

Central North Carolina Pathways to Prosperity

Asheboro City Schools, Randolph Community College, and
Randolph County School System

Health Sciences Strategic Planning Team Final Report

August 2016



**Building Capacity and Sustainability in Central
North Carolina**

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Introduction to Pathways to Prosperity

In February 2011, the Harvard Graduate School of Education released a report, [*Pathways to Prosperity: Meeting the Challenge of Preparing Young Americans for the 21st Century*](#). The report claimed the American education system was too narrowly focused on preparing all students for a four-year college or university degree after high school instead of helping students focus on other postsecondary routes to careers that might significantly impact the future of both the students and the community. While roughly 30 percent of the job openings predicted over the next ten years will require some education beyond high school, they will not necessarily require a four year degree.

The overall average student success in two and four year institutions in the US is still alarmingly low (29% for 2 year institutions and 56% for four year institutions). The *Pathways to Prosperity* Report contends that “too many students cannot see a clear, transparent connection between their program of study and tangible opportunities in the labor market (p.10-11).” Instead of our current practices, the Report calls for efforts to develop a robust pathway system with high school courses linked to community college and four-year career majors helping students stay the course and attain their career degree. The Report also calls on educational organizations to engage employers in helping to set standards and designing programs of study, advising young people, and providing opportunities for work-linked learning. Finally, the Report calls for educational organizations to use district Career & Technical Education (CTE) programs as a vehicle to align and begin the process of helping all students learn real-world work skills needed in 21st Century America beginning in middle school.

To create the type of pathways called for in *Pathways to Prosperity*, school districts are called to align CTE courses with area and state labor market demands and create a system of career-focused pathways that span the last years of high school and include at least one year of postsecondary education or training that lead to an industry-recognized certification or credential. In addition, students should receive guidance that helps them develop a plan that helps them focus their time in school on working toward their career and post-secondary goals. The work requires engaging educators, employers, and governmental leaders at the local and regional level in building both the infrastructure and vision needed to support the multi-organizational system needed to support regional pathways to increase both high school and post-secondary completion rates.

The following report chronicles the work of Asheboro City Schools, Randolph County School System, Randolph Community College, and their regional employers and governmental agencies and intermediaries, who continued their work on aligning regional resources and curricula for creating pathways for Randolph County students in the area of Health Sciences.

NC Central Region Pathways to Prosperity Consortium

Organization and Leadership

Consortium Members: The partnership includes Asheboro City Schools, Randolph County School System, and Randolph Community College.

The NC Central Region Pathways Leadership Team oversees the selection of the Strategic Planning Team members from the target industry sector(s), intermediaries (e.g. Workforce Development Board, Chamber of Commerce, local government), and educational personnel to assist in the Pathways to Prosperity process.

Organization: The NC Central Region Pathways to Prosperity Leadership Team’s primary task is to oversee the development of pathways identified as target industry sectors using asset mapping with current and emerging employment data. Using this data, the NC Central Region Pathways leadership Team identified **Health Sciences** as the focus of the second pathway of development. Once the pathway for this business sector has been identified using the Pathways to Prosperity model, the NC Central Region Pathways to Prosperity Strategic Planning Committee will hold periodic meetings (annually or biannually) to assess implementation and develop strategies to strengthen and enhance:

- Employer Engagement
- Career and College Promise opportunities
- Career guidance and counseling strategies
- CTE course/concentration sequences
- Work-based learning opportunities
- Certificate opportunities

Additionally, the NC Central Region Pathways to Prosperity Leadership Team will continue to use regional market data to identify other business sectors for the development of future pathways. Regional partnerships of counties (LEAs) that share borders in the Central Region and have potential to be impacted by the identified business sector(s) will be recruited to develop pathways using the model developed by the consortium.

Pathway Development: The publication, “Developing High Quality CTE Programs through Business Engagement: Facilitator’s Guide,” developed by the NC Department of Public Instruction is the structure for the pathway development work. The NC Central Region Pathways to Prosperity Leadership Team may choose to modify the guidelines as needed to meet local needs.

NC Central Region Pathways to Prosperity Organizational Chart



NC Central Region Pathways to Prosperity

Leadership Team

Name	Position	Educational Organization
Dr. Terry Worrell	Superintendent	Asheboro City Schools
Dr. Julie Pack	Director of Secondary Education	Asheboro City Schools
Dr. Robert Shackleford	President	Randolph Community College
Mrs. Melinda Eudy	Dean of Curriculum Programs	Randolph Community College
Dr. Stephen Gainey	Superintendent	Randolph County School System
Ms. Nancy Cross	CTE Administrator	Randolph County School System
Mrs. Linda Brown	Leadership Team Facilitator; President	Asheboro-Randolph Chamber of Commerce

NC Central Region Pathways to Prosperity

Strategic Planning Team

Name, Title, Organization

Mr. James Bain, Assistant Director, Regional Partnership Workforce Development Board, Asheboro, NC
Ms. Tremonteo Crawford, Chief Nursing Officer, Randolph Hospital, Asheboro, NC
Ms. Nancy Cross, Director, Career and Technical Education, Randolph County School System
Ms. Jessica Cutler, Career Development Coordinator, Southwestern Randolph High School, Asheboro, NC
Ms. Tina Dixon, Division Chair, Health Sciences, Randolph Community College, Asheboro, NC
Ms. Denise Durand, Director of Quality, Hospice of Randolph, Asheboro, NC
Mr. Steve Eblin, President, Randolph Hospital, Asheboro, NC
Ms. Melinda Eudy, Dean of Curriculum Programs, Randolph Community College, Asheboro, NC
Mr. Kevin Franklin, Existing Industry and Business Coordinator, Randolph County Economic Development Corporation, Asheboro, NC
Dr. Stephen Gainey, Superintendent, Randolph County School System
Mr. Michael Garland, Administrator, Woodland Hill Center, Asheboro, NC
Ms. Kim Garner, School Nurse, Randolph County School System
Mr. Dennis Hamilton, Principal, Randleman High School, Randolph County School System
Ms. Susan Hayes, Director, Randolph County Health Department, Asheboro, NC
Ms. Monica Hurley, School Nurse, Randolph County School System
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Ms. Leslie Jessup, School Counselor, Wheatmore High School, Trinity, NC
Ms. Rebekah Kingston, Student Services Counselor, Randolph Community College, Asheboro, NC
Mr. Wendel Lamason, Executive Director, CHC BetterCare at Randolph Specialty Group, Asheboro, NC
Mr. Elbert Lassiter, Vice President for Workforce Development & Continuing Education, Randolph Community College, Asheboro, NC
Ms. Emily Martin, Manager of Wellness, Randolph Hospital, Asheboro, NC
Ms. Courtney McGowan, Career Development Coordinator, Asheboro High School, Asheboro, NC
Ms. Meredith Mitchell, Health Science Teacher, Providence Grove High School, Climax, NC
Ms. Bea Morehead, School Nurse, Randolph County School System
Ms. Rita Morton, Health Science Teacher, Asheboro High School, Asheboro, NC
Ms. Lou Ann Neal, Coordinator/Instructor, Nursing Assistant Program, Randolph Community College, Asheboro, NC
Dr. Julie Pack, Director of Secondary Education, Asheboro City Schools, Asheboro, NC
Ms. Kathie Parsons, FirstHealth of the Carolinas, Asheboro, NC
Ms. Anna Phillips, Department Head, Radiography, Randolph Community College, Asheboro, NC
Ms. Bonnie Renfro, President, Randolph County Economic Development Corporation, Asheboro, NC
Ms. Teresa Rich, Department Head, Nursing, Randolph Community College, Asheboro, NC
Ms. Jennifer Robbins, Health Science Teacher, Asheboro High School, Asheboro, NC
Mr. Isai Robledo, Director of Educational Partnerships and Initiatives, Randolph Community College, Asheboro, NC
Mr. Brian Saunders, Principal (*former*), South Asheboro Middle School, Asheboro, NC
Mr. Lewis Schirloff, Deputy Chief, Randolph County Emergency Services, Asheboro, NC
Ms. Teresa Shackleford, CEO, Randolph Family Healthcare, Asheboro, NC
Dr. Robert Shackleford, President, Randolph Community College, Asheboro, NC
Ms. Kathy Slovak, Director, Regional Partnership Workforce Development Board, Asheboro, NC
Mr. Scott Smith, Department Head, Human Services Technology, Randolph Community College, Asheboro, NC
Dr. Brian Toth, Principal (*former*), Asheboro High School, Asheboro, NC
Ms. D'Vera Tune, School Counselor, Asheboro High School, Asheboro, NC
Ms. Kia Vang, Department Head, Medical Assisting, Randolph Community College, Asheboro, NC
Dr. Brad Walston, Principal, Providence High School, Climax, NC
Ms. Misty Wolfe, Career Development Coordinator (*former*), Wheatmore High School, Trinity, NC
Dr. Terry Worrell, Superintendent, Asheboro City Schools, Asheboro, NC

**NC Central Region
Pathways to Prosperity
Strategic Plan**

NC Central Region Pathways to Prosperity

Strategic Action Plan

Committee Lever: Intermediaries

Intermediary Functions: Local or regional intermediaries serve as conveners, brokers and technical assistance providers to schools and employers engaged in building and sustaining career pathways. Intermediaries recruit business, non-profit and public employers and ensure vision is understood and supported by participating leaders.

Current Environment:

The focus of the Healthcare Industry has shifted to focusing on patient wellness through a preventative, proactive model. This is a wholesale shift, and we need to be proactive in addressing that shift when preparing future healthcare workers. This change will result in the need to create new careers in the Healthcare Industry. In addition, it will also be necessary to focus on preservice and in-service training of existing careers (i.e. Behavioral Health, Gerontology, Medical Coding, Medical Information Technologies, Pharmacy, Social Work, etc.).

- The importance of finding people who can adapt to the changes in the medical profession
- What is the healthcare workforce needing from all stakeholders to build the skills needed to be successful?
- An understanding of what type of training is available in the healthcare setting to prepare future employees in the field
- The need to help high school students learn more about the available options in the Healthcare field
- The importance of asset-mapping; the need to identify the assets we already have in place and/or at our disposal
- The need to build collaboration between RCC and ACS and RCSS to provide high school students with opportunities to complete programs in the Healthcare field (ex. AMA CPR and First Aid certification, Pharmacy Tech, Certified Nursing Assistant Program at AHS and build elsewhere, pre-nursing, radiography, Certified Medical Assistant, Healthcare Navigator
- The need to communicate to the community the current collaborative efforts among ACS, RCSS, RCC, and workplace leaders, already underway

Change Description:

A crucial consideration is the vast career options in the Healthcare field. Students may have some familiarity with the most common mainstream careers, but it is important we also expose them and educate them all possible options, including newly emerging fields.

Strategic Action Steps	Person(s) Responsible	Timeline for Implementation	Current Status of Strategic Action Step
Healthcare Day at RCC for select 8 th graders in ACS and RCSS to introduce students to healthcare pathways at	CTE Administrators CDCs	Fall 2016	Dr. Pack, Ms. Cross, and Ms. Eudy will coordinate to initiate first Healthcare

RCC and hear from healthcare professionals in the community.	RCC Administration		visit for Middle school students.
Prepare marketing materials for health sciences pathways available for students including literature and videos. (aimed at students, families, and industry)	Marketing staff of RCC, RCSS, and ACS	November 2016	

Outcomes Measurements/Results:

- Success of the Healthcare Day will be measured by attendance and participation
- Administer a survey to the participants of Healthcare Day to gauge the success of the event as well as gather qualitative data for the purpose of gathering suggestions for improvement
- Survey data concerning the effectiveness of marketing materials

Committee Members:

Facilitator—Dr. Brian Toth, Principal (*former*), Asheboro High School, Asheboro, NC
Mr. Steve Eblin, President, Randolph Hospital, Asheboro, NC
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NC Central Region Pathways to Prosperity

Strategic Action Plan

Committee Lever: Employer Engagement

Employer Engagement: Employers are committed to providing a continuum of learning opportunities at the workplace throughout the 9-14 career pathway. Employers collaborate with educators and are supported by intermediaries in structuring and managing workplace learning. Employers support students' transition into the local labor market.

Current Environment:

Students in middle and high school have limited exposure to the multitude of professions that exist within the health care industry. Many health care employers are hesitant to allow students in their facility to participate in work-based learning activities such as field trips/tours, job-shadowing, and internships.

Change Description:

We recognize the importance of employer engagement in the career development process. It is our goal to form a group of at least 10 local employers willing to allow students to visit their health care facility for field trips, job-shadowing, and/or internships by the end of the first year. By the end of the third year, we expect to have a slate of 20 local employers providing meaningful work-based learning opportunities for students.

Strategic Action Steps	Person(s) Responsible	Timeline for Implementation	Current Status of Strategic Action Step
Conduct yearly healthcare summit for healthcare providers to assess the outlook of healthcare careers and understand employer needs.	RCC VP of Workforce Development	Annually	
Develop effective marketing tools to communicate student and employer benefit of work-based learning experiences	CTE Leadership	Fall 2016	
Hold informal panel/meeting for healthcare employers to discuss work-based learning opportunities and commitment continuum	CTE Leadership	Fall 2016	
Develop collaborative workgroup between ACS and RCSS to ensure consistency in expectations, communication and placement for work-based learning experiences;	CTE Leadership	Fall 2016	

assign “recruiter(s)” to work with local employers to solicit participation			
ACS and RCSS collaborate to provide detailed common plan/process for student placement, learning outcomes, expectations of students and employers, etc. for work-based learning experiences	CTE Leadership CDCs	Fall 2016	
Provide consistent checklist of tasks/expectation of skills for students for health science classes/internships	CTE Leaders CDCs	Fall 2016	
Develop website devoted to health science pathway and related information that is easily accessed by all stakeholders	RCC Marketing	Fall 2016	
Hold end of year showcase to demonstrate successes and areas for growth from field trips, job shadowing, and field trips <ul style="list-style-type: none"> • Allow students to highlight their work-based learning experiences • Allow employers to showcase their experience and how they benefitted from participating • Create a promotional video with the participants testimonials for future marketing and promotion 	CTE Leadership RCC Workforce Development and Continuing Education	Spring 2017	

Outcomes Measurements/Results:

- Agreements/meetings with industry partners
- Production and employment of marketing materials
- Production of work-based learning materials for employers by ACS and RCSS aligned and utilized

Committee Members:

Facilitator— Ms. Misty Wolfe, Career Development Coordinator, Wheatmore High School, Trinity, NC
Ms. Denise Durand, Director of Quality, Hospice of Randolph, Asheboro, NC
Mr. Kevin Franklin, Existing Industry and Business Coordinator, Randolph County Economic Development Corporation, Asheboro, NC
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Ms. Teresa Shackleford, CEO, Randolph Family Healthcare, Asheboro, NC

NC Central Region Pathways to Prosperity Strategic Action Plan

Committee Lever: Career Information and Advising

Career Information and Advising System: Starting in the middle grades, students are exposed to a wide range of career options, information, and opportunities to learn about high school and post-secondary courses of study leading to careers. Students engage in a 9-14 continuum of work-based learning opportunities in their chosen career areas. Intermediaries, employers and community-based organizations help young people make informed choices throughout the 9-14 career pathways.

Current Environment:

Students in middle and high school have limited exposure to the multitude of professions that exist within the health care industry. We need to go to the middle schools to promote health science classes and pathways in high school and beyond.

Change Description:

Utilize interest inventories to gauge student interest in health care careers and provide more exposure to equipment, working professionals, work-based learning opportunities, and different and emerging health care career opportunities.

Strategic Action Steps	Person(s) Responsible	Timeline for Implementation	Current Status of Strategic Action Step
Interest inventory-all middle school students. This is a series of questions a student will answer to determine where their career interest lies, and also what field they would be good at. We determined that this should be accessible to 6-8 th graders, so they can track their interest each year. This will determine if the student is consistently scoring in the same career field, or if their interest is broader. Career panel- to be included with field trip. 6-7 careers represented. Small groups with 5-6 students meet with professionals for questions. Use inventory results to determine areas represented	School Counselors	Aug-Sept	Currently using career cruising in early spring before registration in ACS Using CFNC in Randolph County schools
Health science field trip: provide handouts with agenda, space for notes, survey questions	Career Development Coordinator	November before registration	

Outcomes Measurements/Results:

- Student survey results regarding fieldtrips and career panel discussions
- Interest inventory results with year-to-year review
- Health science course selection, certificate completion and graduate data

Committee Members:

Facilitator— Ms. Anna Phillips, Department Head, Radiography, Randolph Community College, Asheboro, NC
Mr. James Bain, Assistant Director, Regional Partnership Workforce Development Board, Asheboro, NC
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NC Central Region Pathways to Prosperity

Strategic Action Plan

Committee Lever: Career Pathways

Career Pathways: High schools and community colleges create 9-14 career pathways with clear structures, timelines, costs, and requirements linking and integrating high school and post-secondary curriculum and aligning both with labor market requirements.

Current Environment:

Currently, students have limited opportunities for health sciences in middle and high school. Asheboro City Schools has biotechnology available for students in middle school for the last 3 years, and Randolph County School System will be starting a middle school program in 16-17. However, this does not provide students a wide array of health science options in middle school. Students can take more health science classes in high school, such as Nursing Fundamentals, Pharmacy Tech, Health Sciences I and II, and Biomedical Technology; however, industry competition creates difficulty in maintaining qualified teaching personnel. Students are also able to earn industry recognized credentials in high school such as certified nursing assistant, pharmacy technician and first aid/basic lifesaving skills.

Additionally, formal pathways for health science careers are not established for students that begin in high school to enable a smooth transition from secondary to post-secondary to career seamlessly.

Change Description:

Formalize 9-14 health science pathways for students that lead to career opportunities meeting regional industry demands

Provide opportunities for students to earn articulated credit

Provide opportunities for students to experience work-based learning opportunities

Strategic Action Steps	Person(s) Responsible	Timeline for Implementation	Current Status of Strategic Action Step
Create a student friendly format to display the health science pathways by December in preparation for high school registration. Formalize and complete all health science pathways to include: <ul style="list-style-type: none"> Therapeutic & Diagnostic Services-Nursing Assistant Medical Assisting 	RCC Curriculum Department, CTE Directors, Career Development Coordinators, Instructional	By December 15th, finalize a pathway document Implement according to each school's registration	

<ul style="list-style-type: none"> • EMT • Phlebotomy • Radiography • Human Services 	Management Coordinators	schedule for the school year	
Develop in conjunction with Randolph County Wellness Collaborative Steering Committee, a new health science pathway to address the regional need and industry trend for a “healthcare advisor”	RCC Curriculum Department	Fall of 2016 Initiate the process for building the new program & courses at RCC	
Host a joint counselors meeting at RCC to educate school counselors on the pathway options prior to registration to enhance student understanding.	RCC Curriculum Department, CTE Directors	February, annually	

Outcomes Measurements/Results:

- Enrollment in health science classes at RCC, RCSS, and ACS (compared to previous years)
- Number of health science credentials earned (compared to previous years)
- Number of Health Science concentrator graduates from high school and diploma, degrees, and certificate recipients from RCC (compared to previous years)

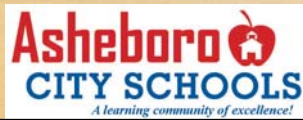
Committee Members:

Facilitator— Dr. Brad Walston, Principal, Providence High School, Climax, NC
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**NC Central Region
Pathways to Prosperity
Appendix**

Pathways to Prosperity: Health Sciences

Strategic Planning Team Meeting
February 16, 2016

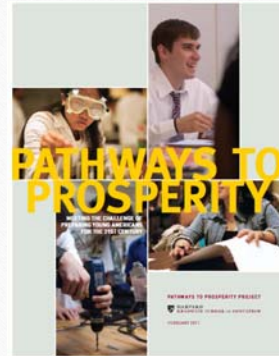


Welcome

- Introductions

Pathways to Prosperity Overview

- Engage business and industry with education and intermediaries
- Create Pathways that link high school coursework to post-secondary opportunities
- Aligned with economic development and labor market demand



What are Pathways?

- Curriculum and skills program that offers a clear sequence (or pathway) of education and training credentials aligned with employer validated work readiness standards and competencies.
- Includes:
 - Alignment with Sector Strategy
 - Clearly Defined Stackable Education
 - Contextualized Learning
 - Integrated Education & Training (Work-Based Learning Opportunities)
 - Industry Recognized Credentials
 - Multiple Entry & Exit Points
 - Intensive Wrap-Around Services



Myths and Realities

- Career Education is the Modern Version of Vocational-Tech Education
- Career Education Is Not Necessary for College-Bound Students
- Career Education Can Be Taught Exclusively in the Classroom
- Middle Jobs Will Pay Less Than Jobs Requiring a Four-Year Degree
- There Won't Be a Job for Our Graduates

Pathways to Prosperity

A Participant's Perspective

The State of Healthcare in Randolph County

Dr. Robert Shackleford,
Randolph Community College

Angie Orth,
Randolph Hospital

Pathways to Prosperity Framework: Key Areas of Work or Levers

*Each committee will develop actions steps to be part of a larger
strategic plan in one of four key areas of work or levers:*

- Employer Engagement
- Career Pathways
- Career Information and Advising System
- Intermediaries

Employer Engagement

- Support student transitions into the labor force
 - Providing a continuum of learning opportunities from 9-14 pathway
 - Collaborating with educators and industry professionals for learning
- Example: Inspire to Hire



- High Schools and Community College structures linking curriculum and alignment
- Example: Advance

Career Information & Advising System

- Starting in the middle grades, students are exposed to a wide range of career options, information, and opportunities to learn about high school and postsecondary courses of study leading to careers.
- Example: [Manufacturing Day 2015](#)

Intermediaries

- Serve as conveners, brokers, and technical assistance providers to schools and employers engaged in building and sustaining career pathways.
- Recruit business, nonprofit, and public employers and ensure vision is understood and supported by the community and its leaders.
- Example: Joint Advisory Committee Meetings with RCC, RCSS, and ACS once a year.

Committee Group Work Time



Wrap-Up

- Final Reminders
- Next Meetings:
 - March 24 Randolph County School System—Board Room
 - April 26 Randolph Community College—CEIC
 - May 24 Randolph Community College—CEIC



NOTES FROM HEALTHCARE SUMMIT

November 6, 2015

Angie Orth

- 1- Volume to Value. Pay based on outcomes.
- 2-Reactive medicine to proactive health -holistic.
- 3-Episodic of care versus holistic care--having a relationship.

- Types of employees-EQ versus IQ- obviously expect the IQ, skill level and now need EQ--what are the patient's goals, what is most important to you? EQ vs IQ in jobs - understand the dynamics in a patient's life
- We need a workforce that is engaging - engaging workforce along with a technical skill
- Types of jobs in future-traditional roles will continue.
 - Need data analytics-make predictions for future.
 - Need IT help around electronic data.
 - Need health information coders----of course, need nurses and CNA's. Coders understanding new system
 - Provide care outside of traditional walls-in home. Workforce that can provide in home and palliative care.
 - Home Health Aides
 - Mental health positions
 - Cert Medical Asst. Wellness Coaches and Navigators. --partner with the community and get resources to patients.
- How do we address the consumerism and social media? Incorporate social media and skype?

What is the state of the healthcare workforce in Randolph County?

- Recruiting nursing staff to the hospital because of agency competition.
- Challenged with attracting nurses to Randolph Hospital - so many options for nurses
 - Coders can stay at home and work for other agencies
 - Nursing Assistants are in a lot of other workforces
- Highest vacancy is the nursing assistant due to competition.
- The hospital paradigm is a 12 hour shift so they are looking at other models.
- Soft skill need: interpersonal skills
- Process evaluation: streamlining & simplifying, critical thinking, creativity
- Soft skill need: how to lead from the side or bottom - change management - Teach the students how to work - not just the skills, asking why they do what they do, learn how to work in a team approach – LEAN approach
- Soft skill need: collaboration and team work skills
- Soft skill need: holistic thinking (e.g., the office person collects valuable personal data that must be shared with the team)
- Soft skill need: working & communicating with different generations, ethnic groups, genders, etc.
- Maybe a midlevel worker in the pharmacy; maybe a tech type of position with an expanded role

- Behavioral health primary care program so there is a need for feeder to **social work** and credential for substance abuse
- Spanish speaking customer services and bilingual providers

What are the key emerging fields in healthcare?

- Navigator coach focus - add on credential to allied health with goal to keep the person out of the hospital (early intervention); the problem is that there is a need at multiple clinical expertise/level; some coaches are more focused on insurance navigation - Healthcare Coach/Navigator - multi-levels (monitoring patients, community, specific disease, insurance/services, or higher level) Steve Eblin said sooner than later
- Hospital has a care transitions team: social worker & nurse. "Who else are we going to add to that team?" "We can't keep adding nurses." It's a hospice type of model.
- Para-medicine - taking ems and paramedics to do proactive home visit type of work
- Do students enroll because of a passion to serve people, not just money!
- Pharmacy Tech - Emerging Job
- Behavioral Health Background
- Substance abuse certification
- Human services - bachelor of social work partnership
- Medicare approving screening exams for early detection - in order for approval a navigator must prepare the patient for the test (Like Financial Aid - Financial awareness piece)
- Interdisciplinary outreach like Hospice
- Community Para-medicine: emergency medicine, paramedics and EMTs fill the gap, monitoring (works with older patients and behavioral patients)

What do we need to ADD to our current offerings?

- Medical scribes, maybe an add-on to medical assisting
- For holistic patient service to be successful, the technology must catch up
- New health care computer technology for the analytics
- More partnerships for BSN
- More navigation to the curriculum
- Integration Engineer
- Add gerontology to human services

What do we need to EXPAND to our current offerings?

- Incorporate palliative care/medicine & gerontology
 - End of life care
 - Chronic diseases
 - How to have conversations with geriatric patients
 - Recognition of when patients are Hospice or home health ready
 - Care giver issues
 - Family dynamics
 - SIMS lab not just a hospital, simulated community representation
 - Educate students between disciplines

- LPN & NA are the majority of the workforce in long-term care, but no monetary incentives for NA geriatric certifications and the push to BSN discourages pursuing of LPN
- Expansion of skills
 - critical thinking
 - palliative medicine & chronic medicine
 - long term care
- Scribes? dealing with the emr system- to help physicians
- Working knowledge of medical terminology
- Information technology professional - interface engineer - then eventually go the analytics stage (Steve said that the hospital has 30 IT employees)
- We're all after the same type of skills - we're losing very good technician skill but also have good critical thinking skills, communication skills

What do we need to DISCONTINUE FROM our current offerings?

- Does the scribe need to be able to type fast- efficiency-- Medical transcription as a course-or is this important--slowly phasing out
- EMR-voice recognition will be the new way
- Clinical in nature and have a variety of experiences in other areas----encourage having classes not in silos but instead with other groups---Subsequent communication about what actual courses are in the program and look to see if some are skills that are being phased out.
- Looking at whether the hospital is even a good clinical area. Another area that is popular is teaching interdisciplinary together---skill set and skills lab that are integrated. It takes about a year to train a nurse to be a home health care nurse....it is very different. So include this in the skills labs---balance in broad sense of what student is exposed to.
- Integration across the continuum. Hospitals are not hospitals anymore.....we are health care systems.
- Senior health needs to keep seniors in their home ... students assess the senior hot lines.....managed care for seniors.
- The way the system is moving is that we are seeing way too much overuse and diagnostics training to know what tests are unnecessary and not. Example-sleep tests in home and is more cost effective.
- Look at modalities.....don't train too many people in areas where they may not continue. Have the NA's and RN's work together and simulate the real world environment-----SIMS lab not just in a hospital but simulated health services----in our community. The RNs don't know what CNA's do---don't know their skill set and same with the EMS staff....try to integrate those folks and some way getting those folks to know the other players---are there ways to getting this done with curriculum? Have a sense of educational level about these positions.