

Building **NEW MEXICO**  
*True* **TALENT**  
for the Healthcare Industry

An Analysis of the Skills, Knowledge, and Abilities  
Needed for a Comprehensive and Well-Qualified Talent Pipeline





# HEALTHCARE INDUSTRY ROUNDTABLE FUNDERS

Many thanks to the forward-looking funders who made this report possible!



W.K.  
KELLOGG  
FOUNDATION®



## Executive Summary

The Healthcare Industry accounts for one out of every five workers in Doña Ana County. There are nearly 1,000 employers, who posted 1,200 jobs in January 2021. Historically, Healthcare has been the largest, fastest-growing, and highest-paying industry on average in the county. Despite the slight dip in Healthcare employment caused by the pandemic, hiring continues at a rapid pace, with close to 800 job openings as of this writing (March 2021).

Las Cruces serves as a major medical hub for southern New Mexico and attracts patients from across the region. A full range of medical specialties are available here, which requires a highly-skilled, highly-diverse, and culturally-competent workforce to step into a comprehensive set of careers available in this industry...most which provide enormous opportunities for advancement.

In an effort to gain a clear understanding of the holistic talent needs of the Healthcare Industry's employers, The Bridge of Southern New Mexico, in partnership with the Greater Las Cruces Chamber of Commerce, convened representatives of local healthcare employers to participate in an Industry Roundtable with two goals:

- Quantify the complex needs of their workforce today and tomorrow, with greater focus on the sub-graduate and doctoral level positions
- Explore innovative approaches to meeting those needs with local talent development assets, including K-12 districts, Doña Ana Community College, New Mexico State University, and the Workforce Connections system.

Strategic workforce development is critical to the wellbeing of this industry. The cost of high turnover rates in healthcare is crushing. Based on an estimated industry average of \$60,000/person, the handful of employers who participated in this Industry Roundtable are collectively incurring \$58.5 million in annual turnover costs.

Key challenges have surfaced that require further exploration and innovation to address:

- The lack of utilization of the Workforce Connections system by employers for recruiting that is limiting access to local talent for employers and access to well-paying jobs with family-sustaining benefits to those recently displaced by COVID.
- The workforce board's failure to launch its Healthcare Industry Sector Strategy during the time when thousands of displaced workers could be reskilled and upskilled to take on jobs and careers in this industry.
- Systemic underproduction of skilled talent in a host of occupations within the industry, leading employers to heavily rely on traveling skilled nursing staff.
- Specific skill gaps that directly contribute to quality patient care.
- General lack of awareness of the breadth of careers in this industry.
- COVID's impact on clinical experiences in education pathways.
- Impact of the nursing shortage both here and nationwide.

We must think bigger and leverage the shift to remote learning to deliver more instruction to more candidates with more options than ever before. We must leverage every federal and state dollar intended to address the shortfalls in the healthcare workforce to skill, reskill, and upskill youth, young adults, and disconnected and lower-skilled workers to maximize the supply of qualified workers and meet the demand that is not going away anytime soon.

# Building the “Bridge” from Education to Opportunity in Doña Ana County’s Healthcare Industry

## INTRODUCTION

The Healthcare Industry accounts for one out of every five workers in Doña Ana County. There are nearly 1,000 employers, who posted 1,200 jobs in January 2021. Historically, Healthcare has been the largest, fastest-growing, and highest-paying industry on average in the county. Despite the slight dip in Healthcare employment caused by the pandemic, hiring continues at a rapid pace, with close to 800 job openings as of this writing (March 2021).

Las Cruces serves as a major medical hub for southern New Mexico and attracts patients from across the region. A full range of medical specialties are available here, which requires a highly-skilled, highly-diverse, and culturally-competent workforce to step into a comprehensive set of careers available in this industry...many providing enormous opportunities for advancement.

The two major hospitals (Mountainview Regional Medical Center and Memorial Medical Center) remain among the largest private-sector employers in the county, and a host of new providers and services, including a new hospital, are coming online all over the Las Cruces area.

The major components of the healthcare talent development pipeline can be found both in the county and the larger Borderplex region: Career and Technical Education in high school and college, certificate, two-year, four-year, and master’s degree programs, as well as doctoral programs at the Burrell College of Osteopathic Medicine and Texas Tech in El Paso.

In an effort to gain a clear understanding of the holistic talent needs of the Healthcare Industry’s employers, The Bridge of Southern New Mexico, in partnership with the Greater Las Cruces Chamber of Commerce, convened representatives of local healthcare employers to participate in an Industry Roundtable with two goals:

- Quantify the complex needs of their workforce today and tomorrow
- Explore innovative approaches to meeting those needs with local talent development assets, including K-12 districts, Doña Ana Community College, New Mexico State University, and the Workforce Connections system.

Participants in the Roundtable included:

- Chair, Benjamin Woods, Mountainview Regional Medical Center
- Melanie Fatuesi, Mountainview Regional Medical Center
- Laura Pierce, Memorial Medical Center
- Todd Stuve, Memorial Medical Center
- Iris Sandoval, Mesilla Valley Hospital
- Brandon Masters, Rehabilitation Hospital of Southern New Mexico
- Dr. Michael Law, DDS, Warren & Law Dental, LLC
- Abel Covarrubias and Celina Waller, Aprendamos Family of Services

Leveraging elements of the U.S. Chamber of Commerce’s Talent Pipeline Management approach and the license for a survey tool shared with New Mexico State University, The Bridge conducted a survey of the Roundtable members and then distilled the data to create actionable intelligence.

What follows is a summary of the findings. Key challenges have surfaced that require further exploration and innovation to address:

- The lack of utilization of the Workforce Connections system by employers for recruiting that is limiting access to local talent for employers and access to well-paying jobs with family-sustaining benefits to those recently displaced by COVID.
- The workforce board’s failure to launch its healthcare industry Sector Strategy during the time when thousands of displaced workers could be reskilled and upskilled to take on jobs and careers in this industry.
- Systemic underproduction of skilled talent in a host of occupations within the industry, leading employers to heavily rely on traveling skilled nursing staff.
- Specific skill gaps that directly contribute to quality patient care.
- General lack of awareness of the breadth of careers in this industry.
- COVID’s impact on clinical experiences in education pathways.
- Impact of the nursing shortage both here and nationwide.

## **ABOUT THE EMPLOYERS AND THEIR JOBS**

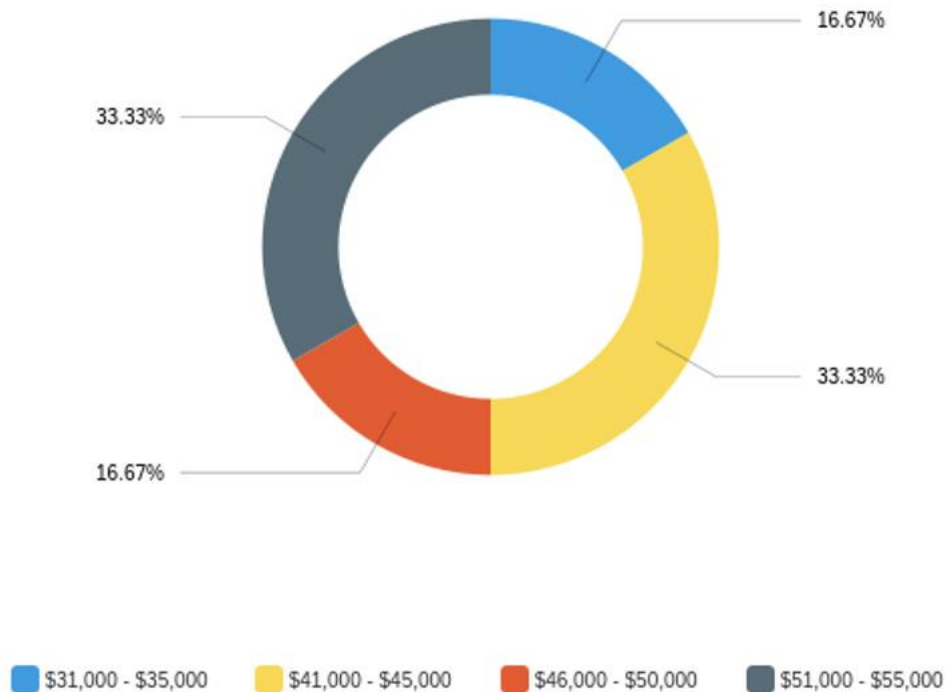
Roundtable members represent a workforce of almost 3,471 people at the time of the survey with the potential of hiring 950 new employees annually. The two hospitals account for 3,000 employees between them, but these are only five of the nearly 1,000 individual employers in the county.

The workforce of these employers is broken nearly in half between licensed and non-licensed professionals and staff:

- 954 Licensed Medical Professionals
- 756 Clinical Support Staff
- 242 Administrative and Support Staff

Average wages for the industry fall just below and well above the county’s median income of \$40,973.





*“We have everything from minimum wage workers to people who make more than \$100,000,” said Laura Pierce.*

The hospitals describe themselves as, “little cities,” needing everything from the higher-level surgical and medical staff to technicians, skilled maintenance workers, billing and office staff, cafeteria workers, and more.

This industry offers a good range of family-sustaining benefits for its employees, including tuition assistance, which helps train up well-qualified current employees to take on higher-levels of care and higher-skilled, higher-paying opportunities.

*“We’ve had several employees that get bachelors’ degrees while they work here,” said Pierce.*

Both Memorial and Mountainview hospitals offer their current workforce significant support in advancing their education, which, in turn, increases the employee’s value and earning power in the organization.

Members of the Roundtable report hiring is primarily for replacement positions and range in age from 18-45 years. The group reported receiving 750 applications per year, but those applications are not always well aligned to the jobs.



*“When you are trying to replace someone with mammography experience, for example, there are a small number of people with the experience and skill set for that type of job,” said Ben Woods. “It’s pretty easy for them to get that type of job elsewhere. Anyone with high-end experience is tough to find.”*

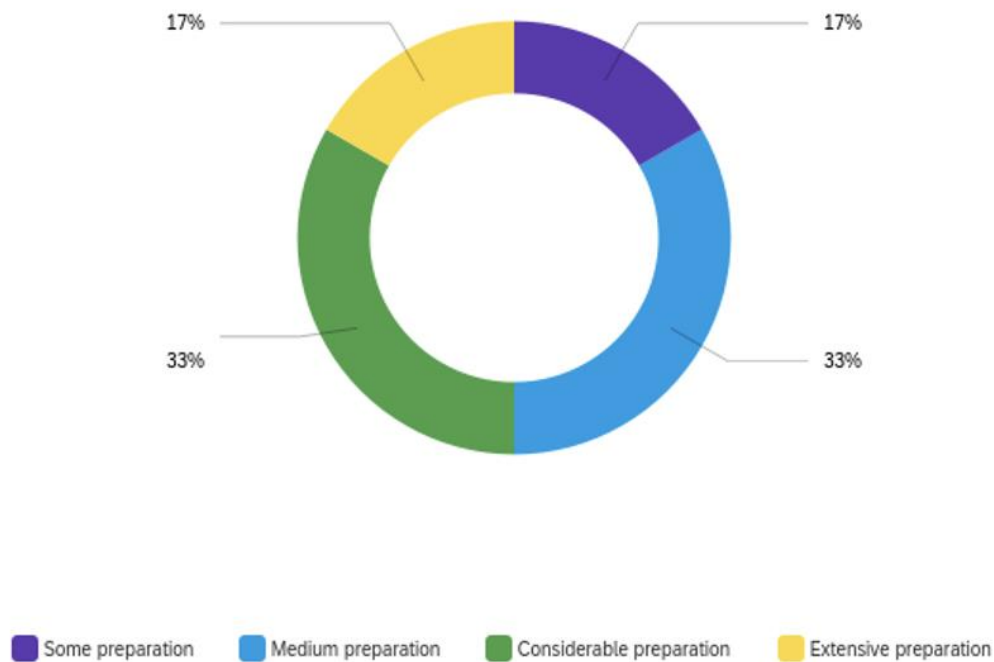
Brandon Masters said they struggle with nursing and therapist shortages. Pierce reported receiving numerous applications from people who don’t have the training and are not qualified for the jobs for which they are applying.

Mesilla Valley Hospital had to bring on new employees to assist them with patient care in the pandemic.

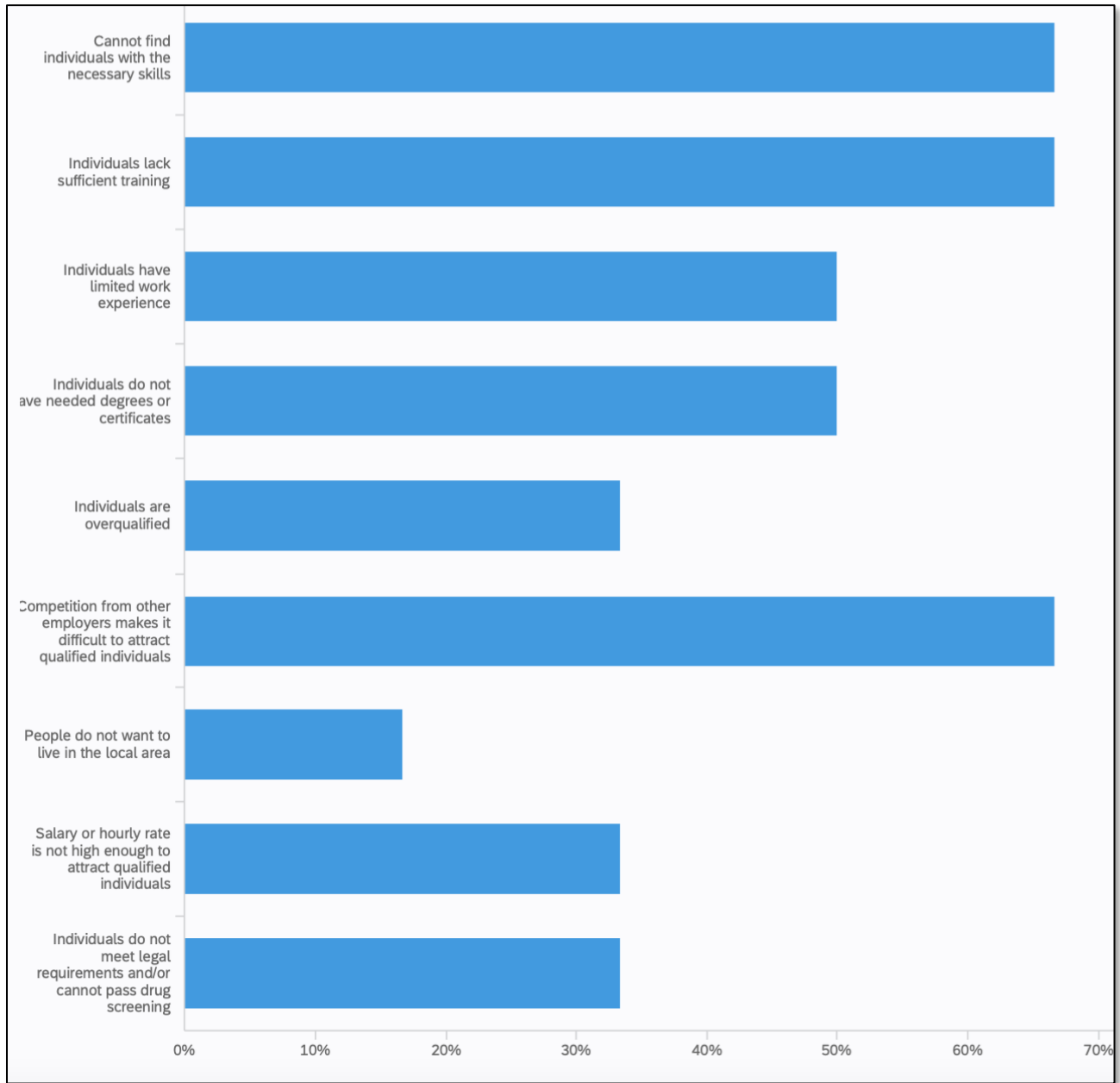
*“We’ve had to hire new staff because of COVID,” said Iris Sandoval. “The market for members of our clinical team is very small. We need nurses like everyone else, but behavioral health is not always someone’s first choice.”*

The addition of the new Three Crosses Hospital has placed an additional strain on the workforce, as everyone’s competing for the same labor and talent pool, which is one more reason it’s critical to grow the talent pool as quickly as possible.

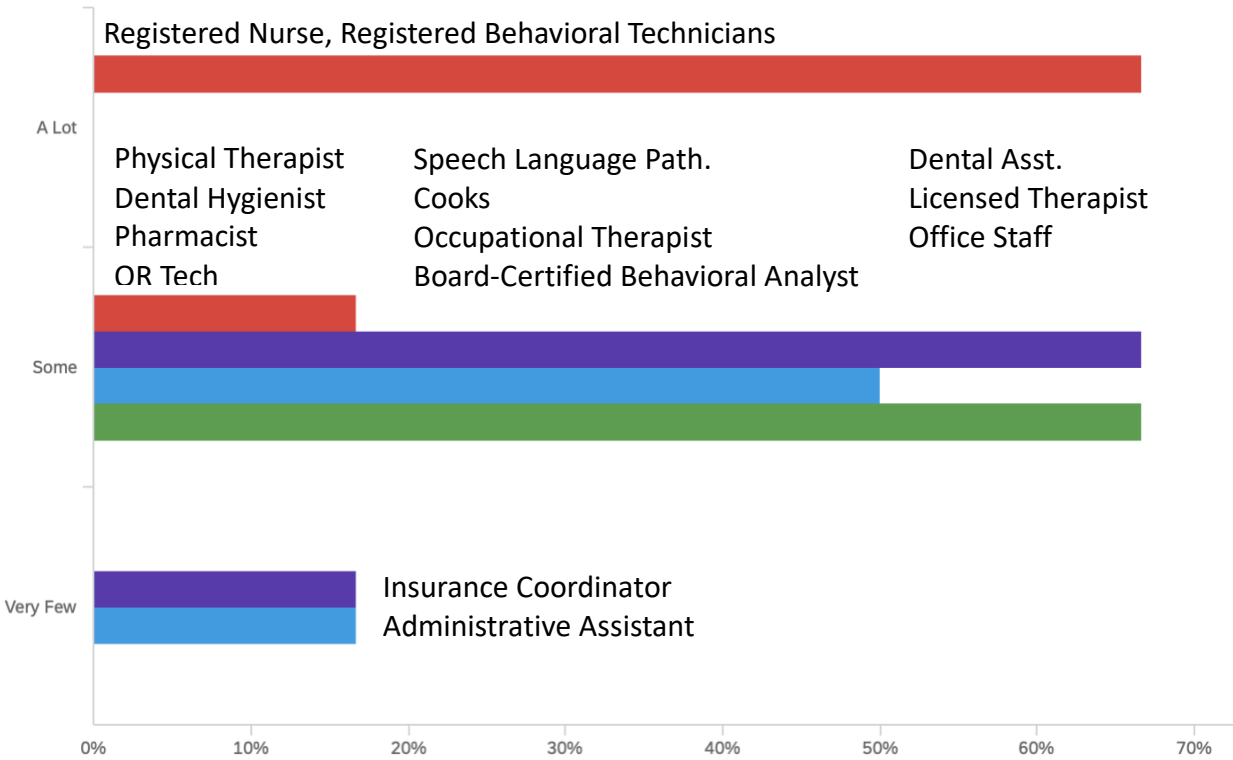
Some level of preparation is required for these jobs, which truly can have life-and-death consequences:



The majority (67%) reported struggling to find qualified applicants for a host of reasons:



Roundtable members were also asked to identify which were the hardest jobs to fill and how many of those jobs are there in the workforce. Students preparing for these jobs will have great opportunities for employment:



*“We’ve had a hard time retaining an insurance coordinator,” Covarrubias said. “You need someone who’s used to dealing with insurance and good at customer service. The pool of applicants really hasn’t been there.”*

He also identified speech language pathology as a high need for his organization. *“NMSU can only produce about 20, but 150 may apply.”*

Looking at the top 50 occupations in Doña Ana County, 23 (virtually half) are directly related to Healthcare and have significantly low levels of local talent to fill those positions.

## Area Profile for Doña Ana County, NM

### Number of Candidates and Openings for Jobs by Occupation Table

The table below shows the occupations with the highest job openings advertised online in Doña Ana County, NM on March 7, 2021

Rank	Occupation	Median Wage	Job Openings	Potential Candidates	Potential Candidates Per Job Opening
1	Registered Nurses	\$73,180	412	59	0.14
3	Physicians and Surgeons, All Other	N/A	107	3	0.03
4	Customer Service Representatives	\$29,660	75	230	3.07
5	Personal Care Aides	N/A	60	49	0.82
6	Medical Assistants	\$30,640	50	46	0.92
8	Nursing Assistants	\$28,250	46	43	0.93
10	Occupational Therapists	\$81,600	31	0	N/A
11	Physical Therapists	\$90,180	31	0	N/A
12	Licensed Practical and Licensed Vocational Nurses	\$48,560	29	11	0.38
15	Emergency Medical Technicians and Paramedics	N/A	26	11	0.42
18	Nurse Practitioners	\$111,720	22	8	0.36
20	Medical and Health Services Managers	\$106,320	20	14	0.70
21	Respiratory Therapists	\$58,040	19	0	N/A
28	Physician Assistants	\$119,340	14	0	N/A
31	Surgeons	N/A	13	0	N/A
33	Family and General Practitioners	\$146,320	12	0	N/A
36	Speech-Language Pathologists	\$71,760	12	0	N/A
39	Pharmacists	\$128,680	11	0	N/A
40	Respiratory Therapy Technicians	N/A	11	0	N/A
43	Medical and Clinical Laboratory Technologists	N/A	10	3	0.30
45	Physical Therapist Assistants	\$53,140	10	3	0.30
46	Substance Abuse and Behavioral Disorder Counselors	N/A	10	0	N/A
49	Clinical, Counseling, and School Psychologists	\$66,560	8	0	N/A

Job Source: Online advertised jobs data

Candidate Source: Individuals with active résumés in the workforce system.

Wage Source: NMDWS, Occupational Employment Statistics program

Downloaded: 03/08/2021 8:07 AM

This industry, perhaps more than any other, plays a very active role in training up their future workers – from high school job shadowing to doctoral residencies. They provide work-based learning through:

- Therapy observation/shadowing
- Internships
- Clinical rotations with affiliated college programs
- Job shadowing
- Practicums

Woods said, *“We have had almost all of our new hires in our facility come from working in a capstone course (as part of their degree program) as an “on-the-job” interview.”*

COVID has impacted this role for some, but not others. Numerous occupations in healthcare require in-person clinical experiences for their workforce, and this was already a barrier to growth of training programs. Survey respondents said:

- COVID has greatly affected our ability to provide clinical experiences for students - PPE is always a concern and must be conserved. Also, we have to keep the number of people who enter the building, as well as who enters a patient area, as low as possible to help control the spread.
- (We) have been able to continue clinical experiences with only some limitations on duration and timeframe.
- It has limited our ability to bring in students to observe.
- We currently have no RN rotations.
- We were still able to take on practicum students during COVID.

Memorial Medical Center has tried to preserve their on-site training as much as possible.

*“We prefer to have our interns physically on site,”* said Pierce. *“Part of what I watch is that you have to be here on time at 7 a.m. You have to interact with people. There are a lot of things in the experience that can’t be done virtually. This is important because the majority of students will later be employed by us.”*

Stuve said, *“We’re taking a hybrid approach. Students are working only with non-COVID patients. COVID patients are in an isolation area. This helps reduce the unnecessary burn on PPE (personal protective equipment) and allows our students to interact with a pool of patients in multiple programs.”*

Celina Waller said, *“Students were virtually attending trainings in occupational and speech therapy. Now, they are back in person. We have 5-7 students who are pursuing masters degrees.”*

Abel Covarrubias said, *“30% to 40% of our practicum students end up working for us full-time. They don’t just come from local schools here, but from other schools in the state and area, too. And the supervisors are eager to have them, because they (the supervisors) learn from them, as well.”*

But COVID also increased the strain on talent and the need to attract traveling staff, which comes with its challenges.

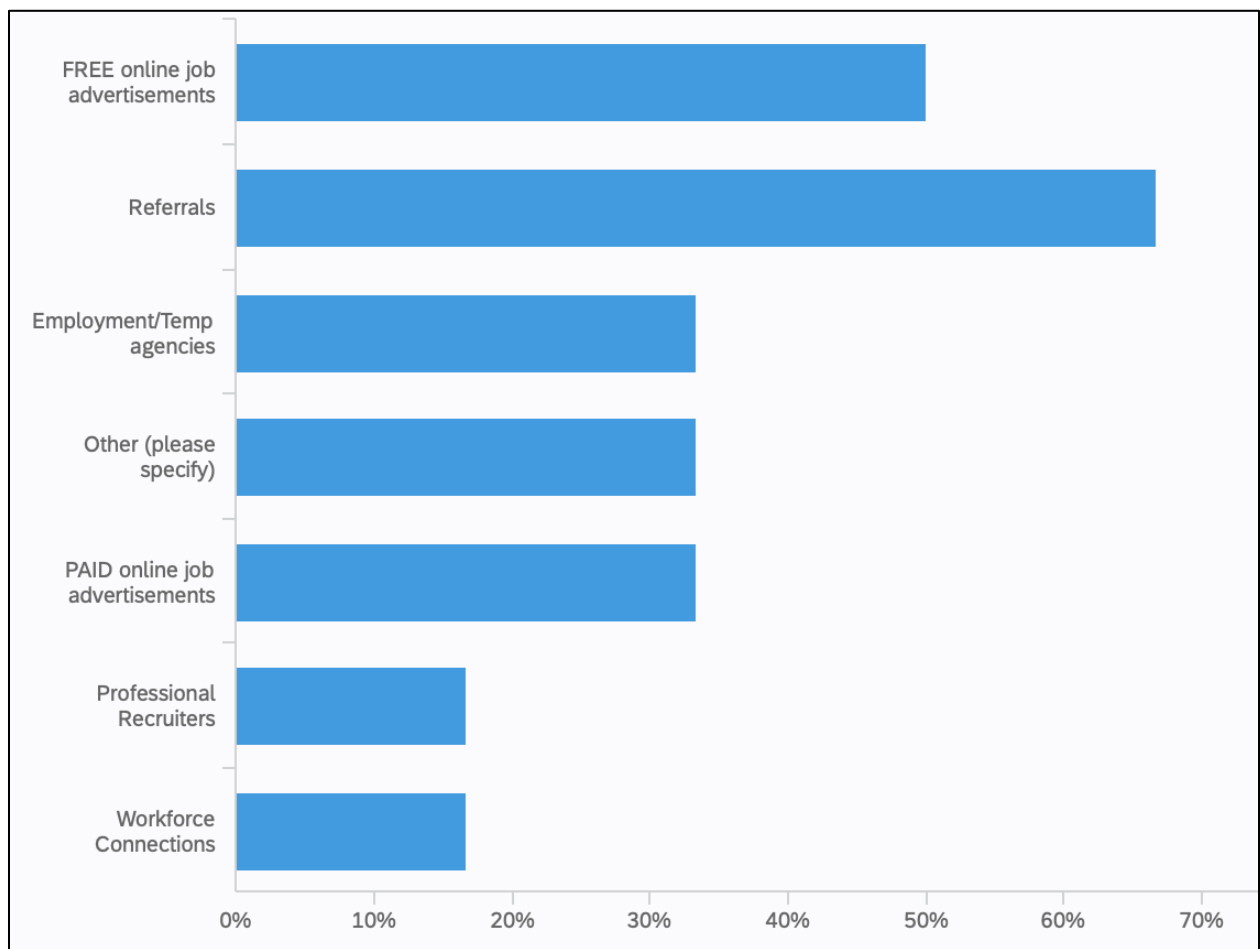
*“The demand is on skilled nursing sets,”* said Woods. *“They make twice as much or work for only six months, but for the same money. We went from no traveling nurses to now having 40-50.”*

At the same time, COVID has increased employee turnover from 17%-18% pre-COVID to 27% at Mountainview in the midst of COVID due to health concerns of older workers who chose retirement, or those who are parents of school-aged children no longer in school for learning.

*“Many left the community and went to where they had family,” Woods said.*

Based on the industry average turnover costs of \$60,000 per employee, Mountainview would have seen an increase of \$9 million in turnover costs, which would total an estimated \$24.3 million annually.

In trying to understand where this industry goes looking for future talent, there are a few Healthcare Roundtable members identified a number of methods/vehicles:



Both Mountainview and the Rehabilitation Hospital noted that their organizations offer compensation bonuses to staff members who bring in new employees, accounting for the high reliance on referrals.

Sandoval indicated that Mesilla Valley Hospital uses the online paid portals Indeed and iCIMS as recruiting platforms for the behavioral health workers.

It is notable that, despite the fact that the Southwestern Area Workforce Development Board has identified Healthcare as a priority Sector Strategy, none of these employers are utilizing the workforce system to recruit talent. This is an incredible opportunity to connect some of county's 10,000 members currently receiving unemployment benefits with in-demand jobs that may well pay more than they were earning before COVID.

## **THE SKILLS, KNOWLEDGE, AND ABILITIES NEEDED FOR SUCCESS**

Roundtable members were able to very specifically identify skills needed for the majority of jobs in these industries and the skill-levels of potential job candidates in five areas:

- Math
- Reading, Writing, and Language
- Employability
- Technology
- Digital Literacy

What emerged is a picture of the ideal candidate, as well as dramatic disconnects in the talent pipeline.



# AT-A-GLANCE ELEGIBILITY REQUIREMENTS

## Healthcare Industry

Based on 60%-100% of employers' responses, here is a comprehensive picture of what New Mexico's True Talent needs to know, and be able to demonstrate, in order to enter the health industry.

### Math:

- Calculating and using basic statistics
- Multiplying and dividing
- Adding and subtracting

### Reading, Writing, and Language:

- Reading at a reasonable speed
- Applying information that is read
- Assessing the credibility of written content
- Identifying main points from written content
- Correct spelling and grammar in writing and speaking
- Writing about a topic using supporting facts
- Producing clear writing
- Editing self-written content

### Technology:

- Using computers and computer programs
- Adapting to and learning new technology

### Digital Literacy:

- Understanding online security risks
- Using digital resources to learn new skills
- Accessing information to troubleshoot problems with technology

### Employability:

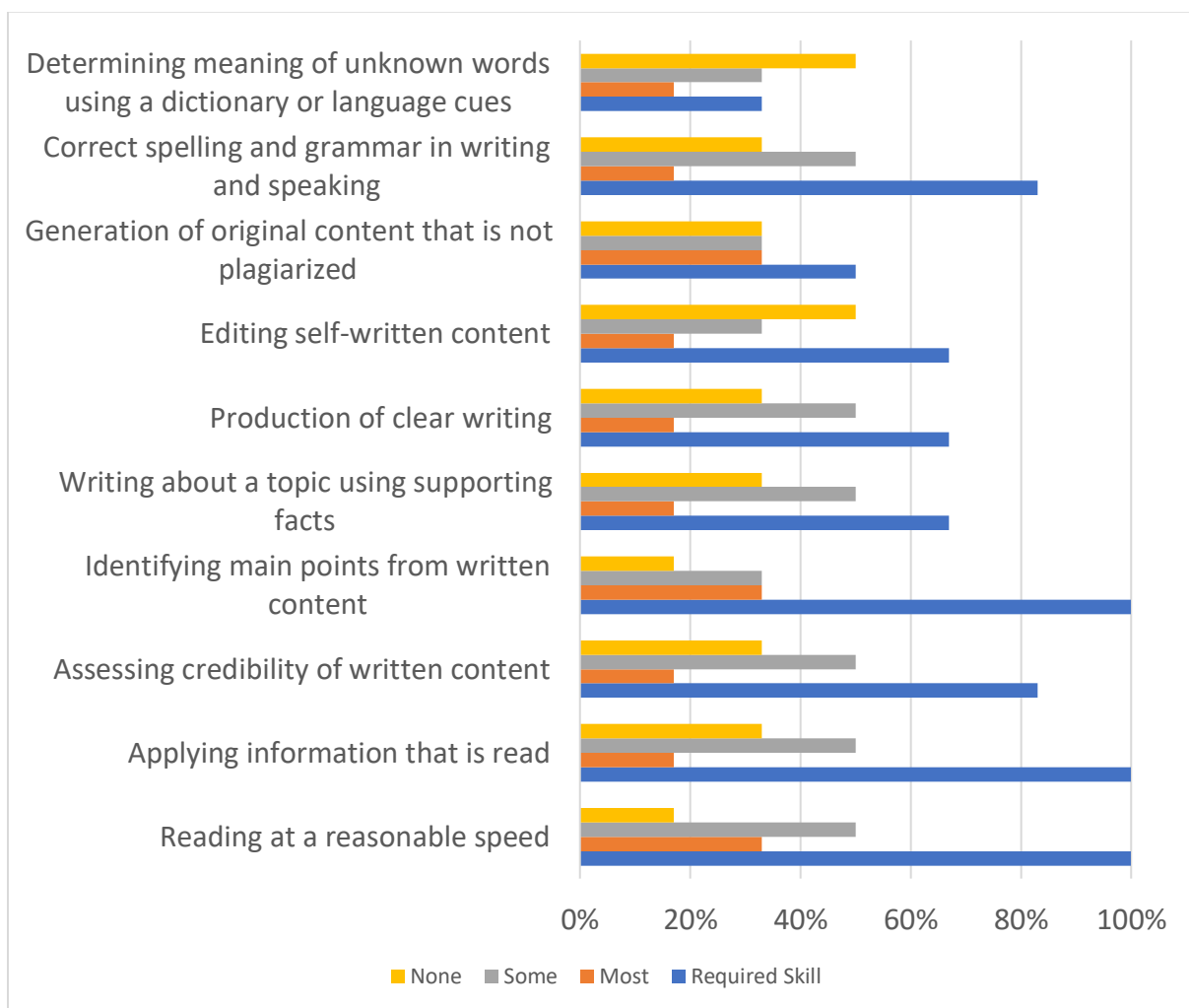
- Communication
- Enthusiasm and Attitude
- Problem Solving and Critical Thinking
- Professionalism
- Teamwork
- Initiative
- Interpersonal Skills
- Self-management
- Cultural Competence
- Customer/Patient Empathy



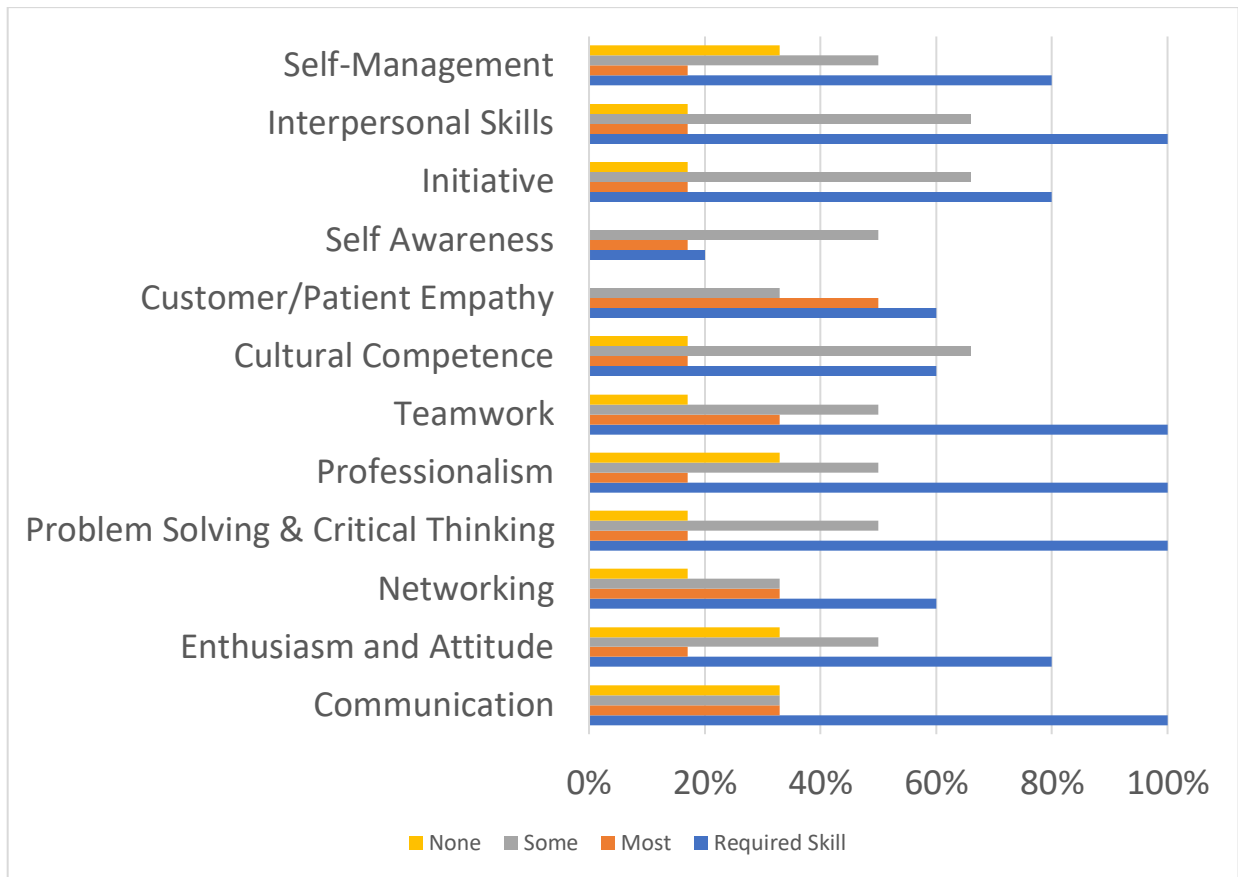
The survey revealed which skills have the most significance gaps in the talent development pipeline. Notably, when asked to rank how many candidates seem to have the skills required to be successful in their workforce, members identified “some” and “no” candidates had the skills. Not one of them chose “most” for any of the skill sets, showing that all required skills should be more intentionally integrated into programs from K-12 to post-secondary.

Of all five skill sets, the largest gaps were in Reading, Writing, and Language Skills and Employability Skills. (The graphs mapping the gaps in the other three skill categories can be found in the Appendix.)

## Reading, Writing, and Language Skills



## Employability Skills



What’s clear to see is how these skill sets are tied together in a medical environment. A significant amount to information sharing through written and computer communication is critical to the wellbeing of patients. Healthcare is a technical field. Writing in this field is technical in nature. Clarity in spelling and grammar and the ability to understand and act on information being read is core to ensuring patient care.

Pierce said, *“We are graded in evaluating our outcomes, including the patient experience. The underlying denominator is communication. Communication ensures your safety, in rigor and tools for orders given, and handoffs between multiple people to make sure the handoff is safe.”*

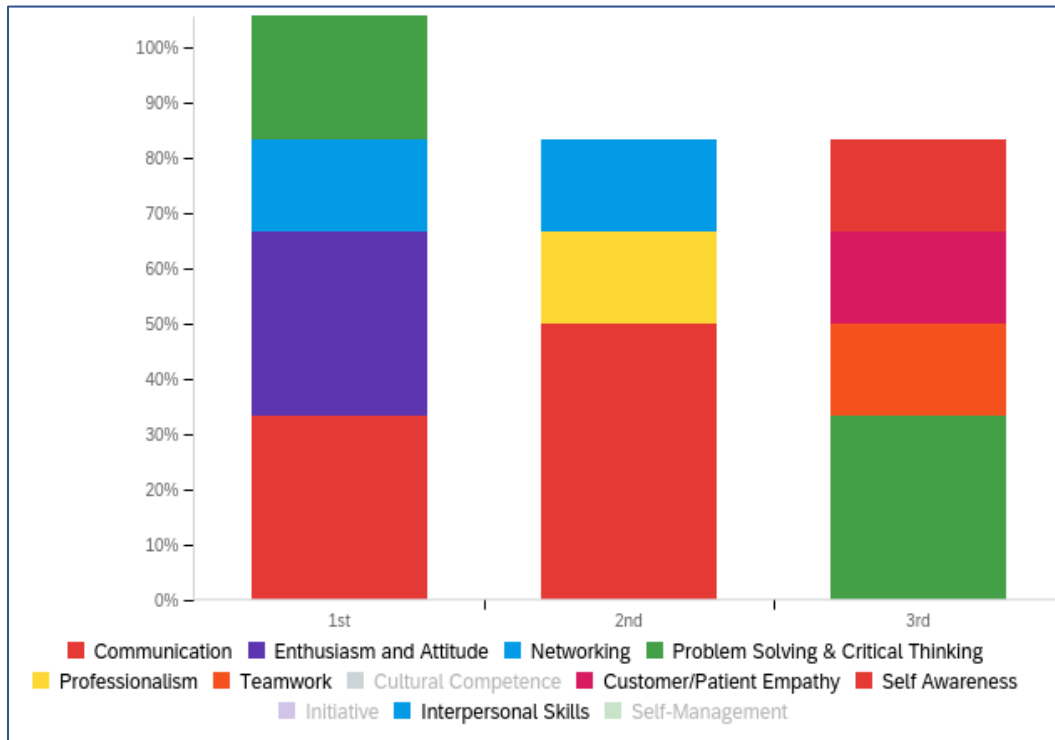
Separately, one of the survey respondents said, *“Resumé and interview readiness is lacking in high school grads as well as college grads.”*

Woods observed, *“Individuals fail to represent themselves well in interviews. Someone needs to work with them to put themselves in a place for a first or second interview.”*

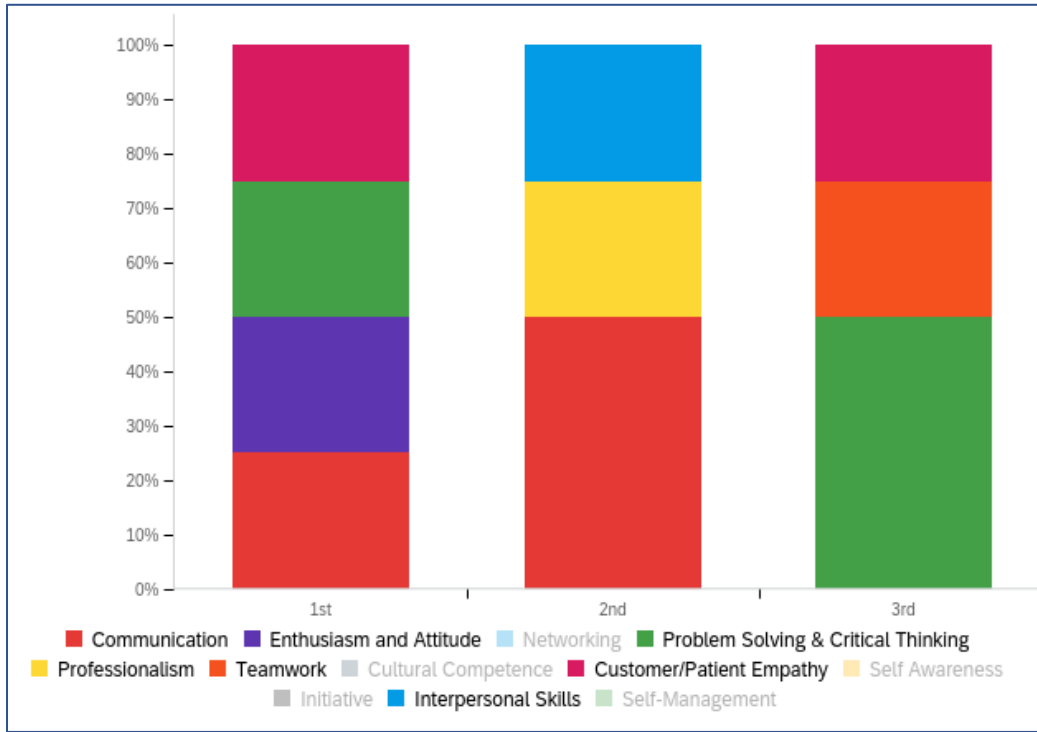
Covarrubias and Waller felt candidates were fairly well prepared, except for those who apply for administrative support staff. They didn't feel those candidates had the appropriate math and reading skills to be effective in the job.

Respondents were also able to rank the top 3 skills in each category. Following is a breakdown of all five skill sets, starting with Reading, Writing, and Language and Employability Skills.

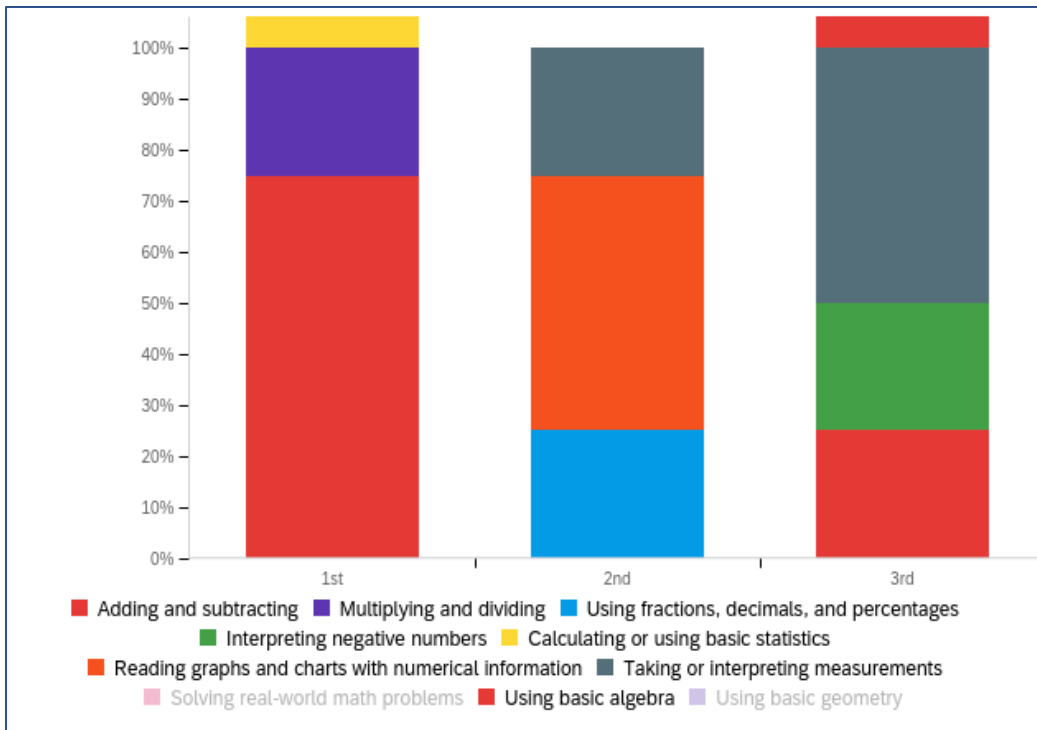
### Reading, Writing, and Language



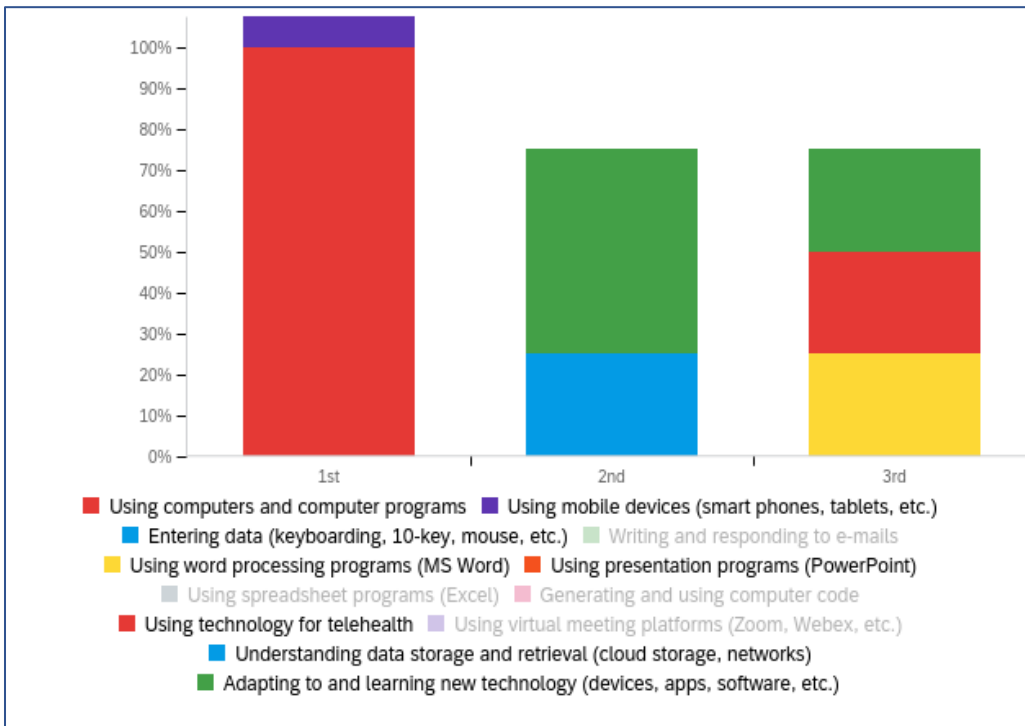
## Employability Skills



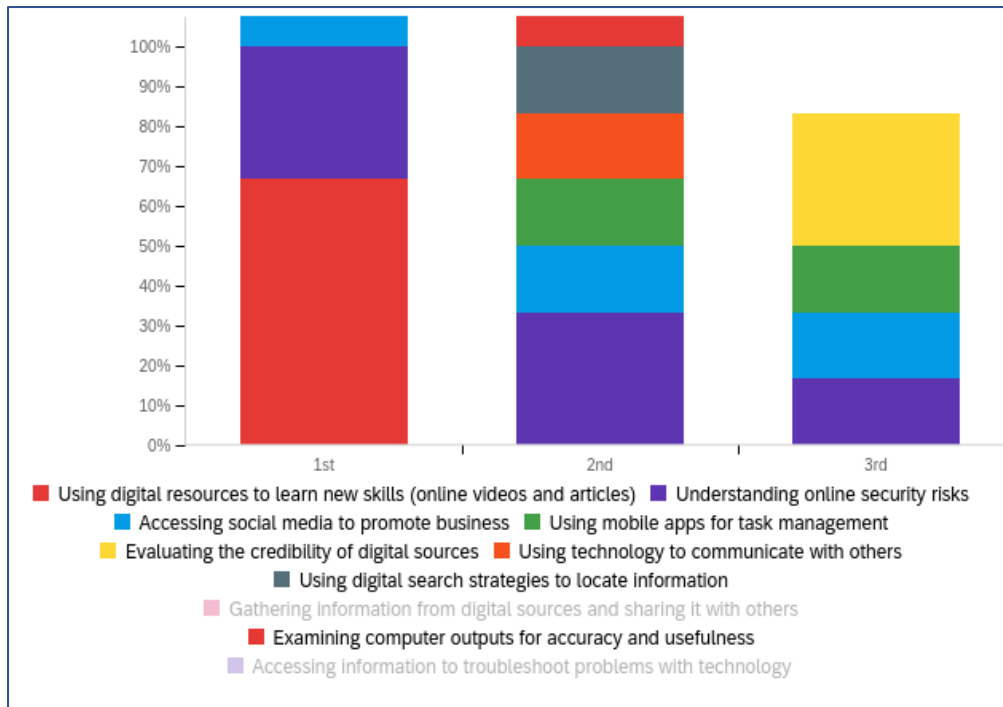
## Math Skills



## Technology Skills



## Digital Literacy



Survey respondents identified the growing importance of technology and digital literacy skills in the healthcare sphere:

- Ability to learn health electronic documentation systems
- Better typing skills
- Cross-platform learning (i.e. knowing PC and Mac)
- Typing seems to be going by the wayside. The two-finger, hunt-and-peck will not cut it
- Software that allows for patient care
- Use of Microsoft Teams

Both Pierce and Stuve commented on the failure to teach keyboarding to students, which benefits them both while they are students in remote learning environments and in their future careers.

*“Keyboarding is missing. If they can’t use a keyboard with both hands, they will be at a tremendous disadvantage,” they said.*

Respondents indicated their success in the next five years would be very much tied to technology shifts:

- Adaptability to technology, telehealth
- Our industry is constantly changing both technologically, as well as technique-wise.
- Medical Technology

Woods noted the growth in telehealth during COVID, which will place an increasing emphasis on technology and digital literacy skills for healthcare workers.

*“We have thousands of patient interactions occurring via telehealth now. We help patients figure out how to use technology to communicate with their physicians. And the physicians are finding it’s actually better for them and the patient,” he said.*

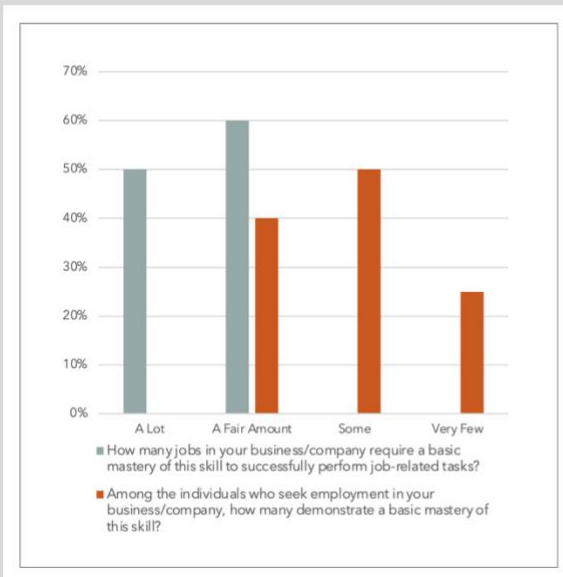
Masters said they are using telehealth for psychiatric support.

One respondent tied numerous skillsets together in this comment:

*“As Baby Boomers retire and Gen X and Millennials move up, the Millennials are lacking a lot of basic human communication skills. They are having disagreements through text messages and emails, rather than face-to-face, which is how conflict resolution should be handled. They need a level of maturity and an understanding of how to respect people in the workplace.”*

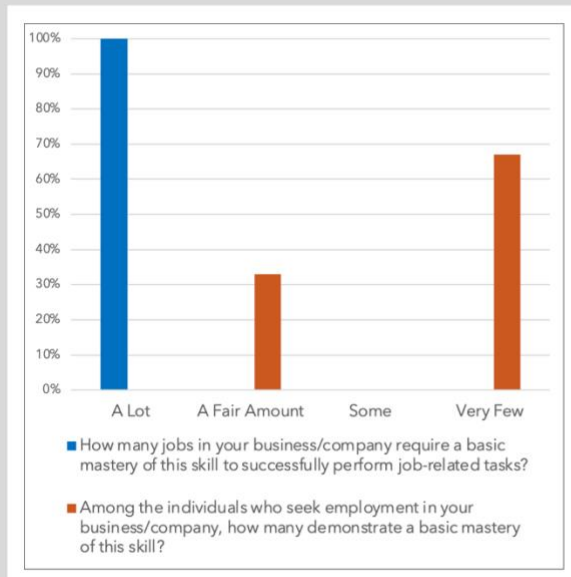
When asked about other skills sets relevant to the industry, Roundtable members indicated a misalignment between the skills they need and the skills candidates seemed to have.





### What other skills are required to perform job-related tasks in your business/company? Skill 1

- Safe Patient Handling - patient transfers
- Being able to speak and relate to patients. This includes being well-spoken.
- Answer, make calls and communicate on a business phone - it is a dying art
- Physical stamina



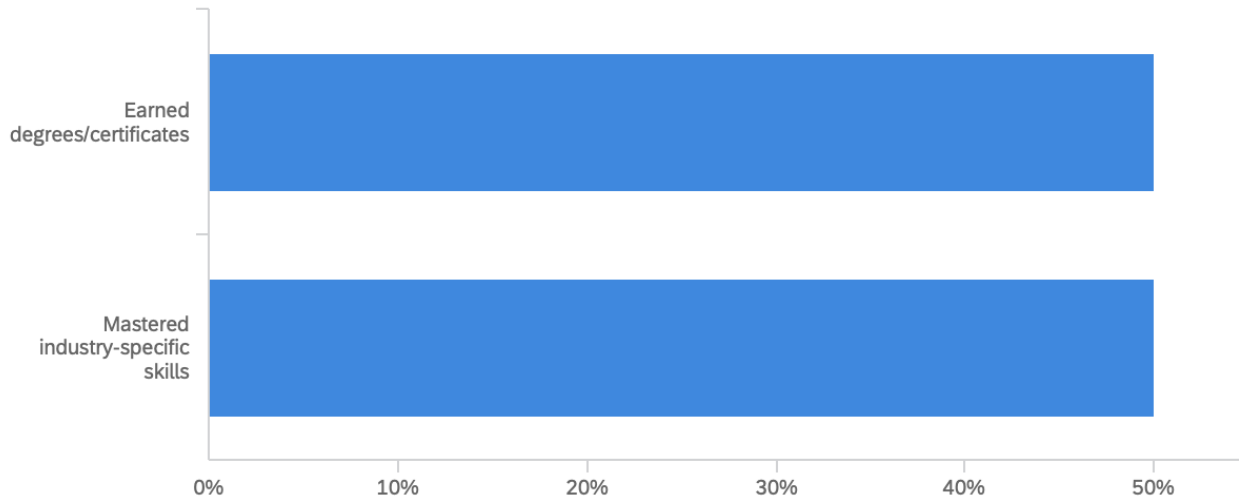
### What other skills are required to perform job-related tasks in your business/company? Skill 2

- Being an all-around hard worker, willing to work, and not only doing the bare minimum.
- Typing correctly

## DEGREES, SKILLS, AND EXPERIENCE

Healthcare is distinct from other industries in our area. There is a much greater confidence among employers that certificates and degrees will ensure some level of performance success, likely due to the licensing tests that accompany the completion of a degree.

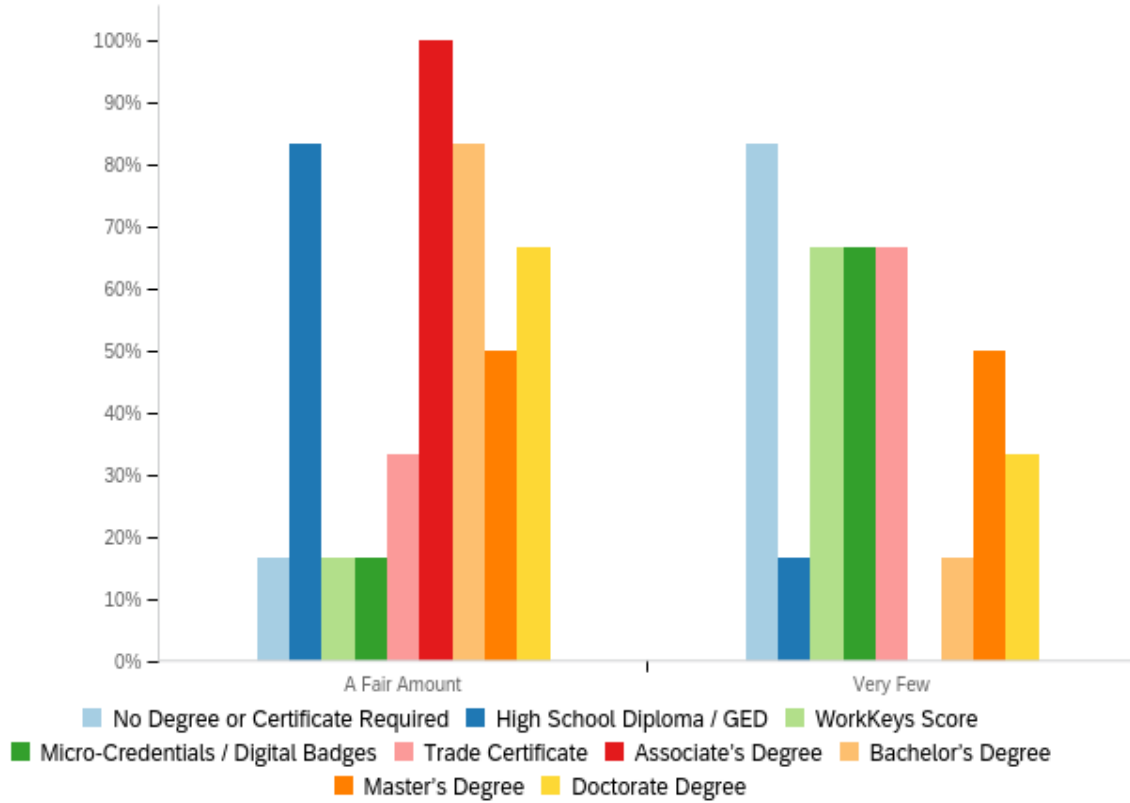
When asked to choose between credentials and skills, respondents were even on which was a stronger indicator of job performance:



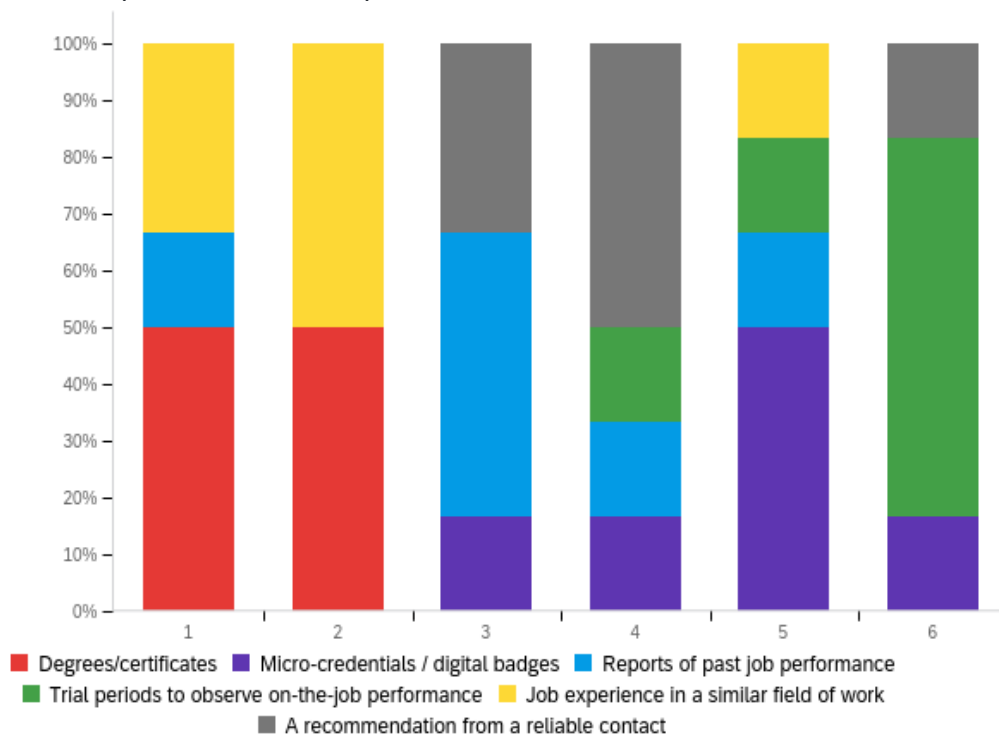
Respondents indicated how those with credentials/degrees differed from those without:

- More job ready, able to complete higher level clinical tasks and direct patient care
- It depends on the position being sought; obviously a dentist needs a DMD or DDS, a hygienist needs a degree in hygiene, assistants however don't need a degree or certificate to start work but would need certain certificates down the road to perform different procedures. Front office may and may not need a degree or certificate.
- Those who give patient care and those who do not.
- A degree gives them the ability to apply for management, it also comes with a higher salary, as opposed to others hired in the same position without a degree.
- Problem-solving pertaining to direct patient care.
- They tend to be better spoken than those without.
- Desire to progress professionally.
- They differ in the way they write, speak, and communicate with clients and staff than those who typically do not have those degrees or certificates.

Degrees and certificates do serve as an entry way for jobs in this industry. Respondents indicated where varying levels of credentials are in highest demand. Least valued are those with microcredentials, Work Keys scores, trades certificates, and no degree.



In evaluating how they assess skills in candidates, they clearly balance degrees and skills. Ranked from most important to least important:



Roundtable members explained the reasoning behind their responses:

- Most clinical positions require specific licenses and certifications that are necessary to complete job functions (Therapy & Nursing)
- For assistants, some of the best dental assistants I have worked with did not go to school for dental assisting, they learned on the job.
- Many of our positions are required to have professionals with degrees in them, such as RNs or X-Ray Techs, Respiratory Therapist, Pharmacist, etc. The degree is the minimal requirement to be considered and is critical and necessary for employment, but in no way indicates future job performance. We are always hopeful that with the education and professional license that they indeed have basic skills mastered, sadly not always the case.
- Someone doesn't have to have a degree to have the experience required.
- Most of our positions have to hold a certification, degree, or state licensure. Most of these positions at minimum require a Bachelor's Degree, while there are a few who need Masters or Doctoral degrees in order to provide the services we offer to clients.

*“We work in a highly litigious environment,” explained Pierce. “We have to have staff with degrees and certificates to hold up that this entity has these capabilities.”*

Roundtable members were able to identify the degrees and certificates that have the greatest value. One member indicated that their hospital continues to pay for advanced degrees and have a high number of people pursuing them.

Bachelor's Degrees:

- Nursing (by far the most requested)
- Physical Therapy
- Business Management
- Occupational Therapy
- Speech Therapy
- Dental Hygienist
- Healthcare Administration
- Medical Technologist
- Family and Consumer Science
- Family and Child Science
- Psychology
- Public Health
- Social Work

Associate's Degrees:

- Nursing (by far the most requested)
- Nursing Assistant
- Dental Assisting
- Dental Hygienist
- Radiology
- Insurance Billing Coordinator
- Medical Lab Assistant
- Respiratory Therapist
- General Studies
- Business
- Psychology
  
- Radiology Certification
- Bookkeeping Skills
- Phlebotomy

Trade and Skill-Based Credentials:

- Certified Nursing Assistant

- Insurance Billing Experience
- Certified Medical Assistant
- Operating Room Tech
- Chairside Experience
- Receptionist
- Admissions Representative
- Administrative Assistant
- Dental Assisting
- Front Office Clerical Staff
- Environmental Services
- Cook/Dietary
- Housekeeper
- Admissions Clerk
- Administrative Assistant
- Referral Authorization Coordinator
- File Clerk
- Maintenance Coordinator

Top 5 Jobs for Those with HS Diploma/GED:

- Patient Care Tech

Realizing that thousands are unemployed in the county right now, Roundtable members were asked to identify if they would consider hiring someone from another industry who may have transferrable skills into healthcare.

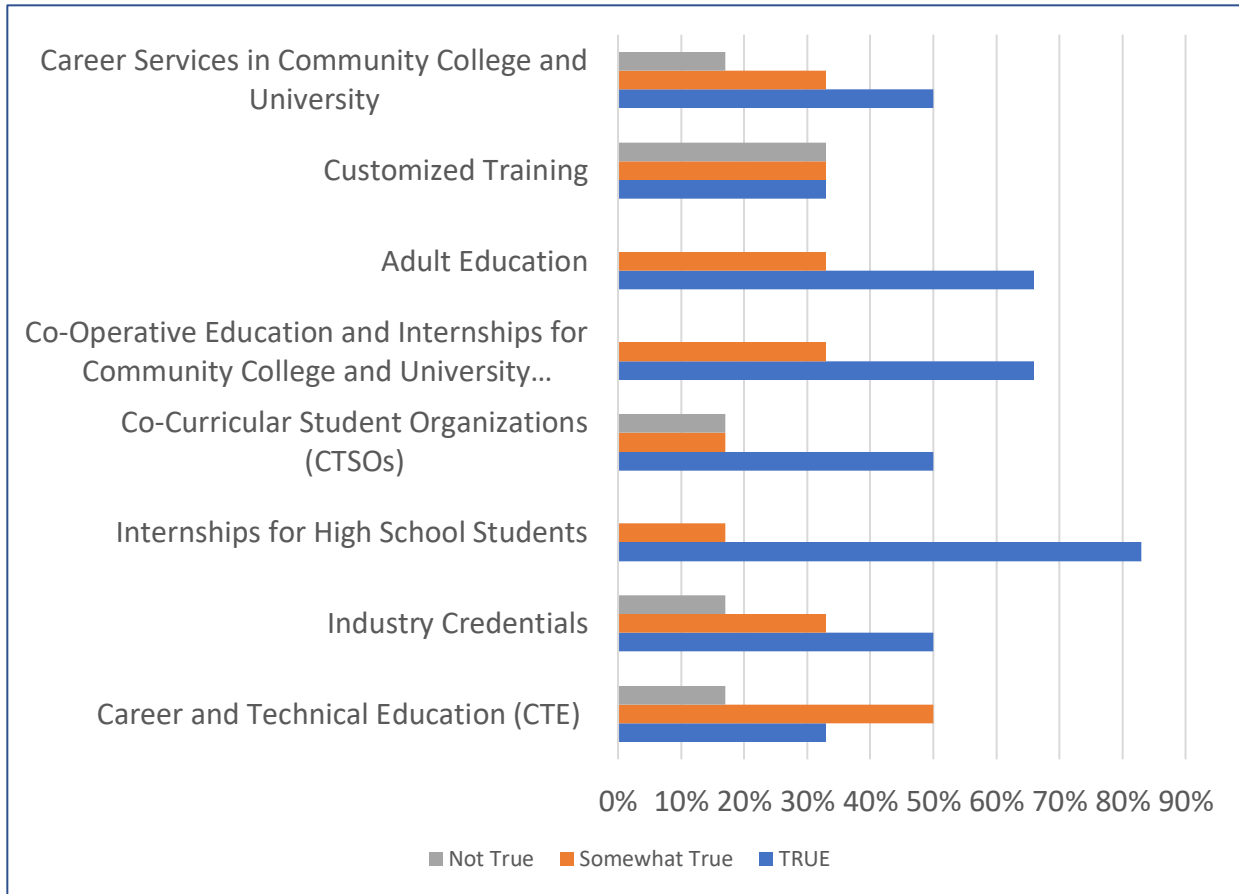
- Yes - Customer service, other types of healthcare. Primarily for entry-level positions like Patient Care Technician, Housekeeping, Cook/Dietary Aide, etc.
- Possibly collections or insurance billing individuals
- We need individuals who can show up daily and want to be in the workforce - we always have to train.
- CNA's can be Mental Health Techs. Other than that, Mental Health is very specialized.

Many of the unemployed do have the employability skills valued by employers and could possibly upskill and/or reskill to take on the abundance of opportunity in this industry. DACC and Workforce Connections hold the keys to effort coming to fruition in our county.

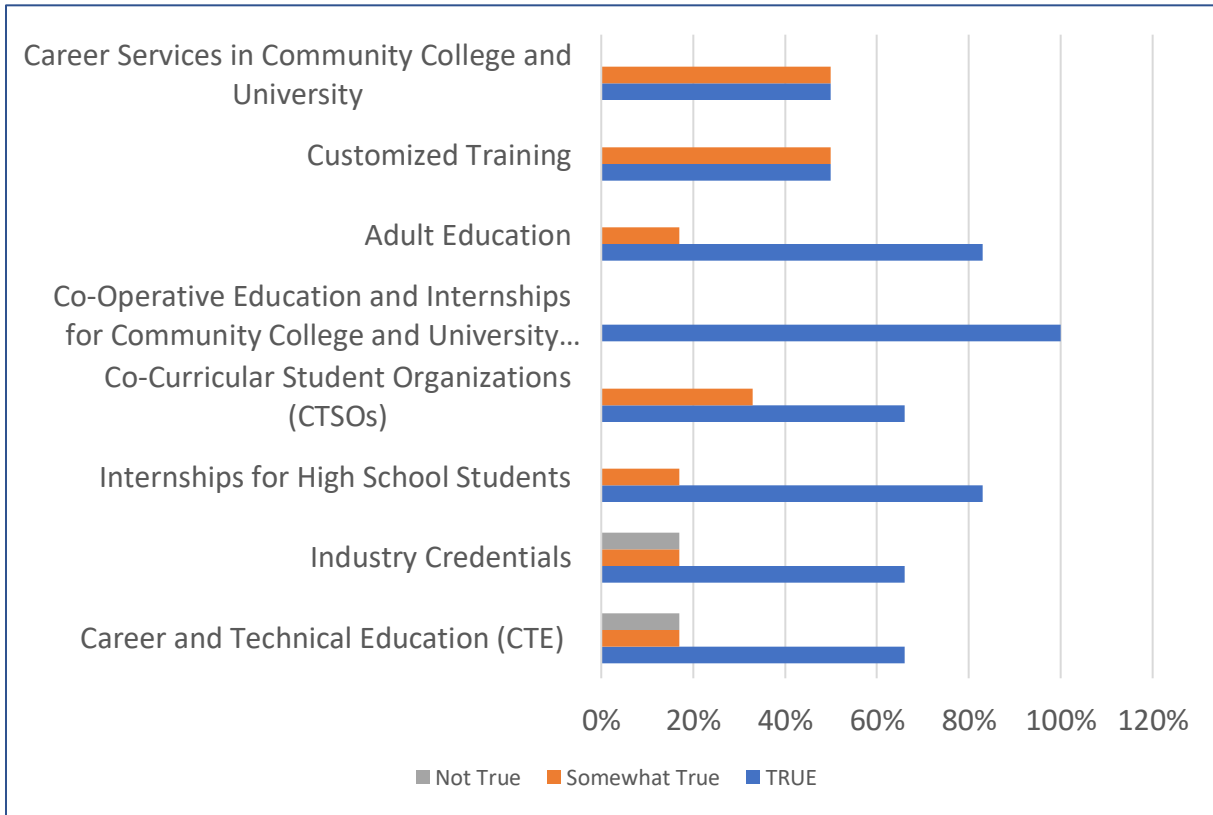
## **STRENGTHENING THE TIES IN THE TALENT DEVELOPMENT CONTINUUM**

Our Roundtable members have some awareness of the variety of educational assets available to help them build their talent, and virtually all of them think these programs are valuable.

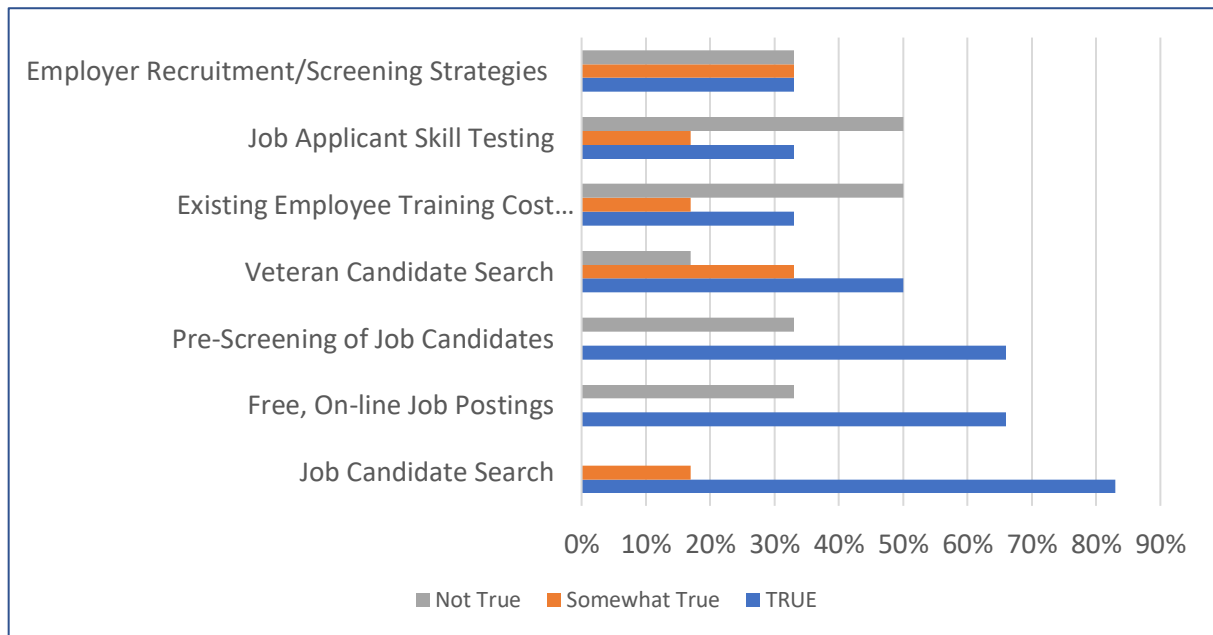
### **Awareness of Local K-12 and Post-Secondary Programs:**



**Evaluation of the Value of Each Program:**

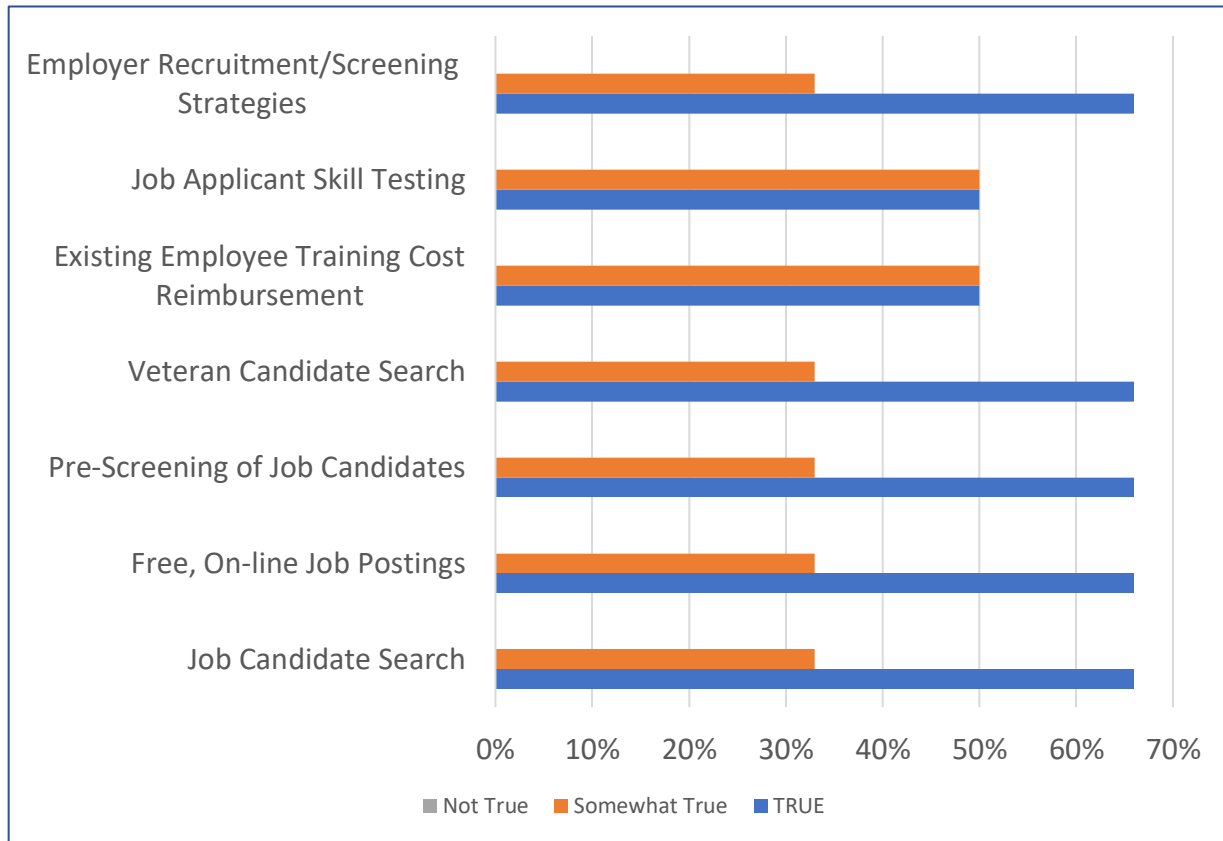


These employers are also **aware of the offerings of Workforce Connections**, despite the fact that they do not report using them in their hiring process:





However, if well informed of the services, at least half indicated a **belief that they would be beneficial:**



Pierce said, *“The potential savings for us would be very great. We have 25% turnover on average, which for a hospital of 1,500 people is 400. We have a number coming through a third-party agency at significant expense.”*

Covarrubias indicated that while they have participated in job fairs with Workforce Connections, the system is very cumbersome for employers.

*“Staying on top of the criteria for qualified candidates is a lot of work. The system is hard to maneuver...there are too many people and it’s too much work on the employer,”* he said.

### KEY OPPORTUNITIES FOR PARTNERSHIP AND INNOVATION

Healthcare is literally the single richest field of opportunity in Doña Ana County. The enormity of jobs, on one hand, is paired with the specificity of credentials needed for those jobs on the other.

The cost of turnover is crushing to this industry. Based on an estimated industry average of \$60,000/per person, the five institutions are collectively incurring \$58.5 million in turnover costs per year.

Long before COVID descended upon us, DACC and NMSU were working on strategies to expand their capacity to produce more graduates with in-demand certificates and degrees. But what we've learned is that their talent pipelines simply aren't enough.

We must think bigger and leverage the shift to remote learning to deliver more instruction to more candidates with more options than ever before. We must leverage every federal and state dollar intended to address the shortfalls in the healthcare workforce to skill, reskill, and upskill youth, young adults, disconnected and lower-skilled workers, and skill-up incumbent workers already in the workforce to maximize the supply of qualified workers to meet the demand that is rising dramatically.

This “ecosystem of opportunity” will match well-prepared talent for employers and ensure employers are able to sustain and even grow their ability to provide high-quality healthcare critical to the quality of life for our county.

It is important to note that the state is currently also leading work to specifically address the nursing shortages. The Nursing Task Force convened by the Department of Workforce Connections convened representatives from across agencies, government, higher education and the private sector to:

- Increase the number of qualified applicants to postsecondary RN and LPN programs
- Increase the ability to grow the total output (input of applicants) of registered nurses, annually
- Increase RN program faculty recruitment and retention rates among postsecondary institutions
- Increase RN retention within the profession and the state of New Mexico

To ensure Doña Ana County's solutions align with the recommendations of the task force, we propose the following targeted interventions for the talent pipeline:

#### Middle to High School

- Increasing healthcare-related credential attainment for high school students, including LPN and CNA
- Launching career exploration and virtual job shadowing for students in 8<sup>th</sup> to 10<sup>th</sup> grades
- Exploration of virtual internships for high school students in CTE pathways
- Addressing skill gaps in existing talent preparation pipelines and standardizing Medical Career Pathway across the county
- Focusing Dual Credit offerings for high school students to earn entry-level credentials

#### Higher Education

---

- Address skill gaps in existing talent preparation pipelines
- Create more specific pathway maps connecting academic programs across the region to pathways for highest-demand skill sets
- Leveraging NMSU’s new College of Health, Education and Social Transformation to expand talent pipelines for highest-demand occupations
- Expand remote higher education learning options for prospective talent
- Connect with regional and state institutions for outreach to new graduates

### Workforce Connections

- Focusing WIOA Investments in Healthcare-related credentials and degrees for program participants
- Establishing direct relationships between Workforce Connections Business Services Team and HR teams at key institutions to identify potential local and regional talent
- Increase focus on providing fund for incumbent worker up-skilling and degree attainment

### The Bridge of SNM/Greater Las Cruces Chamber of Commerce

- Partner with the GLCC to outreach to individual healthcare practices to identify potential new clinical training sites
- Partner with Workforce Solutions Borderplex to identify new graduates to attract to New Mexico
- Reach out to the Borderplex Alliance to identify potential clinical sites for students in the Gadsden district in order to advance healthcare pathways there

### City of Las Cruces

- Working with the Convention and Visitors Bureau, the City can support the growth of this sector by promoting the quality of life of this region to those with the highest skills (skilled nursing, doctors, surgeons, etc.) in targeted high-cost, high density geographies where populations are reporting high out-migration

### Middle to High School

The reauthorization of Carl B. Perkins funding (Perkins V) prioritized healthcare as the single most important industry for Career and Technical Education investments. Michael Ogas, healthcare career coordinator with the Las Cruces Public Schools, used \$300,000 of that \$1.1 million investment to upgrade all training equipment in the district.

Ogas has developed a sequencing of courses throughout 9<sup>th</sup> to 12<sup>th</sup> grades at Oate High School, which includes Dual Credit courses, internships, and securing skills credentials by high school graduation. He is currently working to move the Health Occupations I course into 8<sup>th</sup> grade, exposing students to the breadth of healthcare career choices earlier in order to inform students’ Next Step Plans for high school. He has submitted this sequence to the NM Public Education Department and will standardize the program across the district. This pathway

includes preparatory coursework in 9<sup>th</sup> and 10<sup>th</sup> grades with entrance into CTE certificate programs in 11<sup>th</sup> and 12<sup>th</sup> grades, including CNA, EMT, and now LPN.

Integrating the skills required in the Ideal Candidate Profile, and the gaps in Reading, Writing, and Language Skills and Employability Skills in prospective candidates, pathways can include strong focus on English and writing-focused coursework, computer and keyboarding, and resume and interview skills as part of preparation.

Working in collaboration with the Gadsden and Hatch districts, we could seed some of introductory courses into their CTE offerings for students, as well.

Employer involvement in these training pathways is critical. LCPS hosts both the Health Occupations Students of America (HOSA) and Skills USA Career and Technical Student Organizations (CTSOs). By encouraging the participation of employers with up-to-date knowledge of the industry into those programs, the employers have a direct line of communication and relationship building with their future talent.

For those employers who are willing to offer staff members' time, we can launch a pilot for virtual student internships to expose them to project-based learning in the CTE pathway that exposes them to medical terminology, research, and problem-solving efforts that allow them to deeply study real-life issue and work collectively and think critically about proposed solutions. We will create a local model, learning from the Future-Focused Ed program in Albuquerque, to bring industry experts into virtual relationships with students over a six- to eight-week project. Employers who identify highly-interested students can then invite them into on-site internships or part-time jobs to future expose them to the real world of healthcare and quality patient care.

A high priority for Healthcare CTE should be the completion or near completion of industry-valued credentials, including LPNs. Expanding the higher education partnerships offering Dual Credit courses has become much easier thanks to remote learning. The Bridge will reach out to Central New Mexico Community College, Eastern New Mexico University, and El Paso Community College to explore programs not available in Doña Ana County. The Bridge will also work with the Greater Las Cruces Chamber of Commerce to support the effort to identify more clinical sites for students for those programs requiring clinical experiences, including the new Three Crosses Hospital.

There is a barrier for some providers that students must be 18-years-of-age to secure clinical rotations leading to credentials. For those students who aren't 18 until after graduation, we will work with the Workforce Connections' Adult and Youth providers to support students who qualify for those programs to ensure they are able to secure credentials and be immediately placed in employment, if that is the student's goal. If they are pursuing higher education, we will work with the NMSU College of Allied Health to identify how they are embedding credential attainment within their pathways and offer to partner with Workforce Connections to secure credentials and, if possible, employment for their students pre-graduation.

## Higher Education

The Bridge will work with the leadership of both DACC and NMSU to determine how to close identified skill gaps in the talent development continuum. Degree plans may need some adjusting to cover the gaps in Reading, Writing, and Language, Employability, and Computer Skills. Clearly, there is also a need to help future graduates with resume and interview preparation, teaching them how to represent themselves and their skills to an employer.

The largest barrier to growing our local talent, however, is the capacity of the programs themselves. For example, at DACC, though they receive hundreds of applications for the nursing program, they only select close to 100 who are the most likely to pass their certification test (higher GPA's, etc.). The institution is already working proactively to recruit those who don't get accepted into other healthcare-related programs of study.

Solving the shortage of qualified healthcare workers requires innovative partnerships. Doing what we've been doing, isn't going to cut it. Strengthening the pipeline requires new efforts from employer, educator, and workforce.

NMSU has been working to expand the capacity of its programs and is soon to launch a new combined college bringing in multiple healthcare disciplines into a single, coordinated program. As part of this monumental redesign effort, NMSU has the opportunity to raise up not just new healthcare professionals, but also new healthcare educators – one of the barriers to growth of local talent pipelines. Skilled nurses were identified as a significant gap in the workforce. Ideally, we should leverage this moment of redesign to prioritize the top hardest-to-fill positions and build talent development programs accordingly. There's tremendous benefit in attracting students to programs guaranteed to lead to jobs upon graduation.

Working with Workforce Connections, we can prioritize Sector Strategy investments to attract displaced and low-skilled workers into training programs for high-demand, high-wage jobs vital for sustaining the quality of care in the community. Ideally, we can also partner workforce investments into incumbent markers to help them skill up for the highest demand jobs.

We must also tap into other higher education institutions inside and outside the state who offer remote degrees to rapidly expand the pool of qualified workers. Federal WIOA dollars need not be limited to New Mexico colleges and universities, if the SAWDB were to identify regional institutions to add to their Eligible Training Provider list and allow their Individual Training Account holders to explore other options. Pairing Business Services members with our local employers could help identify where high-caliber staff members are coming from and work to establish relationships with those institutions for our local job seekers and ITA participants.

Employer tuition assistance could also be used to expand the education pipeline and increase nurse retention by promoting employment as an entry way to higher credentials. Local institutions could customize tailored training programs or degree plans for incumbent workers the provide optimal hybrid remote work/learn opportunities, ensuring these candidates are able to complete more quickly. Employers' programs should also have time commitments for

workers who take advantage of tuition assistance. One such program offers the tuition as a grant to employees for a three-year commitment. If the employee leaves before that time, the grant is transitioned into a low-interest student loan to be repaid by the recipient.

It is important to note that these students would be far more likely than those not already in the industry to complete their education and stay in the area and with the employers who supported them. Innovative solutions could include experience for credit possibilities, as these workers may be doing the jobs some courses in a traditional pathway would be preparing them for.

While this report is focused on the high school-to-four-year degree portion of the talent pipeline, this county is uniquely equipped for cultivating new doctors, thanks to the Burrell College of Osteopathic Medicine. Its focus on culturally-competent care is creating a new generation of doctors for our community and others in and around New Mexico. As a community, we should partner with the medical school to ensure that we invite as many of these new graduates into our community as possible. This is key to the long-term well-being of our healthcare community.

### Workforce Connections

The Southwestern Area Workforce Development Board has identified Healthcare as one of its focuses for Sector Strategies. The survey reveals that if the largest two employers in this industry and in this county are healthcare are not using this system, the SAWDB is failing to successfully implement their strategies. This, however, could be easily remedied.

Doña Ana County's largest employment sector is healthcare. The largest private-sector employers are two hospitals: Mountainview Regional Medical Center and Memorial Medical Center. Their employment needs are vast and ever changing. They could be well served by the workforce system by having a one or two point-people concentrated on the healthcare industry, as a whole. By understanding the skills, credentials, and degrees needed by these employers, they can cull through job seekers in the system to identify those across the region and state, as well as those in nearby El Paso (Workforce Solutions Borderplex), who may have the qualifications needed to fill those positions.

In addition to strengthening the partnerships identified with K-12 and Higher Education listed above. Healthcare careers should be at the forefront of the work with Restart New Mexico, the forthcoming statewide effort to help people get back to work. Workforce Connections staff serving job seekers can identify the highest-valued credentials that can be obtained for employment – both short-term and long-term – to guide customers in the best use for Individual Training Account (ITA) investments. This alignment could create enormous shifts in family earnings.

This cannot be a passive effort. It must be driven by active outreach and coordination across the system to ensure we optimally align people to opportunity. Because these jobs tend to be

higher paying, this intentional focus will also improve the metrics of the Southwestern Area Workforce Development Board.

The SAWDB could also pursue federal and private sector grants to grow services to this industry specifically, which would enable it to be more innovative and more flexible in finding new and better ways to connect its job seekers with high-quality employment opportunities.

### City of Las Cruces

Las Cruces has a rapidly growing medical community, and as the data shows, some of the top job postings include physicians, surgeons, family and general practitioners, and psychologists. COVID has generated an out-migration of numerous professionals from large, metropolitan areas where the cost of living is high and population densities are high.

This trend places Las Cruces in an advantageous position to attract these professionals to a community with a significantly better quality of life and cost of living, and already noted as a top destination for retirement. Targeting well-established medical communities in California and the East Coast, may well bring in an abundance of high-quality professionals to fill the top skills needed in our community.

## CONCLUSION

If it takes a village to raise a child, it takes a community to raise a robust, culturally competent healthcare workforce. Everyone has a role to play: student/employee, employer, educator, workforce service provider, and local government.

Thanks to the innovative and collaborative leadership in healthcare present in our community, Doña Ana County could take the lead in implementing solutions identified by the New Mexico Department of Workforce Solutions' Nursing Task Force, demonstrating what is necessary for success and generating lessons learned for the rest of New Mexico.

This industry alone has enormous potential for many of the displaced 9,000 workers who may have the highly-valued employability skills they need for some of the jobs in healthcare. Others may need a little re-skilling or up-skilling to become part of it. This county is equipped with the pieces and parts necessary for success but will need to innovate to grow the pipeline itself.

As a community, we have a dual responsibility toward this industry. It takes care of us and is critical to the quality of life for all in the county. In turn, we must take care of it. We have amazing, culturally diverse people who would be assets to this industry. Our role is to help them get from exploration to preparation and employment.

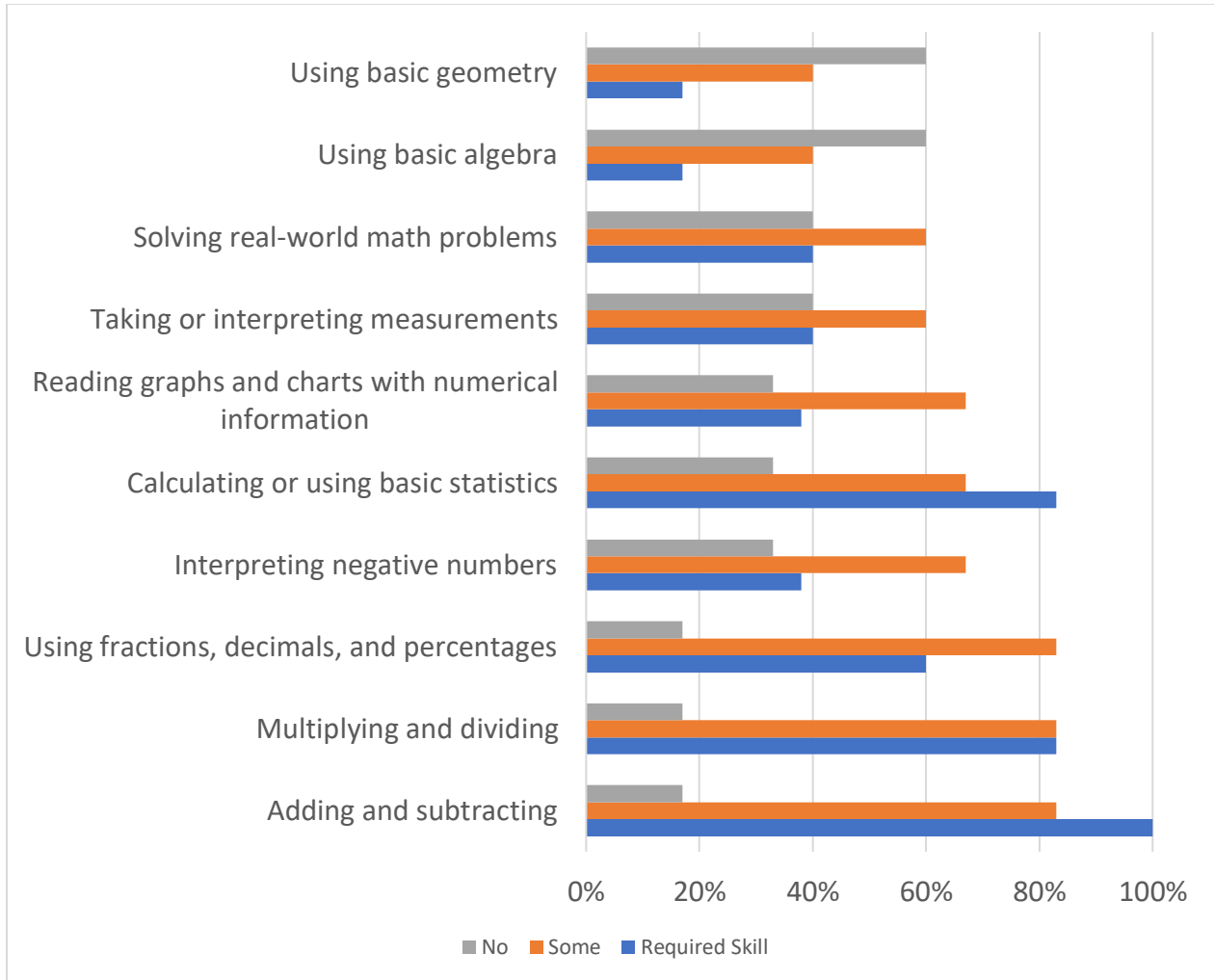




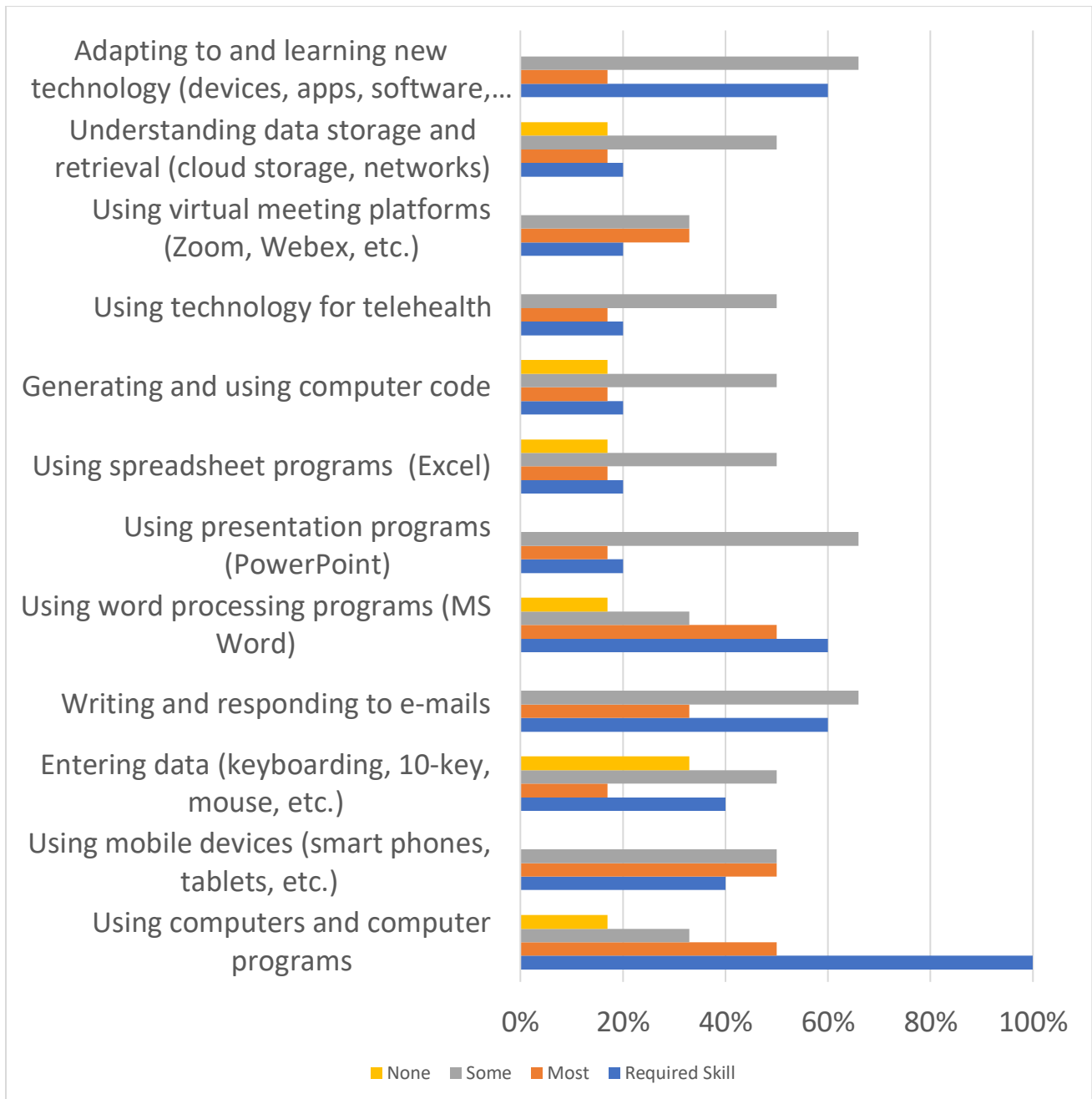
# Appendix

## A. Full Analysis of Required Skills

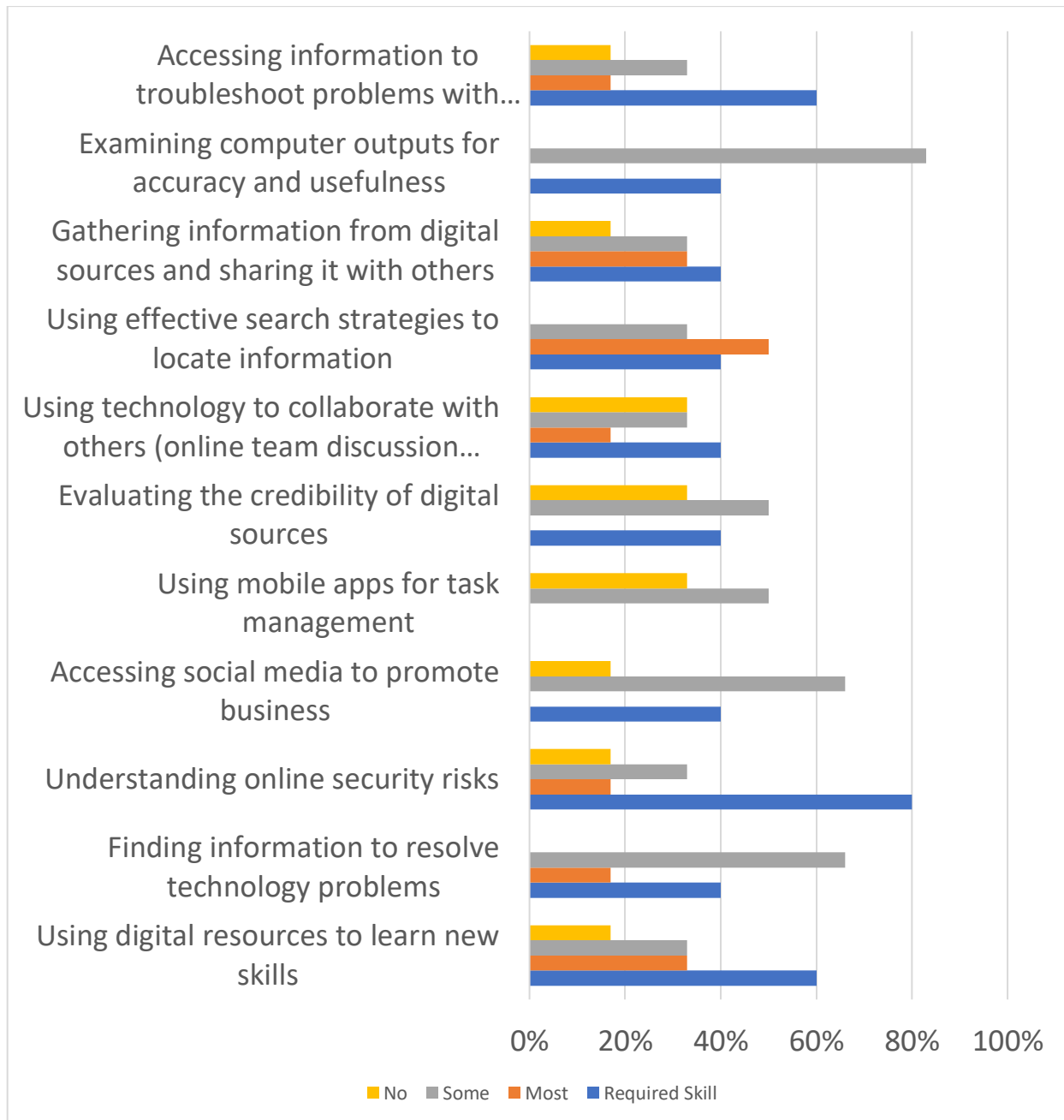
### MATH SKILLS



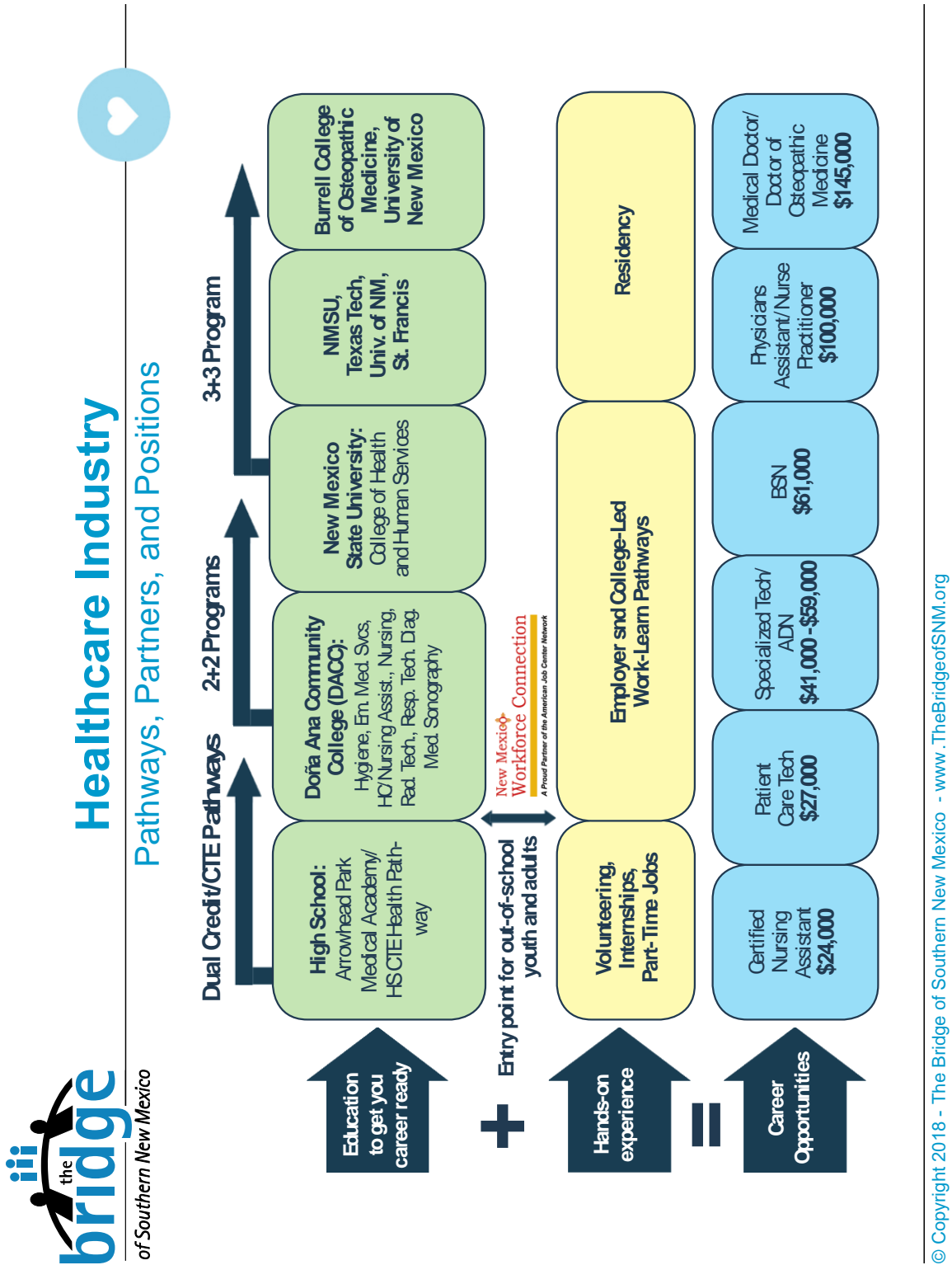
## TECHNOLOGY SKILLS



## DIGITAL LITERACY SKILLS



B. Current Career Pathway for Healthcare Professions – Patient-Centric



# HEALTHCARE INDUSTRY ROUNDTABLE

## A Special Thank You

We are deeply grateful to the team of leaders who served on our Industry Roundtable. Their commitment of time, wisdom, experience, and their spirit of innovation provided us actionable intelligence to holistically prepare our New Mexico True Talent to be ready for some of the best jobs in our county. We look forward to our continued partnership!



---

**The Bridge of Southern New Mexico**

3655 Research Drive • Las Cruces, NM 88003

(575) 646-2527 • [thebridgeofsnm.org](http://thebridgeofsnm.org)