

Guide to Investing in Frontline Health Care Workers



■ Executive Summary

- Why Invest in Your Frontline Health Care Workforce?
- Employer Best Practices for Making Effective Investments
- A Framework for Integrating Workforce Investments with Business Impact
- Resources for Investing in Frontline Workers

EXECUTIVE SUMMARY

Frontline Workers Are Essential in Today's Changing Health Care Landscape

Few U.S. industries have experienced as much change recently as health care. Approximately 20 million new consumers have health insurance coverage due to the Affordable Care Act. Care is shifting from the hospital to the home, clinic, and other community sites. Financing arrangements are shifting from payment for volume to payment for value. And providers at every point along the health care continuum must meet higher standards of quality or face financial penalties.

Yet some things remain constant. Health care depends overwhelmingly on the human factor: on the judgments and relationships at the bedside, the operating room, the examining room, in-home care, or at registration and discharge. How individuals perform their jobs—and having the right people in the right roles—is pivotal to delivering quality care.

Health care employers are particularly dependent on workers at the front lines of care: support and technical staff who provide direct care to patients and/or support health care practitioners. Their ranks include nursing assistants, housekeepers, medical assistants, community health workers, dietary service workers, and a host of others who work 24/7 to answer call lights, empty bed pans, pass food trays, or take vital signs. These workers represent approximately 50 percent of the health care workforce, but their earnings are often low, with limited opportunities for mobility. Historically, these positions have been relatively easy for employers to fill. However, with many regions of the country reaching full employment, recruiting and retention are becoming increasingly difficult. While these workers are essential to delivering quality care, employers frequently underinvest in developing the talent of this workforce. But a growing number of employers realize that investing in their frontline workforce is critical to achieving today's imperatives for lowering costs, improving the quality of care, and achieving better population health outcomes.

CareerSTAT

CareerSTAT is a network of health care leaders investing in the skills and careers of frontline workers. CareerSTAT's Frontline Health Care Worker Champion program recognizes organizations making significant investments in their frontline employees. The programs and policies of these 25 Champions and Emerging Champions have informed the findings and recommendations of this Guide.

Who Are Frontline Health Care Workers?

Frontline health care workers provide routine and essential services in all settings, including hospitals, outpatient care, behavioral health, long term care and home health care. They represent 50% of the health care workforce and are responsible for a range of operations, including providing administrative, direct care, environmental, and technical services to patients, families, and caregivers. CareerSTAT focuses on those frontline positions that require less than a bachelor's degree and generally earn median incomes less than \$45,000 per year. For a full list of frontline occupations visit <http://www.nationalfund.org/initiatives/careerstat/who-are-frontline-workers/>.

Why Invest in Your Frontline Health Care Workforce?

Health care employers across the country—and particularly those engaged in the CareerSTAT network—are investing in their frontline workers because they seek tangible results that contribute to the success of the organization, individual workers, and the broader community. Guided by the Triple Aim goals of improved patient experience, better overall population health, and reduced costs, employers are making the business case for their investments by aligning workforce training and education programs with strategic areas of business impact.

Each of the business problems or opportunities associated with the strategic impact areas can be addressed, in part, through frontline worker skill development or career advancement. Employers use specific metrics to gauge impacts and to determine if workforce programs generate the expected benefits. Results may be quantitative and measurable in terms of dollars saved in recruitment costs, reduced turnover, or preventable readmissions to the hospital. Or they may be qualitative—as when employees gain new competencies in caring for patients, or the working climate and team relationships on a unit become more collaborative.

Areas of Strategic Business Impact

Employers cite six major areas where developing the frontline workforce can have strategic business impact



Workforce Availability

Frontline staffing needs are addressed by filling vacancies, reducing turnover, decreasing overtime, and reducing temporary agency use.



Employee Competency & Advancement

Employees gain the needed knowledge, skills, and abilities to deliver high quality care and advance their careers.



Employee Engagement

Employees express greater satisfaction with their jobs and are more engaged in their work, resulting in improved performance outcomes and increased staff retention.



Patient Experience

Patients and their families express higher levels of satisfaction with the quality of care received and services provided. Patient satisfaction scores improve.



Community Impact

Organizations demonstrate greater positive impact in the communities they serve by hiring local residents, increasing workforce diversity, and improving health outcomes in the community.



Quality & Safety

Organizations improve performance by expanding the role of frontline workers and enhancing their skills to reduce such measures as medical errors and avoidable re-hospitalizations.

Employer Best Practices for Making Effective Investments

There is no “one-size-fits-all” model for health care providers to effectively invest in their frontline workforce, but there are both programmatic and organizational practices common to the most successful employer-based programs. Fundamentally, “best practice” employers—including CareerSTAT’s Frontline Health Care Worker Champions—view their frontline employees as critical assets that increase business impact and improve quality of care. The *CareerSTAT Guide to Investing in Frontline Health Care Workers* features CareerSTAT Champion organizations that employ a combination of programmatic and organizational best practices. Specific examples are provided to illustrate how each practice is implemented.

Programmatic Best Practices

Programmatic best practices engage frontline workers directly in many forms of workforce training and education to expand talent pipelines and make learning and career advancement easily accessible.

1. Inclusive Hiring

- Recruit from the community
- Create an incumbent worker pipeline
- Provide structured onboarding of new hires

2. Accessible Learning

- Basic skills development
- Work-based learning
- Competency-based instruction
- Flexible learning options

3. Career Advancement

- Enhanced training to meet new performance standards
- Career exploration tools and opportunities
- Career coaching and counseling
- Career pathways

Organizational Best Practices

At the highest level, organizational best practices ensure that the necessary infrastructure and support are in place so that workforce training and education programs have the greatest impact on both the business and individual workers.

1. Engaging Leaders

- Alignment with organizational priorities
- Senior leader support and sponsorship
- Managers as coaches and champions

2. Developing Infrastructure

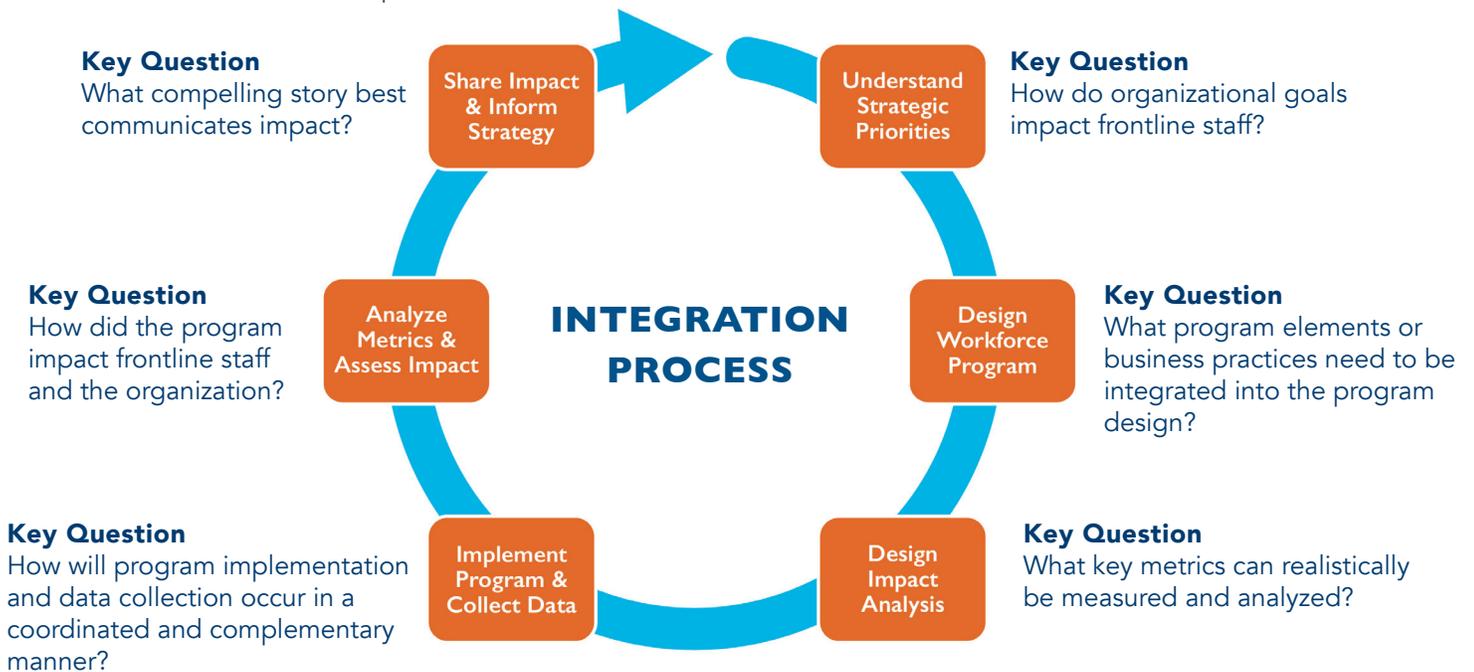
- Dedicated workforce units or staff
- Employee skill and educational assessments
- Supportive HR policies
- Workforce planning and analytics

3. Leveraging Resources

- Secure seed funding and develop co-investment strategies
- Form industry partnerships with other employers
- Leverage partner expertise and resources
- Integrate with business operations

A Framework for Integrating Workforce Investments with Business Impact

Integrating workforce investments with analysis of business impact is essential to making the business case—not only to generate good evidence, but also to ensure that programs are sustainable. CareerSTAT offers a simple framework that integrates organizational priorities with program design and business impact analysis. Informed by the experience of employers in the CareerSTAT network, the framework offers guidance to organizations and practitioners as they determine which practices to implement and develop a plan to collect data and measure impact.



The degree to which employers integrate their workforce programs with organizational priorities and business impact analysis exists along a continuum, from low or no integration to high, fully integrated approaches. The level of integration is often associated with program sustainability and organizational investments. Generally speaking, all levels along the continuum integrate some best practices, while employers engaged in the highest level of integration most likely have adopted a comprehensive array of both programmatic and organizational practices. Regardless of where their efforts fall along the continuum, employer intentions are often the same—making effective investments that advance the skills and careers of frontline workers while at the same time generating positive business outcomes.

CONTINUUM OF INTEGRATION



Call to Action

Health care employers across the country are investing in the skills and career development of their frontline workers and seeing results. Join the CareerSTAT network of health care leaders in their efforts to increase organizational investments and accelerate the adoption of employer practices so that more frontline workers have access to skill development and advancement opportunities. Here's what you can do:

- Make the business case for investing in frontline employees in your own organization. Align workforce programs to strategic organizational priorities and use key metrics to show the returns such investments can produce.
- Adopt a combination of programmatic and organizational workforce development practices in a manner that supports strategic priorities and demonstrates commitment to developing the talent of frontline workers.
- Integrate the measurement of frontline investments into the design and implementation of workforce programs to demonstrate impact and increase the likelihood of sustainability.

CareerSTAT invites you to join the discussion, share your stories, and use our resources. Visit www.nationalfund.org/initiatives/careerstat/join-the-network/ to learn more.

About the Guide

The CareerSTAT *Guide to Investing in Frontline Health Care Worker* provides employers with strategies and a framework for making effective investments in frontline worker skills and career development that increase business impact and provides workers with opportunities for advancement toward family-sustaining incomes. The Guide explains why health care employers invest in their frontline workforce and offers metrics to make the business case for investment. Drawing specific examples from CareerSTAT's 25 Frontline Health Care Worker Champion organizations, the Guide highlights best practices that demonstrate how employers successfully implement workforce development programs and maintain organizational infrastructure to provide sustained support for frontline skill development and career advancement. Finally, the Guide offers a framework for selecting programs, developing a business impact analysis, and sustaining the programs through use of data and evidence. The CareerSTAT Guide includes five companion documents:

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- [Resources for Investing in Frontline Workers](#)

The Guide's target audience is health care leaders who are developing frontline worker programs and building the business case for organizational investment. The Guide provides a framework for conceiving and implementing a business impact analysis. It is directed to health care executives, human resource and workforce development leaders and staff, learning officers, administrators, and patient-care leaders.

Please note that this Guide is not a step-by-step manual for performing business impact analysis or measuring return on investment in training programs. Those needing technical guidance in performing business impact analysis are referred to links to specific tools and publications in the Guide's "Resources for Investing in Frontline Workers" section.

Frontline Health Care Worker Champions

CareerSTAT's Frontline Health Care Worker Champions are recognized by their peers for their sustained investment in skill and career development of frontline workers. Representing health care organizations across the care continuum, these industry leaders are improving health outcomes for patients and increasing their business impact by making learning and advancement more accessible for their frontline employees. Since 2014, CareerSTAT has recognized 25 organizations. Their practices, policies and strategic approach inform the CareerSTAT Guide, best practices, and resources. Learn more about the Frontline Health Care Worker Champion program at <http://www.nationalfund.org/initiatives/careerstat/frontline-health-care-champions/>.

Acknowledgements

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CareerSTAT is a network of health care leaders promoting investment in the skills and careers of frontline workers. It supports health care organizations in using workforce development programs to increase business impact, improve health outcomes, and provide good jobs. CareerSTAT produces an array of resources on the benefits of skill and career development, recognizes organizations leading the industry as Frontline Health Care Worker Champions, and tracks innovative practices for advancing frontline workers. CareerSTAT is an initiative of the National Fund for Workforce Solutions and Jobs for the Future and is generously supported by The Joyce Foundation. To learn more about CareerSTAT, visit: <http://www.nationalfund.org/careerstat>.

Jobs for the Future develops, implements, and promotes new education and workforce strategies that help communities, states, and the nation compete in a global economy. In more than 200 communities across 43 states, JFF improves the pathways leading from high school to college to family-sustaining careers.

The Joyce Foundation

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The National Fund for Workforce Solutions is a national network promoting economic opportunity and prosperous communities through investment and innovation. Based in Washington D.C., the National Fund partners with philanthropy, employers, workers, public and private community organizations, and more than 30 regional collaboratives to invest in skills, improve systems, and generate good jobs. The National Fund supports civic and business leaders in promoting evidence-based practices and policies that build shared prosperity. Learn more about the National Fund and its local partners at www.nationalfund.org.

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WHY INVEST IN YOUR FRONTLINE HEALTH CARE WORKFORCE?

The workforce represents the largest portion of costs in health care.¹ These costs are increased by high turnover and vacancy rates. In frontline occupations such as patient care technicians or nursing assistants, turnover rates range from 35 to 100 percent.² Replacement costs—including lost work hours due to vacancy, recruiting costs, temporary agency use, and the costs of training new hires—can be as high as \$4,000 per position.³ Investing in frontline workers is critical to addressing these problems and lowering health care workforce costs.

In addition to lowering costs, health care organizations are charged with improving the quality of patient care, which requires higher skill levels for in direct care and other frontline occupations. Frontline workers need strong interpersonal and team skills, critical thinking and technology skills, and other essential skills, including reading, writing, problem solving, and oral communication.

Finally, health care employers are facing a growing shortage of workers to fill higher-level positions as their workforce in nursing and other critical roles ages: 55 percent of the national nursing workforce is age 50 or older, and more than 1 million registered nurses will reach retirement age within the next 10 to 15 years, according to recent federal projections.⁴ Investing in frontline workers is a strategy for building a talent pipeline for RNs and other higher-level positions.

In the past 20 years, there has been a significant growth in employer investments in frontline workers. A growing number of hospitals and other health care providers are building career ladders from less-skilled to higher-skilled jobs, preparing workers with the academic and life skills required for college and careers, and dedicating professional staff and resources to workforce development. Yet this essential workforce remains underdeveloped, for reasons that include a deeply-ingrained focus in medicine on the preparation of the highest-skilled professionals: physicians, nurses, and other licensed and highly-educated practitioners.

The reluctance to invest in frontline workers is also a function of low profit margins and high-cost pressures on health care providers. Workers in low-paying direct care and ancillary roles are often treated as dispensable, resulting in a cycle of high turnover and low commitment. Yet the lack of respect, skilled supervision, and opportunities for training and advancement for direct care workers are themselves chief causes of turnover—sometimes more than low wages.⁵ And these workers, in turn, sometimes lack the confidence or motivation to develop their own skills and careers. Although the pressure to rely on low-wage, less-skilled employees will not dissipate

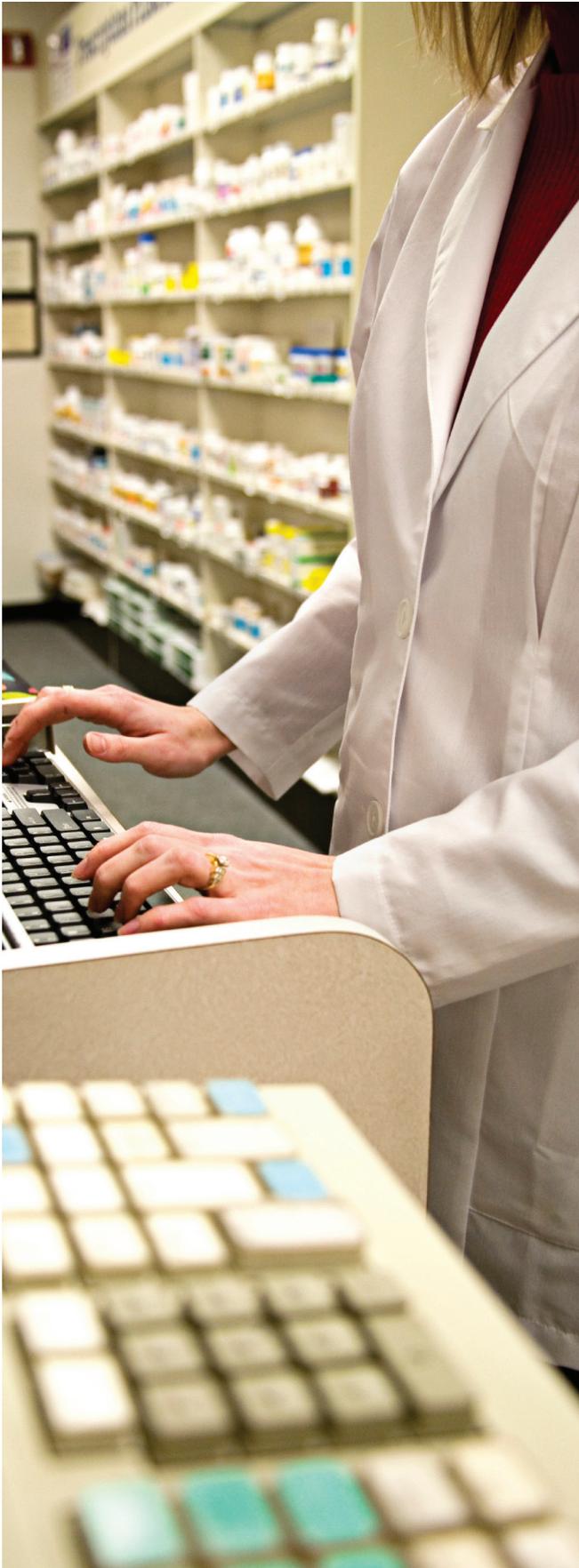
overnight, health care employers increasingly recognize the costs of these hiring practices and are investing in frontline workers as a long-term investment in their own bottom line.

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THE BUSINESS CASE FOR INVESTING IN FRONTLINE WORKERS

A commitment to investing in frontline workers requires making a business case: demonstrating, through careful use of data and analysis, that workforce investments show positive returns.

Demonstrating impact through systematic measurement is key to making the business case for frontline investment. A business case is an argument, usually documented, that is intended to convince a decision-maker to approve some kind of action. As a rule, a business case has to articulate a clear path to an attractive return on investment. A business case document should examine benefits and risks associated with both taking the action and not taking the action. The conclusion should be a compelling argument for implementation.⁶

Health care employers are investing in employee development because they seek tangible results that contribute to the success of the organization. These results may be quantitative and measurable in terms of dollars saved in recruitment costs, reduced turnover, or preventable readmissions to the hospital. Or they may be qualitative—as when employees gain new competencies in caring for patients or managing medical records, or the working climate and team relationships on a unit become more harmonious and collaborative.

Breaking the cycle of underinvestment, and realizing the value of the frontline workforce, requires evidence, compelling arguments, and clear models of success. It requires overcoming the skepticism of decision-makers and making the case to chief executives, operating officers, financial officers, HR and learning officers, and nursing officers and directors. Most of all, it means designing programs that align with organizational strategy and solve core business problems.



HOW TO MAKE THE BUSINESS CASE AND MEASURE IMPACT

A growing number of health care institutions—ranging from distinguished teaching and research hospitals to community hospitals and clinics—are making these investments because they make economic sense and support the organization’s strategic and financial goals.

Employers cite six major areas where developing the frontline workforce can have strategic business impact. To determine if workforce programs generate the expected benefits, employers use specific metrics to gauge impacts. In the sections that follow, we describe each area of impact, list the metrics recommended for measuring impact in that area, and provide examples of these strategic business impacts from the CareerSTAT Frontline Worker Champions network.



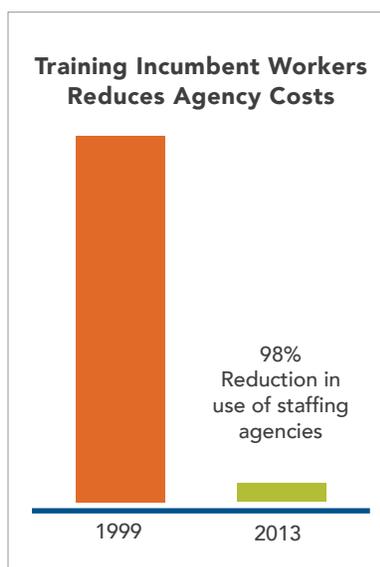
Increase Workforce Availability

Solving labor market problems is a common motivation for investing in frontline workforce programs. Health care workforce efforts are generally traceable to a particular “pain point”—a gap in staffing, skill, or retention—that interferes with delivering optimal patient care and meeting other core business imperatives. High turnover and vacancy rates translate into high costs and reduced attention to patients. These labor market challenges can be successfully addressed through programs that develop skills or build talent pipelines both internally, from frontline to higher-skilled positions, and externally, from the community into entry-level jobs.

▶ **Genesis HealthCare**, a Pennsylvania-based post-acute care provider, responded to high costs of turnover through a “Grow Your Own” philosophy for training Certified Nursing Assistants and providing opportunities for career growth. Genesis has been a pacesetter in expanding the role of direct

care workers—creating career ladders for nursing assistants through training in specialized caregiving skills. Beginning in 1999, Genesis pioneered the role of Geriatric Nursing Assistant Specialist, creating a career step-up for Certified Nursing Assistants. More recently, Genesis created a career map of clinical and non-clinical positions, including Restorative Nursing Aide and Certified Restorative Aide. Since 1999, Genesis has increased the availability of direct care workers by training more than 4,000 CNAs.

Since the start of its CNA training program in 1999, Genesis had a 98% reduction in use of staffing agencies. Furthermore, Genesis HealthCare maintained an 81% retention rate for its 2013 program participants.



Metrics for Documenting Increased Workforce Availability

- Turnover/retention rates
- Vacancy rates
- Days required to fill vacant positions
- Orientation time (days required to bring new hires up to productive performance)
- Overtime costs
- Temporary agency usage and costs
- Recruitment costs (agency fees, advertising, orientation and training)



Improve Employee Competence and Advancement

Delivering excellent care depends on the skills and capacity of individual workers to perform their jobs effectively. This means having the competencies—knowledge, skills, and abilities—to carry out required tasks. But in this era of the Affordable Care Act, where workers at all levels are assuming new functions to better coordinate care and improve population health, it can also mean upgrading skills to meet new job definitions. Changes in process and technology, as in operating room sterile procedures, or in conversion to electronic health records, also change performance standards and skill requirements for workers, including those in frontline positions. The business case for upgrading frontline workers' skills doesn't end with the individual's performance. When an individual frontline worker takes on broader roles, or performs traditional roles more effectively, higher-skilled staff such as RNs or physicians are able to expand their capacities as well.

▶ At **Jersey City Medical Center**, over 85 hospital employees—ranging from housekeepers to patient transporters to security guards—received training and promotion to higher-skilled positions as patient care technicians, emergency medical technicians, and medical billers/coders. The largest of this group is PCT trainees. By investing in PCT training at scale, JCMC is better able to serve a growing volume of acute care patients, while expanding its network of community clinics and physician practices. At the same time, JCMC is educating PCTs to function at a higher level of skill than was previously required of direct care staff. Newly trained PCTs must now have stronger customer service skills to meet the organizational goal of high patient satisfaction, while also meeting the mandates of the Affordable Care Act. JCMC views internal training and promotion as the surest route to high performance, as incumbents require less orientation than outside candidates, are versed in the facility's routines and systems, and are familiar with expectations about customer service.

Metrics for Documenting Improved Employee Competence

- New knowledge, skills, and behaviors
- Internal hiring and advancement
- Courses completed and credentials obtained
- Skill upgrades and promotions
- Revenue from new or expanded service lines



Improve Employee Engagement

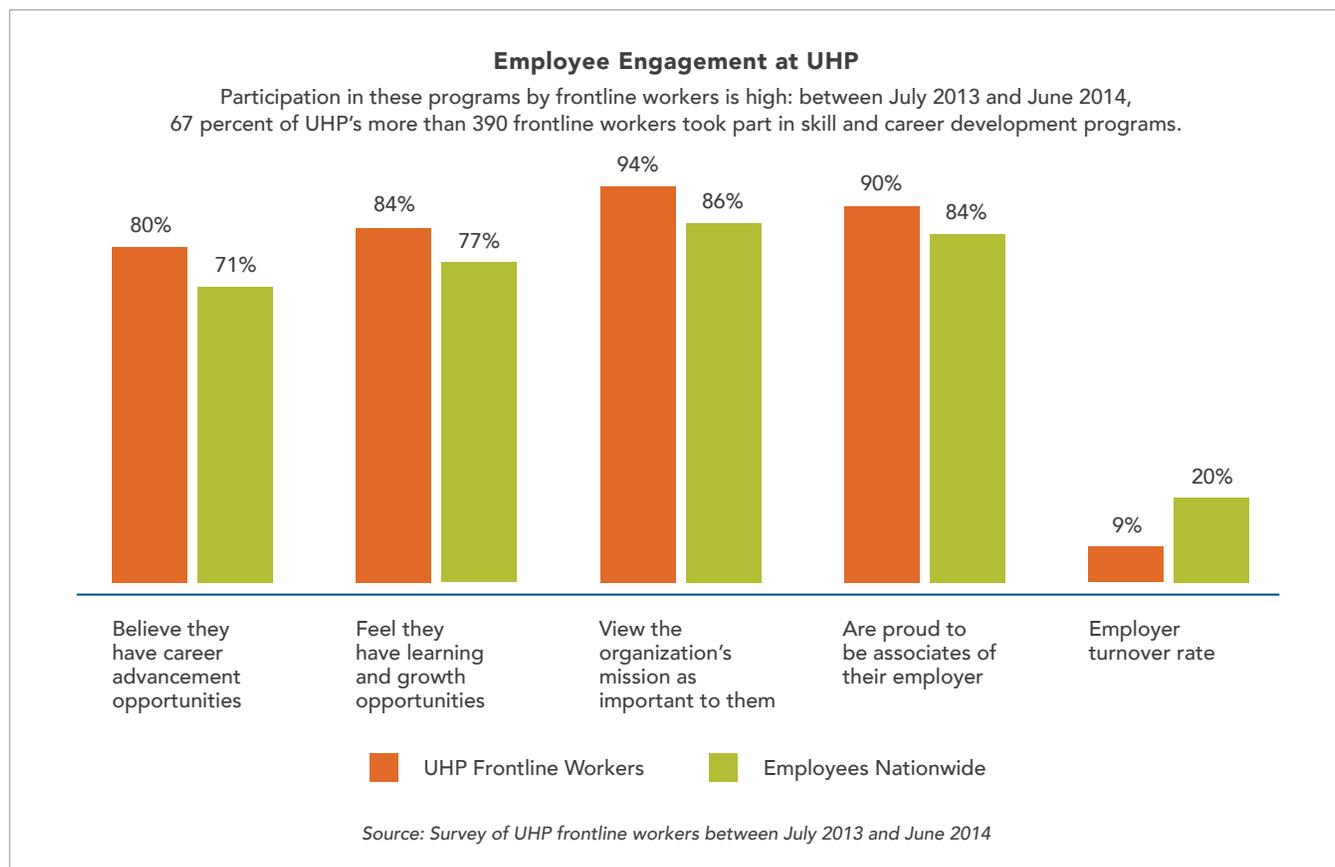
Research organizations such as Gallup and Press Ganey have demonstrated strong connections between levels of employee engagement and performance outcomes, including productivity, turnover, coordination of care, and patient safety incidents. Many factors account for employee engagement: job security, respect, confidence in senior leaders, high quality care and service, job stress, but at least as important is the belief that their employer provides career development opportunities.⁷ A recent report by Press Ganey notes that “successful healthcare organizations understand that all

employees—from linen services to surgical services, to lab technicians—need to be engaged in meaningful work in an organization they can commit to; to work in an inclusive, supportive culture; and to be recognized and rewarded for their efforts.”⁸

► **New York’s Urban Health Plan** has a strong track record of investing in its frontline workforce and has been recognized for its highly engaged employees. As a community health provider, UHP provides multiple opportunities for frontline workers to develop skills and advance their education and careers, including internships in fields such as community health worker and medical assistant; tuition assistance; college advising and career guidance; and specialized training in medical interpretation.

Metrics for Documenting Employee Engagement

- Engagement and satisfaction measures
- Attendance
- Turnover/retention rates



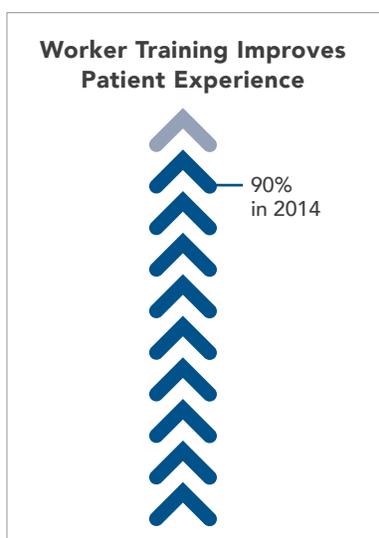


Improve Patient Experience

While hospitals and other providers have always surveyed patients on their satisfaction with their care, the advent of the Affordable Care Act has brought new financial importance to the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) and similar protocols for evaluating consumer satisfaction.⁹ Hospitals must achieve high patient satisfaction ratings or risk losing 1 to 2 percent of Medicare reimbursements. As a result, health care employers are taking extra steps to train frontline employees and licensed staff in customer service skills and encouraging them to become knowledgeable about their units' HCAHPS scores.

▶ The **Cleveland Clinic's Office of Patient Experience** delivers formal training to all new hires to socialize them to the Clinic's values, mission, and service model. The Cleveland Clinic Experience integrates a registered "Communicate with H.E.A.R.T.®" program to provide the fundamentals of communication to support a culture of service excellence.¹⁰ Trainees learn about expected service behaviors; receive information about the meaning and importance of HCAHPS; and learn about the values expected of employees, including teamwork, integrity, innovation, and compassion. Employees are also trained to recognize a patient's experience and how to respond to their needs. Since

2010 Cleveland Clinic has been tracking HCAHP scores as they relate to patient satisfaction. Over time, Cleveland Clinic has improved its overall rating in the HCAHPS Survey to exceed the national 90th percentile in 2014.



Metrics for Documenting Patient Satisfaction

Patient satisfaction survey scores related to:

- Cleanliness of hospital environment
- Quietness of hospital environment
- Responsiveness of hospital staff
- Discharge information
- Transition of care



Improve Community Impact

Hospitals, health systems, and community clinics are often "anchor employers," with a substantial footprint in urban neighborhoods, including ones subject to economic distress. Besides being lifelines of medical care, they provide jobs to residents, spur economic development, generate revenues for local businesses, and partner in civic improvement efforts. Residents who attain employment and educational support for career growth also reinvest their wages locally and serve as examples to others, as do their friends or relatives who are hired through word of mouth. And with rising wages, employees and their families may increase their assets through saving and investment, home ownership, and other means.

Increasing community prosperity brings reciprocal benefits to health care employers. Besides enhancing the safety, livability, and socioeconomic conditions in their neighborhood, it also helps nonprofit health care providers meet their community benefit requirements and retain their nonprofit status.

▶ **Johns Hopkins Hospital and Health System**, long an anchor institution for Baltimore, has operated a comprehensive frontline workforce program for incumbent workers, Baltimore youth, citizens returning from incarceration, and community residents seeking employment. Project REACH (Resources and Education for the Advancement of Careers at Hopkins) participants who have retained employment at Johns Hopkins have been rewarded with substantial wage gains. Among

the 96 employees participating in skill and career development activities from July 2011 to June 2013, 66 percent achieved a wage gain and the remainder were still in training. Training participants enjoyed an 8.4 percent median wage gain after one to two years, and nearly 12 percent after three years.



Metrics for Documenting Improvements in Community Impact

- Community resident hire rate
- Diversity of the workforce
- Wage gains
- Community health outcomes

patient outcomes. However, many organizations within the CareerSTAT network are experimenting with strategies that expand the role of frontline workers in patient care teams, enhance communication skills, and increase capacity to assist patients in navigating the health care system.

Metrics for Documenting Improvement in Quality and Safety

- Medical error rates
- Preventable hospital readmission rates
- Patient falls
- Infection rates
- Hospital or facility-acquired pressure ulcer rates



Improve Quality and Safety

Health care employers have a perennial interest in delivering safe, high-quality care. Now the Affordable Care Act provides additional incentives for improving quality and safety, as well as financial penalties, through reduced reimbursement, for employers that fall short of meeting performance standards. The advent of new models for financing and delivering care, including value-based purchasing and the Patient-Centered Medical Home, also increases employers' attention to high-quality performance, patient safety, and satisfaction. To realize performance gains such as avoidance of preventable visits to the hospital or emergency room, providers are reexamining the roles of frontline workers—medical assistants, patient care technicians, and community health workers—and assessing the types of skills needed to improve quality and safety. Implementing new models of care and training to improve quality is still a work in progress, as is the measurement of



CALL TO ACTION

There are ample reasons to invest in the skills and career development of frontline workers, all of them central to strategic business impact: creating a skilled and engaged workforce; filling higher-skilled positions via employee advancement; ensuring good patient experiences; creating a healthy and prosperous community; and promoting high-quality care and patient safety. Employers who develop their frontline workforce are seeing results in each of these areas. We encourage you to make the business case for investing in frontline employees in your own organization. Use the metrics presented here to show the returns such investments can produce or reference our resources for assistance with developing your business case.

The CareerSTAT *Guide to Investing in Frontline Health Care Workers* provides a framework and tools for developing workforce development programs, aligning with key business metrics, and measuring impact and outcomes. It is written for health care leaders who are creating or operating programs for frontline workers and building the business case for organizational investment. The complete Guide is made up of five companion documents, including:

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To read the full Guide or any of the companion documents visit www.nationalfund.org/learning-evaluation/publications/guide-to-investing-in-frontline-health-care-workers/.

ENDNOTES

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3. The Society for Human Resource Management (SHRM) estimates that the average cost per new hire is \$4,129. The Society for Human Resource Management. 2016. *SHRM Customized Human Capital Benchmarking Report*. Washington, D.C.: SHRM. Costs of replacing frontline staff, such as nursing assistants, are estimated to be 16% of annual salary; median annual salary for CNAs as of March 2016 is \$27,989. "Nursing Assistant Salaries." [Salary.com](http://www.salary.com). No date. See also Crippen, Amber, 2015. "Do You Know the Costs of CNA Turnover?" PPR Talent Solutions. March 18, 2015. See also Mukamel, Dana B., et al., "The Costs of Turnover in Nursing Homes." *Medical Care*, October 2009 47(10): 1039-1045.
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Frontline Health Care Worker Champions

CareerSTAT's Frontline Health Care Worker Champions are recognized by their peers for their sustained investment in skill and career development of frontline workers. Representing health care organizations across the care continuum, these industry leaders are improving health outcomes for patients and increasing their business impact by making learning and advancement more accessible for their frontline employees. Since 2014, CareerSTAT has recognized 25 organizations. Their practices, policies and strategic approach inform the CareerSTAT Guide, best practices, and resources. Learn more about the Frontline Health Care Worker Champion program at <http://www.nationalfund.org/initiatives/careerstat/frontline-health-care-champions/>.

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CareerSTAT is a network of health care leaders promoting investment in the skills and careers of frontline workers. It supports health care organizations in using workforce development programs to increase business impact, improve health outcomes, and provide good jobs. CareerSTAT produces an array of resources on the benefits of skill and career development, recognizes organizations leading the industry as Frontline Health Care Worker Champions, and tracks innovative practices for advancing frontline workers. CareerSTAT is an initiative of the National Fund for Workforce Solutions and Jobs for the Future and is generously supported by The Joyce Foundation. To learn more about CareerSTAT, visit: <http://www.nationalfund.org/careerstat>.

Jobs for the Future develops, implements, and promotes new education and workforce strategies that help communities, states, and the nation compete in a global economy. In more than 200 communities across 43 states, JFF improves the pathways leading from high school to college to family-sustaining careers.

The Joyce Foundation

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The National Fund for Workforce Solutions is a national network promoting economic opportunity and prosperous communities through investment and innovation. Based in Washington D.C., the National Fund partners with philanthropy, employers, workers, public and private community organizations, and more than 30 regional collaboratives to invest in skills, improve systems, and generate good jobs. The National Fund supports civic and business leaders in promoting evidence-based practices and policies that build shared prosperity. Learn more about the National Fund and its local partners at www.nationalfund.org.



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Guide to Investing in Frontline Health Care Workers



- Executive Summary
- Why Invest in Your Frontline Health Care Workforce?
- **Employer Best Practices for Making Effective Investments**
- A Framework for Integrating Workforce Investments with Business Impact
- Resources for Investing in Frontline Workers

EMPLOYER BEST PRACTICES FOR MAKING EFFECTIVE INVESTMENTS IN FRONTLINE WORKERS

There is no “one size fits all” model for health care providers to effectively invest in their frontline workforce, but there are both programmatic and organizational practices common to the most successful employer-based programs. Fundamentally, “best practice” employers—including CareerSTAT’s Frontline Health Care Worker Champions—view their frontline employees as critical assets that increase business impact and improve quality of care.

They are learning organizations that 1) invest in programs to make education and advancement a priority for employees at all levels, and 2) maintain organizational structures, policies, and leadership support to realize the highest level of impact from their investments. This document features CareerSTAT Champion organizations that employ a combination of programmatic and organizational best practices. Specific examples are provided to illustrate how each practice is implemented.

CareerSTAT

CareerSTAT is a network of health care leaders investing in the skills and careers of frontline workers. CareerSTAT's Frontline Health Care Worker Champion program recognizes organizations making significant investments in their frontline employees. The programs and policies of these 25 Champions and Emerging Champions have informed the findings and recommendations of this Guide.

Who Are Frontline Health Care Workers?

Frontline health care workers provide routine and essential services in all settings, including hospitals, outpatient care, behavioral health, long term care and home health care. They represent 50% of the health care workforce and are responsible for a range of operations, including providing administrative, direct care, environmental, and technical services to patients, families, and caregivers. CareerSTAT focuses on those frontline positions that require less than a bachelor's degree and generally earn median incomes less than \$45,000 per year. For a full list of frontline occupations visit <http://www.nationalfund.org/initiatives/careerstat/who-are-frontline-workers/>.

Programmatic Best Practices

Programmatic best practices engage frontline workers directly in many forms of workforce training and education to expand talent pipelines and make learning and career advancement easily accessible.

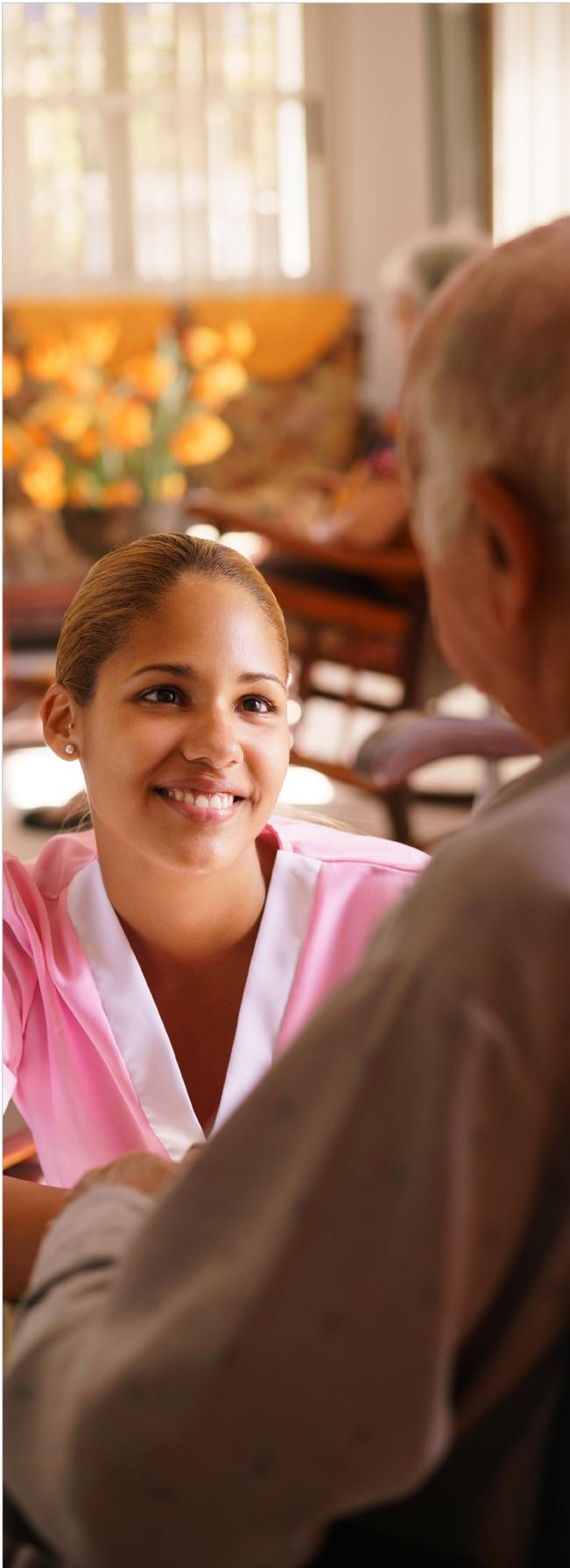
1. Inclusive Hiring	2. Accessible Learning	3. Career Advancement
<ul style="list-style-type: none"> Recruit from the community Create an incumbent worker pipeline Provide structured onboarding of new hires 	<ul style="list-style-type: none"> Basic skills development Work-based learning Competency-based instruction Flexible learning options 	<ul style="list-style-type: none"> Enhanced training to meet new performance standards Career exploration tools and opportunities Career coaching and counseling Career pathways

Organizational Best Practices

At the highest level, organizational best practices ensure that the necessary infrastructure and support are in place so that workforce training and education programs have the greatest impact on both the business and individual workers.

1. Engaging Leaders	2. Developing Infrastructure	3. Leveraging Resources
<ul style="list-style-type: none"> Alignment with organizational priorities Senior leader support and sponsorship Managers as coaches and champions 	<ul style="list-style-type: none"> Dedicated workforce units or staff Employee skill and educational assessments Supportive HR policies Workforce planning and analytics 	<ul style="list-style-type: none"> Secure seed funding and develop co-investment strategies Form industry partnerships with other employers Leverage partner expertise and resources Integrate with business operations

While not every employer can adopt all of these practices, CareerSTAT offers a framework for selecting practices that will ensure effective investments that develop frontline worker skills and have an impact on important business metrics. Employers can select practices based on organizational needs and capabilities, recognizing that a combination of both programmatic and structural practices is necessary.



Programmatic Best Practices

Inclusive Hiring

Inclusive hiring involves a set of practices that gives local community members and incumbent workers an opportunity to grow their careers in health care and provides employers with an expanded pipeline to fill high-demand positions. Employers frequently partner with community-based organizations or workforce intermediaries to implement inclusive hiring practices to improve the success of these programs and decrease turnover of entry-level workers.

Recruit from the Community

Health care employers, particularly urban hospitals, are intentionally recruiting and hiring individuals from the communities in which their patients and families live in order to offer opportunities to residents, increase workforce diversity, and demonstrate local investment. Extending workforce programs into underserved communities through recruitment and pre-employment training helps health care employers build a broader pipeline for frontline positions.

► **University Hospitals** is an anchor institution in Cleveland committed to hiring from their local community. In their “Step Up to UH” program, HR works closely with community-based partners to recruit residents from low-income, high-unemployment neighborhoods surrounding the main campus of the hospital system. After initial screening, candidates attend a two-week pre-employment course offered by Towards Employment, a local community based organization, in customer service, interview skills, and training to help them secure a job. Those who interview successfully are hired for positions in environmental services or nutrition services—often backfilling for UH frontline workers who have advanced through training into higher-level roles. Towards Employment provides new hires with job coaching to aid retention. Step Up to UH boasts a 95 percent 90-day retention rate and an 80 percent one-year retention rate.

Create an Incumbent Worker Pipeline

Recruiting and hiring incumbent workers into high-demand occupations offers employers a pipeline of employees that already meet important organizational hiring criteria: they are a cultural fit and have a strong performance track record.

- ▶ **Jersey City Medical Center**, an affiliate of RWJBarnabas Health in New Jersey, looked to its incumbent workers in environmental services, patient access, security, and patient transport to help the organization address key staffing shortage areas. Individuals were trained and promoted into higher-skilled, higher-paying occupations such as patient care technicians, medical assistants, billing coordinators, and emergency medical technicians. Experienced JCMC staff mentored students during the training course, and all experiential learning occurred onsite. Instructors collaborated with local and county human service agencies to provide wraparound support and referrals to services as needed. With financial support from Newark Alliance, JCMC has run three cycles of training in these occupations, with close to 100 percent retention. In addition to increasing employee engagement, the incumbent worker pipeline has filled high-demand positions yielding significant savings compared to the recruitment and onboarding costs of about \$5,600 per new hire. According to JCMC's Manager of Employment, Training and Development, Lourdes Valdes, "These employees have already been interviewed, prescreened, educated, and had their competencies assessed. They are knowledgeable about the customer service expectations, familiar with the facility. It is most efficient and effective to provide the opportunity to an internal, self-motivated, employee."¹

"It is most efficient and effective to provide the opportunity to an internal, self-motivated employee."

Structured Onboarding of New Hires

Frontline workers' success in transitioning to a new position and their experience during the first 90 days of employment is critical to retention and requires a structured onboarding process that includes orientation, assessment, training, and mentoring. For workers transitioning directly from unemployment or a non-clinical environment, support mechanisms are essential to ground new hires in the systems and workplace professionalism of the organization and their unit, as well as in job tasks and expectations.

- ▶ The home care industry is plagued by high turnover, but **Homebridge**, a nonprofit home care agency in the San Francisco Bay Area, invests heavily in the onboarding of its new entry-level personal caregivers, and it sees results. In addition to intensive paid training, new home care providers are engaged in work readiness workshops, barriers assessments, and cultural onboardings followed by months of supported one-on-one coaching and mentoring. Career ladders are built into the support model to ensure that home care providers have an opportunity to rise within—and outside of—Homebridge. Training instruction is conducted in three languages—English, Spanish, and Cantonese—using a competency-based curriculum designed for adults with a minimum sixth-grade reading proficiency. Each skill and knowledge area is tested with formalized assessments to ensure mastery before new employees begin working with clients. Homebridge is also providing every home care provider with uniform scrubs that will increase safety and professional respect and promote team unity and professional pride. Every home care provider is also being equipped with an iPhone and trained on using the technology to access client care plans and clock in and out of shifts electronically. With these comprehensive initiatives, Homebridge had a 23.8 percent annualized turnover rate in 2015 as compared to the 61 percent national average.

Accessible Learning

Making learning accessible to incumbent frontline workers frequently allows them to attend programs that develop new skills and knowledge while simultaneously maintaining their work schedules and salaries. Employers use different delivery methods to expand program access and increase the likelihood of successful program completion. These practices demonstrate a high level of organizational commitment to developing the talent of entry-level workers in a manner that is both good for employees and good for business.

Basic Skills Development

Offering basic skills instruction in the workplace helps to remove barriers to advancement for entry-level frontline workers, particularly when coursework is contextualized in the health care setting. Taking academic readiness courses in English language, reading comprehension, and math or other foundational skills is often the first step toward enrolling in more advanced courses, participating in a job training program, or completing a high school diploma.

► **LifeBridge Health** is one of the largest and most comprehensive providers of health services to the people of Northwest Baltimore. Encompassing four hospitals and one long-term care facility, LifeBridge targets frontline employees earning less than \$15 an hour. They offer a suite of no-cost programs and services to assist individuals to develop the necessary skills needed for career and academic success. From one-day computer courses to math and English courses modeled after college developmental education classes, LifeBridge offers courses in a variety of formats to meet employee needs. For example, School at Work® is a blended-learning basic skills program contextualized for health care that combines online learning with onsite instruction. Two life skills and career coaches are central to LifeBridge's strategy to help employees succeed in achieving their personal

and professional goals. As health care delivery evolves and the model for community engagement expands, LifeBridge continues to refine its workforce development strategies for low-wage employees as well as for community members. Fundamentally, LifeBridge leaders believe that investing in people's skills and careers has a positive impact in the communities they serve.

Work-Based Learning

Innovative employers are utilizing different types of structured work-based learning practices to promote skill mastery and to expand their talent pipelines. Work-based learning involves activities that occur in the workplace that allow individuals to gain the knowledge, skills, and experience needed for entry or advancement.² "Earn and learn" models such as apprenticeships and on-the-job training offer individuals an opportunity to be paid while they master skills and gain hands-on experience.

► **Penn Medicine** is a Philadelphia-based health system serving the community through its network of hospitals, clinical care providers, and the nation's first school of medicine. Penn's Patient Service Excellence Academy provides on-the-job training using an apprenticeship model to meet its growing demand for patient service representatives. The Academy recruits individuals from retail and service settings with a strong commitment to customer service who may not have access to jobs at Penn Medicine because they lack health care experience. Recruits are placed in a five-week immersive on-the-job training program that focuses on bridging the technical portion of the role and the service component. The goal is to develop the most understanding and compassionate individuals to work in Penn Medicine's clinical practices. Since 2012, Penn Medicine has trained and placed 105 participants as patient service representatives in its clinical practices. Additionally, Penn Medicine launched a similar academy program for its customer service access center. Two cohorts have successfully completed the program.

Competency-Based Instruction

Competency-based education is a form of instruction that focuses on student mastery of skills rather than on “seat time” in the classroom. Competency-based instruction is particularly valuable for learning in the workplace context, because it clearly defines skills and knowledge tied directly to careers. The learning is self-paced, programs are personalized to meet individual needs, and advancement is tied to mastery of competencies, not to credits or grades.

- ▶ The Workforce Development team at Boston-based **Partners HealthCare** recognizes the value of competency-based education for its frontline workers, particularly those in nonclinical positions who aspire to complete a post-secondary degree. In partnership with College for America of Southern New Hampshire University, Partners offers employees across its integrated system the option of low-cost, online, self-paced, competency-based associate’s and bachelor’s degree programs in health care management. All work at CfA comes in the form of contextualized project-based learning, which enables students to immediately integrate the competencies they are developing and apply them in a real-world setting. To ensure success in online learning, employees are required to complete an Online College Preparation Program, developed by Partners in collaboration with online learning experts. This program, offered free to employees of Partners and its member institutions, helps participants acclimate to online course delivery. Using a simulated web-based learning environment and multimedia, interactive presentations, the program provides an introduction to online learning as well as an opportunity to develop online learning skills through short courses in time management and study skills. Close to 600 employees have completed the college preparation program and over 300 employees are enrolled in CfA programs.

Flexible Learning Options

As part of their efforts to make the workplace “learning friendly,” health care employers work with educational partners to provide flexible learning models that better accommodate working adults. Onsite, online, and accelerated learning options are all available.

- ▶ **East Boston Neighborhood Health Center** has taken extraordinary steps to provide workers with the opportunity to train for new, more-advanced positions without having to leave the worksite. In 2006, the center established the onsite Education and Training Institute and then became the official East Boston satellite campus for Bunker Hill Community College. Staff and residents from the surrounding communities have access to college-level courses, including a three-credit medical interpreting program that results in a wage increase for bilingual entry-level workers. Providing onsite learning options has resulted in more than one-third of EBNHC’s frontline workers participating in training and professional development programs. A 2015 recipient of the *Boston Globe*’s “Top Places to Work” designation, EBNHC’s investment in training and education has enabled its frontline workers to increase their wages and improve their skills while at the same time making primary care more accessible to those living in the communities it serves.

“EBNHC’s investment in training and education has enabled its frontline workers to increase their wages and improve their skills while increasing the accessibility of primary care for those living in the communities it serves.”

Career Advancement

Individuals seeking jobs in health care often see frontline positions as their first step toward a higher-level, higher-paying position. Yet the low wages and high hurdles to advancement, including unclear pathways to licensed positions and lack of support for enhanced training, are major spurs to worker turnover and related employer costs. Employers who champion career advancement provide access to tools, resources, and opportunities needed to make advancement a reality.

Enhanced Training to Meet New Performance Standards

Health care workers at all levels must meet higher performance expectations in today's Affordable Care Act environment, and frontline workers are no exception. And as the demand for caregiving shifts from acute care to outpatient settings, workers may need to retool their skills.

► **The League of Voluntary Hospitals and Homes of New York** is the employer association partner in the nation's oldest and largest health care industry partnership, the 1199SEIU League Training and Upgrading Fund. As a labor-management partnership, the fund provides training and education to meet the League employers' and industry needs. Over 100 nonprofit medical centers, hospitals, and nursing homes in the greater New York metropolitan area contribute approximately \$23 million per year to the fund, which is used for an array of training and education programs and for upgrading benefits. These resources give employees the time, financial resources, and support needed to gain new skills and credentials as well as multiple options for securing new or advanced positions. The League, through the Training Fund, offers high school completion programs, workplace skills and skills enhancement trainings, college preparatory courses, English as a Second Language courses, and computer literacy, among others. The fund implements known best practices for workers'

success, such as cohort-based programs of study and courses, worker/employer-friendly course scheduling (evening and weekend college and online programs), case management, tutoring, career counseling, academic advisement, and child care services in some sites. Upon completion, the fund provides licensure and certification preparation courses, and continuing education and professional development seminars.

In 2015, more than 6,000 workers enrolled in programs that lead directly to career advancement and wage increases, while enabling the League's employers to deliver high-quality primary care.

Career Exploration Tools and Opportunities

Transparency—making possible career paths, and the actions and educational preparation required for each step, visible and comprehensible to all employees—is central to helping employees advance. Employers use a myriad of tools to aid staff in understanding different paths and options available, including career maps, individual education plans, job shadowing, and teaching “job research” techniques that include studying job descriptions, networking with managers, and monitoring current position openings.

► To illustrate the different types of jobs found in post-acute care facilities, **Genesis HealthCare** created a career map that outlines the education and training requirements for different positions and career pathway options. Developed in collaboration with the Baltimore Alliance for Careers in Healthcare, “Mapping Your Future, a Guide to Career Growth in Long-Term Care,” is used by incumbent workers at Genesis, high school students interested in pursuing a career in post-acute care or nursing, and at one-stop career centers around the Baltimore region.

“The role of the coach is very important for the success of our pipeline programs. For entry-level staff, this is often the first time anyone has helped them to create a career development plan....In return we have employees who are committed to our hospital and our community.”

Career Counseling and Coaching

Career counseling and coaching—to assess workers’ interests, guide their choices, and address their personal and academic challenges—are essential to supporting worker advancement. Career coaches use labor market information and online resources to expose frontline workers to possible pathways and help them think about how to navigate them.

- ▶ At Baltimore’s **MedStar Good Samaritan Hospital**, the coach is an RN and education specialist who supports frontline workers’ interest in transitioning into new jobs. The role of the coach is to help workers identify short- and long-term career goals, create an individual career development plan, and help them navigate continuing education to earn new credentials and move into new jobs that will improve their economic status. Resume development and help with interviewing skills are also important services offered. Career coaches consult with workers on how to perform their jobs better and help them identify barriers to performance and resources to overcome these barriers. Taking a holistic approach, coaches can help workers balance life, work, and school obligations, and assist with finding child care, transportation, or emergency funds to cover rent, utilities, or other expenses. Jeffrey Matton, a former president of MedStar, observes, “the role of coach is very important for the success of our pipeline programs. For entry-level staff, this is often the first time anyone has ever helped them to create a career development plan. It is the first time many have considered attending college, getting a certificate, or entering a real career path. In return we have employees who are committed to our hospital and our community.”³

Career Pathways

Career pathways offer frontline workers options for advancement on the job, including career moves within or between job families and occupations. While opportunities for job growth in clinical and non-clinical areas can be more common in large health care employers such as hospitals and integrated health systems, pathways do exist in long-term care, home health, and primary care. Employers from across the continuum of care are working together with community colleges and community-based organizations to create career pathway programs that include comprehensive supports to facilitate academic success.

- ▶ The employer-led Health Careers Collaborative of Greater Cincinnati organized five hospitals/health systems, including **TriHealth, Inc.**, and three community colleges, to provide training and wraparound supports to prepare incumbent workers for careers in nursing, allied health, rehabilitation, clinical lab, and health information technology. The career pathway program uses a cohort model to facilitate peer support and persistence. Employers provide tuition prepayment, funding for developmental education if necessary, flexible work hours to attend classes, supportive services to assist with transportation and child care, and job coaching. The community colleges offer academic advising, convenient class locations and schedules for working students, innovative curricula, and transferable credits and articulation agreements between institutions. Through 2015, more than 2,156 incumbent workers have participated in career pathways training.



Organizational Best Practices

Engaging Leadership

Frontline workforce initiatives succeed when leadership at all levels—chief executives, department heads, managers, and supervisors of frontline workers—support organizational investments in frontline workers. Having champions who understand and tout program benefits to other leaders helps to secure financial backing and commitment throughout the organization. And above all, strong leadership support binds workforce investment to organizational priorities and goals.

Alignment with Organizational Priorities and Goals

To fully engage health care executives in frontline workforce development—and ensure that initiatives become “part of the way we do business” rather than one-time programs—the investments must reflect core organizational priorities.

- ▶ Based in Shreveport, LA, **Holy Angels** serves approximately 200 individuals of varying ages with a range of intellectual and developmental disabilities. As an independent nonprofit, Holy Angels employs around 300 staff who focus on community integration through residential services and job coaching. Holy Angels makes frontline worker investment a major organizational priority to ensure that its direct service workers are equipped to provide the highest quality of care to clients. According to CEO Laurie Boswell, “over the years it has become painfully clear that many of the workers upon whose dedication, compassion, and professionalism we so greatly rely also need assistance maximizing their own human potential. Further, we believe that by helping workers to learn while they earn, we gain a more loyal long-term workforce that is increasingly able to support improvement to the continuum of care

we are known for.”⁴ In 2012, Holy Angels joined a collaboration with local education and workforce partners to establish Angel University. By offering multiple on-site training courses in Certified Medication Administration and foundational and life skills, and paying employees who participate in them, Holy Angels has seen a return on its investments. Holy Angels lowered staff turnover while securing a consistent retention rate of 82 percent for those who received certification in medication administration. In addition, 29 percent of Holy Angels’ employees received a pay increase from training.

Senior Leader Support and Sponsorship

Senior leaders such as chief human resource officers, vice presidents, or facility administrators often serve as champions, both internally and to the larger health care and workforce professional community.

- ▶ Pacesetters in this role include executives at Boston’s **Beth Israel Deaconess Medical Center**, who established workforce functions and successfully made the case to their institutions for sustained organizational support. BIDMC’s SVP of Human Resources was an early champion of workforce programming and capacity, overseeing the creation of the Workforce Development Director position. The hospital’s President/CEO and Chief Operating Officer were also strong proponents who regularly spoke at program events. They both recognized that investing in internal employee training and development programs is a cost-effective strategy that helps retain staff and fill critical positions. To cultivate mid-level champions, the workforce development team consults department directors and managers in areas such

as Pharmacy or Perioperative Services to determine their business needs and develop workforce solutions. These mid-level leaders supported frontline training and education programs when they experienced how well BIDMC’s internal pipeline programs addressed shortages or high turnover in key clinical and administrative positions at the hospital. Fundamentally, BIDMC is engaged in this work because its leaders believe in investing in its employees and because it makes good business sense.

Managers as Coaches and Champions

Frontline supervisors or managers play a pivotal role in the career development of incumbent frontline workers. As coaches or mentors, managers support their staff by encouraging them to grow their skills and consider steps to advance their careers. As champions, they recommend employees for training programs and grant release from work duties to participate in training. Supportive supervisors make schedule adjustments for frontline trainees and help backfill to cover their time off the unit.

- ▶ Leaders at **UnityPoint Health** in Des Moines, IA, believe in their motto, “Come for a job, stay for a career.” According to Joyce McDanel, VP of HR, in 2015, 92 percent of supervisor positions were filled by incumbent workers, but this was not always the case.⁵ When UnityPoint Health, along with other regional health care employers, realized it was losing frontline workers due to lack of quality supervisors and the absence of a structured program to develop new leaders, it developed “Breakthrough to Leadership” to address this challenge. The program fills supervisory roles with internal candidates seeking career advancement opportunities and

“The hospital’s President/CEO and Chief Operating Officer were...strong proponents...They both recognized that investing in internal employee training and development program is a cost-effective strategy that helps retain staff and fill critical positions.”

higher wages. Candidates with leadership potential are nominated by their supervising director as well as by peers. Once in the program, they attend classes with colleagues from a variety of departments and entities, meet with senior leaders, and receive training that increases the effectiveness of their communication and problem-solving skills.⁶ Since its inception in 2014, 67 UnityPoint Health–Des Moines employees have entered the program and 34 have received promotions. As new managers or supervisors, they have the opportunity to coach and champion advancement of other frontline workers, as their supervisors did for them.

Developing Infrastructure

While engaged leadership is critical to promoting workforce investment, it is just as important to build policies, systems, and structures to support skill and career development. And these capacities can help sustain workforce programs when an executive champion departs the organization.

Dedicated Workforce Development Units or Staff

Larger health care employers, especially hospitals and health systems, have established dedicated units or positions devoted to frontline workforce development, as distinct from traditional human resource or staff education departments. Such capacity, whether in a dedicated workforce director or in existing staff education units, is critical if frontline worker development is to remain an organizational priority.

- ▶ Over the past 21 years, **Fairview Health Services** in Minnesota has developed a deep infrastructure and longstanding support for workforce development programs. The Workforce Development-Talent Acquisition Department employs nine staff who offer an array of workforce development and career pathway services to all employees, students and community residents, from entry level through professional graduate degree programs. This department allows Fairview to devote full-time attention to program success: assessing needs, building relationships with educational partners

and community based organizations, and adapting workforce activities to changing labor demands. With an average of 1200 openings at any given time, Fairview has created an infrastructure that will help to secure 80% of its future employees through its student and community workforce program.

Employee Skill and Educational Assessments

Effectively coaching frontline workers often depends on assessing their skill levels, college readiness, and career interests in a systematic manner.

- ▶ Through the Employee Career Initiative at **Beth Israel Deaconess Medical Center** in Boston, BIDMC career coaches have a portfolio of assessment tools they administer onsite to workers interested in skill development and career advancement. Some of the tools include the TABE (Test for Adult Basic Education), ACCUPLACER (placement test for community college enrollment) test, personal interviews and self-assessment worksheets to understand an employee's interests, skills and values. After these assessments are completed, the career coach will help to develop individualized education roadmaps, or learning plans that include areas for skill development, occupational targets, and the coursework necessary to meet them. In FY15, over 550 BIDMC employees received an ECI service, including onsite academic assessment and career or academic counseling. Overall, 245 ECI participants have entered pipeline training programs at BIDMC or programs offered at local educational institutions.

Supportive HR Policies

Effective development of frontline workers requires more than a single program or initiative. It requires organizational policy that makes support for investing in skills and career advancement routine and sustained over time. Examples of supportive HR policies and employee benefits include tuition assistance, structured onboarding requirements, systematic competency assessment, and full or partial paid release time for education and training.

▶ A practice in good currency among many employers, including **UnityPoint Health**, is the payment of tuition costs in advance. While tuition assistance is often available to health care workers, it is commonly provided in the form of reimbursement, requiring initial out-of-pocket outlays that may be too costly for low-wage employees. UnityPoint also expanded its tuition assistance program to cover certificate-based training that wasn't previously covered. Training is offered on site whenever possible, and employees are allowed to stay on the clock and get paid during training time. UnityPoint's retention specialist helps frontline staff take advantage of the organization's range of educational and career development services offered as employee benefits. UnityPoint's economic incentive to maintain supportive HR policies and employee benefits is strong: high turnover in entry-level, non-licensed positions costs millions of dollars annually in recruitment, orientation, and training and leads to reduced continuity of care for those with direct patient contact.

Workforce Planning and Analytics

Making the business case for supportive workforce practices requires both quantitative and qualitative data. It also requires the capacity for data collection and analysis in order to support programmatic decision-making and the forecasting of talent development needs.

▶ **Norton Healthcare** in Louisville, KY, has established workforce planning and analytical processes that use data to determine strategic direction. Norton has staff and systems to collect and manage data in order to track programs, assess impacts, and analyze future needs. Central to its methods is a forecasting tool that aggregates data on specific occupational groups such as head count, turnover rates, recruitment metrics—including time to fill positions—vacancy rates, employee engagement, and required skills. The forecasting tool provides insights on where to target workforce programs. For example, the analysts determined that a majority of

Norton's medical technologists would be retiring. This finding, along with additional HR and service area data, helped make the case for an allied health career ladder for medical lab technicians and technologists. Similar analysis uncovered needs for developing talent in sterile processing and other operating room technicians, as well as health information technology occupations.

Leveraging Resources

Employers that make lasting investments in their frontline workers have mastered the art of leveraging resources from a variety of sources to start, scale, and sustain programs and infrastructure. Co-investment with philanthropy, other employers, unions, community-based organizations and government is the key to transitioning from temporary program-based funding for frontline worker development to more sustained funding of infrastructure supported by an organization's operational budget.

Secure Seed Funding and Develop Co-Investment Strategies

Often, seed capital provided by public grants and philanthropic investments brings employers and other stakeholders together to create workforce development programs. Outside support has enabled health care workforce investments to become both more intensive, by providing a deeper level of services and career opportunities for incumbent workers, and more extensive, by expanding the pool of employees or community members supported and the range of occupations engaged. Such support might come from a local United Way affiliate, a community or corporate foundation, a funders collaborative, or a state or federal workforce development grant program. After an initial period of grant funding, many employers have gradually assumed some or all of the costs of frontline workforce programs.

► In 2004, Baltimore’s **Johns Hopkins Hospital and Health System** established its initial frontline workforce initiative, Project REACH (Resources and Education for the Advancement of Careers at Hopkins), with U.S. Department of Labor grant funds. The program was an 18-month incumbent worker acceleration grant designed to develop employees’ skills and knowledge in order to fill vacant positions and meet urgent skills shortages. Over time, Project REACH has become a part of the organization’s strategic plan, is sustained by 100 percent institutional support from JHHS, and now includes five workforce development initiatives that provide comprehensive support for frontline workers’ academic and professional advancement.

Form Industry Partnerships with Other Employers

Health care workforce partnerships are dynamic collaborations of regional employers who convene regularly with the assistance of a workforce intermediary to discuss shared human resources issues, exchange labor market information, and take specific actions to address workforce challenges. Education and training providers, community-based organizations, unions, and the workforce development system (including one-stop career centers) are often actively engaged with employers in developing and implementing collaborative solutions to solve current and projected workforce needs.

“Employers do not need to develop and maintain expertise in all aspects of workforce development to effectively support their frontlien workers. Drawing on the strength of partner organizations is an effective use of resources and demonstrates collaboration and a desire for collective impact.”

► **Baltimore Alliance for Careers in Healthcare (BACH)** works with health care providers, educational institutions, and local agencies to prepare residents of Baltimore with the skills and education needed to address the critical shortage of qualified health care workers in the region. Since its creation in 2005, BACH has achieved significant scale, serving over 1,000 workers and seven major health care system employers while building programs and partnership models for other regions to emulate. BACH also contributes to the salaries of career coaches in some hospitals in an effort to improve retention and advancement of entry-level workers, and it supports employees who need academic preparation prior to enrolling in postsecondary allied health programs.

Leverage Partner Expertise and Resources

Employers do not need to develop and maintain expertise in all aspects of workforce development to effectively support their frontline workers. Drawing on the strengths of partner organizations is an effective use of resources and demonstrates collaboration and a desire for collective impact.

► Boston’s Healthcare Training Institute is an initiative of JVS Boston, the largest workforce development organization in the greater Boston area and an industry leader in incumbent worker training. Health care employers clustered in Boston’s Longwood Medical Area wanted an effective strategy for creating cohorts of learners across institutions and offering varying levels of English for Speakers of Other Languages classes. With support from the mayor’s office and SkillWorks Boston, HTI opened two community classrooms, giving employees from three area hospitals access to four levels of ESOL classes in a location convenient to the workplace. In addition, JVS incubated a number of successful incumbent worker programs, including “Bridges to College” for **Boston Children’s Hospital** and **Brigham and Women’s Hospital**, and basic computer skills training program for **Beth Israel Deaconess Medical Center**.

Integrate with Business Operations

Full integration of workforce development into business operations ensures sustainability and signals commitment to providing accessible career advancement opportunities for frontline staff.

- ▶ Education and learning are part of the overall strategic plan for **Norton Healthcare** in Louisville. Norton uses 100 percent operational dollars to fund the over \$9 million spent annually on workforce development initiatives. Norton maintains a learning culture anchored by a career development model that incorporates virtually every best practice mentioned in the CareerSTAT Guide. Its model offers frontline employees numerous opportunities to opt in to education and earn promotions through the support of Norton's workforce development initiatives, Institute for Nursing, and Norton University. When CEO Stephen Williams is asked why he is so committed to investing in the education of frontline employees, he says: "My commitment to advancement to the workplace is personal. I began working in health care as an orderly while in high school, joining Norton Healthcare 37 years ago. Our employees are by far our biggest asset. I want our valued employees to have the same opportunity and support I did in growing their Norton Healthcare career."⁷

"Our employees are by far our biggest asset. I want our valued employees to have the same opportunity and support I did in growing their Norton Healthcare career."



CALL TO ACTION

The CareerSTAT Champion organizations cited throughout this document demonstrate how health care employers making effective investments in frontline workers implement a wide array of business practices, all of which reinforce one another. Their strategic investments in frontline workforce development improve business impact and help more individuals attain certifications, licensures, and degrees that lead to advancement and higher wages. We encourage more health care employers to adopt a combination of these programmatic and organizational practices in a manner that supports business priorities and demonstrates commitment to developing the talent of the frontline workforce.

The CareerSTAT *Guide to Investing in Frontline Health Care Worker* provides a framework and tools for developing workforce development programs, aligning with key business metrics, and measuring impact and outcomes. It is written for health care leaders who are creating or operating programs for frontline workers and building the business case for organizational investment. The complete Guide is made up of five companion documents, including:

- [Executive Summary](#)
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- [Resources for Investing in Frontline Workers](#)

To read the full Guide or any of the companion documents visit <http://www.nationalfund.org/learning-evaluation/publications/guide-to-investing-in-frontline-health-care-workers/>.

ENDNOTES

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Frontline Health Care Worker Champions

CareerSTAT's Frontline Health Care Worker Champions are recognized by their peers for their sustained investment in skill and career development of frontline workers. Representing health care organizations across the care continuum, these industry leaders are improving health outcomes for patients and increasing their business impact by making learning and advancement more accessible for their frontline employees. Since 2014, CareerSTAT has recognized 25 organizations. Their practices, policies and strategic approach inform the CareerSTAT Guide, best practices, and resources. Learn more about the Frontline Health Care Worker Champion program at <http://www.nationalfund.org/initiatives/careerstat/frontline-health-care-champions/>.

Acknowledgements

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Jobs for the Future develops, implements, and promotes new education and workforce strategies that help communities, states, and the nation compete in a global economy. In more than 200 communities across 43 states, JFF improves the pathways leading from high school to college to family-sustaining careers.

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The National Fund for Workforce Solutions is a national network promoting economic opportunity and prosperous communities through investment and innovation. Based in Washington D.C., the National Fund partners with philanthropy, employers, workers, public and private community organizations, and more than 30 regional collaboratives to invest in skills, improve systems, and generate good jobs. The National Fund supports civic and business leaders in promoting evidence-based practices and policies that build shared prosperity. Learn more about the National Fund and its local partners at www.nationalfund.org.



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A FRAMEWORK FOR INTEGRATING WORKFORCE INVESTMENTS WITH BUSINESS IMPACT

A community health clinic in a low-income neighborhood expands its emphasis on health promotion and chronic disease management. Clinic managers feel that medical assistants can play an expanded role on the care team to increase patients' adherence to their care plans and participation in new prevention programs. Since many of the MAs lack certification and the necessary skills, the clinic decides to invest in developing a competency-based training program to standardize skills and begin building a career pathway.

The clinic works with the local community college to develop coursework in topics such as motivational interviewing and to deliver onsite instruction; it provide release time for workers to attend classes and prepare for certification. Organizational champions encourage participation and communicate the value of the program not only to the MAs but also to the team members and to patients. The planned impact analysis focuses on employee engagement and quality-of-care measures. Data is collected before, during, and after training. Program completion rates are high. Nurse managers and physicians support staff as they transition into their newly expanded roles. The process is not as smooth as clinic managers expected, but they continue to improve it, in part, because the effort is closely tied to the organization's mission. Over time, as the MAs begin to function at a higher level, the impact on patient visits and adherence to care plans starts to be measurable. More MAs start to work toward becoming health coaches as part of their newly defined career pathway, with the goal of earning a higher wage. Ultimately employee engagement rises, quality of care improves, and the organization better understands the value of increased commitment to growing its frontline staff.

Employers who invest in their frontline workers see results. Integrating organizational strategy, workforce investments, and impact measurement is a business strategy that can make an organization more competitive and successful. This composite example is drawn from the experiences of several community health clinics to demonstrate how organizational priorities can drive program design so that the outcomes contribute to improved quality of care and enable career advancement for frontline workers.

CareerSTAT

CareerSTAT is a network of health care leaders investing in the skills and careers of frontline workers. CareerSTAT's Frontline Health Care Worker Champion program recognizes organizations making significant investments in their frontline employees. The programs and policies of these 25 Champions and Emerging Champions have informed the findings and recommendations of this Guide.

Who Are Frontline Health Care Workers?

Frontline health care workers provide routine and essential services in all settings, including hospitals, outpatient care, behavioral health, long term care and home health care. They represent 50% of the health care workforce and are responsible for a range of operations, including providing administrative, direct care, environmental, and technical services to patients, families, and caregivers. CareerSTAT focuses on those frontline positions that require less than a bachelor's degree and generally earn median incomes less than \$45,000 per year. For a full list of frontline occupations visit <http://www.nationalfund.org/initiatives/careerstat/who-are-frontline-workers/>.



While program sustainability is not guaranteed in this example, it demonstrates the case for continued investment in frontline workers. Making a compelling case for sustained investment is as much art as science. Sustainable investment in frontline workers is a long-term, iterative process that takes dedicated resources, leadership, workforce planning, and analytical capacity. Along with quantitative data, individual stories of success can grow organizational commitment. However, it can sometimes take years to achieve a high level of integration among organizational goals, program design, and business impact analysis. But when it does occur, the returns on investment are significant and ongoing.

Integrating workforce investments with analysis of business impact is essential to making the business case—not only to generate good evidence, but also to ensure that programs are sustainable. This is especially true in today's rapidly changing health care landscape, where shifting priorities and cost containment are the norm.

Employers in the CareerSTAT network, particularly those designated as Frontline Health Care Worker Champions, have learned that to demonstrate the value of frontline workforce development and understand when investment is warranted, the design of training and education programs must be closely aligned with strategic organizational priorities and integrated with measurement of their impact. The degree to which this integration occurs exists along a continuum from low to high. Regardless of where their efforts fall, employer intentions are often the same—making effective investments that advance the skills and careers of frontline workers while at the same time generating positive business outcomes.



Integration Framework

To support successful integration and advance the field, CareerSTAT offers a simple framework that integrates organizational priorities with program design and business impact analysis.

The framework offers guidance to organizations and practitioners as they develop the case for increased investment in frontline workers and promote wider adoption of the business practices that make those investments effective. Many CareerSTAT network members have experimented with different approaches to measuring the impact of frontline workforce development programs. Their experiences highlight the challenges of doing this work. A particular challenge is the difficulty in determining program cause and effect due to modest program size and duration, especially when many factors—turnover, patient experience, and quality of care—impact metrics. In addition, data collection and analysis can be difficult when systems do not align and external events such as health system mergers shift priorities.

Despite these challenges, most health care employers would agree that to maintain and/or increase investments they must document the impact of frontline worker programs using metric-driven research and best practices. The CareerSTAT integration framework as seen in Figure 1 includes a series of steps and key questions to consider while deciding which metrics to measure and best practices to implement. A set of additional questions can be found on the CareerSTAT website at <http://www.nationalfund.org/careerstat>. These questions build on the key questions posed here and serve to guide organizations as they begin to think about developing an integrated framework. Please note that this is not a step-by-step guide specifically for measuring impact and developing a business case. Evidence-based resources for these activities are listed in final section “Resources for Investing in Frontline Workers”.

1. Understanding Strategic Priorities

Key Question: How do organizational goals impact frontline staff?

Understanding your organization's strategic priorities and how they impact frontline workers is a critical first step in the process of designing a workforce development program or analyzing business impact. These are the high-level goals that drive the organization: they could include achievement of the triple aim of lower per-capita costs, better patient experience, and improved population health. Strategic goals might also include care coordination, employee engagement, sustainability, or economic health through an expanded consumer base or increased physician partnerships. It is essential to engage senior leadership in discussing organizational goals and their relevance to frontline staff. Just as vital is to know where the organization is "hurting"—areas where gaps in talent or specific skills are barriers to meeting strategic priorities.

2. Designing Effective Workforce Programs

Key Question: What program elements or business practices need to be integrated into the program design?

A successful workforce training and education program will comprise many program elements. Changes in organizational infrastructure and HR policies and procedures may also contribute to the design of an effective program. Selecting appropriate practices for your organization will depend on a variety of factors, including the nature and severity of workforce challenges, such as gaps in skill, or vacancies in key occupations; existing capacity and experience in developing frontline talent; and the presence of executive champions and financial resources to support program development. Program advocates should involve managers and leadership in high-level design of workforce initiatives. Starting small with a pilot so that leaders can test practices and impact is a good idea. If scaling an existing program to

Figure 1: Integration Process



reach a broader audience, it is important to consider operational feasibility and program results. Sustainable and effective workforce investments are ones that track the organization's strategic goals and address the problems that keep leadership up at night.

3. Designing Impact Analysis

Key Question: What key metrics can realistically be measured and analyzed?

If business impact analysis or evaluation of a workforce program is to be compelling, it needs to be designed and implemented in parallel with program start-up and execution. Relevant baseline measures can be defined and put in place, as well as comparison groups where possible. It may be sufficient to select just a few key metrics that are highly relevant to the business case. But it is critical at this point to ensure that adequate data are available to make the case and that obtaining the data is feasible. It is also important to account for the fact that not all metrics are equally measurable. While some benefits can be expressed in dollars, other returns on workforce investment, such as staff diversity, provision of advancement opportunities, increased employee engagement, and fulfillment of a hospital's community service mission, are harder to define in monetary terms and require other quantitative or qualitative metrics.

4. Implementing Programs and Collecting Data

Key Question: How will program implementation and data collection occur in a coordinated and complementary manner?

In this phase, the process moves on parallel but related tracks: rolling out and operating workforce programs, and collecting data to measure their impact. For programs to be effective, there needs to be sufficient staff time to manage, deliver, and monitor their operation. The same holds for data collection and analysis. Even more critically, team members responsible for workforce programs and for tracking their impacts need to work closely together from the outset to outline common expectations and responsibilities, anticipate hurdles, and identify strategies to address them. If program delivery and/or data collection involves outside organizations such as colleges or research organizations, agreements and timelines need to be in place and managed effectively. Ideally, programs will be implemented according to the project plan, but workforce and analytical staff need to be prepared for unexpected changes or disruptions—changes in strategic direction, budgetary restrictions, or other contingencies—and adjust the measurement process accordingly.

5. Analyzing Impact

Key Question: How did the program impact frontline staff and the organization?

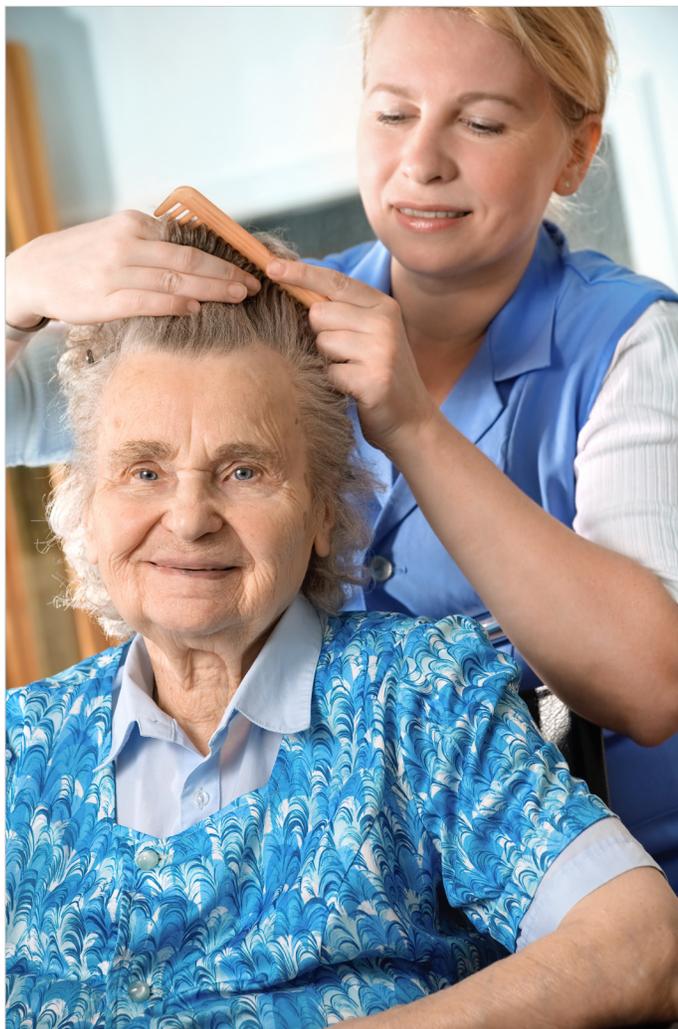
The analysis of frontline workforce programs will be driven by the research questions. For example, what changes occurred in behavior, attitude, performance, and related outcomes for patients, staff, the organization, and the community? In what ways did frontline workforce investments contribute to these changes? The specific questions—and the measures used to answer them—will reflect the kind of business case being developed: improvement in patient experience or quality and safety measures; improvements in workforce availability, including reduced turnover; or improvements in employee

competency and advancement. While it is preferable to choose as simple an analysis as possible, it may be necessary to enlist outside research professionals to perform the business impact study. In this case, it is vital that there is close and regular collaboration between the internal research team—including workforce program staff and data experts—and outside evaluators. The latter should perform early checks to ensure that data are complete and submit initial results for review. The team may determine that additional variables need to be analyzed or controlled for.

6. Sharing Impact Findings and Informing Strategy

Key Question: What compelling story best communicates impact?

Once the analysis of business impact is complete, the results can be used to support continuous improvement of workforce development programs to further support an organization's strategic priorities. Depending on the findings, the analysis can be used to make the case for deepened investment in workforce programs and infrastructure, including hiring staff to direct programs, raising outside support, and providing coaching and career navigation services. But using impact findings to deepen investment will only be effective to the extent that key stakeholders in the organization are informed about the results and given an opportunity to provide critical feedback on outcomes and their implications for the organization. Decision-makers also need to hear individual stories that complete the portrait provided by data and analysis. The power and persuasiveness of data is multiplied by the power of transformation in individual lives.

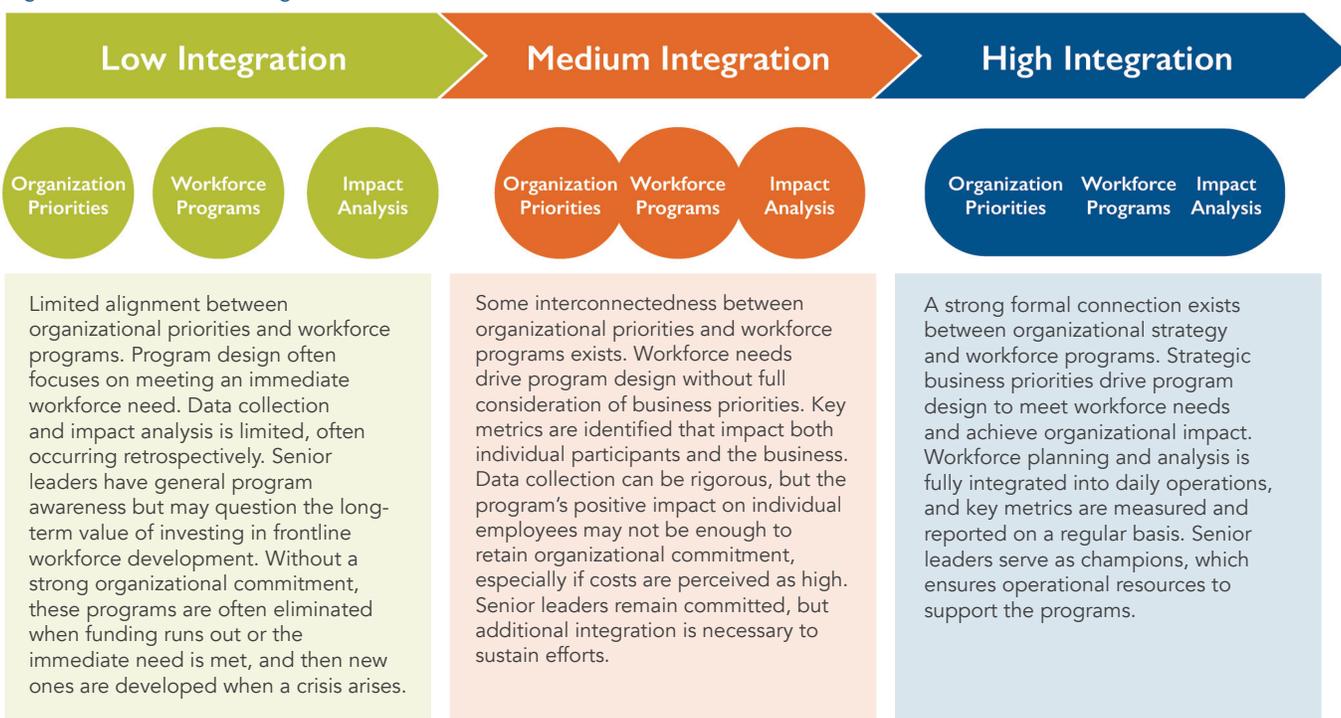


Continuum of Integration

Employer efforts to integrate frontline workforce programs with organizational priorities and business impact analysis exist along a continuum, from virtually no integration to full integration. Figure 2 describes three levels of integration and possible outcomes related to program sustainability and organizational investments. Generally speaking, all levels along the continuum integrate some best practices described in the CareerSTAT Guide. Employers engaged in the highest level of integration most likely have adopted a comprehensive array of both programmatic and organizational practices.

Throughout the CareerSTAT Guide, specific examples of organizational investments drawn from the Frontline Health Care Worker recognition program are highlighted to illustrate how practices take shape and produce positive outcomes. In this section, we offer composite examples from the experience of multiple employers.

Figure 2: Continuum of Integration



▶ **Composite Example of Low Integration:** A midsized hospital needs more patient care technicians to meet their growing patient census. The hospital receives a grant to develop a customized PCT training program with its local community college. Unemployed community members are recruited into the program and after receiving training are successfully placed in jobs at the hospital. Metrics focus on training completions and retention rates. The program begins to meet the hospital's workforce needs although it is not viewed favorably by managers because they feel they are forced to hire program graduates. After several cycles, one of the primary champions at the hospital leaves, and managers begin to express stronger dissatisfaction with the new PCTs. Retention rates begin to drop, and HR decides to revert back to their standard hiring process, resulting in fewer program graduates receiving job offers. As a result, the college hesitates to offer the program again, despite the large number of open positions at the hospital. The remaining champion at the hospital tries to gather additional data retrospectively to demonstrate business impact and overall cost savings but eventually the program is discontinued. Temporary staffing agencies are used to fill positions at considerable cost until a new strategy is developed.

▶ **Composite Example of Medium Integration:** A large urban hospital is committed to investing in its frontline workforce, particularly those entry-level workers who are interested in advancing their careers but lack the academic skills and preparation to attend a postsecondary program. Leadership is committed to creating career pathways and works with other employers to remove barriers to education and advancement. Hospital leaders work with a local community-based organization to offer GED and college preparation courses. Cohorts are small but engaged. There is a strong commitment to data collection, but the plan for collecting data only begins to take shape during program implementation. The impact analysis looks at turnover, diversity, and wages. Modest benefits are demonstrated, but questions about data quality hang over the analysis. As the Affordable Care Act rolls out, organizational priorities begin to shift, and the cost of supporting the existing programs is called into question. The organization is examining all programs and trying to figure out how to align them with strategic priorities. Some programs may be eliminated to make way for new ones, but the commitment to frontline worker skill development and career advancement remains strong. Leaders are striving to give workforce development high visibility in alignment with central organizational priorities even if their efforts aren't consistently supported and implemented.

▶ **Composite Example of High Integration:** An integrated health care system took deliberate steps to design workforce programs based on analysis of workforce needs and measurement of impact. This system is distinguished by the scale and longevity of its talent-development programs, including extensive tuition assistance, career coaching, and academic readiness courses. Its leadership believes that the mission of providing quality health care requires a culture of continual learning and academic progression. But hospital leaders acknowledged that in the early years of investing in frontline worker skills, career growth programs were funded without systematic analysis of workforce needs or program impacts. In response, the organization developed a process that would allow it to assess and project workforce needs, and measure the outcomes of workforce programs. The organization hired a full-time workforce analyst, and incumbent training programs are now calibrated to real-time needs and conditions, such as pending retirement of medical technologists or emerging skill needs in health information technology. As programs are designed and implemented, participants' outcomes—including retention, advancement, and engagement—are tracked, as are data relevant to organizational goals, such as patient satisfaction, to determine the outcome and effectiveness of investments, and to aid executives in making decisions to fund or modify programs accordingly. As a result, workforce development has high visibility and is a central system priority.



Call to Action

Effective design, implementation, and measurement of frontline investments is a dynamic process. Our knowledge and understanding of how to integrate program implementation with business impact analysis continues to evolve. As health care employers and workforce practitioners gain more experience in this area, we are refining the process and learning what is feasible. To advance the field, CareerSTAT will focus on documenting how organizations with a strong track record of investing in their frontline workforce use high-quality data to measure the business impact of their sustained investments. As we continue to learn, employers and practitioners are encouraged to join CareerSTAT's discussion on business impact analysis, share examples, and provide feedback on the proposed framework for integrating workforce investments with business impact analysis.

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RESOURCES FOR INVESTING IN FRONTLINE WORKERS

Business Impact Analysis

▶ Business Value Assessment

The Aspen Institute's Workforce Strategies Initiative designed this method to help practitioners and their employer partners assess the business value of their workforce services. Aspen WSI has developed a handbook explaining BVA and a toolkit containing spreadsheets and questionnaires for collecting and tracking various measures of business value.

<http://www.aspenwsi.org/resource/bva-toolkit/>

▶ Every Voice Matters: The Bottom Line on Employee and Physician Engagement.

Press Ganey, 2013.

Hospitals with high levels of employee and physician engagement score demonstrably higher on quality measures tied to payment reforms under the Affordable Care Act, according to this white paper by Press Ganey, health care human resource consultants. Employees' belief that their organization provides career growth opportunities is one of the key metrics of engagement. This research found that scores for core measures of the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey were higher in all dimensions when employees are highly engaged, including lower preventable readmissions. Hospitals that perform highly on employee engagement also improve their bottom line, receiving \$1.17 for every dollar at risk in the Affordable Care Act's Value-based Purchasing Program, which rewards health care providers for lowering costs. <http://healthcare.pressganey.com/2013-PI-Every-Voice-Matters>

▶ From Hidden Costs to High Returns: Unlocking the Potential of the Lower-Wage Workforce.

Tony Proscio, 2010.

Insight Center for Community Economic Development. This business brief summarizes research that found that selected pioneering companies are benefiting financially by investing efforts and resources in employee development for their lower-wage workers and rewarding their growth

with significant earnings increases. These employers see workforce development as key to maintaining a competitive edge. They view their lower-wage workers as a valuable asset: a means of continually improving quality and a potential talent pool for higher-level positions.

<http://nfw-solutions.org/sites/nfw-solutions.org/files/publications/HiddenCosts-HighReturns.pdf>

▶ Greater Cincinnati Workforce Network, Health Careers Collaborative of Greater Cincinnati. Return On Investment Report: 2011.

This report, prepared by the NewGrowth Group, analyzes the return on investment to a hospital employer, University of Cincinnati Health, for training low-skilled incumbent workers for occupations requiring Associate's degrees, as well as the benefits to employers of certificate training programs for low-skilled workers.

http://nfw-solutions.org/sites/nfw-solutions.org/files/HCC%20ROI%20UCHealth_11.pdf

▶ Measuring Business Impact in Workforce Development: A Workforce Development Practitioner's Guide. Lisa Soricone, Navjeet Singh, & Rebekah Lashman, 2011.

This is a step-by-step guide to measuring business impact of sector-based workforce projects, including health care, drawing on the work of Massachusetts' Commonwealth Corporation. The guide is targeted to both workforce development practitioners engaged in project planning or implementation, inside or outside the workplace, as well as program evaluators.

http://commcorp.org/wp-content/uploads/2016/07/resources_2011-11-measuring-business-impact-workforce-development-guide.pdf

▶ Measuring Business Impact: Lessons Learned from Workforce Development in Massachusetts.

Lisa Soricone and Navjeet Singh. 2011.

In this companion document to the Workforce Development Practitioner's Guide, the authors

present challenges and opportunities of business impact measurement, using projects from Massachusetts' Workforce Competitiveness Trust Fund, including health care, manufacturing, trades, and financial services.

www.commcorp.org/resources/detail.cfm?ID=899

► **Profiting From Learning: Do Firms' Investments in Education and Training Pay Off?**

Laurie J. Bassi, Jens Ludwig, Daniel P. McMurrer, & Mark Van Buren, Association for Talent Development, 2000.

This study found a significant correlation between what firms invest in work-based learning efforts and their total stockholder return. Of the nearly 600 companies examined in this study, those firms investing in employee development experienced better earnings, a higher return on equity, and better stock performance. Specifically, firms that invest more than the average amount on work-based learning programs have total stockholder returns that are 86 percent higher than firms that invest less than the average, and 45 percent higher than the total market average. The bottom line is that training creates value for organizations.

<https://www.td.org/Publications/Research-Reports/2000/Profiting-from-Learning>

► **ROI 360°: How Workforce Partnership Training Benefits Business, Workers, and Community.**

2014.

JOIN, the Job Opportunity Investment Network, is a Philadelphia-based public-private partnership of regional and national funders that invests in and evaluates best practice efforts in the education and training of the low-skilled workforce. This publication presents analysis and case studies on the return on investment for employers and workers of workforce programs in health care and human services (an independent living center), and in high-technology manufacturing (computer components), while explaining the methodology for estimating ROI. It found that businesses captured "significant value" from participating in partnerships and trainings, even if the latter were short term. Workers, on the other

hand, accrued greater benefits from longer-term training, involving career paths and credentials.

http://joincollaborative.org/wp-content/uploads/2014/04/JOIN_ROI.pdf

► **Talent Investments Pay Off: White Paper. Cigna Realizes Return on Investment from Tuition Benefits.**

Lumina Foundation, 2016.

Working with consulting partner Accenture, the Lumina Foundation sponsored a study of the Return on Investment of the Education Reimbursement Program of insurer and health services provider Cigna. Accenture developed a framework for calculating the ROI of Cigna's tuition assistance, drawing on employee data from 2012 to 2014, as well as a "maturity model" to help employers assess their capacity to measure ROI from tuition programs. The study found that Cigna reaped \$1.29 for every dollar invested in the Education Reimbursement Program.

<https://www.luminafoundation.org/files/resources/talent-investments-pay-off-cigna-full.pdf>

► **Turning Skills into Profit: Economic Benefits of Workplace Education Programs.**

Michael R. Bloom and Brenda Lafleur, Conference Board, 1999.

On behalf of the U.S. Department of Education's Office of Vocational and Adult Education (now the Office of Career, Technical, and Adult Education), the Conference Board studied 45 national workplace education projects. It found a wide range of benefits, including bottom-line results such as increased profitability, greater employee and customer retention, reduced errors, improved job skills, and increased employee morale and team functioning.

http://www.conferenceboard.ca/Libraries/EDUC_PUBLIC/Skills_Profits.sflb

- ▶ **Why Companies Invest in “Grow Your Own” Talent Development Models: Including a Tool for Calculating Return on Workforce Readiness Programs.** Corporate Voices for Working Families, 2011.

This brief summarizes research conducted by CVWF that sought to calculate whether the education and training investments made by three well-known American companies were effective, and whether they were creating a positive return on investment. The employers— CVS Caremark, Johns Hopkins Hospital, and Pacific Gas and Electric—participated in the research and shared information about their workforce readiness training programs. The report features a companion “Return on Investment (ROI) Tool” designed to help calculate the real dividends associated with workforce education and training. <http://gradsoflife.org/wp-content/uploads/2014/09/Why-Companies-Invest-in-Grow-Your-Own-Talent-Models.pdf>

- ▶ Corporate Voices for Working Families also produced a brief summary of its research, findings, and methodology, in the following report, **Building the Business Case for Investing in Tomorrow’s Workforce: Employers See Positive Returns from Community Partnerships.** <http://www.readyby21.org/sites/default/files/Building%20the%20Business%20Case%20for%20Investing%20in%20Tomorrows%20Workforce.pdf>

Health Care Workforce Development

- ▶ **A Guide to Upskilling America’s Frontline Workers: A Handbook for Employers.**

Deloitte, in collaboration with the Aspen Institute, 2015.

This handbook was produced for UpSkill America, a coalition of employers, educators, nonprofit organizations, unions, and government agencies committed to advancing the nation’s 24 million frontline workers across all industries. It shares with CareerSTAT the mission of recognizing leading

employers that provide career opportunities to frontline workers, promoting widespread adoption of such practices, and cultivating public/private education and workforce development efforts in support of skill and career development. The handbook offers employers tools for assessing their capacity for upskilling their workforce, making the business case, and initiating workforce development programs. It includes a “maturity model” that helps track where a business stands in terms of defining job roles, identifying workers’ skill sets, and building career pathways.

http://www.upskillamerica.org/wp-content/uploads/2015/04/Upskilling_Employer_Handbook_042015.pdf

- ▶ **Developing an Effective Health Care Workforce Planning Model.** American Hospital Association, 2013.

This white paper outlines a process for health care workforce planning, including developing a current workforce profile, defining future workforce needs, and determining gaps. It includes an assessment tool to discern workforce needs, particularly in light of a shift to team-based models of care. The paper covers four components of workforce planning: workforce data, workforce planning strategy, planning to create pipelines for filling workforce needs, and evaluation to monitor effectiveness of the plan. The AHA produced the paper in cooperation with the Association of Nurse Executives and the American Society for Healthcare Human Resources Administration. <http://www.aha.org/content/13/13wpmwhitepaperfinal.pdf>

▶ **The Pioneer Employers Initiative**

The Hitachi Foundation has documented a number of employers who have found economic incentives for improving the jobs and career opportunities of employees, including many in health care. In cooperation with researchers from HealthForce Center at UC San Francisco, the Foundation produced a series of case studies, **Innovative Workforce Models of Health Care**, showcasing primary care practices that are expanding the roles of medical assistants and other frontline workers in innovative ways. The organizations selected are implementing practice models that improve organizational viability and quality of care for patients while providing career development opportunities to frontline employees.

<http://www.hitachifoundation.org/our-work/good-companies-at-work/pioneer-employers/the-pioneers-of-healthcare>

<https://healthforce.ucsf.edu/publications>

- ▶ For further guidance on developing frontline health care worker programs, with a hospital focus, see: **Developing Your Own Pioneer Program Implementation Toolkit**. The Hitachi Foundation, January 2013.

http://www.hitachifoundation.org/storage/documents/Toolkit_FINAL.pdf

- ▶ **Strategies for Health-Care Workforce Development**. Kalima Rose, Mary Lee, and Victor Rubin, PolicyLink, 2015.

Building an Inclusive Economy series. This brief was created as part of a series of policy papers to assist civic leaders in New Orleans with addressing high unemployment rates among African-American residents and was later adapted for a national audience. It provides case studies of workforce training and career development initiatives in health care, both community- and employer-based, including key strategies and recommendations.

http://www.policylink.org/sites/default/files/pl_brief_nola_healthcare_FINAL_0_0.pdf

Frontline Health Care Worker Champions

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Acknowledgements

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The Joyce Foundation

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ADDITIONAL QUESTIONS TO CONSIDER

These supplement the Key Questions posed in the Guide's [A Framework for Integrating Workforce Investments with Business Impact](#)

Step 1

Understanding Strategic Priorities

Key question: How do organizational goals impact frontline staff?

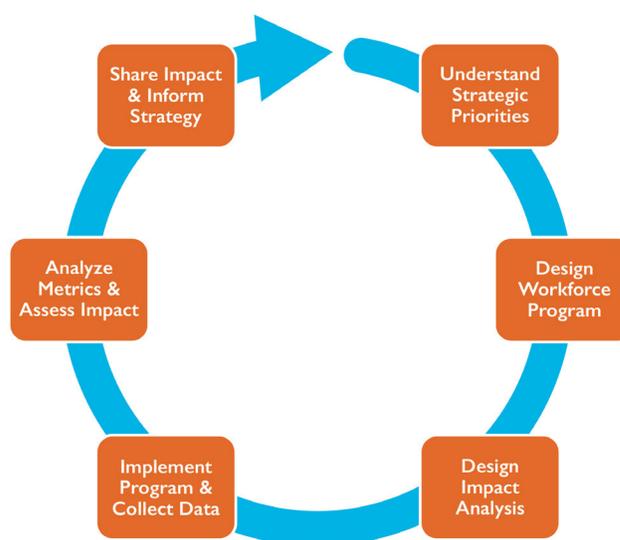
- What are your organization's strategic imperatives or high level goals?
- Do these imperatives create or increase workforce risks and challenges?
- How do these risks and challenge impact the frontline workforce?
- What are the key indicators of these workforce risks/challenges?
- If you don't have the talent or skills needed, will the strategic imperative fail or be hampered significantly?
- What are the gaps between the talent you have and the talent you need to meet these objectives?

Step 2

Designing Effective Workforce Programs

Key Question: What program elements or business practices need to be integrated into the program design?

- What are the goals of the program?
- How do the goals for the program align with organizational strategy?
- What program activities and/or changes in organizational practices will best achieve these goals?
- What capacities are now in place to implement program activities, including instructors, coaches, or HR policies and procedures?
- What sources of internal and external financial support are needed to undertake the project?
- Who is your executive sponsor or leadership support for the project?
- How will the project be valued by the organization and is there agreement on how to determine the success of the program?



Step 3

Designing Impact Analysis

Key Question: What key metrics can realistically be measured and analyzed?

- How will the program bring about the desired changes?
- What are the key metrics of program success? For the employer? For the individual?
- What are your capacities for impact analysis or evaluation?
 - ▶ Who in the organization has experience / knowledge of business evaluation?
 - ▶ Are they available to evaluate your project?
- Does your organization have reliable sources of data that can be used to evaluate impact?
 - ▶ What are those sources of data? Who "owns" them?
 - ▶ How can you attain access to that data?
 - ▶ Are the data reliable? If the data are from multiple sources, are they compatible?
 - ▶ How much cleaning or adjustment of the data will be necessary?

Step 4

Implementing Programs and Collecting Data

Key Question: How will program implementation and data collection occur in a coordinated and complementary manner?

- Who will participate in the workforce program(s)?
 - ▶ What business units and occupations will be targeted?
 - ▶ How will participants be recruited?
 - ▶ How will participants be assessed? By what criteria?
- How will workforce programs be delivered and managed?
 - ▶ Will programs be delivered by internal Learning or HR professionals? By outside educational organizations? Both?
 - ▶ Is there dedicated staff to manage workforce programs, and to whom do they report?
 - ▶ Are supervisors of participating frontline workers informed and cooperative about program opportunities and scheduling logistics?
 - ▶ Are there plans to meet staffing needs in cases where participants are in training?
- How will data be collected and managed?
 - ▶ Who will serve as a point person responsible for data collection and analysis, and to whom does he or she report? Are there back-up staff should the point person depart?
 - ▶ Is there a cross-functional team, including workforce and analytic staff, coordinating data collection and impact measurement?
 - ▶ What systems (platforms, software, procedures) are in place for collecting and managing data?
 - ▶ Are there procedures or programs in place, such as an Institutional Review Board process, to ensure ethical use of the data and protection of participant privacy?
 - ▶ If problems of data access, quality, or compatibility arise, are there procedures in place for addressing them?

Step 5

Analyzing Impact

Key Question: How did the program impact frontline staff and the organization?

- Who will perform the analysis?
 - ▶ If using outside researchers, are they fully

informed about health care environments, terminology, and constraints, such as HIPAA?

- How will results be shared with the team?
- How will the results be validated? (How can you ensure that the program is responsible for the outcomes measured?)
 - ▶ What outside benchmarks can you use for comparison, such as national standards for turnover, employee engagement, or patient satisfaction?
 - ▶ What population can you use for comparison, such as a group of frontline workers in comparable job titles and tenure who did not participate in the program?
 - ▶ How have you controlled for demographic or behavioral factors that could bias outcomes, such as previous education or motivational levels?
 - ▶ How have you controlled analysis for outside factors, such as high unemployment affecting turnover rates, or organizational changes affecting financial outcomes, such as acquisition or loss of market share?

Step 6

Sharing Impact Findings and Informing Strategy

Key Question: What compelling story best communicates impact?

- What do the impact findings mean for the conduct and content of frontline workforce programs?
 - ▶ Did they achieve anticipated results? If not, why not?
- How will senior executives, including CEOs, CFOs, and Chief Human Resource Officers, be engaged in reporting and discussing business impact results?
- How will results be presented to make them comprehensible, relevant, and usable to a non-technical audience?
- How will the results be used to inform workforce programming and investment decisions? To inform broader strategic planning in pursuit of business objectives?
- How will results be shared with a broader professional audience, including other employers in your network, industry associations, and human resource specialists?

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