

WORKFORCE INVESTMENT SAN FRANCISCO

Local Workforce Investment Board for the City and County of San Francisco

MINUTES OF THE
JUNE 12, 2014 MEETING
OF THE
HEALTH CARE SUBCOMMITTEE
OF THE
WORKFORCE INVESTMENT SAN FRANCISCO (WISF) BOARD
OEWD Workforce Division Offices
1 South Van Ness Avenue, 5th Floor, San Francisco

Members Present

Toni Rucker, Subcommittee Chair, WISF Member
Terrance Hall
Cheryl Hardin
Michael Kushner
Barbara Morrisette, WISF Member
Anita Roberts
Tony Wagner
Richard Williams

OEWD Staff

Greg Asay
Emelyne Aspilla
John Halpin
Janan Howell
Lowell Rice
Carmelo San-Mames

Public

(As Evidenced by the Sign-In
Sheet)

Kris Hess, JVS
Chuck Flacks, JVS
Beth Urfer, JVS
Winnie Yu, Self Help for the Elderly
Carlina Hansen, Women's Community Clinic
Kemi Role, Women's Community Clinic
Raul Galvan, DAS
Erica DeOrellana, Arriba Juntos
Beth Freedman, CCSF
Shannon Noonan, Gladstone
Adam Rogers
Terri Feeley
Elisa Ramirez, Laguna Honda Hospital
Margy Baran, IHSS Consortium
Daniel Michael

Roll Call

Chair Toni Rucker called the meeting to order at 9:15 am.

Agenda

Toni Rucker made comments about the purpose for the meeting and the Sub-Committee.
Next WISF meeting June 25th, 2014.

Approval of Minutes - Barbara Morrisette moved to adopt, Michael Kushner seconded.

Staff Report on Healthcare Academy - John Halpin reported on progress of the San Francisco Healthcare Academy and reported on the plans for future programs.

CPMC Workforce Fund Focus Group - Emelyne Aspilla reported on the history of the community benefit agreement related to CPMC's new construction projects. Today's focus is on the workforce funding agreement. There will be the creation of both construction and end-use (healthcare and

supportive services) jobs. The workforce development component of this program is called First Source Plus. It is a good faith effort on the part of the employer to hire entry level workers from the City and County of San Francisco. The goal is that 40% of entry level end use jobs would go to City and County of San Francisco residents. CPMC is required to specifically focus on hiring from the neediest neighborhoods based on income. This effort is being led by OEWD Business Services, JVS, and Self Help for the Elderly. The workforce fund agreement with CPMC included \$3 million to address barriers to employment filtered through the San Francisco Foundation. Their board will decide how the funds will be spent. This focus group will inform a future request for proposals from the Foundation. CPMC has hiring projections for both construction and end-use.

KDG enterprises invited by San Francisco Foundation to conduct focus groups with the Subcommittee. All people gathered, including Subcommittee members, public attendees and staff participated in the focus groups. They will be referred to as “panelists” in this document.

Previous focus groups have included job seekers, entry level employees of CPMC, CPMC employer group (senior managers), advocacy group, and community based organization trainers. Each group was asked the same four questions. KDG will compile comments and generate a report to inform development of a request for proposals for the San Francisco Foundation.

The WISF Subcommittee and all attendees were divided into two groups. The following notes summarize that discussion.

What do you perceive to be the most significant barriers to accessing job training?

The answers to this question focused on several factors: issues of potential trainees; lack of available training; and the difficulty in participating in training when one needs to work.

The concerns about trainees included skills deficits like English language, job readiness, or basic math and reading. In addition, panelists were concerned that for many, basic needs like transportation, child care or violence in their communities could be preventing people from seeking training. Second, panelists expressed the concern that high quality training may simply not be available, or that people were unaware of it. Finally, several discussed the fact that in a very expensive city, participating in unpaid training may be a luxury few can afford.

How could these barriers best be removed?

The suggestions for removal of the barriers discussed were focused on helping individual trainees, developing new programs to fill gaps, revising existing training, or enhancing training with supportive services. Specifically, the recommendations for helping individual trainees included both financial support for basic needs or special requirements like funds for credentials. Suggestions for program improvement ranged from increasing flexibility in definitions of success, to increasing language and contextualized skill development opportunities, to broadening the geographic opportunities for accessing training. New training program recommendations included programs for employers about cultural competency, providing paid mentors for trainees, retention support, or more funding for outreach. Finally, many panelists reflected on mental health barriers or barriers from living in poverty and recommended funding efforts that would address these areas more directly.

What are the most significant barriers to accessing entry-level employment?

The panelists responded to this question from several perspectives. Some focused on the skills needed by job seekers. Others focused on barriers that employers have erected to control the large demand for employment. A third perspective was that the structure of the economy and changing job market are making entry level employment scarcer.

The largest number of comments focused on the fact that many people seeking entry level jobs are poorly prepared. Panelists pointed to job seekers' difficulty working with computers, struggles with English language proficiency and other communication problems, lack of job search skills, lack of appropriate professional networks, and lack of support in their job search. Other panelists highlighted how difficult many jobs are to access either because of automated systems that are designed to screen out applicants, difficult pre-job testing that may or may not be relevant to the actual job one is applying

for, or hiring managers who are unsympathetic to people with barriers. Finally, a third set of responses faulted the downturn in the economy that led to fewer people retiring or leaving jobs. This lack of turnover in entry-level positions, coupled with larger numbers of job seekers, created barriers to employment. Others pointed out that for many entry-level jobs, there are no clear career paths that might open up entry level positions as people move up.

How could these barriers best be removed?

Panelists recommended a variety of solutions to the problems with entry level healthcare jobs. Some solutions focused on enhancing training programs to ensure that job search skills are highlighted and polished. Others recommended greater opportunities for either on-the-job training or internships. Others suggested that perhaps job seekers and employment specialists are too focused on hospitals while the healthcare industry is shifting to out-patient programs, skilled nursing facilities, and home-based care.

What do you perceive as the primary factors that hinder retention?

Recognizing that entry level employees frequently turn over, and that there has been a problem with retention of workers who have been supported by job-training programs, panelists responded to this question focusing mainly on the deficits these workers have. Some panelists voiced the concern that trainees are not open to feedback, and learning how to be managed in a job is a skill that needs reinforcing. Others stated that many trainees have mental health issues, family concerns, and life outside of work problems that can overwhelm them. Some said that because job-training client new hires need more support than the average person, non-profits need more capacity to track, mentor, and continue to support people after they have been hired to ensure retention. On the other hand, some panelists wondered if this is really a problem or a lack of knowledge about retention.

How can we remove these factors hindering retention?

The responses from panelists to this question ranged widely. Some focused on intervention from supporting organizations to provide coaching, mentoring, soft skill development, or support services like mental health. Others focused on how employers can change through providing on the job mentors, peer-to-peer support, training supervisors to work with people from different cultures, or using different languages, or simply paying people more so they don't leave.

What is the most important thing that must be resolved in order for the Development Agreement First Source Hiring Program to be successful?

Panelists answered this question in different ways. Some responded with specific programmatic recommendations like increasing CBO capacity to do a better job with trainees, increasing bilingual training opportunities and English language skills, developing work-focused mental health treatment, or creating a paid internship program at CPMC. Others focused on how to get CPMC ready to hire job seekers recommended by CBOs. They encouraged training CPMC hiring managers about how to work with people who come from low-income neighborhoods or from particular cultural backgrounds. They also requested that CPMC make it easier to apply for jobs there and to provide on-the-job training experiences. A third set of comments related to the Community Benefit Agreement itself. Some panelists were concerned that issues around the agreement, like which neighborhoods are being targeted, have not been resolved.

Toni Rucker closed the focus group portion of the meeting by thanking KDG Enterprises and CPMC for working with the Subcommittee on this process.

Public Comment

The following members of the public made comments to the committee:

Beth Freedman

John Halpin announced Health Academy Graduation on June 26th at 5:30 at City Hall North Light Court.

Adjournment Motioned and Seconded.

Conclusion

The meeting was adjourned at 10:35 am.

Members Present

Toni Rucker, Subcommittee Chair, WISF Member
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Cheryl Hardin
Michael Kushner
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