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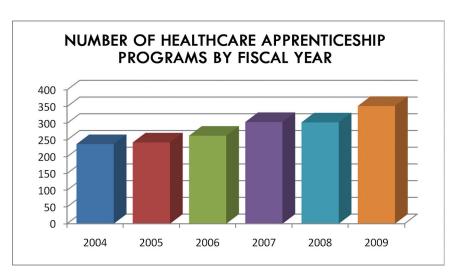


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INTRODUCTION

Despite the current recession, healthcare remains one of the few areas of the economy that continues to grow and add jobs. Since 2003, the U.S. Department of Labor's (DOL) Office of Apprenticeship (OA) has focused on the healthcare industry to address both chronic workforce shortages and increasing skill demands for key occupations within the allied health and long-term care industries. Since then,



apprenticeship programs have been developed in healthcare for 40 occupations (see appendix for a list of occupations). These programs offer competency-based and time-based models, portable credentials and wage increases, responding to the needs for a high-skilled healthcare workforce.

There is increasing recognition that apprenticeship training is a highly effective workforce strategy for building skills and earnings in entry- and middle-level jobs, for increasing productivity and for aligning employer demands with the supply of workers for this critical industry. The U.S. Bureau of Labor Statistics reports that a substantial portion of the fastest growing occupations are concentrated in health services—most of these occupations are apprenticeable including home health aides, personal and home care aides, dental assistants, and medical assistants, (Occupational Outlook Quarterly, Winter 2009-10, U.S. Bureau of Labor Statistics).

Registered Apprenticeship can be a critical part of the workforce strategy related to healthcare reform as it is seen as a way to train long-term care workers and address some of the workforce issues including recruitment and retention, training a quality workforce and improving quality of patient care. The potential in utilizing the Registered Apprenticeship model is that worker skill levels can be raised along with patient care without huge cost increases. This can lead to jobs with higher wages as workers show their increased value, creating the opportunity for upward mobility. Additionally, if entry- and middle-level healthcare workers are better trained, then higher level professionals—nurses and doctors—will be free to do the clinical work they are trained to do instead of lower level tasks.

This model can also provide a career lattice to higher level occupations—in essence—providing a clear pathway out of poverty for many individuals who might not otherwise have an opportunity for a career in health-care. Recognizing the potential of the Registered Apprenticeship model to train a highly-skilled workforce, the U.S. Department of Health and Human Services (HHS) and DOL are undertaking a joint evaluation of the Registered Apprenticeship long-term care model to assess the impact and effectiveness of this approach.

WHY REGISTERED APPRENTICESHIP AND HEALTHCARE?

Registered Apprenticeship is a successful training and employment model that is used in a variety of industries to train highly skilled workers. Employer-sponsors express great satisfaction with the model at a rate of 87 percent. In a recent study by the Urban Institute, more than 80 percent of sponsors said that they use Registered Apprenticeship to meet their need for skilled workers. Seventy-two percent said that Registered Apprenticeship helps them know which workers have needed skills; and 68 percent feel that the model raises productivity, strengthens worker morale, and improves worker safety (Lerman, The Benefits and Challenges of Registered Apprenticeship: the Sponsors' Perspective, the Urban Institute, 2009). It has been used as a method to train under-utilized talent pools by bringing them in at the entry-level and pushing them up career paths to achieve economic security and middle class status. Many apprenticeships are combined with, or are stepping stones towards, Associates and Bachelors degrees.

The model is an "earn while you learn" strategy with the combination of on-the-job learning, related instruction with a mentor, incremental wage increases and a DOL certificate of completion that is portable and recognized nationally. Earning a paycheck while in training for a profession is a very compelling model, particularly in the current economy. The model offers structure and rigor that helps professionalize entry-level healthcare occupations and prepares individuals for the challenge of higher level careers. The apprenticeship model is used extensively in healthcare without being called "apprenticeship." Nurses do clinical rotations and doctors must have residencies before they complete their degrees. Nearly all healthcare occupations require a demonstration of competency before a certificate or credential is awarded. The on-the-job aspect of apprenticeship is consistent with the requirement for demonstrated skills in these higher level occupations. Mentoring plays a critical role in experts teaching on-the-job skills to novices who learn through doing.

REGISTERED APPRENTICESHIP AND HEALTHCARE REFORM

There is great interest by the healthcare industry in Registered Apprenticeship and some initial success in registering and implementing programs. Employers and unions see the value of the structured training model to prepare workers for the discipline of healthcare occupations. Applying an apprenticeship approach offers the potential to significantly improve worker skill development and retention and improve patient care. All healthcare apprenticeship programs meet and most exceed state and federal requirements.

Registered Apprenticeship can be an integral part of healthcare reform by providing rigorous training to frontline healthcare workers that helps professionalize and stabilize these occupations. It also prepares employees to be able to climb a career ladder into higher-level occupations. The model is currently being evaluated by a joint HHS-DOL study, but anecdotal evidence from providers shows that Registered Apprenticeship helps to address several key issues in healthcare:

• Recruitment and retention: Job seekers who have a clear understanding of position requirements and have an opportunity for advancement along a career lattice are more likely to remain in their jobs longer. The "earn while you learn" aspect of the apprenticeship program helps to retain workers as they become loyal to an organization that invests in them and helps advance their careers. Soft skills instruction such as problem-solving, communications and stress management prepares new hires for

workplace challenges. And finally, the mentoring component supports new hires as they acclimate to the demands of the job. Employers agree that the model helps create a pipeline of workers that start at the entry-level and advance to higher positions.

- Cost-effective training method: Staff replacement and recruitment are among the highest costs to healthcare providers. By increasing retention, recruitment costs decrease. Employers indicate that they prefer training their own employees to recruiting new hires. The chief operating officer of Ben Taub General Hospital in Houston said, "Investing in improving worker skill sets is less costly than recruitment expenses."
- Improved quality of patient care: Healthcare professionals trained through Registered Apprenticeship gain knowledge, hands-on experience and confidence, which in turn improves the quality of patient care, according to employer interviews. Additionally, most apprentices go through programs that exceed state and federal requirements which have made them better at their profession.
- Increased diversity: The model is helping to increase diversity, according to healthcare providers, not only for the entry-level occupations but also as a pipeline and career ladder to higher level jobs. A goal of many of the providers is to create a workforce that approximates the composition of the patients they serve.



SAMPLE REGISTERED APPRENTICESHIP HEALTHCARE MODELS

Many healthcare providers use the Registered Apprenticeship model as part of a "grow your own workforce" philosophy and to reward employees. Currently more than 40 providers have Registered Apprenticeship programs with more signing on including the Service Employees International Union (SEIU) which plans to substantially expand an initial pilot program in Washington State beginning in January 2010. Included among current sponsors are the Evangelical Lutheran Good Samaritan Society, the largest not-for-profit long-term care provider, and BlueCross BlueShield of South Carolina which focuses on health information technology. All apprenticeships are a minimum of 2,000 hours (one year) of on-the-job learning with 144 hours of related

instruction. Many of these examples are competency-based models offering interim credentials as apprentices master skills and specialties. All these apprenticeships exceed federal and state requirements.

THE EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY

CNA Apprenticeship Model and Managerial Certificates

The Good Samaritan Society (GSS), the nation's largest nonprofit long-term care provider, has embraced the apprenticeship approach and integrated the training model into a career lattice for several clinical and managerial occupations. GSS has developed career paths for all clinical occupations and helped employees navigate various paths to move ahead or to specialize in their current job.

GSS developed a four-tiered, competency-based certification process for the Certified Nursing Assistant (CNA) to better qualify staff to meet the needs of long-term care patients. Apprentices receive a wage increase upon completion of each certificate. The CNA apprenticeship offers training in entry-level, advanced and specializations including dementia, restorative care, geriatrics, med aide, hospice and palliative care and peer mentor. They can start as a nursing assistant and remain in that capacity acquiring some of the CNA specializations or choose to advance to Licensed Practical Nurse (LPN) or Registered Nurse (RN) and beyond. This occupation is seen as an entryway to the clinical portion of healthcare. They may even decide to take a different career path after completing the nursing assistant program. GSS also uses the apprenticeship model for leadership development for RNs who want to become long-term care charge nurses, senior housing managers and home health directors. All apprenticeship programs provide learning through print based, on-line and self-study courses. On-the-job skills are developed through a mentoring structure that utilizes local area experts and/or mentor cohort groups. Nurses who complete training receive a nationally recognized certificate of completion from DOL.

CNA AND HOME HEALTH AIDE APPRENTICESHIPS

LEVEL 1

(Minimum 150 hours)

Certificate of Training & Incremental Wage Increase



LEVEL 2

(Minimum 1,000 hours)

Advanced Certificate of Training & Incremental Wage Increase



LEVEL 3

Specializations:
Hospice & Palliative Care,
Geriatrics, Disabilities/
Mental Illness, Dementia

Certificate of Apprenticeship Completion & Incremental Wage Increase



LEVEL 4

Optional Upgrade

Certificate of Peer Mentor Training & Incremental Wage Increase

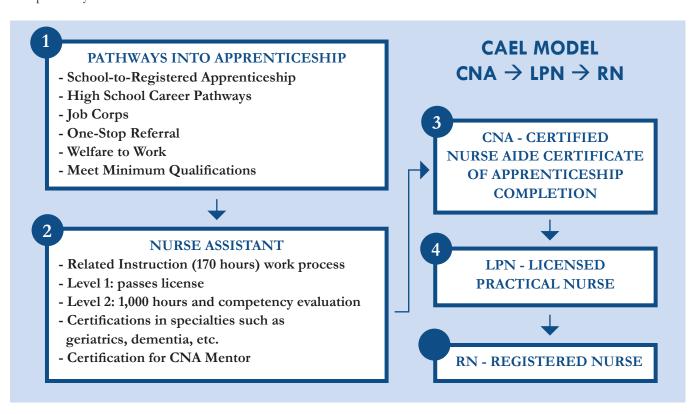
To address the staffing shortages for RNs, GSS partnered with the University of South Dakota to provide nursing curriculum via distance learning. Students are able to take their classes at the facilities where they work. They call their program "Growing Your Own" to promote the idea of career advancement from LPN to RN. The apprenticeship model fits well into this program by addressing the high turnover rates of CNAs and offering upward mobility towards LPN and RN. The Society is creating a new pool of employees to retain in the CNA level as well as build a pipeline to the more advanced LPN and RN positions. With the training provided via distance learning, the local area benefits by keeping their citizens working and learning in the community.

CAEL: NURSING CAREER PATH MODEL

CNA to LPN to RN

The Council for Adult and Experiential Learning (CAEL) was awarded a grant to work with healthcare providers, educational institutions and the public workforce system in nine sites across the nation to create a career lattice using the apprenticeship training model for CNA (the Evangelical Lutheran Good Samaritan model) leading to LPN and RN positions using distance learning and other innovative educational technology.

Under this model, a local partnership was formed consisting of the three entities to leverage all their resources to resolve the workforce shortage. Employers began by focusing training on existing employees to increase retention and reduce recruitment costs. Many of the apprentices came from other departments such as housekeeping and food service. They prepared them for CNA certification or trained existing CNAs in higher level specialty areas. Apprentices work under a flexible training schedule, wage increases and the opportunity for career advancement.



PARAPROFESSIONAL HEALTHCARE INSTITUTE

Home Health Aide

The Paraprofessional Healthcare Institute (PHI), a national non-profit organization headquartered in Bronx, NY, developed the home health aide registered apprenticeship based on the GSS CNA model (above). The program is competency-based and allows apprentices to gain basic skills and advance in specialty areas such as hospice and palliative care, geriatrics, disabilities, mental illness, dementia and peer mentor. Apprentices are expected to demonstrate competence in basic home care skills and at least two specialties. Apprentices receive interim credentials and wage increases as they complete parts of the program. Entry-level apprentices are supported by experienced home health aides who serve as peer mentors. SEIU plans to use this model for its pilot Home Health Aide program in Washington State (described further below).

CVS PHARMACY/CAREMARK

Pharmacy Tech Ladder

CVS Pharmacy, one of the nation's largest pharmacy and drug store chains, developed an apprenticeship ladder for pharmacy technicians that provides a career pathway to becoming a pharmacist. This is supported by two- and four-year academic programs. CVS is using the model as a "pathway out of poverty." CVS piloted the program in Detroit where they have targeted recruitment in high unemployment neighborhoods of the city. So far, they have replicated the model in Georgia, Illinois, Indiana, and Texas, and hope to have it available to all stores.

BLUECROSS BLUESHIELD OF SOUTH CAROLINA

Programmer Analyst, Web Systems Support Programmer and Network Support Technician (Health Information Technology)

BlueCross BlueShield of South Carolina is an independent licensee of the BlueCross BlueShield Association and the largest private employer of IT professionals in the state. The company executes and monitors more than 800 million healthcare claims and eight billion online transactions a year for its private health insurance, federal government contracts and other insurance divisions. In partnership with Midlands Technical College and Alpha Training Services, the BlueCross information systems department offers apprenticeship programs involving classroom instruction and on-the-job learning for these three occupations. To qualify, applicants must have an associates degree and some work experience. To succeed, apprentices must complete between 400-800 hours of education and more than three years of on-the-job learning. The Registered Apprenticeship program was developed in partnership with Apprenticeship Carolina, a new division of the South Carolina Technical College system that works closely with businesses to help them develop talent. BlueCross BlueShield of South Carolina thinks that apprenticeship programs are a great way to develop expertise on their systems and IT needs.

AHDI

Medical Transcriptionist

The Association for Healthcare Documentation Integrity (AHDI), formerly the American Association for Medical Transcription, developed a national program for its members. The industry needs 25,000 recruits over the next few years and is making apprenticeship the centerpiece of its marketing and recruiting plan. This occupation focuses on the development and maintenance of detailed records on patient health and medical procedures. AHDI is focusing on recruiting military spouses as the job lends itself to a mobile lifestyle. It is a very flexible program because instruction and on-the-job learning can be done remotely. All work and training is done over the Internet.

NEW PROGRAMS COMING ON-LINE

SERVICE EMPLOYEES INTERNATIONAL UNION (SEIU) HEALTHCARE NW TRAINING PARTNERSHIP

Home Care Aide Apprenticeship

Washington State has long been a leader in creating a comprehensive long-term care system for its citizens. Part of the overall strategy is increased state requirements for training of Home Care Aides and formal certification. The SEIU Healthcare NW Training Partnership, a 501c3 school and labor-management partnership whose mission is to train and develop professional long-term care workers to deliver high quality care ("Training Partnership"), is working on a competency-based Apprenticeship program which includes Basic and Advanced Training, as well as Peer Mentorship. After completing a leading-edge curriculum of Basic Training and working with a mentor both one-on-one and in peer-based groups, apprentices will have an opportunity to choose specialties depending on their interests and the consumer population for whom they will care. As the Training Partnership delivers training to over 40,000 Home Care Aides annually, this Home Care Aide Apprenticeship will be one of the largest Apprenticeship programs for healthcare professionals in the country. While the program is still in development, the Training Partnership and DOL see potential for broad replication of this effort in numerous other states.

AMERICAN NETWORK OF COMMUNITY OPTIONS AND RESOURCES (ANCOR) AND THE NATIONAL ASSOCIATION OF DIRECT SUPPORT PROFESSIONALS (NADSP)

Direct Support Professional

NADSP and ANCOR are two leading national associations representing direct support workers and employers who provide support to people with disabilities in the community. NADSP offers a voluntary, nationally recognized Direct Support Professional credential. Registered Apprenticeship is being reviewed to align with this voluntary credential. With this partnership, Registered Apprenticeship will become a more widely recognized and viable training option for direct support professionals.

SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP)

SCSEP (Title 5, Older Adult Worker program) and the Office of Apprenticeship are partnering to offer SCSEP clients a Registered Apprenticeship with employer sponsors like Comfort Keepers as described below. The first part of training will be subsidized by SCSEP under their rules and regulations for training and employment, and then apprentices will become full-time employees with healthcare providers.

COMFORT KEEPERS

Health Support Specialist

This national franchise of some 550 home care providers is partnering with the Office of Apprenticeship and SCSEP to provide a Registered Apprenticeship program to train and employ SCSEP participants as home health aides.



FEDERAL PARTNERSHIPS

OFFICE OF APPRENTICESHIP COLLABORATIONS WITH THE DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)

The Office of Apprenticeship is developing partnerships with HHS to further the expansion of Registered Appren-

ticeship in the healthcare industry. The greatest success has come in long-term care, primarily with entry-level occupations. As a result, our joint efforts have been primarily with those HHS agencies that focus on long-term care and aging issues. Similar opportunities exist in health information technology and allied healthcare.

DOL-HHS JOINT FEASIBILITY STUDY OF THE REGISTERED APPRENTICESHIP LONG-TERM CARE MODEL

DOL and HHS are working together on an evaluation of the direct support occupations in long-term care including direct support specialist, home health aide, health support specialist and certified nursing assistant. The evaluation will be in two parts—Phase I is a feasibility study to look at the various evaluation design options and Phase II will be the actual evaluation. The overall goal is to examine whether, and to what extent, the Registered Apprenticeship model addresses current workforce issues such as recruitment, retention, wages and quality of care. DOL contributed \$250,000 to the initial feasibility study. It is expected that both HHS and DOL will contribute to Phase II, the full evaluation. The two agencies plan to seek additional support from foundations.

FUTURE OPPORTUNITIES

The recent High Growth/Healthcare Solicitation for Grant Applications (SGA), funded under the American Recovery and Reinvestment Act (ARRA), has significant potential to provide needed resources to support and accelerate many of these and other related efforts. With additional support, the Registered Apprenticeship model could be a significant training solution in the development of high-skilled workers in many healthcare occupations and addresses many of the related healthcare workforce issues. In addition, broader adoption of this model has the potential to support DOL's Secretary Hilda L. Solis' vision of "Good Jobs for Everyone" and a number of DOL related performance outcomes. In particular, the model helps entry- and middle-skilled workers adjust to the rigors and structure of demanding healthcare professions. For the entry-level occupations, like the ones described, Registered Apprenticeship helps professionalize the field, bringing stability and dignity to workers. It also offers a pathway out of poverty by providing a career ladder to higher-level occupations. Finally, the model helps to diversify the workforce by bringing in talent pools that have not had the opportunity to pursue a healthcare career.

On a larger scale, this effort can be an integral part of healthcare reform and its related goal of reducing healthcare costs. Registered Apprenticeship can play a role due to its ability to allow lower-level healthcare workers to have better training and deliver better patient care. This, in turn, would allow higher-level occupations such as nurses, doctors and other professionals to do the work they were originally trained to do. By better allocating resources and tasks throughout the healthcare industry, these efforts can ultimately drive down healthcare costs.

CHALLENGES

Although there is interest by the healthcare community including HHS, employers and unions in using Registered Apprenticeship, there are still significant challenges stemming from the lack of awareness and understanding of the model. In most healthcare occupations, the industry does not integrate didactic learning with hands-on training with the exception of nursing and physician training. Educating the healthcare community about the model and then implementing Registered Apprenticeship are the greatest challenges. The work with HHS, particularly on the evaluation of the Registered Apprenticeship model in long-term care, will be a significant step in the process of gaining knowledge and acceptance of the model, but more is needed.

To expand and meet these workforce needs, OA seeks the continued support and guidance of leaders from government, industry, labor and foundations to broker further partnerships throughout the healthcare industry. Over the long term, these efforts will also likely need a dedicated and ongoing funding stream to provide seed funding to support healthcare providers to start up new apprenticeship programs and for apprentices who need assistance with tuition, books, uniforms and equipment. Further demonstrations, evaluations, pilot projects, and leveraging of resources could provide the framework for stakeholders to begin to collaborate on healthcare workforce issues in new and meaningful ways.

APPENDIX

APPRENTICEABLE HEALTHCARE OCCUPATIONS

Ambulance Attendant (EMT) Biomedical Equipment Technician Certified Nursing Assistant Lattice

Certified Nursing Assistant I

Certified Nursing Assistant Advanced Certified Nursing Assistant Geriatric Certified Nursing Assistant Restorative Certified Nursing Assistant Dementia Certified Nursing Assistant Mentor

Contour Wire Specialist, Denture

Dental Assistant

Dental Equipment Installation and Service

Dental Laboratory Technician

Electro-medical Equipment Repairer Emergency Medical Technician

Embalmer

Health Care Sanitary Technician

Health Support Specialist

Health Unit Coordinator Home Health Aide

Home Health Director

Laboratory Assistant

Laboratory Technician

Long-term Care Nurse Manager

Medical Assistant

Medical Laboratory Technician

Medical Secretary

Medical Transcriptionist Nurse, Licensed Practical

Optical Instrument Assembler

Optician

Optician (optical goods)
Orthotics Technician

Orthotist

Orthodontic Technician

Paramedic

Pharmacist Assistant

Pharmacy Support Lattice

Pharmacy Service Associate Level I Pharmacy Support Technician Level II Lead Pharmacy Technician Level III

Podiatric Assistant Prosthetics Technician Senior Housing Manager Surgical Technologist

Veterinary and Laboratory Animal Technician

APPRENTICEABLE HEALTH INFORMATION TECHNOLOGY OCCUPATIONS

Information Assurance Specialist Information Management IT Project Manager IT Generalist