RMJ Rural Minnesota Journal

Taking the Helm: How rural Minnesota's next generation sees the future

2011

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Acknowledgements

The Center for Rural Policy & Development gratefully acknowledges our friends who have made this issue of RMJ possible.



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Today's Youth, Tomorrow's Rural Health Care Workforce Laurissa Stigen

Many changes are being seen in our population as advances in medicine and technology are resulting in longer life spans. However, at the same time, families are smaller so there are fewer young people to make up the health care workforce to care for an increasing elderly population. Currently, the job market is made up of a large number of baby boomers, those ages 40 to 70, and as they retire, numerous job openings will remain. Recruiting into health care positions is a challenge that many health care employers are currently facing, and this is especially true in rural and underserved areas. Because demographers are saying that in ten to fifteen years there will be an even bigger need for health care workers, health care employers as well as consumers are only seeing the beginning of what could become a much larger issue in the years to come. This is even more significant when one considers the competition that will occur for health care providers across the nation as the shortages become more profound.

In central Minnesota where I work and live, health care and social assistance is currently the largest employing industry at 18.3 percent. Despite a statewide and national recession that led to a loss of nearly 15,000 jobs in Central Minnesota from 2008 to 2010, the health care and social assistance sector is still seeing employment growth, with an increase of over 1,400 jobs. Employment predictions show that health care is expected to have the largest job growth in the next decade as a result of a growing and aging population. According to the Department of Employment and Economic

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Development's (DEED) 2006 to 2016 Employment outlook for Northwest Minnesota, "the health care and social assistance sector will grow by 35.5 percent or 11,388 jobs. ... The main source of growth will occur in hospitals, followed by ambulatory health care services, and nursing and residential care facilities."

Anticipating the need for a skilled workforce and the decreasing numbers of potential employees, many communities and health care employers are recognizing that their future workforce lies in their youth and are investing in them using a "grow-your-own" approach. The ultimate goal of this concept is that the youth will return when they are trained and prepared to enter the workforce. Research has found that youth who grow up in rural communities are more likely than their peers who spend their developing years in metro areas to work in rural and underserved areas as adults. Therefore, for rural communities, it makes perfect sense to start locally with interest and skill development in health care, forming strong relationships with their youth. I must caution that the "growyour-own" approach is a long-term investment that could take 10 to 15 years to see results. For many, this takes too long and does involve significant risk, but if you consider the fact that vour next health care provider may be a junior sitting down to start his or her school day, it is well worth it.

As a child, I grew up in a town of about 13,000 people in central Minnesota and was fortunate to have an experience as a middle school student volunteering at my local hospital. I am quite certain that this opportunity was what originally sparked my interest in health care. Neither of my parents and none of my close relatives or family friends worked in the health care field, so I did not have a natural mentor to support me along my educational journey. I was fortunate that I had a number of excellent teachers during my K-12 education who encouraged me to stay active in math and science courses; however, I must be honest and say that no one from my school was prepared or even tried to help me further explore my interest in health care. Instead it was left up to me, and unfortunately, I think this is the same scenario that many of today's youth are facing twenty years later. Whether it is due to a television show or a personal experience, many youth have an interest in health care, but if left uncultivated it will be easy for it to become a passing interest. Therefore, I find my work as the Director of the Central Minnesota Area Health Education Center (AHEC) to be so vital today as well as into the future. Central Minnesota AHEC, which covers fifteen counties, is part of the Minnesota AHEC Network. This network is a community-university partnership that includes six regional centers across Minnesota and the program office at the University of Minnesota in Minneapolis. Our partnership brings together the expertise of educational institutions, health care organizations and community groups, all working toward improving health and access to quality primary care.

We have to see youth as a significant factor if we are going to improve health and access to care. To put it bluntly, youth are the future of health care, and we fully realize the importance of there being a comprehensive distribution of quality health care providers across Minnesota. Therefore, we are very supportive of the "grow your own" approach referred to earlier. In doing so, we collaborate with many other entities to introduce youth to health careers. Often times our role in collaborations is to help facilitate the connection between local education institutions, including K-12 schools and higher education, and health care, all of which are necessary partners to ensure that youth are able to explore health careers.

When asked to name careers in the health care sector, most individuals would say a doctor or nurse and possibly a dentist or pharmacist. Unless youth have a parent or family friend who works in health care or have experienced a significant medical procedure, these are typically the only health care careers that youth would encounter. However, there are well over one hundred careers in health care. It is important that youth are not only learning about the variety of the careers, but that they are also able to explore them in order to pique and further develop their interests. Just as an example, I recently encountered a youth who was quite certain that she wasn't interested in health care careers because she thought they all involved blood, which made her queasy. However,

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when she had the opportunity to meet a sonographer and got to participate in an ultrasound, she quickly changed her mind.

Introducing students to the wide variety of career possibilities in an attempt to entice them to pursue health care careers is spurring new programming with a variety of partners across the state. It is recognized that school districts are facing tighter and tighter budgets, making it difficult to maintain elective courses or to add easily new health career exploration programming for a variety of reasons. This is especially true in rural areas, where small student populations make health care career programming nearly impossible. Therefore, programs new in 2011, such as Scrubs and Scopes and Camps to Careers in Health Care, are a result of collaborative efforts and are being offered outside of the school day to help immerse students in health care.

Scrubs and Scopes is offered by Lake Region Healthcare in collaboration with Central Minnesota AHEC and Lakes Country Services Cooperative. The program provides health care career exploration for seventh-, eighth-, and ninth-grade students on a monthly basis. A key to the success of this program is that the students get to see the excitement that current health care professionals have for their careers. Camps to Careers in Health Care will be offered for the first time in June 2011 at the University of Minnesota, Morris campus, and is the result of planning by Stevens Community Medical Center, Essentia Health in Graceville, Lakes Country Service Cooperative, the Minnesota Department of Employment and Economic Development, and Central Minnesota AHEC. Here, high school students will have a college immersion experience over three days and will participate in hands-on learning about specific health careers and career development skills.

Employment during high school is also important to aid youth in obtaining a job after college. However, right now the youth unemployment rate at age 24 is 30 percent, the highest it has ever been. Researchers indicate how crucial it is to have a job in high school to prepare youth for the job market after they graduate. In some of the rural areas, and especially in the recent economy, a youth's potential to gain employment is limited because their community is so small. This means they haven't had the opportunity to learn basic job skills, such as arriving to work on time and working as a team member. Employers say that youth who haven't learned those soft skills will have a more difficult time landing a job after high school. Being able to participate in career exploration and development programs such as Camps to Careers helps youths focus on what they have learned from the experience and what they will do next in step-by-step career development.

Job shadowing and working in internships in health care facilities are extremely beneficial for youth who are interested in working in health care. Not only does it enhance one's resume and help build career development skills, but shadowing and internships also allow youth to learn firsthand how health care facilities operate and immerse them in the care of patients. The Minnesota Hospital Association manages a summer internship program that pays a portion of the wages of high school and college students who are working in a participating health care facility during the summer months.

Over time, Lakewood Health System in Staples has seen a definite increase in interest in the summer health internship program. This is evident by the fact that they started with three students and last year had nineteen students participate. Even more astounding is the fact that Staples is a community of just under 3,000 people. To accommodate the increasing numbers of youth participating, Lakewood has invested additional dollars into the program and has already seen the investment pay off, as they have been able to use this program as a recruitment tool. Several of the past program participants have returned after college to pursue a career at Lakewood, and additional participants are also planning on returning once their education is complete.

Early exploration of health careers is also important to help students prepare themselves for a rigorous academic journey ahead. They now see the purpose for taking science and math courses, which is especially important because health professions programs are extremely competitive. It is vital that students start preparing early so they can open doors for themselves, and therefore, it's important that students look beyond the core courses that are required in high school and choose additional math and science courses that will allow them to improve their ACT scores and better prepare them for success in post secondary course work. For some students with limited school district offerings, this may mean looking into Post Secondary Enrollment Options in college courses, many of which are offered online.

Obviously, high school students are a component in the health care career pipeline, but moving further upstream and closer to tangible outcomes are college students enrolled in health care career programs. These students are the second component to the "grow-your-own" approach and are a significant focus of the Minnesota AHEC Network. It is vital that rural communities stay connected to their youth who have left to further their education. The reality is that youth typically need to move to larger communities for training and when they do, they need to know that they are valued back in their home community. Some are willing to return right away, but others choose to stay in larger communities for a number of reasons. However, after ten years or so, those who stay in the larger communities may also want to return home to familiar settings to raise their families. Provided their spouse can find work, they often do return home.

It is also important that rural health care facilities are willing to provide clinical rotations and experiential education for health professions students from a variety of higher education institutions. This is true not only for the youth who grew up in the community or the surrounding area, but also for others who did not. Since it is not easy for students to travel to locations away from their educational institutions, the Minnesota AHEC Network provides student support by assisting with rotation placements, community connections and housing assistance. Educational opportunities that enhance academic learning provide students with the opportunity to get comfortable in a health care setting and also to have a better understanding of the breadth and depth of care that is provided in rural communities. This in itself can be a turning point for students, no matter where they are from, to narrow down and ultimately choose the community

they want to work and live in. As the demand for health care workers increases, the competition to recruit is going to be very strong, which makes early, positive connections with students pivotal for successful recruitment.

Not having ample health care professionals will hinder health care, creating a challenge for access to care. Thus, it is vital that rural communities start preparing now and consider youth to be a part of the solution. Communities and organizations seeking health care workers may need to become more creative on programming to entice workers to rural areas which will include "growing their own." Obviously, it is necessary for youth to leave rural areas for training, but it is important that they have a connection that brings them back. I am optimistic about the work that is currently taking place to ensure that today's youth have the opportunities to explore and prepare for careers in health care. To keep the momentum going, it is imperative that we have a coordinated statewide approach to ensure that youth from all areas of Minnesota are able to explore health care careers and remain engaged in rural and underserved communities until they enter the workforce. Therefore, I challenge you to be an active part of the solution to rural health care workforce needs: invest in Minnesota's youth, stay connected with them on their educational paths and embrace the changes necessary to make rural communities desirable places to call home. After all, the replacement when your current health care provider retires may very well be the high school student living down the road from you.