CAREER FORUM



Allied Health Scholars Program: Addressing Workforce Shortage and Talent Pipeline through Educational Programs

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ABSTRACT

Health systems play a pivotal role in ensuring the well-being of individuals and the communities they serve. The shortage of allied health professionals is a pressing challenge facing healthcare organizations, exacerbated by the COVID-19 pandemic. To provide an additional source of employees, the Baptist Health Academics Allied Health Education (AHE) department, part of a regional healthcare system in South Florida, piloted a program in partnership with a local college and clinical teams across the health system. The program intended to ameliorate critical labor shortages while providing educational opportunities to the greater South Florida community.

Launched in January of 2022, the Allied Health Scholars Program (AHSP) offered an immersive clinical and work-integrated learning opportunity to selected students in critically needed allied health disciplines at accredited academic institutions. The AHSP partnered with Miami Dade College to educate and financially support 20 scholars through work-integrated learning; 13 graduated and were hired into critical allied health professions: medical laboratory technology, surgical technology, medical assisting, and phlebotomy. This manuscript describes the educational program design, implementation, and benefits for healthcare systems.

Keywords: Interprofessional, development, training, allied health, education, educational program, workforce solutions, healthcare talent, healthcare recruitment, academic partnerships

INTRODUCTION

The healthcare industry began facing workforce shortages as the baby boomer generation began to retire, simultaneously increasing the population of aging patients requiring chronic disease management (Buerhaus et al., 2017). Between March 2020 and April 2020, an estimated 1.5 million workers nationwide were lost due to the COVID-19 pandemic (Hester et al., 2020). A significant percentage of these critical staffing shortages comprised allied health professionals (Hester et al., 2020), accounting for approximately 60% of the workforce (Office of the Assistant Secretary for Planning and Evaluation, 2022).

The top 10 allied health positions at Baptist Health faced a 20% to 55% vacancy rate. In addition, it took twice as long to hire professionals for typically critical positions. The organization responded to the urgent workforce shortage by providing sign-on bonuses and

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contracting travelers from staffing agencies to fill critical vacancies. These strategies were found to be financially unsustainable. In response, an alternative strategy was developed to mitigate the effects of the workforce shortage. The strategy delineated a plan that included interprofessional education, clinical rotations, scholarly activities, and financial support for enrolled students. Students pursuing a certification, license, or degree in a profession with critical vacancies were invited to apply for the Baptist Health Allied Health Scholars Program (AHSP). As interprofessional education improves collaboration and quality of care for healthcare professionals (Gurava & Barr, 2018), focusing on an educational response was predicted to increase recruitment of allied health professionals at Baptist Health, reduce workforce shortages, and maintain highquality care delivery by Baptist Health providers.

The approach was supported by a history of key initiatives locally and nationally that have leveraged educational opportunities to produce a talent pipeline. The Baptist Health Nurse Scholars Program, established in 2000, offers transition-to-practice guidance, financial support, classroom facilities, and clinical sites for nursing students in partnership with local academic institutions. This educational program provides resources allowing students to offset their tuition costs in return for a work commitment (Baptist Health, n.d.). In 2022, Miami Dade College partnered with Nicklaus Children's Hospital to establish an educational program recruiting nursing students and offering employment for a two-year agreement with the organization. Students began working while completing the educational program, immersing them in the pediatric nursing field (Miami Dade College, 2022).

Similar initiatives have been launched in other states, demonstrating the broad applicability of this setting. Mohawk Valley Health System launched the "Education to Employment" program, where students receive full tuition with guaranteed employment at one of their clinical locations (Stromstad, 2022). Furthermore, Ochsner Health offers free courses that lead to career opportunities within the organization (Ochsner Health, 2019). Their "MA Now" program, originally launched in New Orleans in 2013, is a sixmonth training program that features accelerated classroom, clinical, and onthe-job training. It addresses the need for Certified Clerical Medical Assistants and the need to build additional career pathways.

ALLIED HEALTH SCHOLARS PROGRAM PILOT

AHSP The was designed and launched as a pilot project in January 2022 to provide an immersive clinical and work-integrated learning experience for students in critical allied health disciplines at accredited academic institutions. Baptist Health academic, human resource (HR), and clinical departments met to discuss staffing needs. Following this, Baptist Health met with leaders of Miami Dade College, the county community college, to create a feasible and sustainable talent pipeline. Based on the assessment of Baptist Health staffing vacancies and Miami Dade College admission numbers, the program was launched with students enrolled in the following allied health professions: medical assisting, medical laboratory technology, phlebotomy, and surgical technology.

Program Structure

Information sessions were held at Miami Dade College to share program details and benefits with students. Students already admitted to the college completed an application for the AHSP through the Baptist Health Academics webpage. Candidates were required to meet the following requirements: enrollment in the selected academic programs at Miami Dade College, a minimum cumulative GPA of 3.0, and eligibility to work in the United States. After receiving applications, the AHE department verified applicants' requirements

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and coordinated student interviews with profession-specific clinical leaders and staff. Selected students signed contracts with Baptist Health acknowledging the amount of the scholarship they would receive and the terms of the work commitment they would need to fulfill postgraduation. Students hired as scholaremployees began their clinical rotations at Baptist Health and continued the didactic curriculum requirements of their academic program at Miami Dade College. Scholarships were provided for an amount commensurate with the academic program cost. Upon graduation and completion of applicable certification and licensure requirements, scholars transitioned into full-time employees within their field, where they completed clinical rotations and began their professional work commitment.

Work-integrated learning is a pedagogical practice whereby students learn through integrating experiences in academic and workplace settings (Jackson & Dean, 2022). This learning has been demonstrated to benefit the student, the academic institutions, the employer, and the community (Stirling et al., 2016). The incorporation of work-integrated learning at Baptist Health varied according to the structure of the individual academic program. For example, medical laboratory technologists completed a 4-month clinical rotation in the respective laboratory sections at the end of their program, and medical assistants completed three clinical rotations that were each three weeks long at the end of each semester.

During their work-integrated learning, scholars received a supportive curriculum facilitated by the AHE department, consisting of enrichment virtual sessions, qualitative rounding, and office hours. Enrichment sessions prepared scholars by focusing on crucial soft skills for the workplace, such as communication, time management, organization, and conflict resolution, which have been found to contribute to the student's ability to transition to their professional life in the healthcare workforce (Succi & Canovi, 2019). Qualitative rounding sessions allowed free discussion and collaborative efforts for scholars who learned from one another about their schooling, professions, and work experiences, increasing their understanding of the contribution of allied health professions to patient clinical outcomes (Clark & Hoffman, 2019). Office hours were individual sessions with scholars to discuss personal growth, concerns, or career exploration.

RESULTS

The AHSP was launched as a pilot project and conducted with one academic institution, Miami Dade College. Twenty students applied and were all accepted to the program in the following professions: four medical assistants, four medical laboratory technologists, four phlebotomists, and eight surgical technologists. Seven scholars (35%) did not complete the program due to personal reasons, academic performance, involving or reasons adherence to employment policies. Thirteen scholars (65%) completed the program and transitioned to full-time employees.

Program testimonials illustrated benefits to students, academic partners, clinical departments, the healthcare organization, and the communities it serves. Students fulfilled their clinical rotation requirements while being exposed to their future work environment and received guidance and mentoring to increase their confidence in their clinical and professional abilities. They also received financial support, aiding in the affordability of higher education.

Miami Dade College benefitted from having high-quality clinical learning environments and ready employment opportunities for their student cohorts, thus enhancing their program's attractiveness and facilitating recruitment efforts. Clinical leaders benefited by receiving a highly engaged employee with organizational knowledge gained during immersion with the clinical team. In addition, the scholars were already acclimated to the organizational environment, policies, and team culture. Lastly, hospital administration benefited from a robust infrastructure designed to attract, educate, and retain allied health professionals at a number and frequency that can be tailored based on workforce needs. This adjustable pipeline provides organizational preparedness for healthcare market changes.

DISCUSSION

The healthcare workforce shortage poses a critical challenge to the sustainability and quality of healthcare systems (Pham et al., 2011). The lack of qualified personnel, specifically among critical allied health professionals, creates a significant challenge in providing quality patient care and negatively impacts the health of the existing personnel. Establishing educational programs provides an alternative solution for addressing this issue. By expanding educational capacity, strengthening local partnerships, and focusing on supporting students during their transition to professional practice, healthcare systems can establish robust talent pipelines.

The design of the AHSP Pilot resulted from a comprehensive analysis of the success of these initiatives and key collaborations among the AHE department, Miami Dade College, the HR department, and the clinical leaders. Discussion sessions, analysis of options, and regular communication were essential for establishing an integrated mechanism to address healthcare workforce shortages that could be activated as a sustainable long -term solution.

Collaboration between the AHE and HR departments was essential in identifying critical positions with the highest vacancy rate, the overlap between talent recruitment strategies, and the ideal ratio between expert and novice (recent graduates) professionals in different clinical settings. Working together, efforts were aligned and customized for hard-to -fill and high-demand positions.

Collaboration between the AHE department and academic partners was crucial in identifying the clinical elements within their broad educational curricula relevant to Baptist Health's practices that were to be emphasized during the workintegrated learning. Therefore, students were clinically trained to meet the requirements of certification and licenses in the settings where they would excel as professionals upon graduation. The transition to practice was expedited by their previous knowledge of organizational environment, policies, and team culture. The clinical leaders provided Miami Dade College faculty with specific insight into the changing roles and responsibilities of healthcare professions, as well as emerging trends and technologies. This valuable information was incorporated into the college's programs, equipping the next generation of graduates with relevant skills and applied knowledge. The clinical leaders were also instrumental in designing recruitment and selection strategies such as information sessions and social media campaigns. Furthermore, the clinical leaders provided valuable insights into desired qualifications and competencies. They also identified suitable healthcare settings within the system where students could be placed to conduct their work-integrated learning.

Despite the positive results obtained, the pilot program had limitations and challenges. The program was restricted to students from one geographical location and allied health professions. four Expanding to additional counties and activating the program for other allied health professions will increase infrastructure and operational variability. We observed limited synchrony between academic and organizational recruitment timelines. Program graduation timelines followed the academic calendar, which did not align with organizational recruitment windows. For example, the transition to a fully functional employee

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was difficult to strategize due to a lack of alignment between student graduation dates, licensing exams, and full-time position availability. Future efforts will address these limitations and challenges with adjusted operational models, the expansion of academic partnerships, and the activation of this program for additional critically needed allied health professions.

CONCLUSION

Baptist Health designed the AHSP and established a strategic partnership that created direct pipelines for allied health professionals who fulfill critical roles as the system's backbone in various clinical settinas. The designed infrastructure is flexible and adjustable as the healthcare landscape evolves. The program provided an additional source of employees to alleviate the organization's healthcare workforce shortage, particularly for those with an intrinsically high turnover rate. The program is expanding to include additional professions and new academic partnerships, and it is adapting operational models to synchronize academic graduation and employment timelines. The cooperative effort detailed here can serve as a model for other healthcare systems, showcasing effective strategies for partnering to attract, educate, and retain a skilled healthcare workforce.

DECLARATION OF INTEREST

The authors report no conflicts of interest. The authors alone are responsible for the content and writing of the paper.

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