





Solving the recruiting puzzle

Hospitals and health care organizations address a looming shortage of facility professionals

BY CAMILLE FINK

A labor shortage in the health care facilities field is on the horizon, and experts say recruiting new talent — from the executive and management levels down to the front-line staff — needs to be a top priority.

It's a challenge that health care leaders are not taking lightly, as professional groups, facility managers, consultants and even government entities pitch in to game out the problem and develop innovative solutions.

'Graying' workforce

The Career Collaboration Project, an ongoing survey project of members of the American Society for Health Care Engineering (ASHE), asks participants about career development and succession-related issues. Almost two-thirds of respondents report that they have been in their

Design challenge provides real-world experience for a variety of students

For the past five years, the American Institute of Architects/Academy of Architecture for Health Student Design Challenge has brought together students from universities across the country to gain hands-on experience in the health care field. The challenge, sponsored by the Nursing Institute for Healthcare Design and McCarthy Building Companies, is part of the International Summit & Exhibition on Health Facility Planning, Design & Construction.

The most recent challenge was held in March and included architecture students from Clemson University and Texas A&M, construction science and management students from Clemson University, engineering students from the Milwaukee School of Engineering, and nursing students from the University of Arizona. Each interdisciplinary team of five students had two days to assess a vacant retail site in downtown Phoenix and create a plan to transform the space into a health and wellness center.

Eugene Damaso, AIA, NCARB, GGP, EDAC, design leader and associate at RLF, is the program's organizer and chair. He says that the challenge offers a dynamic environment outside of the classroom where students collaborate across disciplines and work in teams, the same way they would in practice. "This experience also gives them the opportunity to focus on clients, so that they're thinking about the end users of their buildings," Damaso says.

Jacqueline Guerra, Assoc. AIA, was an architecture student at Texas Tech University when she participated in the challenge in 2016 in San Diego. Today, Guerra is a medical planning specialist and Tradewell Fellow at EYP where she is growing her skills as a design professional.

She says that the design challenge experience took many students out of their comfort zones and gave them valuable insight into the health care design field, an area that many of them were not very familiar with before the event.

"I had decided to pursue the health care facility design certificate at my school, but I didn't know what to expect," Guerra says. "This event encouraged my interest in health care design because I saw that I could work on meaningful projects and because I was able to engage with committed professionals and academics in the field." ■

career fields for more than 15 years, suggesting that the common observation of the "graying" workforce is an accurate one.

Tim Adams, FASHE, CHFAM, CHC, ASHE's director of leadership development, warns that the retirement wave is approaching rapidly as more health care facility professionals in leadership roles find themselves ready to pursue other opportunities or move away from their day-to-day managerial responsibilities.

As a health care facilities management search consultant for the last 15 years, Jack Gosselin, FASHE, CHFAM, founding partner at Gosselin/Martin Associates, Walpole, Mass., and chair of ASHE's newly developed Career Development Committee, has seen up close what is happening with staffing in health care organizations. He agrees that retiring baby boomers are going

to leave a large gap in the labor force, and without a pipeline funneling new workers into the field, the challenges will be immense. "The biggest issue we run into is really the people. Where do these people come from?" asks Gosselin.

And the labor shortage is not just at the managerial level. Coupled with the inevitable mass exodus of people in leadership roles is an additional shortage of technical workers — HVAC technicians, electricians, plumbers and carpenters — who keep health care facilities running.

"The trades-level shortage is huge. Because tradespeople are such a large part of the workforce at hospitals, it's safe to say that the shortage has affected the majority of hospitals across the country," notes Peter Martin, president of Gosselin/Martin Associates.

In addition, the labor trends at the management and technical levels affect each other and will intensify a number of larger staffing challenges that the health care facilities management field faces in the coming years.

"If you're a leader in health care facilities management, you search out and need those skilled people to maintain a facility or, in the case of a contractor, to construct a facility. With a shortage, that creates more headaches for you as a leader with this challenge of how to maintain an efficient, pleasing, healthy environment when you don't have the people you need to do that," Adams says.

Adams also points out that one of the traditional paths to a leadership role is a move from a technical position into a management one. As a result, a shortage of technical workers in the pipeline will lead to the longer-term problem of leadership vacuums in health care organizations.

Recruiting challenges

Recruiting has changed as the field of health care facility management has evolved. The job used to mainly involve managing tradespeople and contractors, says Gosselin. Today, however, facility managers wear many hats, and they need skills and experience in everything from business and finance, real estate and planning to construction, maintenance and operations. As a result, finding the right candidate for a position who brings that broad skill set has become challenging.

Nolan Harp, CHFAM, vice president of facilities operations integration at Advocate Aurora Health in Milwaukee, describes a similar trend with technical workers. "The skill sets that we're needing in facilities operations, and especially at the front line, are much more technology based, and they require higher levels of and more continuous training," he says. "Without those kinds of programs out there, that really hurts us when we try to go out and recruit. We don't see qualified people out there like we used to."

The entry points into health care facilities jobs are multiple and diverse, and this also poses recruiting challenges. Particularly for managerial positions, candidates come from an array of backgrounds, including safety, construction, design, architecture, infection

control and environmental services. Human resources departments sometimes struggle to find the right candidates because health care facilities jobs are complex and candidates need a wide range of skills and competencies.

Recruiting for technical jobs is also complicated by the fact that the health care facilities sector is competing with other sectors to attract workers. Higher sal-

Adams adds that succession planning also plays an important role in recruiting by providing a big-picture view of an organization's future labor needs and the pathways to bring in those new employees. "Succession planning is not just how do we replace what we have. It's also about what we really need. What are our needs now and for the future — because that's changing. What do we need now going forward that may look different



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— Tim Adams, ASHE

aries in subcontracting and entrepreneurial ventures can draw candidates away, and the less straightforward career paths into health care also make recruiting more difficult.

Filling the pipeline

Lisa Walt, a researcher at ASHE, says no one disputes the fact that many workers in the health care facilities field will be leaving in the coming years and that an influx of new talent is needed to avoid a labor shortage. But, she says, many of the observations about labor trends are anecdotal, and a slew of questions remain unanswered. "Where are people retiring? What jobs are going to be open? Who do organizations want to fill those jobs? And what are the skills of workers going to look like?" she asks.

Walt says ASHE members have reported that workforce development and recruiting are primary concerns, and the organization is committed to pursuing projects that will provide in-depth insight into these issues. "What we're going to be doing is collecting hard data that identifies what the holes are, what the needs are and what the mismatches are so we can start that conversation and be prepared to hire the next generation."

In the meantime, facility professionals and organizations serving them have been creative in developing methods of filling the labor pipeline.

Succession planning is one way a health care facility can better prepare for longer-term staffing needs. The planning process helps determine which positions will be open in the future and the specific skills and experiences required. In addition, succession planning identifies staff members within the organization who can move into those positions and the kinds of education, training and support they will need to take on those roles.

than what we had in the past, and how do we fill those roles?" he says.

But because succession planning happens internally, it helps address only part of the recruitment puzzle. When an organization promotes people upward to fill positions, it still also needs to ensure a steady flow of new candidates that starts at lower levels and continually feeds the staffing pipeline.

Internships and job training programs are one way to bring people into the health care facilities field and fill the labor pipeline. For instance, through a recently awarded Department of Labor grant, the Dallas County Community College District, with the American Hospital Association and regional partners, is launching a health care apprenticeship program initiative starting next year (see sidebar, page 24).

In Spartanburg, S.C., the Spartanburg Regional Healthcare System (SRHS) partnered with the Northside Development Group, a local nonprofit organization, to train residents in the construction trades. Jason Head, construction manager at SRHS, says it was a win-win situation: Local employers had jobs they needed to fill, and Spartanburg's Northside region had high unemployment rates and few residents with construction skills.

The Spartanburg Construction Training Program takes students through the basics of carpentry, plumbing and electrical over the course of three months. Since the program's instructors are accredited through the National Center for Construction Education and Research, each student who completes the program leaves with a certification that recognizes both classroom and on-the-job training.

 RESOURCE

 American Society for Health Care Engineering members can access a monograph, "Succession Planning: Preparing for the Future of Your Facility and Your Career," as well as a number of succession planning tools by logging on to www.ashe.org/successionplanning.



DOL grant to expand apprenticeship programs for health care field

As part of a recently announced Department of Labor grant, the Dallas County Community College District will partner with the American Hospital Association (AHA) and nine health care organizations to develop and expand health care apprenticeship programs across the country. The programs will offer employment, training and mentoring in a wide array of health care professions, including health care facilities management.

Members of the American Society for Health Care Engineering (ASHE) have reported that workforce development is one of the key issues they face. “We see this program as addressing both the needs of health care facility management in their pursuit to attract and retain talent, and to address the labor shortages, creating a pathway for folks who want training for careers in health care,” says Dale Woodin, FASHE, CHFM, vice president of professional membership groups at the AHA and interim executive director for ASHE.

The apprenticeship programs will offer a combination of on-the-job training and classroom instruction for a range of health care facility positions: facility manager, energy specialist, project manager, engineer, maintenance supervisor, architect, and director of facilities and construction. In addition, ASHE will develop health care-specific application training and functional descriptions for existing programs focusing on technical positions, including electrician, plumber and HVAC technician.

The health care facilities labor shortage is a complex issue with multiple variables, notes Woodin. “To effectively address this issue requires a comprehensive, holistic approach,” he says. “The partnership between higher education and the hospital community ensures that training programs are designed for the current and emerging skill sets that are needed, and that the experiential components of this training focus on real life applications and problem solving.”

ASHE will work to scale up and expand these programs far beyond Dallas County, and provide national credentialing to ensure consistent training and validation of skills. Program planning will take place over the course of the next year, and the health care facilities apprenticeship programs are slated to start in the summer of 2020. ■

Head describes the training program as one that has offered more than just solid construction skills to the 30 students who have completed it. They also have the opportunity to work side by side with subcontractors at the hospital, and Head tells students that the program is essentially a 12-week job interview where each day they have an opportunity to impress future employers.

And the hard work of the students and instructors is paying off. “Every single person who has completed the program has been hired prior to finishing,” Head says. “SRHS has hired four or five people directly who work at the hospital in the maintenance and construction departments. The rest have been hired by subcontractors who are desperately looking for employees as well.”

Harp also sees the potential of apprenticeship programs to produce a steady stream of skilled health care facilities workers. His organization, Advocate Aurora Health, partnered with a host of health care organizations, technical schools, and professional and service groups to form the Multi-Organizational Facilities Internship Program. The program gives young people hands-on experience, and graduates finish the program with the skills and competencies they need to start in entry-level jobs at health care facilities.

But, says Harp, more direct outreach efforts are essential to generate interest in health care facility management and to make students aware of the career opportunities. “There are fewer and fewer people interested in going into the field,” he says. “The first step is creating internship programs and outreach programs where you’re getting out into the high schools to make them aware that these careers are rewarding and they pay wages that you can support families with.”

Along similar lines, Martin believes that getting the message out about health care facilities jobs and the long-term career benefits is crucial. “The messaging to tradespeople should be strong: that there’s stability, unlike working for a subcontractor where, when the economy tanks, you might be laid off. Working at a health care facility, you’ll have a roof over your head. You’re not going to be working outside in the snow, the rain and the ice. And you’re really going to be impacting the people in your community,” he says.

Educational programs are also an important entryway into health care. The Community College of Vermont’s Environmental Studies Certification program, Kent State University’s Healthcare Facilities Certificate program, Cornell University’s Healthcare Facilities Planning and Design Certificate program, and Owensboro Community & Technical College’s Healthcare

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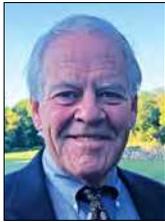
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Facilities Leadership program are all examples of academic programs that provide paths into the field. Similarly, the American Institute of Architects/Academy of Architecture for Health Student Design Challenge is an initiative that has given students exposure to the health care design field (see sidebar, page 22).

Additionally, the valuable role of vocational schools should not be overlooked, says Harp, and he urges trades partners to support these institutions. They

preparing themselves to move into the field,” Adams says. “ASHE offers online courses, quick-learning courses on specific topics and in-person courses, in addition to the ASHE annual conference and the planning, design and construction summit.”

In thinking about recruiting outside of the health care field, Adams points to the military as one example of a robust source of highly qualified candidates that could help fill the labor pipeline in the future.



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prepare students for jobs in health care facilities management, provide a clear career path and offer a steady flow of trained tradespeople.

“We have to encourage high school districts to create more opportunities for students in school, like shop classes and more hands-on training to generate the interest in our youth,” Harp says. “And help students understand there are opportunities that they can pursue and that they can develop a career without going straight to college or getting a four-year degree. They can pursue a vocational degree that will get them a good-paying wage.”

Vocational schools are important for developing labor pools for smaller health care systems and critical care facilities in rural areas. Technical workers for these types of facilities are generally local, and a lack of skilled workers in the area will lead to a labor shortage. “For front-line employees, we have to develop local talent to come into our organizations,” Harp adds. “The only way to do that is to support vocational schools.”

Even while the many pathways into health care facilities management can make recruiting challenging, they also provide a huge opportunity to attract a diversity of talent. “People working in health care might realize they want to move into a leadership role in facilities management,” Adams says. “Or they might work in facilities management outside of health care and can gain those health care skills through classes.”

Effective recruiting includes steering people into the field and highlighting the resources available to help them pursue careers in health care facilities management.

“ASHE has an abundance of educational opportunities that can help prepare somebody to move into a level of greater responsibility within their organization or help somebody outside of health care to begin

“The military does a great job of training in many areas — there are military health care facilities all over the world,” Adams says. “There’s opportunity there as folks transition out of the military. They may have been involved in the health care physical environment. Even if they haven’t, they may have had experience along the way being responsible for a physical environment or a technical environment. Those skills translate very well to working in health care.”

Looking to the future

Gosselin says he often coaches and mentors people about pursuing careers in health care facilities management. “Somebody is at one of various points: they may be young, they may be midcareer or they might be late career,” he says. “They have plenty of opportunity to continue to grow within this field, but there’s not a lot out there that tells them what to do next for a role in health facilities.”

Gosselin is hoping ASHE’s Career Development Committee will be able to provide more guidance. “The committee is starting by inventorying all the different competencies, career ladders, entry points and skills,” he says. “With an inventory, folks can look at that and say, ‘That looks like me, that’s my degree, that’s my expertise, this is where I’ve been, this is where I want to go. Let me look at this career path.’” **HFM**



Camille Fink is a freelance writer based in Oak Park, Ill. She is currently working on an ASHE monograph on health care facility management internship and apprenticeship programs, which is due to be published in 2020.