# DC Health Care Workforce Partnership Annual Health Care Occupations Report





# **About the Partnership**

The DC Health Care Workforce Partnership is an industry-driven, community-supported sector-based alliance, consisting of health care businesses from three subsectors — acute care; ambulatory and behavioral health; and nursing, residential and long-term care services — and core partners and network supporters. Health care employers lead the work by defining the agenda and driving it forward. Core Partners are aligned to implement strategic solutions to get residents career positions and keep the industry strong. Network Supporters are engaged in supportive services to plug in resources, create connections and coordinate activities.

# **Shared Vision**

The Shared Vision of the Partnership reflects the future state of the industry as a sector partner in the District of Columbia's workforce system. In that spirit, the vision is aligned with the District's strategic vision for its workforce development system.

An Industry-Driven Career Pathway System where:

- DC residents are ready, able and empowered through lifelong learning, sustained employment and economic security;
- Health care businesses in DC are connected to marketresponsive skilled DC residents to successfully compete; and
- Education, training, and supportive services are coordinated, cohesive, and integrated through public and private partners working together.

# **Shared Priorities**

The Shared Priorities are the areas identified by the Partnership to focus on for competitive advantage as a key industry and to realize the Shared Vision.

- Health Care as a Career Destination
- Education and Training
- Career Pathways System



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### **Preface** About the Annual Health Care Occupations Report

In the first <u>Annual Health Care Occupations Report (July 2021)</u> we analyzed the local health care industry, named the workforce issues, responded with a **Shared Vision**, **Shared Priorities** and **Shared Outcomes**, prioritized five high-demand, high-growth, entry-intermediate and middle-skill career occupations, and offered strategic recommendations. Last year's recommendations influenced the work of the Partnership and the strategic investments made by the DC Workforce Investment Council (DC WIC). The recommendations were used to mobilize action teams to address the Partnership's shared agenda and create a road map to develop a robust workforce system that attracts and supports talented residents to careers in health, ensures that there is a sufficient number of high-quality training programs to meet employer needs, and that career pathways are established to allow and support advancement through one's career.

DC WIC elevated the recommendations as they conducted their ongoing work to build a strong, responsive, and supportive workforce development system. Since the first report, DC WIC launched *Career Coach DC* which provides career coaching services that empower residents to achieve employment and education success. Additionally, approximately \$2.2 million was made available through a Request for Application to jumpstart training programs and build training capacity. As of June 16 eight grantees will provide training for up to 350 residents to create more Certified Nursing Assistants, Certified Medical Assistants, and Pharmacy Technicians which are desperately needed by health care employers in the District.

Building on this important work, we present the second *Annual Health Care Occupations Report 2022* to local workforce stakeholders — health care employers, education and training community, supportive services organizations, advocacy groups, community economic development agencies, organized labor, philanthropic entities, and government agencies — as **A Call To Action**.

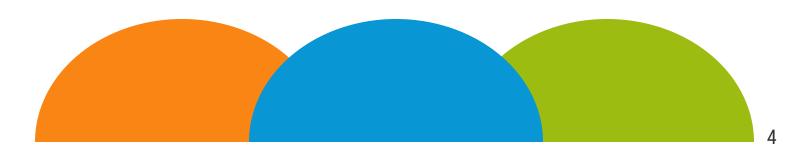
In this report, we demonstrate accountability with a year in review of the outcomes and work progress and update key indicators of the industry and workforce. This review allows us to celebrate all that was achieved since the first report but also serves a reminder of the work still to be done. This report provides a deeper dive into the strategic recommendations, and presents the structure of the **health care career pathways system** as a sector strategy within the District's workforce system.

Our work continues to be informed by primary and secondary research including the *Health Care Career Mapping Study* (Social Lens Research, March 2022), the *High-Need Health Care Occupations Scan* (Hanover, November 2021), and the collective work of the partners. We intentionally went to frontline health workers with lived experience in the five prioritized occupations to gain their perspectives on **Health Care as a Career Destination**, **Education and Training** and **Career Pathways**.

We invite you to read this report to understand the Partnership's present and future work and the value proposition of our combined voice. If you aren't already engaged, decide if there is an opportunity to collaborate with us to achieve the Shared Vision.







### **Acknowledgements**

The DC Health Care Workforce Partnership exists because the committed health care employers, Core Partners, and Network Supporters. It is because of their meaningful engagement that this work is possible.

#### **The Partners**

#### **CONVENER & INTERMEDIARY**

DCHA Program Services Company, Inc.

PUBLIC FUNDING PARTNER

DC Workforce Investment Council

#### HEALTH CARE EMPLOYERS/BUSINESSES - ACUTE CARE

The George Washington University Hospital

Children's National Hospital

BridgePoint Hospital Capitol Hill

BridgePoint Hospital National Harborside

MedStar Health

Psychiatric Institute of Washington

Howard University Hospital

Sibley Memorial Hospital

HEALTH CARE EMPLOYERS/BUSINESSES - AMBULATORY & BEHAVIORAL HEALTH

**Providence Health** 

Whitman-Walker Health

Mary's Center

McClendon Center

Unity Health Care

Kaiser Permanente

#### NURSING & LONG TERM CARE SERVICES

Ascension Living Carroll Manor Nursing & Rehabilitation Center

Volunteers of America Chesapeake

Stoddard Baptist Nursing Home

Premier Health Services, Inc.

Forest Hills of DC

#### **CORE PARTNERS**

Coalition for Nonprofit Housing & Economic Development

DC Primary Care Association

DC Health Care Association

DC Coalition on Long Term Care

AmeriHealth Caritas DC

SOME Center for Employment Training

UDC Community College DIvision of Workforce Development & Lifelong Learning

DCPS Academy of Health Sciences - Coolidge

Trinity Washington University

1199 SEIU

**Greater Washington Community Foundation** 

Office of the State Superintendent of Education

Community College Preparatory Academy

Jane Bancroft Robinson Foundation

Stoddard Baptist Home Foundation, Inc.

Academy of Hope

Briya PCS

LAYC Career Academy

DC Coalition of Disabilities Service Providers

#### **NETWORK SUPPORTERS**

Dress for Success DC

Rodham Institute Pathways for All to Health Careers

Campaign for Fair Sentencing of Youth

Department of Aging and Community Living

DC Health Care Finance

DC Appleseed Center for Law and Justice

Department of Employment Services

DC Department of Human Services, Family Rehousing and Stabilization Program

A special note of thanks to District of Columbia residents who shared their time and expertise, and spoke candidly about lived experiences navigating careers and opportunities within our health care system. Your voices continue to inform our work.

# **Program Staff & Consultants**

Program staff and consultants of the Partnership manage the daily administration activities and special projects to ensure that we are working to achieve the Shared Vision. We appreciate their backbone role in this work.

#### **Program Staff**

- Elizabeth Abrams
- Yolette Gray
- Julie Gonzalez
- Jennifer Hirt
- John Norman
- Bolutife Omoloju
- Justin Palmer
- Ruth Pollard (Consultant)

#### **Research Consultants**

- Social Lens Research
- Hanover Research

# **Executive Summary**

The good news remains that the District of Columbia's health care industry is uniquely positioned to define and pave the way to foster sustainable alignment of priorities and resources through the work of the DC Health Care Workforce Partnership (Partnership).

One year into the pandemic recovery and *Build Back Better* era, the District of Columbia is ahead of the nation in labor force participation, regaining lost jobs, and the health care and social assistance industry shows projected annual growth in jobs and employment opportunities. The challenge continues in that the pre-pandemic, socioeconomic disparities are so profound, especially for Black residents in the District, that even significant investments in workforce development have too much ground to make up. Thus, inequities persist.

As you will see in following pages, the District and the Partnership have made significant progress on implementing recommendations from the <u>first report</u>. Partnership members rolled up their sleeves to begin tackling the issues causing pain within the health care workforce and developing strategies to ensure a workforce pipeline is established. The DC WIC is investing considerable resources to build capacity in training programs for the five high need careers identified in the first report with nearly 20 residents participating in the Department of Human Services training program and the Certified Medical Assistant program at So Others Might Eat.

During the last year the Partnership and program staff conducted gap analyses of the workforce development system, informed training investments, created a system framework, and conducted more than 50 focus interviews with health professions to better understand the voice of current, past, and future health care workers. The lessons learned from the in-depth interviews contains valuable information that must inform our ongoing work.

At the cross-section of the challenge and opportunity is the work of the Partnership. With almost 50 active members, the Partnership is the engine of the health care sector's work-to-be-done in support of its **Shared Vision** and the District's strategic vision for the workforce development system. We know that the future workforce is happening now, improving job quality matters, and education and training providers must be responsive to industry and learner needs. These insights are our viewpoint and reflect our **Shared Priorities** to create an industry that is attractive and accessible to all District residents who want to be in health-related occupations; ensure that education and training is aligned to the industry and delivered in accessible ways; and develop a career pathways system to produce a skilled workforce of District residents for indemand careers.

The **Annual Health Care Occupations Report 2022** is a report of accountability and a call to action. Strategic recommendations are offered for all partners and stakeholders to consider and engage.



# Introduction

Dear Partners and Stakeholders,

We are happy to present the second Annual Health Care Occupations Report 2022.

The DC Health Care Workforce Partnership launched in 2021. Although our work began amidst the pandemic, which presented challenges, it also created opportunities for health care employers and partners to coalesce to find creative and innovate solutions to address the workforce issues confronting our community. One year into this work, we remain grateful for your support and engagement.

Dedicated to our Shared Vision, our work was driven through seven action teams mobilizing more than 30 partners and stakeholders. Our accomplishments are notable. Namely, informing the need to expand training capacity, hearing firsthand from health workers on the frontlines about workplace culture and career pathways, and enhancing sustainability of the Partnership.

Bringing these insights forward, we share where we've been, where we're going, and our plans to get there. We also introduce our **Health Care Career Pathways System** as a sector-based workforce strategy to contribute to a more unified District of Columbia workforce system. This path requires us to commit to the next level of action. It's an *"all of us"* approach, and as Ambassadors of the Partnership, we pledge our leadership.

We hope you enjoy the report and look forward to hearing from you.

Sincerely,

Juquelin D. Bowens)

Jacqueline D. Bowens District of Columbia Hospital Association



Kimberly D. Russo The George Washington University Hospital

La'Kesha McAllister Ascension Living Carroll Manor

# **First Year in Review**

### 2021 Strategic Recommendations Scorecard

As a sector partnership in the District's workforce development system, we embrace our role to inform public investments in the health care workforce. In its inaugural year, the DC Health Care Workforce Partnership published the first Annual Health Care Occupations Report (report). More than 40 partners collaborated to inform the report and endorse the strategic recommendations to the DC Workforce Investment Council.

Aligned with our Shared Vision and Shared Priorities, the strategic recommendations were as follows:



# **Prioritize**

Health Care Occupations for Investments





the Health Care Workforce Partnership



# Strengthen

Education and Training





a Career Pathways System



# Mobilize

through Advocacy and Public-Private Engagements



# DC Health Care Workforce Partnership

### 2021 Strategic Recommendations Scorecard, continued

The recommendations were further defined and as appropriate, we identified actions for Education & Training (page 11) from October 1, 2021 – September 30, 2022. As with our vision and priorities, the recommendations and actions are meant to be shared among the stakeholders of the workforce development ecosystem. Our approach is that *the work belongs to all of us*. In this spirit, the scorecard is presented to provide transparency of the collective effort to address the recommendations.

| Prioritize Health Care Occupations for Investments  | In Progress  | Not Started |
|---|--------------|-------------|
| The Certified Medical Assistant, Certified Nursing Assistant, Home Health Aide, Licensed Practical Nurse,<br>and Pharmacy Technician are among the fastest-growing and highest-volume, non-degree health care<br>professions in the District of Columbia. Each occupation also crosses the three subsectors with robust<br>employment in the following industries: 1. acute care; 2. ambulatory and behavioral health; and, 3. skilled<br>nursing, residential and long-term care services. As a result, these occupations present the most promising<br>opportunities for public and private education, training, and supportive services investments. | $\checkmark$ |             |

| Support the Health Care Workforce Partnership  | In Progress  | Not Started |
|--|--------------|-------------|
| The Partnership launched in March 2021 with funding and technical assistance support from the DC WIC.<br>In five months, the health care employers created a Shared Agenda and Action Plan in collaboration with<br>core partners and network supporters. The action plan sets forth goals and objectives of three shared<br>priorities: 1. Awareness of health care as a career destination for District residents; 2. Industry-driven<br>curriculum and training; and 3. Development of a career pathway system. Adequate funding and technical<br>assistance support to the Partnership is critical to implement the action plan. | $\checkmark$ |             |

| Career Pathways System  | In Progress  | Not Started |
|---|--------------|-------------|
| Invest in and corral other funding sources to support building a diverse, equitable and inclusive talent pipeline of District residents, specifically from Wards 5, 7, and 8. | $\checkmark$ |             |

| Advocacy and Public - Private Engagement   | In Progress  | Not Started  |
|--|--------------|--------------|
| Create learning opportunities among the Board of Nursing and Board of Pharmacy, health care employers, and education and training programs to share challenges and create solutions in support of building and sustaining talent pipeline for the prioritized health care occupations. |              | $\checkmark$ |
| Support project to design and pilot professional development funding for health care workers in the prioritized occupations to upskill or reskill to ensure equitable career pathway systems and upward mobility.  | $\checkmark$ |              |
| Champion health equity improvements as a determinant to building and sustaining DC residents in the health care talent pipeline.   | $\checkmark$ |              |

### **DC Health Care Workforce Partnership** 2021 Strategic Recommendations Scorecard, continued

| Education and Training  | Suggested Actions for FY22   | In Progress  | Not Started  |
|---|--|--------------|--------------|
| Support a focused project within the Partnership to work<br>with higher education institutions and training programs to<br>develop industry-driven curriculum for each of the<br>prioritized health care occupations.   | Require selected education and training providers to<br>collaborate with the Health Care Workforce<br>Partnership to implement one industry-driven<br>improvement to the training curriculum (for the five<br>prioritized occupations).  | $\checkmark$ |              |
| Champion funding for tuition-free training programs for DC<br>residents living in Wards 5, 7, and 8 who are accepted into a<br>training program that has adopted the industry-driven<br>curriculum for the prioritized health care occupations,<br>especially the Certified Medical Assistant (CMA), Pharmacy<br>Technician (PhT) and Licensed Practical Nurse (LPN), which<br>currently have very limited approved community-based<br>training programs in the District. | Offer start-up funding for new education and training providers in the areas of CMA, PhT and LPN.  | $\checkmark$ |              |
| Increase training capacity by:  |  |              |              |
| Strategically funding expansion of existing approved<br>training programs and adding new training programs<br>offering training in at least one of the prioritized health<br>care occupations with focused attention to training and<br>education programs for CMA, PhT and LPN.  | <ul> <li>Recruit and identify support needs to facilitate<br/>a training provider for each prioritized<br/>position.</li> <li>Support technical assistance for new<br/>education and training companies to become<br/>eligible providers in the District.</li> <li>Require education and training provider to<br/>partner with DCPS/DCPCS/educational<br/>institutions to offer a CMA, PhT or LPN<br/>program.</li> <li>Expand funding for new and existing education<br/>and training programs in the areas of CMA,<br/>PhT and LPN.</li> </ul> | ~            |              |
| Galvanizing and leveraging public funds to support<br>apprenticeship programs for the prioritized health care<br>occupations and health care employers in the three<br>subsectors.  | Require at least one eligible education and training<br>provider to establish a partnership with a health<br>care employer to support work-based learning.   | $\checkmark$ |              |
| Exploring funds for health care employers to offer experiential training within their facilities as part of the training program.   | Allocate funds to the education and training<br>provider that establishes a partnership with a health<br>care employer to support work-based training. (See<br>above linked suggested action).   | $\checkmark$ |              |
| Incentivizing existing training programs that have<br>documented success of certification pass rate and job<br>placement and retention in health care employers within<br>the targeted subsectors.  | Increase funding to education and training programs<br>with 85% or above certification pass rate to enhance<br>programs based on industry-driven<br>recommendations.   |              | $\checkmark$ |
| Funding supportive services organization as a horizontal<br>integration in workforce training programs, thereby, adding<br>training capacity for technical knowledge and skills.  | Allocate funds to supportive services organizations<br>to provide qualified wrap-around services for a<br>minimum of one year for graduates who complete<br>an approved training program, obtain licensure and<br>job placement in one of the five prioritized<br>occupations.   |              | $\checkmark$ |
| Create equitable and flexible training accessibility.<br>Sustainable models for equitable career pathways and<br>training indicate that job training should allow for flexibility<br>and should be held in communities where pathways are<br>being introduced.  | Require at least two new training providers to be in<br>Ward 5, 7, or 8 and offer hybrid learning models for<br>the CMA, PhT or LPN program.   |              | $\checkmark$ |

# **The Work Through Action Teams**

Partners and stakeholders mobilized through action teams to advance the Shared Priorities, which connected and moved the strategic recommendations forward. For six months, more than 30 stakeholders meaningfully engaged in seven teams. From this work, DCHA Program Services Company, Inc., as the convener and intermediary, commissioned a qualitative study to provide a deep understanding of health care workers in the five prioritized occupations; refreshed the quantitative data to include "health-related," high-growth, high-demand occupations; performed a gap analysis of education and training curricula, licensing and registration requirements, employer's job descriptions; and conducted a social media market analysis. The outcomes reflect the commitment that *the impact belongs to all of us*.

### 2021-2022 Impact



**30 Partners** 

engaged via seven Action Teams



# Occupations

updated high-demand, high-growth occupations





strategy developed



Training

informed DC training investments



**Gap Analysis** 

conducted to visualize needs

Pathways

50 Focus

Groups

System Framework developed

Career



4 Grant



**Sustainability** 

plan developed



\$475,000

grant funds awarded

conducted

The impact of the Partnership's first year continues to inform the present and future work. The health care industry is dynamic and evolving. Employers, education and training partners, support services providers, advocacy and community economic development organizations, philanthropic entities, government agencies, and DC residents bring unique insights that frame this second *Annual Health Care Occupations Report 2022*.

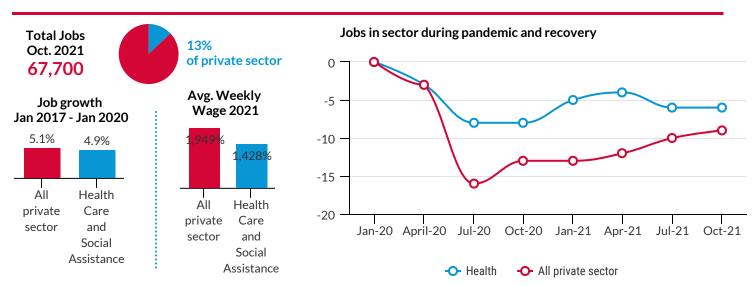
### **The District's Health Care Workforce** State of the Industry: Overview of Industry & Labor Market Information

At the heart of any industry is its workforce. The economic vitality of an industry is a talented, engaged, diverse, and inclusive workforce. Health care is no exception. According to the Bureau of Labor Statistics (BLS), the Health Care and Social Assistance industry is defined as establishments providing health care and social assistance for individuals. Companies in the industry may provide medical care, health care, or social assistance, though the commonality is labor inputs of health practitioners or social workers with the requisite expertise.

In the United States, there were 22 million workers in the health care industry, comprising 14% of all U.S. workers (US Census Bureau's 2019 American Community Survey, retrieved census.gov) — making it still one of the largest and high-growth sectors. Health care technicians and practitioners accounted for 9.8 million workers and another 5.3 million worked in health care support occupations, including nursing assistants, home health and personal care aides. Notably, one-quarter of the health care support workers were Black, and this is consistent at the local level.

In the District of Columbia, health care continues to be a high-demand, high-growth industry. From January 2017 to January 2020, industry growth was 4.9%, which was closely aligned with the private sector's 5.1% growth. During the economic downturn caused by COVID-19, the industry lost 8.6% of jobs through the spring of 2020. Most recent data indicated that as of October 2021, in comparison to the pre-pandemic level, jobs were down 6.1% or 4,400 jobs. The sector had 67,700 jobs as of October 2021, which accounted for 13% of the private sector employment. Though the average weekly wages of \$1,428 were \$500 less when compared to the overall private sector at \$1,949 (DC WIOA Unified State Plan, PY 2020-2023).

The health care industry is experiencing a period of change, fueled by demands for social justice and the global pandemic, which exacerbated health disparities that reflect long-standing structural and systemic inequities rooted in racism and discrimination. The pandemic heightened the importance of addressing these disparities, leading numerous hospitals and health care companies to commit to reducing inequalities in the workplace. However, structural racism's long-standing impact on the makeup of the health care workforce — and subsequent gendered and racialized divisions of care — are more difficult to quantify and address. Through the work of the DC Health Care Workforce Partnership, diversity, equity, and inclusion practices were identified as the key force to drive industry transformation. Increasing the diversity of the health care workforce and promoting inclusion will serve as effective strategies to address racial and ethnic health care disparities. It will be a start, and there is still much work to be done.



### Health Care and Social Assistance Jobs Overview

# The District's Health Care Workforce, continued

### **Special Populations**

There is a strong correlation between geography, race, educational attainment, and poverty in DC (WIOA State Plan). Certain demographic groups—females, Hispanics, persons with less than a high school education, persons with some college or associate's degree but no bachelor's degree, and non-citizens — have both lower labor force participation and higher unemployment rates. In-demand skills and demonstrated competencies influence employability, and low-income District residents lacking the educational attainment necessary to qualify for jobs are left behind. Unemployment rates are notably high for other sub-populations, including youth under 25 years of age, persons below poverty level income, working-age persons with a disability, working-age residents aged 25-64 without a college degree, and Blacks. Adding to this challenge is the access issues to education and training programs that prepare workers for family-sustaining, entry-intermediate or middle-skills jobs in career pathways (DC WIOA Unified State Plan, 2022).

Care work is a critical arena in which Black women are at the intersection of structural racism and sexism. Black women are overrepresented in health care at higher rates than any other group and are heavily concentrated in low-wage jobs in the long-term care sector and in hospitals. According to a recent study using data from the American Community Survey, Black women make up 6.9% of the U.S. labor force, yet 13.7% of the health care workforce — a rate of representation that is roughly double. Within the 13.7% of the health care workforce, Black women make up 23% of the long-term care workforce, 12% of hospital and 9.6% of ambulatory care workers. By comparison, White women are more evenly distributed among settings within health care, making up nearly 41% of long-term care workers, 47% of hospital workers and about 49% of ambulatory care workers (Dill & Duffy, 2022).

|                      | Women<br>(%) |       |          |       |       | Men<br>(%) |       |          |       |       |
|----------------------|--------------|-------|----------|-------|-------|------------|-------|----------|-------|-------|
| CATEGORIES           | Black        | White | Hispanic | Asian | Other | Black      | White | Hispanic | Asian | Other |
| Full Labor Force     | 6.9          | 28.3  | 8.1      | 3.1   | 1.1   | 6.1        | 31.8  | 10.1     | 3.3   | 1.2   |
| Health Care          | 13.7         | 46.2  | 10.6     | 5.1   | 1.7   | 3.4        | 13.1  | 3.1      | 2.5   | 0.5   |
| SETTINGS             |              |       |          |       |       |            |       |          |       |       |
| Hospital             | 12.1         | 47.2  | 8.6      | 6.1   | 1.5   | 3.8        | 13.8  | 3.4      | 3.0   | 0.6   |
| Ambulatory Care      | 9.6          | 48.6  | 11.8     | 4.7   | 1.7   | 2.4        | 15.1  | 3.1      | 2.7   | 0.6   |
| Long-Term Care       | 23.0         | 40.8  | 12.1     | 4.3   | 1.9   | 4.5        | 9.1   | 2.5      | 1.5   | 0.4   |
| OCCUPATIONS          |              |       |          |       |       |            |       |          |       |       |
| Physicians           | 3.2          | 22.9  | 2.6      | 9.8   | 1.0   | 2.8        | 39.4  | 4.4      | 12.5  | 1.3   |
| APs                  | 4.2          | 46.0  | 3.9      | 7.7   | 1.3   | 1.5        | 26.9  | 2.3      | 5.5   | 0.7   |
| RNs                  | 10.2         | 61.3  | 6.6      | 7.7   | 1.7   | 1.5        | 7.6   | 1.4      | 1.9   | 0.3   |
| Therapists           | 8.1          | 56.1  | 8.5      | 3.1   | 1.6   | 2.6        | 14.1  | 2.9      | 2.6   | 0.5   |
| Techs                | 9.4          | 54.6  | 9.4      | 6.3   | 1.3   | 2.6        | 9.6   | 2.8      | 3.4   | 0.6   |
| LPNs/Aides           | 24.9         | 39.8  | 16.5     | 4.7   | 1.9   | 3.4        | 4.8   | 2.4      | 1.3   | 0.4   |
| Community/Behavioral | 11.8         | 48.3  | 8.9      | 3.0   | 1.9   | 4.4        | 16.4  | 3.2      | 1.6   | 0.5   |

#### Health Care Industry and Occupational Distribution in the U.S. by Gender, Race, Ethnicity, 2019

# The District's Health Care Workforce, continued

Prioritizing investments with an eye toward positively impacting equity and inclusion can begin to break down some of the ideological constructs and structural barriers for Black women in the care arena. It's important to note that recruitment for populations of color can prove challenging because of these same historical and systemic barriers, that is, the cost of education, lack of academic preparation and admission requirements, lack of diversity in mentors, limited exposure to health careers, and poor advising (Dill & Duffy, 2022).

The Jane Bancroft Robinson Foundation's Black Women Thriving East of the River initiative called for a comprehensive landscape analysis of health-related careers for Black women living in Wards 7 and 8. DCHA Programs Services Company, Inc. and Dress for Success, Washington, DC collaborated to conduct the landscape analysis to understand the keys to an inclusive, diverse workforce development system in which Black women can thrive. Black women described a thriving work environment around four themes: one with enough time, training, and support to offer optimal care (to patients), a living wage and growth opportunities, empowerment, and respect (SLR, March 2022). In short, Black women are seeking higher job quality to support the mission of health care and their passion as health care workers.

"Thriving at work means that I am performing beyond my employer's expectations and growing in my role and career field while being paid adequately for my efforts."

### - East of the River DC Resident & Health Care Worker

The industry must reconcile a disconnect between what employees feel they give and the job quality they experience in return. Understaffing, lack of respect for [entry-intermediate and middle-skills] positions, limited-to-no career support, and low wages are job quality gaps. While Black women living East of the River are but one – albeit central – demographic in DC's diverse health care workforce, addressing these gaps will benefit all. The heart of career pathways development is the individuals who will move through the pathways. When employees and employers thrive together, the health care workforce development system will be more inclusive, empowered, successful, and sustainable.



# The District's Health Care Workforce, continued

In the District, current and future hiring trends and needs contribute to high-demand, high-growth health care occupations. In addition to the five prioritized health care occupations, the Great Reset depends on other occupations. Figure 1. provides a projection to 2026 of the top health care related occupations in the region (Hanover Report, 2021).

#### Nursing Assistants 2.620 2,151 Registered Nurses -Medical Assistants 1,278 Medical and Health Services 808 Manager Licensed Practical and Licensed 709 Vocational Nurses Dental Assistants -590 Pharmacy Technicians -481 Medical Dosimetrists, Medical 330 Records Massage Therapists -316 Nurse Practitioners 311 Health Care Support Workers, All 262 Other Master's/Doctoral Veterinary Assistants/Laboratory 258 Bachelor's Animal Assistants Health Care Social Workers -Associate's 258 Certificate Dental Hygienists -235 **High School Diploma** Physicians, All Other and 207 **Ophthalmologists** Physical Therapists -193 Note: Staffing company postings are excluded 180 Physical Therapist Assistants Phlebotomists -173 Physician Assistants -172 Speech-Language Pathologists 169

### Figure 1. Top Fields by Projected Need in 2026

The projected health care occupations indicate progressive credentialing needs from the high school diploma to graduate education. The data brings awareness to the necessity of demand-side talent pipeline programs within guided or focused career pathways. (See also Career Pathways System and Health Clusters Pathways Maps)

### **Shared Priorities**

### **Applying Lessons Learned**

Bringing together the insights from our partners—health care employers, education and training providers, supportive service organizations, advocacy and community economic development organizations, philanthropic entities, and government agencies — with the insights of our workers, three powerful messages emerged:

- **1**. The future workforce is happening right now,
- 2. Most roads are paved with job quality, and
- 3. The traditional postsecondary education and training model must be reformed to support building the 21st Century learn and earn ecosystem.

#### And there is one common denominator, we have an equity issue.



The *future workforce* is happening right now and is largely driven by workers. The World Health Organization estimated a health care workforce gap of about 14.5 million by 2030, radically changing the in-demand skills needed from today. This pre-pandemic forecast, along with the nearly one in five health care workers in the U.S. who quit jobs, gives insight into the local need to upskill and reskill to maintain employment, or new skills to become re-employed. Leading businesses understand the critical importance of reimagining work, investing in people through new skilling, reskilling, and upskilling, and creating industry value by way of a productive and adaptive workforce. The COVID-19 pandemic exacerbated disparities and inequities nationally and locally. It also ignited workers' desire to acquire new skills to prepare for the future. The health care industry must rely on its talent as the X-factor to stay competitive and grow. Health care providers embraced patient-centered care models to transform the design and delivery of health services. The premise of the patient-centered care model was centered around customers' needs. This same premise must be applied to the workforce. Health care employees in mind.



Herein is why improving job quality matters. It's a lever to redesign the workforce by bringing forward structural and systemic policies and practices that have left minority and underserved populations behind prior to the pandemic and making an explicit commitment to centrally focus on equity as we recover. The term can be deceiving in that job quality is not about whether the 'job' is good or bad. Frameworks developed by the Aspen Institute, National Fund for Workforce Solutions, and the Urban Institute point to common elements in job guality, and research further supports that job quality should be viewed along a continuum of elements. Job quality is imperative to rebuilding the workforce and sector economic vitality. It will require us to reckon the foundational racism, rewrite the social contract with health care workers (and those seeking to become health care workers), and reconcile the massive technological changes, demographic shifts, and profound inequality to better build back the city, industry, and workforce for shared prosperity (Race and The Work of the Future: Advancing Workforce Equity in the United States). It is certain that job guality must be the responsibility of the system of stakeholders, an essential goal of all stakeholders, and designed with the equity mindset. Policy changes — at the government and business levels — are key drivers to improve job quality. For businesses, the impetus ranges from protecting the business brand to improving employee engagement and productivity to simply doing good to do well. Regardless of the motivation, these efforts are important business strategies in workforce redesign and sector competitiveness.



# **Shared Priorities, continued**

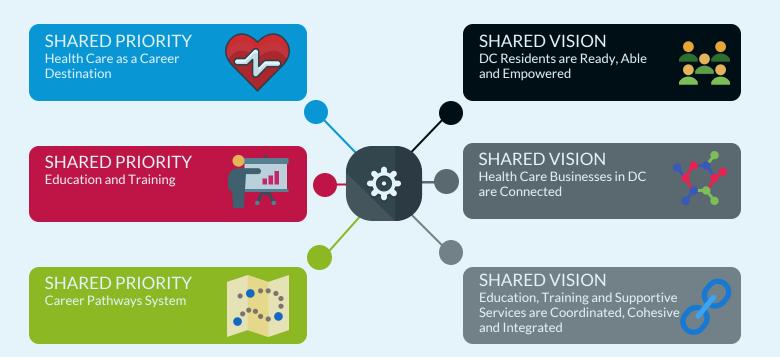


As part of the workforce development system, *higher education institutions and training* providers must continue to keep close to the ground, positioned to understand the industry, the employers, and the workers and learners. There's a glaring gap between the skills and education requirements of District residents to the skills and educational requirements needed for District jobs (WIOA State Plan). Education and training programs must incorporate market-validated elements that promote success in completion, credentials in traditional and innovative ways, and curricula aligned to rigorous career ready standards and college entry.

We are learning in a both/and environment, that is, our environment of learning holds multiple experiences at the same time. Our learnings are outputs and inputs; they are the work, and they inform the work. Through our Shared Priorities, we continue to progress to achieve our Vision – an industry-driven Health Care Career Pathways System where:

- DC residents are ready, able and empowered through lifelong learning, sustained employment and economic security;
- Health care businesses in DC are connected to market-responsive skilled DC residents to successfully compete; and,
- Education, training, and supportive services are coordinated, cohesive, and integrated through public and private partners working together.

# Shared Priorities Chared Vision



# Shared Priorities, continued

### Health Care as a Career Destination

Washington, DC has just over 760,000 jobs, yet less than one-third of those jobs are held by District residents. Becoming a destination industry for District residents means competing with public and private sector employers in dominant industries in DC and the larger region. According to the DC WIOA State Plan (2022), Education and Health Services is a "supersector" within the Health Care and Social Assistance industry. Data indicates that the industry regained some jobs from the prepandemic level and is projected to have annual job growth. While job growth is relatively even with all private-sector jobs, the average wages for the health care and social assistance sector are far less. Health care is also identified as a high-growth sector with high-demand for entry-intermediate and middle-skill occupations. Good health care jobs are plentiful in the District and by the number, residents are available.

However, the industry is facing many challenges as it resets during the COVID-19 pandemic recovery. The COVID-19 pandemic further impacted workforce shortages, escalated the need for technological innovations, and painfully unveiled systemic inequities that are rooted in racism and discrimination, among others. In DC, a recent study of health care workers with lived experience revealed improvement opportunities in workplace culture, career progressions, education and training, and awareness of job and education opportunities. From the lens of the health care worker, the industry is not a promising place to work because of non-supportive cultures and the perception of little to no advancement opportunities. Employers share the struggle to recruit and retain District residents with skills and competencies for in-demand jobs that keep their businesses operating. Bridging this gap is present and future work.

In direct response, action team members of the Partnership conceived strategies to change the narrative. This work was further informed by the voice of the employees, a refresh of the labor market analysis, and expert marketing and communications professionals to develop targeted messaging and launch via communications mediums.

#### Messaging

Through this work, we expect to communicate clear messages to promote health care career pathways that are accessible, affordable, and validated by employers.

#### Social Media Campaign

We conducted a social media market analysis, and based on the findings, a promotional campaign using the targeted messaging will be launched on various social media channels most relevant to the target audience. The campaign educates on the three health care subsectors as "employers of choice" for intermediate-entry and middle-skill occupations, with a focus on the five prioritized non-degree occupations, including training options, affordability, and support for career growth.

#### Website (www.dchealthcareers.org)

To facilitate opportunity for broader awareness of health care as a career destination for District residents, a Health Care Workforce Partnership website was developed. Taking into consideration what we learned, that is, that people need to see themselves in the environment that fits them and looking at cost and time required, the website is interactive and highlights employers, training opportunities, education options, and financial tools — all with the goal to recruit DC residents into a career in health. The website will be available to link to partners' platform including social media outlets to increase the presence and interaction of the website and expand our reach to the target audience.



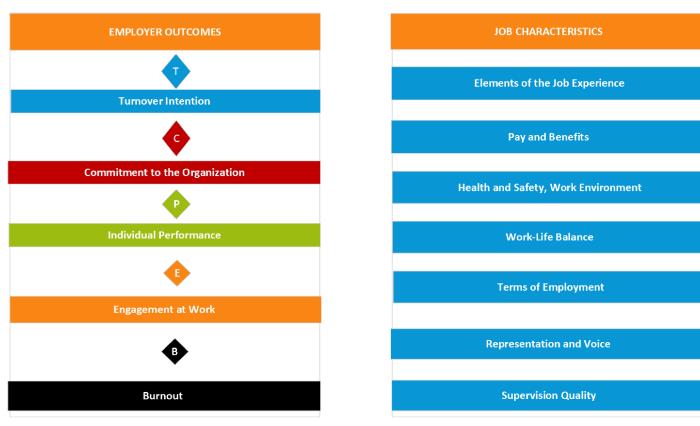
### **Shared Priorities, continued** Health Care as a Career Destination

Another lever to attracting DC residents to careers in health is job quality. Improving job quality is a function that requires an all hands on deck approach. It's the responsibility of the workforce system stakeholders. In the District, legislative and executive actions are making improvements in job quality from infrastructure investments to increased minimum wages. The work must be expanded to include employers, advocacy organizations, community economic development entities, education and training providers, and other workforce organizations. The National Fund for Workforce Solutions (2020) developed maps to illustrate the relationships between the five universal and validated business metrics and 26 elements of job design choices (See Figure 2).

"Good jobs are not just good for workers; they are good for business." — National Fund for Workforce Solutions

### Figure 2: Connecting Job Characteristics and Employer Outcomes, National Fund for Workforce Solutions





Building on the National Fund for Workforce Solutions Job Quality Outcomes Map, the Partnership sought the voice of the health worker to understand their perspective of job quality. Figure 3 identifies and describes the four improvement opportunities to job quality characteristics based on employees' perspective from the qualitative research. Figure 4 maps the connectedness of the health workers' perspective to the original job quality outcomes map. This work is designed as part of the Career Pathways System.

### **Shared Priorities, continued** Health Care as a Career Destination

### Figure 3: Voice of the Employees

|  | Employees Voice   |
|--|---|
| Workplace Cultur                             | Awareness of  |
| Workplace Culture                            | Transforming workplace culture is about addressing the lack of respect and unbalanced<br>workload that leads to employee discontent and high turnover rate. Knowing and<br>understanding employees better is a must for improving workplace culture and retention.<br>Continuing guidance and support are also needed for employees to make the most of their<br>training and education experience. In addition, networking opportunities and mentorship is<br>vital because when an employee has someone guiding and advocating for them, it often leads<br>to a faster, more fulfilling career track.   |
| Training & Funding                           | Employers are key partners who can offer paid leave and other professional development (PD) benefits and bridge the education gap through on-the-job training vs. classroom education. Financial support through scholarships, stipends, employer sponsorship and other partnerships is essential to helping employees advance within or among pathways. By exploring how stackable/transferable skills translate to certifications and advancement, opportunities can be created for employers to certify employees through on-the-job training (Health Care Career Mapping Study, 2022). Many participants stated that exam requirements are overwhelming, and employees do not have the time or support needed to pass or score well enough to advance. And that job opportunity and training program information needs to be more accessible. The belief is that these gaps can be bridged by having counselors and tutoring support. Moreover, prospective employee's expectations don't match what health employers are offering. These employees want and expect livable wages, transportation benefits, work life balance - similar options to what other professions are offering. |
| Pathways                                     | Focus group participants feel that pathways for CNA and CMA are rigid, particularly for CMAs.<br>And pipelines that better aligns skills and opportunities for CNA and CMA are needed and<br>would maximize resources (SLR, 2022). Furthermore, engagement with governing and<br>regulatory boards is an opportunity to streamline certification and licensing—decision makers<br>must understand how barriers impact employees.  |
| Awareness of<br>Opportunities &<br>Education | Limited awareness of potential jobs and pathways exists. Workers need to be aware that<br>becoming a doctor with a medical degree is not the only option to enter the health care<br>industry. Meeting people where they are and engaging those they trust are impactful ways to<br>reach people who want to start and advance in the health care field. For example, focus group<br>participants feel that pathways for CNA and CMA are rigid, particularly for CMAs. And<br>pipeline that better aligns skills and opportunities for CNA and CMA is needed and would<br>maximize resources (SLR, 2022).   |





### **Employer Outcomes**

**Turnover Intent** 

**Commitment to the Organization** 



**Individual Performance** 

E

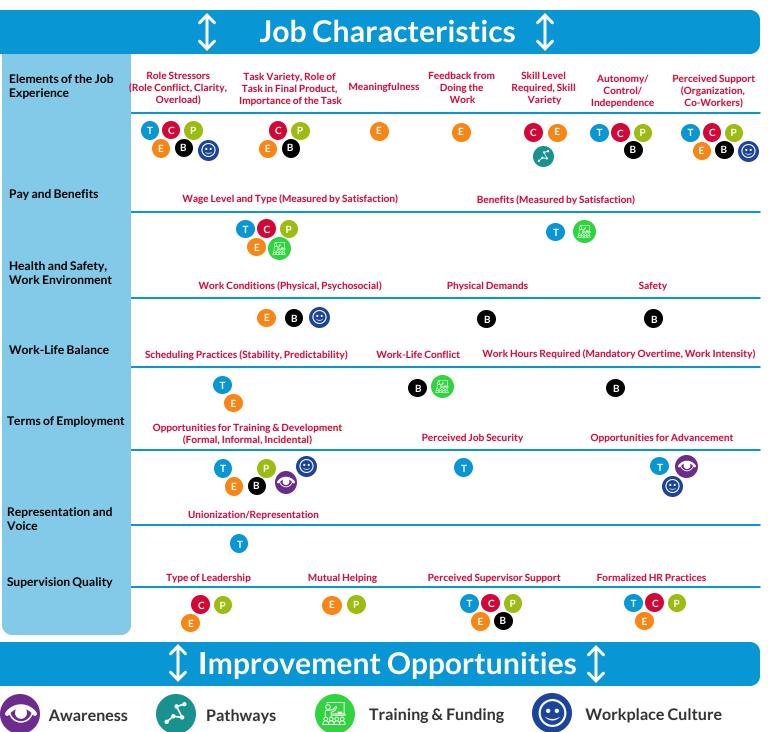
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**Engagement of Work** 



Burnout

**Organizational Performance** 



Notes: Adapted from Frank-Miller E.G., Fox-Dichter, S.R. (2020); Social Policy Institute at Washington University in St. Louis; Total number of peer-reviewed studies represented: 3,000+.

### Shared Priorities, continued Education and Training

Central to the discussion of career pathways are education and training. This includes not only education delivery, but alignment among curricula, job descriptions, and certification or licensing requirements for individual occupations. Guided by the foundation work of action teams, we conducted a gap analysis of the three "swim" lanes to assess current state of alignment for Certified Medical Assistant, Certified Nursing Assistant, Home Health Aide, Licensed Practical Nurse, and Pharmacy Technician positions. The gap analysis insights are highlighted in Figure 5.

### Figure 5: Gap Analysis

# Gap

The graphic shows the result of the current state, desired state and key steps for bridging gaps.

Key Steps to Bridge Gap

### **Current State**

Education and training program structure and content detail varies by setting (e.g., higher education vs. postsecondary). Local agencies oversee credentialing and registration for CNA, HHA, LPN and Pharmacy Tech jobs. CMAs are credentialed and registered on a national level; no DC oversight by licensing board.

Job descriptions are often difficult to access, limited in scope and detail, and may imply that entry - intermediate-skill positions are uninteresting or lacking challenge. Job descriptions often omit nonclinical skills, even though students learn these skills through training programs and are tested for certifications.

Job titles vary even within the same occupation, which may lead to confusion and missed opportunities for bridging and advancement along career pathways. For example, CNA means Certified Nurse *Aide* for the DC Board of Nursing, but Certified Nurse *Assistant* for other other job titles for employers.

#### Understand and assess how clinical and non-clinical skills are organized, taught, and assessed in each learning setting.

Understand how lack of DC licensing board oversight for CMAs impact local education an training across learning settings.

Contextualize roles as part of the broader health care team within job descriptions.

Ensure job description language is aligned with spirit of the role.

Include characteristics of job setting in job descriptions.

Explain non-clinical skills students will be doing as part of the job. Leverage professional standards or code of conduct (national associations and local boards) for alignment and support of non-clinical skills.

Update job descriptions to include common alternative or similar job titles (e.g., Certified Nursing Assistant [also Certified Nurse Aide, CCNA, PCT]). Education and training program structure and content detail are aligned across learning settings, including potential local oversight support for CMA education and training.

**Desired State** 

Job descriptions are accessible, comprehensive, and convey the job's responsibilities and spirit as well as the employer organization's mission.

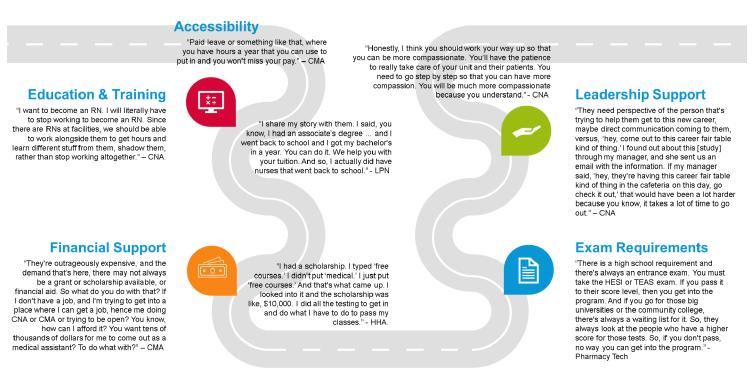
Occupational competencies and certifications align with job titles. Candidates understand the jobs for which they are applying and how those jobs fit along a career pathway.

### Shared Priorities, continued Education and Training

While alignment of curricula with job descriptions and licensing requirements is a first step, successful and sustainable alignment requires another element: aligning education and training format, characteristics, and support with potential employees – with people. Entry-intermediate and middle-skill job descriptions are not connected to the strategy, mission, and vision of organizations in the same way management roles are. Key opportunities related to education and training identified through qualitative engagement with DC residents who have experience working in one or more of the five prioritized occupations are summarized below.

### The Voice of Health Care Workers

Education & Training, Registration & Licensing, & Job Experience



**Financial support** through scholarships, stipends, employer sponsorship and other partnerships is vital to helping employees advance within or among pathways. Aligning training programs with people must include an assessment of cost. **Exam requirements are overwhelming**. Many do not have the time or support needed to pass or score well enough to advance. Some participants noted counselors or tutors could help bridge these gaps, as noted by one individual with experience as both a CNA and CMA. **Job opportunity and training program information needs to be more accessible.** Employers are key partners who can offer paid leave and other professional development benefits. Good managers and direct messaging can make a difference in terms of whether someone chooses to continue their education or advancement. **Exploring opportunities for on-the-job education and ways stackable/transferable skills can translate to certification and advancement is key.** Employees value opportunities to learn on-the-job. This could take the form of rotation to get hands-on experience in different positions, new ways to assess hard and soft skills, and a flexible pathway that can transition with employees as their experience and aspirations evolve (see Voice of Consumer).

Embedding these insights into continued efforts to build alignment among employers, training partners, and certification and licensing requirements will ensure changes are successful, sustainable, and supported by those navigating health care career pathways. Strong financial support can open doors for potential employees.



# **Career Pathways System**

In the District of Columbia, the Mayor's Office establishes the citywide vision and framework for the economic and workforce development and educational strategies. The vision and framework are designed to engage government agencies and partners. One of the focus areas of the framework is talent.

"Talent—attracting and retaining talent in the District; providing residents opportunities to thrive economically through industry-advised career pathways, well integrated workforce development, and capacity building pipeline for building skills in growing sectors and opportunity areas." (DC WIOA)

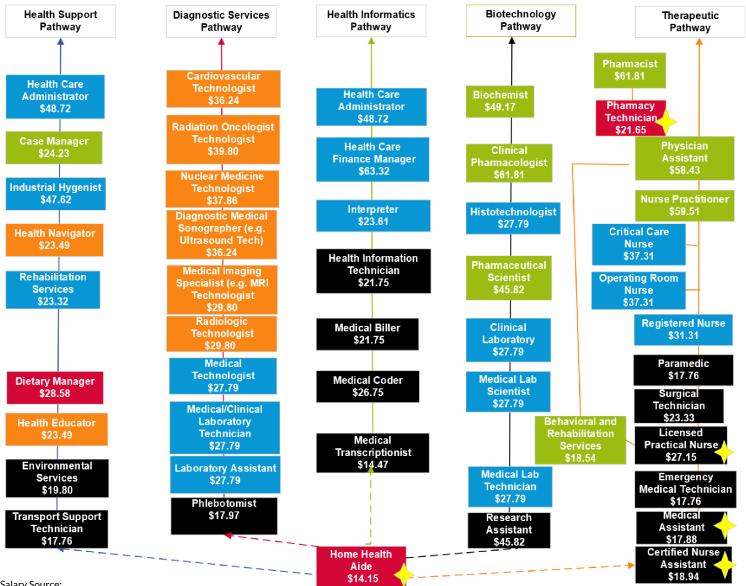
The DC workforce investment system is led by the DC Workforce Investment Council — the District's state and local workforce board — and as the coordinating and leadership entity over the workforce development system, facilitates and coordinates efforts across system-wide partners and programs. One of the priority activities of DC WIC is sector partnerships in high-demand, growth industries. DC WIC recognizes that industry sector alliances can address the workforce needs by aligning partners of businesses, education and training, economic and community development, and supportive services. As a workforce strategy, career pathways are often developed and implemented through sector partnerships, which leverage established relationships, connect to the workforce system, and contribute to economic success (DC WIOA).

In March 2022, the Health Care Workforce Partnership adopted definitions for Career Pathways, Career Pathways Programs, and a Career Pathways System—all of which align with the DC WIOA Unified State Plan (2022).

**Career Pathways** is a workforce development approach to building a knowledgeable workforce. Career pathways are comprehensive — articulating education and training steps between occupations in an industry sector, combined with support services, to enable individuals to enter and exit at various levels and to advance over time to higher skills, recognized credentials, and better jobs with higher pay. Each step on a career pathway is designed explicitly to prepare individuals to progress to the next level of employment and/or education. Individuals are aware of the pathway, connections are transparent, and next steps are clear to reach their career goals. Career pathways strategies target jobs in industries of importance to local and regional economies and build strong relationships with employers. Career pathways operate at two levels — systems and individual program levels.

### **Career Pathways System, continued**

### Career Clusters Pathways Map -**Five Prioritized Health Care Occupations**



Salary Source:

- BLS.gov •
- These numbers are based on available data which lags and may not reflect increases in DC minimum wage since the date the data was collected.
- DC minimum wage rose to \$16.10 on July 1, 2022.

#### Key

| High School or GED                      |
|---|
| Full Certificate or Diploma (1-2 Years) |
| Associate Degree (2 Years)              |
| Bachelor Degree (BA/BS, 4 Years)        |
| Master/Doctoral Professional Degree     |
|   |



Yellow star represents top five occupations.

## **Career Pathways System, continued**

A **Career Pathways Program** is a clear sequence of connected education coursework, training credentials, short and longterm work-based learning and sustainable support services aligned with employer-validated work readiness standards and competencies that enable individuals to secure employment with livable wages within a specific industry or occupational sector and advance over time to successively higher levels in that sector; and promote equitable and inclusive access and increase the supply chain of diverse qualified workers in the target industry.

The Partnership defines a **Career Pathways System** as a broad approach to serving populations seeking employment by reducing systemic barriers and creating opportunities for individuals to advance within specific fields through career pathways programs. A Career Pathways System substantively alters the way the workforce system delivers services and enhances the relationship with partner organizations and stakeholders to the development of a skilled knowledge-economy workforce by expanding access in an equitable and inclusive way that produces diverse workers who gain industry-recognized and academic credentials necessary to work in careers that are in-demand. Career Pathways Systems transform the role of employers from a customer to a partner and a co-leader and co-investor in the development of the workforce (CLASP/Alliance for Quality Career Pathways, 2015).



#### This is evidenced by the eight core elements of:

- **1.** Advancement of anti-racism and meaningful DEI practices
- 2. Built and sustainable cross-agency partnerships with clarified roles
- 3. Engaged industry sectors and employers
- 4. Designed industry-validated education and training programs
- 5. Identified funding needs and sources
- 6. Aligned policies and programs
- 7. Measured system changes and performance
- 8. Accessibility to every resident

Good jobs are plentiful in the Washington area, but DC residents are not securing nearly enough of them. Many employers and organizations are working hard to fix this problem, but their efforts are not coordinated, and they face barriers and challenges along the way.

The Partnership defines a "good job" as a full-time role that:

- Provides career stability and/or a path for advancement;
- Includes a wage that meets a family-sustaining income threshold;
- Is accessible within ~five years of high school graduation; and,
- Offers self-sufficiency and a choice-filled life.

We believe building skills and career opportunities — particularly for people of color — contributes greatly toward the goal of a more equitable and prosperous District. By tackling these challenges as a Partnership, we can support more DC residents in securing good jobs and achieve a more equitable recovery from the COVID-19 pandemic. And by putting an intentional focus — as a District — on what works and how to measure success, we can build a community of practice that continually builds on its best work.

CLASP/Alliance for Quality Career Pathways. Side-by Side: Alliance for Quality Career Pathways Framework 1.0 & the Workforce Innovation and Opportunities Act (WIOA), February 2015.

# **Strategic Recommendations**

Informed by progress toward the 2021 recommendations, new learnings over the past year, and insights from partners and aligned work, the DC Health Care Workforce Partnership offers the following strategic recommendations.



#### **Continued Prioritization of Health Care Occupations for Investments**

As documented by labor market information, the five prioritized health care occupations — Certified Medical Assistants, Certified Nursing Assistants, Home Health Aides, Licensed Practical Nurses, and Pharmacy Technicians continue to need investments in education and training and supportive services. These occupations remain in high demand across the three subsectors of the District's health care industry:

- 1. Acute care;
- 2. Ambulatory and behavioral health; and
- 3. Skilled nursing, residential and long-term care services.



#### **Determine Education and Training Capacity and Capabilities**

Education and training providers have been active members of the Partnership since its inception. Through the convenings of the Action Teams and ongoing discussions with training providers, employers and government stakeholders it's clear that a comprehensive study on the capabilities and capacity of training programs is needed in order to inform additional capacity building and to identify additional systemic barriers to training individuals for health care occupations.

This assessment should also evaluate workforce development services and activities supporting the five prioritized health care occupations, other health-related occupations, and special populations in the District of Columbia.



#### Minimize Duplication and Maximize Participation in Sector-Based Partnerships

The DC Health Care Workforce Partnership is a model for sector-based alliances seeking to contribute to the mission and vision of the District's workforce development system. We recommend that the DC WIC should seek continued expansion of sector-based partnerships to ensure employers, education and training providers, and other stakeholders are around the same table with a solution-driven mindset.

We further recommend that the District consolidate publicly-funded efforts among the sectors to maximize resource allocation and efficiency. In particular, it's important that the District ensure that commissions and taskforces utilize existing work products to avoid contradictions or programs that work at cross purposes.

# **Strategic Recommendations, continued**



#### Catalyze the Health Care Career Pathways System

As a workforce development strategy, career pathways system is an effective way to develop a skilled workforce by aligning the business needs with education and training offerings and services to gain industry-recognized and academic credentials. The Partnership named the creation of a career pathways system as a Shared Priority and embarked on developing a sector-based career pathways system of eight core elements.

In the coming year the Partnership and the District should prioritize creating the proper foundation for a Health Care Career Pathways System by:

- 1. Addressing key public policies,
- 2. Minimizing administrative barriers, and
- 3. Continuing to support the evaluation and optimization of the workforce development system.



Grow and Create Good Jobs Through Support to Employers, Training Providers, and Job Seekers

Through our work, we have identified some key barriers for employers, job seekers and training providers as they seek to establish a thriving health care workforce. The pandemic has forced employers to evaluate their workplace culture, policies, and advancement support for their current and prospective employees. Job seekers have made rightly clear they will not except anything less than a living wage. Moreover, health care workers want a work life balance, supportive supervisors and advancement opportunities. Training providers need assistance in building additional capacity and partners to help provide wraparound services for their students to ensure success.

Given these findings, we recommend the following:

- 1. Collaborate with employers, training programs and government partners to maximize on-the-job training and the development of stackable skills to lower the barrier for career advancement.
- 2. Optimize the support for training participants to ensure their success through the availability of support services.
- 3. Engage in and support investments to create transformational strategies to promote wider adoption of job quality improvements.

# **Voice of the Consumer**

Informed by the work of Action Team 6, DCHA Program Services commissioned Social Lens Research to conduct qualitative research to better understand perceptions of the health care sector's current and future skills needs to inform datadriven recommendations. Through this qualitative engagement we were able to reach individuals with lived experience in our priority health occupations to better understand opportunities to improve the health care workforce development system as well as improve recruitment, retention and advancement opportunities. Through this work four opportunities surfaced:

- 1. Increase Awareness of Job and Education Opportunities
- 2. Enhance and Fund Training Programs
- 3. Transform Workplace Culture
- 4. Better Define and Communicate Pathways

We have included a snapshot of the responses from the participants from each of the priority occupations which we have entitled the "Voice of the Consumer." The qualitative research done this year will be key to driving the Partnership's work in defining what constitutes a "good job." We look forward do building onto this study as the work of the Partnership continues.