

Health Workforce Diversity and Allied Health in NC

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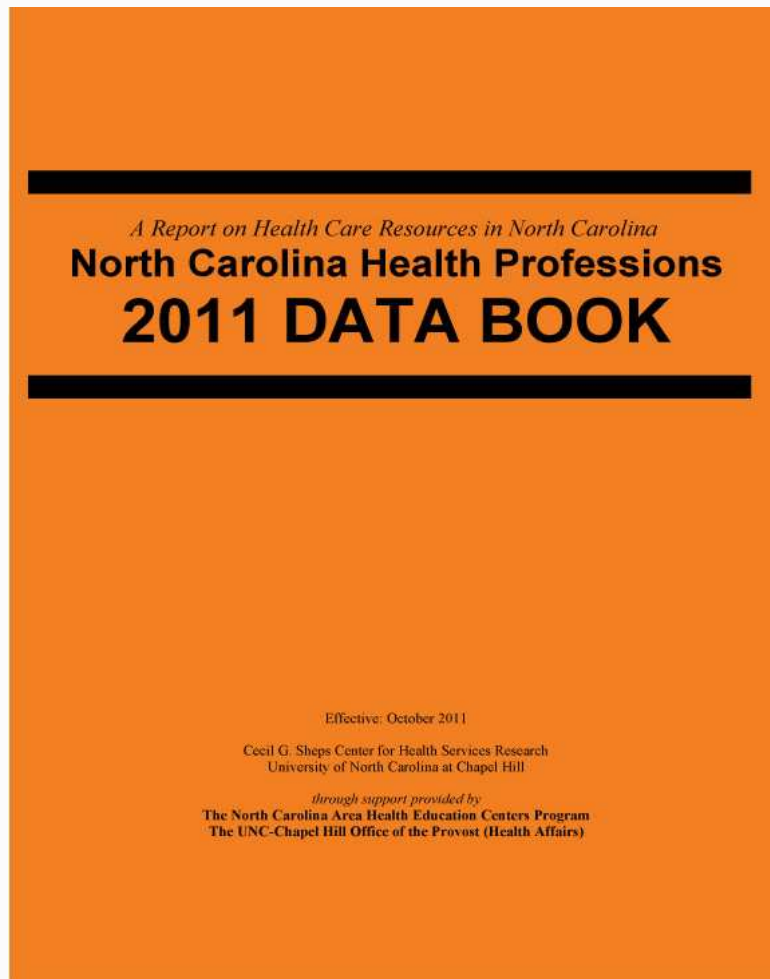
Council for Allied Health of North Carolina
7 November 2012



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NC Health Professions Data System (HPDS)



- Data for 19 health professions
- Derived from licensure files
 - Not a survey
 - Capture 100% of the workforce
 - Data voluntarily provided by boards, no mandate
- 30- years of data allow us to:
 - Monitor changes over time
 - Combine data on race/ethnicity with data on education and geographic characteristics

Data Definitions

- Race vs. ethnicity
- NCHPDS usage of the term allied health



Presentation Overview

- Where do the data come from and what are strengths/limitations?
- Diversity and emerging workforce shortages
- What does health workforce diversity currently look like in the state?
- How has workforce diversity changed over time?
- Where are NC's diverse practitioners educated?
- Data reflections: What does it all mean?



Data Strengths

- **We have data!**
- Derived from licensure files—*not a survey*
- Sample=licensed, active, non-federal practitioners in NC
- 30- years of data allow us to:
 - Monitor changes over time
 - Combine data on race/ethnicity with data on education and geographic characteristics
- You, too, can access these data and have as much fun as we do crunching numbers



Data Challenges

- Data are self-reported
- Quality of race data variable over years, generally improved in recent years
- Race questions asked differently by different Boards
- Increasing number of health professionals fall into more than one category
- How do we know how we're doing? National data are limited but we benchmark to:
 - Previous years
 - North Carolina's population



Diversity and Workforce Shortages

- Emerging workforce shortages
- Are we adequately accessing a talented pool of workers?
- Is there upward education and job mobility?
- Transformed health care system emphasizes population health, reducing health disparities, and community-based models of care. Can we do this without increasing workforce diversity?



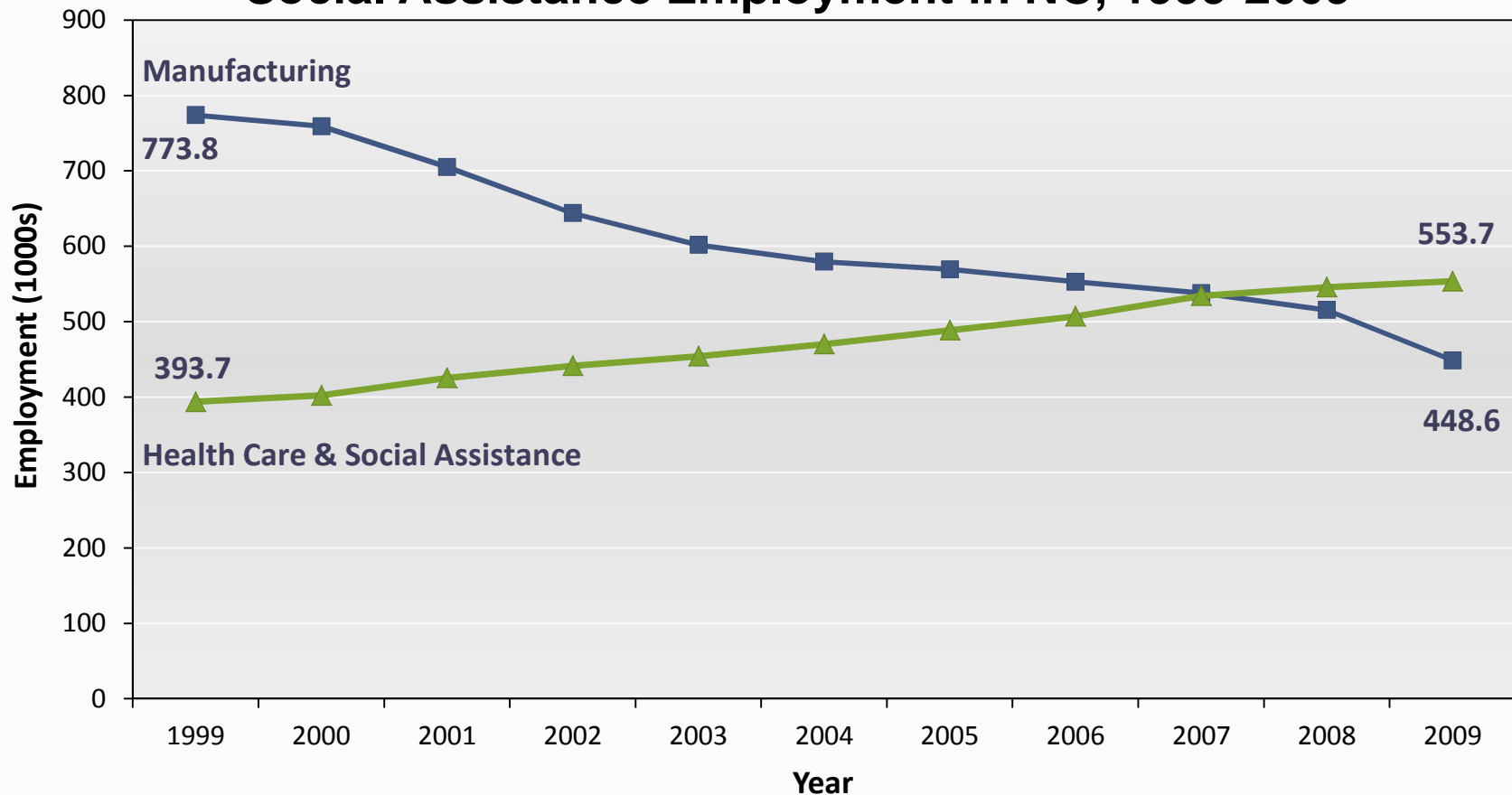
NC Employment Trends and Allied Health Professions



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North Carolina Health Care Employment is Growing Rapidly

Total Employment in Manufacturing and Health Care and Social Assistance Employment in NC, 1999-2009

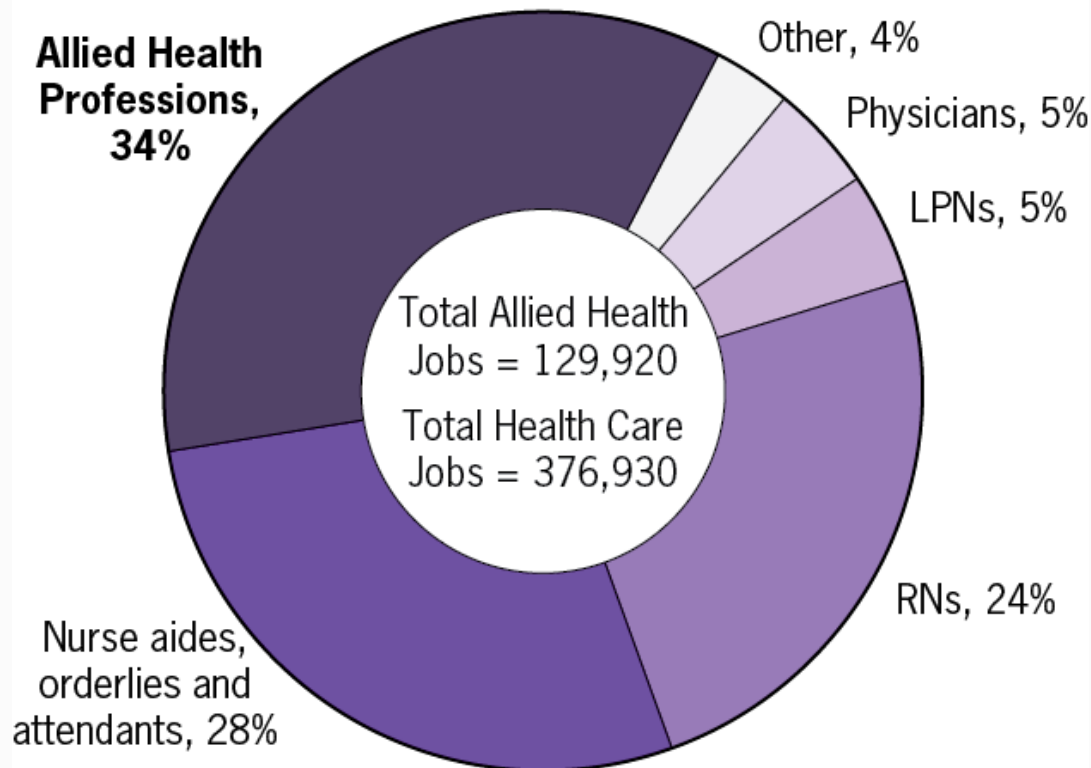


Health Care Jobs in NC, 2010

Allied Health: all health professionals except physicians, nurses, chiropractors, dentists, optometrists, pharmacists, podiatrists, nurse aides, orderlies, and attendants.

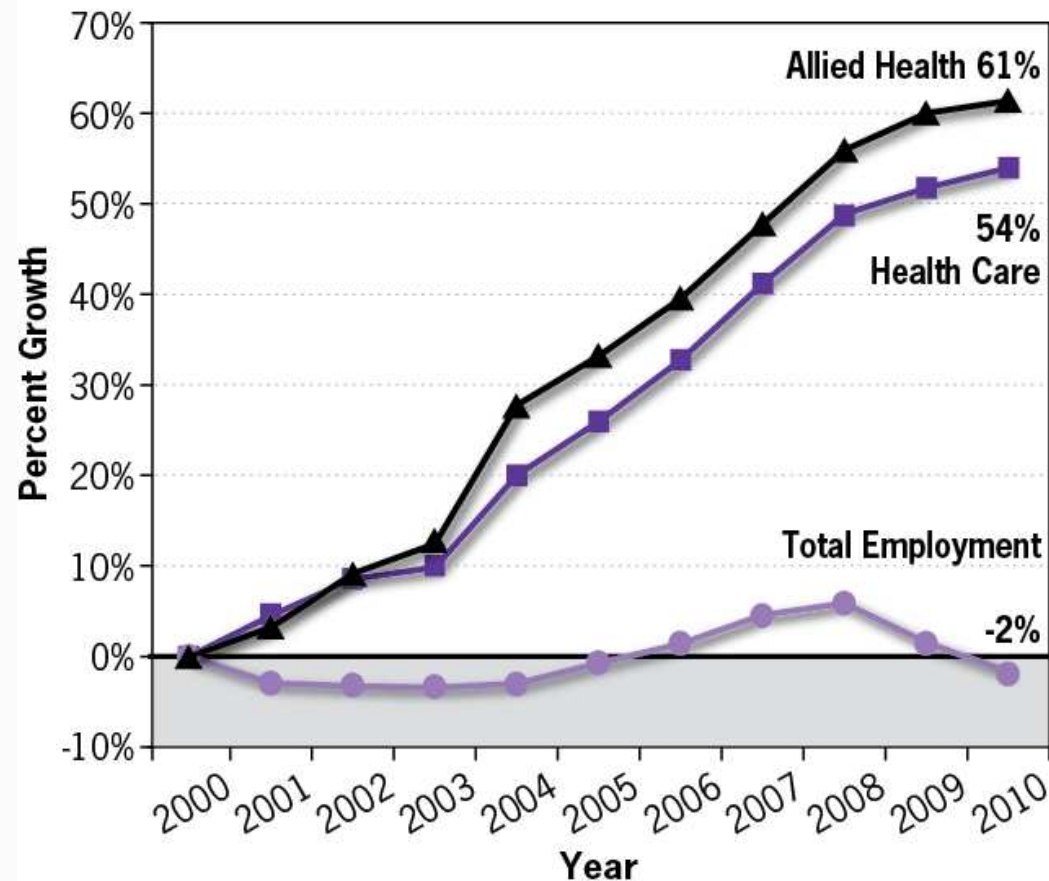
Other: chiropractors, dentists, optometrists, pharmacists, and podiatrists.

Figure 1.
Health Care Jobs in North Carolina, 2010

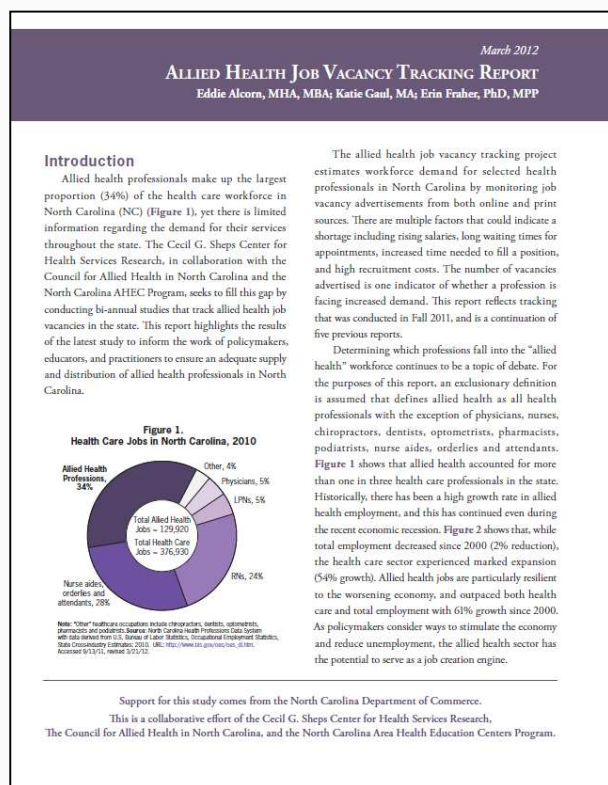


And allied health is outpacing health care

Figure 2.
Percent Growth in NC Employment
Relative to 2000



Demand Side Data: Allied Health Job Vacancy Tracking Reports



March 2012,

October 2011, May 2011, April 2007,
August 2006, and May 2005

Purpose: Estimate workforce demand for selected allied health professions

Method: Monitor weekly job listings in newspaper and online sources

Conducted in partnership with:

- Council for Allied Health in NC
- AHEC

Funded by the NC Department of Commerce

Vacancy Data Showed High Demand for Therapy Professions and HIM

Rank	Profession	Workforce Size	Vacant Positions	Vacancy Index
1	Occupational Therapy Assistant	880	102	11.6
2	Occupational Therapist	2,660	232	8.7
3	Physical Therapist Assistant	2,020	170	8.4
4	Physical Therapist	4,530	274	6.0
5	Speech Language Pathologist	3,630	202	5.6
6	Health Information Management	5,110	202	4.0
7	Clinical Laboratory Sciences	9,090	139	1.5
8	Medical Assistant	11,970	164	1.4
9	Imaging	9,680	68	0.7
10	Emergency Medical Services	8,940	46	0.5

The vacancy index is calculated by dividing the number of positions advertised by the profession's total workforce size and multiplying by 100.

Sources: NC Health Professions Data System Allied Health Job Vacancy Tracking Project with funding provided by the North Carolina Department of Commerce. Job listings tracked from 9/18/11 to 11/26/11 (N=1599).



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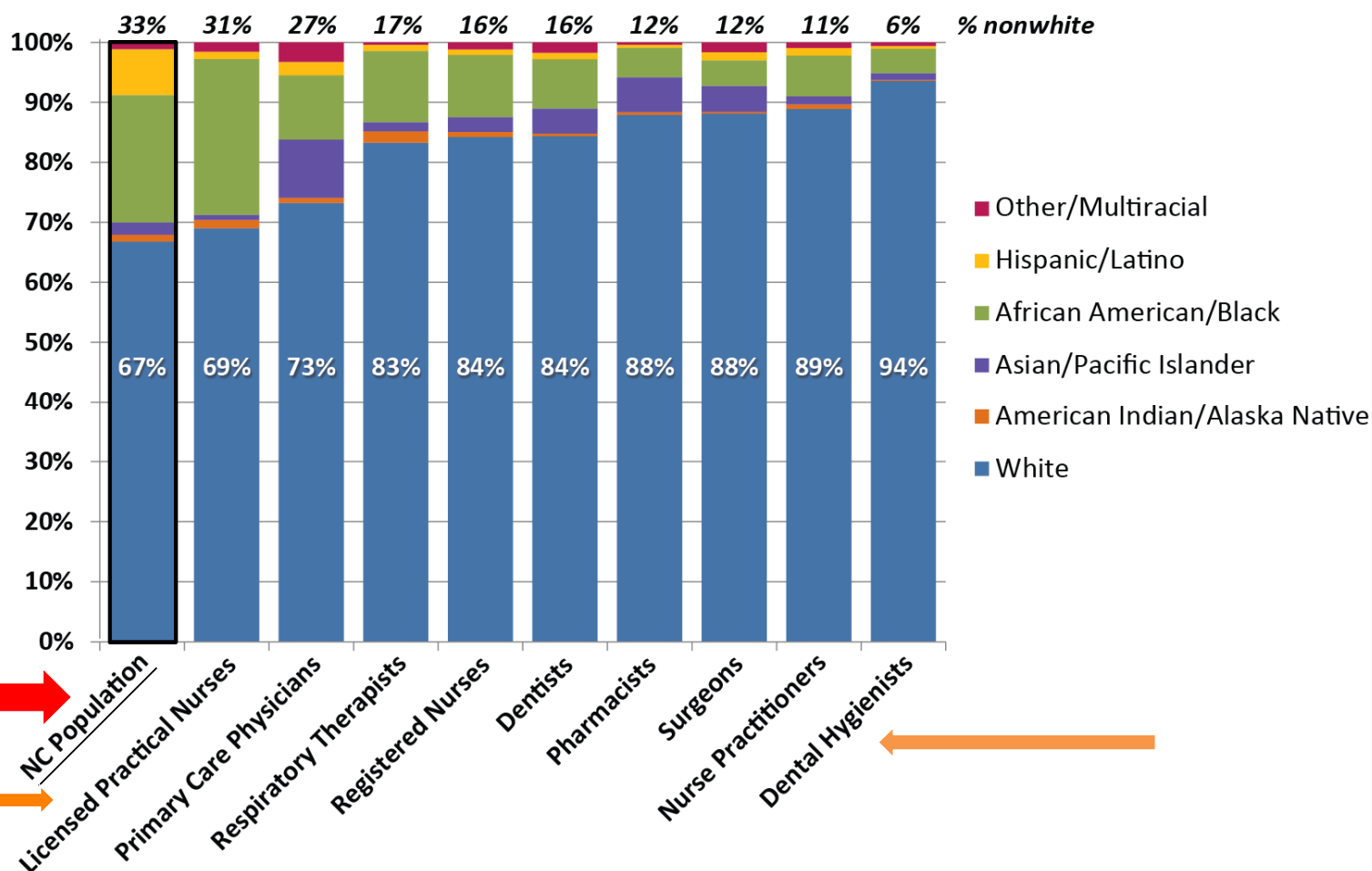
Now to workforce diversity...



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Race/Ethnicity of Practitioners Falls Short of Matching Population Diversity

Diversity of North Carolina's Population vs. Diversity of Selected Health Professions, 2009

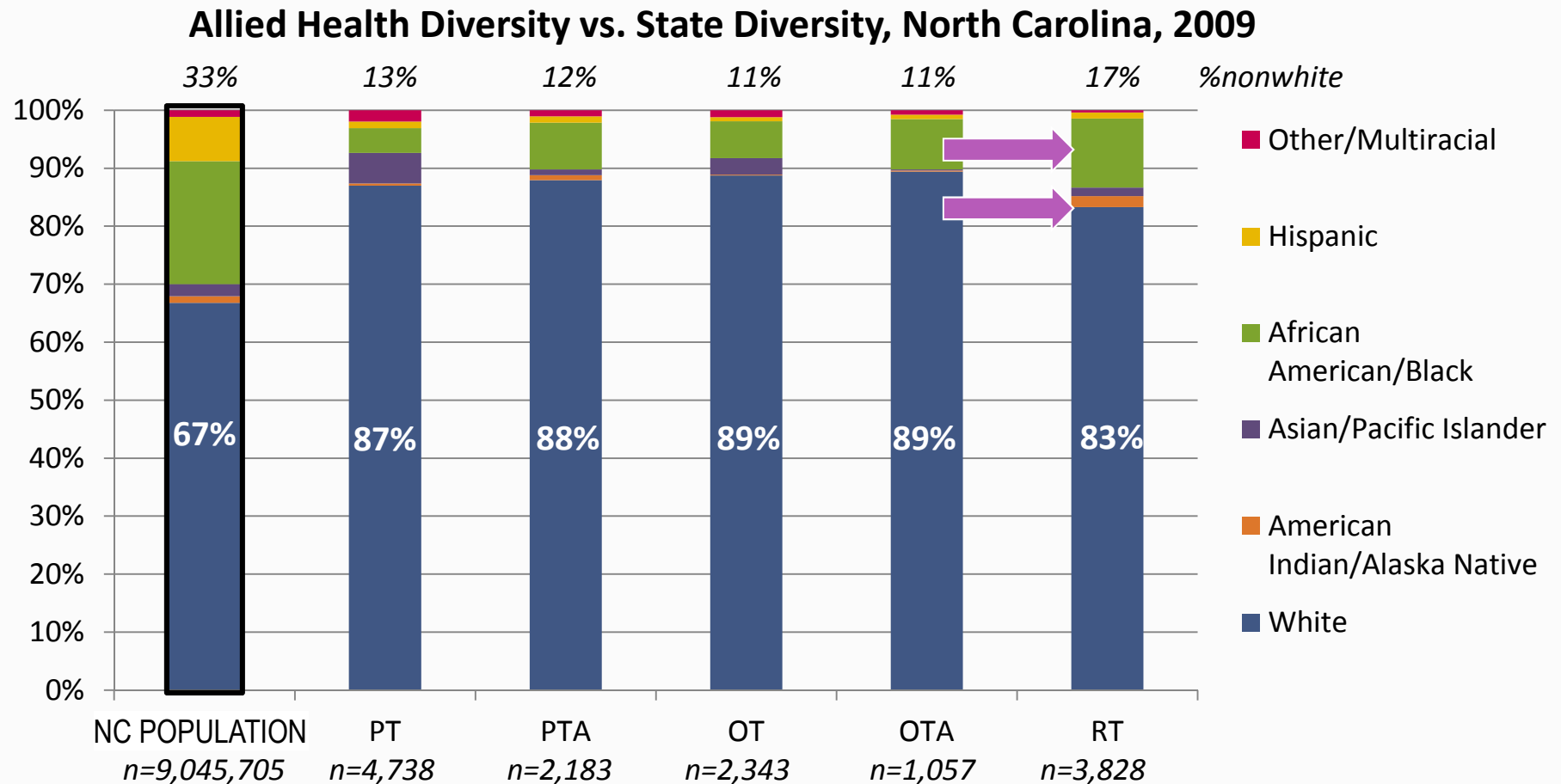


NC Health Professions Diversity Scorecard, 2009

Legend White: Above state average Dark Blue: Below state average Light Blue: Equivalent to state average	State	Licensed Practical Nurses	Primary Care Physicians	Physicians (all)	Respiratory Therapists	Dentists	Registered Nurses	Physician Assistants	Physical Therapists	Physical Therapist Assistants	Pharmacists	Surgeons	Nurse Practitioners	Occupational Therapists	Occupational Therapy Assistants	Certified Nurse Midwives	CRNAs	Dental Hygienists
White	67%																	
American Indian/ Alaska Native	1%																	
Asian/ Pacific Islander	2%																	
African American/ Black	21%																	
Hispanic/Latino	7%																	
Multiracial/Other	2%																	

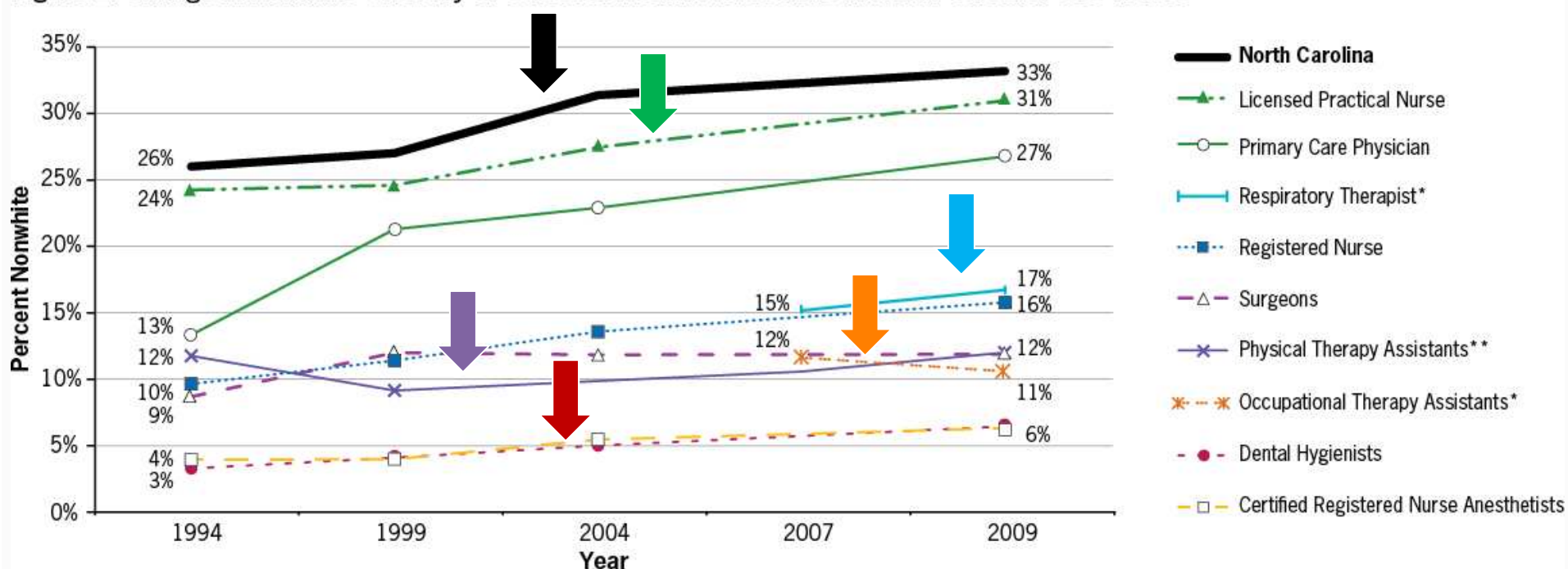


Therapist Professions in Allied Health Surprisingly Not Diverse



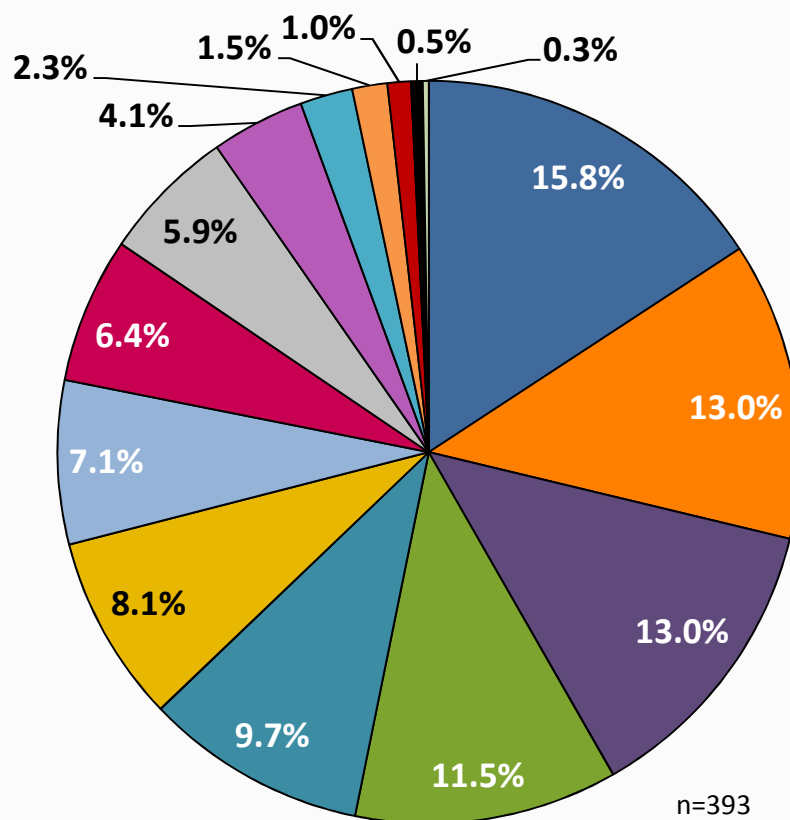
Health Professions are Diversifying Over Time at Different Rates

Figure 2. Change in Nonwhite Diversity of Selected Health Professions in North Carolina: 1994-2009



Many Community Colleges Contribute to Non-White RTs in the State

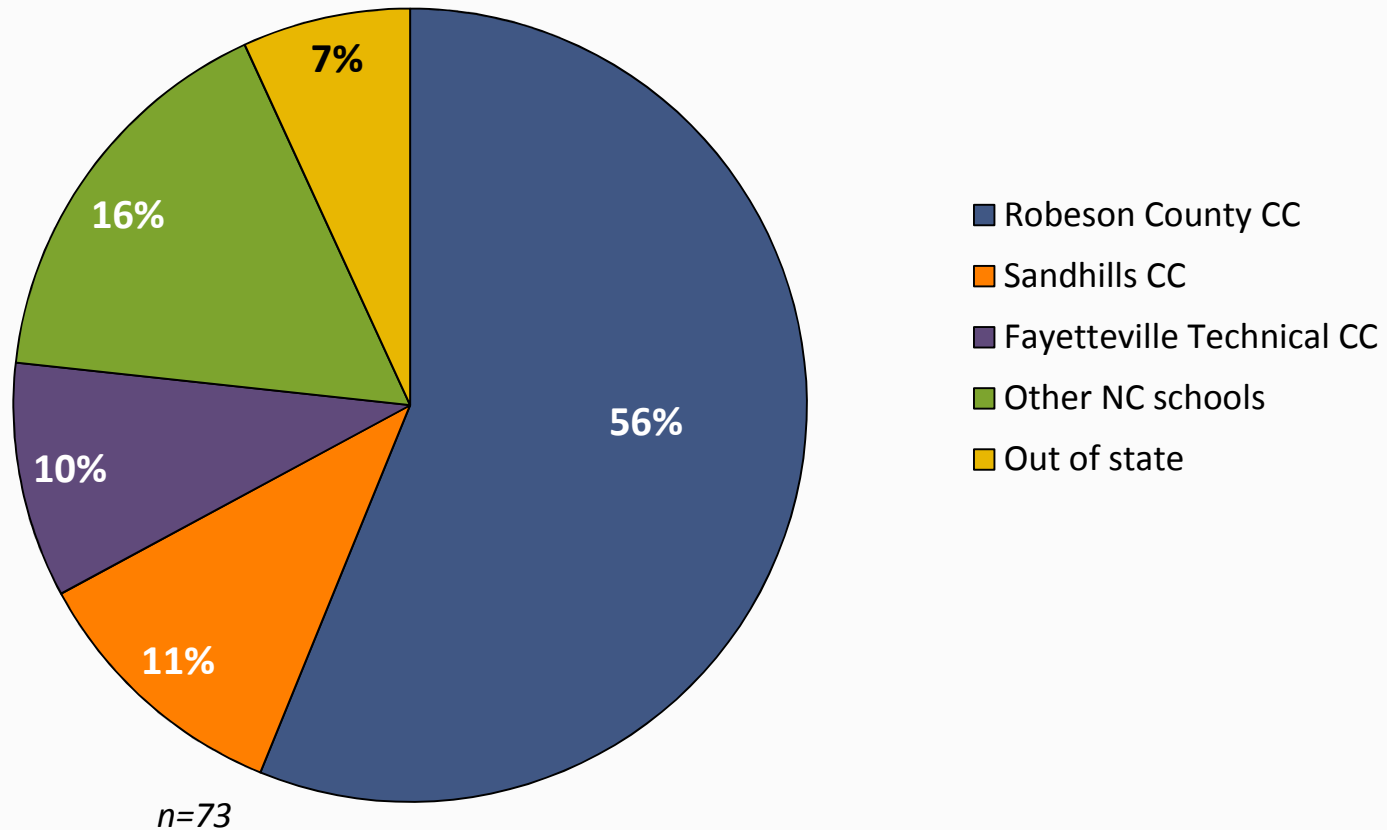
**Percent Non-White Respiratory Therapists
from NC Schools, 2009**



- Durham Technical CC
- Central Piedmont CC
- Fayetteville Technical CC
- Robeson CC
- Sandhills CC
- Pitt CC
- Edgecombe CC
- Stanley Technical CC
- Rockingham CC
- Forsyth Technical CC
- Catawba Valley CC
- Carteret CC
- Southwestern CC
- Lenoir CC
- Unknown

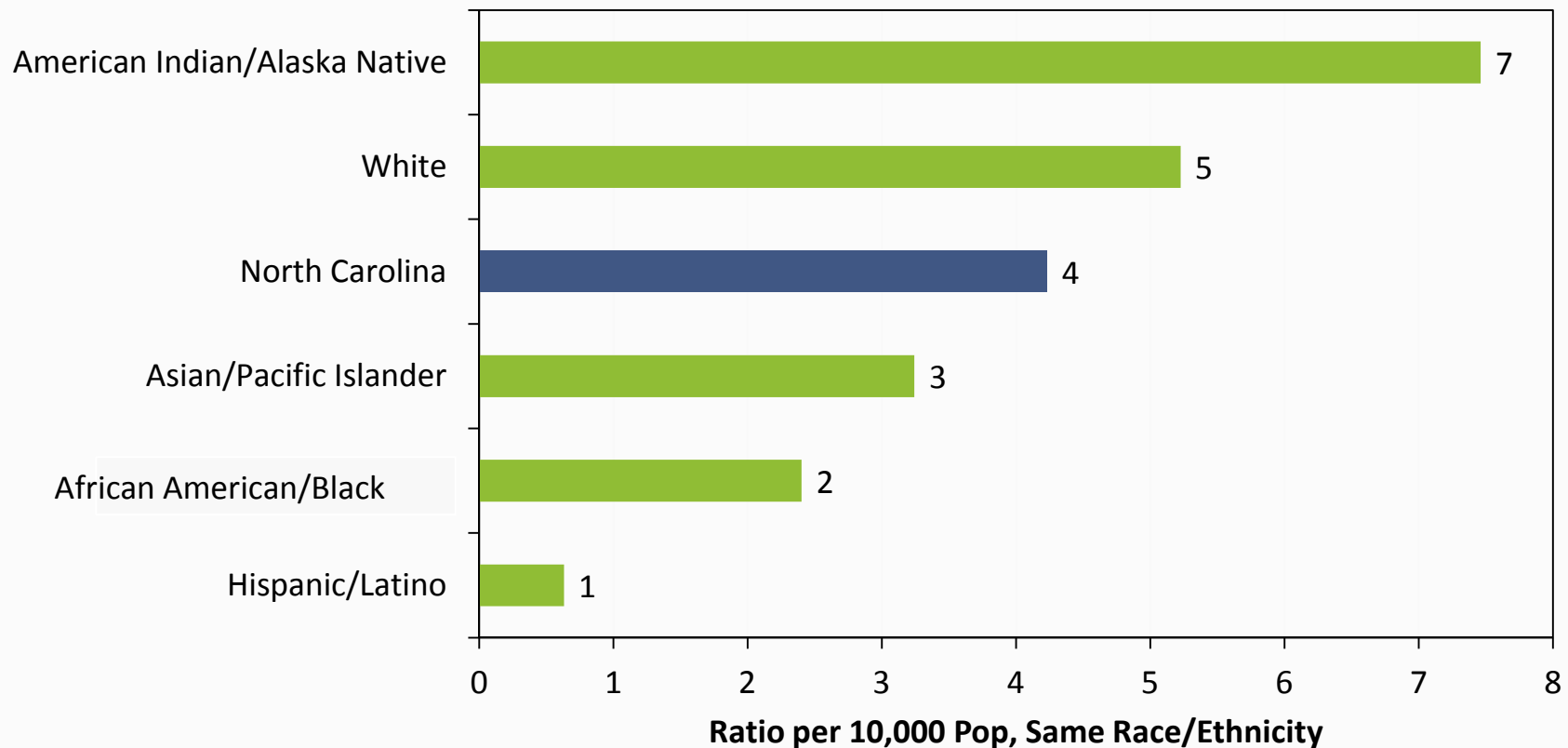
Robeson County Community College Provides More Than Half of All American Indian RTs

NC American Indian Respiratory Therapists (RT) by school, 2009



Respiratory Therapists Have a Higher Ratio of American Indians than Whites

**Respiratory Therapists per 10,000 Pop of Same Race/Ethnicity,
North Carolina, 2009**



Where Do Our Non-White Health Care Practitioners Practice?

- Geographically concentrated with nearly half located in Mecklenburg, Wake, Durham, Guilford, Forsyth, Pitt and Cumberland counties
- About four out of five (79%) are located in metropolitan counties

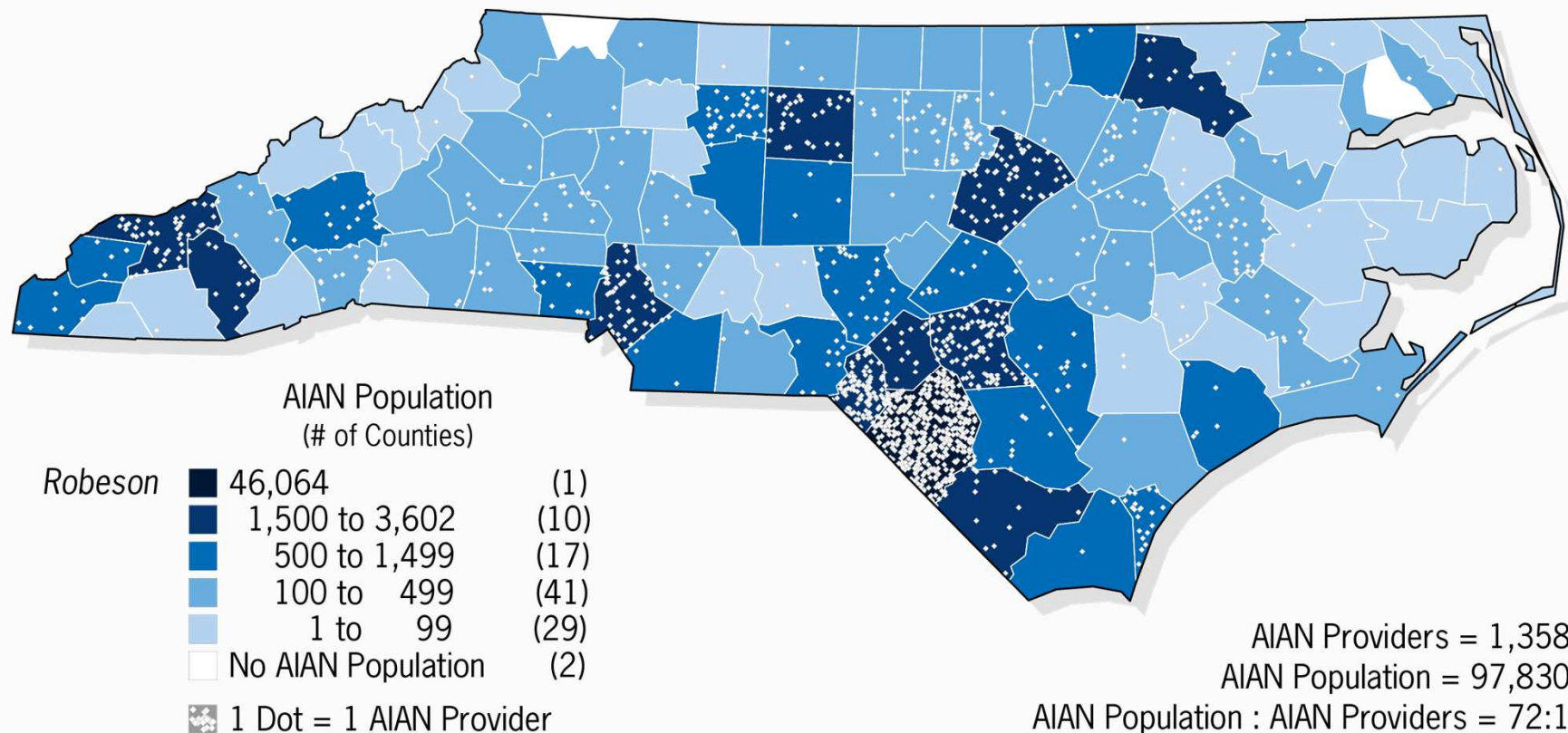


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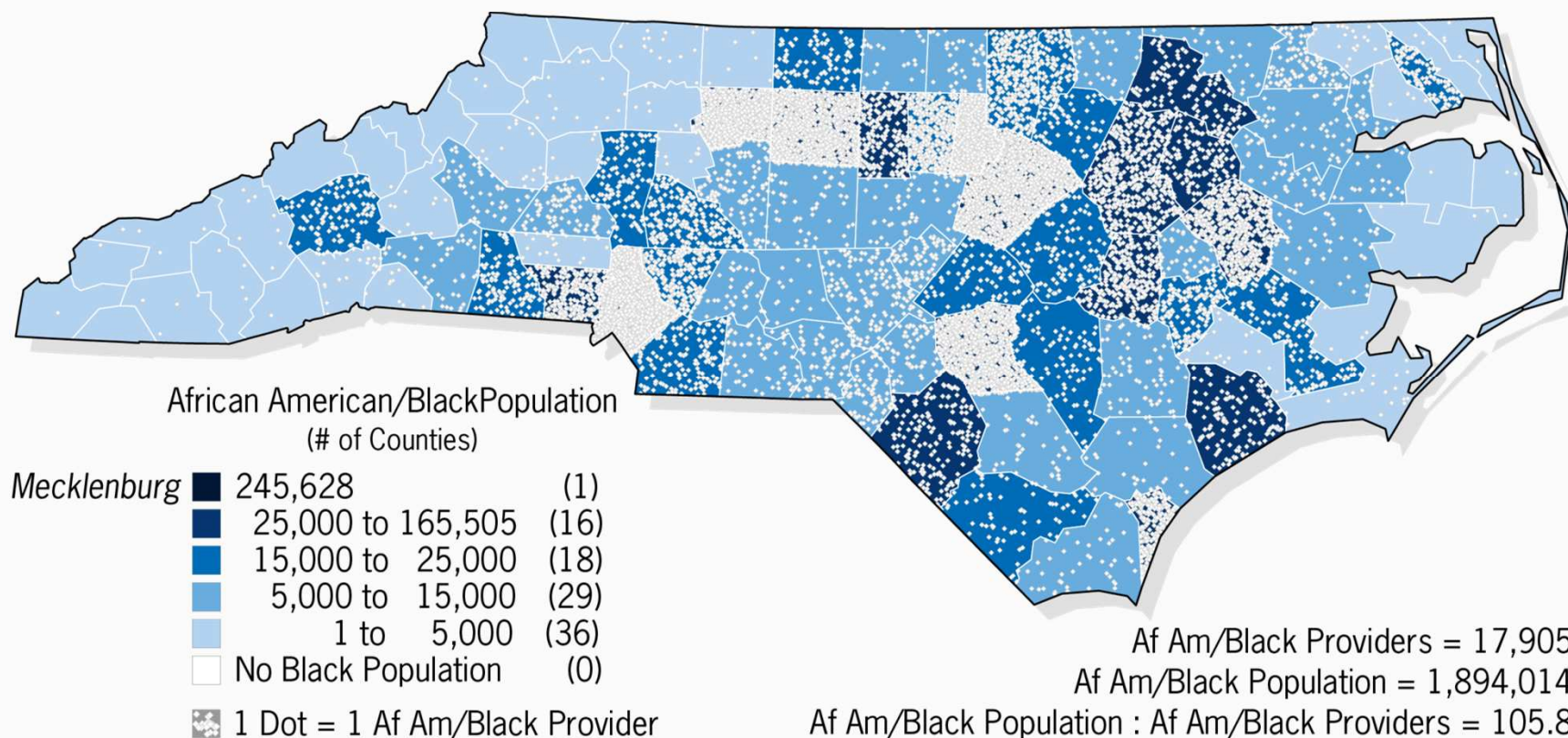
About 1 in 3 American Indian/Alaskan Native Health Care Practitioners are in Robeson County

American Indian/Alaskan Native (AIAN) Population and Healthcare Providers, North Carolina, 2009



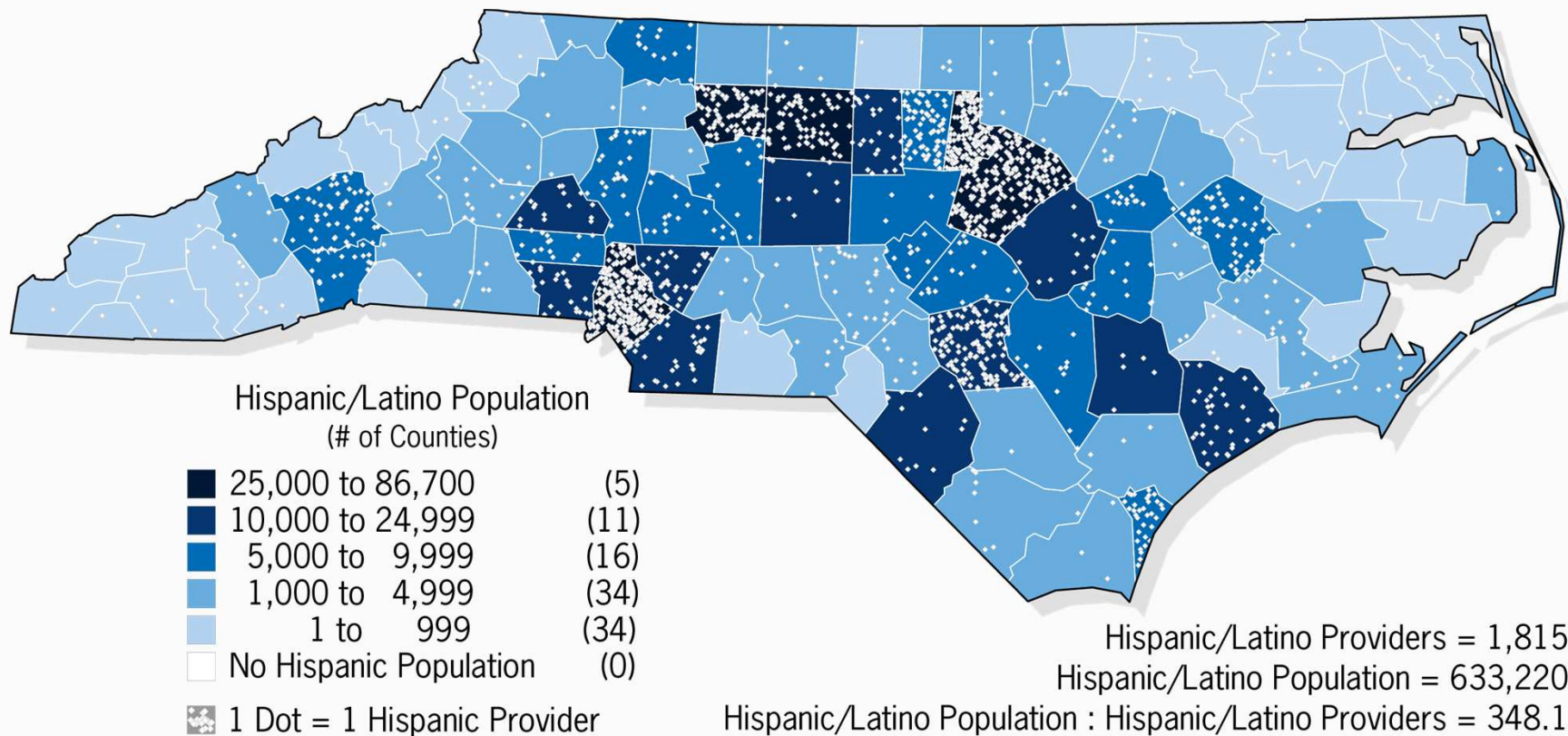
About Half of African American Practitioners are in Urban Areas but are Largest Percent of Non-White Workforce in Northeastern and Southeastern Counties

African American/Black Population and Healthcare Providers, North Carolina, 2009



About Half of Hispanic/Latino Practitioners are in Urban Areas but These Areas Still Fall Short of Achieving Parity with Population

Hispanic/Latino Population and Healthcare Providers, North Carolina, 2009



Diversity Reflections

- From the NC HPDS data, we can summarize four main points:
 - The racial/ethnic diversity of North Carolina's health care professionals falls short of matching state population diversity.
 - North Carolina's health professions are diversifying slowly over time and at different rates
 - There are differences in racial/ethnic group representation among North Carolina's health professions
 - North Carolina's nonwhite racial/ethnic health care practitioners cluster regionally.



Diversity Reflections

- Lack of diversity among allied health professions, particularly among OTAs and PTAs
- Why have health professions diversified at different rates?
 - LPNs are most diverse
 - Why haven't allied health professions diversified as quickly?
 - Slower to diversify—dental hygienists
- Economic development issue—entry-level jobs on the career ladder



Questions?

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