October 5, 2017 Brevard Healthcare Workforce Consortium

Small Group Discussion Results

CareerSource Brevard has hurricane recovery resources available,
https://careersourcebrevard.com/news/hurricane-irma-recovery-resources

 How was your business affected by Irma?

Group 1:
-Lost about 45 students because of Irma and Maria (EFSC)
- Caregivers, patients, clients could not report to work, reduced hours but businesses are recovering now

Group 2:
- Looking to provide resources for students and employees
- Business affected but all structural issues handled
- Seeking funds for associates / employees for disaster relief
- Macedonia needing assistance for community members, food pantry depleted

Group 3:
- pre, during and post hurricane relocated patients from hospital, staffing needs
- all aspects, added expenses and special needs shelter
-not able to have regular services
-funds and supplies are down
-students are unable to access online education
-use of EAP to ask or offer help
-recompense staff for worked and unworked due to storm
-high level of uninsured influx to hospitals

Regarding the Soft Skills Committee Initiatives:
1. Are there any additional behavioral competencies or interview questions to add that were not included in the Behavioral Expectations Survey?

Group 1:
- People under 30 are not trained to have compassion, respect or feelings
- Young people don't have real life experiences yet and they are showing too much interest in just money, how much and how easy they could get it.
- To teach students what healthcare really is and if it fits you
- It is a community solution to approach healthcare
-Engagement with the students when they come to the program and while it lasts
- To qualify the students in all areas to see if healthcare is the right career for them
- How generations are challenged by technology

Group 2:
- caring / compassion for people (in general)
- ability to talk to people respectfully – with dignity
- teach verbal communication and non-verbal cues

Group 3:
- HIPAA compliance through situations and scenarios
-Situational based questions and candidate response rates
-Prioritizing and time management
-Follow up scenarios, was outcome achieved?
- understanding resources, ideal communication preferences with RN

2. When thinking about outside resources to help with employee soft skills, what comes to mind?

Group 1:
- Planning, be on time, know your support system, organizing their lives, work schedule for all ages, all healthcare workers **(planners – electronic or hard copy)**
- Colleges also need to be ready for students not just demand that students be ready for college
- Dealing with bureaucracy of school system and also parents
- Teachers and parents should plan a part in helping students to meet schools/ training / colleges requirements to learn to be responsible for time, not missing classes, to become dependable people as demanded by healthcare occupations.
-We all are victims of our success as society
- New generations lack interpersonal skills because of technology
- We need to balance how to approach students (communication, dialogue, discussion in person)
- One On One
- How much you know vs how much you care
- Not complaints but what you're doing to engage with new generations
- Right mentors
- Mentorship
- Customer service, both internal and external

Group 3:
- workshops online education of situation response
- joining toastmaster to learn to speak with individuals and groups
- Prove It
- Customer Service
- Internal customers and external customers
- Crucial conversations book
- Gallup or IPPEA

General: Regarding the talent pipeline issues, are there other occupations or issues that need to be addressed?

Group 2:

- employers seeking virtual reality tour of specific jobs
- lack of nurses, CNA's
- remote nursing
- schools do not have participation from clinical site locations, causing a cap in school / program acceptance
- Possible solution: Nurses that prefer decreased work hours can work as a clinical facilitator to bridge the gap of the lack of teachers and clinical sites
- aptitude of students applying for programs is not meeting qualifications
- see if school board still offers DECCA or HOSA to expose high school students to careers

Group 3:
- front line care providers
- CNA, LPN, RN, MA and IT
- laboratory services
- medical technologists
- robotic technology in medicine
- hands on PT care
- documented electronic data entry
- IT Skills to HC workers
- dependence on technology vs common sense

Regarding the Education, Training and Technology Committee's Work:
1. Results from the Healthcare Industry Exploration Survey indicates there are limited opportunities for shadowing and volunteering for individuals under the age of 18. In our effort to increase the healthcare talent pipeline, what are some ways we can provide more exposure to healthcare careers to individuals under the age of 18?

Group 2:
- see if school board offers programs to high school students that exposes them to careers
- find ways to grab high school students' attention (university of Alaska – Fairbanks)
- mentorship
- better promotion of healthcare careers using technology, interest exams and career exploration
- have principals, teachers, guidance counselors select students for healthcare exposure

Group 3:
- career shadowing with high school students
- active with youth groups, boy scouts, girl clubs
- can be scenario based with simulations
- career scope on O*net
- undeclared majors

2. What do you think about the recommendation that consortium industry partners offer peer mentoring for newly employed healthcare training graduates? What are the benefits? How can this be

implemented by industry partners?

Group 2
- being implemented by Keiser between 1st year and 2nd year students and student services
- professionals should volunteer to be mentors
- find best practices from other employers on peer mentoring and how to implement

Group 3:
-benefits / perceptions, what is it really like?
- nurse residency
- realistic job preview
- 1st year peer mentoring

Regarding the Staffing Committee work:
1. Healthcare Vacancy Baseline and Benchmarks Survey was implemented to measure progress over time received 6 responses. What recommendations do you have to improve survey response rates?

Group 3:
- getting surveys to the right people
- update who the recipients are
- make sure the staff are still there
- share the importance (message from president)

2. What do you think about the branding campaign ideas? How can we maximize a grass roots campaign effort, what other ways besides social media can we make the community aware of career opportunities / training in healthcare?

Group 2:
- social media
- provide information at schools
- place directions on how to take the next steps and the end of Virtual Reality promotion
- align branding with what "Florida Does Well"
- EDC
- provide certifications for participation in programs

Group 3:
- websites and social media
- social media must be aligned with building positive feedback from employees or potential employees
- market to buy within
- educational entities
- getting buy in from political entities
- realistic expectations

Apprenticeships: Do you think apprenticeship training will work in healthcare? Why or why not?

Group 3:

- They can build pipelines in the community
- clinical experience, 80-90% employed post training
- education / HR mentors who are employed with HCA
- retention with contract commitment letter (1 or 2 years)
- MA speak to the experiences
- testing
- CSB encourages employer buy – in to training and apprenticeships
- OJT's