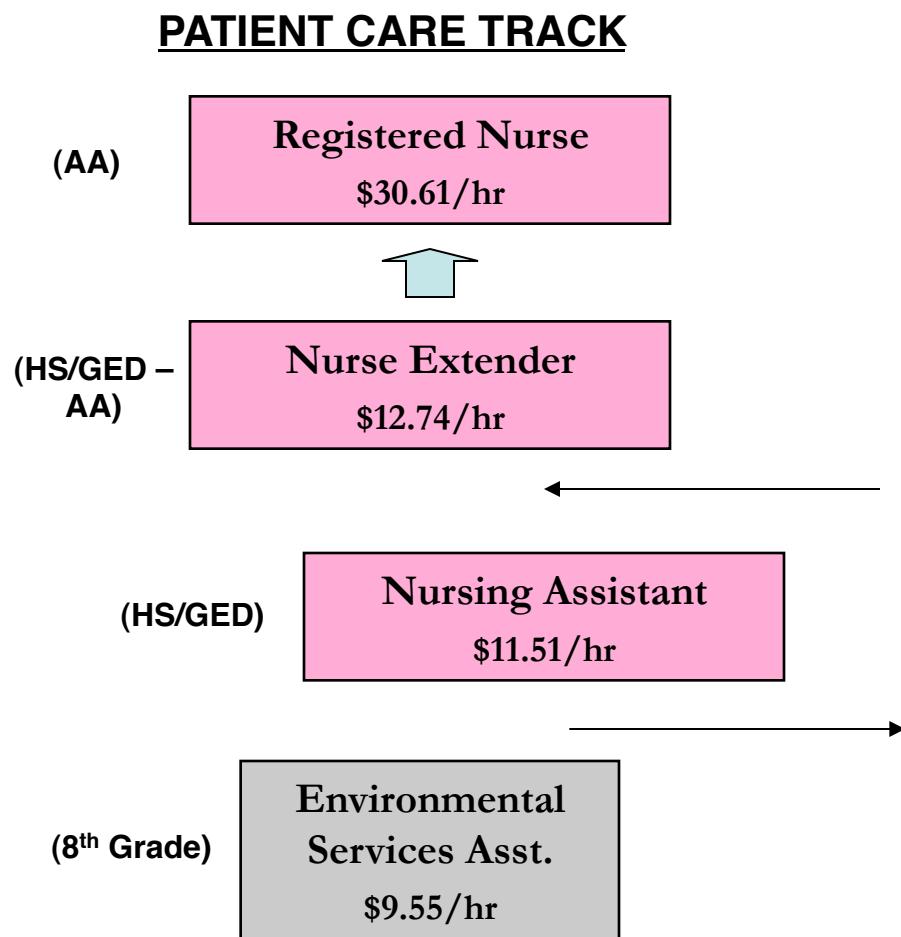
# The Nurse Extender Role

- **Other Names for This Role:** Patient Care Technician, Nursing Support Technician, Clinical Associate.
- **Duties:** Under the direction of a Registered Nurse, provides a variety of environmental, nutritional, clinical support and transportation services and activities to promote patient comfort and satisfaction.
- **Qualifications:**
  - Certified nursing assistant license in Md.;
  - Six months of experience;
  - Training that teaches the following skills:
    - IV starts; EKGs; Foley catheters; Blood drawing; Oxygen therapy; NG tubes; Suctioning; Drain management; Wound care.

# BACH's Challenge

- All partners in the Alliance are currently struggling to recruit and retain “Nurse Extenders”
- No internal path exists for training or advancement into these positions:
  - High acuity of the patient base demands high level of skill
  - The vacancy rates in these positions has doubled in the past 5 years (10% in some hospitals)
  - Turnover rates are high – as high as 35% in one BACH partner

# **Current system creates barriers to advancement to Nurse Extender positions**



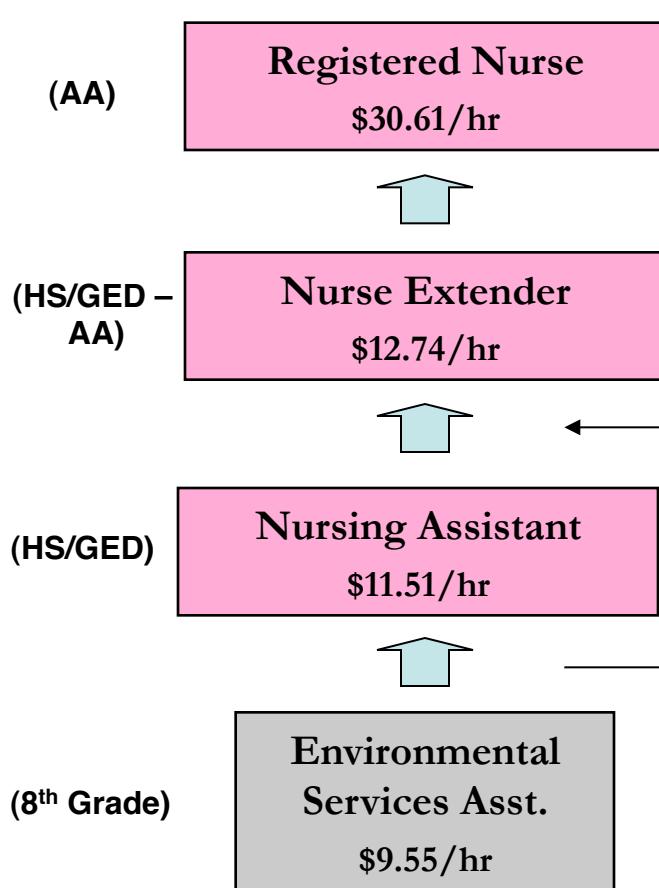
- Most hospitals don't employ Nursing Assistants (NAs) but require NA training and experience.
  - Licensure statute for NAs requires that clinical training be done in a long-term care setting.
  - Entry-level workers interested in patient care track hospital jobs need to complete NA training on their own, quit their hospital jobs, and obtain 6 to 12 months of Nursing Assistant experience.

# Discussion

- Does anyone have any questions about how BACH identified their problem and chose to focus on nurse extenders?
- How have other sites done needs assessments?

# BACH Opportunity: Create a new “span” on the nursing career ladder

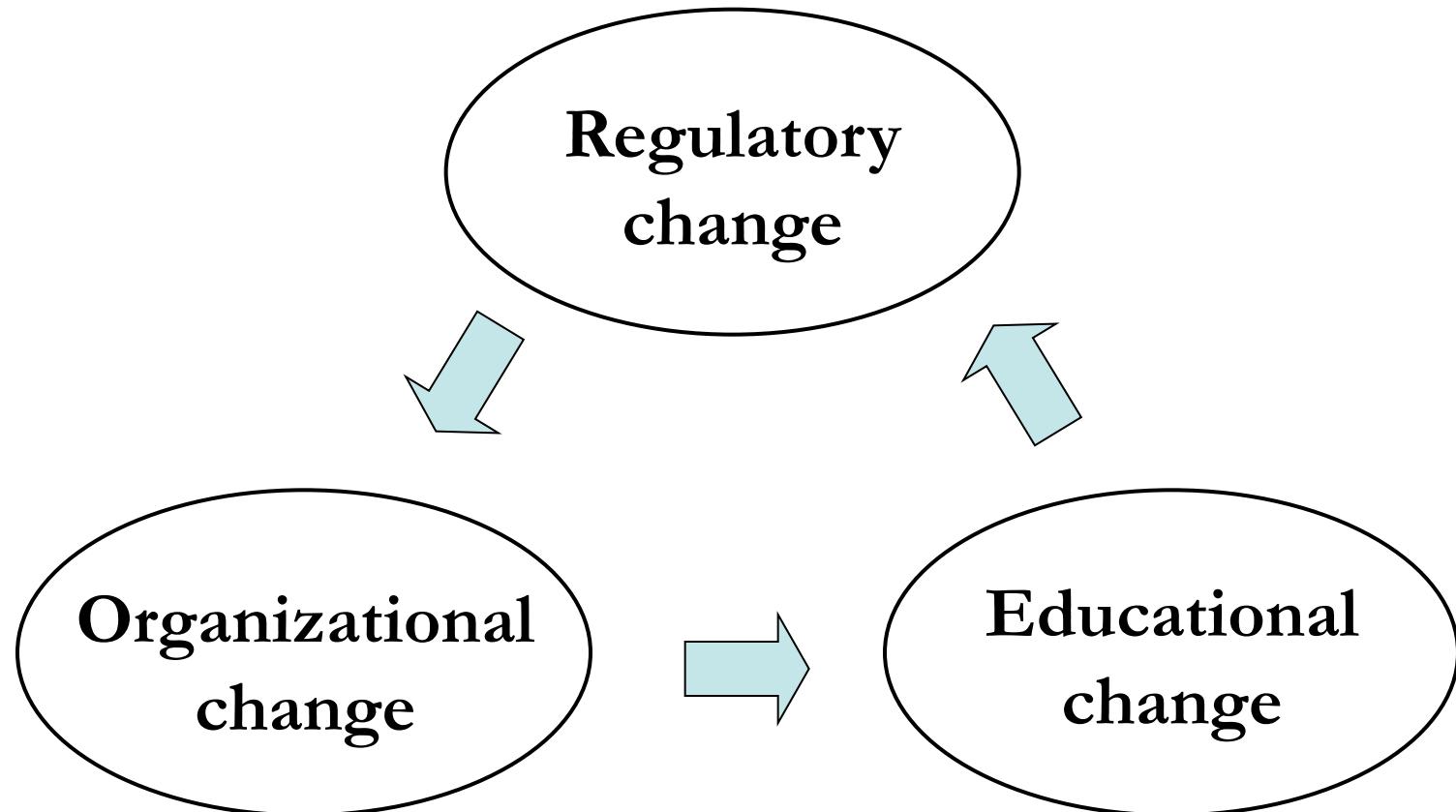
## PATIENT CARE TRACK



## Key Elements of the “1<sup>st</sup> Span” Career Ladder Project

- With permission of the Md. Bd. of Nursing, create an acute-care based NA training program that includes 3 months of training, followed by 6 months of internship (work-based learning), mentoring and coaching.
- Through the Alliance’s Career Coaching Program, continue to assess and counsel Nurse Extenders to pursue positions at higher rungs on the career ladder.
- Provide 2 months of Nurse Extender Training, followed by 3 months of internship (work-based learning), mentoring and coaching.

# Developing a successful program requires significant system change



# Organizational change

- Nurse Managers need to commit to hiring incumbent workers newly trained as CNAs/Nurse Extenders.
- Supervisors acting as Nurse Preceptors will need to take a more active role in training new workers.

# Educational change

- Community College of Baltimore County needs to develop new training customized to the workplace.
- Earning credits in the CNA/Nurse Extender training program will help students to advance to the next rung academically.

# Regulatory change

- Maryland Board of Nursing needs to approve nurse extender training in an acute care setting.

# Discussion questions

- What can BACH do to get necessary buy-in from nurse managers?
- What system change obstacles do other initiatives face (organizational, educational, regulatory)?

# **Next steps for BACH**

- 1) Success in rolling out the initiative hinges on the Alliance's ability to gain acceptance by Nurse Managers.
- 2) Work-based-learning offers us a methodology to significantly speed up the “learning curve” for newly hired Nurse Extenders and break down resistance by Nurse Managers.

# **BACH's approach to work-based learning: work-in-process**

- The Planning Team is designing a work-based learning plan where the didactic training is reinforced in the work-based learning phase.
- The Design team is identifying critical competencies that Nurse Extenders must have to be effective.
- BACH is training Nurse “preceptors” to evaluate new Nurse Extenders on demonstrating critical competencies.
- BACH to be providing ongoing mentoring for program graduates from a Nurse in their department.

# **Discussion questions...**

[open discussion]