

Collaboration by Design:

Principles, Processes and Practices Utilized in the Development and Implementation of the SlingShot Project in Los Angeles and Ventura Counties





C3 Skills Alliance - Collaborative for Care Coordination

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A Road Map to Developing Industry-Responsive Regional Sector Pathways

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In 2015, the California Workforce Development Board challenged the statewide workforce system to improve the ways in which it addressed the needs of business and industry. CWDB's SlingShot initiative required workforce stakeholders to identify and work to address obstacles that slow California's economic engine. SlingShot put forward five principles to guide regional stakeholders in their efforts:

- We can make the greatest impact on major jobs and employment issues at the regional level. California is a collection of distinct regional economies; aligning our work at that level will be more effective than either city/county/district level efforts or statewide strategies.
- We must turn the tide on income mobility in California. Our systems must accelerate education, employment and economic development for those Californians in danger of being left out of our state's prosperity.
- We need to tackle big issues. California's regions face no shortage of vexing workforce challenges. Slingshot offers an opportunity to take on tough issues that, if solved, would meaningfully move the needle on employment.
- We need to measure what we undertake. All strategies need to be grounded in effective use of data and metrics.
- We must create the space to take risks. In an era of perpetual economic volatility, traditional programs don't solve tough workforce challenges. Slingshot encourages regional partnerships to prototype new ideas, based on strong research and development, without fear of "failure" if the effort falls short of expectations. For every impactful practice that emerges, there will be others that are tried and then dropped for lack of sufficient impact.



Background on the Los Angeles/Ventura Counties SlingShot Project

Within the context of SlingShot, representatives of local workforce development boards in Los Angeles and Ventura counties entered into discussions touching on a variety of workforce challenges, including those affecting many industries that drive local and regional economies. At the time of these discussions, several of the local boards were leading sector partnerships that were bringing forward critical workforce issues, including gaps in workers' skills that affect businesses' ability to operate effectively within a competitive marketplace. In examining these issues, one stood out based on its impact on various jobs within a wide range of healthcare enterprises: care coordination, a skill set that is in increasing demand within an industry focused not only on treatment, but prevention, wellness and health maintenance. Over the next two and a half years, a partnership comprised of workforce professionals, business leaders, educators, labor and other economic and workforce development stakeholders worked tirelessly to develop and, ultimately, implement training and related strategies to address this critical unmet need in healthcare, a sector that has been prioritized by every local area and workforce region in California.

Our intent in producing this report is not merely to describe the various features and outcomes of the project developed under the SlingShot initiative, but to promote it as a model for industry-driven career pathway programs. This report presents an eight-step process employed by the stakeholders in developing and launching the *C3 Skills Alliance*, a Collaborative for Care Coordination. This process can serve as a general road map to replicating a healthcare-related initiative in other regions or to provide a foundation for developing industry partnerships focused on other sectors.

Step 1: Engage Industry, Organize Stakeholders and Let Business Lead the Discussions

Because SlingShot is an initiative of the public workforce system, CWDB grants were made available to local workforce development boards (WDBs) within defined regions. As discussions about SlingShot occurred and a decision to focus on healthcare and care coordination eventually was made, six WDBs in Los Angeles County and the Ventura County WDB agreed to participate in the project. A grant in two parts (Phase 1 for initial planning, followed by Phase 2 for project implementation) was made for the LA-Ventura Regional SlingShot Project. The Southeast Los Angeles County (SELACO) WDB agreed to administer the grant on behalf of the participating boards. Principal start-up activities included:

Initial Engagement with Business via an Existing Sector Partnership: Concurrent with the state's efforts to coalesce regional efforts around significant workforce challenges, discussions among business, workforce and education professionals about emerging training and hiring needs were taking place as part of the Healthcare Industry. The partnership consisted of representatives from hospitals, clinics and a range of other businesses and institutions in the healthcare industry. It was here that industry representatives first introduced care coordination



as an emerging focus for the sector. They expressed an urgent need for skilled workers with care coordination and case-management skills at facilities providing acute care, community clinics, outpatient facilities and with public health organizations. The CEO of Centinela Hospital quickly emerged as an industry champion on working to better address the need for these skills. Given industry's interest in this facet of healthcare skills, care coordination became an ideal target for the region's focus under SlingShot.

Expanding the Dialog about the Need for Care Coordination: Following the decision by local WDBs to adopt this workforce challenge as a regional priority, leadership from the Hospital Association of Southern California (HASC), which represents 170 hospitals and medical centers, and the Community Clinic Association of Los Angeles County (CCALAC), with 59 members organizations, brought additional industry support to the region's coordinated efforts to develop strategies and identify training resources for improving care coordination skills. The associations, along with representatives of their member organizations, significantly expanded the base of knowledge from which staff and consultants (the "project team") could draw to better understand "care coordination" and the need for skills in this area.

Organizing Stakeholders to Address the Issue: To address the gap between industry needs and the skills of existing workers and job candidates, the local boards sought support from groups with a stake in building a more skilled healthcare workforce. The partners included hospitals, clinics and other healthcare organizations; public and private educational institutions; economic development; organized labor and seven participating workforce boards from LA and Ventura counties. To support the extensive work of what would become the C3 Skills Alliance, the stakeholders agreed to participate on three functional teams (Industry, Education & Labor, and Investment) and a leadership team that would oversee and guide collaboration. The Industry Team was principally focused on determining the skills, training and hiring needs of business, while the Education Team was responsible for mapping assets and developing training solutions. The Investment Team was charged, principally, with budget oversight.

KEY TAKEAWAYS

- Begin a dialog with industry. Move beyond a simple needs assessment and engage in discussions about trends, skills gaps, growth projections and other issues that will increase your system's understanding of businesses' main interests and concerns.
- Take advantage of relationships that already exist between the workforce system and the target industry, such as sector partnerships, collaboration with industry associations and participation on advisory groups.
- Listen for emerging needs, as they will likely be ones for which outside solutions, such as those the workforce system stakeholders can provide, will yield the most benefit.
- Organize stakeholders around roles designed to address needs identified by business.



Step 2: Gather Business Intelligence about Issues to Be Addressed

Gathering intelligence from businesses about "care coordination" was the activity that dominated the first months of the project. At this early stage, stakeholders concentrated on building business alliances that would enable access to critical information about the need for care coordination skills across multiple occupations and at various levels, from beginning to advanced. Work included:

Engagement with Representatives of Hospitals, Clinics and Other Providers: Using the leadership and functional team structure, staff and consultants entered into discussions with industry representatives, including administrators, human resources professionals and practitioners. Early conversations focused on the ways that public policy, payer systems, technology, managed care, increased life expectancy and myriad other factors were revolutionizing the delivery of health services and how these changes were increasing the need for case management and care coordination for patients being served in various healthcare settings.

Coordination with Key Healthcare Associations Serving the Region: The addition of HASC and CCALAC to the industry partners was instrumental in expanding the project's reach and to understanding the ways different types of healthcare organizations utilize patient navigators, case managers and care coordinators.

Initial Assessment of Careers Using Care Coordination Skills: Based on input from the industry team and business partners of all types, a baseline profile for "care coordination" began to emerge. Skills are not confined to a single occupation, but are essential parts of many jobs. Ultimately, C3 Skills Alliance stakeholders would agree to and adopt a career pathway profile for care coordination that identified three distinct skill tiers: entry-level, which encompasses patient navigation skills used by certified nurse assistants (CNAs) and others with similar skill sets; a technical level in which community health workers, licensed vocational nurses (LVNs) and registered nurses (RNs) are grouped; and a professional level including social workers and RNs with advanced skills typically associated with attainment of a master's degree. The unique skill needs of workers at each level became consistent reference points throughout the alliance's work in developing appropriate training strategies.

KEY TAKEAWAYS

- Talk to multiple sources. Compare information received and look for common threads and themes.
- Attempt to put key issues into context. What factors are driving the need? Increased competition, technological advances, public policy?
- Dig into the details. To effectively formulate solutions to workforce needs, more information is often better.



Step 3: Validate Industry Intelligence and Examine Data

To validate and supplement industry intelligence gathered through both structured and informal communications with healthcare professionals, project consultants led a process through which businesses were surveyed and independent research was conducted. These processes included the following:

Surveys Were Distributed through Industry Associations: To quantify the extent of need for care coordination skills training, the alliance worked closely with healthcare association partners to survey their members on key issues. A total of 77 surveys were returned that indicated the following. The vast majority of the survey respondents employ care coordination/case-management staff (1,004 employees at 54 businesses). Care coordination is largely conducted by RNs and social workers, but nearly a quarter of those performing this function at responding businesses are LVNs, CNAs and medical assistants (MAs). Respondents also indicated that there are significant gaps in care coordination skills among employees and job applicants, including: coordination (organizing, planning, correlating and facilitating), understanding treatment plans, familiarity with medical terminology and more.

Independent Research Highlighted Survey Findings: The project team compared the information received from surveys to published information, intelligence gathered through discussions with industry partners, and input derived from regional job boards and labor market data sources. Overall, surveys confirmed the growing need for workers with care coordination skills.

Data Analysis Provided a Basis for the Development of Project Strategies: As the team examined survey results and other data about the need for care coordination skills, the information confirmed that workers needed additional training and that training should be more widely available and easier to access. These facts set the stage for what became the core project strategy – identification, development and implementation of training.

KEY TAKEAWAYS

- Survey businesses, casting as wide a net as possible, so as to capture input representing various facets of the industry, as well as those of different sizes and locations.
- Conduct research. Do industry news, reports, studies and data align with intelligence provided by businesses? Do these sources offer insight on the problem and how it might be solved?
- Analyze information. Compare sources and results of intelligence and data gathering and, again, look for common elements. Results of intensive analysis will inform stakeholders' strategies for addressing the unmet needs of industry.



Step 4: Determine Required Functions and Essential Tasks in Care Coordination

As the use and application of care coordination skills are continuing to evolve within the healthcare industry, project leadership and stakeholders agreed that developing a "competency profile" for workers performing care coordination would be essential to identifying and developing needed training. Education partners led healthcare practitioners through a detailed review process to identify and categorize the tasks performed in care coordination and the skills needed to effectively carry out these responsibilities. Review of care coordination activities and development of the profile included the following activities:

Intensive In-Person Engagement Process with Care Coordination Professionals and Experts: Due to the still-emerging nature of care coordination and the lack of a common description for what skills and competencies are required for this work, the alliance secured a commitment from its education partners to conduct an analysis. The community college's deputy sector navigators for LA and Ventura counties led a two-day discussion during which industry professionals who oversee care coordination provided information about skills associated with this work. Using a DACUM (Developing a Curriculum) process, the panel identified general knowledge and skills required of successful workers.

Review of Information Provided through the DACUM Process: The deputy sector navigators took the extensive input from the DACUM engagement with industry practitioners to identify the tools, equipment, supplies, and materials used; important worker behaviors essential for success; duties for which care coordinators are responsible and the tasks that they perform.

Development of Competency Profile and Summary of Workplace Responsibility for Care Coordination: The aggregated information gathered from the DACUM process was summarized within a "competency profile," which became a critical resource for developing a career pathway and evaluating training strategies. Industry partners also acknowledged that the project's DACUM process had peripheral value in terms of supporting development of job descriptions; completing performance appraisals; conducting candidate interviews and structuring job responsibilities.

KEY TAKEAWAYS

 Convene business stakeholders, including those who make hiring decisions about individuals with sought after skill sets and workers who use these skills sets in the performance of their jobs.
 Inquire about the knowledge needed regarding the targeted skill area and the tasks performed using these skills.



- Dissect the information secured from industry representatives to ensure every aspect of the skill requirements are understood and can, therefore, be addressed through training.
- Develop a skills or competency profile that summarizes agreed-upon skills and tasks that can be
 used to identify a career pathway and as a reference point in supporting businesses' hiring and
 training needs.

Step 5: Scan the Availability of Training for Care Coordination Skills

As a foundational element of the project was the need for more and better trained workers with regard to care coordination skills and knowledge, identifying existing training programs and their availability in Los Angeles and Ventura counties became an essential component of the project. Leadership procured outside support and tasked the project team to complete research on training, including:

A Scan of Public Education Resources: Based on the partners' work in assessing the healthcare industry's needs for care coordination skills and in determining the skills that should comprise curricula to meet these needs, the community college system's regional Center of Excellence (COE) was engaged to conduct a scan of courses, programs and curricula available throughout California. COE identified a variety of courses at community colleges and coursework available through other public providers, such as local adult education agencies. Ultimately, the scan revealed that few courses that included comprehensive content specific to care coordination were available within the region.

Research the Availability of Training from Other Sources: The project team supplemented COE's work by conducting extensive on-line research regarding training programs available through private and non-profit providers, including distance learning and other web-based content. Industry partners confirmed that most training currently utilized to increase care coordination skills, particularly at the technical and professional levels, is provided through online courses, some of which is offered by national organizations serving the healthcare industry.

Develop a Summary of Findings: Following the completion of scanning and research activities to identify training, the project team prepared a summary of programs, courses and other instructional content, indicating principal topics, length, methods of training delivery, costs and other key features. This summary became an important tool for stakeholders' review and final vetting of programs.



KEY TAKEAWAYS

- Conduct research on the availability of training that teaches skills required to respond to unmet industry need. Such research should include commercially available training along with training that may be available on a customized or contract basis.
- Review programs to determine which skills are taught and what level of skill is addressed by training content.
- Identify and catalog programs, courses and other training content that appear to meet industry requirements for desired skills.

Step 6: Vet Existing Training and Identify the Need for Additional Coursework

Determining the suitability and value of available courses was the next critical step toward providing training to help increase the availability of new talent for the industry and to help working individuals improve skills used in care coordination. Again, industry and education partners, working alongside their workforce system counterparts, offered invaluable support in this process, which included:

Engagement of Stakeholders in the Review of Training Programs: C3 Alliance leadership convened stakeholders from the Industry and Education Teams to review and vet identified courses/curricula using the DACUM Competency Profile as a guideline for determining suitability and strength for instruction in patient navigation, case management, care coordination and the management of these processes.

Secure Agreement of Industry and Stakeholders on Approved Training: Following the review of programs and courses by the stakeholders, the Leadership Team was assembled to review and approve programs to train new and incumbent workers in care coordination. Based on team recommendations, a slate of courses was approved and the Leadership Team gave the green light to use SlingShot funding for development and enhancement of additional programs.

KEY TAKEAWAYS

 Assemble industry and education stakeholders to review training programs identified through the survey process.



- Using the skills profile developed through industry engagement, review and evaluate identified training to determine whether its content reflects knowledge and skills essential to addressing unmet industry needs.
- Present results of the review and evaluation to stakeholder leadership and seek concurrence on approved programs, courses and training content to address needed skills.

Step 7: Develop and Implement Training to Meet Industry-Defined Skill Needs

Following the processes of scanning, reviewing and vetting training, additional work was necessary to ensure that a full range of training, targeting skills at various levels along the identified career path, was available. Several existing programs were identified as best practices and alliance representatives became actively engaged in promoting training in these programs to potential students, including both job seekers and incumbent workers. To enhance existing courses and development of new programs, focus was on the following areas:

Develop and Enhance Needed Coursework: During the process of scanning and reviewing existing programs teaching care coordination skills, it was determined that there was a lack of local programs for entry-level learners. However, the stakeholders agreed that program content previously developed by the East San Gabriel Valley Regional Occupational Program (ROP) was promising and could be enhanced to meet current industry needs. The curriculum was retooled, underwent review by a subject-matter expert and was implemented by the ROP, a local adult school and two community colleges. Training for incumbent workers also was determined insufficient. Based on recommendations by HASC, the Leadership Team approved funding for the development of new middle-skill level training at the community college level and new professional-level curricula by the state university system, all of which will be available statewide.

Publish and Promote Approved Training: A slate of industry-approved training providers and programs was approved to reflect skills needed at the three identified tiers of care coordination and was widely distributed to industry associations, businesses, colleges, adult schools, and the local workforce system. As this summary of programs met agreed-upon content standards, the project team and stakeholders envisioned the list being a useful resource well into the foreseeable future. Under the SlingShot grant, the slate of programs was added to the Workforce Innovation and Opportunity Act (WIOA)-eligible training provider list and was recognized as representing courses on which grant funds could be expended.

Assist Potential Trainees in Accessing Project Support: The project team was instrumental in communicating with the workforce system and businesses about SlingShot grant funding that had been allocated for training. Procedures were developed to help both new and incumbent workers qualify for enrollment and to secure spots in training scheduled for roll-out prior to the conclusion on the grant.



KEY TAKEAWAYS

- Develop and enhance curricula required to meet industry needs for skills at all levels.
- Publish and promote the availability of training to all stakeholders, including those representing businesses, education, and the workforce system.
- Support training through workforce system resources, including WIOA formula funds, public education resources and specialized grant programs.

Step 8: Maintain Industry-Workforce Collaboration

Maintaining on-going collaboration among the C3 Skills Alliance stakeholders (even after the sunset of SlingShot funding) has been a goal of the project from its inception. Because grant activities have only recently been completed, strategies to support on-going collaboration are just now taking shape and are being tested. However, the stakeholders have recognized from the beginning of the project that relationships are built and sustained based on good communication and that keeping the partnership going will require, at minimum, the following efforts:

On-Going Communication: Use of various communication mechanisms and modalities throughout the project has been robust. From the on-set, communication about project development activities and progress were broadcast via email to an extensive list of stakeholders. Individual and small-group emails and telephone discussions also were common and were used to share information, obtain input and maintain momentum against many project deadlines. In-person meetings among stakeholders, particularly through the Leadership Team and the three functional teams, were critical to developing consensus on key issues and to decision making. In the post-SlingShot grant phase, communication and the sharing of information is supported by a C3 Skills Alliance micro-site: www.C3SkillsAlliance.org. It is anticipated that regional and sub-regional healthcare sector partnerships, such as those led by the Los Angeles Area Chamber of Commerce and the South Bay Workforce Investment Board, may bring together alliance stakeholders around other workforce issues affecting the healthcare industry.

Feedback Mechanisms: The in-person meetings described above, particularly the team meetings, were used as a vehicle to obtain stakeholder feedback throughout the process. As accomplishments were made, obstacles were encountered and strategies were implemented, the project team regularly sought feedback from industry representatives and other stakeholders to ensure that the ultimate goal – successfully responding to the unmet need for training – was achieved.



Willingness to Work Across Systems: Collaboration was achieved, largely, due to the openness of the partners to share information and resources. The alliance was built by a "coalition of the willing" and prospects for on-going collaboration look bright based on stakeholders' repeated demonstration of willingness to work outside their comfort zones and within the parameters of other disciplines, such as the public workforce system.

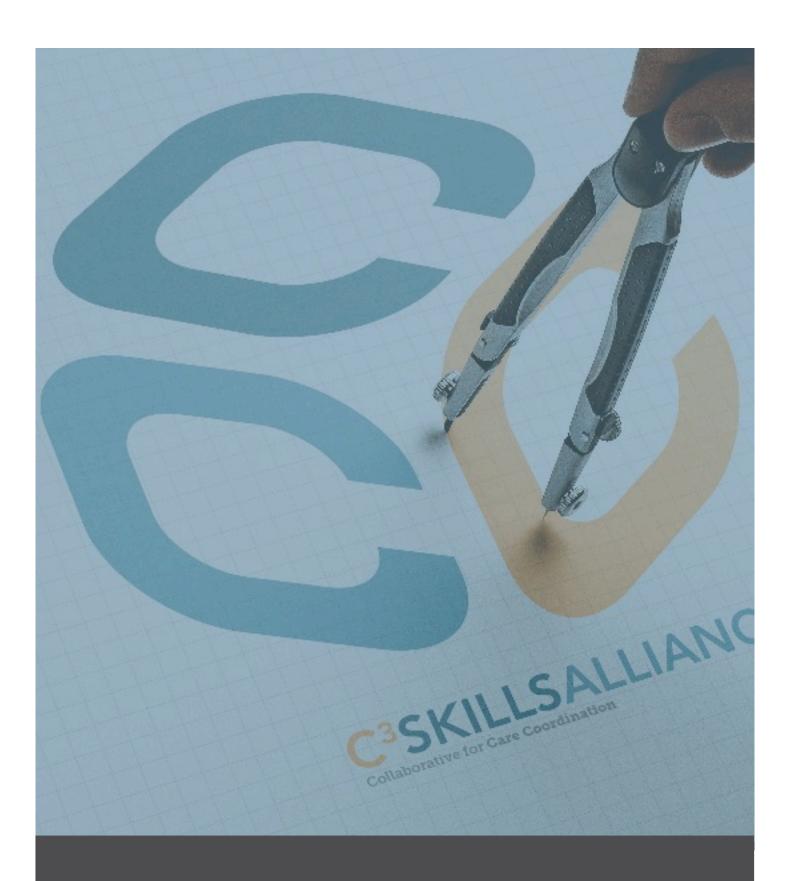
KEY TAKEAWAYS

- Maintain on-going, frequent and open communication through written and verbal modalities, including periodic in-person meetings among the stakeholders. Utilize such communications to not only share information, but to build upon the stakeholders' commitment to the sector partnership.
- Gather feedback from businesses and other stakeholders regarding the content and quality of responses provided to industry and businesses' satisfaction with training and other services.
- Institutionalize collaboration by creating on-going communication mechanisms, such as regular meetings, a web-based platform, and other means of interaction and information sharing.

Conclusion

The approaches used in the establishment of the C3 Skill Alliance were informed, to a significant extent, by the goals, objectives and funding of CWDB's SlingShot initiative. In the case of this project, grant funds made available under the Workforce Innovation and Opportunity Act (WIOA) Governor's Reserve Program were instrumental in providing staffing and contractor support needed to manage the "moving parts" required to develop industry-responsive strategies. However, workforce agencies, industry partners, educators and others should not be deterred from working to develop sector partnerships and industry-driven programs due to an absence of a project-specific grant. Much of the LA-Ventura counties SlingShot project's efforts were initially focused on "charting new territory" with regard to leveraging talent from multiple disciplines (e.g., workforce, education, economic development, the private sector) to support the goal of developing a larger and better prepared workforce to meet industry needs. By borrowing approaches from the C3 Skills Alliance model and other state-funded pilots, regional stakeholders can streamline the process of developing and implementing responses to various workforce needs of businesses in priority sectors.

For more information, please visit the C3 Skills Alliance and SlingShot websites at: www.c3skillsAlliance.org and https://wwdb.ca.gov/initiatives/slingshot/.





For more information on the C3 Skills Alliance contact: www.C3SkillsAlliance.org