



Case Study

Creating Pathways to Health Careers in a Rural California County

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Report by

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Executive Summary

Access to healthcare is one of the most critical issues in Del Norte and Tribal Lands (DNATL) and, like other rural areas, it is impacted by the lack of a qualified healthcare workforce. Many organizations are forced to utilize temporary help from outside the area for their staffing needs. Often, temporary employees, commonly known as locums, come from outside the community and are not familiar with the cultural norms of communities which can lead to inequities in care. The Department of Health & Human Services, Sutter Coast Hospital, and Open Door are among the leading employers in the region; however, healthcare remains chronically understaffed.

Despite the hard work and funding invested in hiring healthcare providers, DNATL has struggled to retain a qualified health workforce. Nurses, doctors, and other health professionals recruited from outside the community often don't stay long-term in rural communities like DNATL. Recruitment strategies like offering loan repayment have had some success in the short term, but are less impactful towards long-term retention of the healthcare workforce. DNATL's isolated location and high transportation cost to outside areas makes it difficult for people to access resources and services not available within the county itself, including almost all specialized physical and mental health care services. These circumstances not only impact the access to quality care, but also result in limited opportunities for pursuing an education for a health career locally.

This exploratory case study reflects back on the ten years of the Building Healthy Communities Initiative (BHC), specifically work related to health career pathways, and examines how policy makers and grant funders can better support rural and remote communities to plan and implement healthcare and educational systems change.

The community-driven campaign under study was the Health Career Pathways development work in DNATL, which was responsible for the first wave of a community-wide effort to grow their own local health career workforce and provide career advancement opportunities. Key informant interviews were conducted during 2019 and 2020. The interviews asked participants to reflect on their experience and discuss the lessons they learned. In addition to interviewing BHC initiative members and partners, The California Center for Rural Policy (CCRP) collected and analyzed various materials produced by the BHC DNATL initiative.

The most significant findings from this research suggest the following:

01

The health industry was siloed, going against their interest in providing successful careers and quality care to residents.

02

The round table offered a space to build relationships among people who had never met or were unable to get meetings with each other.

03

The collaboration between healthcare, education and workforce development was crucial for creating sustainable educational health career pathways for youth.



Background

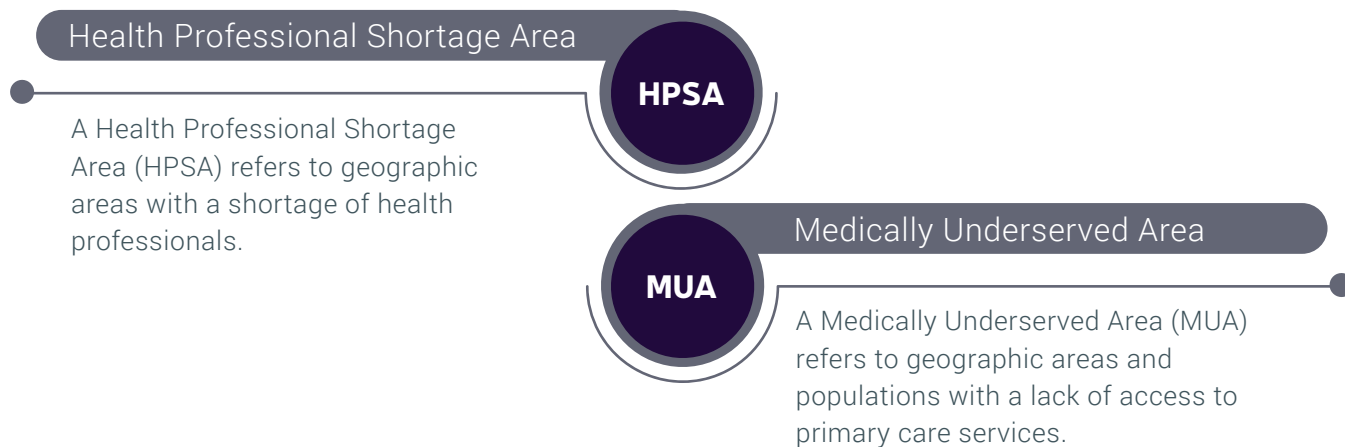
The California Endowment launched 21st Century Pathways to Health Careers in 2013 to expand the state's health systems' capacity following the Affordable Care Act. In the years following the Affordable Care Act of 2010, millions of previously uninsured Californians gained healthcare coverage and began using health services at unprecedented rates. While some health systems were able to accommodate the influx of new healthcare consumers, many regions contended with existing healthcare professional shortages.

The career pathway strategy focused on developing programs and systems that prepare youth for careers in healthcare and sought to engage K-12 students, students seeking a post-secondary education, and entry-level health workers for health careers in underserved communities (Access Report

Build a Diverse Health Workforce Campaign). These efforts were designed to increase access to high-quality, cost-effective care for the growing number of insured Californians. Varying combinations of these strategies were implemented across the 14 Building Healthy Communities (BHC) sites.

In the beginning BHC, the initiative staff set a goal to grow their own health workforce from within by building and/or connecting to more local education and employment opportunities within healthcare. The Health Career Pathways Design Team first convened in 2015 to strategize and collaborate on building those educational and employment opportunities. Findings from this report will highlight the successes and challenges of growing a health workforce in a rural community such as DNATL.

Figure 1: What is the difference between MUAs and HPSAs?



Source: Championline.org

The lack of healthcare providers is a persistent issue affecting rural healthcare systems. Health providers include a number of job categories. Physicians, nurse practitioners, nurses, physician assistants,

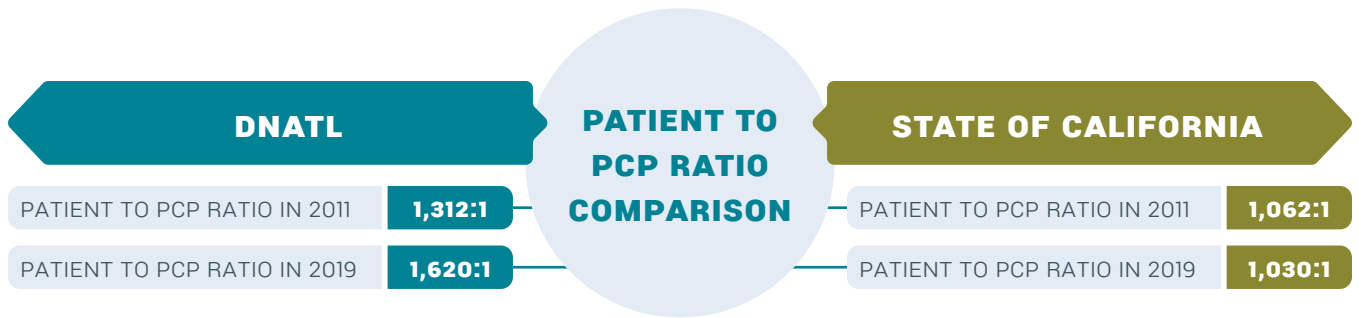
dentists, mental health professionals, and many others all play a fundamental role in maintaining the health and well-being of their community.



Health provider shortages are more profound in rural communities and at the same time, the adverse health impacts from an inadequate health workforce is exacerbated in rural communities. Rural areas with higher rates of poverty, low-income households, addiction and chronic illnesses tend to suffer the

most from a lower supply of health providers. In a rural community, a shortage of primary care physicians (PCP) means that current facilities are understaffed and many patients have to travel far to receive the care they need or forgo care completely.

Figure 2



Source: www.countyhealthrankings.org

What does the problem look like in DNATL?

DNATL is both a health professional shortage area (HPSA) and a medically underserved area (MUA). Despite the hard work and funding towards hiring health providers, DNATL has struggled to retain a qualified workforce because nurses, doctors, and other health professionals recruited from outside the community often don't stay long-term in rural communities like DNATL. Recruitment strategies like offering loan repayment have had some success in the short term but are less impactful at creating a long-term retention rate.

Figure 3: Common Reasons Why Recruited Health Professionals Leave Rural Areas:



Source: *Rural Health Information Hub*



In 2005, Del Norte County lost a significant fraction of its physician workforce (CCRP, 2007). While the reasons for leaving vary, they have elements commonly experienced in rural communities. Figure 3 presents common reasons why recruited health professionals leave rural areas. Since 2005, there has not been a stable increase of PCP in DNATL. These events produce serious access difficulties for patients.

In 2006, CCRP conducted a rural health information survey among DNATL residents (Access Report Here). The purpose of the [Rural Health Information Survey](#) was to gather data from DNATL residents in order to understand barriers in accessing health care. About 27.3% out of 471 residents reported they were not able to get needed health care in the year prior to the survey. The main barriers reported were a lack of healthcare providers and a lack of medical insurance.

The rate of low-income respondents not able to get needed health care was disproportionately higher than residents that are not living in poverty. About 47.2% of the low-income respondents reported they were not able to get needed health care in the year prior to the survey. About 44% reported regularly leaving the county for health services.

One of the primary issues in HPSAs and MUAs is that emergency rooms end up serving as a patient's primary care provider. According to the Center of Disease Control (CDC), about 20% of adults in the U.S visit the ER at least once a year. From 2011 to 2014, the CDC conducted a nationwide interview survey study on emergency room utilization in the United States.

From January through June 2011, among those adults whose last hospital visit in the past 12 months did not result in hospital admission, about 80% (79.7%) of adults visited the ER due to lack of access to other providers.

The overall nationwide study revealed that though the majority (77%) of adults who visited the ER had serious medical issues, about 19% overall visited the emergency room due to a lack of access to other providers. In addition, uninsured adults were more likely to visit the emergency room due to a lack of access to other providers (Gindi, R & et al., 2012).

What Does it Mean to Grow Your Own Health Workforce?

In 2016, the Building Healthy Communities initiative decided to pivot their focus on recruiting/retaining healthcare professionals to a grow-your-own health workforce campaign. Grow-your-own campaigns can help address the shortage of healthcare workers in rural communities. They focus on encouraging youth to consider choosing healthcare careers, cultivating their interest, and helping them develop professional skills that they can utilize in their communities. This approach is based on the idea that health professionals are more likely to stay and work in the community they were raised in.

Grow-your-own health workforce campaigns do not focus on providing healthcare workers who will enter the labor force immediately. Rather, it is an intergenerational, long-term strategy that guides youth and adults seeking to advance their careers through an education to health workforce pathway. Grow-your-own health workforce campaigns enable rural communities to address their future long-term healthcare workforce needs.

Growing your own health workforce in a rural community is not simple. Options for education for various health professions are limited in rural areas like DNATL. The following are common barriers rural community residents experience while seeking a career in healthcare.

- ▶ Rural secondary schools' students may have fewer opportunities to receive the required math and science courses needed to pursue health careers
- ▶ In rural areas, there are fewer opportunities for career advancement and soft skills training
- ▶ Access to training and education programs may be limited in rural areas for people who want to pursue careers in healthcare
- ▶ Medical professions that require longer and more expensive training can be less affordable for rural students.



Methods

This exploratory case study applies a retrospective qualitative methodology and an archival analysis to describe the effectiveness of a community driven campaign and examine how policy makers and grant funders can better support remote and rural communities to plan and implement changes in health career pathways.

The community-driven campaign under study is the Health Career Pathways systems work in DNATL, which was responsible for the first wave of a community-wide effort to grow their own local health career workforce and provide career advancement opportunities.

Since 2010, CCRP has been collaborating with the BHC DNATL initiative by conducting evaluations and

supporting community-led research projects. During the year of 2020, CCRP reviewed and analyzed 10 years' worth of qualitative and quantitative data collected from BHC DNATL participants, community members and CCRP researchers.

In addition to an archival analysis, CCRP also conducted key informant interviews with former participants of the BHC DNATL initiative. Key informant interviews were conducted from 2019 to 2021. CCRP conducted key informant interviews after the ten-year period to allow participants to reflect on the past ten years, their experiences and the lessons they learned.



Findings

Finding 1

Outside facilitation and support to convene the Health Career Pathways Design Team offered space to build relationships and work together to solve the many challenges facing healthcare in the community, and to break down silos that previously existed.

Finding 2

Although community partners were aware of recruitment and retention issues among healthcare providers, Health Career Pathways Design Team members recognized that continuously recruiting health workers from outside the county cannot be the only solution. This realization and acceptance that there was a need for a new strategy was key in moving forward.

Finding 3

There are health-related jobs available, but not enough training or certification opportunities to qualify residents for the vacant positions.

Finding 4

Building educational pathways to local health career jobs is fundamental in growing a local workforce.

Finding 5

The collaboration between healthcare, education and workforce development was crucial to create sustainable educational health career pathways for youth.

Finding 6

Youth need to be encouraged, inspired, supported and reminded about healthcare careers as a pathway for their future.

Finding 7

The California Endowment's investment in creating Health Career Pathways in DNATL led to additional funding from other agencies.



Discussion

Finding

1

Outside facilitation and support to convene the Health Career Pathways Design Team offered space to build relationships and work together to solve the many challenges facing healthcare in the community, and to break down silos that previously existed.

When the BHC initiative began, all of the health entities in DNATL were working together with a focus on recruiting and retaining healthcare professionals in Del Norte County. Strategies for retaining professionals who came to the area included organizing golf tournaments to raise money for a loan repayment program for healthcare professionals who chose to stay in the area, and delivering birthday cakes to new doctors to the community. These were part of a community-based effort that included healthcare agencies and the Chamber of Commerce.

But in 2011, the group fell apart due to changes in delivery of health care at the local hospital and the Del Norte healthcare network became fragmented. There was animosity between various doctors and agencies, and people stopped talking to each other and the

efforts at recruitment and retention fell to individual agencies.

The Health Career Pathways Design Team was first convened in 2015 by the initial lead agency, Rural Human Services (RHS). A diverse group of DNATL agencies were represented on the Design Team: Open Door Community Health Centers, Sutter Coast Hospital, United Indian Health Services, Department of Health & Human Services, College of the Redwoods, California Center for Rural Policy (CCRP), Del Norte Workforce Center, Del Norte Unified School District and the Healthcare District of Del Norte County.

In 2016, The California Endowment (TCE) provided funding to Rural Human Services (RHS) and CCRP to expand support for the Health Career Pathways work. The funding from TCE was seed money to develop the capacity, the trust and the partnerships needed to work together as a community to solve some of the challenges facing healthcare. The rift in the healthcare community still existed at that time, but everyone agreed to come together with the facilitation support from BHC DNATL to work on solving the healthcare provider shortage together.

During the Spring of 2017 RHS, lead agency for the Health Career Pathways Campaign, had to withdraw from the BHC initiative due to a series of events and significant organizational changes. At that time, the grant funding and responsibilities were transferred to CCRP to continue the work which is still ongoing.



Self-isolation goes against their interest in improving the well-being of their community. - Healthcare Provider

The remaining healthcare system was left to exist around the edges of the County's biggest private corporation. - Healthcare Provider





Finding

2

Although community partners were aware of recruitment and retention issues among healthcare providers, Health Career Pathways Design Team members recognized that continuously recruiting health workers from outside the county cannot be the only solution. This realization and acceptance that there was a need for a new strategy was key in moving forward.

Del Norte County has been designated a Health Professional Shortage Areas (HPSAs) by the Health Resources and Services Administration (HRSA) for many years. HPSAs are defined by the HRSA as having shortages of primary medical care, dental or mental health providers and may be defined by geographic location (a county or service area), population (e.g. low income or Medicaid eligible), or facilities (e.g. federally qualified health center, rural health centers, or other state or federal prisons).

With the chronic shortage of healthcare professionals, and the lack of success from past efforts around retention in particular, the Health Career Pathways Design Team realized that

continually recruiting from outside the area was not the only solution to the challenges they faced.

To address this, in 2016 members of the Health Career Pathways BHC Campaign conducted one-on-one empathy interviews with employers, educators, health providers and other community members within the DNATL healthcare system to better understand the needs and issues the community faced.

Based on the findings of the empathy interviews, the Health Pathways Design Team chose to take a long view and focus on a “grow your own” workforce campaign. At this point, partners also agreed to sign onto a proclamation showing their support of the initiative. Partners also agreed to support school outreach efforts in the following ways:

01

Providing guest speakers for classroom presentations

02

Offering work-based learning opportunities

03

By providing workforce development policies and strategies to enhance the skills of current healthcare employees, including educational opportunities and moveup strategies, thereby allowing existing employees to advance, while making room for entry level positions.

“

And we could not recruit and retain a qualified workforce. Like there was no way that bringing people from outside the area was ever going to get us there despite really an effort... we had to take the long game and start really by recruiting our own - Healthcare Administrator

”



Finding

3

There are health-related jobs available, but not enough training or certification opportunities to qualify residents for the vacant positions.

Findings from the 2016 empathy interviews emphasized another challenge in the Del Norte healthcare community which is the lack of a qualified workforce in terms of healthcare training and certification. Employers didn't have enough qualified staff to fill their vacant positions, or in some cases health professionals weren't working at the top of their licenses as they didn't have enough staff support under them. Though exact vacancy rates were not publicly available from each organization, interviews with healthcare

administrators revealed that in 2010 the vacancy rate at the only local hospital, Sutter Coast, was around 10.5% and as of 2016 vacancy rates were still ranging between 9.5% to 11.5%. These findings highlighted the need to expand or create opportunities for training and certification in health careers locally, not just for physicians but also clinical and administrative support.

At the time the interviews were conducted, the only local certification or licensing opportunities were the Certified Nursing Assistant (CNA) program through CNA Training Center (which has since closed down) and the Licensed Vocational Nursing (LVN) program through College of the Redwoods (CR) Del Norte Campus. Though CNAs and LVNs were regularly graduating from both programs, there were no local opportunities for them to advance their careers to Registered Nurses (RN), or any other advanced health professions. The closest RN program was at the main campus of CR, which is located in the neighboring county of Humboldt (93 miles away) so it was not accessible to most of DNATL residents looking to advance their careers.



“How many people were working at the top of their license?” became an important question because people were spending a lot of time doing admin work they couldn't trust their staff to do. - Community Partner

So many LVNs are stuck in their current jobs. - Nurse/Educator

You can't go too far in nursing if you stay locally. - Nurse/Educator



The interview findings also revealed the lack of knowledge local youth had about options for future health careers as there was no focus or exposure to them in the local elementary or high schools. Youth were only aware of the most common health professions such as nurses and doctors. This revelation prompted the idea of growing a health workforce from within by exposing local youth to health careers as early in their education as possible and defining health careers as broadly as possible, to include front office, nutrition services, IT support and allied health professions such as medical laboratory scientists, respiratory therapists and pharmacy techs.



Finding

4

Building educational pathways to local health career jobs is fundamental in growing a local workforce.

Based on what was learned through the empathy interviews and research, the Health Career Pathways campaign pivoted its focus in 2016 from recruiting/retaining healthcare professionals to a grow-your-own health workforce campaign. The Health Career Pathway campaign joined forces with local educators to integrate more health-related, grade-appropriate activities into science class curriculums. As a result of these collaborative efforts, educational opportunities were developed at three different education levels: Elementary & Middle School, High School and College.

Elementary & Middle School

The DNATL elementary and middle schools have been the most challenging level of education to implement sustainable health-related curriculum in. Though there have been numerous successes over the past ten years, it is hard to maintain as new teachers aren't aware of the opportunities, or they don't have time to fit it into their required curriculum.

One of the first health career related activities created through the HCP campaign was the development of Dramatic Play Kits that included health-related toys such as play stethoscopes, thermometers, and other first aid supplies. These kits were developed for grades K-2 and available for check out through the Del Norte Unified School District. Through conversations with local educators, the HCP program leads found that many teachers were unaware of these kits and that they were not being checked out. One of the ongoing goals of the HCP team is to make more local teachers aware of these activities, in addition to distributing age-appropriate curriculum that has been developed to go along with them. Due to the current pandemic this effort has been put on hold, but the HCP staff do intend to distribute them once it's safe for young children to be back in a classroom and utilize the hands-on activities.

Another health-related activity created for elementary aged students was the "When I Grow Up" curriculum and board game. It was created by a Social Work graduate student at Cal Poly Humboldt who lives in Del Norte County, and CCRP used the BHC funding to duplicate the game and make 15 game kits to distribute to 3rd-5th grade teachers. The game format is similar to the popular detective game of *Clue*, but it incorporates all the different health organizations around DNATL and educates players about some of the common cultural medical practices used by local residents. Figure 4 below is an example of what some of the game cards look like.

Figure 4: "When I Grow Up" Board Game

WHAT?	<p>Fever</p> 	WHERE?	<p>Open Door</p> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>Doctor A professional trained to check our bodies to make sure they stay healthy, and can give us medicine when we are sick.</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>Promotora A person who speaks Spanish and teaches people how to live a healthy life.</p> </div> <div style="border: 1px solid #ccc; padding: 5px;"> <p>Pediatrician (say: pee-dee-uh-TRISH-un) A professional trained to check our bodies to make sure they stay healthy, and can give us medicine when we are sick.</p> </div>	WHAT?	<p>Chicken Pox</p> 
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The middle school students have been one of the hardest age groups to engage in health-related activities as they have some of the largest class sizes in DNATL with the most impacted curriculum and time constraints. For the first two years of the Health Career Pathways campaign, one of the teachers at the local middle school, Crescent Elk, developed a *Medical Mystery* curriculum. Students learned about a variety of health careers, and learned to take blood pressure.

When that teacher transitioned to the local high school, the teacher who took over pared the curriculum down and with funding support from BHC had *Medical Mystery Mondays*. At last report, and pre COVID-19 changes at the middle school left the one teacher with limited time and physical space to incorporate *Medical Mystery Mondays*. This project has helped prove that engaging middle school students is especially important as it helps ensure they don't lose interest in health careers before they start high school. Middle school is one age group that could benefit from further research and support to determine how the HCP can best support their students given the limited time and space available.

High School

Engagement at the high school level has been very successful as there are now two health-related pathways available at Del Norte High School (DNHS), the largest high school in the county: 1) Career Technical Education (CTE) Health Career Pathway and 2) Science Based Health Career Pathway.

The CTE Pathway at Del Norte High School now offers Health Foundations 1 and 2 to any student interested in a health career. There are no prerequisites for taking this class so it allows all students an opportunity to explore the basics of first aid, options for health careers, self care and wellness, and many other health-related topics. Students also learn critical soft skills. Empathy research with local healthcare employers indicated that soft skills were needed across the board by young people coming into the workforce.

The teacher of this class also offers a similar curriculum to students at another school in DNATL, Court and Community Day School, which allows for a more diverse group of students to engage in health career related activities. The students from Court and Community Day School are either on probation, or are in Juvenile Hall, and offering the Health Foundations class for those students represented innovative, out-of-the-box thinking on the part of the Del Norte Unified School District (DNUSD).

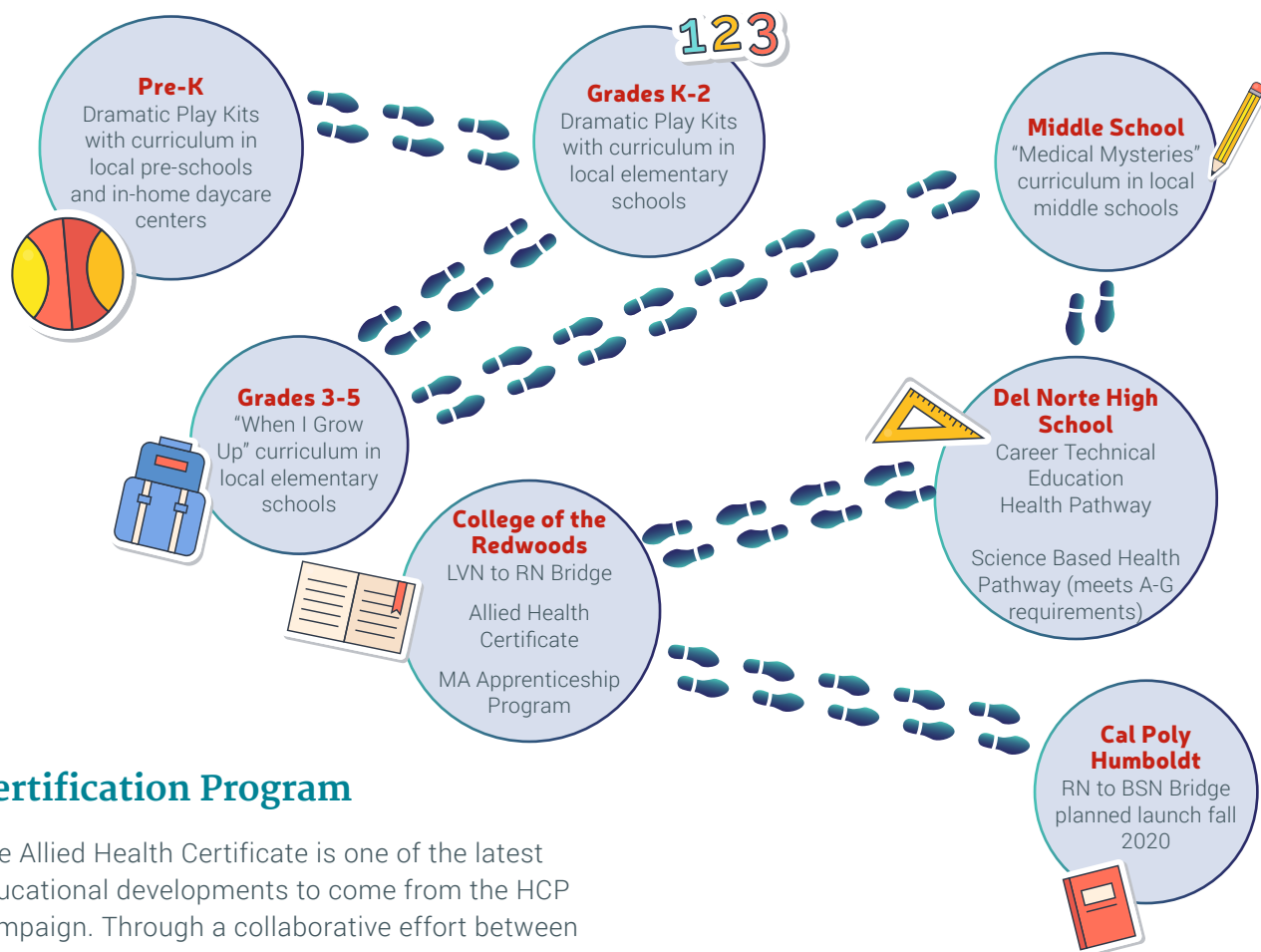
The second pathway option available through DNHS only is the science-based health career pathway which includes classes in Medical Biology, Medical Chemistry, and Anatomy/ Physiology. This pathway is being built and phased in over a 3-year period. Medical Biology was offered first in 2019-20, Medical Chemistry was introduced in 2020-21, and Anatomy and Physiology will be offered in 2021-22.

Many of the students taking this pathway are on a college level track and these classes count towards their A-G Requirements (a list of courses required by all California State University and University of California systems). The goal of these classes is to not only prepare them for college level science courses, but also to help inspire them to enroll in health-related classes in post-secondary education as well.

Teachers in both the CTE and science-based pathways are using curriculum and labs from the California Community Colleges' Health Workforce Initiative. With funding from BHC, teachers were able to purchase Health and Science Pipeline Initiative (HASPI) Kits. These HASPI lab kits enable teachers to convert their classes from regular Biology or Chemistry Medical Biology and Chemistry. The COVID-19 pandemic has impacted the teachers' ability to deliver the labs that qualify, but they are finding ways to continue in a limited capacity.



Figure 5: Educational pathway in place for students from Pre-K to University



Certification Program

The Allied Health Certificate is one of the latest educational developments to come from the HCP campaign. Through a collaborative effort between College of the Redwoods, California Community Colleges, Health Workforce Initiative, and the California Center for Rural Policy, an online allied health certificate program is being developed for people interested in working or excelling in a medical reception position. Curriculum for this program was developed through collaborative brainstorming sessions with all the local healthcare employers to determine what exact skills they are looking for in an employee. In addition to a commitment from local employers to enroll their staff in the course, the Health Workforce Initiative has also offered to fund the first cohort of students.

The certificate program will be offered through the CR Workforce & Community Education Department as two consecutive courses and is anticipated to launch within the next year. The first course in the series will be Front Office Online Course and is designed to prepare students to work in a front office position in any industry. Some of the skills it will teach include: customer service, basic computer

skills, keyboarding and 10-key, office organization, and Microsoft Office programs.

The next course in the series is *Medical Reception Online Course* which is designed specifically for students interested in working in a medical clinic, private medical provider office, hospital, or similar facility. Students will be instructed on how to cope with the often intense demands and varied stressors of a busy medical office. The course will provide information and training in medical language, terminology, and professional communication, medical law and ethics, confidentiality, medical office emergencies, safety, and infection control. It will familiarize students with basic anatomy and physiology and functions of the various human body systems. Students will learn skills unique to serving and respecting medical patients/clients, of all genders, gender identification, age, cultural, ethnic, and social background and to be aware of their particular needs.



Post-Secondary Education

Some of the biggest educational achievements of the HCP campaign were seen at the post-secondary education level as a variety of community partners supported the return of two nursing programs: Associate's Degree in Nursing (ADN) program at College of the Redwoods (CR)- Del Norte Campus (most commonly known as the RN program) and a Bachelor of Science in Nursing (BSN) program at Cal Poly Humboldt.

The first cohort for the new RN program began in Spring of 2020 with ten enrolled students. This was a huge success as at the beginning of this initiative some argued that there was no ability to create a program due to limitations on available prerequisite courses, the limited classroom space in their facilities, and the lack of healthcare partners committed to clinical rotations. In order to prove the need for a program, Sutter Coast Hospital hired a consultant to study why a rural community and designated HPSA such as Del Norte could benefit from the launch of a local nursing program. The findings proved that yes, a program would benefit the community which led to the critical partnership between Sutter Coast Hospital, College of the Redwoods, and Cal Poly Humboldt.

Through a collaboration between CR and Sutter Coast Hospital, the Del Norte CR campus made the necessary arrangements to maintain the faculty, time and space needed to offer all prerequisite courses for the RN program within a graduation timeline of 18 months. This new timeline helped expand interest in the program as students would be eligible to take the Board of Registered Nurses exam, enter the health workforce at a much quicker rate and be prepared to apply for the upcoming BSN program at Cal Poly Humboldt.

Contributions from local community partners such as BHC and other healthcare entities helped open the existing nursing lab at CR as well as build a new nursing classroom on the Sutter Hospital campus, which will accommodate both RN and BSN students. With the limitations on prerequisites and classroom space resolved, the last challenge to overcome was finding clinical rotation placements for all the incoming students. This is where a community-wide

approach became critical as it couldn't have been done with one entity alone. Healthcare organizations in both Del Norte and Humboldt joined forces and were able to map out a plan for all clinical rotations incoming students would need. The program has proven to be successful so far as the first cohort of students is expected to graduate at the end of the Spring 2021 semester.



There is no way an RN program will ever happen in Del Norte County. They can't overcome the problem of clinical rotations. It will never happen." - Educator



With this new influx of local RNs, the community became even more committed to re-establishing the RN to BSN program at HSU. The original BSN program ended in 2011 and since then the community has not trusted any attempts to rebuild the program. With support from local community partners, leaders at the largest healthcare organizations, and presidents of both local universities, educators and health employers became committed to rebuilding the program. In addition, students graduating from the CR Del Norte campus will be eligible to apply for the BSN program at HSU, helping to ensure a steady pipeline of RNs looking to bridge to BSN's. The first cohort of local students began in the Fall of 2020, and they are already accepting applications for their next cohort of students.

Starting a new program at a university requires a great deal of collaboration and tenacity, and the RN-BSN program was no exception. The RN-BSN that originally existed at HSU ended with a good deal of bitterness in the community and at the University, and few people ever expected to see the program return.



We had the “can do” people in the room. As soon as the ‘can’t do’s’ left the ‘can do’s’ figured it out. Sometimes people who fail just have to get out of the way.

- Community partner

If you let the strife break communication patterns, it’s hard to realize that the entities actually love and are investing in the community.

- Community partner



The two nursing programs mentioned above would not have been possible without donations from prominent collaborators committed to improving health access for Humboldt and Del Norte Counties. In addition to the funding from TCE, the following organizations made significant contributions to the programs: Cal Poly Humboldt, Sutter Coast Hospital, Humboldt Area Foundation, St. Joseph Health and the Slingshot Workforce Initiative.



Finding

5

The collaboration between healthcare, education and workforce development was crucial to create sustainable educational health career pathways for youth.

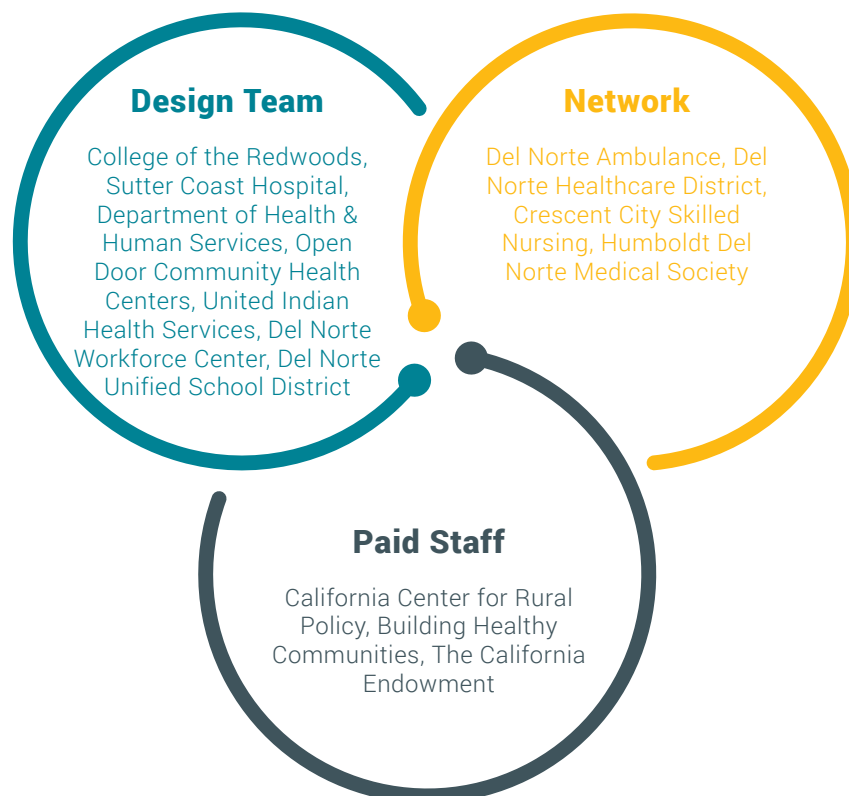
All of the initiatives highlighted above would not have been possible without the collaboration between industries. The BHC initiative leaders recognized that a vital health career pathway aligns the work of employers, educators and community partners who are invested in preparing youth for health careers. This is a community-wide problem that needs the community to come together to solve it. The Health Career Pathways campaign consists of critical organizations in Del Norte and Humboldt Counties. Figure 5 represents the organizations that make up the supportive team behind DNATL's Health Career Pathways campaign. Collaborating with community partners helped the BHC campaign to establish diverse health career pathways.

The healthcare organizations highlighted in Figure 6 below support the initiative in many different ways, but some of the biggest contributions are the experiential learning opportunities they offered local students, as well as the expertise they provided on the current environment of Del Norte healthcare system.

Local educators also played a critical role in the work as the DNUSD has been committed to finding and retaining qualified health CTE teachers since the start of this initiative. Recruiting a teacher to lead these efforts has been an ongoing challenge as there aren't many local teachers qualified to do the work. When a teacher who was recruited from outside the area didn't work out, the DNUSD turned to a grow-your-own focus and offered to support the HCP Program Coordinator in obtaining a CTE teaching credential.

In addition to hiring him to teach with a provisional CTE credential, they were innovative in creating a full-time teaching position for him that had him teaching two classes at Del Norte High School, one class at their Court and Community Day School. These educational opportunities would not have been possible without the support of local educators.

Figure 6: Supporting Partners





Finding

6

Youth need to be encouraged, inspired, supported and reminded about healthcare careers as a pathway for their future.

The Health Career Pathways Program has been a major component for the Youth Training Academy. The Youth Training Academy (YTA) Health Career Pathway was a six-week summer program for youth ages 15 to 24 in which youth were paid a stipend to participate.

YTA participants experienced hands-on health-related health and wellness activities that were meant to inspire more education in a health related field. YTA offered youth the opportunity to work closely with experts in the field, participate in trainings, field trips, hands-on activities and network with local professionals. The Health Career YTA program also provided youth the opportunity to earn their CPR and Health Insurance Portability and Accountability Act (HIPAA) certifications, which are often required for working or volunteering for local health organizations.

Employment, Education, Experience (E3)

The E3 Summer Workforce Program was another opportunity for youth to gain hands-on experience in a healthcare setting. The program was a collaboration between local business owners, the Del Norte County Office of Education, Sunset High School, Del Norte County Workforce Center and Building Healthy Community. It provided local high school juniors and seniors a week of classroom training to prepare them for interviews with local employers and potential job placements. If selected by employers, youth got four to six weeks of paid job experience. Employers paid the youth's wage, and funding from BHC covered the cost of taxes and unemployment insurance for the employer. The skills youth built varied depending on where they are placed, but all youth that were hired to work in healthcare settings received HIPAA certifications prior to employment.

Figure 7 below highlights the healthcare organizations that offered job placements between 2017-2019. Evaluation results from both youth employees and employers reveal that the program was of great benefit to the community as it allowed them to engage in their education outside of a traditional school setting. It also helped youth gain connections and job experience in the community that will be beneficial to their futures.



Photo shows youth learning CPA and practicing with dummies. Source - BHC DNATL Youth Training Academy



Figure 7: E3 Healthcare Employers

Healthcare Employer	Total Number of Youth Hired (2017-2019)
Open Door Health Centers	4
United Indian Health Services	3
Sutter Coast Hospital	5
Fine Spine Chiropractic	2

Health Careers Summer Seminar

In the summer of 2020 the Del Norte Health Career Pathways coalition partnered with the Humboldt County Office of Education to offer an online three-week summer seminar to high school students in both counties interested in pursuing a health career. A total of 16 students participated in the program and had the opportunity to engage in career and education exploration, HIPAA and other health-related certifications, hands-on at home lab activities, and presentations from health professional guest speakers. They were also paid a stipend which helped attract students to the programs and compensate them for any time they may have missed from other summer employment.

Mentorship from Health Professionals

Youth engaged with the Health Career Pathways initiatives have had ongoing opportunities to receive mentorship from local healthcare professionals. For those interested in opportunities for engagement outside of the regularly scheduled summer programs, youth can contact CCRP and be connected with a local health professional.



Finding

7

The California Endowment's investment in creating Health Career Pathways in DNATL led to additional funding from other agencies.

The TCE investment not only provided direct support for HCP related activities or programming, but also helped inspire other agencies to contribute as well. The following lists outline some of the major contributions from TCE and other agencies

TCE Contributions to the HCP Campaign:

- ▶ Seed money for HSU RN-BSN program, including equipment for a classroom at Sutter Coast Hospital
- ▶ Seed money for opening the nursing classroom at College of the Redwoods- Del Norte Campus
- ▶ Wages for youth participation in the Employment, Education, & Experience (E3) Health Career Placements
- ▶ Stipends for youth participation in the Youth Training Academy (YTA) Health Career Pathway
- ▶ Funding for local science classes to purchase Health and Science Pipeline Initiative (HASPI) interactive lab kits.

Contributions From Other Collaborative Partners:

- ▶ CA Health Workforce Initiative- Funding to cover the first cohort of students in the Allied Health Certificate program
- ▶ Sutter Coast Hospital
 - Wages for youth participation in the Employment, Education, & Experience (E3) Health Career Placements
 - Seed money for RN-BSN program
 - New nursing classroom at Sutter Coast Hospital
- ▶ Open Door- Wages for youth participation in the Employment, Education, & Experience (E3) health career placements.



Recommendations

- ✔ Hire a navigator to liaise with the schools and healthcare industry.

 - ✔ Run programs year round to keep youth interested and connected to health careers.

 - ✔ Further collaboration and support with the local middle school to engage more 6th-8th graders in HCP related activities.

 - ✔ Further research to understand the challenges with recruitment and retention, and how partners can work together to improve retention, while preserving organizational autonomy.

 - ✔ Further research to understand the educational journey from K-12, for the cohort that is now in kindergarten (2020-2021) and graduating in 2032, with an emphasis on ensuring that youth are able to take the required math and science courses needed to pursue education for health careers of their choosing.
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APPENDIX

Tangible Wins and Benefits

2012

- The Del Norte Open Door Community Health Clinic supports dental van delivery of services to all Del Norte children through the education system. It permanently funds dental van services to children and bilingual outreach/promotora workforce.
- City Council of Crescent City inclusion and adoption of “health” in official city vision statement.

2013

- The Del Norte Open Door Community Health Clinic provides prescriptions for fresh produce at farmers market.
- The City Council adopts a Health in All Policies (HiAP) Resolution that includes a multi-department review of the City’s General Plan and a City Employee Wellness Policy.

2014

- City, County, and Healthcare District adopt a joint resolution declaring unified work toward improving the local healthcare delivery system.
- City of Crescent City creates a farmer’s market fund to ensure clinic prescriptions are filled.
- Partnership Health and Sutter Coast Hospital offer resources to support building the local health career pathways.

2016

- The Del Norte Open Door Community Health Clinic opens a teen clinic on the College of the Redwoods-Del Norte campus.
- Health Career Pathways are represented in the Youth Training Academy, with the first summer Health Career Pathway option.

2017

- Del Norte Unified School District funds a Health Career teacher at Del Norte High school, an essential position in the Health Career Pathway development.

**2018**

- E3 (Education, Experience and Employment)—a partnership between DNUSD, BHC, Del Norte Workforce Center and local employers— focuses their youth employment program on the health care industry. The education-based work program was begun in 2017 and was recognized by the California Workforce Association for its innovation and lauded as a model for other communities across the state.
- Del Norte High School adds a Science Based Health Pathway to their curriculum that includes Medical Biology, Medical Chemistry, with plans to add Anatomy and Physiology to complete the pathway.
- The “When I Grow Up” curriculum was finalized and offered in after-school programs in DNUSD schools.

2019

- All major healthcare providers in the area sign onto a proclamation, stating their support for the development of health career pathways in Del Norte and commit to providing guest speakers in classrooms, work based learning opportunities for youth and career ladder/advancement strategies, and opportunities for existing staff.

2020

- A new program delivery system was developed to utilize Zoom to present an online summer Health Career Pathway program.
- CR, in partnership with Sutter Coast Hospital brings the LVN to RN bridge program back together after a 10-year absence of the program.
- Cal Poly Humboldt reopens their Bachelors of Science in Nursing (BSN) after over 15 years without a BSN program. The RN program at CR played an important role in the return of the BSN, with the assurance of a stream of students to participate in the program.