

**EASTERN NC COMMUNITY FORUM ON  
GROWING THE HEALTH WORKFORCE**  
Doubletree Hotel Rocky Mount, Gateway Center, NC  
June 27, 2011

## Meeting Summary

**Challenge:** Despite the most recent economic downturn, the healthcare industry still experienced job growth and was one of only a handful of industries to do so. According to the North Carolina Health Professions Data System, from 1999-2009 there was a 3 percent growth in North Carolina jobs and 46 percent were healthcare jobs. Because health service jobs are less vulnerable to outsourcing and economic recession, job growth in this sector is likely to continue, driven by demographic changes, population growth and insurance expansion.

**Purpose:** Bring new groups of stakeholders together to work collaboratively to identify new solutions to address workforce and economic challenges as it relates to the Southern NC healthcare workforce.

**Attendees:** Terri Adou-Dy, Golden LEAF; Andrae Howard, Edgecombe-Nash JobLink Career Center; Gloria Baker, College of the Albemarle; J. Michael Baker, OIC-Medical Center; Renee Batts, NC Community College System; Tanja Bean, Capital Area Workforce Development Board; Reuben Blackwell, Rocky Mount OIC/Rocky Mount Chamber of Commerce; Glenda Bondurant, Wilson Community College; Tonya Brinkley, Nash Community College; Alan Brown, NC Area Health Education Center; Betty Brown, Shiloh Child and Adolescent Day Treatment; Representative Angela Bryant, NC General Assembly; Yvonne Bryant, ATOM /Ebenezer Baptist Church; Toni Chatman, WakeMed Health and Hospitals; Barbara Council, Community Engagement Consultant; Larry Crisafulli, Halifax Community College; Alisa Debnam, Council for Allied Health in North Carolina; Jeremy Dull, Workforce Development and Training Center; Cheryl Elhammoumi, ECU College of Nursing; Abby Emanuelson, National Multiple Sclerosis Society; Eric Evans, Edgecombe County; Ruby Gerald, Roanoke Valley Chamber of Commerce; John Gessaman, Carolinas Gateway Partnership; Kay Gooding, Pitt Community College; Evangeline Grant, Area L Area Health Education Center; Hunt Harris, National Multiple Sclerosis Society; Kelly Harvey, Halifax Community College; Frances Hendricks, Workforce Development and Training Center; Nancy Hobbs, Workforce Development and Training Center; Tiffany Jones, Crossmark; Richard Joyner, Nash Health Care Systems; Jimmie Lucas, Wilson County Dept. of Social Services; Christopher McPhatter, ECJRC, Inc; Carla McWilliams, Workforce Development and Training Center; Rose Motley, Turning Point WDB; Denise Norman, Halifax County Health Department; Theresa Peaden, Wilson Community College; Sonya Peoples, Heritage Hospital; Susan Phipps, Turning Point Workforce Development Board; Robin Pigg, Edgecombe Community College; Helen Pope, Turning Point Workforce Development Board; Thelma Richardson, Turning Point Workforce Development Board; Carisa Rudd, Turning Point Workforce Development Board; Alice Schenall, Area L Area Health Education Center; Michael Simmons, Turning Point Workforce Development Board; Rusty Stephens, Wilson Community College; Olivia Taylor, Choanoke Area Development Association; Heather Turner, Edgecombe Community College; Charles Washington, OIC, Inc.; Frince Williams, Turning Point Workforce Development Board; Michael Williams, Turning Point Workforce Development Board; Russell Williams, Wheaton College; and William Wooten, Workforce Development and Training Center. **IEI Staff:** Anita Brown-Graham, Sarah Langer, Lane Smith, and Marissa Weiss.

**Why health workforce?** An overview of the state's healthcare challenges and opportunities was shared, as well as 2011 health workforce data from the North Carolina Health Professions Data System, administered by the Cecil G. Sheps Center for Health Services Research at the University of North Carolina at Chapel Hill.

**Assets:** In 2007, Area L Area Health Education Center (AHEC) received a one-year planning grant to convene the Turning Point Regional Allied Health Roundtable (TPR). Then, they received a two-year implementation grant that expires June 30, 2011. As a result of this work, TPR enrolled 88 students into the health workforce academic pipeline. The TPR also created an Employer Workgroup Development program that focuses on training students through academic preparation and supporting community college students with the help of a retention counselor. They have leveraged resources to support training. They are working to increase awareness of the differences between the allied health sector and other sectors as well as awareness of its importance in the economic development realm.

Reuben Blackwell, Chair of the Education Committee for the Rocky Mount Chamber of Commerce, shared the opportunities to growing the health workforce in the region, particularly in pharmaceuticals. He also stated the difficulty in attracting health professionals to Eastern NC because of lower wages. There is a vast need to identify incentives that support the provision of education and skills to a new and existing health workforce.

In addition, the region boasts many healthcare assets, including the Workforce Development and Training Center, which has assisted over four hundred dislocated workers. Halifax Community College's Medical Lab Technician Program guides 8 students through a 2 year curriculum to obtain associate degrees. The college's creation of the Career Readiness Certificate confirms to employers that the potential employee possesses the work skills to complete a job. In addition, mentoring programs such as the Pride Program and Women of Excellence Program increase retention, graduation, and college transfer rates.

Businesses are also addressing barriers to growing the health workforce. Heritage Hospital's *Homegrown* career ladder program assists students who continue their education in the health field, such as moving from an associate's degree in nursing to a bachelor's degree. Dr. Rusty Stephens, President of Wilson Community College shared that solutions to growing the health workforce are local, and describes the simulation lab that is providing a virtual clinical experience for students at this institution.

**Opportunities:** Participants shared additional opportunities to grow the health workforce in the region. This involves collaboration between the TPR Allied Health Roundtable and nursing-health sciences partnerships to create training programs for current vacant allied health jobs. There are also opportunities to interest middle and high school students in health workforce jobs through health science camps. College students would benefit from mentorships to get them interested in their desired health workforce job, soft skills training to make them desirable employees, and clinical experience.

**Barriers:** Participants then identified barriers to growing the health workforce in the region. For example, there is a limited scope of awareness toward many allied health professions by guidance counselors, parents and students. Some students lack the social support, including child care and transportation, and the soft skills and literacy needed to matriculate. The escalating costs of training programs deter the dislocated workers who may lack the time and money to invest in these programs. Competition for clinical sites is a barrier due to professional and student ratios, what constitutes a clinical site, and barriers to when and with whom students work.

The overarching barriers identified by participants include:

1. Preparation for displaced workers
2. Preparation for k-12 students
3. Funding
4. Awareness of health occupations
5. Employer support for career advancement
6. Availability of clinical placement sites

The table on the following page outlines these strategies for each of these barriers.

**Next steps:** The state level strategies from all four community forums (Western NC, Southern NC, Northeastern NC, Charlotte Region) will be fed into a Working Group that will be convened this fall. Working Group members, consisting of representation from each Community Forum, will explore and analyze these strategies for consideration in a statewide policy agenda to grow the healthcare workforce in North Carolina. If you are interested in serving on the Working Group, please contact Sarah Langer at [sarah\\_langer@ncsu.edu](mailto:sarah_langer@ncsu.edu) or (919)-513-2800.

It is our hope that there is renewed commitment among participants and other stakeholders to further explore advancing the local strategies to grow the health workforce. Please stay in touch and let us know if there is movement in any of these strategies, or efforts to grow the healthcare workforce in the region that stemmed from this Community Forum. We can share this information with others and highlight your successes and lessons learned.

**Strategies:** After identifying barriers, participants worked collaboratively to identify strategies to overcome these barriers. **L**=Local, **S**=State, **N**=National

<b>Preparation for displaced workers</b>
<ul style="list-style-type: none"> <li>• New tools and resources to assess displaced worker’s interests and match them with professions based on existing skills or ones they would be interested in training for. <b>L, S</b></li> <li>• Cross training and career assessment for Workforce Development staff to better inform clients. <b>L, S</b></li> <li>• Streamlining the eligibility process for services. <b>L</b></li> </ul>
<b>Preparation for K-12 students</b>
<ul style="list-style-type: none"> <li>• Teach basic skills to students before focusing on career preparation skills. <b>L</b></li> <li>• Provide job shadowing opportunities. <b>L</b></li> <li>• Modify the state curriculum (Standard Course of Study) so that it aligns with the skills required by employers. <b>L, S</b></li> <li>• Collaborate with students and see them as partners in the education process to cater to their interests and needs. <b>L, S</b></li> <li>• Allow Guidance Counselors to assist students in future career planning and focus less on testing and other tasks outside their purpose. <b>L, S</b></li> <li>• Educate Guidance Counselors in health careers so they can begin sharing this information with students as early as middle school. <b>L, S</b></li> <li>• Promote classroom discipline that encompasses high expectations in reading, writing, and math curriculum. <b>L</b></li> </ul>
<b>Funding</b>
<ul style="list-style-type: none"> <li>• Collaborate at the regional level to negotiate contracts with vendors for goods and services such as job uniforms and employee background checks. <b>L</b></li> <li>• Partner with employers to provide startup money for employee training. <b>L</b></li> <li>• Work with industry consortiums (e.g., Pharmaceutical corporations) to create scholarship programs to fund employee education and training. <b>L, S</b></li> </ul>
<b>Awareness of Health Occupations</b>
<ul style="list-style-type: none"> <li>• Educate parents about the allied health science career opportunities through parent nights and parent-teacher conferences with Health and Science Teachers. <b>L</b></li> <li>• Bring delivery of care providers to schools for presentations and question and answer sessions with students. <b>L</b></li> </ul>

- Promote allied health careers through fliers, radio, televisions, and electronic social media. **L, S**
- Promote allied health careers through advertising and career fairs in religious groups and institutions. **L**

**Employer Support for Career Advancement**

- Employers should provide onsite training to employees while receiving benefits and credit for a 40 hour work week. **L**
- Employers should provide training and offer incentives for health care workers. **L**
- Involve stakeholders in creating programs within companies that educate leadership in the benefits of these training opportunities. **L**
- Develop programs that allow employers to choose an employee to participate in career advancement programs. **L, S**

**Availability of Clinical Placement Sites**

- Consider new clinical requirements to expand student ratios. **N**
- Coordinate regional efforts in the utilization of clinical sites. **L**
- Find funding for full time position to coordinate clinical placement schedules of multiple programs for interdisciplinary training. **L, S**
- Consider new models that explore interdisciplinary training in simulation labs. **L, S**