

# access™

An allied health industry journal



**2** Picking Up the Pieces:  
What We've Learned

**18** Fewer Candidates, Heightened  
Demand: How Healthcare  
Employers Are Closing the Gap

**34** 2021 Industry Outlook

**44** Postpandemic Future  
Is Bright for Technicians

nha 

**DEAR READER,**

As we wrote our 2021 edition of *access™: an allied health industry journal*, it was not lost on us that the healthcare industry, and specifically those working on the front lines, had just gone through what might have been the most challenging year in their careers.

Although COVID-19 was devastating on so many levels, we wanted to tell some of the stories that have risen to the surface in the middle of a tragic and uncertain year. Some stories show the strength of the human spirit to innovate and to stand strong in spite of such challenging circumstances. Other stories and snapshots give us a look at what motivated those individuals to pursue healthcare careers in the first place.

We'll also hear from those who believe so strongly in what they've chosen to do that they now invest in others, educating and inspiring upcoming healthcare professionals—even those in high school—who will soon be entering the medical field. These stories and pictures remind us that those frontline healthcare workers we've applauded and lauded over the past year are real people with families and fears—and fight.

This edition of *access™* is dedicated to the survivors and thrivers—to those who have given it their all, to those who have conquered, and to those who have known defeat; to those who have lost careers, friends, colleagues, and loved ones. Not just to the ones who showed up every day, but also to the ones who showed up only when they were able, who found themselves stretched beyond their capabilities, yet never gave up. To healthcare workers on the front lines, to the educators who trained them, and to the institutions who employ them: We salute you.

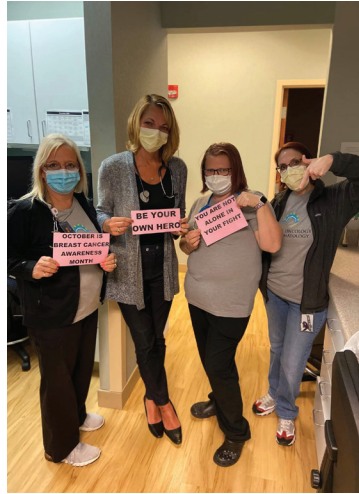
As an advocate of frontline healthcare workers everywhere, please enjoy, utilize, and share this journal in support and in celebration of those who are making an impact on public health every day. Please know we are honored to partner with you as we empower others to access a better future.

**SINCERELY,**

Jessica Langley-Loep, M.S., B.S.R.T. (R)(CT)  
Executive Director of Education and Advocacy  
National Healthcareer Association



# access™



## Allied Advocacy

- 2 Picking Up the Pieces: What We've Learned
- 44 Postpandemic Future Is Bright for Technicians
- 50 A Solid Foundation for Future Success

## Trends & Data

- 12 The Female Frontline: How Healthcare Is Affected by the "She-cession"
- 18 Fewer Candidates, Heightened Demand: How Healthcare Employers Are Closing the Gap
- 34 2021 Industry Outlook
- 36 Surviving to Thriving: How It Took a Pandemic to Expand Telehealth

## Vantage Point

- 10 CBCS Experts Weigh In
- 26 Texas Woman Recognized as NHA's One Millionth Certification Earner, Helped in COVID Vaccine Study
- 28 CTE Spotlight: How Two Successful Programs Started
- 56 In Their Own Words





# Picking Up the Pieces: *What We've Learned*

**HOW SELF-CARE ON THE FRONT END  
LEADS TO LONG-TERM CAREER SUCCESS  
AND EMPLOYEE RETENTION—WORTHY  
OF WITHSTANDING A PANDEMIC**

**A**s healthcare professionals and employers continue to provide care through the ongoing pandemic and look to the future, they are taking stock of the pandemic's collective trauma and its impact on mental health.

"Burnout among healthcare workers is the number one issue among employers in 2021," said Kourtney Govro, managing director of KDG Innovations, who partners with hospitals to design mobile strategies around patient experience. "The hospitals I work with are extremely concerned about the pandemic's impact on

employees and on their mental health, specifically."

Across the spectrum, conversations with healthcare institutions now come around to concerns over retention and employee well-being.

"There is growing awareness of the burden of this experience on employees, how it is impacting their health, and the potential for attrition," Govro said.

The concern is valid. The collective trauma of the pandemic and the ongoing impact of the experience have taken a toll on healthcare workers. In a survey of healthcare professionals across a variety of settings, 86% of respondents reported unusual stress due to the pandemic.<sup>1</sup>

And according to an April 2021 survey of more than 1,200 healthcare workers, burnout—which can result from chronic exhaustion and the cumulative stress of having too much work and not enough resources—is increasing. Before the pandemic, 80% of providers were suffering from some degree of burnout. Of those, 64% reported the pandemic has made their burnout worse.<sup>2</sup>

Although the statistics are sobering, the lessons of this period provide an opportunity for healthcare professionals, educators, and employers to better understand the stress and trauma healthcare workers experience—both during the pandemic and in general—to pursue opportunities to build resilience. These efforts to create meaningful, sustainable change are essential to ensure the resilience of our healthcare organizations and the professionals who provide care.

#### **UNDERSTANDING THE NEED FOR SUPPORT**

It's not news to anyone that healthcare professionals operate in an environment that can involve periods of intense activity, heightened emotions, and stress.

"Healthcare professionals are often meeting people at the worst moments



of their lives, as they are experiencing trauma,” said Rev. Roxanne Pendleton, Senior Projects Coordinator, Center for Trauma Informed Innovation at Truman Medical Centers/University Health in Kansas City, Missouri.

Although there may be a tendency to associate “trauma” with physical injuries and emergency rooms, Rev. Pendleton said it’s important to remember that trauma is an emotional response to an intense or overwhelming experience that overpowers a person’s resources to cope. Trauma can occur at any time. It can result from a single experience or result from repeated experiences over time.

In a healthcare setting, patients and loved ones may experience trauma as they face an injury or illness, and providers and healthcare professionals can experience their own trauma or secondary trauma.

“Human beings naturally experience empathy, a quality that allows us to ‘feel with’ one another, especially when that other person is in pain. This capacity for empathy makes us vulnerable to secondary trauma, which can occur when we see or hear something that activates a powerful stress response in our own brains and bodies,” Rev. Pendleton said.



I became an MA because I was inspired by my AP anatomy teacher when I was a junior in high school. She inspired me with the way she taught and explained the anatomy of the body and the many functions our bodies go through daily. Plus, I wanted to make a difference. I wanted to help people. I wanted to learn and educate not only myself but those within my community.

When I completed my MA program, I was offered a position as an MA at the place where I did my externship. I started my journey in 2010, and has it been a journey! I was promoted quickly to a clinical coordinator, then an MA team lead, and now am a supervisor.



I worked at a multi-specialty clinic for three and a half years. From there, I went on to a work at a family practice facility for three years. I am currently at a cardiology center. I cannot believe it’s been 10 years! I was 19 years old when I started this journey, and I am proud of how far I’ve come and the opportunities I’ve been given.

I love my team because they work as a team. It’s not one person’s job—it’s everyone’s. I enjoy coming to work, and I am honored to lead such an amazing and dynamic group. I know we are helping people in our community, and we hold each other accountable. Especially now, during COVID, we’ve become even closer.

We can count on one another to help cover clinics. Yes, it is a scary time, but we haven’t lost our hope and faith. I am honored to lead my group and our hospital because I know we are giving excellent care. We care because you matter! And your families matter, too. We want everyone to receive the care they need.

We need more compassionate and sympathetic medical professionals. This isn’t just a job—it’s our calling.

**LYNN CHRISTENSEN, CCMA**

In the pandemic period, Rev. Pendleton noted, the acuity or intensity of these traumatic experiences and the level of generalized stress increased. This was a novel disease, with many unknowns, and there were many questions about treatment.

Additionally, the sense of scarcity around equipment, supplies, and personnel, along with the very real impact of severe illness and death, heightened the emotion. Healthcare workers were worried for their patients, for their families, and for their own well-being.

This stress has continued to an extent today as healthcare professionals have continued to play a central role in both ongoing pandemic response and the vaccine rollout.

Operating continually within an environment of heightened stress and experiencing repeated trauma or secondary trauma can be exhausting.

“What starts to wear out is your capacity to continue to feel intensely and to be able to sustain your own resilience,” Rev. Pendleton said. “You get tired, and you can become profoundly depleted, which can lead to both compassion fatigue and burnout. Burnout, which is fueled by systemic issues, is especially difficult to bounce back from; with burnout,

you are oftentimes numb and chronically exhausted.”

When this happens, she noted, a person can become cynical.

“It’s not that you stop caring, but you stop being able to access the compassion deep within you,” Rev. Pendleton said.

Andrea Dalton, who works alongside Rev. Pendleton as a Special Projects Coordinator at the Center for Trauma Informed Innovation, pointed out it’s important to understand that the high rates of burnout among healthcare professionals in the wake of the pandemic don’t necessarily translate to a workforce that isn’t providing good care or is delivering care without compassion.

“It’s good to discuss the risks of trauma and compassion

**“There is a symbiotic relationship between our ability to care for ourselves and the care we provide others.”**

**ANDREA DALTON, *Special Projects Coordinator at the Center for Trauma Informed Innovation***

fatigue among healthcare professionals,” she said, “but in the vast majority of cases, we are still showing up and doing our jobs well and with empathy. Unfortunately, we might be seeing the impact of our experience in other areas of our lives—in our





personal relationships or to our physical well-being.”

Given the clear need for ongoing support in the wake of the pandemic and beyond, taking steps to educate healthcare professionals in self-care, providing employees with mental health resources, and training organizations to understand the unique stressors and the risk factors for trauma and other mental health impacts will be key.

Rev. Pendleton works with healthcare and other organizations to raise awareness about what induces trauma—the signs and symptoms—and the impact of trauma on individuals and systems. By helping build awareness and understanding around trauma, as well as potential paths to recovery, she noted, organizations can integrate that awareness into policies, programs, and procedures. Additionally, individuals can learn strategies for self-care to resist traumatization and to build resilience.

Equipped with the training and tools necessary to build resilience—which is the process of adapting and “bouncing back” in the face of challenging situations, stress, or trauma—healthcare professionals will have the internal and external resources to thrive in their careers for the long-term.

“By cultivating awareness and implementing proactive strategies, we can inoculate against the effects of stress and trauma and instill skills and a shared vocabulary to create a healthier system and environment,” Rev. Pendleton said.

#### **TOOLS AND TRAINING CREATE OPPORTUNITY FOR THE LONG-TERM**

Like so many of the “soft skills” healthcare employers increasingly seek in healthcare professionals, research has shown that resiliency can be learned.<sup>3</sup> In the same way you can repeat strength-building exercises to increase muscle capacity, you can build resiliency through intentionally repeating self-care behaviors and patterns. Similarly, external training in trauma, for instance, can help you understand your environment to support your own experiences as well as those of your colleagues and your patients.

As organizations and individuals take the learnings from this pandemic and move forward to build resiliency, the effort will ideally include training in internal resources (i.e., strengths, skills, and self-care practices) and support from external resources, which might be led by employers or educators.

Developing internal resources through self-care can be a

### **Self-Care Education**

Education about self-care can often begin with:

- Understanding the importance of developing interpersonal and intrapersonal boundaries.
- Scheduling yourself short breaks between meetings.
- Finding mindful ways to regain a sense of calm in the moment.
- Intentionally releasing stress at the end of a shift.
- Limiting screen time.

powerful strategy for allied healthcare professionals to build resiliency and career longevity. For many, an orientation toward serving others and providing care may mean self-care has not been a training priority. Understanding the importance of shoring up internal resources can be a key learning for healthcare professionals.

“There is a symbiotic relationship between our ability to care for ourselves and the care we provide others,” Dalton noted.

The goal in developing a self-care strategy, Rev. Pendleton said, is to implement practices that allow you to rest and restore your mind and your body. And before you

## Ways Healthcare Organizations Are Responding

- Encouraging staff to use onsite, online, and call lines to access spiritual and emotional care services
- Creating internal mental health training for all staff
- Providing quiet spaces, or “wellness rooms,” where staff can rest and access mindfulness tools
- Offering onsite healthy snacks as well as meal and fresh produce delivery
- Providing shower facilities for staff to clean up and sanitize before returning home to reduce stress around exposing family members<sup>5</sup>

start picturing bubble baths, she said, consider that these practices go beyond the “touchy-feely” behaviors you might associate with self-care. Education about self-care can often begin with understanding the importance of developing interpersonal and intrapersonal boundaries, the benefit of scheduling yourself short breaks between meetings, finding mindful ways to regain a sense of calm in the moment, intentionally releasing stress at the end of a shift, or limiting your own screen time. “Self-care includes all the little things we do each day that contribute to brain health,” she said.

Dalton noted that just as each person is unique, the strategies for self-care will likewise be individualized. She encourages personal exploration to uncover what offers the best respite and opportunity for recovery. “It could be music, exercise, or time spent in nature, but the key is to meet your unique needs,” Dalton said.

As healthcare professionals develop their own internal self-care strategies, employers are increasingly recognizing the need to provide external support for employees’ mental health. One lesson from the experience of healthcare professionals in the pandemic has been the value of that support in their ability to navigate the challenges of this period. This was clear in response to a survey of allied healthcare professionals, which reported that the majority (93%) of respondents felt that access to mental health support, including online apps, webinars, and therapists, was very important or important during this time.<sup>4</sup>

Healthcare organizations are taking creative approaches to support employees’ mental health needs against the backdrop of the pandemic and its aftermath. According to the American Hospital Association, initiatives by hospitals around the country

have included encouraging staff to use onsite, online, and call lines to access spiritual and emotional care services; creating internal mental health training for all staff; providing quiet spaces, or “wellness rooms,” where staff can rest and access mindfulness tools; offering onsite healthy snacks and meal and fresh produce delivery; and providing shower facilities for staff to clean up and sanitize before returning home to reduce stress around exposing family members.<sup>5</sup>

Dalton noted that many of these efforts revolve around building relationships and acknowledging the experience of healthcare professionals to ensure they feel seen and heard in the face of challenge. “Healing happens in relationships,” she said, “and efforts to connect with employees and support mental health illustrate the profound impact these connections can have.”

Ongoing attention to the need for mental health support and meaningful connection will remain imperative for healthcare organizations in the wake of the pandemic, which many healthcare professionals and others are referring to as the “9/11 of healthcare systems.” And, research has revealed a high prevalence of post-traumatic

stress disorder (PTSD), amplifying the need for ongoing support and continued tools to build resiliency.<sup>6,7</sup>

### **RESILIENCE AS A RUNG IN THE CAREER LADDER**

Prioritizing mental health and building resiliency is essential for healthcare professionals' long-term personal and professional health. The capacity to adapt and grow through periods of challenge will open doors for advancement and new career opportunities.

Employers who recognize the value of supporting employees' mental health and who encourage self-care will have an advantage when it comes to attracting and retaining qualified, resilient healthcare professionals. This has never been more important, as the need to fill open healthcare roles, coupled with an increased demand for employees who can claim both clinical and soft skills, grows.

Training and professional development opportunities around mental health, self-care, and wellness can provide employees insight that will support their own resiliency, their ability to serve on a team, and the potential to move up the career ladder—or horizontally into adjacent roles to meet employers' needs.

Developing training opportunities, whether within an organization or in partnership with educational institutions, to support healthcare professionals and encourage their movement up the career ladder, have been shown to improve job satisfaction, reduce turnover, and improve patient care. For healthcare institutions committed to building a resilient team and organization for the long term, investing in training around self-care and mental health may provide a significant advantage.

### **MOVING TOWARDS A MORE RESILIENT FUTURE**

There's no question that we will continue to learn lessons in the wake of the pandemic, as healthcare professionals and institutions head toward a post-pandemic "new normal."

Looking ahead at how healthcare professionals and institutions will evolve, Rev. Pendleton is hopeful more people will recognize the interconnectedness of mental and physical health.

"I hope individuals come out of this with the sense that brain care is important—it's worthy of just as much time as we spend on other aspects of self-care, whether that's going to the gym or cooking healthy meals or spending time with friends. We need to put that same effort toward our mental health."

Dalton agrees, and notes: "I hope we continue to see an expanding conversation around mental health and trauma and a reduction in the stigma around getting help."

For healthcare professionals, their employers, and those providing training, participating in that conversation and continuing to engage in efforts to support mental health will go a long way toward building resiliency in individuals and systems for a sustainable future. <



# CBCS EXPERTS WEIGH IN

## WHAT ARE THE MOST IMPORTANT QUALITIES & SKILLS FOR A BILLING & CODING SPECIALIST TO HAVE?

“An understanding of billing and coding fundamentals. There should also be knowledge of laws (fraud and abuse), the revenue cycle process, soft skills/customer service, and technology familiarity.”



- *Loretta Jarrett-McDonald, Consultant, Educator*

“I think the most important things to have would be certification and knowledge of current billing process and updated codes.”



- *Jaime Nguyen, MD, Director of Allied Health, Penn Foster*

“A billing and coding specialist should be familiar with every step of the revenue cycle and have an

understanding of government and private payer policies.”

- *CBCS Expert*

## HOW IMPORTANT IS IT FOR A MEDICAL BILLING & CODING SPECIALIST TO UNDERSTAND THE REVENUE CYCLE?

“It’s extremely important. The revenue cycle is what impacts the revenue stream for the practice. In order to decrease billing and coding errors, you must know where in the revenue cycle the error occurred and take the initiative to correct the error and continue with the billing process.”



- *Sandra Brooks, MBC Program Director, Fortis College EDU*

“Billing and coding drives revenue, and all billers and coders should understand how they affect this process.”

- *CBCS Expert*

“Understanding the revenue cycle means seeing the business side of healthcare. Knowing what impacts the cycle (administratively, clinically, legally, etc.) will impact the practice as well as the patients.”

- *Loretta Jarrett-McDonald, Consultant, Educator*

“Billing and coding relies solely on a firm knowledge of the complete revenue cycle from beginning (scheduling) to end (payment posting and A/R).”

- *CBCS Expert*

## IN WHAT WAYS CAN A CERTIFIED BILLING AND CODING SPECIALIST POSITIVELY IMPACT THE FINANCIAL HEALTH OF A MEDICAL PRACTICE?

“They can ensure correct reimbursement, reduce denials, improve compliance, reduce audits or

edits, improve patient/customer satisfaction.”

- **CBCS Expert**

“From the first ring of the telephone to scheduling, customer service and even entering patient demographics, every action has a financial impact, whether done correctly or incorrectly.”

- **Loretta Jarrett-McDonald, Consultant, Educator**

“As a consultant to medical offices, I’ve seen many instances where use of outdated or incorrect codes results in a loss of revenue. Incorrect or incomplete coding can also cause a lot of rework by needing to update and resubmit or appeal claims.”

- **CBCS Expert**

---

**WHY IS IT IMPORTANT FOR SOMEONE WORKING IN THE PROFESSION TO HAVE A KNOWLEDGE OF BOTH BILLING AND CODING?**

“As a billing and coding specialist, you cannot effectively bill without having some knowledge of coding, even if it’s just being able to tell the difference in the codes. Without that, there isn’t a way to be able to

identify when a procedure is medically necessary. How can a billing and coding specialist be able to identify and avoid fraudulent and abusive use of codes if they do not know anything about them? Revenue is affected by billing and coding. Without understanding how the two are related, it could cause the practice to lose money. When a claim goes out with mismatching codes (i.e., a diagnosis code that does not match the procedure code), the insurance company will deny that claim, which could lead to the practice being audited.”

- **Sandra Brooks, MBC Program Director, Fortis College EDU**

“Denials can be reduced by knowing and understanding the provider contracts and being aware of contract terms and conditions.”

- **N. Reed-Miles, Instructor**

---

**HOW DOES NOT ACCURATELY CODING ALL CONDITIONS TO THE HIGHEST LEVEL OF SPECIFICITY NEGATIVELY IMPACT THE REVENUE CYCLE?**

“The greatest error a biller or coder could make is not coding all conditions to the

highest level of specificity because it affects the amount of reimbursement the practice will get from the insurance company. Providers see many patients, and a large majority of those patients have multiple chronic conditions (that never resolve). Providers will spend an hour or more in the office with these patients, and they should be paid for that time.”

- **Sandra Brooks, MBC Program Director, Fortis College EDU**

“It can result in a reduction of payment. Also, codes can be not valid if all applicable characters are not assigned and the code is coded to the highest level of specificity, resulting in denials and lost revenue.”

- **CBCS Expert**

“This will negatively impact reimbursement by having the majority of your claims being either underpaid, which reflects negatively on your accounts receivables, or denied for coding errors/inaccuracies, which will delay your reimbursement.”



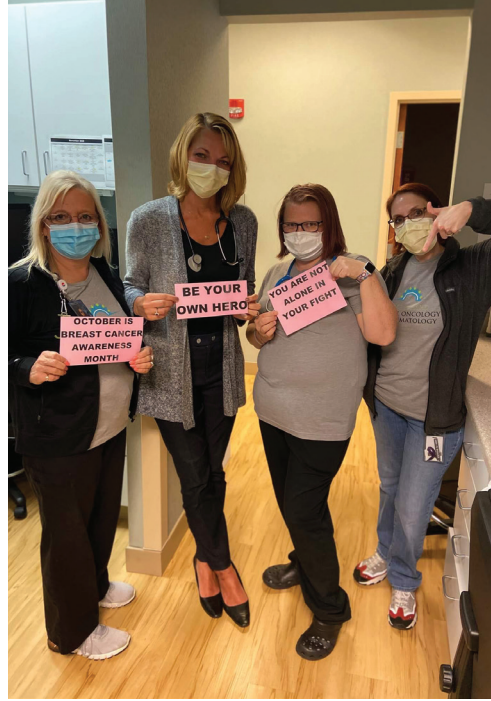
- **Zofia Minzie, Healthcare Revenue Cycle Manager** <



# *the* FEMALE FRONTLINE

*How Healthcare Is Affected by the “She-cession”*





## The COVID-19 pandemic has caused many essential healthcare workers—primarily women—to leave the workforce. This has brought up gender equality issues in the workplace, and many employers are taking action.

**T**he COVID-19 pandemic has had a significant impact on healthcare jobs. While the coronavirus rapidly spread throughout the U.S., the demand for healthcare workers dramatically increased. Unfortunately, as the need was heightened, many institutions found themselves struggling to retain female employees, who represent nearly 70% of the global healthcare workforce.<sup>1</sup> In fact, according to a National Women’s Law Center Analysis, four times as many women as men dropped out of the labor force in September 2020.<sup>2</sup>

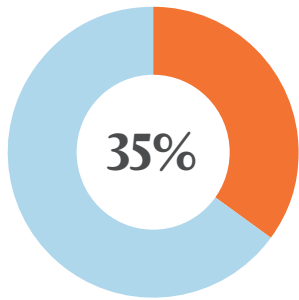
Vice President Kamala Harris said in a video call with women’s advocacy groups and lawmakers that the 2.5 million women who have left the workforce constitutes a “national emergency” that must be addressed.

“In one year,” she said, “the pandemic has put decades of the progress we have collectively made for women workers at risk.”<sup>3</sup>

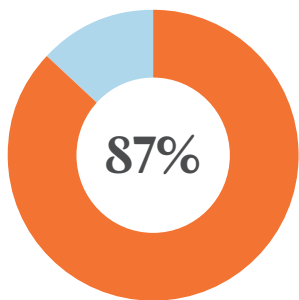
Why did this happen? What are employers doing to combat it? And what implications does this have for the future?



**One in four women** who reported becoming unemployed during the COVID-19 crisis said it was because of lack of child care—double the rate of men.<sup>4</sup>



An analysis by Colorado State and Yale researchers estimates that **35% of medical assistants** care for children between the ages of 3-12, and many don't have another family member in their household to provide child care when schools close.<sup>5</sup>



Nearly **87% of healthcare support occupations** are held by women, according to BLS data.<sup>6</sup>

### WHY WOMEN LEFT THEIR HEALTHCARE JOBS

The coronavirus has increased family responsibilities and the need for unpaid care—burdens that are disproportionately carried by women.

Schools shifted to virtual learning, and day care centers became restricted by child-staff ratios, making childcare inaccessible to many families. One in four women who reported becoming unemployed during the COVID-19 crisis said it was because of lack of child care—double the rate of men.<sup>4</sup>

An analysis by Colorado State and Yale researchers estimates that 35 percent of medical assistants care for children between the ages of 3-12, and many don't have another family member in their household to provide child care when schools close.<sup>5</sup> Black, Latina, or women between the ages of 20-24 have been particularly affected by the economic “she-cession,” highlighting equity issues within the workforce.<sup>2</sup>

Although there's been a rise in telehealth, many frontline healthcare professions such as medical assistants and patient care technicians must perform their tasks in-person. For these professionals, working remotely is rarely an option, and trying to schedule

their work around remote learning and limited childcare options gave many no choice but to leave their job.

The sudden absence of women in the workforce is felt more strongly in the healthcare field, and especially among frontline healthcare professions. Nearly 87% of healthcare support occupations are held by women, according to BLS data.<sup>6</sup>

As schools began to reopen and restrictions were lifted, the economy regained some of the jobs lost—but the healthcare sector is still struggling. In January 2021, the overall unemployment rate improved, but the healthcare industry saw 30,000 job losses in the month—most notably in nursing care facilities and home healthcare services.<sup>7</sup> This could be attributed to the fact that healthcare is a female-dominated industry.

“Of the female-dominated industries in our area, the ones that are having a slower recovery are the ones that don't allow for work from home or remote work opportunities. It creates a unique challenge for those employers to find ways to create policies and work environments that accommodate that workforce in particular,” said Jessica Palm, vice president, marketing and





public relations, Kansas City Area Development Council.

### HOW HEALTHCARE EMPLOYERS ARE RESPONDING

The COVID-19 pandemic has put a spotlight on gender equity issues in the workplace. Companies in all industries—especially female-dominated sectors like healthcare—are making changes to try to retain current and recruit new female talent.

“COVID has really shined a light on where we had gaps as a society and as a country, and we’re seeing a lot of employers and communities step up in a variety of different ways to support talent in their region,” Palm said.

Healthcare will be forever changed by the pandemic. The changes many employers

are making are not just band-aid fixes, but long-term solutions that hope to make the workplace a better environment for women now and well into the future. Below are some examples of the efforts healthcare institutions are making in response to the “she-cession.”

#### *Embracing telehealth as a new way to work*

The pandemic made telehealth a new normal—a change that is likely here to stay. According to the CDC, there was a 154% increase in telehealth visits during the last week of March 2020, compared with the same period in 2019.<sup>8</sup>

The ability to work remotely became necessary in many roles, and that flexibility is essential to working parents who must care for their

children at home. Many healthcare positions must be in-person, but for those that can be remote, telehealth empowers healthcare institutions to offer flexible options in a way they haven’t before.

Healthcare institutions that have embraced telehealth as a path forward have the potential to attract more women to the workforce and can also expand care—especially to women.

Before the pandemic, telemedicine was gaining traction with working mothers who, while juggling work and childcare, found it challenging to go to in-person appointments. In 2019, the users of telehealth platform Doctor on Demand were 65% female, and approximately two-thirds of the physicians on staff were



**Black, Latina, or women between the ages of 20-24 have been particularly affected by the economic “she-cession,” highlighting equity issues within the workforce.<sup>2</sup>**

also women.<sup>9</sup> Virtual medicine can benefit women as both employees and as patients.

***Working toward gender equality in leadership***

Gender equality in healthcare was already a hot topic before the pandemic, and the issue has only been exacerbated by the loss of workers due to the coronavirus. Pre-pandemic, about 80% of healthcare jobs were held by women. Yet fewer than 20% hold key leadership positions, and a mere 4% of healthcare companies are women-led.<sup>10</sup>

Representation of women in healthcare leadership positions particularly declines for women of color, likely because, as one report suggests, factors that exist for women in general are amplified for women of color.<sup>11</sup>

These discrepancies are highlighted by the fact that women are now leaving the workforce at a higher rate than men. Working toward gender equality takes time and cultural change, but some companies are stepping up and committing to making them.

The Mayo Clinic has added more women to leadership and board of trustees positions. Cincinnati Children’s created the Center for Diverse Leadership in Pediatrics to advance leadership and career development opportunities for diverse leaders. UnityPoint Health partnered with local grocery stores in some regions to have individual food orders delivered to employees on-site during the pandemic, recognizing that women

## COVID has really shined a light on where we had gaps as a society and as a country, and we're seeing a lot of employers and communities step up in a variety of different ways to support talent in their region.

**JESSICA PALM**, Vice President, Marketing and Public Relations, Kansas City Area Development Council.



disproportionately took on more home responsibilities.<sup>12</sup>

“COVID made things that already existed more visible, and this [gender inequality in the workplace] is one of those issues,” said Sheri Gonzales, vice president and director of KC Rising, a Kansas City-based regional economic development initiative.

Gonzales points to needs such as quality childcare, quality education, and increased flexibility that especially help support working women.

### *Establishing family-friendly policies*

Strong family policies can help ensure that employees do not have to choose between career and family, while also helping businesses and the economy overall. Providing paid family and medical leave

is proven to improve the labor force participation, earnings, and economic security of all workers, especially women.<sup>13</sup>

Businesses often falsely believe that providing paid leave will be costly, but research indicates there are no added costs. In fact, some employers report cost savings.<sup>14</sup>

Family-friendly policies extend beyond maternity leave. A major issue that has been highlighted by the pandemic is the need for childcare assistance.

Some major hospitals and healthcare organizations offer on-site childcare employees can use during their shifts. As schools went virtual, employers began to offer proctored learning environments for school-aged children to attend remote classes while

their parents worked. One Fortune 500 healthcare company took it a step further and supplemented childcare costs for every single employee in its system. These childcare benefits are a huge attraction for working mothers, making it more feasible for them to re-enter the workforce.

COVID-19 has been a catalyst for change. Although the environment employers and workers once knew has evolved to something hardly recognizable, the evolution has indeed had a positive impact. As employers acknowledge and combat the “she-cession” sparked by the pandemic, there’s promise that former, current, and future female frontline workers can expect a more flexible and family-friendly work environment. <

# Fewer Candidates, Heightened Demand

---

*How Healthcare  
Employers Are  
Closing the Gap*

# COVID-19 shutdowns strained the health career pipeline, and employers are thinking outside the box to offset the shortage.

The pipeline to healthcare careers has been greatly impacted by COVID-19 challenges and shutdowns. Enrollment of first-year students at two-year institutions is down 21% compared to last year, according to a recent National Student Clearinghouse report, exacerbating the pre-pandemic shortage of qualified frontline healthcare workers.<sup>1</sup>

What changes are healthcare employers making to help offset the shortage? And what actions are they taking to ensure they have enough qualified workers to meet their needs in the future?

---

## Enrollment of first-year students at public two-year institutions is down

# 21%

a rate almost 20 times higher than last year's decline (pre-pandemic).

Source: National Student Clearinghouse. (2020, December). Current Term Enrollment Estimates.

## WANTED: FRONTLINE HEALTHCARE WORKERS

Skilled healthcare workers such as medical assistants, phlebotomy technicians, and patient care technicians are in high demand. These are critical roles requiring specialized skills.

According to a survey of healthcare institutions, 75%-93% of healthcare employers now require certification for each of the National Healthcareer Association's (NHA) allied health professions.<sup>2</sup> These certifications can be achieved at career and technical education (CTE) programs and community colleges, which have been hit hard by the pandemic.

When the economy is struggling, people often go back to school, but the pandemic posed challenges for some programs for a large part of 2020, leaving many schools either operating at minimal capacity or not operating at all.

Although healthcare programs fared better than most, enrollment in post-secondary education programs has been down across the board, with two-year institutions seeing the sharpest decline—falling at a rate almost 20 times higher than last year.<sup>1</sup> This plummeting enrollment, a disruption in in-person learning, and a heightened demand have given healthcare recruiters what has felt like an impossible challenge.

The concern is particularly high for frontline workers such as patient care technicians, who provide essential, round-the-clock care for America's growing elderly population. A survey of over 400

# Pre-pandemic in 2019, schools were producing around 60,000 medical assistants.

# In March 2021, ZipRecruiter.com had nearly 700,000 open MA positions.

Sources: datausa.io/cip/medical-assistant (June 2021).  
ZipRecruiter.com (March 2021).

home care agencies found that 90% of senior living and 98% of home care executives are concerned about recruitment.<sup>5</sup>

Their concern is warranted, causing healthcare recruiters to come up with creative and innovative ways to attract, train, and retain essential healthcare workers now and in the future.

#### **HOW HEALTHCARE EMPLOYERS ARE ADDRESSING THE SHORTAGE**

During the COVID-19 pandemic, healthcare recruiters and HR departments had to act quickly to fill essential healthcare roles immediately, while also growing the next generation of allied health workers to fill positions in the future. Increasing the supply of workers requires both short- and

long-term efforts to make education more accessible and employment more attractive.

#### *Better pay, benefits, and financial incentives*

Increasing pay, improving benefits, or offering financial incentives such as bonuses can make allied healthcare positions more attractive. Here's why:

- Current and future students may be more likely to select a healthcare career.
- Retirees or those who voluntarily left the workforce will have incentive to return.
- Existing workers will likely choose to stay in the field longer.

Increasing base pay can be a huge incentive, but it's not the only way to attract candidates. At the height of the pandemic, many healthcare institutions offered their employees hazard pay to encourage them to stay. Some salaries include bonuses for joining and staying on staff, as well as for referring new employees. Ascension, one of the leading nonprofit and Catholic health systems in the U.S., doubled its referral payout to encourage its employees to help fill the need.

Incentives don't have to be limited to pay increases. Other ways employers are attracting personnel include offering enhanced benefits, with options ranging from upskilling opportunities and career laddering programs to more day-to-day support with childcare, daily meals while on shift, transportation assistance, and even housing provisions. These types of benefits not only can entice new candidates but also help improve job satisfaction among existing workers to help with retention.

#### *Expanded candidate pool*

When schools are graduating fewer students, there are fewer candidates available to fill vacant roles. Some regulations were loosened or temporarily lifted to help address the urgent need for healthcare professionals during the pandemic's peaks.



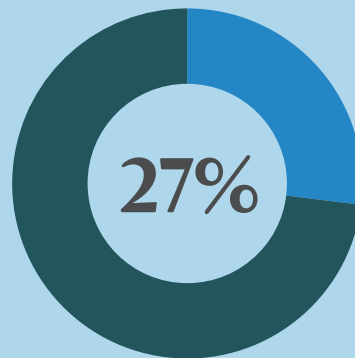
## Hiring Veterans an Option to Help Staff Devastated Front Lines

*(an excerpt from the 2019 access™)*

Military service members annually represent approximately 250,000 candidates transitioning from active duty to civilian life.<sup>1</sup> Those who have gone through different forms of specialized healthcare training are more than qualified to do many jobs in healthcare.

To help service members access credentialing, in 2002, the Army launched its Credentialing Opportunities On-Line (COOL) program. By 2014, all branches of the military had adopted the COOL program to assist their service members in earning credentials.

COOL helps service members find the most direct path toward earning credentials that align with their specialized military training. The program also provides specific directions for how to obtain the credentials. Service members can obtain a voucher that covers the cost of the credentialing exam, and from there, they take the exam, fully funded by the military.



Only 27% of respondents indicated their institution has a veteran hiring initiative.

Source: National Healthcareer Association (2021). 2021 Industry Outlook.



I have always enjoyed helping others. So while in the U.S. Army, I enrolled in school for CCMA, and the rest is history. I have been a medical assistant for about eight years, with hopes of furthering my career in the nursing field soon.

SHANTIECE WILCOX, CCMA

<sup>1</sup> Dupree A. (2018, August 28). The transition from a military to civilian career just got easier. Retrieved March 26, 2019 from <https://www.careerbuilder.com/advice/transition-from-military-to-civilian-career>.

# College Credit for National Certification: Helping the Frontline Go Further and Higher

National Healthcareer Association (NHA) has recently partnered with the American Council on Education (ACE), whose ACE CREDIT program evaluates formal education courses and programs and determines eligibility for college-level credit. Should ACE CREDIT deem the educational work as credit-worthy, that work can be captured in the form of an ACE CREDIT transcript that works in the same way as a traditional college/university transcript.\* These credits can be/could be used to meet continuing education (not for NHA recertification) or career development requirements (for employers) or could potentially be transferred to another institution of higher learning and count towards completion of a degree.

## WHICH NHA CERTIFICATION EXAMS HAVE BEEN APPROVED BY ACE? HOW MANY CREDITS ARE POSSIBLE?

- Certified Clinical Medical Assistant (CCMA) – 2 semester hours, lower-division baccalaureate/associate degree category
- Certified Phlebotomy Technician (CPT) – 2 semester hours, lower-division baccalaureate/associate degree category
- Exam for the Certification of Pharmacy Technicians (ExCPT) – 2 hours, vocational category

NHA is currently working to gain ACE CREDIT approval for additional certification exams and learning resources.

## WHO IS ELIGIBLE TO APPLY TO RECEIVE ACE CREDIT?

Only certification holders that have successfully passed an NHA ACE-approved exam (CCMA, CPT, ExCPT) from **Jan. 1, 2020 to present are eligible** to apply for ACE CREDIT. It is NOT retroactive prior to 2020. ACE exam approvals are good for three years.

» **For more information, visit [nhanow.com/certification/Before-After-Certification/ace-credit](https://nhanow.com/certification/Before-After-Certification/ace-credit).**

\*Please note that the evaluation and acceptance of transfer credit is always up to the incoming institution and it is not a guarantee that transfer credit will be aligned or awarded.

When New York City was the epicenter of the virus, Governor Cuomo issued an executive order that enabled foreign medical graduates, medical students without clinical affiliation, and a number of healthcare professionals with out-of-state licenses to practice in New York. This helped add tens of thousands of healthcare professionals to the front lines to fight the virus.<sup>4</sup>

As temporary orders like Gov. Cuomo's are lifted, healthcare recruiters can learn from the experience and expand search efforts beyond typical CTE and post-secondary or community college program graduates to include:

- Former employees.
- Healthcare instructors.
- Retired healthcare workers.
- Other allied health positions.

During a time of heightened need, Ascension called on two of these groups—retired RNs and former employees—to fill the gaps. Ascension Healthcare Recruiter Mary Coulter said the response was wonderful, and that people wanted to step up to help.

"I would say 80% were definitely on board," she said. "The majority response was, 'Yes, definitely, sign me up,'" a testament to the compassion and dedication that exists in healthcare.



### *Recruitment from struggling industries*

SavaSeniorCare Administrative Services, one of the largest providers of skilled nursing, memory care, and rehabilitative services in the nation, tapped into a market of recently laid-off service, hospitality, and restaurant industry workers to fill its critical need. Although these workers still require the appropriate training and credentials, some of their service skills apply to allied health positions, and the organization offers online training to help these workers obtain the necessary specialized skills.<sup>5</sup>

As employers like SavaSeniorCare Administrative Services launch new training efforts, government initiatives also work to expand the candidate pool with proposed legislation that would help both job seekers and employers.

The Relaunching America's Workforce Act (RAWA) (H.R. 6646), if passed, could provide a \$15 billion investment in workforce training. This includes \$1 billion to support Perkins CTE programs and activities as well as \$2 billion to re-implement the Trade Adjustment Assistance Community College and Career Training (TAACCCT) grant program. To help address the critical healthcare shortage, the funds would prioritize short-term training for essential frontline workers.

"There are jobs coming back. They just require different skills," said Sheri Gonzales, vice president and director of KC Rising, a Kansas City-based regional economic development initiative. Some of the major scholarship programs the organization works with are allocating scholarship dollars toward stackable credentials and certificate programs to better meet today's workforce needs, as well as align to interest.

"Because of COVID, there's been an increased interest in our region in these shorter-term

# Healthcare institutions need frontline workers, and thousands of Americans are out of work—but they need training.

## **Considering partnering with NHA for your Career & Technical Education program?**

Here are a few basic steps to get started:

**Step 1:** Contact NHA to plan the implementation process.

**Step 2:** Identify the profession and certification you want to focus on; align curriculum to NHA Test plan.

**Step 3:** Align with area employers for hands-on learning experiences.

**Step 4:** Implement preparation best practices.

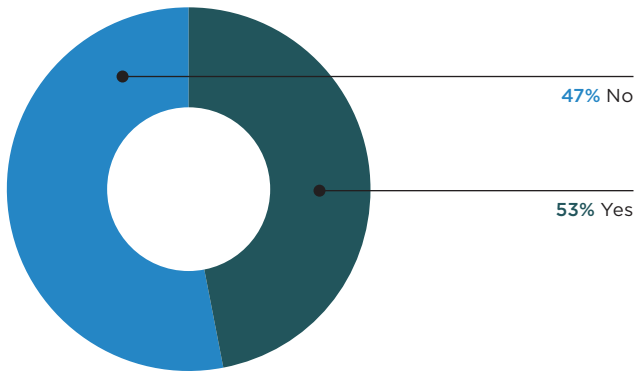
**Step 5:** Plan exam timeline and register candidates.

**Step 6:** Have students take the exam and celebrate results.

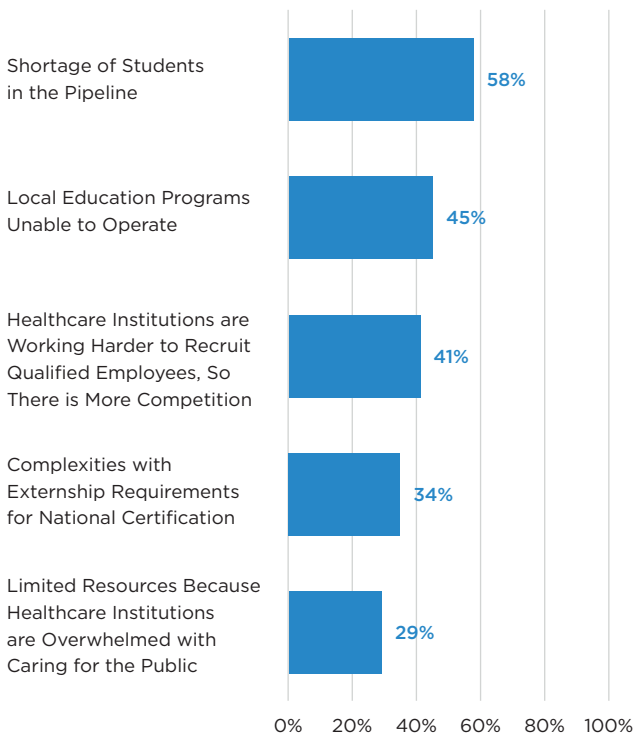
» **For more information, visit**  
**[nhanow.com/secondary-educators](https://nhanow.com/secondary-educators).**

# COVID-19

**Has COVID-19 affected your ability to find qualified, nationally certified allied healthcare workers?**



## Reasons given for healthcare worker shortage:



Source: National Healthcareer Association (2021). 2021 Industry Outlook.

credentials that may or may not require a two-year degree,” Gonzales said.

### Online recruitment, training, and certification exams

COVID-19 has accelerated the growth of online experiences when in-person gatherings posed safety concerns. These shifts have come with challenges but have also yielded benefits.

Career fairs have gone virtual, expanding the candidate pool and removing barriers to attendance. Shifting orientations online and replacing in-person trainings with interactive online experiences has proven to be effective.

For frontline healthcare workers such as medical assistants, phlebotomy technicians, and EKG technicians who require hands-on practice to earn certification, NHA extended the eligibility deadline for an additional 90 days, allowing a total of 180 days (from date of passing the exam) for candidates to complete the requirements during COVID-19.

Some organizations utilized Live Remote Proctoring (LRP) to allow candidates to sit for their exam securely yet remotely. New technology makes it just as secure as in-person examinations.

“Their [live remote proctors] are assisted with AI-technology we didn’t have 10 or 15 years ago, helping them to identify when somebody is looking at other parts of the room and not on the screen,” Jeff Marsh, Ascend Learning’s test security manager, explained in a webinar.<sup>6</sup>

The approval of this technology during the pandemic allowed educational institutions and employers to still securely test and certify properly-trained individuals so they could enter the workforce and contribute to pandemic relief efforts.

### Registered apprenticeships

Registered apprenticeships are relatively new to the healthcare industry but have expanded in recent years. In this model, employers typically partner with local educational institutions to provide a hybrid experience of classroom and on-the-job learning. This model empowers students to get quickly trained and earn while they learn, while also giving employers more immediate help to fill essential roles. The model is especially attractive now and could be even more popular in the near future.

The National Apprenticeship Act of 2021 (H.R. 447) would invest \$3.5 billion in expanding registered apprenticeships, youth apprenticeships, and pre-apprenticeships over the course of five years and create close to 1 million new apprenticeship opportunities.

“There are a large number of highly capable adults who need to maintain their income while they go to school—a full-time MA program will just never fit for them,” Mark Beaufait, apprenticeship director for the Healthcare Apprenticeship Consortium, said in an “Access On Air” podcast episode.

With an apprenticeship model where these learners are working full-time while going to school, Beaufait said, these individuals are able to advance their careers in a pathway that better fits their needs.<sup>7</sup>

Healthcare institutions need frontline workers, and thousands of Americans are out of work—but they need training. Short-term solutions have filled and are necessary to fill the gap, while long-term solutions can help set employers up for success in the future. Both are necessary to address the negative impact COVID-19 has had on the health career pipeline. <



I’m Torrence Pemberton. I am 15, and I have been in the Medical Billing and Coding course. Before I started taking the class, I was trying to better my life and get more control over my education and future. I still needed an extra push that would help me focus on what I wanted and to move from my less-fortunate past. I began to investigate what my options were and I was told that the school had this program that would be a good fit for me.

Since I was young, I wanted to work in some type of medical area, whether it was with animals or people, and this program opened the door for me to pursue what I always wanted to do. After about a month or so in the program, I was told that a medical assisting program was starting and there was only a limited number of spots, so I secured a spot in that program as well. Out of everyone in my family, I am the only one pursuing a stable career, and I am the only one finishing high school and planning on furthering my education.

TORRENCE PEMBERTON



# Texas Woman Recognized as NHA's One Millionth Certification Earner, Helped in COVID Vaccine Study

**C**urtrise Ware, a newly certified clinical medical assistant in Killeen, Texas, recently helped put the National Healthcare Association (NHA) at the “one million certifications issued” mark. Ware passed her national Certified Clinical Medical Assistant (CCMA) certification exam through NHA at the end of August and was able to work with her employer as part of the effort to

bring additional COVID-19 vaccines to the U.S.

“I absolutely love getting up and going to work,” said Ware. “I feel like this job was designed for me ... I love making a difference in others' lives.”

Ware, a former fast-food restaurant manager, was motivated to seek a career in healthcare when her mother was diagnosed with cancer several years ago. Impressed by the care and compassion

of her mother's nurses, she realized that she, too, had a passion to help others and make a difference.

She enrolled in a local medical assistant training program and began the process of studying for the NHA certification exam. Becoming an NHA certified clinical medical assistant is her first step on a journey to become an RN, and she hopes to start nursing school in the next few years.



Ware offered words of encouragement for others interested in pursuing certification and a career in healthcare: “For those considering a career as a CCMA, I would definitely tell them it’s a great start, especially if you’re interested in the healthcare field but not sure exactly where to begin,” she said. “I always kept a positive attitude and remembered why I wanted to come into this career field.” <

**“I absolutely love getting up and going to work,” said Ware. “I feel like this job was designed for me... I love making a difference in others’ lives.”**

# CTE SPOTLIGHT: HOW TWO SUCCESSFUL PROGRAMS STARTED

## Oregon Charter Academy Creates Online Medical Assisting Program That Serves Students Statewide

**W**hen schools shifted to online learning in response to the coronavirus crisis, many looked to successful models like Oregon Charter Academy (ORCA) for guidance on how to effectively teach remotely.

ORCA is a tuition-free online charter school that serves K-12 students throughout the entire state. For 15 years, ORCA has given students access to inclusive and rigorous learning experiences. One of its newest opportunities is a Career and Technical Education (CTE) program called ASCEND. The CTE program is unique in that students can prepare for postsecondary or career success almost exclusively online.

ASCEND is in its third year. High-school students can choose one of four career pathways: computer science, business management, early childhood education, and medical science. Graduates from each pathway have an opportunity to earn industry certification as well as gain relevant knowledge,

skills, and experiences to help prepare them for postsecondary or career success.

“We serve a variety of students from different demographics and backgrounds,” said John Meyer, ASCEND program administrator. “We are student-focused, and we individualize the program to meet each student’s needs and goals.”

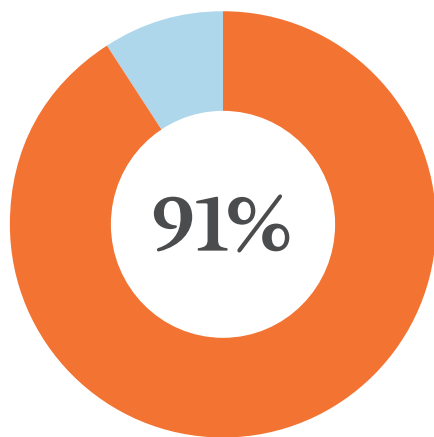
Students in the ASCEND Medical Science program build a strong foundation of knowledge as well as clinical and soft skills to prepare them for a wide variety of healthcare career paths. All students sit for the CCMA exam for the opportunity to become certified clinical medical assistants.

Dr. Jennifer Wallace, medical science CTE master teacher at ORCA, said CCMA was chosen because of the extensive online resources available through NHA (such as the PersonAbility™ soft skills learning and assessment tool and online study resources) as well as the certification’s broad application that could be useful for a variety of careers.

“It’s a great baseline for any healthcare path,” she said. “The CCMA sets them up for success whether their end goal is to become a medical assistant or they want to pursue further education at a postsecondary institution.”

Although instruction is remote, and has been fully remote since the pandemic, in-person instruction has also been used in the past for





**91%** of those interviewed reported they would hire a candidate who has a certification over a candidate who does not.

Source: National Healthcareer Association (2021).  
2021 Industry Outlook.

clinics and internship experiences. When the coronavirus closed doors to these opportunities, they shifted to even more online solutions.

“I was streaming dissections from my kitchen,” said Dr. Wallace. “We’re used to finding innovative online solutions, so with COVID we just had to be flexible and creative. We made it work.”

Having an almost exclusively online CTE program opens up opportunities to students across the state, but it also comes with some challenges. Instead of having a handful of key partnerships with higher education institutions and healthcare employers, ASCEND has many spread across the state—and is continually adding more. Often students find their own internships, and ASCEND follows up with site visits. As ASCEND gains more awareness and its reputation grows,

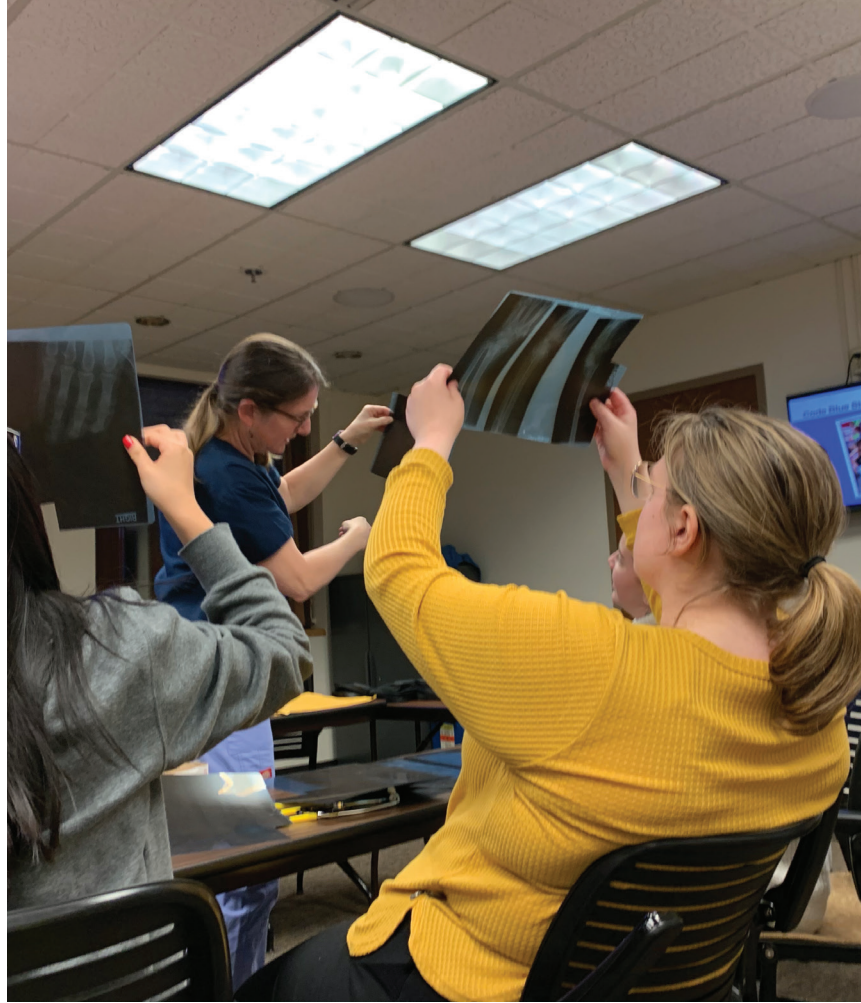


66 33

I recently obtained my EKG Technician certification in December. I can name plenty of times where I thought to myself, “Is it really going to be worth it?” Looking back now, I am so glad I didn’t give up and kept pushing forward. I am also working on receiving my CCMA certification, so that means I will be *double* certified as soon as I graduate.

I would have to say the course is by far the hardest thing I have ever been a part of, but I know in the end it will all be worth it. I am extremely proud of who I am becoming and how far I have come as a person and a student.

CAITLYN RHODES, CET



organizations now reach out to them—a testament to the program’s early success.

Last year, ASCEND had a 100% graduation rate. This year, the program is preparing to graduate about 60 students in the Medical Science program. Most graduates choose to continue their educational journey through a postsecondary program, and often use their CCMA certification to obtain employment while they are in school. Others use their CCMA to launch a career in medical assisting or stack credentials to pursue more allied health professions.

When asked what advice he would give to program directors piloting their own CTE program, Meyer said to set a goal (in their case, the CCMA) and backtrack from there. For the ASCEND Medical Science track, the CCMA

exam became a blueprint for curriculum, classes, tools, and relationships that would mold the program into the success it is today.

“Set your goal and set it high,” he said. “Don’t lower your expectations, but be flexible about how you get there.”

High standards and flexibility have led to a successful program launch. ASCEND is constantly adjusting its curriculum and tools to meet the needs of today so students can achieve success in their future.

“We develop lasting relationships with the students,” Dr. Wallace said. “I get messages from my past graduates, and I love hearing about their achievements after graduation. It’s really rewarding and shows the importance of what we’re doing.”



## CTE Teacher Builds Region's First Certified Medical Assistant Path for High School Students

**S**tephanie never wanted to be a teacher. But a nudge from her sister and a desire to help others led her from being a respiratory therapist to the coordinator of a successful Career and Technical Education (CTE) program. The Medical and Health Science Technology (MAHST) Academy at Apple Valley High School is the only program that can offer certification to high school students in the high desert region.

After 12 years of working in a hospital, Stephanie's sister (an Apple Valley High School teacher) convinced her to teach a couple of health science classes. What started as a couple of classes quickly turned into a passion. Stephanie wanted to help her students access a better future,

and to her the path forward was clear: They needed to achieve certification.

There's no instant "on" switch to develop a certification-based program that helps students pursue a future in healthcare. Stephanie developed the program over the course of a few years, one brick at a time.

The first brick was securing funding. The Apple Valley program was selected to receive the Ryan Cambridge Memorial Grant through the Mourning Sun Children's Foundation. The next layer was a partnership with Victor Valley College (the local junior college). After that, Stephanie picked up the phone and called regional health institutions. When someone said "no," she tried a different angle or asked to speak with someone else.

"They would always say, 'Oh, this sounds so great. But...'" And then they would say why they couldn't do it. I just kept calling and asking until I found somebody willing to jump through the hoops," Stephanie said.

Eventually, she got a "yes." And then another "yes." Enough yeses added up

until the program became one of the most desirable high school academies in the area, because it empowered students to gain real experience and valued certifications.

Her persistence paid off. The program grew from around a dozen seniors to 350 students—a number they now have to cap because of high demand. Every student takes the CCMA exam their senior year. Last year, Apple Valley students achieved a 76% CCMA exam pass rate. Six months after graduation, 70% of these students were in school to further their medical education, and 13% were working in healthcare.

This year, one of the program's participants, Marissa Faria, placed first in the California SkillsUSA state competition in medical assisting and will be competing for a national title and scholarship this summer.

Stephanie said her goal from the beginning was to create more opportunities; to open doors for her students. Coming from a hospital setting, she knew firsthand what they needed to be successful, which is why she was adamant about certification.

Students start their freshman year with coursework that focuses on soft skills and professionalism as well as curriculum centered on communicable and noncommunicable diseases. Their sophomore year they take a CNA course and then study medical terminology their junior year. Seniors take medical assisting, gain valuable experience through internship, and have the option to take an EMT class.

Stephanie said seeing her students succeed is what motivates her. She sees herself as their advocate and works to ensure they have opportunities after graduating.

“I never wanted to be a teacher, but I know now that is my passion because I love helping kids see their potential. Watching them basically change their life and go on a different path is really rewarding,” Stephanie said. <



**I love helping kids see their potential. Watching them basically change their life and go on a different path is really rewarding.**

**STEPHANIE**



# 2021 Industry Outlook

Educators see certification as a milestone for students. Passing a nationally accredited exam means a student is more likely to be work-ready. Employers value the standardization national certification provides and use it to screen job applicants. By using certification as a starting point, healthcare professionals can then work on developing their soft skills, seeking more clinical training, taking on more responsibilities, and developing advanced skills to continue moving forward.

As we've done each year, our survey for the Industry Outlook collected insights and data from employers of allied health professionals, digging deeper to understand what they seek in candidates, what these professional's daily work looks like, and what traits and skills make them most successful in their roles.

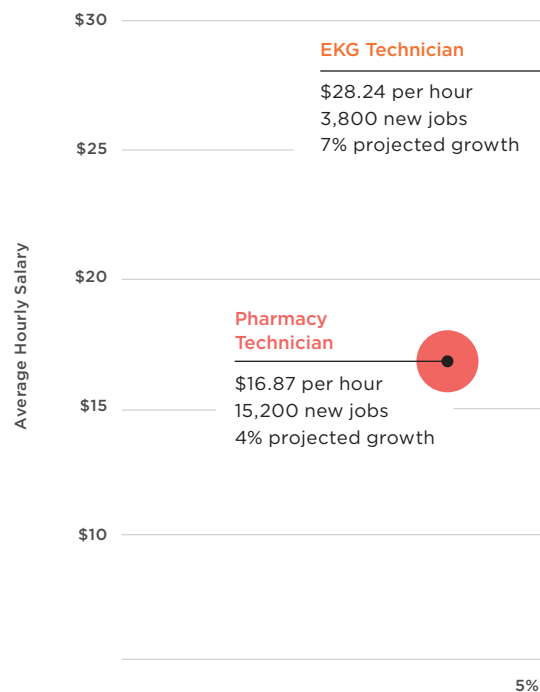
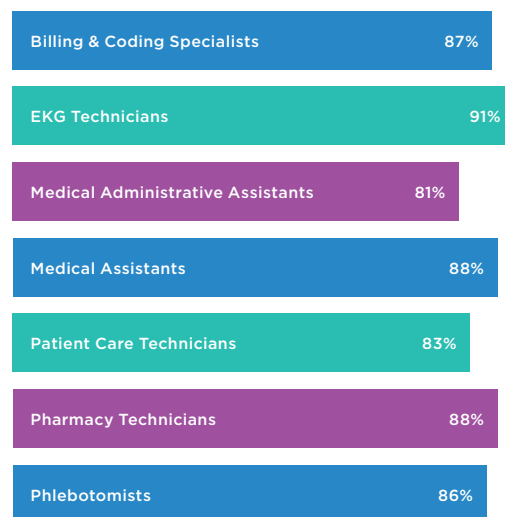
Trend analysis yielded little change in responses from 2020 to 2021, although there were some notable differences in a few key areas:

- There was a **significant increase** across all professions (except medical assistants) in partnering with schools to create programs from 2020 to 2021.
- There was a **significant increase** across employers of all professions reporting that employees have more responsibilities compared to last year from 2020 to 2021.
- Employers of medical assistants and billing and coding specialists reported a significant increase **in the level of difficulty it takes to find qualified candidates** from 2020 to 2021.
- Employers of medical administrative assistants reported a **significant drop in preparedness of new certificate holders** performing their job duties.

These insights are telling. They speak to the resilience of our frontline healthcare workers in the face of a pandemic. They also tell us of the continued opportunities educators and employers have to invest in these professionals and give them access to a better future by ensuring they have solid foundational knowledge, essential soft skills training, and career advancement options.

We hope you find these statistics helpful as you continue to advocate for the role of the allied health professional.

## Percent of institutions that require or encourage certification for the following professions



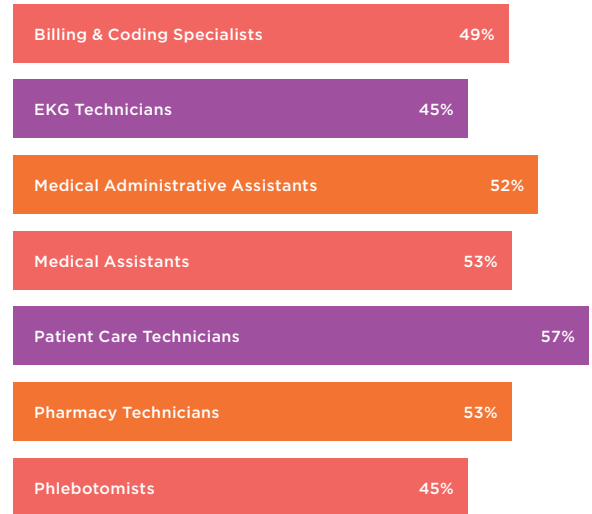
Source: Bureau of Labor Statistics. (2019). Occupational Outlook Handbook. Retrieved on February 12, 2020 from <https://www.bls.gov/ooh/>.



# 27%

**OF INSTITUTIONS  
HAVE A VETERAN  
HIRING INITIATIVE.**

**Percent of institutions that have career growth or laddering programs for the following professions**



**Billing & Coding Specialist**

\$21.20 per hour  
29,000 new jobs  
8% projected growth

**Phlebotomy Technician**

\$17.46 per hour  
22,800 new jobs  
17% projected growth

**Medical Assistant**

\$17.23 per hour  
139,200 new jobs  
19% projected growth

**Medical Administrative Assistant**

\$17.96 per hour  
59,300 new jobs  
10% projected growth

**Patient Care Technician**

\$14.82 per hour  
116,900 new jobs  
8% projected growth

10%

15%

20%

Projected Growth Rate (2018-2028)



Download the full 2021 Industry Outlook at [nhanow.com/2021-industry-outlook](https://nhanow.com/2021-industry-outlook)

# Surviving to Thriving: How It Took a Pandemic to Expand Telehealth



# In response to COVID-19, policy changes paved the way for a rapid expansion of telehealth. As we reflect on the past year, we can learn from the opportunities and challenges that communications technology has yielded and take steps to prepare for what might come next.

In late January 2020, the first case of coronavirus was confirmed in the United States. Less than a month later, the CDC recommended that healthcare facilities and providers in areas affected by COVID-19 offer clinical services virtually. Following policy changes, telehealth

expanded immediately and exponentially with unprecedented growth. There was a 154% increase in telehealth visits during the last week of March 2020, compared with the same period in 2019.<sup>1</sup>

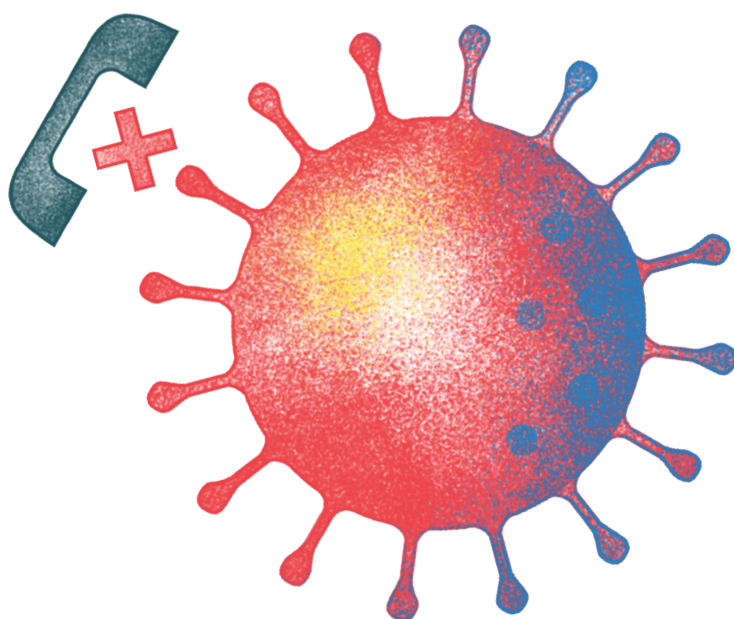
The COVID-19 pandemic has been a launching pad for the accelerated growth of telehealth. Communications technology has been opened

up in healthcare like never before, which has created both opportunities and challenges. Here's an overview of where we've been, where we are, and where we are going with telemedicine and other communications technology.

## RELAXED REGULATIONS THAT KICKSTARTED THE TELEHEALTH EXPLOSION

In March 2020, the Centers for Medicare & Medicaid Services (CMS) announced temporary relaxation and expansion of telehealth regulations, removing barriers to make telehealth opportunities accessible during the pandemic. These changes included:

- Physicians can be paid the same rate for telehealth services as in-person visits.
- Patients can be home or in any other setting to receive telehealth services.





- An existing patient-provider relationship does not need to be established to conduct telehealth visits.
- Cost-sharing for telehealth visits can be waived or reduced.
- Physicians licensed in one state are allowed to see patients in a different state.

“Once those policies and regulations were lifted, patients were able to better access healthcare,” said Chelsea Johnson, MD, FAAP.

Dr. Johnson was an advocate of telehealth prior to the pandemic and is currently the associate pediatric lead at K Health, the most downloaded medical app that allows patients to chat with clinicians virtually anywhere.

“We can now interact with our patients so much easier, because we get paid, we can be at the right place at the right time, and because we don’t have restrictions on things like waiting for a state license,” said Dr. Johnson.

“It’s been phenomenal being able to provide that care.”

#### HOW TELEMEDICINE IS BEING USED AND WHO IS USING IT

Nearly half of all patients (46%) say they use telehealth for some visits, compared to just 11% in 2019.<sup>2</sup> Virtual visits have slowed slightly since the

beginning of the pandemic, but they are here to stay: 83% of patients say they are likely to continue using telemedicine after COVID-19.<sup>3</sup>

COVID-19 is responsible for telehealth’s rapid growth, but most virtual visits are non-COVID related. From January to March 2020, 93% of telehealth patients sought care for conditions other than COVID-19. These telehealth encounters were mostly for adults ages 18-49, and 63% were female.<sup>1</sup>

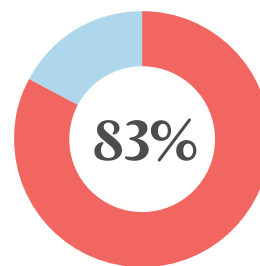
The top three conditions patients sought telemedicine treatment for were:

- Allergy, ear, nose, and throat
- Routine preventative care
- Mental/behavioral health/therapy<sup>3</sup>

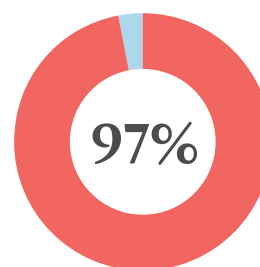
Beyond patient visits, telehealth is also being used for better provider tools and collaboration. Many are using “store-and-forward” consultation applications, where medical data/images are sent to specialists who review and provide feedback at a later time. Remote monitoring tools that collect data such as weight, blood pressures, and blood sugar levels can be powerful in managing chronic illnesses like heart failure, diabetes, hypertension, and chronic obstructive pulmonary disease.

#### THE RISE OF SMARTPHONE USAGE TO STREAMLINE PATIENT CARE

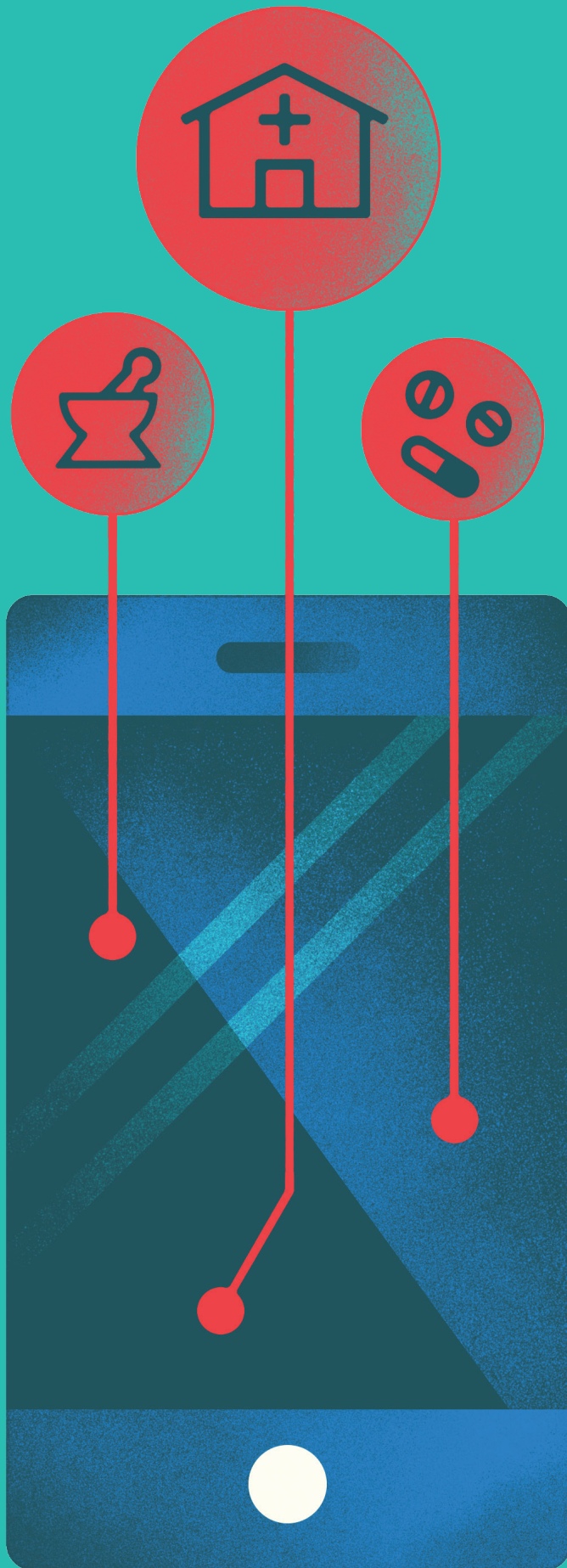
Other communications technology is being examined and innovated, and the stresses of COVID-19 have accelerated adoption. As demand for services increased due to the coronavirus, hospitals have turned to technology to help alleviate pressure on an already strained system.



83% of patients say they are likely to continue using telemedicine after COVID-19.<sup>3</sup>



By 2022, 97% of nurses will use mobile devices at the bedside.<sup>3</sup>



“What COVID really revealed to us is that we’ve all got to get our acts together and get organized around our [mobile] strategy, because people die when we don’t get things to the right people at the right time,” said Kourtney Govro, managing director of KDG Innovations.

Govro has 20 years of experience partnering with hospitals to design mobile strategies and has seen technology in healthcare settings evolve.

By 2022, 97% of nurses will use mobile devices at the bedside. Hospitals that have embraced mobile technology cite improvements, including reduced cost of patient care and improved quality of patient care.<sup>4</sup> When health-care workers have the ability to be more efficient communicators, they can more effectively work with patients and other care providers.

“There are certain things you have to do on your computer because of the way you have to enter information, but a lot of this stuff is going to be quick on your smartphone. And for allied health professionals, it’s huge. Imagine if your pharmacy technician, or whomever, is assigned to a group of units. They may be assigned to the whole hospital and need to get information

# When healthcare workers have the ability to be more efficient communicators, they can more effectively work with patients and other care providers.

to the right space. Those kinds of communication pieces right now are super fragmented,” Govro said.

The drive toward patient-centered, collaborative care promises improved patient outcomes, but technology needs to keep up to be most effective at not only promoting team-based care, but also in addressing clinical healthcare worker burnout, which Govro said is the No. 1 problem for 2021.

“We need to be more collaborative to reduce workload. And we look at everything as workload,” she said. “From the physical act of entering a patient’s information into their electronic file to the emotional decision of which patient gets your attention at that moment in time ... it’s all work, and it can feel like a heavy load.”

## **BENEFITS AND CHALLENGES OF TELEHEALTH**

It’s been over a year since the world of telehealth was opened up in response to

COVID-19. What have we learned in that time?

### *Benefits*

Experts agree telehealth is here to stay, and a big reason for that is all the benefits it has yielded, including:

- **Improved adherence.** Ninety-one percent of patients agree that telemedicine would help with appointment and prescription adherence.<sup>3</sup>
- **Expanded healthcare access.** Virtual visits have allowed for on-demand healthcare access and allowed patients to connect with providers who might otherwise be out of reach.
- **Patient satisfaction.** Out of 1,000 telehealth patients surveyed, over 75% were very or completely satisfied with their virtual care experiences.<sup>5</sup>
- **Control of infectious illness.** Pre-screening patients for possible infectious disease can reduce exposure and prevent sick

people from having to come to a healthcare office.

- **Cost effectiveness.** Telehealth can reduce overhead costs in the form of fewer exam rooms and less need for office support. Additionally, it creates the ability to see more patients, which can increase revenue.
- **Comfort and convenience.** Telehealth allows greater flexibility for both patients and providers. This can be especially impactful for those who are not mobile or for parents who stay home with children and have difficulty making it to appointments.

### *Challenges*

The rise of telehealth has improved healthcare access and connected clinicians and patients in new ways, but there are some growing pains to overcome (as one would expect with a sudden and drastic shift). Some of these challenges include:

- Cyber security concerns.
- Limited access to

adequate broadband services in rural areas.

- Reimbursement issues (fee-for-service model).
- Lower technology use among older adults.
- Limitations when certain examinations must be conducted in person.
- Liability concerns.

Telehealth cannot completely replace in-person care, but it can provide care for both acute and chronic illnesses when a face-to-face visit isn't necessary. Some challenges are policy-related, such as reimbursement, and many leaders in the healthcare space are optimistic that things are headed in the right direction.

"We are waiting to see how much we'll return to pre-pandemic restrictions and how much of it's going to continue to be as it were now, and hopefully change and improve access," said Dr. Johnson.

Policymakers are currently introducing bills that would expand broadband access nationwide, which would remove a big barrier for rural patients. It's likely that this is one of many developments

that could impact telehealth in a big way.

#### **FURTHER ADVANCEMENTS AND CHANGES TO ANTICIPATE IN THE FUTURE**

Time will tell what the permanent impacts of COVID-19 will be to healthcare technology. As we look to the future, some predicted advancements include:

- Increase of telehealth visits.
- Expanded use of remote patient monitoring.
- More focus on value-based care models of reimbursement.
- Easier sharing of patient records (among providers).
- Increased use of smartphones for communication and monitoring.
- Using AI to drive efficiencies, particularly as clinical decision support.<sup>6</sup>
- More direct-to-consumer healthcare companies that challenge traditional healthcare models.

Technology has come to the top of healthcare leaders' priority list. Prior to the pandemic, a survey from the Center for Connected Medicine (CCM) revealed that just 26% of healthcare executives said the shift to telehealth and virtual care was a top innovation priority—a number that has now jumped to 49%.<sup>6</sup> In the same survey,

**With virtual visits, some nonverbal communication is lost, and effective communication skills are needed to establish and maintain a strong patient-provider relationship.**



those who implemented quick, short-term solutions said they are looking forward to improving integration, infrastructure, and security for an updated telehealth strategy.

“I’m really looking forward to some of these changes, but it’s going to take innovators and disruptors and people looking at the problem differently to impart new, creative solutions to the way our healthcare system is,” Dr. Johnson said. “It will happen. It may not be this year, but more and more change is taking place in the right direction.”

#### HOW CURRENT AND FUTURE HEALTHCARE PROFESSIONALS CAN PREPARE

In healthcare, as in any industry, advancement is one of the only constants. Although the lift of restrictions that enabled telemedicine to explode were temporary, it’s likely that telehealth is here to stay. Healthcare-related organizations and advocacy groups are pleading with congressional leaders to make permanent changes, and current and future healthcare professionals should prepare themselves.

Healthcare educators are already incorporating telehealth training in their curriculum. In addition to being comfortable with technology, there’s a need for

healthcare workers to learn good “web-side manner.” With virtual visits, some non-verbal communication is lost, and effective communication skills are needed to establish and maintain a strong patient-provider relationship. In the case of chat-based visits, such as those on the K Health app, it can be especially nuanced. Dr. Johnson notes you can impart empathy, even through chat, but training is essential because it doesn’t come naturally.

Training solutions that help address this need are already available and being used by healthcare educators and employers. Kognito, a company that is part of the Ascend Learning family, is a health simulation company that has incorporated telehealth visits into many of its simulated training solutions to better prepare clinicians for today’s healthcare environment. They also developed a “pre-visit checklist” to help providers better prepare for virtual visits.

“Our simulations do teach you what to say, but unlike most other training you’ll find, they also teach you how to say it,” said Gurnek Singh, head of product, Healthcare, Kognito. “It’s difficult to anticipate how you might come across

## Soft Skills

**These are the most important soft skills across all professions, according to employers surveyed.**

- 1 Professionalism
- 2 Critical Thinking
- 3 Verbal Communication
- 4 Dependability

National Healthcareer Association (2021).  
2021 Industry Outlook.

the first few times, and you want to make sure that you’re overcoming some of the barriers of the technology to continue to deliver a strong, empathic, and caring type of provider visit.”

The adoption of telehealth and technology has been a silver lining of the pandemic. As we move to a new blend of virtual and in-person care, the future is unknown. But one thing is certain: The way people receive and prefer to receive care has changed. While in-person visits won’t vanish, it’s likely the telehealth momentum the pandemic created will change the healthcare landscape for good. <





# Postpandemic Future Is Bright for Technicians

*Sarah Carpio, BS , Valerie Wasem, BS , Joanne Canedo, BS, MS ,  
Shane P. Desselle, PhD, RPh, FAPhA*

*Originally featured in Pharmacy Times Pharmacy Technician Edition  
April 2021, Volume 2, Issue 1*

## Tapping Pharmacy Technicians as immunizers opens up greater visibility and a new source of healthcare labor.

A silver lining can be found in every cloud, according to the proverbial phrase. Although the coronavirus pandemic can hardly be called a mere cloud, it has opened up opportunities in the pharmacy profession that are likely to continue even after the pandemic has abated.

Techs have become an integral part of the COVID-19 vaccination effort. Prior to the pandemic, techs were not relied upon frequently as vaccine immunizers. However, once the U.S. Department of Health & Human Services (HHS) expanded the roles of techs to administer vaccines to the public,<sup>1</sup> a previously untapped source of health care labor capital was unleashed. With it came the potential for more efficient distribution of vaccinations and greater visibility for pharmacy personnel.

Programs that train techs to administer vaccines have demonstrated positive outcomes. In Idaho, 300 techs were trained, 25,000 vaccines were administered, and no adverse events have been reported to the state board as of April 2021.<sup>2</sup>

The recently amended Public Readiness Emergency Preparedness (PREP) Act demonstrates how states could adopt similar legislation for techs even after HHS suspends related public health emergency declarations.<sup>1</sup> Coinciding with the pandemic but also with other factors, various states have initiated bills expanding the scope of practice for techs to maximize efficiency without compromising patient safety.

There is a movement to examine pharmacist-to-tech ratios, and economic and legal reviews have indicated this to be beneficial.<sup>3</sup>

Pharmacy practice in the United States has been evolving toward patient-centered care to fulfill shortcomings the biomedical model alone cannot address, such as difficulty

navigating the complex health care system, health disparities across various patient groups, holes in the safety net, insufficient social support, and marginal health literacy. After years of relatively sparse attention, pharmacy technicians have become the focal point of a large number of studies published in high-impact, peer-reviewed journals.

McKeirnan et al. gathered patient perceptions on receiving immunizations from techs and found that those patients thought the process was convenient and safe, showing no hesitancy in receiving future services or in recommending these services to family and friends.<sup>4</sup>

Wheeler et al. argued the need for a capable tech workforce to support the roles

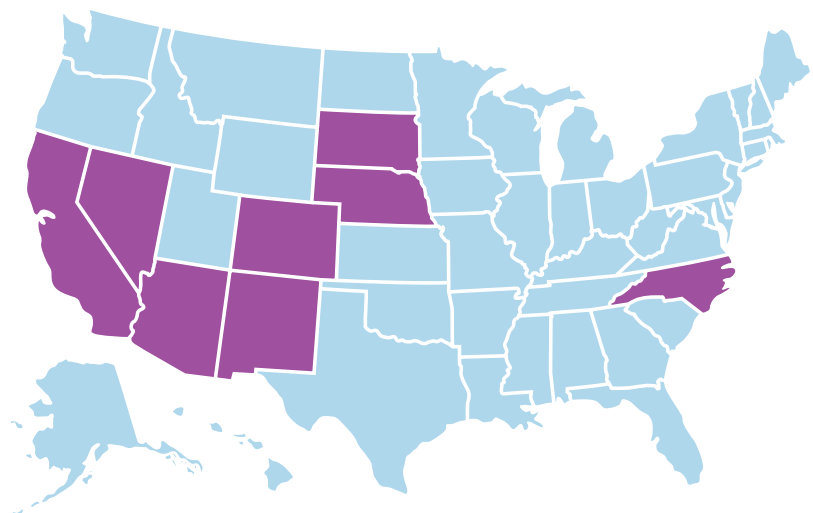
---

## Coalition for Advancement of Pharmacy Technician Practice

**The Coalition works to advocate for pharmacy technicians across the country. If there are technician efforts within your state or state Board of Pharmacy that you would like the coalition to support, please contact Jessica Langley at NHA to discuss the opportunity. Below is a list of events/states in which the coalition will be engaged in both formal and informal discussions.**

1. Nevada BOP Meeting
2. Colorado
3. Nebraska
4. New Mexico
5. South Dakota
6. Arizona
7. NCPA Annual Meeting
8. California

» **To learn more visit:**  
**[info.nhanow.com/pt-coalition](http://info.nhanow.com/pt-coalition)**





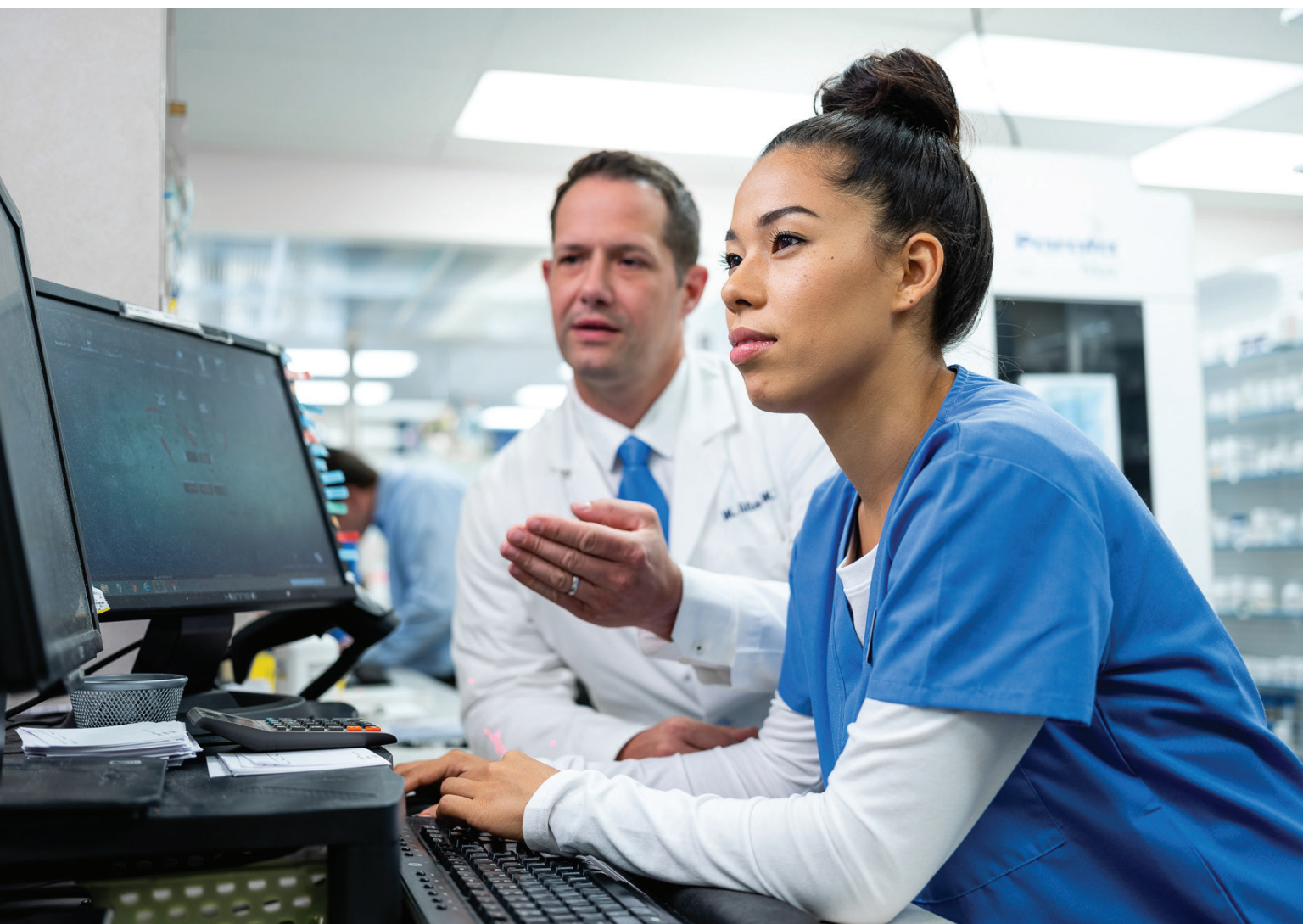
of pharmacists, noting that pharmacists practice at the top of their licenses not when more is added to their plates but when they can design their practices by delegating duties to techs as they see fit.<sup>5</sup> This was further underscored in a study that highlighted the effectiveness of the optimizing care model, which proposes a workflow redesign that transcends tech-check-tech.<sup>5</sup> In this study, pharmacies using the model had implemented a greater number of new value-added services while expanding existing ones, all with greater work satisfaction by pharmacists and techs, as well as high praise from district and regional managers.<sup>6</sup>

The National Association of Chain Drug Stores touts this model as a way forward

and points to several states having accommodated practice change regulation in light of this model and other evidence.<sup>7</sup> This follows other study results showing that techs have demonstrated effectiveness and safety in a variety of tasks, such as tech-check-tech and gathering medication histories from patients in hospital settings.<sup>8,9</sup>

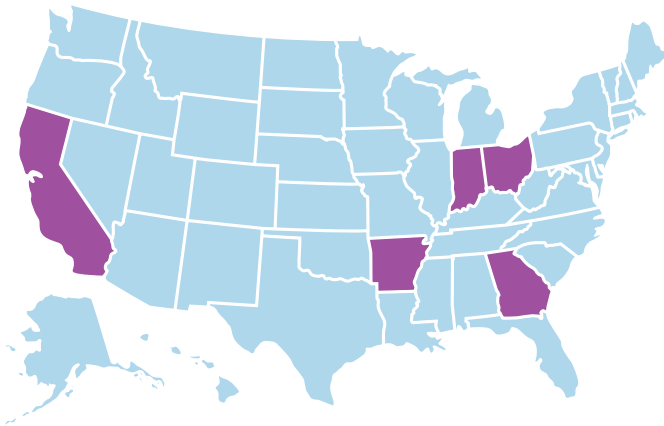
A recent study conducted an economic evaluation of advanced tech responsibilities.<sup>10</sup> Results showed that increasing the skill set of techs helps reduce pharmacy operations costs—and not at the expense of pharmacists' jobs.

The study recognized, however, that more must be done to standardize technician education and training and to recognize value in certification in partnership with



## Expanding Technician Roles

**In the past year, these states have passed legislation that relates to the pharmacy technician's role in the pharmacy. More are being added to this list every month.**



# 500



**Employers of pharmacy technicians reported that the median number of prescriptions their pharmacy fills per week is 500.**

Source: National Healthcareer Association (2021). 2021 Industry Outlook.

experiential and on-the-job activities, along with a commensurate increase in techs' wages. These findings are commensurate with those from other recent studies.<sup>11</sup>

Sparkmon et al. observed generally favorable attitudes among pharmacists in promoting tech roles in medication-dispensing support, product verification, and various nonclinical tasks to assist pharmacists with medication therapy management (MTM).<sup>12</sup>

Investing in the development and growth of techs may lead to a new source of leadership and managerial personnel for the profession. Furthermore, it is important to keep the goodwill that increased the scope of practice that techs gained during the pandemic through the PREP Act. Techs are increasingly trusted members of the pharmacy team. Pharmacists rely on techs to assist with pharmacy operations, and community pharmacists have referred to techs as the "face" of the pharmacy because they often interact frequently with patients, helping develop customer loyalty.<sup>13</sup>

In a study by McKeirnan et al., patients' positive relationships with pharmacy staff members increased their comfort, confidence, and trust in immunizations administered by techs, and this translated to more positive feelings about pharmacies as an appropriate venue to receive health care beyond the receipt of prescription medications.<sup>4</sup>

The trust techs build with patients is paramount. The American Society of Health-System Foundation Pharmacy Forecast 2021 discusses increases in access to health care in areas where techs have greater involvement.<sup>14</sup> Techs can work with patients to resolve access barriers to medications and services, as in the case of logistical components with MTM as well as other programs, such as manufacturer-sponsored patient assistance.



A recent report in the *Annals of Pharmacotherapy* indicated the importance of techs in the rising use of telepharmacy, which was predicted even prior to the onset of the pandemic.<sup>15</sup> Pharmacy leaders should assess how expanding techs' scope of practice will benefit the profession and the patients it serves. A consensus on adequate education and infrastructure needs, in addition to proper workflow planning, will be necessary to gain coveted roles as health educators and more formal recognition as health providers to acquire payment for cognitive services.<sup>16</sup>

The silver lining in an otherwise bleak and horrific pandemic may be the opportunity to

clearly denote pharmacy as a venue for patients to obtain public health services and important health information. As the profession continues to evolve, techs must diversify their repertoire to include greater knowledge of behavioral and social aspects of care, in addition to skills in oral and written communication and leadership. This will be aided by renewed commitment from boards of pharmacy, education providers, and employers.

The pandemic has set the profession on a certain path toward better recognition and better care for patients, and there is no turning back. <

# A Solid Foundation *for* Future Success

**How Foundational Courses Serve as the  
Building Blocks to a Successful Health  
Science Educational Program**



## These courses play a critical role in developing a foundation of knowledge in any health science field—and successful professional performance—but unfortunately, completing these courses can be a struggle for students.


If you've traveled to a foreign country and had the experience of being immersed in a different language, you know the disorienting feeling of not having the knowledge to navigate the new terrain. Street signs are meaningless, restrooms are elusive, and the most basic interaction can result in crossed signals.

Pursuing a career in healthcare can present students with a similar

sense of overwhelm. Even if a student studied biology or chemistry in high school, chances are good that stepping into medical terminology and anatomy and physiology coursework feels like exploring foreign territory. These students are literally learning a new language and exploring a new (human) landscape.

For students eager to embark on a career in healthcare, learning the native language of their chosen field is essential to charting the course for a successful professional journey. This includes learning medical terminology as well as acquiring core knowledge about the human





body through anatomy and physiology courses.

Just as a traveler versed in the native language can read the street signs, communicate with the locals, and interpret more nuanced interactions, students who have successfully completed these foundational courses have the tools to engage more effectively with future academic material and in their professional roles.

Tricia Berry, Ph.D., M.A.T.L., associate dean and director, Clinical and Practicum Programs at Purdue University Global, said, “Strong foundational courses give students knowledge, confidence, and a sense of their obligations as healthcare professionals. These courses start the student down the path of understanding and developing their professional identity.”

Developing foundational course material and delivery methods that engage students from a variety of backgrounds and connect them with the content in a meaningful way is more important than ever to maintain a pipeline of qualified, motivated healthcare professionals.

The aging population and ongoing impacts of the COVID-19 pandemic continue to accelerate demand for frontline healthcare

professionals. Employment in healthcare occupations continues to grow much faster than the average for all occupations, with about 2.4 million new jobs projected to be added to the field by 2029.<sup>1</sup>

To meet the continually rising demand, health science educators are developing creative approaches to teaching foundational courses, striving to better support students and mitigate traditionally high attrition and course failure rates.

#### **FOUNDATIONAL COURSES ARE THE BEDROCK**

“Ensuring that healthcare students are successful in key foundational courses is crucial,” said Mary Gjernes, M.S., assistant professor, Division of Health and Natural Science, at Presentation College in Aberdeen, South Dakota.

“Preparing students with a firm knowledge of medical terminology and anatomy and physiology is vital to success in health science programs and in a career in the medical field,” she said. “Knowing and understanding word parts, the spelling and definition of words, and how each system of the human body works together are essential before a student moves on to upper-level science courses, such as pharmacology, immunology, epidemiology, biochemistry, physics, and many more.”

These courses are required subjects for the vast majority of healthcare degree and certificate programs, providing the universal language and knowledge underlying healthcare professions.

Berry notes this core knowledge is critical whether the student's goal is to obtain a clinical or an administrative role.

"If they have solid knowledge in medical terminology and anatomy and physiology, it helps them in all their other courses, because those two topics provide the foundation for clinical knowledge and procedures as well as billing and coding tasks."

Medical terminology, for example, is quite literally the language of medicine. Understanding and memorizing common prefixes, roots, and suffixes and combining vowel elements provides students the key to engage in more advanced coursework. Whether a student is studying to be a medical assistant or a medical coder, the ability to dissect and understand medical terminology is critical.

Anatomy and physiology is similarly essential. Understanding the structures and functions of the body is a first step toward a career focused on patients' health and well-being.

"Understanding and retaining this content provides a

**"If they have solid knowledge in medical terminology and anatomy and physiology, it helps them in all their other courses because those two topics provide the foundation for clinical knowledge and procedures as well as billing and coding tasks."**

**DR. TRICIA BERRY, Ph.D., M.A.T.L., associate dean and director, Clinical and Practicum Programs at Purdue University Global**

critical framework in the overall course of study," Gjernes said. "High-quality foundational courses develop an in-depth understanding of content, communication, and collaboration skills, expanding a learner's problem-solving and critical-thinking abilities."

Beyond the essential vocabulary and content these classes offer, this early coursework—which Gjernes notes is ideally delivered in a student's first two semesters of study—captures interest in health science and "enables students to dissect material and problem solve when enrolled in upper-level course study."

In addition, Berry said, "Students often use these foundational courses to develop good study habits. Much of the content requires a lot of pure memorization, so it provides great practice material for learning solid study habits."

As students complete healthcare degree or

certificate programs, achieve certifications, and move into professional roles, the principles and language of these foundational courses also play a significant role in their integration into care teams and healthcare organizations.

"The basic principles and expectations conveyed in introductory courses provide common reference points to guide coordinated collaboration among all healthcare professionals," Gjernes said, "thereby ultimately helping to accelerate inter-professional team-based care delivery. Foundational didactic knowledge allows students to excel in the application process and in their clinical performance."

#### **BEYOND THE BARRIERS: ENGAGING STUDENTS IN FOUNDATIONAL COURSES FOR FUTURE SUCCESS**

Although there's no question as to the critical role these courses play in developing a foundation of knowledge in the field—and successful professional

performance—completing these courses can be a struggle for students. In fact, introductory anatomy and physiology courses commonly have 30%-40% dropout and failure rates.<sup>2</sup>

The first barrier to success in these courses—the struggle with prerequisites—can actually occur before a student ever reaches the clinical portion of their program—a result of the common perception of the difficulty and discipline required for these foundational courses. In the case of anatomy and physiology, specifically, students

often encounter the material and are daunted by what they perceive as a colossal memorization task...a burden of expectation that can set them up for failure.<sup>3</sup>

Once immersed in a foundational course, students may be challenged by passive teaching methods that don't recognize the need to address individual learning styles. In this scenario, a student who is a visual learner may be able to stay on top of memorization or reading, but an auditory (learns by listening) or kinesthetic (learns by doing) learner could fall behind if they don't engage with the material. And, in many cases, students begin foundational courses with little to no preparation in basic science or math courses—or with the study skills required to dive into the material.<sup>4</sup>

These challenges to successful completion of foundational courses are reflected in high rates of attrition and failure to meet the required grade to pass anatomy and physiology at institutions across the country.<sup>5</sup> Given these courses are generally prerequisites for the remaining courses in a degree or certificate program, students who are not able to complete the courses find their professional goals delayed or derailed, and the pipeline of qualified allied healthcare workers suffers.<sup>6</sup>

## INNOVATE TO ACTIVATE LEARNING

Given the challenge of retaining students and helping them achieve academic success, educators continue to seek new approaches to engage students in foundational classes—in person and online. In both modes of delivery, an “active learning” approach can help students absorb and retain the information.<sup>7</sup> Active learning immerses students in the subject through discussion, reflection, collaboration, and problem-solving activities.

“Daily classroom activities must be varied to engage students with different learning styles,” Berry said. “There will always be some reading and memorization, but auditory, visual, tactile, and kinesthetic activities help students engage with and solidify their understanding of the content.”

Active learning strategies are increasingly being applied to anatomy and physiology courses to improve student engagement and interaction—with positive results.<sup>8</sup> Educators are sharing creative ideas as innovation increases in this area. Examples include writing poetry to help with memorization, creating guided drawing exercises to aid anatomy and physiology students, and integrating





small-group discussions and projects within larger lecture classes.<sup>9</sup>

Although the specific tactics and tools to deliver material in this way varies across in-person and virtual classes, Gjernes and Berry note a variety of tactics that have proven successful in their experiences. Here are some of them:

- **Aim for Dialogue, Not Monologue**—“Developing dialogue with students in a tone and demeanor that encourages increased participation engages them and helps them retain the information being discussed,” Gjernes said. “We need to talk *with* students, not *at* them, which creates a sense of ownership of their learning.”
- **Develop Meaningful Connections**—“Students need to feel safe and experience success if they are going to keep moving forward,” Berry notes. “Meaningful connections between the faculty and student during foundational courses can set the entire tone for the remainder of the student’s education. The foundation of most allied health professions is being able to build relationships with others, so in doing this, faculty are modeling the skills a student will need within their career.”

- **Make it Personal**—“Over time, engaging students with personal interaction and meaningful and relevant facts is very effective,” Gjernes said.

This can mean engaging students in conversation around how they feel about a topic, asking if they have personal experiences related to the material, or connecting the topic with current, real-world examples.

“This personal interaction fosters connection and develops enthusiasm for the subject,” Gjernes notes.

- **Focus in on Fun**—“Making learning fun is of utmost importance for engagement in foundational courses,” Gjernes said. “This could include creating a game around a lesson plan or storytelling related to the course material, both of which can be effective in helping students learn and retain information.”

Additionally, offering online, interactive elements can break up the monotony.

- **Recognize Unique Learning Styles**—“Identifying different learning styles allows students to recognize their strengths and weaknesses in learning, allowing them to become more engaged as learning is easier for them.”

Across efforts to engage and help students retain this vital knowledge, Berry said, the goal is to, “manage the classroom in a way that allows students to develop their study habits and insight into how they personally learn best.”

When these goals are realized she said, “these courses can really position students for success and help them understand what to anticipate for the rest of the program, and, in turn, their career.”

## CONCLUSION

The language and knowledge of foundational coursework is essential and will serve students throughout their professional careers. There is a clear and present need to ensure students are engaging with and retaining the material in these courses, because it forms the bedrock of their academic and professional success.

“Effective strategies for student success in the healthcare professions initiate from foundational course learning,” Gjernes said.

“From my view, as an advisor and a professor in Health and Natural Sciences, it is apparent that successfully learning this material in foundational courses is critical to keeping students engaged and focused on their professional trajectory.” <

# In Their O



**The two winners of the 2020 NHA Career Bridge scholarship share their stories of heartbreak and struggle—and the passion that keeps them going.**

**Oluwafemi Awomoyi,**  
Certified Clinical Medical  
Assistant (CCMA)

**A**s an immigrant from Nigeria, Africa, seeing my people die from diseases that are preventable or even insignificant to the Western world was always a difficult pill for me to swallow. In one fateful weekend during

# wn Words

my teenage years, I lost my three-year-old cousin. She died of pneumonia. I can still picture her twin brother crying inconsolably, witnessing his best friend weak and gasping for air before she died. She could have survived with just a simple shot of pneumococcal vaccine. That day, as I was feeling angry at the world, I decided that I would go the distance to prevent other unnecessary losses of life. I would become a renowned physician.

Coming to the United States to pursue a better life and carry out my goal of becoming a healthcare professional has given me a fair share of challenges. Up against the peculiar hurdle many immigrants like myself often face in needing to start over in their career path once abroad, I have sometimes felt as though my dreams were fading away. However, if you are focused, it is not impossible to achieve one's dreams in this land filled with dreams and opportunities. Having completed years of education in Africa that sometimes feels like a waste, I am left with the conclusion that I must start wherever I can.

The first big step I took toward that end was becoming an NHA Certified Medical Assistant. Serving as a medical assistant has

## Immunizations

"Immunizations currently prevent 2 million to 3 million deaths every year. Despite this success, more than 1.5 million people worldwide die from vaccine-preventable diseases each year."

- Children's Hospital of Philadelphia

**"As an immigrant from Nigeria, Africa, seeing my people die from diseases that are preventable or even insignificant to the Western world was always a difficult pill for me to swallow."**

OLUWAFEMI AWOMOYI, CCMA

been the perfect opportunity to rekindle the passion that the challenges of being an immigrant had threatened to extinguish. Working in the medical field in this beautiful country has given me new life, allowing me to take a small part in that same dream borne of my young cousin's tragedy. I believe I still have more to offer, however.

If I am able to pursue residency and further my medical education in the United States, I will be able to come into the fullness of my

desire to save life whenever and wherever I can. The NHA Career Bridge Scholarship will aid me in paying for the USMLE board exam, which is the next step toward me becoming a medical doctor in this great nation. The prospect of being awarded such a scholarship excites me. It allows me to imagine a reality where the death of my young cousin and millions of others, which could have been prevented by the medical knowledge of persons like me, was not in vain.

### Immunization Training to Meet the Demand

National Healthcareer Association (NHA) is now partnering with CEimpact to offer pharmacy technicians an ACPE-accredited immunization training option, helping them qualify to administer vaccinations according to the U.S. Department of Health and Human Services' (HHS) Public Readiness and Emergency Preparedness (PREP) Act.

CEimpact, a leader in pharmacy training and education, will provide both immunization training and technician-specific continuing education courses to NHA's educational and employer partners, along with pharmacy technicians. The immunization training is open to all state-licensed pharmacy technicians, regardless of whether they are nationally certified.

### Amy Kennalley, Certified Phlebotomy Technician (CPT)

**M**y family runs a non-profit equine rescue, which keeps home life interesting, to say the least. I feed the horses twice a day and find impactful ways to help by organizing fundraisers and events. I also volunteered in the emergency department of my local hospital last year.

However, the COVID-19 shutdowns paused the volunteer program. Knowing I needed to find ways to help the healthcare field during this unprecedented time, I completed a phlebotomy technician program.

I received my Phlebotomy Technician Certification concurrently with my master's degree in the program at Geisinger Commonwealth School of Medicine, maintaining a 4.0 GPA. I also sit on the executive board of the Graduate Student

# “I am excited to understand more of the inner workings of patient care in pursuit of my medical degree.”

AMY KENNALLEY, CPT

Council as the health, wellness and social engagement chair, all while working with children with autism spectrum disorder as a behavior technician and fulfilling my duties at my family’s equine rescue.

My ongoing education at Geisinger Commonwealth School of Medicine, along with my emergency department volunteer experience, and becoming a phlebotomist, position me to considerably and efficiently assist the local COVID-19 efforts, so I applied to be a COVID-19 tester. With COVID-19 as an ongoing threat, I am eager to learn safe healthcare practices in a high-risk environment. I am excited to understand more of the inner workings of patient care in pursuit of my medical degree.

This scholarship prize will advance my education because I am applying for medical school this coming cycle.

Ever since I was a kid visiting the children’s hospital in Oakland, California, with my mom, a pediatric nurse practitioner, I knew I wanted to work in healthcare. Seeing my mother’s empathetic care of critically ill children inspired me to pursue medicine. I saw the difference she could make, not only in their health, but in their spirit.

The future of healthcare is changing each week, but I hope that with my strong adaptability and resilience, I can make a difference .<



# References

## Picking Up the Pieces: What We've Learned

- <sup>1</sup> Coto J, Restrepo A, Cejas I, Prentiss S. The impact of COVID-19 on allied health professions. *PLoS One*. 2020;15(10):e0241328. Published 2020 Oct 30. doi:10.1371/journal.pone.0241328
- <sup>2</sup> <https://chghhealthcare.com/blog/survey-healthcare-career-satisfaction-drops-burnout-rises-amid-covid-19/>
- <sup>3</sup> <https://psychiatryonline.org/doi/10.1176/appi.ajp-rj.2017.120402>
- <sup>4</sup> <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0241328>
- <sup>5</sup> <https://www.aha.org/system/files/media/file/2020/05/caring-for-health-care-heros-during-covid-19.pdf>
- <sup>6</sup> Li Y, Scherer N, Felix L, Kuper H (2021) Prevalence of depression, anxiety and post-traumatic stress disorder in health care workers during the COVID-19 pandemic: A systematic review and meta-analysis. *PLoS ONE* 16(3): e0246454. doi:10.1371/journal.pone.0246454
- <sup>7</sup> Carmassi C, Foghi C, Dell'Oste V, et al. PTSD symptoms in healthcare workers facing the three coronavirus outbreaks: What can we expect after the COVID-19 pandemic. *Psychiatry Res*. 2020;292:113312. doi:10.1016/j.psychres.2020.113312

## The Female Frontline: How Healthcare Is Affected by the “She-cession”

- <sup>1</sup> WHO, & Boniol, M. et al (2019, March). Gender equity in the health workforce: Analysis of 104 countries. [https://www.who.int/hrh/resources/gender\\_equity-health\\_workforce\\_analysis/en/](https://www.who.int/hrh/resources/gender_equity-health_workforce_analysis/en/)
- <sup>2</sup> Ewing-Nelson, C. (2020, Oct). Four Times More Women Than Men Dropped Out of the Labor Force in September. National Women's Law Center. <http://nwl.org/resources/four-times-more-women-than-men-dropped-out-of-the-labor-force-in-september/>
- <sup>3</sup> Rogers, K. (2021, February 18). 2.5 Million Women Left the Work Force During the Pandemic. Harris Sees a 'National Emergency.' *The New York Times*. <https://www.nytimes.com/2021/02/18/us/politics/women-pandemic-harris.html>

- <sup>4</sup> Modestino, A. S. (2020, July 29). Coronavirus child-care crisis will set women back a generation. *Washington Post*. <https://www.washingtonpost.com/us-policy/2020/07/29/childcare-remote-learning-women-employment/>
- <sup>5</sup> Bayham, J., & Fenichel, E. P. (2020). Impact of school closures for COVID-19 on the US health-care workforce and net mortality: a modelling study. *The Lancet Public Health*, 5(5), e271–e278. [https://doi.org/10.1016/s2468-2667\(20\)30082-7](https://doi.org/10.1016/s2468-2667(20)30082-7)
- <sup>6</sup> Bureau of Labor Statistics, “Table 1: Employed and Experienced Unemployed Persons by Detailed Occupation, Sex, Race, and Hispanic or Latino Ethnicity, Annual Average 2019,” Current Population Survey (unpublished data) (2020).
- <sup>7</sup> U.S. Bureau of Labor Statistics. (2021, February 5). Employment Situation Summary [Press release]. <https://www.bls.gov/news.release/empsit.nr0.htm>
- <sup>8</sup> Centers for Disease Control and Prevention. (2020, October). *Trends in the Use of Telehealth During the Emergence of the COVID-19 Pandemic – United States, January–March 2020* (69(43); 1595–1599). <https://www.cdc.gov/mmwr/volumes/69/wr/mm6943a3.htm>
- <sup>9</sup> Farr, C. (2019, June 30). *Telemedicine apps are thriving because working moms love the convenience of their smartphones*. CNBC. <https://www.cnbc.com/2019/06/30/telemedicine-apps-like-american-well-are-thriving-because-of-moms.html>
- <sup>10</sup> Kacik, A. (2019, May 22). *Few women reach healthcare leadership roles*. *Modern Healthcare*. <https://www.modernhealthcare.com/operations/few-women-reach-healthcare-leadership-roles>
- <sup>11</sup> Berlin, G., Darino, L., Greenfield, M., & Starikova, I. (2020, March 1). *Women in the healthcare industry*. McKinsey & Company. <https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/women-in-the-healthcare-industry>
- <sup>12</sup> Gooch, K. (2020, August 12). *How Forbes' best employers in healthcare are improving their workplaces for women*. *Becker's Hospital Review*. <https://www.beckershospitalreview.com/hospital-management-administration/how-forbes-best-employers-in-healthcare-are-improving-their-workplaces-for-women.html>

- <sup>13</sup> Boesch, D. (2021, February 5). *Quick Facts on Paid Family and Medical Leave*. Center for American Progress. <https://www.americanprogress.org/issues/women/news/2021/02/05/495504/quick-facts-paid-family-medical-leave/>
- <sup>14</sup> Appelbaum, E., & Milkman, R. (2011). *Leaves That Pay: Employer and Worker Experiences with Paid Family Leave in California*. Center for Economic and Policy Research. <https://www.cepr.net/documents/publications/paid-family-leave-1-2011.pdf>

### Fewer Candidates, Heightened Demand: How Healthcare Employers Are Closing the Gap

- <sup>1</sup> National Student Clearinghouse. (2020, December). *Current Term Enrollment Estimates*. <https://nscresearchcenter.org/current-term-enrollment-estimates/>
- <sup>2</sup> National Healthcareer Association. (2020). *2020 Industry Outlook*. <https://info.nhanow.com/learning-leading-blog/2020-industry-outlook-trends-impacting-allied-health-professionals>
- <sup>3</sup> myCNAjobs. (2020). *Behind the Data: Caregiver Trend Report*. <https://employer.mycnajobs.com/media-2020-trend-report-behind-the-data>
- <sup>4</sup> D'Ambrosio, A. (2020, March 27). *Medical Retirees, Students Join NYC's Coronavirus Fight*. MedPage Today. <https://www.medpagetoday.com/infectiousdisease/covid19/85655>
- <sup>5</sup> *Hiring Healthcare Workers During the Coronavirus Crisis*. (2020, December 11). Monster. <https://hiring.monster.com/employer-resources/recruiting-strategies/coronavirus-healthcare-hiring/>
- <sup>6</sup> *Live Remote Proctoring: An alternative delivery method for certification exams*. (2021, February). National Healthcareer Association. <https://info.nhanow.com/learning-leading-blog/live-remote-proctoring-an-alternative-delivery-method-for-certification-exams>
- <sup>7</sup> National Healthcareer Association. (2021, March). *How Apprenticeship Programs are Solving a Medical Assistant Shortage*. Learning + Leading. <https://info.nhanow.com/learning-leading-blog/how-apprenticeship-programs-are-solving-a-medical-assistant-shortage>

### Surviving to Thriving: How it Took a Pandemic to Expand Telehealth

- <sup>1</sup> Koonin LM, Hoots B, Tsang CA, et al. Trends in the Use of Telehealth During the Emergence of the COVID-19 Pandemic — United States, January–March 2020. *MMWR Morb Mortal Wkly Rep* 2020;69:1595–1599. DOI: <http://dx.doi.org/10.15585/mmwr.mm6943a3>
- <sup>2</sup> McKinsey COVID-19 Consumer Survey, April 27, 2020.
- <sup>3</sup> Doctor.com. (2020). *Telemedicine Adoption in the Age of COVID-19 and Beyond*. [https://cdn2.hubspot.net/hubfs/3053445/Doctor\\_Telemedicine\\_Survey\\_Infographic.pdf](https://cdn2.hubspot.net/hubfs/3053445/Doctor_Telemedicine_Survey_Infographic.pdf)
- <sup>4</sup> Zebra. (2017). *The Future of Healthcare: 2022 Hospital Vision Study*. [https://www.zebra.com/content/dam/zebra\\_new\\_ia/en-us/solutions-verticals/vertical-solutions/healthcare/white-paper/2022-hospital-vision-study-en-global.pdf](https://www.zebra.com/content/dam/zebra_new_ia/en-us/solutions-verticals/vertical-solutions/healthcare/white-paper/2022-hospital-vision-study-en-global.pdf)
- <sup>5</sup> Kyruus. (2020). *Patient Perspectives on Virtual Care*. <https://www.kyruus.com/patient-perspectives-on-virtual-care-report-2020>
- <sup>6</sup> Center for Connected Medicine & KLAS Research. (2021). *Top of Mind for Top Health Systems: Digital health priorities in the era of COVID-19*. <https://connectedmed.com/resources/research-report-covid-19-pandemic-shifts-innovation-priorities-at-health-systems/>

### A Solid Foundation for Future Success

- <sup>1</sup> <https://www.bls.gov/ooh/healthcare/home.htm>
- <sup>2</sup> <https://files.eric.ed.gov/fulltext/EJ1118692.pdf>
- <sup>3</sup> <https://onlinelibrary.wiley.com/doi/pdf/10.1002/ar.10071>
- <sup>4</sup> <https://journals.physiology.org/doi/full/10.1152/advan.00112.2014>
- <sup>5</sup> <https://journals.physiology.org/doi/full/10.1152/advan.00112.2014>
- <sup>6</sup> <https://journals.physiology.org/doi/full/10.1152/advan.00112.2014>
- <sup>7</sup> <https://nsuworks.nova.edu/ijahsp/vol11/iss4/9/>
- <sup>8</sup> Singh, K., Bharatha, A., Sa, B. et al. Teaching anatomy using an active and engaging learning strategy. *BMC Med Educ* 19, 149 (2019). <https://doi.org/10.1186/s12909-019-1590-2>
- <sup>9</sup> <https://www.insidehighered.com/digital-learning/article/2019/02/06/trial-and-error-anatomy-professor-experiments-online-exercises>

# access™

*Executive Editor*  
JENNI MILLER

*Editorial Director*  
ERIN VENABLE

*Creative Director*  
DANI GRATTON

## **NHA Executive Leadership**

*General Manager, Healthcare Ventures* SCOTT HEALY

*Vice President of Product Strategy* KATHY HUNTER

*Vice President of Sales* CHAD SHERRON

*Senior Director, Contact Center* TYSON SCHMIDT

*Vice President of Marketing* JENNI MILLER

## **Content Strategy**

LAURA FLYNN

VIRGINIA FERRARI

AMY ROBERTS

JEREMY SASSER

JESSICA LANGLEY-LOEP

KRISTLE FUNKE

KALA STEFFEN

LYNDSEY MCDONALD

KATHY HUNTER

## **Design and Copy**

*Art Director* KEVIN FULLERTON

*Designer* MIRANDA BYRD

*Illustrations* BRAVE UNION

*Copywriter* CARA MCDONALD

*Copywriter* DIANA PRICE

## **Research**

*Manager of Applied Sciences* MICHAEL MEKHAEL

*Associate Research Scientist* KEVIN LOUGHLIN

## **Publisher**

NATIONAL HEALTHCAREER ASSOCIATION®



## Ascend family of brands

NHA is part of a strong family of brands under the Ascend Learning name. If you've been to the doctor's office, picked up a prescription, worked out with a trainer, or had construction done on your roadways or office, chances are Ascend was a part of your provider's professional development. Ascend businesses help test, assess, and certify professions such as nurses, EMTs, fitness trainers, construction workers, medical assistants, and pharmacy technicians, among others.

## About NHA

Since 1989, NHA has been partnering with allied health education programs, organizations, and employers across the nation to award more than one million allied health certifications. The organization offers eight nationally accredited exams, certification preparation and study materials, training solutions and industry-leading outcomes-based data analytics, as well as ongoing professional development and continuing education. For more information, visit [www.nhanow.com](http://www.nhanow.com).

NHA is a division of Assessment Technologies Institute, L.L.C., a leader in providing technology-based educational, assessment, testing, and certification solutions for healthcare and other vocational fields.

---

A third-party research firm conducted the research within the 2021 Industry Outlook. The survey was structured to assess the opinions of employers concerning the professional outlook for billing and coding specialists, EKG technicians, medical administrative assistants, certified clinical medical assistants, patient care technicians, pharmacy technicians and phlebotomists. This survey was in market February 25, 2021, through March 11, 2021, and evaluated the opinions of 195 employers, of which some were current NHA customers.

The information, opinions, and recommendations contained within the articles, features, columns, and advertisements of this publication are not necessarily those of the publisher, NHA, or its parent corporations or affiliates. Although the authors, editors, and publisher have made reasonable effort to provide accurate information, they are not responsible for errors, omissions, or for any outcomes related to the use of the contents of this publication and take no responsibility for the use of the products, procedures, protocols, or ideas discussed. The publisher and contributors cannot guarantee that the information and ideas in the publication are safe and proper for every reader or for every reader's students or clients. Readers are urged to consult a physician before using or relying upon any information of a medical or healthcare nature found in this publication and to advise their students and clients to do so as well. This publication and its contents are offered without warranties or guarantees of any kind, expressed or implied, and the publisher and contributors disclaim any liability, loss, or damage caused by the contents.

Copyright ©2021 Assessment Technologies Institute, L.L.C. All rights reserved.



access™

ISSUE NO. V 2021

---

[NHANOW.com/access-2021](https://NHANOW.com/access-2021)