



"Reflections on Career Pathways in Health Care: College, Employer, and Student Perspectives on the New Jersey Health Professions Pathways to Regional Excellence Project (NJ-PREP)" by Sara Haviland and Michelle Van Noy, Rutgers University, Education and Employment Research Center, NJ PREP, TAACCCT Grant is licensed under [CC BY-NC-ND 4.0](http://creativecommons.org/licenses/by-nc-nd/4.0)

<a>"Reflections on Career Pathways in Health Care: College, Employer, and Student Perspectives on the New Jersey Health Professions Pathways to Regional Excellence Project (NJ-PREP)" by <a>Sara Haviland and Michelle Van Noy, Rutgers University, Education and Employment Research Center, <a>NJ PREP, <a>TAACCCT Grant is licensed under CC BY-NC-ND 4.0



**New Jersey Health Professions Consortium:
A Collaboration of
Community Colleges**

Issue Brief

Reflections on Career Pathways in Health Care: College, Employer, and Student Perspectives on the New Jersey Health Professions Pathways to Regional Excellence Project

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Reflections on Career Pathways in Health Care: College, Employer, and Student Perspectives on the New Jersey Health Professions Pathways to Regional Excellence Project (NJ-PREP)

Sara Haviland & Michelle Van Noy

In 2010, the Northern NJ Health Professions Consortium (NNJHPC) received a Health Professions Opportunity Grant from the Administration for Children and Families (ACF). The 10 college consortium from across Northern NJ had a mission to create pathways in Health Professions education leading to gainful employment. In 2014, The Consortium received a TAACCCT grant from the USDOL and became known as the New Jersey Health Professions Consortium (NJHPC). At this time the Consortium grew to 12 colleges¹ across the State of NJ and broadened its career pathways focus to include non-credit – credit credentials, prior learning assessment and employment. Overall, NJHPC has represented and continually connects with the community colleges in the State. Its focus is to build, develop and foster communication and collaboration to ensure students enter and complete educational programs in the health professions leading to family sustaining wages in this high-demand sector. The TAACCCT grant ended in 2018 after serving 3,500 New Jersey residents. NJHPC has commissioned Rutgers to prepare this brief describing lessons learned throughout the Consortium.

Career pathways are designed to create a more coherent system to help students progress through education and employment, bringing order to a “vast, diverse, fragmented, and poorly mapped” system of occupational credentials in the United States.¹ *Career pathways*, a broad term that can describe multiple models or approaches to progression and advancement into and through the workforce, typically possess four core elements: aligned, connected programs; multiple entry and exit points; a focus on careers and employer engagement; and support services to promote student progress and completion.² They are designed to allow individuals of all skill levels to enter and exit educational programs in the way most appropriate to their skill level and desired occupations. They are also designed to address the particular challenges of disadvantaged students and workers, with an emphasis on student support and an acknowledgement of some students’ needs to return quickly to paid employment after training. Career pathways are increasingly prevalent in education and workforce reform and play an integral role in the Workforce Innovation and Opportunity Act (WIOA) legislation.

Career pathways hold particular promise for students interested in entering the health professions. Health care offers attractive career options given the high labor market demand and the potential for well-paying jobs.³ While the field is exceedingly structured – with high barriers to entry (e.g., the credentials needed to become RNs, doctors, or specialists) – in its upper echelons, it is less structured with regard to its lower-level positions, which – although they still require specialized skills – are much easier to access. In these fields, career pathways offer the promise of establishing further structure for direct-care positions and of helping students begin to work in these positions, gaining experience and income. They also give students a path for continuing their education so they might move on to better-paying jobs in the field, ensuring that the time

and resources students commit to these jobs can be applied efficiently to their next career steps and ultimately take them as far as they would like to go in the healthcare industry.

Successful implementation and maintenance of career pathways requires the cooperation and collaboration of two key stakeholder institutions: schools and employers. These institutions comprise the ecosystem of career pathways. To realize the full promise of career pathways reforms, schools must implement them broadly and uniformly, and employers must recognize their value and provide opportunities for students progressing along the newly developed pathways. For this reason, it is critical that players in both institutions recognize shared goals and understand the mechanics behind the career pathways being implemented. Finally, career pathways are only beneficial if they are used; students must understand and follow them, which is easier when students are exposed to the message of career pathways regularly and consistently by both schools and employers.

While crucial to the effectiveness and actual use of pathways, little is known about how colleges and employers interact as an ecosystem in support of career pathways. In particular, we are interested in how colleges, employers, and students perceive and experience pathways in health professions and whether they operate in cooperation and with consistent messaging. This brief explores the views of these three stakeholder groups in one consortium of community colleges working to implement career pathways, noting areas of alignment and areas for improved communication and goal-setting. These results can be instructional for the many other schools considering implementing a career pathways model. Through a Round 4 TAACCCT grant at 12 community colleges in New Jersey (New Jersey Health Professions Pathways to Regional Excellence Project, or NJ-PREP), we studied the experiences of each of these stakeholders to understand their perceptions of pathways in health professions. This brief explores how consortium members implemented and understood these pathways, whether employers valued them, and whether students understood them and seemed likely to use them. Credential stacking, building connections between noncredit and credit coursework, and a more intrusive model of advising, as tools often deployed in career pathways and therefore designed into the programs at the 12 schools, also feature heavily in the discussion.

This brief is the first of a three briefs exploring different facets of career-pathways development through the NJ-PREP program. In this first brief in the series, we examine the broader ecosystem of career pathways, describing how these pathways involved the cooperation and collaboration of both key stakeholder institutions: schools and employers. The second brief explores an important transition point in the educational component of career pathways⁴: the transition from noncredit to credit-bearing programs.⁵ Finally, the third brief explores one tool the Consortium deployed to promote the goal of building connections between noncredit and credit programs: a standard prior learning assessment (PLA) policy based on guidance from across the Consortium.⁶

METHODS

This brief draws on data from a third-party research evaluation of the NJ-PREP program conducted by the Education & Employment Research Center at Rutgers University. (Present authors were included in those data collection efforts.) We used these data to address the following research questions, triangulating sources that represent multiple stakeholder viewpoints:

- ❖ *How do the schools construct educational pathways?* For pathways to be successful, faculty, staff, and administrators across each institution should have consistent views of how the pathways are designed and be able to communicate a clear message to students about how to follow them. We ask the following questions: Has the school constructed clear and viable pathways? Does its staff understand pathways? How do college staff lead students to, and along, the pathways? Is there consistency in vision between the faculty, staff, and administration?
- ❖ *How do employers view these pathways?* Employers must see the pathways as important to student success and value the role of education for these jobs. We ask: Do employers value the pathways? Do they value the schools as educators/trainers?
- ❖ *How do students view these pathways?* Finally, the pathways only matter if students actually understand and follow them. Therefore, we ask: Do students understand what their future career and education options are? Do they plan to pursue further education and career mobility? What are the obstacles they face in these pursuits?

The evaluation followed a mixed-methods approach that included multiple sources of data: interviews with site coordinators and consortium leadership (N=195); interviews with local employers (N=13); student focus groups conducted during site visits to each of the 12 colleges in the Consortium (N=16 focus groups; 3 to 10 students per group); and student surveys (N=264). All data described were collected between Fall 2015 and Fall 2017 and analyzed using established analysis software and techniques. Qualitative data were managed, coded, and analyzed using NVIVO 11 qualitative analysis software.

FINDINGS

We have organized our research questions and findings around the three key stakeholders in the Consortium system: the two who comprise the career pathways ecosystem – i.e., the faculty, staff, and administrators of the consortium colleges and the affiliated area employers – along with the students who engage with those pathways. The alignment of colleges and employers is critical to the success of the pathways, and students, as consumers of those pathways, offer insight into how they are used and what obstacles to upward educational and career mobility remain. We discuss each group in turn.

College Perspectives on Career Pathways

In interviews with college faculty, staff, and administrators at all levels, from job developers up to presidents, the research team asked consortium participants to discuss elements of career pathways, including the stackability of credentials; noncredit-to-credit transitions (students' ability to apply some of their program certificates or courses to future degree work); and the advising they provided to steer students along the paths (including their perceptions of what students needed and wanted). As we will discuss later, information about credential stacking was the most clearly and consistently transmitted, while less was known about the process of transitioning students from noncredit to credit courses. Additionally, advising was inconsistent.

Pathway design: Clear and viable?

By design, the programs could be stacked into higher-level certificates and degrees. This design was implemented at the consortium level and communicated in part through a set of posters distributed to each school that visualized the pathways. The clearest path, with the most on- and off-ramps, was easily nursing. Seven of the programs that required only a high school diploma to enroll and awarded certificates in less than two years were ultimately on the pathway toward an associates-level nursing degree (e.g., Home Health Aid/HHA, Certified Nursing Assistant/CNA, Patient Care Technician/PCT, EKG Technician, Phlebotomy, Clinical Medical Assistant/CMA, and Licensed Practical Nurse/LPN). An AAS degree in one of these fields could then be applied toward a bachelor's degree in nursing (BSN) or a Physician's Assistant program, which could in turn be applied to several master's programs in the field and, ultimately, toward a doctoral degree in nursing. The pathway for Emergency Medical Technicians (EMTs) was similarly designed, leading to multiple options at the associates level (e.g., paramedic, radiology technician, respiratory technician, and diagnostic medical sonographer), as well as multiple options at the bachelor's (e.g., EMS/disaster management, radiology or respiratory technology, diagnostic medical sonography), master's, and doctoral levels. Additionally, EMTs had the option to transition over to the nursing pathways.

However, noncredit-to-credit transitions are not always well-designed, and advising toward further education can be lacking. This can be a major impediment to the full realization of career pathways, as it is a major barrier to true stackability. Programs at the entry level of the healthcare pathways are often non-credit-bearing certificate programs, and therefore any progress toward a degree-based career will require students to either convert those noncredit classes into credit or to start over. In addition, some schools have chosen to only grant elective credits for noncredit coursework rather than to create mechanisms for this coursework to fulfill required coursework for degrees. This creates an extra hurdle that can be discouraging for students looking to progress to the next steps on their chosen pathways, wasting their time and money – two resources that can be limited for working students. Many colleges are working on building these links, but progress toward that goal is slower in healthcare programs than in other fields, largely because healthcare is more highly regulated. Another brief in this series examines noncredit-to-credit transitions at consortium colleges on an organizational level, describing successes, challenges, and best practices in the implementation of these internal pathways.⁷ Here, we focus on stakeholders' awareness of articulation opportunities and how those opportunities are conveyed (or not conveyed) to students by college personnel.

College staff we interviewed generally used vague terms to speak about the pathways from noncredit to credit at their school; this was unsurprising because these two types of programs often operate separately at community colleges.⁸ Many respondents were aware that a process existed and that there were advisors, but they did not know much more. The few that did give specifics talked about using credentials as prerequisites in degree programs or noted the existence of prior learning assessments (PLA) as a mechanism for the transition. (PLA's role in this transition process is discussed in detail in another brief.⁹) Many people who discussed this claimed the bridge between the two types of programs was poor and the credit and noncredit sides of the institution often had little to no communication. The result was that students were not always well-informed about the paths they were currently on, as described by one instructor:

The majority of my students want to get the certification and then become a pharmacy technician. There are some that want to start here and then become a pharmacist. Maybe they are not financially ready, so they want to start here and then move on to pharmacy school. I think those students (the ones that want to continue their education) would be interested in getting credit. Some of the students ask me if this [course] is credit[-bearing]. They don't always know that it is not credit. They are interested to see if there is a way that they can get credit out of it. They still want to take the course as noncredit though.

That transition from noncredit to credit was also described as problematic by one site coordinator:

The best part of TAACCCT is that it gets some people interested in education again. But then it [also] leaves people hanging as far as getting more education or getting credentialing. TAACCCT talks about pathways but not about how to pay for it. They need some follow-up funding or grant. Once students go to the credit side, they leave the program.

Another site coordinator expressed similar frustration with pathways awareness among personnel in credit-bearing programs:

On the credit side, you have people who enroll in the medical assistant program after doing a TAACCCT program. Sometimes they are just taking completely unrelated programs. They get their degree and then want to know what kind of job they can get because they really don't know. They didn't really understand that you need more than just the certification if you want to go all the way.

Most people who described advising efforts claimed that their institution tries to convince everyone to stack credentials and eventually get a degree, which is likely a reflection of the in-process efforts to expand these opportunities and indicative of these schools' intentions to create further opportunities for their students. This claim was heard many times throughout the interviews; instructors, site coordinators, and other program staff frequently described encouraging students to think ahead to future education and career moves. Some noted that most students coming in for the CNA or HHA ultimately wanted to be nurses, but respondents were split on the immediacy of that plan. Some thought students really just wanted to get a job quickly, but many described a handful of anecdotal examples of students moving up through healthcare career ladders.

While all people interviewed stated that their college had some sort of advising system in place to help guide students along their pathways, many claimed it was largely informal. A popular response was that instructors would talk to students during or after class about what they wanted, and students could figure out where to go if they needed additional information. Some were not convinced about the need for strong advising. For example, one individual claimed that because their program was mapped out clearly, extra advising was not really necessary. Another person noted that the majority of their students are adults; thus they can figure out what they need without an advisor – a view that is not in line with higher education research.¹⁰

Consistency of vision

Though there is shared commitment to pathways development, perspectives vary on how realistic they may be. For pathways to succeed, it is helpful to have cooperation not only between institutions (e.g., education and employment, as previously discussed) but also within each individual organization; this combination maximizes efficiency and creates

opportunities for the pathways to flourish. Generally speaking, interviewees at all levels described the importance of pathway development, which is quite helpful. It is interesting to note, however, that the level of optimism displayed by college faculty and staff often varied by position, for different reasons. Respondents in jobs with high levels of student contact, such as faculty and job developers, were more likely to describe these pathways as realistic but noted that the actual work of healthcare was not appealing for all. As one instructor described,

About midway [through the class], once we actually go out into the long-term care setting, you get a sense of who is thinking, "Wow, this is much different than I thought it would be." Then there are some that are really interested in the healthcare field. There are some that give someone a bath, and the person is very thankful, and they realize they can do it. Some at this point in the class really want to know what they can do to advance and keep going in the field. That's not for everyone, but about a quarter of the students I would say are interested in moving on. They have to take college math and English if they want to move on. I feel like that is good because they see they can do it, and then they move on. They come in with a lot of self-doubt. So, finishing this course is a confidence boost that helps them see that they can do college-level work.

Respondents in higher-level jobs that were more removed from student contact, such as administrators and college leadership, were more measured in their assessments of the likelihood of future student progress along these pathways due to the at-risk nature of many students in their programs. This may be due in part to a longer history of working with at-risk students or may indicate less familiarity with the specific interventions of the grant program, but leaders were more concerned that life could get in the way for their noncredit students. As one vice president put it,

Finding money is the challenge for the students. They need to pay for the schooling. These students think *jobs* – they really don't see themselves in *careers*. That is an issue of poverty. It is day-to-day survival with them.

A site coordinator who expressed concern about whether noncredit students were truly committed to the pathways to begin with described some further barriers they experience:

Some of the students are taking classes in multiple programs. They don't necessarily want to have a lot of certifications. . . . They like to take a bunch of classes from different programs. They are not necessarily sitting for their certification at the end, so they are not stacking their certificates. There is some attrition at the end where they never do the test. Some of it is money, and some of it is fear. They start to doubt themselves – that they are really ready for the test or for the job. It is a lot of information in a short period of time.

Most interviewees saw challenges remaining for students in realizing these pathways, but many saw the pathways as a good solution for students. Pathways were described as helping students see themselves as learners, making school less daunting, and facilitating for many students more realistic understandings of the range of jobs available in the healthcare field. The challenges that remain appear to be inherent to the work (as described by the interviewees with higher levels of student contact) or inherent to the population of at-risk students (as described in particular by higher-level leadership).

Employer Perspectives on Career Pathways

Employers are ultimately the judge of whether or not the programs the schools offer are useful and whether alumni of these programs are ready to work in their organizations; in short, employers have a lot to do with determining the outcomes for the consortium programs. Achieving employer buy-in is therefore critical for the success of the pathways and is likely to influence whether students will use the established on- and off-ramps to re-enter education and training in the future. We discussed employers' views on pathways and certifications, their perspectives on the value of continuing education in general, and their views of the education provided by the Consortium specifically.

Employer perspectives on pathways and the value of certifications.

Upward mobility exists, and it is achieved more often in larger facilities. Career pathways depend on employers seeing their workforce as individuals who not only possess a particular set of skills but who also have the potential to accumulate even more skills – and rewarding those skill acquisitions with increasing pay and responsibilities. Most employers, aside from those at two smaller firms, reported that there were positions within their companies for employees to advance through, and they were generally supportive of the idea of promoting from within. This was most true in larger facilities with nursing staff, such as hospitals, that featured many levels through which an individual could progress; indeed, nursing was the typical example respondents provided when speaking of career progression. Some said that they use in-house promotion as motivation for employees to return to school despite the concern that employees could use their new certificate or degree to seek employment elsewhere. One employer described the pathways through their organization and their preference for hiring people that they know:

I'll give you an example. I got a call from the [nursing] manager who said, "I have a tech who just got her nursing – just finished – will be finishing nursing school in May at the associate level. I'd like to hire her." And I said, "Okay. We need to get approval for that because she's an associate-level nurse, not a BSN." So the approval came: Yes, *we can do that*. However, she will be instructed that the requirement will be that if offered the job, she's in agreement to get her BSN within three years. So we are doing that, and we like to do that. We like to hire our techs because we know their work performance. They've got some history here. They understand the hospital. So it's an advantage.

Nonregulatory certifications are seen as nice, but not qualifying. Views on certifications (for positions where certification was not a regulatory requirement) varied from employer to employer – and often from job to job. For jobs where it was not legally necessary to have certifications, or not necessary to have more than a brief training course, a certification might put applicants into a preferred pile, but other factors such as personality (go-getters, "caring" demeanor, strong interpersonal skills) and experience might be just as important, if not more so. Some companies were willing to develop their own trainings to help their employees meet the minimal training requirements (e.g., 40 hours of instruction) that some positions demand. Medical certifications were seen as a nice-to-have, but not a need-to-have, qualification for many of these entry-level positions, as demonstrated by an exemplary exchange with a human resources manager whose entry-level positions paid the same regardless of what certifications the applicants presented (though incumbent workers who acquired relevant certifications after hire were awarded an extra \$1 to \$2 per hour):

Interviewer: So if [job applicants] come to you with the certifications or the degrees, does that make you any more interested in hiring them?

R: I would say that it's hard to say, to be honest with you. Because our positions aren't necessarily based on college degrees or certifications. . . . [What matters is whether] the person is capable of doing the position, if the person is going to have that personality that we need behind the wheel in dealing with our patients. I could get somebody with a doctorate or a master's degree. But if they have a sour demeanor about them, unfortunately, that's not going to provide the patient care and compassion that we're going to want.

Still, employers generally support continuing education. Employers were generally supportive of further education for their employees, and most offered tuition reimbursement in one form or another (only two of the 13 employers interviewed did not offer any reimbursement, though one of those gave employees the opportunity to apply for scholarships). Many employers had a limit that they would reimburse – usually somewhere between \$2,500 and \$5,000 per year for full-time employees. Almost all employers reported having minimum tenures employees must reach before qualifying for tuition reimbursement and/or minimum commitments to the company upon completion of reimbursed programs. Nearly all interview participants gave examples of incumbent workers in their companies who were in school or had recently gone to school while working for them. Several also described employees – often themselves – who had started in a mid-skill position and advanced on to upper-level positions. One larger employer, in the midst of a push to get all associates-level nurses to a BSN level, described bringing multiple colleges on campus to help educate their employees onsite.

Employers are satisfied with the education provided by consortium programs – particularly the hands-on learning dimensions – and they are pleased with the performance of the students with whom they have had contact. Generally speaking, most employers were satisfied or even quite pleased with the skills and preparedness that students coming from the consortium colleges presented. There were some minor complaints that students cannot learn everything they need in classrooms, so some graduates arrived with good technical skills but were faced with a learning curve when it came to applying those skills in the real world. This effect was less pronounced in students who had completed internships or co-ops with the employer’s company, and several noted they preferred to hire such students for exactly this reason. It is worth noting that the wraparound services that were key to the career pathway model actually made students from the consortium colleges more appealing to some employers, as exemplified by one human resources manager reflecting on the role community colleges should play in workforce preparation:

I mean, as far as my industry now . . . [community colleges] provide a training and a certification course to come out with a pretty much ready-to-work type of candidate. I see that they put in a lot of effort to train these students and to get them out on the road and to prep them. As far as my personal experience with community colleges – I mean, I went through a community [college] and then a four-year school myself to get my degree. And I don't think that my college prepped me for pretty much anything. I don't think there was any type of interviewing or anything like that that they prepped me for. But I feel a lot with [Consortium College] that they definitely not only provide the certification for their students, but they help them in assisting and finding them a job and getting them job-interview-ready and getting them résumé-ready. So I'm definitely more geared towards what [College] does for their students in regards to their EMS program and things like that. There are definitely colleges out there that don't prep their students.

Student Perspectives on Career Pathways and Opportunities

Once employers have bought in to career pathways and the value of these programs, the final test is whether students will actually use the pathways – or whether they will use them as they were developed. NJ-PREP was a four-year program, and therefore we cannot speak to long-term outcomes. However, we looked for early signs that students had embraced pathways and the model of lifetime learning and career development. Generally speaking, we found that students demonstrated several indicators that they were on career pathways or had at minimum internalized the school messaging on the topic. They expressed ambitions for future education and for career advancement; they saw their current programs and the jobs they were training for as first steps in a sequence; and they spoke of returning to employment quickly while maintaining their future paths.

Students express ambitions for future education and for career advancement. Student survey respondents were asked to reflect on their educational goals in the coming year using an open response format. Responses were then coded into categories, with some responses representing more than one category as demonstrated in Table 1. The subjects were varied, with some expounding on the need to pursue future education and others simply focusing on getting good grades in the coming year. The majority of students were planning to continue their programs or enroll in new ones in the coming year.

Table 1: Short-Term Educational Goals of Consortium Students (N=171)

Goal	Number	Percentage*
Enrolling in new program	96	56
Continuing current program	93	54
Career	21	12
Graduation	17	10
Get good grades	12	7
Certification	8	5
Other	7	4

*Total percentage >100% because open responses could be coded into more than one category

Students were also asked about their long-term education goals, as demonstrated in Table 2. Nearly 9 in 10 reported they planned to enroll in a new program, indicating that they were looking to advance through occupations.

Table 2: Long-Term Education Goals of Consortium Students (N=152)

Goal	Number	Percentage*
Enrolling in new program	134	88
Career	21	14
Graduation	11	7
Other	7	5
Certification	3	2
Continue current program	2	1

*Total percentage >100% because open responses could be coded into more than one category

Students saw their current programs and the jobs they were training for as first steps in a sequence. Asked about their career goals in the coming year, every student survey respondent noted some variation of a desire to get a job, as demonstrated in Table 3. However, 57 percent also discussed some form of continuing education despite the question being about career goals – in a sense merging their career goals with educational goals. This merging of goals is indicative of students who are following career pathways. Education is central to their goals, more so than employment; they see the centrality of education to their career prospects.

Asked about long-term goals, over 80 percent of student respondents planned to remain in the medical field, largely in nursing specialties. This total includes ten students planning to go on to pursue an MD. Students were also asked how the program was preparing them for their education and career goals; out of 161 who responded, only 10 reported that it was not preparing them at all. More than half cited hands-on learning as a key factor in giving them a positive view of the program, by far the most popular response (career- and education-preparation factors also garnered many mentions).

Table 3: Short-Term Career Goals of Consortium Students (N=181)

Goal	Number	Percentage*
Getting a job	181	100
Continued education	103	57
Other	9	5
Externship	6	3
Graduation	4	2

*Total percentage >100% because open responses could be coded into more than one category

Student focus groups reinforced the finding that students were engaging with the career-pathways aspect of the programs. Asked what drew them to the programs, more than half of participants cited some element of future education and movement into higher-level medical jobs – typically with nursing degrees as the destination. Some were in the middle of such a movement already. As one student noted, “I think I want to go back and be a nurse. If I know more about medicine, it will be easier when I get to school. I can also have a good job in the meantime.” Some students were in holding patterns, already on waiting lists for nursing programs or other mid-skill health occupations such as dental hygienist; for those who were waiting on external factors, these certificate programs were seen as a good way to immediately gather some relevant skills that would serve them in those programs later. Among students in the pharmacy tech programs, recent changes in requirements meant they needed certifications, and these programs were a way for them to quickly earn the certifications they needed to maintain their employment.

Students spoke of returning to employment quickly while maintaining their future paths. Other respondents discussed the need to secure a job as soon as possible to meet family obligations but also noted that their pathway would allow them to pursue higher-level healthcare occupations in the future. In many ways, the pathways were helping students overcome some common obstacles for adult learners in higher education; they helped them return to paid employment and gave them immediate victories to encourage further educational investment. One respondent described wanting to continue past her AMA program and on to further education but noted she could not continue without a paying job. Another planned to save money in their first AMA job to go back and become a pediatric nurse. In one response that demonstrated the particular value of career pathways, a respondent noted:

I was going to do the practical nursing program, but I needed to do some prerequisites first, and that was taking too long. I have three children and wanted to go back. I was hoping to start the LPN program and had to take biology in the summer, and only in 2017 I can apply. So, it would take me too much time. I learned about this program and started working. When I got into the CNA program I learned about PCT and decided to do that as well. I can add some new courses later on but at least now I can start working.

Another student described great satisfaction with the shorter, more readily completed programs:

I was about to give up on school. Because I tried college, and I just couldn't finish. It just kept not working out. It is very gratifying to be able to finish something. I have never thought about a career because I have always worked administratively. Now I feel like I can take it to the next level.

Whether these students actually can take it to the next level is a matter for future study; however, their plans are promising.

CONCLUSION AND NEXT STEPS

The levels of agreement between the perspectives of college staff, employers, and students were somewhat surprising; it appeared that all three had similar viewpoints about several themes related to career pathways. Both the schools and employers viewed interpersonal skills and experience as important factors for employment beyond certifications and degrees. The schools sought to address these factors through “networking sessions” and practicums. However, the value of the certificates was still limited for positions that did not necessarily require it; though many employers felt they were *nice* to have, they were not viewed as something applicants *needed* to have.¹¹ Though employers did not necessarily see certificates as qualifying in all instances, they expressed support for future education as a general principle and offered many examples of employees who were beneficiaries of career advancement support from their employers.

Consortium colleges are generally supporting the pathways reforms, though efforts to communicate the pathways concept to students could be enhanced; some instructors noted that many students were unaware of the pathways or how noncredit-to-credit connections worked. (The latter may be an issue because the schools themselves are still shaky on that front.) However, students had internalized many elements of the messages about pathways, and they saw their current programs as steps along a longer path. How realistic these pathways are given the structural challenges involved in creating bridges between noncredit and credit programs, and whether students persist along these paths, is a matter for future research.

For schools to take the next steps in fortifying these pathways, colleges can engage in the following efforts:

- Improve noncredit-to-credit connections within schools.
- Expand and improve advising.
- Maximize opportunities for students to interact with employers in learning contexts.
- Expand efforts to engage employers and subsequently increase employers' esteem for the programs.

In conclusion, positions further up the healthcare career ladder that require higher-level certifications and degrees are what could be considered “good jobs”: They offer higher pay, lower turnover, and better job stability. Students and workers attempting to climb the ladder toward these desirable positions often face many challenges; these challenges can be

particularly daunting for disadvantaged students who often must put their education on hold to secure paid employment. Career pathways are a promising strategy to address the issue. They can ensure that training leads to jobs, that jobs lead to further training, and that further training leads to better jobs. They pragmatically recognize that students need ways to pause their education and still find their way back without losing progress toward future credentials. In this sense, career pathways are worthwhile pursuits for schools seeking to train tomorrow's healthcare workforce.

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- ⁴ In these briefs, we use the term “career pathways” to describe the broader concept of education-to-career pathways. The term “educational pathways” is used to describe a subset of career pathways: the routes students take through the institution of higher education in preparation for entry and advancement in employment. As a community-college-based grant, the bulk of the reforms in NJ-PREP career pathway development happened in the educational portion of the pathways.
- ⁵ Haviland, S., & Van Noy, M. (2018, June). Noncredit-to-credit connections: Lessons from the New Jersey Health Professions Pathways to Regional Excellence Project (NJ-PREP). (Evaluation Issue Brief #2). New Brunswick, NJ: Education & Employment Research Center, Rutgers University.
- ⁶ McKay, H., & Edwards, R. (2018, June). Prior learning assessment policy and practice in the New Jersey Health Professions Pathways to Regional Excellence Project (NJ-PREP). (Evaluation Issue Brief #3). New Brunswick, NJ: Education & Employment Research Center, Rutgers University.
- ⁷ Haviland & Van Noy, 2018.
- ⁸ Van Noy, M., Jacobs, J., Korey, S., Bailey, T., & Hughes, K. L. (2008). *The landscape of noncredit workforce education: State policies and community college practices*. New York, NY: Community College Research Center.; Xu, D., & Ran, X. (2015). Noncredit education in community college: Students, course enrollments, and academic outcomes (CCRC Working Paper No. 84). New York, NY: Community College Research Center, Teachers College, Columbia University.
- ⁹ McKay & Edwards, 2018.
- ¹⁰ Kazis, R., Callahan, A., Davidson, C., McLeod, A., Bosworth, B., Choitz, V., and Hoops, J. (2007, March). *Adult learners in higher education: Barriers to success and strategies to improve results* (Occasional Paper 2007-03). Washington, DC: Employment and Training Administration, U.S. Department of Labor.
- ¹¹ However, consortium staff note that area hospitals have begun to express a strong preference for nursing assistant certification, while nursing homes have been less receptive. The context of progress in certification is important and would be a fruitful avenue for future research.

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