Building the C3 Skills Alliance
An Industry-Driven Regional Healthcare Training Partnership
Over the last decade, the California Workforce Development Board (CWDB), which advises the Governor on the use of millions of dollars in federal workforce development funding, has increasingly focused its efforts on solving challenges that limit economic opportunities for both businesses and workers. Its SlingShot initiative, launched in 2014, tasked leaders from industry, workforce development, and education, along with other stakeholders, with developing regional approaches to stimulate economic growth, create employment opportunities and build talent. While SlingShot required regional stakeholders to take on big issues, it also provided ample space to take risks and test new strategies.

In Los Angeles and Ventura Counties, seven local workforce development boards (WDBs) agreed to tackle skills in care coordination needed within the healthcare industry.

IT ALL STARTED BY LISTENING TO BUSINESS:
Concurrent with the state’s initiatives to coalesce regional efforts around significant workforce challenges, discussions among business, workforce and education professionals about emerging training and hiring needs were taking place as part of the Healthcare Industry Partnership formed by the South Bay Workforce Investment Board (SBWIB). Industry representatives expressed an urgent need for skilled healthcare workers with care coordination and case management skills at facilities providing acute care, community clinics, outpatient facilities and with public health organizations. The CEO of Centinela Hospital, Linda Bradley, quickly emerged as an industry champion on working to better address the need for these skills. Following the decision of the local WDBs to adopt this workforce challenge as a regional priority, the Healthcare Industry Partnership provided additional industry support to the region’s coordinated efforts to develop strategies and identify training resources for improving care coordination skills.

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LINDA BRADLEY, CEO OF CENTINELA HOSPITAL

BUILDING A BROAD BASE OF STAKEHOLDER SUPPORT:
To fulfill the objectives of the SlingShot grant and to put into place the resources required to address workforce needs identified by healthcare employers, the Southeast Los Angeles County Workforce Development Board (SEALCO WDB), which agreed to manage the state grant, led the effort to organize a “coalition of the willing” into a structured “collaborative,” capable of delivering results. Within a few months of developing an initial action plan, the stakeholders entered into a “compact” agreement defining their roles and commitments. The parties included hospitals, clinics and other healthcare organizations; public and private educational institutions; economic development; organized labor, and seven local WDBs operating in LA and Ventura counties. To support the extensive work of the C3 Skills Alliance, the stakeholders agreed to participate on three functional teams (Industry, Education & Labor, and Investment) and a Leadership Team, that would oversee and guide collaboration. The Industry Team was principally focused on determining the skills, training and hiring needs of business, while the Education Team was responsible for mapping assets and developing training solutions. The Investment Team was charged, principally, with budget oversight. From September 2016 through April 2018, the teams have met frequently to share information, implement workplan activities and evaluate progress on project’s goals.

“Regional collaboration is the willingness to face challenges and the courage to break down traditional methods of doing business even when the outcomes can’t be guaranteed. Success of the C3 Skills Alliance is attributed to the “willing,” who committed to a progressive change in how we do business to address a skills gap in the healthcare industry.”

YOLANDA CASTRO, EXECUTIVE DIRECTOR, SOUTHEAST LOS ANGELES WORKFORCE DEVELOPMENT BOARD
CARE COORDINATION

**Align Resources with Patient Needs**
**Link to Community Resources**
**Help with Transitions of Care**
**Create Proactive Care Plan**

HEALTHCARE TEAM
- Physicians and Nurses
- Pharmacists
- Health Practitioners
- Specialists
- Insurance Providers
- Patient, Family and Caregivers

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**GAINING A BETTER UNDERSTANDING OF BUSINESS NEEDS:**
To better quantify the extent of need for care coordination skills training, the Alliance worked closely with its healthcare association partners to survey their members on key issues. A total of 77 surveys were returned that indicated the following. The vast majority of the survey respondents employ care coordination/case management staff (1,004 employees at 54 businesses). Care coordination is largely conducted by Registered Nurses (RNs) and Social Workers, but nearly a quarter of those performing this function at responding businesses are LVNs, Certified Nursing Assistants (CNAs) and Medical Assistants (MAs). Respondents also indicated that there are significant gaps in care coordination skills among employees and job applicants, including: coordination (organizing, planning, correlating and facilitating), understanding treatment plans, familiarity with medical terminology and more. Survey results, combined with additional labor market analysis, revealed that care coordination skills are utilized by workers with various levels of education and responsibility and that efforts to identify and develop training solutions must correspond to these differences.

**DETERMINING THE AVAILABILITY OF TRAINING:**
C3 Skills Alliance stakeholders agreed to and adopted a career pathway profile for care coordination that identified 3 distinct skill tiers: entry-level, which encompasses patient navigation skills used by CNAs, MAs and others with similar skill sets; a technical level in which four-year degree RNs, Social Workers and Community Health Workers are grouped; and a professional level including Social Workers and RNs with advanced skills typically associated with attainment of a Master’s Degree. The unique skill needs of workers at each level became consistent reference points throughout the Alliance’s work in developing appropriate training strategies.

**IMPLEMENTING TRAINING AT EVERY LEVEL:**
To ensure that job seekers, those working at all levels in occupations that use care coordination skills, and healthcare organizations were all aware of training programs identified and developed and which could be funded, in whole or part, through the state grant, Full Capacity Marketing was procured and several marketing strategies were implemented. Perhaps the most important such strategy was the adoption of the C3 Skills Alliance moniker, as this enabled stakeholders to promote their work through messages that communicated a connection to “skills” and “care coordination.” Using various messaging templates and informational materials, structured webinars with healthcare organizations, presentations to students and orientations to job seekers were all delivered effectively. The initial impact of the Alliance’s marketing efforts was strong; new professional-level curricula by the State University system, technical-level course for the community college system and new professional-level curricula by the State University system.

**CONDUCTING A JOB AND SKILL ANALYSIS:** Due to the still emerging nature of care coordination within healthcare delivery services and the lack of a common description for what skills and competencies are required for this work, the Alliance engaged its education partners to conduct an analysis. The community college’s Deputy Sector Navigators responsible for LA and Ventura counties led a two-day discussion in which industry professionals that oversee care coordination provided information on skills associated with this work. Using a DACUM process, the panel identified general knowledge and skills required of successful workers, tools, equipment, supplies, and materials used, important worker behaviors essential for success, duties for which workers are responsible and tasks that they perform. The resulting Competency Profile became a critical resource for evaluating training.

**DETERMINING THE AVAILABILITY OF TRAINING:** Based on the C3 Alliance partners’ work in assessing the healthcare industry’s needs for care coordination skills and in determining the skills that should comprise curricula to meet these needs, the community college system’s regional Center of Excellence (COE) was engaged to conduct a scan of courses, programs and curricula available throughout California. This work was supplemented by additional research conducted by Alliance consultants. The net result was a short of list of on-line and classroom-based programs, some of which were at institutions outside the region. Ultimately, the scan revealed few courses that addressed industry-identified skills gaps were available within the LA/Ventura region. It highlighted the fact that on-line learning filled some gaps; new courses were needed at each of the three career-pathway levels; and the content of some existing courses should be enhanced. C3 Alliance leadership convened stakeholders from the Industry and Education Teams to review and vet identified courses/curricula using the DACUM Competency Profile as a guideline for determining suitability and strength-for-instruction in patient navigation, case management, care coordination and the management of these processes. The Leadership Team then evaluated recommendations resulting from this process and approved: a state of existing care coordination courses, most of which are offered on-line; the development of a new entry-level patient navigation skills course through the enhancement of existing curricula; and development of a new technical-level course for the community college system and new professional-level curricula by the State University system.

**IMPLEMENTING TRAINING AT EVERY LEVEL:** The Alliance’s early work in gathering industry data about how care coordination skills are deployed by various types of workers was critical in understanding training needed at the three distinct levels: entry, technical and professional. Recognizing that resources varied for individuals at each tier, the stakeholders took unique approaches to address the needs of each level of learner. For entry-level learners, existing curricula was re-touched and implemented by providers representing adult education.
The collaborative relationship between all of us [as educators] has focused on facilitating the development of a career pathway curriculum for new workers to enter and move forward in the industry.”

BLANCA ROCHIN, PRINCIPAL AT DOWNIEY ADULT SCHOOL

and a Regional Occupational Program (ROP). The course is also being offered by various community colleges. At the technical level, the leadership team, with recommendations from education, approved a slate of on-line coursework. HASC has played a leadership role with industry and education partners to facilitate development of a technical-level course that will be ready for delivery at community college campuses in the fall of 2018. For those at the professional level, the California State University’s (CSU) Institute for Palliative Care is developing curriculum that focuses on care management for those overseeing the work of care coordination teams. The cohort-based training course will be available through CSU Care Excellence in 2019.

BUILDING ON THE INVESTMENT: Investments supporting the activities and achievements of the C3 Skills Alliance far exceed the $1 million SlingShot grant. The efforts and resources of industry and education partners reflect significant contributions of time, research, data analysis and other intelligence that serve as leverage to the CWDB’s investment. The full range of investments made will continue to provide value to the industry and workers long after the conclusion of grant activities. The identification, enhancement and development of coursework will continue to meet the needs of new entrants into careers that rely on care coordination skills, along with those of incumbent workers looking to increase their skills, competitiveness and earning power. Healthcare providers will continue to enjoy the availability of workers whose skills make them more effective and more efficient in managing patient care. The ultimate beneficiaries are patients who will live healthier and more productive lives.

The stakeholders that worked to build the Alliance have also made it possible to both expand the current initiative and to replicate it through a variety of efforts. The healthcare industry, which employs individuals at all skill levels across myriad occupations, has identified additional areas, many of which are in nursing, where better skills and more training are needed. These include skills for those working in critical care, emergency, perioperative, neonatal and other specialty areas. HASC is continuing to work with regional stakeholders to address these needs through a Regional Planning Implementation grant funded by the CWDB. In addition, resources for care coordination are growing through ongoing efforts of the C3 partners. The process used by the C3 Alliance provides a blueprint for regions looking to transform industry need into a well planned strategic response. It serves as a model for regional sector engagement and development of career pathways that are precisely aligned to industry needs.

Survey results, combined with additional labor market analysis, revealed that care coordination skills are utilized by workers with various levels of education and responsibility and that efforts to identify and develop training solutions must correspond to these differences.

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Care coordination is largely conducted by Registered Nurses (RNs) and Social Workers, but nearly a quarter of those performing this function at responding businesses are LVNs, Certified Nursing Assistants (CNAs) Medical Assistants (MAs).
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Created new curricula and career pathway training programs that are available statewide to adult schools, community colleges and the CSU system.

Trained nearly 200 new and incumbent workers in the care coordination skills demanded by industry.

Implemented an industry-led engagement strategy that can be replicated with any sector.

“Before this course, I assumed empathy and compassion were not things that could be taught, but the facts proved otherwise. I now feel confident in providing patients credible resources that may alleviate financial stress, educational materials pertaining to their medical conditions and information on organizations dedicated to making patients feel more at ease. My eyes were opened to the important need for patient care coordination.”

REBECCA MARTINEZ, STUDENT AT DOWNEY ADULT SCHOOL
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