

CAREER TRENDS IN HEALTHCARE

What are the career drivers in 2016 and beyond?

The future belongs to the MacGyvers of healthcare. While providers likely will not be closing wounds with duct tape as MacGyver has been known to do, they will be expected to embody a similar fearlessness while conquering the newest demands of warp-speed medical change.

Trends in healthcare are not so much transient ideas, but rather the identification of emerging industry needs. Pay close attention to trending vocabulary; it informs career strategies to meet requirements in the months—and years—ahead.

HELP WANTED

The U.S. Bureau of Labor Statistics' Occupational Outlook Handbook details swelling growth projections by year 2024 in various healthcare sectors, outpacing other U.S. occupations: Audiology – 29%, home health aides – 38%, medical and clinical laboratory technologists – 16%, nurse practitioners – 31%, occupational therapists – 27%, physical therapists – 34%, registered nurses – 16%, respiratory therapists – 12%, speech-language pathologists – 21%, physician assistants – 36%.

Some of this expanded need for clinicians is tied to the graying of the American population intersecting with the passage of the Affordable Care Act (ACA)—not exactly “trends,” but certainly on point for discussion in 2016. According to the ACA website, an estimated 11.7 million people were enrolled in state and federal marketplaces, 10.8 million more were covered through Medicaid and CHIP programs, and 5.7 million young people were able to remain on their parents' health insurance plans.

“Physician assistants and nurse practitioners have become the first line of defense in evaluating patients' needs,” said Patricia Chute, EdD, dean of New York Institute of Technology's School of Health Professions, Old Westbury, N.Y. Part of the reason for their emergence, said Chute, is the fact that it is quicker to educate to the level of PAs and NPs than it is to turn out doctors. Patients need care sooner rather than later.

According to the 2015 HealthcareSource/American Society for Healthcare Human Resources Administration (ASHHRA) Healthcare Workforce Executive Insights Survey, which polled 400 human resource professionals at healthcare facilities across the U.S., the most coveted hires in 2016 will be BSN-prepared registered nurses. →

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By Valerie Neff Newitt

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Ursula Pawlowski, MSHR, SPHR, SHRM-SCP, human relations concierge for ASHHRA, commented in a survey report this is due in part to the fact that hospitals must demonstrate that 100% of their nurse managers have a BSN or graduate degree in nursing to earn or renew American Nurses’ Credentialing Center (ANCC) Magnet recognition.

The other job functions identified in the survey as most sought-after hires are: physicians in second place, medical billers/coders prepped for ICD-10 in third place, NPs in fourth place, care coordinators in fifth place, PAs in sixth place and nurse navigators in seventh place.

While these high-value careers are in strong demand, rest assured there will always be competition along the career path. Those looking to navigate it successfully must keep an eye to increasing personal relevance and skillsets within the healthcare workplace.

NEW COMPETENCIES

“The largest trend we see in healthcare today is the move toward a patient-centric model of care,” said David Solot, PhD, senior vice president at Caliper, an international human resources consulting company. “For decades healthcare was dominated by processes and procedures that made things efficient for healthcare providers—hospitals and doctors.”

But that paradigm is flipping, he noted. With millennials dominating a growing segment of healthcare consumerism, models must adapt to the way millennials make decisions about their health and purchasing services. “Even 10 years ago, few people were checking online reviews for primary care. It’s a different story today. What does this mean for healthcare careers?” asked Solot. “It means that care providers must demonstrate more than just technical acumen. They must be selected and promoted based on their ability to connect with people and manage staff.

“A generation ago the best clinician was the one who memorized the most symptoms and disorders,” he reminded. “Today, every clinician can immediately pull up the entire ICD-10 on a tablet. The stellar healthcare employees of tomorrow will be the ones who possess both technical skills and competencies in active communication, interpersonal dynamics and self-management.” Solot went on to stress that conflict management, negotiation skills, interpersonal sensitivity, bilingual ability and adaptability are all competencies that are of high value in today’s healthcare environment.

RETAIL HEALTHCARE

Patient satisfaction is a driving force behind “retail healthcare”—which is more than drugs and therapy. It includes the addition of concierge attention to patients—the kind that drives up HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems).

“Hospitals are starting to model themselves in part after the hospitality industry,” said Cord Himmelstein, a vice president at Michael C. Fina, a provider of employee recognition programs. He noted that luxury hotel brand Ritz Carlton maintains the Ritz-Carlton Leadership Center. “It is interesting that approximately 70% of the center’s business is healthcare organizations. In fact, Ritz-Carlton now offers a course specifically for best practices for service excellence in healthcare,” said Himmelstein.

While hospitals once primarily considered technical competencies of potential hires, the considerations have widened, said Michael DiPietro, chief marketing officer at HealthcareSource, a provider of talent management software to some 2,500 hospitals for the purposes of employee recruitment, engagement and more.

“Twenty years ago if you were trained and you were a human being, you could get hired,” he quipped. “It didn’t matter so much what your bedside manner was. Now it matters very, very much.”

DiPietro said one software program used to measure behavioral competencies of potential healthcare employees was a minor HealthcareSource offering 10 years ago. “Now it is our hottest product, endorsed by the American Hospital Association. Today’s hospitals want to know about a person’s work ethic, level of compassion, team work, willingness to learn and desire to adapt,” he explained. “They understand the competitiveness of the industry and realize it demands more than good clinical outcomes. That is a huge change. If employees want to differentiate themselves, they should be clear that they are lifelong learners and are collaborative—eager for knowledge across many competencies and functions.”

TECHNOLOGICAL FLEXIBILITY

Industry experts agree that healthcare employees must be human equivalents of strong, flexible trees facing a storm of technological change. “They need to bend—and grow—in many directions,” advised Michael Abrams, co-founder and vice president of Numerof & Associates, strategic management consultants for the global

healthcare sector. “Any degree of ambidexterity is great.”

Ease of adapting to shifting technology is not only a desired quality; it is a necessity. “We know there are a lot of [older] providers who would rather retire than use a new EMR,” said DiPietro. “But a clinician who says, ‘I know how to use that system and I can help others use it,’ is a huge asset to an organization.”

Abrams noted that technology will only get bigger in the healthcare setting. “Tech-related opportunities are everywhere. In every department—be it the ED or respiratory or PT—you need someone to operate equipment, computer programs, work within applications, train others in the department, modify, code and customize systems. So if you are a ‘thingy’ person—someone comfortable with technology-driven devices in either in-patient or out-patient settings, you will be a highly desirable employee,” he said. “These are the MacGyvers of healthcare.”

EMERGING TITLES

As healthcare redefines itself to address demands of the marketplace, and prepares to take on the rigors—and financial risks—of population health, certain job titles are emerging as a result. For example:

Medical scribes – These employees will be with providers and patients to document conversations between the two. “Instead of patients getting verbal information they don’t really understand, or are not emotionally prepared to absorb, they will receive clear documentation in plain, understandable language from the scribes,” said DiPietro. “This will help patients to be compliant with providers’ orders, follow-up correctly, take medications properly. Clear understanding by patients is essential.” Medical scribes also allow care providers to focus on patients, instead of computer screens—a driver of physician satisfaction.

Case managers/nurse navigators/care coordinators – These are not necessarily new positions, but their importance is increasing as care coordination has been supported and incentivized in the ACA. “Case managers—not always coming from nursing—help patients go to the proper caregivers for given situations, alleviating patient guesswork and frustration,” noted DiPietro. Getting patients to the right clinicians at the right time—and the first time—drives higher patient satisfaction, better patient outcomes, reduced readmissions and emergency room admissions. This also means lower costs.

Health coaches – Health coaches provide information needed by discharged patients to remain healthy and avoid readmission. With health maintenance being a cornerstone goal of Affordable Care Organizations and population health, health coaches fit well into the paradigm. Health coaches will be charged with increasing patients’ ownership of their recoveries and help them maintain focus on health vs. illness.

Inter-professional and cross-functional teams – If you aren’t already in one, you should be. “With the emergence of patient-centered medical homes, decisions about patients cannot take place within the vacuum of one specialty,” said Chute. “Now a patient’s case must be considered from various perspectives, in the context of each medical discipline.” She noted that NYIT is proud to be trailblazing inter-professional collaborative education. Cross-functional teams, are already in play at many facilities,

pulling in the expertise of primary providers, chaplains, nutritionists, alternative medicine practitioners, massage therapists, mental health providers and more to assure an integrative approach to healthcare. Abrams commented, “Everyone in the hospital plays a role in a patient’s outcome. That includes kitchen workers, house-keeping, transport and more. Cross-functional teams are required for best outcomes.”

Practice managers – As hospitals and healthcare systems continue to buy physician practices, they are confronted with a “... conglomerate of practices that may in fact be harder for them to manage than the hospital itself,” said John “Jay” Shiver, MHA, LFACHE, FAAMA, assistant professor at George Mason University in Fairfax County, Va. and consultant to HealthPicket. “Practice management is a quickly emerging field. The industry needs a cadre of well-trained individuals who can help manage patient levels and billing, and work with providers who historically did not work in large bureaucracies.”

Shiver said the transition from private practice to hospital-owned practice is akin to a mom-and-pop store becoming a Wal-Mart. “Practice managers not only help providers make that immense cultural switch, but also to manage the revenue cycle professionally.” How “hot” is the field of practice management? Shiver answered, “I myself am enrolled in a master’s degree program in practice management. Enough said.” ●



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