



DC Health Care
Workforce
Partnership

Voice of the
Consumer:
Informing the
Industry Reset



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RECRUITMENT EFFORTS

Tracked and adjusted recruitment efforts to increase participation

Worked closely with DCHA and Action Team 6 of the DC Health Care Workforce Partnership to track completes. Identified recruitment gaps and needs such as new ways to reach participants through text messaging, social media and word of mouth referrals. Launched self paced research exercise via SMS survey (SurveySparrow), increasing participation by 33 participants.

Increased the number of sessions

Offered additional sessions to meet scheduling needs of participants, thus increasing participation. Facilitators adapted to participant needs and adjusted discussion flow to ensure all session participants were included in conversation, all research areas were covered, while being respectful of each participant's time.

Leveraged JBRF Participants

Utilized participant pool from the DCHA "Black Women Thriving East of the River" project. A total of 15 participants from JBRF were recruited to participate, either through self paced exercise or live session.

Launched a referral program

Referral program: \$25 gift card incentive was given to anyone who referred a qualified participant. As a result of the program, we recruited two additional participants who completed the self paced exercise.



RECRUITMENT DETAILS

TOP RECRUITMENT TAKEAWAYS

- Live sessions were difficult to schedule with multiple cancellations and all ended up being in-depth interviews (IDIs) except for two sessions with two participants each.
- SMS based surveys increased participation significantly.

RESEARCH RESPONDENTS	LIVE SESSIONS N=17	SELF PACED N=33
Certified Nursing Assistant (CNA)	7	20
Certified Medical Assistant (CMA)	5	12
Home Health Aide (HHA)	3	9
Licensed Practical Nurse (LPN)	3	3
Pharmacy Tech (Pharm. Tech)	4	3

Source: 17 live session, 33 self paced. Note: Some participants have experience in more than one position.



EMPLOYER DETAILS

Employer Setting	Participant Total	CNA	CMA	HHA	LPN	Pharm. Tech
Acute Care	19	12	8	3	2	3
Ambulatory & Behavioral Health Services	16	7	8	3	3	3
Nursing, Residential & Long-Term Care Services	10	5	1	6	1	0
Other/Unspecified	5	3	1	0	0	1

Source: 17 live session, 33 self paced. Note: Some participants have experience in more than one position.



Executive Summary



KEY OPPORTUNITIES

Improvement opportunities are universal across top priorities:

Transform Workplace Culture

Better Define and Communicate Pathways

Enhance and Fund Training Programs

Increase Awareness of Job and Education Opportunities



KEY OPPORTUNITIES

TRANSFORM WORKPLACE CULTURE

- Deeper understanding of employees as people and closer attention to task delegation, especially for CNAs and CMAs, is a must for improving workplace culture and retention.
- Ongoing guidance and support is needed for employees to make the most of their training and education.
- Mentoring and Networking: When an employee has someone guiding and advocating for them, it often leads to a faster, more fulfilling career track. Personalized, one-on-one support is key to helping employees grow and stay committed to their health care career.
- Peer-to-peer support and mental health services are impactful ways to improve workplace culture.



KEY OPPORTUNITIES

BETTER DEFINE AND COMMUNICATE PATHWAYS

- Limited LPN positions close an important pathway for DC Residents: LPN positions appear to have been eliminated in hospital settings and access to training programs has been reduced.
- Engagement with governing and regulatory boards is an opportunity to streamline certification and licensing. Decision makers must understand how barriers impact employees.
- Participants feel pathways for CNA and CMA are rigid, particularly for CMAs. Pipeline that better aligns skills and opportunities for CNA and CMA is needed and would maximize resources.



KEY OPPORTUNITIES

ENHANCE AND FUND TRAINING PROGRAMS

- Financial support through scholarships, stipends, employer sponsorship and other partnerships is vital to helping employees advance within or among pathways.
- Exam requirements are overwhelming. Many do not have the time or support needed to pass or score well enough to advance. Counselors and tutors could bridge the gap.
- Job opportunity and training program information needs to be more accessible. Employers are key partners who can offer paid leave and other professional development (PD) benefits.
- Bridging the education gap: On-the-job education vs. classroom education.
- Explore how stackable/transferable skills translate to certifications and advancement: Opportunity for employers to certify employees through on-the-job training.



KEY OPPORTUNITIES

INCREASE AWARENESS OF JOB AND EDUCATION OPPORTUNITIES

- Limited awareness of potential jobs and pathways exists: Becoming a doctor with a medical degree is not the only option.
- Meeting people where they are and engaging those they trust are impactful ways to reach people who want to start and advance in the health care field.
- Cost and time required must be factored into the messaging. People also need to see themselves in the environment that fits them.



KEY INNOVATIONS

ROTATION TO GET HANDS-ON EXPERIENCE IN DIFFERENT POSITIONS

“I’m very open. So I’ll listen to someone else who has a great experience in this field. My heart is not committed to any particular thing. I’m very, like, open to trying new things.”
Pharm. Tech (Live Session)

NEW WAYS TO ASSESS HARD AND SOFT SKILLS

“I want to become an RN. I will literally have to stop working to become an RN. Since there are RNs at facilities, we should be able to work alongside them to get hours and learn different stuff from them, shadow them, rather than stop working altogether.”
CNA (Live Session)

A FLEXIBLE PATHWAY THAT CAN TRANSITION WITH EMPLOYEES AS THEIR EXPERIENCE AND ASPIRATIONS EVOLVE

“You know how you can bridge from an RN and bridge up to your manager RN? They should have a bridge if you’re a CNA, or CMA. You should be able to at least bridge to an LPN. There is no bridge. You should not have to pay all of that money all over again when you have been in the field.”
CMA (Live Session)



ENGAGING HEALTH CARE EMPLOYEES IN CO-CREATING PATHWAYS

ENGAGING PARTICIPANTS FROM THIS WORK AS CHAMPIONS FOR THE PARTNERSHIP

"I am a public health student, I've done program planning, I've done health communication work. I've done all these classes. I would love to help you guys!"
CNA (Live Session)

WORKING SESSION WITH EXPERTS AND THOSE WHO WILL BE IMPACTED

"If you have any resources for me, please send me anything to do with medical. There might be a course that I want to take because I'm trying to have everything under my belt." HHA (Live Session)



Opportunities




THE TOP FOUR UNIVERSAL OPPORTUNITIES

Transform Workplace Culture

Better Define and Communicate Pathways

Enhance and Fund Training Programs

Increase Awareness of Job and Education Opportunities



OPPORTUNITIES:
Transform Workplace Culture

Deeper understanding of employees as people and closer attention to task delegation, especially for CNAs and CMAs, is a must for improving workplace culture and retention.


Lack of respect and unbalanced workload leads to discontent and turnover.

"If they want to keep employees, they need to do better about employees, and they need to really get to know the employees and try to work with them better. Because if they really knew us, they will see that we know more than these RNs and LPNs. They had the certification but at this point, it's like, who gave them the certification? Can I sign up to get one?" CNA (Live Session)

"No, I do not feel empowered anymore. At first I did but I'm losing my passion for what I love to do. My facility is short-staffed and they don't care. They just want their work done and treat us horrible like we are beneath them because we are CNA." CNA (Self Paced)

"CMAs are over-used and over-abused and not given the credit that they need. So when somebody asks me how I feel, and how things can change, I speak on it because it's the reason why I changed over to research. I work in oncology research right now. And I'm only using my [CMA] skills to draw blood when it's needed or do an EKG or something. It's always like you're not a nurse so you can't do this." CMA (Live Session)

"I heard a nurse talking to the tech and I was standing there. So I went to the charge nurse and said, I don't appreciate her talking to the tech like that. We're all human. And that tech was really doing her job. I called for the nurse three times. And she came in at the second call and said the tech was coming. But then she went on the computer and ordered pocketbooks." CMA (Live Session)



OPPORTUNITIES:
Transform Workplace Culture

Ongoing guidance and support is needed for employees to make the most of their training and education.

**Internships /
Externships /
Career
Counseling**


“If you are working in a hospital and you want to learn about switching careers to pharmacy, there may be an interest group, or if you want to learn about, like surgical assisting there. There's an interest call for that. So you got me in this interest group but you don't have anything to offer me? It was kind of like, what's the point? You know, if there's no follow through, and you're just doing it just to do it, then what's the point?” CMA (Live Session)

“Career counseling has been the most helpful training in my health care career. A moment where I've felt supported was when my supervisor in my training program always checked up on me and made sure I'm doing well.” CNA (Self Paced)

“Counseling and seminars really shaped my entire career.” CNA/CMA (Self Paced)

“I did my externship at the SOME facility in Northwest DC, and I was able to do other training. So this is dealing with not just homeless, but mostly low-income families and persons. And they also had behavioral health.” HHA (Live Session)

“I had a lot of internships. And I think that is the biggest support that I have, is, you know, someone else showing me exactly how to do it or how they do it and maybe an easier way than what the textbook tells you. So, I think that internships or externships are very important in working in the health field.” CNA/CMA/HHA (Live Session)



OPPORTUNITIES:
Transform Workplace Culture

Mentoring and Networking: When an employee has someone guiding and advocating for them, it often leads to a faster, more fulfilling career track.


Learning from others who have navigated a similar career path, and confidence building are vital to professional development.

“Our human resources person was looking at my resume, and she was like, after doing the CNA work that I did, she said, ‘you know, you’d make a lot more money in administration.’ And that’s why even a lot of nurses gravitate towards going into positions in administration. They keep their credentialing. But, you know, it’s just a whole different pay scale. I like the fact that she reached out to me, because that was, once again, that element of having some support and helping to navigate your career.” CNA/Pharm. Tech (Live Session)

“Mentoring for continued education in nursing and mentoring for self esteem, for navigating our personal lives. The barriers are in my head.” LPN (Live Session)

“I went to the National Chief Nursing executive. When I first got the CNA position, I said, you know, I don’t have my bachelor’s degree, I have an associate’s degree. I’m committed to getting my bachelor’s. I’m so ashamed, I don’t have my BSN and she’s like, ‘it’s okay, I’ve been there too. And this is what you can do.’” LPN (Live Session)

“Support from my managers and my fellow colleagues that I worked with upstairs, that you know, can be supportive and give me as much insight on what to do and what not to do. They have preceptors here who have already been trained in your position, so, when I go up there, I’m definitely going to have somebody training me.” CNA (Live Session)



OPPORTUNITIES:
Transform Workplace Culture

Offering personalized, one-on-one support through hands-on training and mentoring is key to helping employees grow and stay committed to their health care career.

Personalization through one-on-one training and relationships


"I had people that I looked up to. So, when it came to the time of getting the paperwork, [finding] a place to get my schooling, it was not odd for me because I had recommendations from people who had come to that stage. If you have mentors, it would be easier than someone who is just trying to get out on their own and without any knowledge whatsoever." LPN (Live Session)

"From a technical school, you've already been given the tools of what you're going to expect when you branch off into the health care field. You're partnering with someone and they're showing you hands on, you're repetitiously doing it every day until you graduate." CMA (Live Session)

"I was lucky because after one month, [in comparison to] a lot of people that [had been] working there for one year, I was sending messages to the manager (the person who deals with the patients) and I was [pushed] to have the license because I cannot work without the license and she helped me." Pharm. Tech (Live Session)

"I took the national licensure exam. I was able to pass on the first try, I think, because I have the help of pharmacist family members." Pharm. Tech (Live Session)

"I had a lot of internships. And I think that is the biggest support that I have, is, you know, someone else showing me exactly how to do it or how they do it and what's maybe an easier way than how the textbook tells you how to do it. You know, it's something that the textbook can't teach you. It's there to give you the knowledge, but you have to apply the knowledge in the real world." CNA/CMA/HHA (Live Session)



**OPPORTUNITIES:
Transform Workplace Culture**

Peer-to-peer support and mental health services are impactful ways to improve workplace culture.

Supportive colleagues who take action when they see racism and when colleagues need encouragement.

“When you're dealing with some white folks who would look at me in a degrading manner, it would like break my heart. I would just stand by and let them do their thing. I actually learn a lot of people's point of view [by] standing back and watching. I had a [colleague] there who was white. She told the patient that I was the best caregiver that she would ever get.” LPN (Live Session)

“If people find that they have the encouragement to continue on, and the support, people will say, it's something I could do, and I can accomplish it. Then go and tell other people, if I did it, you can do it.” CNA/CMA (Live Session)

Offering mental health services supports the person, not just the employee.

“Some nurses might be just caregivers by nature. And if you're a caregiver, you tend to take on other people's stuff, you can be an enabler, you know, and you have your own family to deal with, so yes, [mental health support] just to keep you up.” LPN (Live Session)

“Career support I could have used in the past is seeing a psychologist because it would help me so much right now.” CNA/CMA/HHA/Pharm. Tech (Self Paced)

“I would advise therapy and let go of anything that may cloud the mind and may be causing mental and emotional imbalance.” HHA (Self Paced)

“Stress management has been an important skill to doing well in my job.” CNA/CMA (Self Paced)



OPPORTUNITIES:
Better Define and
Communicate Pathways

Limited LPN positions close an important pathway for DC Residents: LPN positions appear to have been eliminated in hospital settings and access to training programs has been reduced.

Streamlining the path and cost to becoming an LPN is especially important for CNAs, CMAs and PCTs.

“When they deleted the LPN, they really hurt the economy. They hurt patients. I have three brothers. And every time I went to the hospital while they were in, they were short-staffed. This was before Covid.” CMA, (Live Session)

“We don't really work with LPNs. So they [PCT colleagues] might not know that's an option. In the hospital, it's, you know, PCT, and there's a nurse, physician, PA. If they see that these are the only roles in the hospital that are common, they think that's their only option. There's not much talk about medical assistants, stenography, radiology, they don't really think about those other kinds of roles. I have coworkers in their later 40s and 50s, and they've been a PCT their whole life. I don't think they ever tried another career because I don't know if they knew if there was an LPN position.” CNA (Live Session)

“I think they should have LPN programs at the facilities to learn.” CNA (Live Session)

“Where I am, there are not a lot of LPN programs. And if there are, they are astronomically over-priced, not worth it, and you might not even be going to an accredited place.” CMA (Live Session)



OPPORTUNITIES:
Better Define and
Communicate Pathways

Participants feel pathways for CNA and CMA are rigid, particularly for CMAs. Pipeline that better aligns skills and opportunities for CNA and CMA is needed and would maximize resources.

More focus on bridging the positions and pathways.

Less focus on letters.

“It is almost like a CNA is career-based and CMA is job-based. You have options after CNA. With CMA, you're kind of limited on what you can do outside of that, unless you go look at other options to add to CMA. With CNA, you can take that and apply it to a career as a nurse or whatever steps you want to do. CMA is kind of like there's no forward thinking after you do that training unless you do it yourself.” CMA (Live Session)

“You know how you can bridge from an RN and bridge up to your manager RN? They should have a bridge if you're a CNA, or CMA. You should be able to at least bridge to an LPN. There is no bridge. You should not have to pay all of that money all over again when you have been in the field.” CMA (Live Session)

“Obviously, if your CNAs can do the same work that the CMA can do, then why not think that they can do vice versa, right? That's just maximizing the resources you already have. So it's just like, look at the whole picture. Don't just look at letters. Oh, I did CNA. What did you really do? What do those letters really mean? Versus just saying, oh, those letters don't align with what I'm looking for, you already counted [me] out.” CMA (Live Session)



OPPORTUNITIES: Better Define and Communicate Pathways

Engagement with governing and regulatory boards is an opportunity to streamline certification and licensing. Decision makers must understand how barriers impact employees.

State-by-state rules limit job opportunities, advancement	“As an LPN, they said I had to have graduated from an LPN school. I didn't graduate from an LPN school because I was in an RN school in New York State. I know people who go to school in other countries, and they have doctorate's, master's degrees, licenses, and they come here, and somehow they go through the process and they [Board of Nursing] say [to others] ‘you can work here.’ But that was a major barrier for me. And, yeah, that needs to be looked at.” LPN (Live Session)
Rigid certification process hurts workforce growth.	“If you're not certified, you can't produce a certification. You can't even get in the door anymore. It's just gotten that rigid.” CNA/Pharm. Tech (Live Session) “If they want more nurses and clinicians back in the system who worked in the system for a long time, but through illness or whatever, you know, they haven't been in for a while...and they want us to come back, they have to have a team of people to help them do that.” LPN (Live Session)
Give those in recovery a second chance.	“I ran into an issue with the DC Board of Nursing. They weren't that supportive, either. I thought they were supportive in the beginning, because it was like, hey, you know, just do this, just do that, because I had to report to them, like, every so often. But then when I finally had some substantial, clean and sober time, they were like, oh, no, you can't, you're still inactive. And now we're questioning how we even let you practice here [because I came from a different state.]” LPN (Live Session)



OPPORTUNITIES: Enhance and Fund Training Programs

Financial support through scholarships, stipends, employer sponsorship and other partnerships is vital to helping employees advance within or among pathways.

<p>Training cost is a barrier: Opportunity to partner with community colleges, other affordable providers</p>	<p>“Training programs are very expensive. They're costly compared to some of the community colleges that offer the same programs.” CNA/CMA (Live Session)</p> <p>“They're outrageously expensive, and the demand that's here, there may not always be a grant or scholarship available, or financial aid. So what do you do with that? If I don't have a job, and I'm trying to get into a place where I can get a job, hence me doing CNA or CMA or trying to be open? You know, how can I afford it? You want tens of thousands of dollars for me to come out as a medical assistant? To do what with?” CMA (Live Session)</p>
<p>Access to funding resources</p>	<p>“It took me 30 years to go back to school to attain my associate's degree, then my employer paid for the education.” CNA/CMA (Live Session)</p> <p>“I would be more likely to advance if I get financial support or a wage raise.” CNA/LPN (Screener*)</p> <p>“I had a scholarship to go to SOME. I typed 'free courses.' I didn't put 'medical.' I just put 'free courses.' And that's what came up. I looked into it and the scholarship was like, \$10,000. I did all the testing to get in and do what I have to do to pass my classes.” HHA (Live Session)</p>



**OPPORTUNITIES:
Enhance and Fund
Training Programs**

Exam requirements are overwhelming. Many do not have the time or support needed to pass or score well enough to advance. Counselors and tutors could bridge the gap.

<p>Barriers: Exam preparation and test-taking ability</p>	<p>“There’s a lot of exams you have to take for nursing. I think there’s like a TC exam, there’s NCLEX, there’s a bunch of different exams that are hard. It seems out of reach for many.” CNA (Live Session)</p> <p>“There is a high school requirement and there’s always an entrance exam. You have to take the HESI or TEAS exam. If you pass it to their score level, then you get into the program. And if you go for those big universities or the community college, there’s always a waiting list for it. So they always look at the people who have a higher score for those tests. So if you don’t pass, no way you can get into the program.” Pharm. Tech (Live Session)</p>
<p>Educational support through counselors, tutors</p>	<p>“I learned about phlebotomy, how to advocate for self, ask questions, [how to] navigate a health care setting. I learned about Code Blue, other codes and got comfortable using my CPR skills. I learned about telemetry boxes, EKG and EEG. I learned about different diseases and how to deal with all sorts of people effectively.” CNA (Self Paced)</p> <p>“I was well tutored during my first job in health care.” CNA/CMA (Self Paced)</p>



**OPPORTUNITIES:
Enhance and Fund
Training Programs**

Job opportunity and training program information needs to be more accessible. Employers are key partners who can offer paid leave and other PD benefits.

**Awareness/
Access to training
programs and job
opportunities**

“They need perspective of the person that's trying to help them get to this new career, maybe direct communication coming to them, versus, ‘hey, come out to this career fair table kind of thing.’ I found out about this [focus group] through my manager, and she sent us an email with the information. If my manager said, ‘hey, they're having this career fair table kind of thing in the cafeteria on this day, go check it out,’ that would have been a lot harder because you know, it takes a lot of time to go out.” CNA (Live Session)

“Paid leave or something like that, where you have hours a year that you can use to put in and you won't miss your pay.” CMA (Live Session)

“To become a magnet recognized nursing program, you have to have a certain percentage of your nurses go on for higher level degrees and certification. So in order to get buy in or offer help, for the associate's degree nurses that we have at Kaiser Permanente, what I've said to them is there are many good online programs. This is one. I share my story with them. I said, you know, I had an associate's degree. I'm 63 years old, and I went back to school and I got my bachelor's in a year. You can do it. We help you with your tuition. And so I actually did have nurses that went back to school, through Western Governors University, and another one who actually had his bachelor's and went to their master's program.” LPN (Live Session)



OPPORTUNITIES: Enhance and Fund Training Programs

Bridging the education gap: On-the-job education vs. classroom education

CNA and CMAs without a college education are teaching others on the job because they have experience.

However, they don't get the same respect or opportunities to advance as recent graduates.

"CMAs are limited at a hospital setting. They may can draw your blood, they may can start IV but they can't give you an injection, which is...wow, to me in a hospital setting. But then you're going to pull a resource from a nurse that could be giving patient chemo right now to give an injection when you have a willing body that just drew their blood or started an IV on them. But now you're telling me that they can't just give them an injection. That's wasted time. That's a wasted resource." CMA (Live Session)

"Honestly, I think you should work your way up so that you can be more compassionate. You'll have the patience to really take care of your unit and their patients. You need to go step by step so that you can have more compassion. You will be much more compassionate because you understand." CNA (Live Session)

"In the lower fields, we work like a dog and we get pennies. And we get disrespected and are expected to take the disrespect and not say anything." CMA (Live Session)



OPPORTUNITIES: Enhance and Fund Training Programs

Explore how stackable/transferable skills translate to certifications and advancement: Opportunity for employers to certify employees through on-the-job training.


Time and money are major issues: Some employees have to choose between working/earning income and pursuing advancement opportunities.

“I want to become an RN. I will literally have to stop working to become an RN. Since there are RNs at facilities, we should be able to work alongside them to get hours and learn different stuff from them, shadow them, rather than stop working altogether.” CNA (Live Session)

“[Employers say] yes, we'll support you educationally. But then when it comes to you still getting that money, and those hours to support yourself while you're going to school, it doesn't balance. So it's not supportive to someone who wants to move up.” CMA (Live Session)

“A lot of the nursing programs, I find that they make it hard for people. I know they're now doing programs that do second-degree nursing, where if you did another pathway in school that you could use those credits, and you just need to do like the clinical aspect of it.” CMA (Live Session)

“When I went into health care 30 plus years ago, a lot of the licensing agencies were out there. We grandfathered a lot of people in based on on-the-job training. Check-offs from other skill providers that provided training and made sure you had the skills necessary to actually do the position. Now, it's so much that you have to go through a program. You have to go and take your test and pass your boards or some certification models. So it's a little bit more entailed and detailed, and then you have to keep up that license, you have to keep up that certification.” CNA/CMA (Live Session)




OPPORTUNITIES:
Increase Awareness of Job
Opportunities and Education

Limited awareness of potential jobs and pathways exists: Becoming a doctor with a medical degree is not the only option.

Awareness of jobs and how to obtain them

“People don't realize that you don't have to go to medical school to have a career in health care. They think you have to go big. So they don't know that there are CNA positions. They don't know about phlebotomy, they don't know about, you know, the different avenues you can take to get into health care. So that may be a barrier or make it hard for them to start a career in health care because they already pretty much defeated themselves before they were even searching for an opportunity because they thought they had to go to med school.” CMA (Live Session)

“You don't have to go to school to gain those skills, some jobs will teach you on the job, which is better, you know. Some people can't go to school or don't have that time, rather than just secure the job and, you know, take time out throughout the day to work in that field and get the experience while getting paid at the same time.” CMA (Live Session)



OPPORTUNITIES:
Increase Awareness of Job
Opportunities and Education

Meeting people where they are and engaging those they trust are impactful ways to reach people who want to start and advance in the health care field.

Engaging trusted people and organizations

Families/Friends: Many participants started in health care because of a family member or friend who worked in health care or because they wanted to learn how to care for a sick loved one. “A lot of my family members are actually pharmacists. So that kind of persuaded me to enter the pharmacy field.”
Pharm. Tech (Live Session)

Churches/faith organizations: “I went to church with people who got me into an externship.”
CNA/CMA/HHA (Live Session)

Workforce development programs: “I learned about my first job in health care through UDC workforce development.” CNA (Self Paced)

Employers: “Talking to managers or health care administrators that might be looking to fill these roles in their facilities. Tell them ‘hey, you could stay in this job. But this is another option you can have if you take this course,’ if it was a long-term care facility, and they have CNAs, LPNs. If you want to try the next job in this career field, you can take this class or go learn more about it by talking to this person. So kind of targeting the places that already have the roles of the CNA, the next role and communicating with them.” CNA (Live Session)



OPPORTUNITIES:
Increase Awareness of Job
Opportunities and Education

Cost and time required must be factored into the messaging. People also need to see themselves in the environment that fits them.

**Messaging /
Visuals that
include:**

- Showcase the different health care careers and career pathways: starting as a CMA or CNA can both lead to becoming an LPN
- Feature real health care worker stories: different lived experiences, backgrounds and pathways
- Prioritize the key benefits of participating: job placement, career help
- Highlight financial support offered: Free training, free courses, grants, scholarships, stipends, paid time off to pursue professional development
- Communicate how their experience offers opportunities to obtain other credentials and access advancement opportunities: "Are you a CNA or CMA? You qualify for this free phlebotomy course!"
- Images of people who look like them (e.g. race, age, gender)
- Images of settings where they want to work: Hospitals, ambulances, homes, nursing facilities, medical records, administration, pharmacies, labs: "My ultimate job is EMT. Something different every day, and it's the adrenaline rush. I know what I'm getting into."
CNA/HHA (Live Session)



**Certified Nursing
Assistants (CNAs)**



THE TOP FOUR UNIVERSAL OPPORTUNITIES: CNA

Transform Workplace Culture

Better understanding of what CNAs are (and are not) expected to do, with focus on balanced workload and respect for CNAs among their colleagues in more advanced positions. Nurture their commitment to nursing.

Better Define and Communicate Pathways

Spotlight how CNA is different from other certifications to help employees understand options from the start. Offer flexibility by strengthening pathway alignment with other positions. Recruit patient transporters, PCTs and sanitation workers to become CNAs.

Enhance and Fund Training Programs

Certify CNAs through shadowing and on-the-job training to become CMAs or bridge opportunities to LPN. Offer other certification/PD opportunities for employees to explore other pathways. Provide scholarships, stipends and paid PD leave.

Increase Awareness of Job Opportunities and Education

Increase awareness about LPN and other pathway programs. On-the-job training and PD opportunities must be equitable and inclusive of those who have work experience but lack college education.



CNA How They Got Started

Future opportunities was the main reason to start a CNA career as well as having a passion for health care and helping people.

Process / Future opportunities	<p>“Back in the days, I used to study combining different herbs, making herbal tonics to help cleanse and detoxify your organs. It always just kind of appealed to me to go into health care. I worked in the federal government for a very long time. I was burnt out, I was tired. And I wanted a different pathway. And that's when I said, let me just go ahead and go into health care. And I started off as a Pharmacy Tech at CVS. And so it was just interesting to do it. But then I got burnt out on that so I left the pharmacy arena and went to work in medical records at [FQHC]. Then I decided to get my board certification as a CNA.” CNA/Pharm. Tech (Live Session)</p> <p>“For medical school, you do need clinical hours and clinical experience. So during the pandemic, I couldn't get any experience because they wanted people who were licensed and had proper certification. So then I went to get my CNA license in DC. And it took me about six months to get because it was virtual, through the program I did, for the lecture part. And then two weeks of clinical hours in person at [hospital].” CNA (Live Session)</p> <p>“If you were going on to RN, I suggest you start from the home care and facility settings, starting from Home Health Aide to Certified Nursing Assistant and then working up because you'll see the difference.” CNA (Live Session)</p>
Passion for health care / Helping people	<p>“I have always had a desire to help other people and this is before I even got into health care. I became a board certified CNA because I just like doing patient care.” CNA/Pharm. Tech (Live Session)</p> <p>“I worked at a substance abuse facility for people with mental illness.” CNA/HHA (Live Session)</p>



CNA Support Received

Training programs, internships, career counseling and mentoring were cited as essential support services. More advancement and financial growth opportunities are needed.

What's useful	<p>"The Carlos Rosario program. They did a really good job at appealing to people of all backgrounds. I know some of my classmates were immigrants. So that program specifically, it's not only affordable but it was like super convenient." CNA (Live Session)</p> <p>"I had a lot of internships. And I think that is the biggest support that I have, is, you know, someone else showing me exactly how to do it or how they do it and what's maybe an easier way than how the textbook tells you how to do it. So the textbook may say, this person is supposed to have a 90 over 120 BP, but then you have a person in front of you whose BP is 120 over 80. You know, it's something that the textbook can't teach you. It's there to give you the knowledge, but you have to apply the knowledge in the real world." CNA/CMA/HHA (Live Session)</p> <p>"Career counseling has been the most helpful training in my health care career." CNA (Self Paced)</p> <p>"You hold your title as a CNA, but you also can do the trainings and stuff to become what they call a psych tech. And, depending on your schooling and training, you had the option to do controls and to work on the floor." CNA/HHA (Live Session)</p> <p>"Continuing professional development in nursing has helped me to keep abreast with current trends in health care." CNA/CMA/HHA/LPN (Self Paced)</p> <p>"There's continuing professional development and growth in health care, there's always professional development, because you have to review anything, any changes in health care, you're a part of, and they're brought to you. And there is growth by continual education." CNA/Pharm. Tech (Live Session)</p>
What's needed	<p>"I tried but got turned down to be an LPN. I was told that this school wasn't a great fit for me and it really discouraged me. I so badly want to become an RN." CNA (Screener*)</p> <p>"They [employers] need to look at first, of all their base workforce, they need to look at the salaries of their base workforce. And they need to then go on to what opportunities they can provide to elevate the salaries and the skill sets of those employees." CNA/Pharm. Tech (Live Session)</p>

Source: Self paced and live session data analysis; *Screener quote included because it offered valuable insight



CNA Career Aspirations

Lack of financial support and resources is a barrier for potential growth. More trusted information is needed to help CNAs map out next steps.

Lack of financial support and resources	<p>"I don't have financial [resources] to continue my career." CNA (Screener*)</p> <p>"I'm not gonna lie, it was pretty hard. Having the pandemic and people talking about a staff shortage, you would think it'd be a lot easier to go to health care. In DC, looking for a CNA program was incredibly hard." CNA (Live Session)</p> <p>"Economy, what's going on in world today and no money for school." CNA (Screener*)</p>
Openness to new career opportunities	<p>"Starting next month, I'll move a level up, to OB Tech. I'm going to work in the surgical part where women come in and they have their C sections. I'll be working right close to the doctor, you know, with tools that they need to perform C sections. I also signed up for a course, about six or seven weeks, to be a certified Phlebotomist and EKG Tech. I want to be nationally certified so if I happen to leave this job and go somewhere else, I can already be certified." CNA (Live Session)</p> <p>"Then once I took the test, I was able to migrate over and elevate into another position, because in health care, it's always about what you've got a license in or what you're certified as, which enables you to perform your specific duties." CNA/Pharm. Tech (Live Session)</p> <p>[Communicate] what kind of responsibilities you can have [when advancing to next step from CNA]. This is how it's different from your current position, how much more you'll get paid, what it takes, the costs associated with that new program, how long it takes, what kind of prereqs do you need? Can it be done when you're working? Because I'm sure they want to keep working while they're doing this new program. What is the job outlook, where can they work? Can they keep working at their current job? Can they work in a different facility? I know it's tedious detailing every little thing but there's so much misinformation on the internet. And I think when people look for information for themselves, it's like, they'll just get confused." CNA (Live Session)</p>



**Certified Medical
Assistant (CMA)**



THE TOP FOUR UNIVERSAL OPPORTUNITIES: CMA

Transform Workplace Culture

Better understanding of what CMAs are (and are not) expected to do, with focus on balanced workload and respect for CMAs among their colleagues in more advanced positions. Empower CMAs to take advantage of the certification flexibility by giving them opportunities to gain both clinical and administrative experience.

Better Define and Communicate Pathways

Spotlight how CMA is different from other certifications to help employees understand options from the start. Offer flexibility by strengthening pathway alignment with other positions.

Enhance and Fund Training Programs

Certify CMAs on the job to become LPNs or to pursue other pathways (e.g. phlebotomy, health educator, health care administration) through shadowing and other on-the-job training. Provide scholarships, stipends and paid PD leave.

Increase Awareness of Job Opportunities and Education

Increase awareness about LPN and other pathway programs. On-the-job training and PD opportunities must be equitable and inclusive of those who have work experience but lack college education.



CMA How They Got Started

Passion for a career in health care, technical school and job placement upon certification were cited as the reasons CMAs started their careers.

Passion for health care / Helping people	<p>“My passion and drive goes to the health area. I always dream of making the difference and bringing in the change to people's lives especially those who aren't privileged enough.” CMA (Screener*)</p> <p>“My goal was to help people take the necessary initiative to take better care of themselves.” CMA (Screener*)</p> <p>“I want to service my community and bring awareness to access to health care.” CMA (Screener*)</p> <p>“I signed up for the health care field to help people. So even though there's a lot going on right now with COVID, and, you know, things of that nature, my goal and my design for working in the health care field never changed.” CNA/CMA/HHA (Live Session)</p>
Referrals and school connections	<p>“When I finished my CMA, the school I was attending, they actually had a contract with two different doctor offices, and I went there. And then I had word of mouth from someone I went to church with to get me into an externship, and I worked there. My first internship, the experience I gained [was helpful], especially in phlebotomy, because school didn't really teach phlebotomy. But I learned a lot about phlebotomy at my first internship, so I was very happy about that.” CNA/CMA/HHA (Live Session)</p> <p>“From a technical school, you've already been given the tools of what you're going to expect when you branch off into the health care field. You're partnering with someone and they're showing you hands on, you're repetitiously doing it every day until you graduate.” CMA (Live Session)</p>



CMA Support Received

Internships and mentoring were offered to gain experience in the health care field. There is a lack of financial support and resources to support advancement.

What's useful	<p>"The most helpful assistance I have received in my career is mentoring." CMA (Self Paced)</p> <p>"I would offer mentoring, networking, career counseling and training opportunities as well as advice on their choices." CMA (Self Paced)</p> <p>"I got health care training because for most of any health care career, you'll need training. I gained three years experience in health care administration, and found opportunities to network with health care professionals, which is very vital." CMA (Self Paced)</p>
What's needed	<p>"I feel like there should be some kind of program that bridges the gap between the two [CNA & CMA]. And that will allow for you to do both and those credits we use towards a nursing program." CMA (Live Session)</p> <p>"They need to either have scholarships, and then when you finish, offer the person the same thing you would offer an RN to sign on. You can give so many hours a year that you can use to put in that so you won't miss your pay." CMA (Live Session)</p> <p>"We need more schooling offered, because I got it through the job. But I haven't seen it any other place. So it just needs to be more outreach with the city where you live in to, you know, maybe do a program with a job that you work at, or across the hospitals throughout the DMV area." CMA (Live Session)</p> <p>"[It would be helpful] if they could take away the rotating schedule. So now, my shifts rotate. One day I may work 7am to 7pm. The next day, I may work 3pm to 11pm. Then the next day, I may work 11pm to 7am. So if I can just get a balanced schedule, I will be able to maybe go to night school." CNA/CMA/HHA (Live Session)</p>



CMA Career Aspirations

Openness to venture out to new opportunities were seen as positives. Lack of time, financial resources and certification requirements were seen as barriers.

<p>Experience/ Growth in career</p>	<p>“I would like to go back to school and pick back up on my LPN, just because I only had two years left and I would have been finished. Right now, I think the biggest thing for me would be time, only because I work so much at the hospital. I would have to find a balance between working and school. So that’s something I would want to work on, maybe the beginning of next year.” CMA/CNA/HHA (Live Session)</p>
<p>Lack of time and financial resources / Certification barriers</p>	<p>“Potential barrier may include, funding, age factor and support services.” CMA (Self Paced)</p> <p>“I work a lot and that interferes with schooling.” CMA (Screener*)</p> <p>“At one time, you could be a CMA, you could be an LPN, and you didn’t have to be certified. But the laws have changed. And a lot of people have had to go back to school to just retain their positions.” CNA/Pharm. Tech (Live Session)</p> <p>“Time factors, inadequate/ insufficient funding or substitute programs that supports further training or education, poor sabbatical structure for employees (in most cases put you at risk of losing your job).” CMA (Self Paced)</p> <p>“But if I’m going to school for a year and a half, and I’m going to have to owe you \$10,000 once I graduate, and I’m not even going to be making great money when I get out...what is the point? That is a big deterrent for a lot of people I know because it’s like, you want me to give you my check? Well, then what is the point? How am I going to support my family?” CMA (Live Session)</p>



**Licensed Practical Nurse
(LPN)**



THE TOP FOUR UNIVERSAL OPPORTUNITIES: LPN

Transform Workplace Culture

Foster mentoring relationships, networking connections and career counseling sessions, especially with those who have LPN experience. This stage of the nursing career is often when more one-on-one guidance is needed in navigating next steps.

Better Define and Communicate Pathways

Streamline bridge to RN and other advanced nursing jobs. Spotlight opportunities in behavioral health and rehabilitation services (e.g. psych nursing, recovery specialist, mental health counseling) as opportunities to gain new skills and advance along the pathway.

Enhance and Fund Training Programs

Offer LPNs on-the-job training to bridge to RNs (shadowing, shift time for clinical requirements) and to pursue other steps along the pathway such as Surgical Technician. Provide scholarships, stipends and paid PD leave.

Increase Awareness of Job Opportunities and Education

Make the LPN position more accessible by expanding their workplace settings, especially in hospitals. This is also an advancement opportunity for CNAs and CMAs who can learn from LPNs through on-the-job training.



LPN How They Got Started

Passion, interest and in-demand jobs were cited as reasons for becoming an LPN. Dissatisfaction with current position was also mentioned as a pull factor for becoming an LPN.

Life changes impact the pathway	<p>"I always wanted to be a nurse, I always wanted to be a surgical nurse. And as a teenager, I kind of lost my way. And then I had a baby at 19. And I got into community college. I transferred into a two-year nursing program. It demanded a lot of study, of course, and a lot of discipline. I wasn't very disciplined. And every semester [I thought] I'm gonna fail. So it was like a self-fulfilling prophecy. I wasn't successful. But in the third semester, I tested for the LPN because you get an opportunity to do that. So I became an LPN in my third semester. But I didn't successfully graduate from the RN program. So I proceeded to work as an LPN for over 20 years. And, you know, saying that I was going to go back [to become an RN] and never went back. And then I had more children. So it was kind of hard to work, be a mom, go to school and study. So I just worked as an LPN, because that was much more than what social services was giving me. And I actually like doing it." LPN (Live Session)</p>
Job security and financial growth	<p>"It is a job with security. You can never 'not' need the health sector, not to mention the value a person can add to society by being a part [of the health sector]." LPN (Self Paced)</p> <p>"First and foremost is the pay, because I knew that if I [became an] LPN, I would make almost 50% more than I did at the time. I would be able to widen my knowledge, to be able to learn things. It would increase my employment opportunities. It will help me be able to be employed in so many places. Then also, it means moving from one stage to another level in my career." LPN (Live Session)</p>
Dissatisfaction with previous position	<p>"[In my previous position], I really wasn't satisfied and thought about quitting. I would often talk to my superiors, people working as LPNs. I reached out to them. When it was time, I did the necessary paperwork, and just [took] the necessary exams." LPN (Live Session)</p> <p>"[Dealt with racism] from patients in that, when dealing with some white folks who would look at me in a degrading manner and some would not come out and say they wanted the white nurse, but you already know that's what they meant. It would like break my heart. I would just stand by and let them do their thing. It [gave] me the ability to actually learn a lot of people's point of view [by] standing back and watching." LPN (Live Session)</p>



LPN Support Received

Mentoring, networking and programs for professional and personal development were cited as essential for support.

Mentoring, Networking, Trainings, Seminars and Recovery Programs

Lack of time for studying / Lack of institutions that provide credit hours

“I had people that I looked up to. So, when it came to the time of getting the paperwork, [finding] a place to get my schooling, it was not odd for me because I had recommendations from people who had come to that stage. If you have mentors, it would be easier than someone who is just trying to get out on their own and without any knowledge whatsoever.” LPN (Live Session)

“I [was] given helpful seminars and training program opportunities.” LPN (Self Paced)

“Adequate networking, training and workforce programs [are helpful].” LPN (Self Paced)

“I went to the National Chief Nursing executive and I said to her, when I first got the CNA position, I said, ‘You know, I don’t have my bachelor’s degree, I have an associate’s degree but I am going back to school, and I’m committed to getting my bachelor’s.’ It was so rewarding. She was one that actually mentored me. And she said, ‘I was in your same position,’ and she said, ‘I went back to school, and I went to Western Governors University, online program, and they’re great’ and that’s what got me into Western Governors University for my BS.’ I don’t have my BSN and she’s like, ‘it’s okay, I’ve been there too.’” LPN (Live Session)

“So when I saw I had to take time to take care of my mental health, and my substance abuse and learn about recovery and triggers and things like that, and how it goes hand in hand, it was very educational. I’m telling you, people don’t know when you go into recovery, it opens up so much. And then you get involved in the 12 steps. And then it’s a continuous, lifelong process. So they helped me to know myself more in the ‘whys.’ I got a lot of answers to the why, why I do, why I did, you know?” LPN (Live Session)

“[A barrier was] finding technical institutions [to] get my credit hours, because I was required to have 75 or 80 credit hours at the time. So a place, an institution that I can actually get to, there wasn’t anyone nearby where I was working at the time, so it wasn’t easy for me. I had to shuffle and stuff like that. And also, at the time to actually be prepared, I wasn’t having enough time, then I decided to find a place and just work around it.” LPN (Live Session)



LPN Career Aspirations

Growth potential within the industry is of interest for LPNs.

Possibility of growth into other positions

"I know the health sector is rapidly advancing and our importance and virtue is increasing, so there would always be room for advancement." LPN (Self Paced)

"I can advance further in my health care career because it is very important to explore all achievable height[s] in the line of a health care career." LPN (Self Paced)

"[Next would be] becoming a registered nurse. And getting the RN certification. And that's where I see myself because obviously it's going to expand my career more and then it is going to make me closer to the patients. I'd love to really, really get that experience. Also, the salary is not really the issue because I think they get paid same thing. And it would be different, it would just be by a little amounts of pay. I think it's just because I really want to keep advancing and this, again, is a step." LPN (Live Session)

"If you can find an organization that affords you paid education time, like we do with our frontline nurses, I mean, that's the ultimate, you know. Because what happens is, if they go to a daytime program with class on Tuesday and Thursday, we will pay them education time. And then our unions backfill their job paying somebody else to do their job while they're in school." LPN (Live Session)

"I still want to be an RN... so,, you know, even though my clinicals would just be 12 weeks, and then I could specialize in psych nursing or some other kind of nursing. So yes, I would, I would love to be able to redeem that, and even to better become an RN." LPN (Live Session)



**Pharmacy Technician
(Pharm. Tech)**



THE TOP FOUR UNIVERSAL OPPORTUNITIES: Pharm. Tech

Transform Workplace Culture

Increased hiring of Pharm. Techs would improve workload balance as they are in demand and overworked. Offer bonuses to incentivize Pharm. Techs and those considering pharmacy, particularly those already in a health-related profession.

Better Define and Communicate Pathways

Showcase benefits of becoming a Pharmacist while increasing awareness of job opportunities for Pharm. Techs who want to explore other options in pharmacy and beyond (e.g. pharmacy liaison, health tech).

Enhance and Fund Training Programs

On-the-job training and mentoring relationships between Pharm. Techs and Pharmacists could upskill Pharm. Techs while nurturing their interest in becoming Pharmacists or pursuing other jobs in pharmacy. Provide scholarships, stipends and paid PD leave.

Increase Awareness of Job Opportunities and Education

Increase awareness of Pharm. Tech work settings (e.g. retail, hospital). Spotlight how the position could appeal to those who prefer less interaction than a patient care setting, while also appealing to those who may be more outgoing (hospital pharmacy setting requires less social interaction than retail pharmacy setting).



Pharm. Tech How They Got Started

Personal family and friend connections as well as vested interest in the pharmacy tech field were cited as reasons for starting this career.

Family / Friend Connection	<p>“My brother was a pharmacy tech before I went to pharmacy tech school. He encouraged me to go to pharmacy tech school.” Pharm. Tech (Live Session)</p> <p>“I have a friend that told me about the pharmacy. I always need to be changing and learn[ing] something else so I was curious about that and that's why I applied.” Pharm. Tech (Live Session)</p> <p>“A lot of my family members are actually pharmacists so that kind of persuaded me to enter the pharmacy field.” Pharm. Tech (Live Session)</p>
Passion, interest, feeling valued	<p>“I would recommend a job in health care because it certainly is a field that can accommodate as many professionals as possible so long as one is qualified to work in health care.” Pharm. Tech (Self Paced)</p> <p>“You are valued by the pharmacist, because the pharmacist relies on everything that you do. They're there to look at what the medication is to make sure you're not giving the wrong medication. But you're basically running the pharmacy. The pharmacist does anything that requires the DEA, inside of the vault, you know, inside of the safe. We don't ever access that. But yeah, you're very valued, because the success of the pharmacy depends on how successful you are in your role.” CNA/Pharm. Tech (Live Session)</p>



Pharm. Tech How They Got Started

A desire for exploration and growth were cited as reasons for starting a career in pharmacy. However, transferable experience is a barrier.

Process

“So that first job, it was a wonderful experience that I had, it was my first step going into the health care field. And I learned a lot from the retail pharmacy. It’s a really, really stressful job. It gets very stressful when you get busy because we have a lot of patients waiting for pick up [and] drop off. The store has tried [but] it gets really busy. I learned a lot and it was a very valuable experience that I had [at] CVS.” Pharm. Tech (Live Session)

“CVS gave me some classes and they check my background. And then they see everything is done and they don’t see anything weird, I can start the job. I have to pay the classes, they gave me a form that I have to do [for] the Department of Health. Requirements are different per permit.” Pharm. Tech (Live Session)

“I started at Boston Medical Center in Massachusetts. It was challenging. It was very, like fast paced. Luckily, I’ve never worked in a CVS, which is a little bit more crazy. So the hospital setting was a little bit slower, even though it felt very crazy. So that was good. I had a good strong team, I guess. But it did take like, several months before I felt comfortable and ready to face patients alone. I took the national licensure exam. I was able to pass on the first try, I think, because I have the help of pharmacist family members. Then you have to get licensed depending on where you are. I’m licensed in Massachusetts, and now I’m licensed here in DC. So you take that test. There’s some clinical parts, but it’s not really clinical. It’s more like operational, as far as pharmacy is concerned. So once you’re licensed, you’re able to apply to pharmacy programs. They’re doing a trainee program here [at hospital]. And I think that’s because of the lack of techs. So that doesn’t require licensure right away. But I think it takes a few months to accumulate your working hours, and then I believe they help you set up the test. I didn’t go that path so I’m not too sure about that one.” Pharm. Tech (Live Session)

Transferable workforce experience and licensure

“If I didn’t have any experience with a cashier, I would need more training. You still need a training, but every company works with different protocols. So I just need a little bit [of] training because I had experience working with a cashier.” Pharm. Tech (Live Session)

“I think the most challenging part [in transferring licensure from Massachusetts to DC] was, the board in DC is very slow. So just making sure that everything transferred over was the most frustrating part and just kind of waiting. As far as maybe staying in health care, what are some other opportunities? It’s difficult though, for pharmacy. I don’t know how transferable that is to nursing or something else. So that would probably be challenging, I guess. I don’t know how that would look.” Pharm. Tech (Live Session)



Pharm. Tech Support Received

Managerial involvement was cited as a main source of support for advancement within the Pharm. Tech industry as well as training opportunities that better inform the individual on the intricacies associated with the field.

Need for managerial support and incentives

"I was lucky because after one month, [in comparison to] a lot of people that working there for one year, I was sending messages to the manager (the person who deals with the patients) and I was [pushed] to have the license because I cannot work without the license and she helped me." Pharm. Tech (Live Session)

"My manager was really nice and the coworker[s] were wonderful. There was always teamwork, so they helped me with whatever help I needed to [move to] any new position. So they were very good." Pharm. Tech (Live Session)

"As far as like the technician role, I don't think there's overwhelming support. Some people can just go to work, do their eight or whatever many hours and leave and that's fine, and that's kind of what I see as a technician role. I think also, again, talking about the demand and the lack of staff, it's very difficult for managers right now, and oftentimes, they have to jump in as well and help with the workflow. So I don't think it's necessarily like a family or camaraderie, being a technician." Pharm. Tech (Live Session)

"Creating more incentives [could help with hiring and retention], because I know in Boston, if you were to work extra X number of hours, you would get, like X number of dollars on top of what you're making. So I think that would actually incentivize people pretty well." Pharm. Tech (Live Session)

Past and future trainings

"A program can be like, what are the right things that you have to do when you work in a pharmacy, the math that I need, the [basics] of medicine? If you do something wrong, you receive tools [to help you]. A lot of technicians that work with me, they don't even know what they're doing or what they're supposed to do. You have to know where you are and where you work." Pharm. Tech (Live Session)

"[Hospital] does have a mentorship program in place. I don't know if it's necessarily helpful for career building. I think it's more so support and then if you need advice, or you don't know how to do something, then there's someone more seasoned that can help, whether that be a more tenured tech, or pharmacists. As far as career development, I wouldn't say there's much support there truthfully. So it's been more the support to help you do the job that you're doing now." Pharm. Tech (Live Session)



Pharm. Tech Career Aspirations

Lack of time and guaranteed hours within retail pharmacy positions were cited as deterrents for pharmacy technicians. However, openness to new career opportunities was mentioned as a positive associated with this position.

<p>Lack of time for advancement (potential barrier)</p>	<p>“[I’ve completed] some college, I already spoke to them that I cannot be there late but they don’t have enough people. [I told them I have] to continue my education, I cannot be like, ‘Oh, [I] have to stay longer because they don’t have enough people to sometimes close.’ I cannot be like, ‘Oh, I’m not going to study because I have to continue working.’ I mean, you know, if the jobs are like this, if you don’t want to work, they can find someone else.” Pharm. Tech (Live Session)</p> <p>“I would [need to] set out time to go back to the learning process.” Pharm. Tech (Self Paced)</p>
<p>Lack of guaranteed hours in retail</p>	<p>“So I got a permanent store job in a different company with a pharmacy. I worked with them and for the season and [once it was] over, they told me [my] hours were cut. I applied to the hospital pharmacy, and I got accepted, and I was full time there. So since then, I’ve been in the hospital and working in the hospital. I love it. I enjoy it every single day.” Pharm. Tech (Live Session)</p>
<p>Openness to new career opportunities within medical field, other fields</p>	<p>“My heart is not committed to any particular thing. I’m very, like, open to trying new things. I don’t know [if I’d want to become a pharmacist] because it’s very saturated. Like, just from family experience, I can tell...whether that be retail or hospital. So I don’t think I would do pharmacy school. I was actually thinking about moving into tech, like software.” Pharm. Tech (Live Session)</p> <p>“At [hospital], they’re recruiting [employees] in the cafeteria, who don’t necessarily interact with pharmacy at all.” Pharm. Tech (Live Session)</p>



Home Health Aide (HHA)



THE TOP FOUR UNIVERSAL OPPORTUNITIES: HHA

Transform Workplace Culture

Provide advancement opportunities within home health settings (e.g. private homes, nursing homes) for those who enjoy their workplace but want financial growth. This could also be an opportunity for CNAs and CMAs in other settings who are seeking better workplace culture.

Better Define and Communicate Pathways

Help HHAs connect relevant experience of helping people to pathway options. HHAs often have wide-ranging career experience (e.g. nursing homes, security, retail, beauty, food services, etc.) and need support finding their fit in a health-related career. Offer a bridge to phlebotomy/technologist pathway for those who may not be interested in nursing.

Enhance and Fund Training Programs

Give HHAs access to technology and equipment, similar to others who have those resources readily available in other settings (e.g. hospitals). Offer career counseling to help HHAs navigate next steps across multiple pathways. Provide scholarships, stipends and paid PD leave.

Increase Awareness of Job Opportunities and Education

Spotlight diverse jobs one can have across multiple pathways by starting as an HHA. This includes paths leading to phlebotomy, health care administration, technologists and technicians (e.g. radiation oncology, medical/clinical lab) or even pharmacist.



HHA How They Got Started

Connections through school, and passion for health care career were cited as reasons for starting a HHA career.

Passion for health care, helping people	<p>“I worked a CNA job and that was no different from the first job, short-lived as well. And that’s when I got into thinking, well, maybe, you know, I could do home health because I would be able to focus on the one person versus a whole unit. So I started doing that and I love home health.” CNA/HHA (Live Session)</p> <p>“I was at a point in my life that I wasn’t sure what I wanted to do. I just wanted to help people. I went to school for early childhood education and child psychology, then community college. Then I did hair, still working with people, listening to people’s problems. I was a therapist pretty much. And I had that, you know, psychology underneath me. And then from doing hair, I did retail, still working with people. And then I went to home health aide in assisted living. Everything I have done career-wise was always working with people and never was by myself, like, you know, a work-at-hometype situation.” HHA (Live Session)</p> <p>“I enjoy helping and assisting individuals become better versions of themselves.” HHA (Screener*)</p>
Apprenticeships / Connections through school	<p>“This lady had her own private health care agency with about five patients in assisted living. And every morning, I would check their vitals, administer medication, take them on trips, chaperone with them, go to the doctor’s visits, going to the zoo and stuff like that. That was fun. So I was like an apprentice working underneath her. So actually, [I learned about the job because] I went to school with the woman’s husband. [He said] she was looking for someone to actually live in [the facility], so I lived there and helped her out. My first job [before that] was working in a nursing home as an activities aide. So, I was used to being around senior citizens. So I told him that was the only experience I had. And he said, well, just call her and she’ll show you what you need to do. It’s nothing strenuous, you know? So she did all the paperwork and everything. And she showed me, hands on, what to do. That was her practice.” HHA (Live Session)</p>



HHA Support Received

Support within the workplace has helped create a positive environment for growth. Lack of access to technology/medical equipment and childcare are barriers.

What's useful

"I realized the head of our department noticed how stress we were and organized a stress relieving program for us in the department. We worked together and every day, we tend to balance ourselves mentally." HHA (Self Paced)

"Communication skills are very important in my job area. You also need to master the emotional balance skill." HHA (Self Paced)

"I feel supported all the time when the nurses or other members on the team give me compliments on good work." HHA (Self Paced)

"As a Home Health Aide, the job took me throughout DC. Different homes. Different people. Different situations and circumstances." HHA (Self Paced)

"They gave us a smart chip card, to be able to travel back and forth to our externship. So we will be able to get to work. You know, DC is really hard to park if you do drive." HHA (Live Session)

What's needed

"We have technology taking charge in the health sectors so [for] advancement, we need to involve ourselves with the required equipment and machines that makes the job easier. Most times, we don't get access to this equipment and it's a barrier to growth." HHA (Self Paced)

"Being able to work around my kids' schedule is always the biggest problem. Because other than that, I don't see anything [getting in the way of] being able to work at my fullest potential." CNA/HHA (Live Session)



HHA Career Aspirations

More awareness for home health opportunities and financial support is needed, especially through government.

Career opportunities	<p>"I feel if the government really can make the efforts, we can push the health care system forward." CNA/CMA/HHA (Self Paced)</p> <p>"DC DOES is the most helpful assistance I have received in my health care career. They have a lot of resources on health care jobs." HHA (Self Paced)</p>
Lack of financial support	<p>"I'm looking for grants or scholarships that can support me as far as being financially able to go to these schools. That's the only barrier I have, is the financial part." HHA (Live Session)</p> <p>"I couldn't get enough funding, and was laid off, because of the company's lack of financial abilities." HHA (Screener*)</p>
Openness to new career opportunities, fields	<p>On transitioning from CNA to HHA: "So CNA is for the facilities now. And home health is just what it is. It's home health. So I had to do a bridge program where I focus on the skills that you have to do while being at someone's home. And like lots of refresher course pretty much. And then I had to go and take the test. For home health, it was multiple choice for me because I already had my CNA. Now I'm in class to become a CMA. My [ultimate] job would be EMT. I just want to know exactly where I fit in the field and the more experience with certain things, the better. So when I'm put in different scenarios, I'm able to handle it efficiently." CNA/HHA (Live Session)</p> <p>"I'm trying to seek out like schools and different programs that I can try and get that process up and running because I want to do it. So right now I'm contracting [in security]. But that's not something that I want to be my career. You know, it's just something I'm doing to like, get back into school again. So, I want to take a spring or summer course, and take medical billing and coding. And that's where I want to be." HHA (Live Session)</p>



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