Building Effective Workforce Collaborations:

FINDINGS AND LESSONS FROM THE NEW YORK CITY SECTORS INITIATIVE

Stacy L. Woodruff-Bolte and
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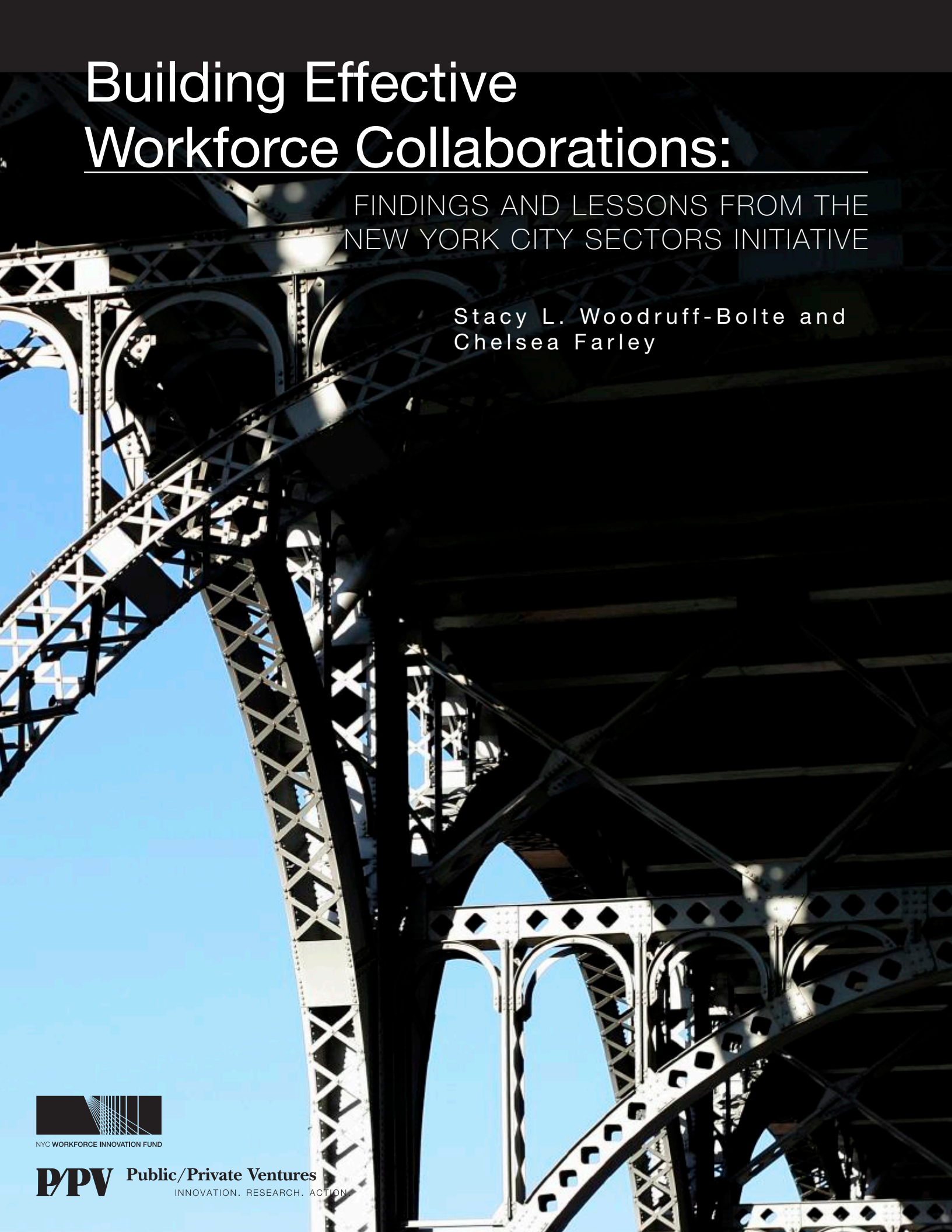

NYC WORKFORCE INNOVATION FUND

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Findings and Lessons from the New York City Sectors Initiative

Stacy L. Woodruff-Bolte and Chelsea Farley

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Public/Private Ventures
P/PV is a national nonprofit whose mission is to improve the effectiveness of social programs, particularly those that aim to help young people from high-poverty communities successfully transition to adulthood. Working in close partnership with organizations and their leaders, P/PV aims to:

- Promote the broad adoption of appropriate evaluation methods;
- Advance knowledge in several specific areas in which we have longstanding experience: juvenile and criminal justice, youth development (particularly out-of-school time and mentoring) and labor market transitions for young people; and
- Enable practitioners and organizations to use their own data, as well as evidence in these fields, to develop and improve their programs.

Ultimately, we believe this work will lead to more programs that make a positive difference for youth in high-poverty communities.

For more information, please visit: www.ppv.org.

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Introduction

Chapter I

Over the past decade, workforce development efforts have increasingly relied on collaboration to help job seekers—many of whom have serious barriers to employment—train for and secure steady work. Strong collaborations can improve the effectiveness of programs, avoid unnecessary duplication of services, and boost performance,[1] and they offer the opportunity for partners to achieve outcomes they would not likely be able to accomplish alone. Traditionally, these collaborations have occurred at the training- and service-provider level, involving community-based organizations, community colleges and even employers.

Funders are also increasingly entering collaborative relationships in hopes of jointly addressing issues at a scale that few of them could achieve on their own. These funding collaboratives offer members the potential to effect systemic change, align diverse resources around a coordinated strategic vision and build capacity within the targeted field of interest.[2] The National Fund for Workforce Solutions (NFWS), for example, was created in 2007 to organize a national network of regional funding collaboratives, assist low-income workers and job seekers, and produce positive changes in local workforce systems.[3] NFWS currently engages more than 30 local funding collaboratives that support workforce development efforts in cities across the country.

One of the most longstanding of these local collaboratives is the New York City Workforce Innovation Fund (WIF). Established in 2004, the WIF is composed of private funders who are members of a collective called the NYC Workforce Funders,[4] the NYC Department of Small Business Services (SBS), and the NYC Workforce Investment Board.[5] When it was formed, the WIF's leaders hoped it would:

- Create an opportunity to change the workforce system collaboratively;
- Facilitate a "smarter" or better informed grantmaking process; and
- Align investments in workforce development to produce a stronger impact.

To accomplish these goals, contributing members agreed to invest in innovative programs targeting specific industry sectors—programs designed to be responsive to both employers and job seekers. By late 2004, the WIF had developed and launched its first joint effort, the New York City Sectors Initiative (NYCSI). The WIF engaged Public/Private Ventures (P/PV) to assist with start-up, manage the initiative, conduct an evaluation and provide technical assistance.

This report describes the NYCSI's activities and outcomes, highlighting key accomplishments and challenges. It presents a number of important lessons for funders, policymakers and program leaders involved in collaborative workforce efforts. Across the country, diverse groups of partners are attempting to forge more effective workforce systems. This examination of the NYCSI experience is intended to inform and help strengthen their work.

The New York City Sectors Initiative: Projects, Participants and Outcomes

Chapter II

The need for stronger links between economic and workforce development was apparent well before the recession that began in 2008. Shifts in the labor market—for example, the steady loss of jobs in manufacturing and the growing demand for workers with strong math and science skills in sectors reliant on emerging technologies—have had major implications for training programs. Yet, information about the skills and competencies needed for in-demand jobs rarely trickles down to training and education providers in a timely manner. This has contributed to the difficulty employers experience in trying to fill jobs that require specific skills.

The disconnect impacts job seekers across the spectrum but disproportionately affects disadvantaged workers, including those with low education levels, limited skills or other barriers to employment. A high school diploma is no longer a passport to a good job or even an entry-level job with good potential for advancement, leaving more and more individuals bouncing from low-wage job to low-wage job, earning too little to support a family. At the other end of the spectrum, many college graduates emerge from higher education with a diploma but lacking the practical experience employers increasingly demand.

The NYCSI was launched in response to these issues in 2004. Its primary goal was to create a new model of workforce development in New York City that would link training and support services to key economic and labor market trends and take a "dual customer" approach—that is, meeting the needs of both job seekers and employers. Based on labor market research conducted by SBS, the WIF initially decided to focus the initiative on two industries expected to undergo growth locally—healthcare and aviation. Healthcare was then expanded to include biotechnology, an industry that SBS had great interest in supporting. The WIF funded a planning phase,[6] selecting two healthcare/biotechnology grantees (*Metropolitan Council on Jewish Poverty—Met Council—and the State University of New York Downstate Technology Center—SUNY Downstate*) and one aviation grantee (*Aviation Institute at York College*), from a total of 10 applications.[7] WIF members and staff from P/PV met with grantees throughout the planning phase to assess their progress toward developing viable proposals for a multi-year demonstration project. Ultimately, the WIF determined that the healthcare/biotechnology grantees possessed the capacity to implement their planned intervention, but that the aviation grantee was not yet ready for the required level of investment.

Met Council received a demonstration grant of a little over $1.5 million in Summer 2005 to support services and training that would prepare people for work as radiology technicians, emergency medical technicians (EMTs) and paramedics. SUNY-Downstate received a grant of approximately $850,000 in Fall 2005 to expand a biotechnology workshop offered at Hunter College, create a biotechnology scholars community, and develop pipelines from other City University of New York (CUNY) campuses into the workshop. The two programs began serving participants between 2006 and 2009, with the majority of programming and placements occurring prior to the recent economic recession.

Met Council: Training Qualified Workers for the City's Healthcare Industry

The healthcare sector has experienced both growth and increasing demand for workers, driven by an aging population, advances in technology and the retirement of skilled employees. Even during the recent recession—when more than 7.5 million jobs were lost nationwide between December 2007 and June 2009—healthcare continued to grow, adding some 428,000 jobs during the same period.[8] According to the Bureau of Labor Statistics, 3 of the top 10 occupations projected to grow the most between 2010 and 2020 are in the "healthcare and social assistance" sector (registered nurses, home health aides and personal care aides)—more than 2 million of these jobs are expected to be created nationwide.[9]

New York State followed national job-loss trends, posting more than 400,000 jobs lost during the recession.[10] At the same time, the state added approximately 21,000 jobs in education and health services.[11] Both nationally and locally, healthcare is a growing industry, hungry for new workers.

Through the NYCSI, Met Council, a large, multi-service agency, was funded to develop and expand its Medical Pathways (MedPath) model. MedPath was originally developed in cooperation with Emergency Care Programs, a provider of emergency medical technician (EMT) training, to help Russian-speaking individuals successfully complete EMT training and gain employment in the field. Met Council used the NYCSI grant to adapt the MedPath wraparound service model for other healthcare training programs, including paramedic and radiological technician (rad tech) training.[12]

Central to Met Council's MedPath model was the Parallel Achievement Skills Support (PASS) system, which had three phases—pre-training, in-training and post-training. During the pre-training phase, participants attended remediation and study skills classes at Met Council and met with support staff. Participants who satisfactorily completed pre-training were offered the opportunity to enroll in technical training. During this time, they were also required to participate in PASS in-training sessions, which were designed to help participants succeed in training. The sessions involved reviews of course material and tutoring in basic skills, as needed. Following the completion of technical training, participants moved to the PASS post-training phase, during which they prepared for certification exams and received assistance with job readiness and job placement. Throughout the program, participants had access to Met Council support services, which included coaching in interpersonal skills, group and one-on-one counseling, financial aid counseling and crisis intervention.

Met Council developed the three training tracks for the NYCSI based on labor market research and outreach to local employers that it conducted during the initiative's planning phase.[13] Table 1 provides summaries of the pre-training and technical training components of the three tracks and the certifications required to obtain employment in each occupation.

Table 1
Met Council's MedPath Training Tracks

Training Program	Outline of Pre-Training PASS	Outline of Technical Training	Certifications
EMT	• 3 nights/week for 5 weeks • Curriculum: medical terminology, study skills, practice tests	• 3-month training • 141 classroom hours • Written and practical skills exams • In-training PASS: 1 night/week (3 hours)	• New York State exam (written and practical) • New York City exam (written and practical)
Paramedic	• 2 nights/week for 4 weeks • Curriculum: review of medical terminology, study skills	• 1-year training • 2 full days per week in classroom (approximately 700 classroom hours) • 560 hours spent in clinical rotations • In-training PASS: 1 day/week (5 hours)	• New York State certifying exam • Regional Emergency Medical Advisory Committee exams (written and oral)
Rad Tech	• 4 nights/week for 8–14 weeks • Curriculum: basic physics, medical terminology, anatomy, physiology, study skills, contextualized math	• 2-year training (6 trimesters) • Clinical rotations beginning 2nd trimester; clinical-to-classroom ratio increases each semester • Cumulative exams at the end of the 3rd and 6th trimesters	• American Registry of Radiological Technicians (ARRT) license • New York State license (obtained simultaneously with ARRT license)

Table 2
Met Council's MedPath Participants

Characteristic	All Participants (n=182)	EMT (n=112)	Paramedic (n=31)	Rad Tech (n=39)
Gender				
Male	61%	63%	65%	54%
Female	39%	37%	35%	46%
Age				
18-24	31%	25%	29%	52%
25-34	43%	30%	42%	39%
35-44	19%	35%	26%	6%
45 and Older	7%	10%	3%	3%
Average Age	30.2	31.6	30.6	25.8
Race				
African American	36%	36%	50%	24%
Asian	37%	42%	4%	52%
White	25%	19%	46%	24%
Other Race	2%	3%	0%	0%
Ethnicity – Hispanic	25%	27%	13%	31%
Highest Level of Education				
Bachelor's Degree or Higher	14%	17%	6%	13%
Associate's or Vocational Degree	15%	13%	20%	18%
High School Diploma/GED	71%	70%	74%	68%
Borough of Residence				
Bronx	9%	9%	13%	6%
Brooklyn	44%	45%	29%	52%
Manhattan	17%	22%	6%	12%
Queens	23%	21%	39%	15%
Staten Island	7%	3%	13%	15%
Other Characteristics				
Married	27%	28%	27%	24%
Lives in Public Housing	12%	17%	3%	5%
Receiving Public Assistance at Intake[14]	10%	14%	7%	0%
Born in the United States	59%	50%	73%	75%
Primary Language Other than English[15]	24%	32%	10%	13%
Criminal Background	7%	7%	3%	10%

Met Council Participants

Between July 2006 and June 2008, Met Council enrolled 182 participants in pre-training PASS, slightly exceeding its goal of 180 enrollees; 143 of them went on to enroll in one of the three technical training tracks, exceeding the established goal of 131 technical training enrollees. Table 2 on the previous page provides a demographic overview of Met Council's MedPath participants. Overall, Met Council enrolled more males (61 percent) than females in its training programs. The average age for participants was 30 years old. A high school diploma or GED was the minimum education level required for the three training tracks, but nearly one third of participants had an associate's or bachelor's degree at entry.

Across the three tracks, participants differed in notable ways: Rad tech participants were, on average, younger than EMT and paramedic participants, with more than half between the ages of 18 and 24. Rad tech and EMT participants were most likely to identify themselves as Asian, while paramedic participants were mostly African American and white (split nearly evenly). EMT participants were somewhat more economically disadvantaged; they were more likely to live in public housing and to receive public assistance than both paramedic and rad tech enrollees. They were also more likely to have been born outside of the United States (50 percent) and to note a language other than English as their primary language (32 percent).

As noted above, not all pre-training PASS participants enrolled in technical skills training. In most cases, these individuals dropped out of pre-training prior to completion. A smaller number completed pre-training but were deemed unready to enroll in technical skills training. Finally, a few individuals completed pre-training PASS but chose not to enroll in technical skills training. Our analysis showed no discernible differences between the participants who proceeded on to technical training and those who did not, based on the demographic characteristics presented in Table 2.

Met Council's Outcomes

Among the participants who advanced from pre-training PASS into technical training, 113 people (79 percent) completed the training component, falling slightly short of the goal of 115 training completions. Completion rates varied slightly between training tracks, ranging from 83 percent among EMT participants to 71 percent for paramedic trainees. As discussed in Chapter III of this report, the relatively lower completion rate for paramedics may be due to the fact that many of them were already employed at the time that they enrolled in training, which made it difficult for them to attend—and benefit from—PASS in-training sessions.

Met Council placed 86 training enrollees (60 percent) in a job related to the training, falling short of its goal of 104 placements. Again, placement rates differed among the training tracks, ranging from 55 percent of EMT enrollees to 71 percent of paramedic trainees. Met Council reported that a portion of EMT trainees, following graduation, decided not to pursue certification and subsequent employment as an EMT; by contrast, all paramedic training completers, who were generally advancing from a position as an EMT to a position as a paramedic, obtained certification and secured employment related to training. Similarly, nearly all rad tech training completers obtained employment related to training; of the 22 graduates, 19 had obtained certification and employment by the

Table 3
Met Council Employment Outcomes (for Participants Enrolled in Skills Training)

	All Participants (n=143)	EMT (n=83)	Paramedic (n=31)	Rad Tech (n=29)
Completed Skills Training	79%	83%	71%	76%
Placed in Employment	60%	55%	71%	66%
Hourly Wage Range	$10-34	$10-13	$25-27	$21-34

end of the study period. Of the three remaining graduates, two were reported to be studying for the certification exams and one returned to his country of origin prior to taking the certification exams.

Met Council tracked starting wages for some but not all participants. Given the missing data, starting wage ranges rather than average wages are presented in Table 3. The variation in wages between training tracks reflects both the intensity of training and the relative demand for workers. EMTs engaged in the shortest training program for an entry-level paraprofessional position. They earned starting wages of $10-12 per hour, but had frequent opportunities to earn overtime by working longer or extra shifts. At the time Met Council enrolled its first rad tech cohort, a shortage of rad techs was already affecting healthcare providers, and an impending regulatory change requiring all rad techs to possess state certification threatened to exacerbate the shortage. With two years' training and certification, rad tech trainees were able to land jobs offering starting salaries in excess of $50,000—with ample opportunities for both overtime wages and additional certifications accompanied by significant rises in wages.

The Bioscience Partners: Training Qualified Workers to Help Attract and Develop New York City's Biotechnology Industry

Over the past several decades, biotechnology has emerged as a major area of both private and public investment. Cities across the country have used economic development dollars to lure existing and start-up biotech companies. By most accounts, New York City is ideally positioned to emerge as a hub of biotechnology: The City contains several major academic and medical research institutions, top scientific researchers and a large concentration of venture capital. Despite these advantages, however, biotechnology has not thrived in the way it has in other localities, such as Boston and the San Francisco Bay area. Those in the industry have cited the cost of real estate—and the failure of government to adequately address this problem—as one of the primary reasons that this sector has not experienced more growth in New York.[16] Recent developments in New York City, such as the opening of the Bioscience Center at the Brooklyn Army Terminal (BioBAT) in 2008 and the East River Science Park in 2010, have begun to provide needed space for young biotech companies and biotech manufacturing. Responding to the economic development goal of attracting biotechnology companies to New York City, the State University of New York Downstate Medical Center (SUNY Downstate) partnered with Hunter College for the NYCSI (together, they are referred to as the Bioscience Partners throughout this report).

Serving as the centerpiece of the Bioscience Partners' project, the New York City Bioscience and Biotechnician Program Workshop was an intensive one-month-long, four-credit course held at Hunter College and intended for upper-level bachelor's and master's students. The course was first established at Hunter College in 1999 and offered students hands-on laboratory experience designed to prepare them for work in the biotech industry. While most participants were enrolled as students at Hunter College during the course, the Workshop was also open to students from other local colleges. NYCSI funding allowed the Bioscience Partners to increase the number of seats available in each Workshop from 24 to 36. Under the NYCSI, the Bioscience Partners offered a total of six Workshops.

Workshop sessions were held four or five days per week during winter or summer academic breaks and consisted of a morning lecture followed by afternoon laboratory work. Students were able to perform laboratory experiments on consecutive days, mirroring a typical laboratory workplace schedule. The lessons presented and laboratory protocols practiced during each Workshop addressed topics such as molecular biology, DNA, RNA, proteins and cloning. Prior to the beginning of each Workshop cycle, curriculum updates were made to reflect the newest relevant biotechnological discoveries and practices. Student performance was assessed through class participation, an oral presentation of laboratory results and a final examination.

Completing the Workshop with a grade of B or better qualified students for placement in a biotechnology-related internship and assistance obtaining employment in the field. Typically, both internships and employment opportunities were found in laboratories housed in such settings as universities, public agencies, start-up biotechnology companies and large research institutions.

Internships for participants were usually full-time, lasting two to three months and performed during the summer.[17] Most students pursuing internships received $1,000 stipends, funded through the CUNY Workforce Development Initiative.[18]

With few exceptions, completion of an internship was required before a student could obtain Workshop staff assistance with job placement. Workshop graduates usually found jobs as laboratory technicians or research assistants. For these positions, employers commonly required strong knowledge of biology and mathematics, as well as problem-solving skills. Some employers sought interns or employees with particular areas of expertise, such as hematology or experience working with animals in a laboratory setting.

Bioscience Participants

The Bioscience Partners enrolled a total of 181 students in the Workshop, meeting their enrollment

Table 4
Bioscience and Biotechnician Workshop Participants[a]

Characteristic	Percentage
Gender	
Male	31%
Female	69%
Age	
18-24	60%
25-54	40%
Average Age	25.6
Race	
African American	13%
Asian	43%
White	41%
Other	3%
Ethnicity – Hispanic	7%
Highest Level of Education	
Master's Degree or Higher	10%
Bachelor's Degree	31%
Associate's or Vocational Degree	10%
High School Diploma/GED	50%

Characteristic	Percentage
Academic Status at Enrollment	
Junior	9%
Senior	57%
B.A./M.A. Senior	7%
Master's Student	17%
Other	10%
Borough of Residence	
Bronx	9%
Brooklyn	25%
Manhattan	21%
Queens	32%
Staten Island	6%
Other City	7%
Other Characteristics	
Married	19%
Receiving Student Financial Aid	37%
Receiving Public Assistance	1%
Primary Language Other than English	5%
Enrolled as a Full-Time Student	77%
Employed at Enrollment	39%

[a] n=166

goal of 180. Fifteen students did not give consent to participate in P/PV's study, requiring us to limit analysis and reporting to 166 students.[19] As seen in Table 4, two thirds of these participants were female, and the average age at enrollment was 26. Nearly half of the students identified as Asian, and 41 percent identified as white. Students came to the Workshop from across New York City, with the majority living in Queens, Brooklyn or Manhattan. Compared to the individuals served by Met Council and other workforce development programs, the population targeted for Workshop enrollment was relatively more advantaged. Workshop participants were highly educated; nearly two thirds of the students enrolled during their senior year of college, and the Workshop attracted a number of post-graduates, including master's and Ph.D. students, as well as nonmatriculated participants who already held a B.A. Just one third of the students reported receiving federal financial aid, and only 1 percent received any form of public assistance.

Bioscience Outcomes

As shown in Table 5, 86 percent (143) of the participants completed the Workshop with a B or higher, making them eligible for placement in an internship and assistance finding employment. The Bioscience Partners fell short of their employment goals (127 job placements), reporting that about half (81) of the Workshop participants obtained an internship, and 47 percent (78) were placed in a job related to training. If we eliminate the participants who did not complete the Workshop with a B or higher (14 percent), the percentage of participants placed in internships and employment was 57 percent and 54 percent, respectively. The median hourly wage at placement was $17; reported wages ranged from $13 to $26 per hour.

Employment in a biotech setting was a primary goal for the Bioscience Partners, but site leaders recognized that enrollment in a post-graduate degree program was also a desirable outcome for the target population. During the demonstration period, the Bioscience Partners received permission from SBS to count graduates who subsequently enrolled in a Ph.D. program related to biotechnology (e.g., biology, chemistry) as a job placement. The rationale guiding this unconventional decision was that Ph.D. students are typically employed by their departments as paid graduate assistants, performing work related to the Workshop and their chosen field of study. Enrollment in medical school, however, was not counted as a job placement because medical students are typically not employed in a manner similar to Ph.D. graduate students.[20] In the end, 4 percent of the Bioscience Partners' job placements consisted of Ph.D. enrollments.

Because Workshop participants were enrolled in college, there was a structural lag between Workshop completion and placement in internships or employment. On average, about six months passed between Workshop completion and the start of an internship,

Table 5
Bioscience Partners' Outcomes

	Outcome among Workshop Participants (n=166)
Completed Workshop with a Qualifying Grade	86%
Placed in Internship	49%
Placed in Employment	47%
Placed in Employment - Job	43%
Placed in Employment - Ph.D. Program	4%
Median Hourly Wage	$17

and nearly one year elapsed between Workshop completion and placement in employment. While some students took the Workshop just prior to college graduation—thereby freeing them to move from the Workshop directly into an internship—many reported additional semesters were required before they could graduate. This lag is evidenced in the low numbers of internship and employment placements reported among the two final cohorts of participants. As a result, the outcomes reported here likely underrepresent the actual number of placements, since many were obtained following the conclusion of the study period.

In sum, both Met Council and the Bioscience Partners successfully enrolled participants who were a good match for the training offered, although the Bioscience Workshop participants were a comparatively more advantaged group. Both programs had reasonably good completion rates, but struggled to meet ambitious goals for placing participants in jobs. The next chapter explores some of the challenges and successes underlying these outcomes.

NYCSI Successes and Challenges

Chapter III

During the course of the NYCSI, Met Council and the Bioscience Partners accomplished several important objectives, with aspects of their programs proving to be highly successful. They also faced distinct challenges, which undermined their efforts to serve both job seekers and employers.

The planning phase served as a valuable reality check for both the funders and the grantees. The planning phase allowed grantees and the WIF to test potential strategies—and avoid moving forward with unrealistic ones. For example, the Bioscience Partners originally intended to develop a pipeline for students from CUNY's Medgar Evers College into the Workshop. This pipeline could have facilitated the eventual recruitment of a more disadvantaged student body, but WIF members determined that a viable pipeline could not likely have been built within the time frame of the initiative. Consequently, the WIF decided to focus on the existing Workshop—and training participants, drawn mainly from Hunter College, who had prerequisite skills commensurate with the demands of the local biotech industry.

NYCSI trainings positioned participants well for training-related jobs. While both programs fell short of overall placement goals—which were arguably ambitious—the jobs participants did secure were overwhelmingly related to training. Furthermore, the placements obtained either paid family-sustaining wages (in the case of the rad tech jobs and many of the Workshop placements) or positioned participants for advancement along well-defined career ladders (in the case of the EMT placements). Two aspects of the programs likely contributed to this success. First, in Met Council's healthcare training tracks, students were well prepared for critical certification exams. Graduates who obtained industry-recognized certification nearly always got a job related to their training. Second, there were the internships and clinical rotations that were part of training for both Met Council and the Bioscience Partners. These served, in effect, as auditions—it was not unusual for trainees to secure employment with the same employer for whom they had interned or conducted rotations. Clinical rotations in hospitals (rad tech) and with ambulance companies (EMT and paramedic) accounted for significant portions of the time Met Council participants spent in training, providing them with hands-on experience and exposure to the workplace environment and daily routines. The Bioscience Partners enhanced the existing Workshop to include and emphasize access to the internship, which gave participants experience, professional connections and an advantage in obtaining training-related employment.

The NYCSI programs tested elements of their models and determined which ones worked. Met Council tested its PASS model on three occupational training tracks and determined that it was best applied to trainings that targeted job seekers (the EMT and rad tech tracks), rather than incumbent workers (the paramedic track). Part of the problem with applying PASS to paramedic training was logistical—most paramedic students are working EMTs, already juggling a nontraditional work schedule with attending classes. Requiring paramedic trainees to set aside additional time for in-training PASS sessions was not practical, and Met Council reported that its skills training partners could not be counted on to enforce PASS attendance. While Met Council was obligated to train a certain number of paramedics under its NYCSI demonstration grant, it has chosen not to include the occupation in future MedPath funding proposals.

The Bioscience Partners experimented with a process for matching program graduates to internships, which included assessing the needs and preferences of both the employers and students. This system typically provided both parties with choices—when possible, a student was sent on multiple interviews and each employer was sent multiple students. The approach proved successful, resulting in satisfied program graduates and employers who asked to participate in the internship program again and again.

Programs made successful mid-course corrections to their recruitment strategies. Both programs ultimately met target goals for participant enrollment, although it required a longer period of time than first anticipated, along with some mid-course changes to programming and recruitment strategies. Both

grantees added extra program cohorts, requested no-cost extensions to facilitate the extended training schedules, and reallocated resources to improve recruitment. Initially, for example, Met Council spread recruitment duties among nearly all program staff. Because staff members took on recruitment in addition to their primary responsibilities, little depth or expertise in recruitment methods was developed. A consultant was brought in to help Met Council identify more fruitful recruitment strategies and revise its marketing materials to better attract qualified candidates.

The Bioscience Partners encountered a similar challenge during recruitment, as both lead partners were full-time faculty members with multiple responsibilities competing for their time outside the Workshop. In response, the Bioscience Partners hired a project manager shortly after the grant began and subsequently hired a part-time recruitment specialist to make connections with biology faculty and students at other CUNY four-year campuses.

Recruiting disadvantaged participants proved difficult. The NYCSI was initially intended to help low-income, less educated workers gain entry into sectors with opportunities for advancement and high-wage employment. However, finding and enrolling these disadvantaged job seekers was not easy for either program.

For Met Council, the goal was to reach low-income applicants who were capable of completing the targeted training programs and gaining certification and employment but who were unlikely to do so without skill remediation and support. Recruiting this specific group of trainees required extensive outreach and careful screening. In addition, while Met Council's pre-training and wraparound services were offered free of charge to qualified applicants, participants in each training track were responsible for part (EMT and paramedic) or all (rad tech) of the tuition charged by the technical training provider. To cope with these challenges, Met Council worked closely with its training providers to establish realistic admission criteria. The program also offered short-term emergency assistance and information about financial aid to trainees.

For the Bioscience Partners, attracting disadvantaged participants was even more problematic. An original goal of the project was to create agreements with biology departments at two community colleges, to ensure that their introductory biology curriculum would prepare students for advanced courses offered at Hunter, such as molecular biology. The idea was to create a pipeline for disadvantaged students from the community college setting into the biotech Workshop. The team discovered, however, that making this vision a reality would require the community colleges to make substantial changes to their basic biology curriculum and to offer additional biology courses. The goal was abandoned near the middle of the grant period, due to a lengthy curriculum review process and perceived bureaucratic resistance to the idea among the various college administrators. Instead, the Bioscience Partners created an alternate type of pipeline into the Workshop by funding scholarships for students who had transferred into Hunter from select community colleges. It is unclear if the scholarships attracted more students from disadvantaged backgrounds to the Workshop.

For Met Council, it was a challenge to find the right training providers. Met Council experienced two failed rad tech training partnerships before contracting successfully with Long Island College Hospital. Administrators from the first potential partner were enthusiastic, but their rad tech program had experienced frequent leadership and staff turnover prior to the involvement with Met Council. In late 2005, after enrolling an initial cohort of participants,[21] Met Council realized the provider lacked the staffing and financial resources to perform as needed and severed the relationship. A second entity was poised to become a technical training provider for both rad tech and a fourth proposed training track, medical office assistant (MOA). This time, the partnership did not develop because it would have taken the provider too long to establish the two new training programs. Taking lessons from having to discontinue partnerships with two providers, Met Council staff knew better what questions to ask Long Island College Hospital concerning its rad tech training and partnering capacity. It also worked to obtain buy-in from faculty and staff at the Hospital to ensure that they were supportive of the NYCSI goals and strategies.

For the Bioscience Partners, operating within the context of large educational institutions contributed to project delays. The Bioscience partnership is, itself, part of two large institutions: SUNY Downstate and Hunter College. The size of these institutions impeded their ability to move quickly on operational issues. For example, final approval of reports and contracts at the colleges required input from both the CUNY and SUNY Research Foundations, which created a long chain of review and the coordination of numerous individuals. In addition to these delays, the Bioscience Partners' abandoned attempts to align biology curriculum across multiple CUNY schools illustrate the difficulties of dealing with the bureaucracy endemic to large institutions.

Relationships with employers were crucial, and presented a number of challenges. The two programs came to the initiative with different types of relationships to employers and experienced distinct issues related to engaging them. During the NYCSI planning phase, Met Council assembled working groups of employer and training partners to vet their labor market research and provide input about which training tracks to focus on. However, because Met Council could not identify a compelling reason to convene ongoing meetings of employers (from the hospitals and ambulance companies where it hoped to place MedPath graduates), the idea of continuing to engage employers through group meetings languished. Once, toward the middle of the initiative, Met Council assembled employers, using the meeting to rekindle relationships and assess interest in smaller group interaction. While the meeting led to further engagement of certain employers, Met Council continued to struggle with devoting sufficient time and resources to maintain and grow these relationships.

The Bioscience Partners were already well positioned *inside* the biotechnology industry prior to the initiative, thanks to the stature and relationships of the lead partners, which afforded a level of access to employers uncommon in sectoral programs. Even so, at the beginning of the initiative, the Bioscience Partners expressed concern that they would not be able to identify a sufficient number of internship and employment opportunities for the increased number of students participating in the Workshop. In the end, employer partners came to trust the team's ability to prepare students for a lab setting, and Workshop graduates were in high demand. In fact, at times, challenges with recruitment and retention meant that fewer students enrolled in and completed the Workshop than planned, creating a shortage of available Workshop graduates for internship and employment opportunities. These factors left the Bioscience Partners wary of cultivating too many more employer relationships, because it preferred to focus on delivering quality biotechnicians to its core, valued employers.

Both Met Council and the Bioscience Partners entered the initiative with the overarching goal of getting people employed in good jobs, which they were able to do, though not at the rates they'd hoped for. In spite of this, both partnerships achieved successes that are notable and have informed the development of a number of initiatives in the City.

The Workforce Innovation Fund—Implementing Learnings from the NYCSI

Chapter IV

The NYCSI experience produced valuable lessons about the programs being implemented by Met Council and the Bioscience Partners, but, more broadly, it also informed the funders' thinking and approach to developing sectoral strategies throughout the City. Today, WIF members can point to numerous strategies, practices and programs that were shaped by—or a direct result of—the NYCSI.

The Evolution of the NYC Department of Small Business Services

The New York City Department of Small Business Services (SBS), in particular, used the experience to inform a variety of approaches to engaging employers, job seekers and incumbent workers. SBS staff involved in the NYCSI credit the initiative with helping the agency determine how it could apply a sectoral framework to its work. Two SBS initiatives particularly benefited from early NYCSI implementation lessons:

NYC Business Solutions Customized Training Grants: SBS used experiences in the NYCSI planning phase to inform the creation of its customized-training grant program for business customers. Grant applicants are expected to commit to a number of NYCSI-inspired activities, including applying labor market research to the proposed intervention; articulating the organization's strategy, program model, recruitment, placement and retention plans in detail; discussing available and anticipated resources and how the resources will be deployed; and describing how connections to the industry and labor market should look. In addition, the need to combine public and private foundation resources led SBS to revive the nonprofit Workforce Development Corporation (WDC) as a vehicle for contracting with and paying the programs. SBS currently uses the WDC to administer its customized training grants. Since 2005, this program has awarded some $8 million in federal funding to more than 100 businesses, to train over 4,500 employees.[22]

Workforce1 Sector-Focused Career Centers: SBS runs New York City's Workforce1 Career Centers, the largest providers of workforce services in the City, which prepare and connect qualified candidates to job opportunities. These centers served approximately 150,000 people in 2010 and placed more than 31,000 of them in jobs.[23] In 2008, SBS created the first of three sector-focused Workforce1 Centers, establishing the Workforce1 Transportation Career Center in Queens, NY. Two additional sector-focused Workforce1 Career Centers were opened in 2009 with funding awarded through the New York City Center for Economic Opportunities, focused on healthcare and manufacturing, respectively.

Sector-Focused Capacity Building

The process for selecting NYCSI grantees, and the subsequent implementation experience, revealed limited capacity among NYC's training and service provider community to develop and implement strong sector-focused training programs. In response, the WIF funded the Sector Strategies Practicum (SSP) to prepare organizations to launch or improve sectoral programs. For two years, monthly sessions of this intensive program helped participating organizations develop sector strategies by introducing them to effective sectoral practitioners, facilitating hands-on sector project planning and brokering connections with key industry associations and individual employers. SSP was initially developed and delivered by P/PV and the Aspen Institute, drawing on their experience with sectoral programs and the national Sector Skills Academy. The 2009-2010 SSP cohort focused exclusively on healthcare, attracting participation from community-based organizations, community colleges, City workforce and education departments, NYC Workforce1 Career Centers and the Service Employees International Union (1199 SEIU).

New Initiatives Supported by the WIF

Two new collaborative efforts supported by the WIF also reflect learning from the NYCSI.

The New York Alliance for Careers in Healthcare: Building on lessons from the NYCSI, the WIF decided to fund a second major sector-focused initiative. In 2010, the WIF developed a strategy to engage healthcare employers in an analysis of current and

future labor needs and in subsequent partnerships with training providers who could help meet those needs. Named the New York Alliance for Careers in Healthcare (NYACH), this new "workforce meta-partnership" has involved the key trade associations representing three major healthcare sub-sectors (acute care, primary care and long-term care) and a major union. Together, the partners are conducting strategic labor force planning and brokering connections between employers and the range of service providers who are preparing low-income job seekers and incumbent workers for careers in healthcare. NYACH's mission is to create an employer-led partnership in healthcare that will serve as a center for strategic workforce planning, and to secure commitments from healthcare institutions to hire low-income NYC residents and invest in training existing workers for career advancement.

New York City Labor Market Information Service: In 2007 the New York City Workforce Investment Board (WIB) joined the WIF as a second public sector partner. Based in part on the NYCSI experience, the WIB partnered with the CUNY Center for Urban Research in 2008 to create the NYC Labor Market Information Service (LMIS). LMIS makes local labor market information and analysis accessible to workforce development providers. Staff frequently present the analysis and teach providers how to use the tools they have created.

It is notable that the NYCSI has informed so many varied and important initiatives throughout the City. As discussed in the next chapter, the NYCSI experience also suggests valuable lessons for other workforce collaboratives operating around the country.

Recommendations and Conclusions

Chapter V

Made possible by an unusual constellation of partners, the NYCSI was a groundbreaking effort to align workforce and economic development in New York City—and to produce better outcomes for low-income job seekers and employers. The initiative faced numerous challenges, logged important successes, and ultimately had a profound ripple effect on the City's workforce system. The experience suggests a number of important recommendations for the funders, policymakers and program planners involved in other collaborative workforce efforts under way around the country.

Make up-to-date local labor market information widely available. Effective sectoral employment programs respond to labor market demand. Doing this well requires access to (and an understanding of) information about hiring trends, projected growth in key occupations, and evolving skill and certification requirements, as well as external factors that may influence demand. Keeping current on this information takes more time and capacity than most workforce development providers possess. Over the course of the NYCSI, for example, the projected demand in New York City for EMTs changed radically, shifting from growth estimates of 14 percent (between 2004 and 2014),[24] to nearly no anticipated growth (between 2008 and 2018).[25] Ideally, this type of information would inform the number of training slots for a given occupation, so they could expand or contract as demand changes. The creation of the NYC LMIS is a step in the right direction toward compiling this kind of labor market information.

Build or "import" the capacities needed for robust sectoral partnerships. Through the NYCSI, a great deal was revealed about the types of capacity needed to effectively operate a sectoral partnership. The two partnerships each exhibited notable strengths as well as gaps in capacity. While the Bioscience Partners were well positioned to stay on top of the needs of biotechnology employers and new developments in the industry, Met Council struggled to keep current with healthcare industry trends. And while Met Council used the NYCSI to expand and improve a model that included a variety of support services, the Bioscience Partners had limited capacity to help participants with soft skill development, such as interview preparation or resume writing. Both partnerships could have benefited from involving other partners who had expertise in the areas where they were less well versed. It is critical to recognize how many different kinds of expertise are required to operate a successful sector partnership. There are multiple ways to build capacity where it is lacking—including training program staff, hiring consultants or forging partnerships with other institutions.

Make the development of professional networks and access to real-world work experience central in sectoral initiatives. Most graduates were able to obtain training-related jobs with relatively little help, a testament to the ability of the programs to prepare participants for employment in each of the targeted occupations. This preparation included hands-on work experience through internships and clinical rotations, opportunities that allowed participants to gain practical experience and develop valuable employment networks. As documented in P/PV's report *Getting Connected*,[26] low-income job seekers rarely have access to these types of networks, which are in fact critical to finding jobs and advancing to new opportunities over time. Sectoral programs should incorporate opportunities for work experience that build skills and expose participants to employment networks.

Invest in support services that will help participants succeed in training and on the job. The participants in these programs (especially Met Council) required remediation to get through programming and achieve the desired outcomes, and many needed assistance transitioning from training to employment. These kinds of wraparound services are not typically provided by proprietary or postsecondary schools, yet they were clearly necessary for some of the NYCSI participants to complete training successfully. At the beginning of a sector-focused initiative, it is important for partners to explicitly identify the target population they hope to serve and build strategies that make sense for that group—including selecting an industry that is a

good fit, developing effective recruitment strategies, and offering support services to see people through training and help them succeed on the job.

Expand the sectoral approach beyond typical workforce development programs. Effective sectoral programs prepare individuals with the skills demanded by employers, requiring programs to keep up with local labor market trends and be responsive to identified changes. With increasing frequency, sectoral programs are involving post-secondary institutions as training providers, especially when an occupation requires the accumulation of college credit to qualify for industry certification. Many colleges and universities, however, have a long way to go to align their course offerings with local labor market needs. As seen in the Bioscience Partners' curriculum review process, for example, not all schools in the CUNY system were preparing students with the skills needed to progress to advanced courses, let alone for employment in the biotech industry. Students could benefit from curricula that are more connected to employer demand.

Plan for sustainability from the beginning. At the end of the initiative, both Met Council and the Bioscience Partners indicated that they were having difficulty obtaining long-term support for their programs. Sector-focused partnerships should work from the very beginning to develop sustainability plans that make sense for the specific industries and populations they've targeted. Potential sources of support include grants from local, regional or national foundations or public agencies, financing through employers and other sources.

Past research has shown that sector-focused training programs have tremendous potential for improving job seekers' employment outcomes and providing the skilled workers that businesses need. The NYCSI experience suggests that several important steps—making current labor market data more accessible, building and supplementing the capacity of local organizations, and prioritizing support services and real-world work experience, for example—may increase the odds of success for other workforce partnerships that are developing innovative sectoral initiatives around the country.

Endnotes

1. Martinson, Karen. 1999. *Coordination and Integration of Welfare and Workforce Development Systems: Literature Review on Service Coordination and Integration in the Welfare and Workforce Development Systems.* Washington, DC: The Urban Institute.

2. Scott, Geri. 2007. *Funder Collaboratives: A Philanthropic Strategy for Supporting Workforce Intermediaries.* Boston: Jobs for the Future.

3. National Fund for Workforce Solutions website. Accessed on April 15, 2012 from www.nfwsolutions.org/about-us/goals.

4. The WIF grew out of the New York City Workforce Funders (NYCWF), a consortium of private philanthropies that began meeting quarterly in 2000 to share ideas and strategies for working with and supporting grantees focused on workforce development. A subset of NYCWF members interested in partnering with public agencies found a receptive collaborator in SBS, which assumed responsibility for administering adult Workforce Investment Act (WIA) funding from the now defunct Department of Employment in late 2003.

5. In mid-2012, the NYC Workforce Investment Board merged with the Mayor's Office of Adult Education to form the NYC Office for Human Capital Development.

6. Grantees required between six and nine months to complete planning phase activities.

7. Additional details on the planning phase can be found in our 2007 report, *Collaborating to Innovate: Achievements and Challenges in the New York City Sectors Initiative Planning Phase.* www.ppv.org/ppv/publications/assets/223_publication.pdf.

8. Wood, Catherine A. *Employment in Health Care: A Crutch for the Ailing Economy During the 2007-09 Recession.* Bureau of Labor Statistics. www.bls.gov/opub/mlr/2011/04/art2full.pdf.

9. Bureau of Labor Statistics Employment Projections—Occupations with the largest job growth, 2010 and projected 2020. Accessed on March 24, 2012 from www.bls.gov/emp/ep_table_104.htm.

10. Fiscal Policy Institute. November 2011. *The State of Working New York 2011: Smaller Incomes, Fewer Opportunities, More Hardship.* New York, NY: Fiscal Policy Institute. www.fiscalpolicy.org/FPI_StateOfWorkingNewYork2011_Part2_20111129.pdf.

11. Bureau of Labor Statistics. Employment, Economy at a Glance—New York, Education and Health Services. www.bls.gov/eag/eag.ny.htm.

12. Met Council originally planned to focus on a fourth occupational training track, medical office assistant.

13. Met Council conducted labor market research on the following healthcare occupations: emergency medical technician (EMT), medical office assistant, paramedic, pharmacy technician, radiological technician/technologist, radiological therapist, respiratory technician, surgical technician and ultrasound technician.

14. Includes TANF, Safety Net, food stamps and SSI.

15. Languages most commonly mentioned were Chinese (12%) and Russian (6%).

16. Traster, Trina. March 16, 2008. "Projects Aimed at Providing Space for NYC Biotech Firms." *Crain's New York Business.* Retrieved from www.crainsnewyork.com/article/20080316/REG/777140130.

17. Some master's level students performed full-time internships during the academic year and attended classes during the evening.

18. Each year, the City University of New York (CUNY) receives state funding to support its Workforce Development Initiative, which the Office of Academic Affairs, in turn, awards through a competitive process to CUNY colleges and programs.

19. Public/Private Ventures' Institutional Review Board requires affirmative consent from participants to collect data on an individual level and include that data in analysis and aggregate reporting. While Met Council decided to make providing affirmative consent mandatory for program enrollment, the CUNY Research Foundation—which has its own Institutional Review Board process—did not allow affirmative consent to be required as a condition of enrollment.

20. By the end of the grant period, three participants were reported to have enrolled in medical school, accounting for less than 2 percent of the participants.

21. Met Council recruited and enrolled eight students for the Harlem Hospital rad tech program in the fall of 2005. However, when Met Council severed its relationship with Harlem Hospital, the decision was made—in conjunction with the WIF—not to consider Harlem students as NYCSI participants, since PASS and supportive services would no longer be systematically provided to those individuals.

22. New York City Department of Small Business Services. September 14, 2011. "Mayor Bloomberg Announces Workforce Training Grants to Help Small Businesses Expand and Create Jobs in All Five Boroughs." Retrieved on January 16, 2012 from www.nyc.gov/html/sbs/html/pr/2011_09_13_WF1_Grants.shtml.

23. New York City Department of Small Business Services – About Workforce1. Retrieved January 16, 2012 from www.nyc.gov/html/sbs/wf1/html/about/about.shtml.

24. New York State Department of Labor Wage and Employment Projections. Accessed July 26, 2008 from www.labor.state.ny.us/.

25. Bureau of Labor Statistics Employment Projections—Industries with the fastest growing and most rapidly declining wage and salary employment (www.bls.gov/emp/ep_table_203.htm).

26. Spaulding, Shayne. 2005. *Getting Connected: Strategies for Expanding the Employment Networks of Low-Income People.* Philadelphia Public/Private Ventures.