



HEALTHCARE CAREER ADVANCEMENT PROGRAM

The background of the entire page is a blue-toned, halftone-style image of two healthcare professionals, likely nurses, in a clinical setting. They are wearing white scrubs and are looking down at a document or tablet they are holding together. The image is rendered in shades of blue and purple, creating a professional and modern aesthetic.

Toolkit for High Road Apprenticeships in the Healthcare Industry

Welcome to Registered Apprenticeship

Registered Apprenticeship is an industry-driven program that provides paid, structured, on-the-job learning, job-related didactic instruction, and mentorship. Registered Apprenticeship can be operated or sponsored by an employer, employer association, workforce intermediary, or labor management organization. By the end of the Registered Apprenticeship, workers will be fully competent to perform in the functions of their new role.

Registered Apprenticeship is a targeted workforce solution that can achieve the following results:

- Reduce turnover in positions with high attrition rates
- Provide opportunities for workers who want to advance but lack requisite education or credentials
- Provide a comprehensive instruction program for graduates of certificate programs who lack some of the skills needed to be fully competent
- Build career ladders and lattices for healthcare workers that reduces employee turnover and onboarding costs
- Increase equity in the healthcare workforce
- Provide healthcare workers on-the-job experience with guidance from experienced mentors or coaches

Registered Apprenticeship is expanding quickly in the healthcare industry. It has begun to take hold as a robust model to support worker aspiration and meet employer business needs while providing better care to patients. Registered Apprenticeship builds on the healthcare sector's history of integrating on-the-job learning as part of worker training.

Registered Apprenticeship allows management and labor to set the training standards for workers in healthcare occupations. The National Center for Healthcare Apprenticeships (NCHA) and the National Joint Apprenticeship Training Committee (NJATC) are leading the way to quality apprenticeships in the healthcare industry with a strong commitment to advancing the needs of workers, employers, unions, and other stakeholders. Each program is registered with a federal or state apprenticeship agency to protect the welfare of the apprentice and ensure a quality standard of training.

The goal of this Toolkit is to provide a guide for healthcare entities interested in developing high-quality programs that advance the shared goals of employers, labor partners, and education and workforce organizations. Throughout the Toolkit, there are links to relevant materials, template documents that can be adapted to local need, and an explanation of the steps to implementing a Registered Apprenticeship.

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1. H-CAP

The Healthcare Career Advancement Program (H-CAP) is a national labor management network that provides training and education opportunities to tens of thousands of incumbent workers across the country. For more than 15 years, H-CAP has worked with its partners to create workforce development initiatives, including Registered Apprenticeship, that achieve the Quadruple Aim of connecting Quality Jobs, Better Care, Better Health, and Lower Costs. In 2016, H-CAP was awarded a National Industry Partner contract with the U.S. Department of Labor (DOL) to increase adoption of Registered Apprenticeship in the healthcare industry. H-CAP offers technical assistance and support to healthcare stakeholders to design and implement quality Registered Apprenticeship programs.

H-CAP defines the following as what makes the Registered Apprenticeship system a transformative opportunity:

- Connecting workers to stable, living-wage jobs while filling employers' skill needs
- Engaging and supporting high road healthcare employers to implement workplace practices and policies that attract and retain productive, loyal employees, and providing employees with opportunities and rich learning experiences
- Ensuring Registered Apprenticeship programs have clear integrity and consistent focus that support quality patient care
- Creating a pathway to address disparities in the make-up of the healthcare workforce

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The National Center for Healthcare Apprenticeships (NCHA)

The National Center for Healthcare Apprenticeships (NCHA) and the National Joint Apprenticeship Training Committee (NJATC)

Healthcare employers have joined with the Service Employees International Union (SEIU) and the America Federation of State, County, and Municipal Employees (AFSCME) – two national unions that collectively represent 1 million workers across the healthcare sector – and local unions, education and other partners to develop the National Center for Healthcare Apprenticeships (NCHA). The primary goal of NCHA is to harness the collective strength of industry partnerships as a means to find workforce solutions through high road Registered Apprenticeship training programs.

NCHA creates standards for Registered Apprenticeships in healthcare occupations that meet industry demand and can be adopted by healthcare employers. NCHA submits standards to the DOL for approval and can also work with partners who want to have standards approved by their state apprenticeship agency (SAA). NCHA's leadership body is the National Joint Apprenticeship Training Committee (NJATC), a collaborative of leaders from healthcare unions and employers.

Healthcare occupations in the NCHA standards have been robustly designed and vetted with multiple partners across the country who are committed to creating quality training and care. NCHA has received approval from the DOL to offer apprenticeships in the following healthcare occupations spanning home, community, outpatient, and hospital-based care:

- Central Sterile Processing Technician
- Community Health Worker
- Emergency Medical Technician
- Home Health Aide Specialties
- Medical Coding Career Pathway (Ambulatory Coder and Hospital Coder)
- Medical Assistant
- Support and Retention Coordinator 1
- Support and Retention Coordinator 2
- Surgical Technologist

For more information about current standards for healthcare occupation, visit the [H-CAP National Library](#).

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Using and Creating Standards for Registered Apprenticeship

2. Registered Apprenticeship as a Workforce Development Strategy

The Healthcare Career Advancement Program (H-CAP) is committed to a high road approach to apprenticeship – one that fulfills the personnel needs of employers while meeting the needs of the workforce. This approach in healthcare workforce development promotes the following goals:

- **Aligns needs on the supply side (worker aspiration) and demand side (employer workforce needs).** Registered Apprenticeship is unique because of the rich, mentored, on-the-job learning experience tied directly to employment and wage progression for skill attainment. Public investment in Registered Apprenticeship can leverage private systems for the benefit of both workers and employers.
- **Removes barriers to entry and advancement into the advanced healthcare professions.** Registered Apprenticeship has been a mechanism to provide opportunity to workers who have traditionally been “crowded out” or underrepresented in advanced healthcare roles. It opens routes for low-wage workers to pursue career pathways.
- **Aligns training to current industry standards.** Registered Apprenticeship allows healthcare employers to work with education providers to create curricula informed by current industry needs.
- **Promotes career pathways.** H-CAP creates Registered Apprenticeships that provide stackable credentials and guide workers to more challenging and complex careers.
- **Creates mentorship relationships that benefit the mentor and the apprentice.** Mentoring provides additional support to an apprentice by providing a skilled role model to guide the apprentice. Mentors also build their own teaching and leadership skills.

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Components of Registered Apprenticeship in Healthcare

Registered Apprenticeship has a growing presence in healthcare because of the opportunities it creates to improve job quality while supporting worker aspiration and employer personnel needs. The key components are described below.

Employer Involvement and Stakeholder Participation

The foundation of every apprenticeship program is a committee of key stakeholders who build it, shape it, and oversee its implementation. The employer's participation at both the human resources and department levels is vital to the success of the program.

Wherever employers are signatory to a Collective Bargaining Agreement (CBA), local labor organizations are essential partners in the development and administration of Registered Apprenticeship. Labor organizations play a key role in protecting the welfare of the apprentice and ensuring that critical skills are developed.

Structured On-the-Job Learning (OJL)

Apprenticeships include a work-based learning component of at least 2,000 hours (or equivalent experience) of On-the-Job Learning (OJL) with support from a mentor or other professional who is fully competent in the occupation. The training is based on national industry standards, customized to the needs of the particular employer(s) and labor-management partner(s).

Related Technical Instruction (RTI)

Related Technical Instruction (RTI) covers the technical and academic knowledge that applies to the occupation. It is developed according to industry standard and delivered to promote apprentice success. RTI can be conducted in a variety of settings by the employer, union-based or labor management trainers, or an education partner, such as a college or university. Duration of the RTI component is a minimum of at least 144 hours per year of apprenticeship. In healthcare occupations that require credentialing, RTI may be provided by an approved education provider to prepare apprentices to sit for a credentialing exam.

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Mentorship

Qualified mentors give apprentices support and guidance as they work their way through the program. Mentors coach, support, and guide apprentices using reflective learning to ensure the apprentice can competently perform all of the necessary skills for the job. A qualified mentor can be a co-worker with significant experience or a manager or supervisor.

Rewards for Skill Gains

Apprentices are paid while they learn, and they receive increased wages as core skills and competencies are attained. Apprentices must receive at least one wage increase within the duration of the apprenticeship or at its conclusion.

Industry-Recognized Credential

Apprentices gain a national, industry-endorsed, portable credential when the program sponsor certifies completion. This certifies that apprentices are at the full performance level for the occupation in which they trained.

	Employer Involvement	<ul style="list-style-type: none"> • Employer is the foundation • Must be directly involved • Must provide paid <u>on-the-job learning</u>
	Structured, Paid On-the-Job Learning	<ul style="list-style-type: none"> • Minimum of 2,000 hours • Structured and supervised
	Job Related Educational Instruction	<ul style="list-style-type: none"> • 144 hours recommended per year • Parallel Front-loaded Segmented options
	Rewards for Skill Gains	<ul style="list-style-type: none"> • Increase in skills and competencies tied to increased earnings
	National Occupational Credential	<ul style="list-style-type: none"> • Portable, industry-recognized credential • Certifies an individual is at the full performance level for the occupation

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3. Using and Creating Standards for Registered Apprenticeship

Each apprenticeship program has a set of standards that are approved by federal and/or state registration agencies and contain all of the core components outlined above. Entities have two options to develop standards for Registered Apprenticeship healthcare occupational programs:

- Using the National Center for Healthcare Apprenticeships (NCHA) approved standards, which are customizable to address local needs and requirements
- Creating new occupational standards to be approved by the United States Department of Labor (DOL) or a State Apprenticeship Agency (SAA).

Registering Programs with the National Center for Healthcare Apprenticeships

Those interested in working with NCHA to implement Registered Apprenticeship, must submit their standards to NCHA for review by NCHA's leadership body, the National Joint Apprenticeship Committee (NJATC). The Healthcare Career Advancement Program (H-CAP) supports NCHA in two significant ways:

- Fielding requests and working with healthcare entities that want to use NCHA standards
- Identifying new occupations and creating standards that can be approved by the DOL and/or SAAs

NCHA reviews the following items when considering new partners that will use NCHA standards and occupational outlines to register apprentices:

- Opportunities for worker empowerment and equitable training to create quality care
- Input from healthcare employers and workers in the field
- Measured cooperation among partnership stakeholders

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- Scope of customization required to instruction outline and for on-the-job learning competencies
- Expected collateral benefits such as improved teamwork, increased productivity, and improved workplace culture
- Potential for career advancement and pathways

Registration with State and Federal Agencies

Federal Apprenticeship standards are approved by the DOL. They specify Related Technical Instruction (RTI), work processes, and/or competencies required for each occupation. Some states have branches of the DOL and do not require separate federal registration.

Some states have State Apprenticeship Agencies (SAAs) that approve and administer Registered Apprenticeships. States may have criteria that differs from federal guidelines on issues such as instruction, wage progression, and worker-to-apprentice ratios.

To find out if a state participates in the federal program or runs their own SAA, visit: <https://www.doleta.gov/OA/contactlist.cfm>

Time and Competency-Based Models

In developing Registered Apprenticeship, three models exist:

- Competency-based programs: Apprentice progress is measured by achievement of job-related competency both in skills and workplace knowledge
- Hybrid programs: Apprentice completes predetermined range of hours and successfully demonstrate competencies
- Time-based programs: Apprentice complete a required number of hours in on-the-job training and related instruction

A competency-based or hybrid approach is better suited for healthcare occupations because these models allow apprentices to progress according to their demonstrated ability in mastering skills and competencies.

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Additional Resources

For additional resources and supportive documents, such as:

- DOL Bulletin about time vs. competency-based apprenticeships
- Guidance on NCHA participation
- NCHA Standards of Apprenticeship
- NCHA Local Committee Participation Agreement
- NCHA Employer Participation Agreement

please visit: <https://hcapinc.org/toolkit-additional-resources>

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4. Pre-Apprenticeship

A quality pre-apprenticeship program is designed to prepare individuals to enter and succeed in Registered Apprenticeship. These programs support entry into healthcare occupations and expand a participant’s career opportunities.

KEY CONCEPTS

- Pre-apprenticeship differs from Registered Apprenticeship in that it is intended to provide targeted support so that workers may gain the skills necessary for job entry into an apprenticeship
- Completion of a high-quality pre-apprenticeship program can reduce the time needed in Registered Apprenticeship to reach full occupational proficiency

Key Steps

1. Identify what is needed for a pre-apprentice’s successful entrance into and completion of the Registered Apprenticeship program
2. Create a strategic outreach plan that targets prospects for the pre-apprenticeship, such as partnering with high schools and community organizations
3. Define curriculum tailored to potential barriers to be addressed
4. Create support services, resources, and stipends, if available, for the pre-apprentice
5. Define evaluation criteria for successful completion of the pre-apprenticeship program, which should include the skills and requirements for acceptance into the apprenticeship program
6. Provide mentoring or support for pre-apprentice graduates as they transition in the apprenticeship program

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The pre-apprenticeship training model provides opportunities for workers to move to advanced professions. Key components of a pre-apprenticeship program include:

- Established partnership with at least one Registered Apprenticeship program. This may include facilitated entry of pre-apprenticeship graduates into Registered Apprenticeship, possibly with credit for prior experience, skills, or education.
- Approved training and curriculum based on industry standards to ensure training will provide individuals with the skills and competencies needed to enter and succeed in apprenticeships
- Increased outreach and opportunities for under-represented, disadvantaged and/or low-skilled, new or incumbent workers so that upon pre-apprenticeship completion, they will meet entry requirements
- Educational and pre-vocational training services that prepare individuals to understand meet entry requirements
- Assistance to participants with the application and selection process for Registered Apprenticeship
- Intensive wraparound services and personalized support that builds on participant assets and life experiences
- Meaningful hands-on training that strengthens the working environment for existing employees and provides pre-apprentices with exposure to industry and occupational conditions
- Expanded partnerships, collaboration, and resource-sharing among Registered Apprenticeship sponsors

The United States Department of Labor (DOL) Office of Apprenticeship does not register or certify pre-apprenticeship programs. However, State Apprenticeship Agencies (SAAs) may provide an approval process for pre-apprenticeship programs.

Additional Resources

For additional resources and supportive documents, such as:

- U.S. Department of Labor, Employment and Training Administration, Pre-Apprenticeship Programs

please visit <https://www.doleta.gov/OA/preapprentice.cfm>

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5. Planning a Registered Apprenticeship Program

Developing a Registered Apprenticeship program requires a group of committed stakeholders. By creating a robust planning process, the committee can design a program that satisfies the collective vision of all parties.

KEY CONCEPTS

- The planning process should define the objectives of your Registered Apprenticeship program
- Tools and resources developed by the Healthcare Career Advancement Program (H-CAP) may be used by your partnership to plan for implementing a high road Registered Apprenticeship that meets the agreed upon objectives
- The program budget should not only include education costs but also the costs of additional staffing required to support the apprentice while they are in the education portion of the program

Key Steps

1. Involve relevant stakeholders in planning process
2. Develop a committee that will be responsible for implementation and oversight
3. Define shared objectives
4. Review Registered Apprenticeship checklist
5. Develop work plan with clear goals and timelines
6. Consider ways in which Return on Investment (ROI) will be measured
7. Develop a program budget
8. Determine the following:
 - What will be evaluated?
 - What criteria will be used to judge program performance?
 - What standards of performance must be reached for the program to be considered successful?
 - What evidence will indicate performance success relative to criteria standards?

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9. Determine a process for information gathering and tracking
10. Determine benchmarks for data analysis and reporting
11. Create a system for regular check-ins and feedback

Initial Planning Stages

A Local Committee will be responsible for administering the Registered Apprenticeship program. Comprised of employer, union, and labor management training partnership staff (as applicable), the committee should define shared objectives of using Registered Apprenticeship. A Local Committee is called a Joint Apprenticeship Training Committee (JATC) when it is made up of an equal number of representatives of labor and management in a collective bargaining context.

The key partners for program implementation will vary according to program objectives, the selected healthcare occupation, education and competency requirements, and other factors. Partners may bring workforce resources and expertise, offer an education program for a particular occupation, or provide community connections and influence. Potential partners include:

- Workforce system
- Education and training providers
- Government and elected officials
- Community agencies and leaders
- Funders

A first step in planning a Registered Apprenticeship program is to define success. Registered Apprenticeship has gained traction in the healthcare industry to address labor shortages, develop new job roles or titles, and meet systems' goals. There are also many collateral benefits, such as an improved workplace culture, building worker-centered critical thinking skills, empowering frontline staff to assume leadership roles, increasing diversity of staff, create career advancement opportunities, and more.

By defining the goal of Registered Apprenticeship, a JATC or Local Committee can devise a plan to address the underlying issues and select strategic partners. The Local Committee should also determine what outcomes will be evaluated to measure program success so that methods for collecting evaluative data are built into the program.

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Defining Success in Coding and Home Care Registered Apprenticeship Programs

- Coding apprenticeship programs often have goals of reducing dependence on contract staff and improving the revenue cycle, but the benefits may be even greater¹. A Hospital Coder program in Rhode Island experienced early gains in the first few months of its apprenticeship program: reductions in the bill hold, increased productivity, improved teamwork, and a bolstered labor/management relationship.
- A home care apprenticeship in California was initiated by an employer, union, and labor/management training fund to prepare experienced incumbent workers for a role to support and retain newly hired home care providers. The partnership developed because the employer could not recruit qualified applicants with critical home care experience required for the position. The apprenticeship has been transformative, building skills of apprentices who are committed employees, and putting them on a career advancement track.

Developing a Program Budget

Costs of a Registered Apprenticeship program vary depending on the healthcare occupation and other factors, such as whether apprentices are incumbent workers or new hires, the related instruction provider, and wage progressions offered. Some costs that your healthcare partnership may want to consider include:

- Recruiting and onboarding
- Providing mentors with a training wage/preceptor pay
- Cost of learning materials
- Backfill for apprentices when they are doing the RTI portion of the apprenticeship
- Lower productivity for mentors while they mentor

Registering a program with the United States Department of Labor (DOL) or a State Apprenticeship Agency (SAA) may provide access to workforce system resources and tax credits that can help offset some costs for training, tuition and/or mentor reimbursement. Employer should consider savings that will be realized as a result of the program, including lower turnover and increased productivity.

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Return on Investment (ROI)

ROI of Registered Apprenticeship may be measured in various ways. Some examples include:

- The U.S. Department of Commerce and Case Western Reserve University created a beta calculator to determine ROI generated by Registered Apprenticeship. It was developed using data from 13 businesses and intermediaries covering a variety of occupations, industries, and regions. The calculator will estimate the potential dollar value of a planned or existing program based on inputs of cost and benefit data.
- Some healthcare employers have examined the impact of Registered Apprenticeship on clinical, quality, cost, and utilization outcomes
- An evaluation of BronxCare Health System based at Bronx Lebanon Hospital Center is examining whether an apprenticeship model, with mentoring and on-the-job application of Related Technical Instruction benefits students than a more traditional model of education

Determining Evaluation Criteria

Evaluations are used to gain insight about a program’s intended objectives, define successes, and formulate lessons learned for future application. The evaluation should be designed during the planning phase to allow baseline data to be collected initially and compared to information at the end of the apprenticeship in order to examine the impact.

The evaluation may include two types of measures:

- Process measures which examine specific steps leading to defined program outcomes. Interim results will allow adjustments during the implementation of the Registered Apprenticeship program.
- Outcome measures which provide information to determine whether the program produced the expected changes. Examples of these type of measures include whether the apprenticeship created opportunities for workers to enhance their skills, earn industry-recognized credentials, and increase earnings.

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Evaluation measures should relate to program objectives. For example, Medical Coding programs may aim to reduce bill hold, so measures could include decrease in billable hours. Other programs may be interested in changing healthcare utilization, such as reducing hospital readmissions or avoidable emergency room and hospital visits. Examples of other possible measures include:

- Apprentice demographics
- Completion rates
- Number of times apprentice has met with mentor, and qualitative information about interactions
- Turnover rates in occupation prior to and after the apprenticeship program
- Avoided overtime
- Avoided mistakes/errors
- Reduced recruitment costs
- Wage increase
- Job retention for apprentices versus other workers

The program may collect qualitative data to provide a picture of its impact and collateral benefits. For example, focus groups, interviews, and case studies that feature results and success stories from apprentices, mentors, employers, and other program partners often provide compelling information.

In addition, these aspects of the program should be measured to evaluate the program itself:

- Apprentice job readiness upon completion of the program
- Apprentice satisfaction with the program
- Employer ROI and sustainability plan
- Apprentice movement along a career pathway

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Additional Resources

For additional resources and supportive documents, such as:

- Registered Apprenticeship Checklist
- Registered Apprenticeship Timeline Template
- [ROI Beta Calculator](#)

please visit: <https://hcapinc.org/toolkit-additional-resources>

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6. Developing a Local Committee

Registered Apprenticeship programs are developed and operated by local partners under the United States Department of Labor (DOL) or State Apprenticeship Agency (SAA). The committee plays a critical role in the administration of quality Registered Apprenticeship programs that advance healthcare industry goals and quality jobs.

KEY CONCEPTS

- A Local Committee is called a Joint Apprenticeship Training Committee (JATC) when it is made up of an equal number of representatives of labor and management in a collective bargaining context.
- Registered Apprenticeship programs are administered locally by a committee
- The National Center for Healthcare Apprenticeships (NCHA) delegates responsibility for the oversight of local apprenticeship programs to JATCs or Local Committees in accordance with NCHA Standards of Apprenticeship

Key Steps

1. Identify the group of people to serve on a JATC or Local Committee who will administer and oversee the apprenticeship
2. Charter a JATC or Local Committee
3. Convene the JATC or Local Committee regularly to oversee and make decisions about your apprenticeship program

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Definition and Formation of JATCs or Local Committees

The Local Committee is the apprenticeship program sponsor responsible for administering the program and communicating information about the apprenticeship to state/federal registration agencies or NCHA. When a union is involved with the apprenticeship, Local Committee must be a JATC, with equal representation from labor and management.

The JATC or Local Committee plans the apprenticeship program, sets policies, and makes decisions relating to program implementation. Examples of these responsibilities include developing the apprenticeship program objectives, determining on-the-job learning competencies, selecting education providers, recruiting and selecting apprentices and mentors, setting policies for granting credit for prior experience and learning, and certifying apprentice completion.

A JATC or Local Committee is comprised of those responsible for decision-making and ideally includes both frontline workers, managers, and representatives from institutional leadership. It should be structured to be responsive to the program's needs.

Delegation of Authority to JATCs or Local Committees by NCHA

Recognizing the importance of local oversight and decision-making, NCHA delegates authority to a JATC or Local Committee to administer and oversee apprenticeship programs in accordance with the NCHA Standards of Apprenticeship.

The JATC or Local Committee make decisions on implementing the apprenticeship program, including:

- Customizing NCHA standards to meet local needs
- Choice of education provider(s)
- Recruitment standards for apprentices and mentors
- Training processes for apprentices and mentors
- Policies for granting credit for prior experience and learning
- Assessing the achievement of competencies

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The Healthcare Career Advancement Program (H-CAP) can work with healthcare partnerships who wish to administer Registered Apprenticeship for healthcare occupations registered under the NCHA standards.

JATCs and Collective Bargaining Agreements (CBAs)

A JATC is comprised of equal representation of labor and management. Multiple unions and multiple employers can comprise a JATC.

In some cases, labor management training partnerships may act as the apprenticeship program sponsor, have formal seats on the JATC, or attend JATC meetings and provide information as non-voting members.

The JATC serves as the local sponsor and includes both labor and management representatives in equal numbers. JATCs or Local Committees ensure that any components of the apprenticeship that impact a CBA are worked out between the union and the employer. The JATC may want to set policies that reference a CBA or note when CBA language would come into use. For example, the JATC would not impose discipline but might reference what impact disciplinary action might have on an apprentice's ability to remain in the program.

Some aspects of apprenticeships may require modifications or additions to existing CBAs or decisions by the employer. These items include:

- Anything related to terms and conditions of employment
- Rates of pay and pay increases
- Impact of the apprenticeship on seniority
- Job requirements/new job classifications

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When forming JATCs or Local Committees, you will want to set policies on these items.

- Number of seats
- Membership requirements
- Terms of office
- Officers
- Responsibilities of members
- Removal of members
- Who can attend meetings, view meeting minutes, etc.
- Voting processes

Additional Resources

For additional resources and supportive documents, such as:

- Guidance on joining NCHA

please visit: <https://hcapinc.org/toolkit-additional-resources>

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7. Developing Competencies and Related Instruction

The core components of Registered Apprenticeship standards are defined by industry partners participating in the Joint Apprenticeship Training Committee (JATC) or Local Committee. The Work Processes and Related Technical Instruction (RTI) outline are determined by the competencies required for the job, and other requirements addressed in the standards will be uniformly applied to all apprentices.

KEY CONCEPTS

- Competencies are: “A cluster of related knowledge, skills, and attitudes that affects a major part of one’s job (a role or responsibility), that correlates with performance on the job, can be measured against well-accepted standards, and can be improved via training and development.”
- Competencies may also be described as Work Processes
- Competencies are built through mapping the skills and knowledge that apprentices need to achieve full job proficiency, improve worker job satisfaction, and promote excellence in the delivery of high quality care
- Related Instruction complements on-the-job learning and includes knowledge required for successful performance of the occupation
- Related Instruction and On-the-Job Learning (OJL) may be offered within the same timeframe or sequentially
- Credit may be given to apprentices for educational requirements they have fulfilled and experience they have demonstrated or documented

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▶ **Developing Competencies and Related Instruction**

Key Steps

1. Develop Job Competencies

- Review job description, similar previously developed apprenticeships and training programs, and any certification or licensure requirements
- Develop a list of competencies
- Review list of competencies with workers in the occupation, supervisors, JATC or Local Committee, other employers, and other partners
- Develop OJL outline for Work Processes
- Establish policies for apprentice evaluation, including the process and tools to assess and award credit for prior experience and learning

2. Develop Outline for Related Technical Instruction

- Research potential training providers, including community colleges and non-traditional providers of curriculum
- Interview potential training providers to determine their ability to adapt to the apprenticeship model
- Select training provider(s) and for participation in development and/or adaptation of curriculum
- Develop course outline
- Establish policies for apprentice evaluation, including the process and tools to assess prior learning and award credit for prior education

Competency Development

Determining competencies for Registered Apprenticeship is essential for the development of standards and ensures fully-trained apprentices graduate from the program. Because different states and healthcare employers have different scope of practice and workplace requirements, competencies may vary for the same position. Competencies should be developed so they are measurable and can be demonstrated, match success in the job, and are clearly understood by apprentices and their supervisors. Apprentices should build skills and achieve competencies with the support of a mentor. The Healthcare Career Advancement Program (H-CAP) has developed materials that provide examples of competencies and how to measure an apprentice's progress in achieving them.

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Related Technical Instruction

The educational component of Registered Apprenticeship should provide technical knowledge to support on-the-job competencies, at a recommended minimum of 144 hours each year of the apprenticeship. Instruction can be delivered in a classroom, remotely, on-site, online or through more than one of these methods. It may occur prior to OJL or concurrently, and through a variety of different educational providers, including any of the following:

- A college
- A qualified training organization
- A trainer of the employer
- A contracted instructor
- A labor/management training fund
- A union
- Other appropriate and qualified training providers

The Related Technical Instruction (RTI) provider is an important partner in the apprenticeship program. (link to section on working with education provider) Their expertise ensures the apprentice will gain the knowledge required to achieve competencies. The JATC or Local Committee selects educational providers. Some state apprenticeship agencies have specific requirements for the entity providing RTI. The United States Department of Labor (DOL) requires the RTI instructor to be a subject matter expert and understand how to teach adults.

Many Registered Apprenticeship programs use online programs, either alone or in combination with in-person learning. Utilizing online programs creates the opportunity to build a virtual cohort of apprentices in various worksites across a state or region. A larger cohort can use its leverage to negotiate with an educational entity for classes at times and locations that are convenient for apprentices, not only during ordinary school hours.

Working with selected RTI provider or providers, the committee's role is to ensure that the curriculum addresses the apprenticeship's required knowledge and competencies through either an established program or a newly designed one.

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Credit for Prior Learning and Prior Experience

The JATC or Local Committee may use assessments to determine or verify an apprentice's skill level and/or mastery of competencies on entry into the apprenticeship. Methods used for assessment are decided upon by the JATC or Local Committee and should be included among the policies they establish. These policies will help ensure that assessments for prior learning and previous job-related work experience are applied equitably and with transparency. In cases where an apprentice has already taken relevant classes or acquired relevant knowledge, the committee may grant credit for prior learning. The JATC or Local Committee decides what types of credit are given for prior learning and how to verify credit.

Sequencing and Timing of RTI and On-the-Job Learning

Sequencing and timing of the RTI and OJL may be determined by the JATC or Local Committee and program requirements. For example, if the apprentice must complete RTI and receive a credential prior to starting OJL, the education program may be front-loaded. Otherwise, apprentices may alternate between RTI and OJL. Many JATCs or Local Committees have cited the flexibility of Registered Apprenticeship as a key feature that makes it an effective workforce solution.

Additional Resources

For additional resources and supportive documents, such as:

- Sample Form to Document Credit for Prior Learning and Experience
- Existing Standards for Healthcare Occupations can be found in the [H-CAP National Library](#)

please visit: <https://hcapinc.org/toolkit-additional-resources>

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8. Working with Education Providers

Selecting education providers for a healthcare apprenticeship creates opportunities to tie Related Technical Instruction more closely to healthcare industry standards that are responsive to workplace requirements.

KEY CONCEPTS

- A sponsor and their Joint Apprenticeship Training Committee (JATC) or Local Committee selects education provider(s)
- The ultimate decision on an apprentice’s completion of the program, including the Related Technical Instruction, lies with the sponsor
- Education may be provided in a variety of settings, including in-person, online or combination of both

Key Steps

1. Identify and select education provider(s)
2. Determine the class location and format of providing Related Technical Instruction
3. If the education provider is an institution that can grant credit hours, determine if post-secondary credit is available

The role of education providers and instructors is to provide technical knowledge to support work-based learning. Selecting education provider(s) for Registered Apprenticeship should take the following factors into account:

- Healthcare occupational education and certification requirements
- Cost, length, and timing of delivering the program
- Convenience
- Whether post-secondary credit is available or if the instruction can be translated into credit
- The ability to customize coursework to meet healthcare industry needs.

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Although the education provider may certify that the apprentice has completed RTI, the ultimate decision on final completion of the apprenticeship by an apprentice lies with the program sponsor and the JATC or Local Committee. If an apprentice does not successfully complete all parts of RTI, the JATC or Local Committee may provide access to additional training, extend the apprenticeship to allow the retaking of the course, provide special training to support gaps, or deem that the apprentice has met the requirements through other related training.

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9. Recruiting and Selecting Apprentices

A thorough, equitable recruitment and selection process should provide a diverse pool of interested, eligible applicants and identify successful candidates for Registered Apprenticeship.

KEY CONCEPTS

- Apprentices are recruited and selected in a manner that provides all applicants an opportunity to:
 - Learn about the apprenticeship
 - Understand the requirements they need to meet
- Criteria for recruitment should be based on the committee's assessment of what is needed to successfully complete the program
- Standards for recruitment must be applied equitably across the workforce

Key Steps

1. Create job description and application
2. Develop outreach plan to recruit apprentice applicants, disseminate job opportunity, and ensure that it has a well-developed approach to supporting underserved populations
3. Collect applications by posted deadline
4. Determine whether applicants meet all minimum requirements
5. Conduct testing and interviews
6. Select apprentice candidates
7. Extend offers

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Recruitment

Create apprenticeship description to provide potential apprentices with information about the position, such as:

- Job title
- Main duties
- Starting wage and wage progression
- Minimum qualifications needed to apply
- Selection process

Create application. The application process should be transparent and publicized broadly to provide your recruitment pool with equal opportunity to apply. There must be a clear understanding of minimum requirements for the apprenticeship. Minimum qualifications include requirements that all applicants before continuing on to the selection process, such as age, education, physical requirement, testing and other issues. Additional requirements could include proof of age, education, test scores, and fees related to application or testing.

Create clear guidelines for recruiting and accepting apprentices to ensure fair and equitable access to apprenticeships including:

- Establishing recruitment policies
- Establishing a recruitment outreach plan
- Designating apprenticeship availability to specific pools of workers, job seekers, and underserved populations
- Incorporating personnel recruitment policies in Collective Bargaining Agreements (CBAs) where possible

Create an outreach and advertising plan that results in a diverse pool of apprentice applicants. Provide the job and apprenticeship description to potential candidates through advertising and direct outreach.

Focus of the apprenticeship program may be on incumbent workers or new employees. Sponsor may also decide to recruit both types of workers, including the option to recruit first from within the company and reach out to external job seekers as necessary.

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The local sponsor and JATC or Local Committee should have access to internal employee communication methods such as employee newsletter, posters, and emails for the purpose of recruitment of incumbent workers. To reach external candidates, Committee may outreach to local community and workforce organizations, and American Job Centers to help identify a strong pool of diverse applicants. These organizations may also be able to assist with the screening of potential candidates.

Selection and Notification

Determine apprentice selection process. The JATC or Local Committee may create a subcommittee to oversee selection, screen and review applications, ensure apprenticeship applicants have met minimum qualifications, and recommend apprentices for the program. Potential candidate selection processes include:

- Resume screening
- Letters of recommendation or performance evaluations
- Previous training and/or education that applies to the work of the apprentice
- Initial interviews (by phone or in person)
- Testing, which may include non-traditional, worker-centered assessments
- Formal interviews
- Seniority (for unionized environments and generally applied among equally qualified applicants)

Screen and select candidates. Selection committee should create processes and criteria for screening and selecting successful candidates, which should be clear to all parties. Using a rubric with a scoring grid ensures transparency and consistency when screening and selecting candidates. All candidates must be evaluated on the same criteria; and documentation of each step of the applicant's process must be kept in the apprenticeship program records.

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Extend offers to selected apprentices. Once all offers are accepted, notify applicants that are not selected. Successful candidates should be notified and sent an offer letter. If a candidate does not accept, determine if next top scoring candidate will receive an offer, and if so, send it. All parties including employer/sponsor should be notified of final decisions. The option of providing feedback to unsuccessful candidates may help support them with future applications.

Apprentice Onboarding

New apprentices will benefit from a thorough orientation to the program and a welcome packet with documents that support both the on-boarding process and program completion. Certain information will be collected by the United States Department of Labor (DOL), the National Center for Healthcare Apprenticeships (NCHA), and State Apprenticeship Agencies (SAAs).

Apprentice orientations provide clarification of the welcome packet and forms. Apprentices should be apprised of the following:

- Standards of apprenticeship
- Wage progression policies
- Related Instruction requirements
- Work experience requirements
- Record-keeping responsibilities
- Apprentice responsibilities
- Employer/Sponsor responsibilities
- Employer/Union program policies (e.g., RTI, time for paperwork)
- Complaint procedures

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The welcome packet may include the following:

- Apprenticeship Agreement Form
- Program framework and goals
- Timeline
- Definition and description of mentorship
- How progress will be assessed
- Support available to apprentices

The Apprenticeship Agreement Form collects the following information from the apprentice, sponsor, and employer as required by the DOL:

- Personal information
- Participating employer, wage rate, and number of hours
- Training specific data including start/end date completion date, and credit for prior experience
- Information on the parameters, terms, conditions, and additional provisions of the apprenticeship
- Signatures from the apprentice, sponsor, and employer

Additional Resources

For additional resources and supportive documents, such as:

- Recruitment and selection procedure timeline template
- Sample interview rubric
- Sample orientation form
- Sample Orientation Checklist

please visit: <https://hcapinc.org/toolkit-additional-resources>

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10. Mentorship

A longstanding tradition of mentorship exists in Registered Apprenticeship and healthcare: to help others learn in the workplace. The effective blend of instruction and experiential learning in a Registered Apprenticeship requires mentors, who are critical players in the success of any apprenticeship program, guiding apprentices through On-the-Job-Learning (OJL) experiences and creating a transparent evaluation process. The mentor may also be referred to as a journey-worker, preceptor, or coach.

Mentorship occurs when an experienced worker (mentor) coaches, trains, and supports less experienced workers (apprentices), allowing them to develop skills, achieve job-related competencies, and improve workplace interaction and culture. A robust, high road mentorship program has benefits for apprentices, mentors, and the employer and union.

“A structured process by which employees are grouped to work together to develop essential skills relevant to job performance and personal growth.”

-Ann Haney, The Role of Mentorship in the Workplace

“The delicate balance of mentoring someone is not creating them in your own image but giving them the opportunity to create themselves.”

-Stephen Spielberg

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► **Mentorship**

KEY CONCEPTS

- Benefits of a quality mentorship program include:
 - Increasing frontline worker opportunities for success and career advancement as workplace skills are mastered
 - Building a worker-centered approach to critical thinking
 - Empowering mentors
 - Improving workplace productivity, culture, teamwork, and transparency, and reducing turnover
- A mentor, identified and selected by the employer/program sponsor, is often an experienced peer but could be a supervisor or another worker who has current knowledge of occupational practice and a demonstrated ability to do the job
- In occupations that take place outside of clinical settings (e.g. home care), mentors can visit apprentices, speak with them by phone or video conference, or meet off-site.
- Roles of the mentor include:
 - Explaining, demonstrating, observing, and assessing the apprentice in order to effectively address the learning needs of the apprentice
 - Providing immediate feedback
 - Tracking skill development in the workplace
 - Preparing them for a successful competency evaluation by their supervisors
- Select mentors who have:
 - Expert knowledge of and practice in their occupation
 - Skills, knowledge, and a desire to teach apprentices
 - A commitment to their role as a mentor
 - Ability to relate to apprentices on varying levels
 - Capacity to handle and troubleshoot problems

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► **Mentorship**

Key Steps

- 1.** Determine mentor to apprentice ratio that will be included in Registered Apprenticeship standards
- 2.** Develop mentor selection process
- 3.** Provide mentors with training and support
 - Include supervisors and other staff in relevant portions to create a common understanding and a transparent evaluation process
- 4.** Establish a plan for regular meetings between mentors and apprentices
- 5.** Use tools that promote self-reflection and self-awareness to create critical and reflective thinking and learning skills
- 6.** Provide mentor incentives, such as recognition and/or pay

Role of Mentors

Since a significant portion of the Registered Apprenticeship period takes place during OJL, the mentor plays a central role in the apprentice’s development and growth. Some healthcare occupations have formalized programs, with employers using the term preceptor to denote a role which receives wage increases during the time they function in a training capacity. It is important to plan how mentors will spend time with apprentices throughout OJL so that productivity loss on the part of the mentor can be built into the planning and budgeting processes.

In the United States Department of Labor (DOL) Registered Apprenticeship standards, the mentor is referred to as a journey-worker. The standards also define a ratio of journey-worker mentors to apprentices. The ratio is determined to ensure that the apprentice receives proper oversight, training, and safety. How the ratio is set varies, depending on the occupation.

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Selecting and Preparing Mentors

Selecting and preparing mentors interested in teaching apprentices is crucial to effective mentoring. The person must be motivated to invest time with the apprentice and learn how to effectively mentor others in ways that support quality care. H-CAP’s approach to mentor training includes:

- The goal of supporting the transfer of knowledge to practical application in the workplace. Through experiential learning, mentors have a chance to practice techniques and approaches that support apprentice development while cultivating intra-departmental leadership and professional growth for mentors.
- The use of reflective learning, which develops critical thinking skills is a practice highly valued in today’s healthcare systems. Reflection is a pivotal component of being able to learn from experience, address patient issues, and improve professional practice. Encouraging mentors to reflect on their learning allows them to model and encourage this practice in apprentices.
- Incorporation of mentors and supervisors into the initial stage of training aligns their work on assessment and builds a team that supports the apprentices. Sharing an evaluation rubric with apprentices, mentors, and supervisors contextualizes how apprentices will be coached by their mentors and evaluated by their supervisors.
- The provision of tools for developing and monitoring skills attainment. Examples include journals and checklists, which help the apprentice reflect on their work and build self-awareness and allow mentors to assess progress.

Additional Resources

For additional resources and supportive documents, such as:

- [H-CAP Mentorship Training Program for Healthcare Apprenticeships](#)
- Self-reflective tools
- Alaska guidance on how to address mentor pay

please visit: <https://hcapinc.org/toolkit-additional-resources>

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▶ **Assessing Competency in Registered Apprenticeship in Healthcare**

Program Completion and Evaluation

11. Assessing Competency in Registered Apprenticeship in Healthcare

In order to complete the Registered Apprenticeship Program, the apprentice must show competency in identified work processes. Competency assessment links success to mastery of skills and knowledge an apprentice needs for the job. The committee should ensure it has a plan to evaluate and assess competency that is fair and transparent.

KEY CONCEPTS

- Growth in competency can be tracked over time as apprentices move from novice to a level of expertise
- Assessments performed over time support ongoing learning for apprentices
- Apprentice evaluation should be applied equitably to all apprentices by establishing standard tools through the Joint Apprenticeship Training Committee (JATC) or Local Committee

Key Steps

- Determine assessment methods
- Provide training for staff in competency-based assessment
- Conduct an initial assessment to start the apprentice at the appropriate place in the program
- Assess and track competency development
- Provide additional training as needed
- Document achievement of skills and competencies

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▶ **Assessing Competency in Registered Apprenticeship in Healthcare**

Program Completion and Evaluation

Overview of Assessment of Competencies

Providing staff with an understanding of how to assess competencies is critical to an apprentice's successful completion of the apprenticeship and to helping an apprentice advance to a journey-worker status as a qualified healthcare professional. Ultimately, the program sponsor certifies to the industry that on completion of the apprenticeship program the individual is fully proficient in the occupation. Final evaluation of an apprentice's training, performed by supervisory personnel, is a critical function of the program sponsor.

Competency assessment serves two purposes:

- Determine level of competency of the apprentice as he/she begins the apprenticeship
- Track progress towards completion

Determining initial competency allows a worker who has achieved some of the job-related competencies to move more quickly through the apprenticeship, saving both apprentice and employer time and effort. The length of time it will take to become competent may vary from person to person, and training may be customized to meet individual needs.

Tracking progress of apprentices towards mastery of their new job promotes a self-reflective, proactive approach to learning for the apprentice through support and frequent feedback.

Several methods for assessing and determining competence may be used, such as the following:

- Documentation of previous work demonstrating competency
- Rubrics
- Checklists for observation of apprentice competency
- Demonstrations and presentations to those assessing competencies
- Self-reflection with dialogue

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▶ **Assessing Competency in Registered Apprenticeship in Healthcare**

Program Completion and Evaluation

Participants in Assessment of Competencies

Multiple individuals should be involved in the assessment:

- **Supervisors and department heads.** They are responsible for ensuring workers are competent on the job and providing a final evaluation for apprenticeship completion.
- **Mentors.** Where the mentor is a peer, their role is to understand the competencies needed for success on the job and to use this knowledge in teaching and coaching. Where the mentor is a supervisor, the role is coach, and assessment and evaluation may be combined. More information on mentorship may be found in this section <hyperlink>.
- **The apprentice.** By knowing the standards for competence on which they will be evaluated as outlined in the Work Process Schedule, the apprentice becomes a full partner in the process of learning on the job.

Additional Resources

For additional resources and supportive documents, such as:

- Sample form for granting credit for prior experience
- Mentor training curriculum module on conducting competency-based assessment
- Sample competency assessment rubrics and checklists
- Sample journaling tool

please visit: <https://hcapinc.org/toolkit-additional-resources>

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Assessing Competency in Registered Apprenticeship in Healthcare

► **Program Completion and Evaluation**

12. Program Completion and Evaluation

Apprentices who complete a Registered Apprenticeship program will receive an industry-recognized credential, and the employer will gain a fully competent professional in the healthcare occupation. Completion also provides an opportunity to recognize the benefits of Registered Apprenticeship and develop plans for the future.

KEY CONCEPTS

- Completion of apprenticeship, award of certificate, and advancement into position
- Assessment of the impact of the apprenticeship
- Development of career advancement opportunities
- Ultimate decision of completion of an apprenticeship lies with the program sponsor

Key Steps

1. Submit completion paperwork to the United States Department of Labor (DOL), State Apprenticeship Agency (SAA), or the National Center for Healthcare Apprenticeships (NCHA)
2. Hold an event to commemorate and celebrate the apprenticeship completion
3. Plan for expansion to future cohorts and additional apprenticeships
4. Share successes and lessons learned
5. Maintain contact with apprentices and/or employer to assess retention rates and growth paths for at least 6 months after program completion

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Assessing Competency in Registered Apprenticeship in Healthcare

► **Program Completion and Evaluation**

Apprentice Completion Process

Upon completion of Registered Apprenticeship, the apprentice should have all the skills to do their job successfully. The apprentice will receive a certificate of completion and be eligible for advancement into the occupation as a fully competent professional. The certificate is an industry-recognized, portable credential that signifies the quality and rigor of the education and On-the-Job-Learning (OJL) the apprentice has received.

An event such as a graduation ceremony may be held to celebrate apprentices and their achievements. It is also an opportunity to recognize the investment made by the employer, union, education provider, and other partners.

The committee must submit completion paperwork to the DOL, SAA, or NCHA. H-CAP has created an application that may be used to indicate a cohort of apprentices have completed the program.

Evaluation

The key to building a successful program over the long term is to evaluate the program at key benchmarks and upon completion by each cohort. The JATC or Local Committee should define methods to be used to collect data at the outset of the program. Once collected, the JATC or Local Committee can evaluate what, if any, changes should be made to the program to improve future success.

The end of the apprenticeship period provides partners with an opportunity to evaluate, identify areas for program improvement, and showcase the value of the apprenticeship to stakeholders. Partners may be interested in applying lessons learned and expanding Registered Apprenticeship to additional cohorts, creating programs for new jobs or advanced positions providing a career pathway, and/or sharing successes and learnings through conferences, briefs, or articles. Gathering information on outcomes post-completion from former apprentices and employers will provide valuable insights on the Registered Apprenticeship's impact on workers and the workplace. This supports the continued growth and development of Registered Apprenticeship as a targeted, effective workforce solution for the healthcare industry.

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Assessing Competency in Registered Apprenticeship in Healthcare

► **Program Completion and Evaluation**

Additional Resources

- Application to the U.S. Department of Labor for certificate of completion
- Beta ROI Calculator: <http://www.esa.doc.gov/content/new-tool-help-firms-calculate-their-return-investment-apprenticeship>
- A Framework for Program Evaluation: A Gateway to Tools: <http://ctb.ku.edu/en/table-of-contents/evaluate/evaluation/framework-for-evaluation/main>