The health care industry has long experienced cyclical, acute shortages of qualified workers for many of its skilled occupations. Staffing volatility is increased by the near-constant changes to which the health care workforce must adapt, from technological innovation and demographic shifts to new legislation and regulation. And, as health care providers adjust to Affordable Care Act reforms, employment has become increasingly erratic as some providers (such as acute care hospitals) introduce major layoffs, while other providers (such as community-based and home care agencies) increase hiring considerably to cope with new demands for their services.

Health care employment has continued to grow despite this volatility and remains a major driver of U.S. economic growth. However, many incumbent low-wage health care workers and unemployed workers lack the necessary skills and credentials to move into many of new, well-paying jobs in the field.

Adult learners can face high barriers to enrolling in traditional degree programs—child care and family obligations, lack of basic college-readiness skills, tuition costs, and scheduling conflicts with current employment.

Multi-employer labor–management training partnerships in health care have demonstrated remarkable success as a sustainable long-term strategy to bridge the gap between health care employers’ evolving needs and incumbent worker advancement. Along the way, these partnerships have helped shape health care education delivery with ground-breaking learning strategies to support working adults in their pursuit of degrees and certifications for highly skilled jobs such as nursing.

What is perhaps less appreciated is the power of these collectively bargained and jointly governed partnerships as a workforce and economic development strategy more broadly—providing opportunities for unemployed and underemployed workers to acquire well-paid, skilled jobs in a growing industry with an aging workforce.

The joint training approach ... links health care facilities in a state or region through their shared relationship with a health care union.
than being led by an external workforce intermediary or a particular employer or educational provider, the training initiatives are driven by a union and its employer partners.

Funding for the training relies on sustained employer-supplied training funds, which act as a basis for leveraging additional public and foundation support. The contributions of employers to these training funds are negotiated into individual collective bargaining agreements as a benefit to employees over multiple years and are held in a jointly administered trust fund. The pooled funds create an economy of scale that allows better and more extensive training initiatives than any individual employer could achieve on its own.

The success of the model for career advancement and filling job vacancies depends on developing deep and long-lasting partnerships among employers, the union, and educational providers. These players become collaborators in a learner-centered approach that provides a wide array of supports for academic success and rapid job placement.

The stability of base funding and programming provided by the collective bargaining relationship between unions and employers enables labor-management training funds to expand beyond providing individuals career advancement opportunities, affecting broader issues such as employment and poverty in their communities. This broader community impact has thus far been realized in only a few special cases across different sectors. However, its potential for the health care sector has been demonstrated by the District 1199C Training & Upgrading Fund, a forty-year-old multi-employer labor-management training partnership based in Philadelphia.

The District 1199C Training & Upgrading Fund [is] a forty-year-old labor–management multi-employer training partnership based in Philadelphia.

Labor/Management–Driven Workforce

The first and largest multi-employer training partnership in health care was organized by 1199SEIU (Service Employees International Union) and the League of Voluntary Hospitals and Homes in New York City in 1969. In that partnership, which was an outgrowth of the civil rights movement, the union bargained for a percentage of hourly wages to be devoted to the training and advancement of its primarily entry-level, low-wage membership.

Over the past forty-five years, the 1199SEIU program has grown into a collection of funds addressing a variety of needs in the health care industry in the New York City area and across New York State. 1199SEIU Training and Employment Funds in Massachusetts, Maryland, New Jersey, and Washington, D.C., are now also included in the 1199SEIU United Healthcare Workers East umbrella of funds. Together, they cover more than 250,000 workers from more than 600 participating employers, making them the largest training fund in the country.

New York City’s regional, employer-based approach to health care training has been replicated by other local health care unions and employers across the country. Each fund grows out of local and regional needs, and the funds vary in their structure, types of training offered, and occupations involved. The assistance offered ranges from tuition support for accredited degree and certification programs to specialized employer-specific training to pre-college and college-readiness programs in partnership with local education providers to career and educational counseling and support.

District 1199C Training & Upgrading Fund

Unique among these efforts is Philadelphia’s District 1199C Training &
Upgrading Fund. From its inception, the training fund has sought to address not only the needs of its participating employers and union members but also the needs of unemployed and underemployed potential workers in surrounding communities and the Greater Philadelphia region’s health care sector as a whole.

The founding trust agreement between the union and the partnering employers broke new ground with a commitment to match health care employers’ need for a skilled workforce with both incumbent and unemployed workers’ needs for family-sustaining employment and opportunities for career advancement. To accomplish its dual mission, the training fund established two complementary lines of business: (1) a stand-alone educational institution for union members and community residents and (2) an employer partnership that serves as a workforce intermediary, working directly with employers to meet their training needs.

Established as a multi-employer labor–management partnership in 1974 through collective bargaining agreements among Philadelphia-based District 1199C of the National Union of Hospital and Health Care Employees, AFSCME, AFL-CIO, and eleven area hospitals, the training fund today includes fifty-two acute care hospitals, long-term care and behavioral health facilities, and home- and community-based agencies in southeastern Pennsylvania and southern New Jersey. The training fund is supported by a contribution of 1.5 percent of gross payroll from employers into a pooled education trust fund.

In addition to employer contributions, the training fund includes public and philanthropic grants, tuition, and fee-for-service dollars. While ensuring that employer funds are not commingled with other funding streams and are only used for the covered employees, the training fund braids and leverages employer and community dollars to ensure maximum impact on the career advancement of union members and low-income Philadelphians.

This approach—unique among labor–management training funds in the health care sector—is made possible through the long-term organizational sustainability created by employer contributions. The longevity of the training fund’s community programs, which have been funded through every major federal workforce development regime since the Carter administration’s Comprehensive Employment and Training Act (CETA, passed in 1976), has in turn enabled establishment and maintenance of an organizational infrastructure that is consistently supported by employer funds.

Over its history, the training fund has helped approximately 100,000 workers advance in their careers. During its 2012–2013 fiscal year, the training fund provided or funded training for 5,273 students. Approximately one half of these student were union members; the rest were non-union community residents, including laid-off workers, the unemployed, low-wage underemployed workers, immigrants, and youth. In this same period, the training fund also provided 12,412 individuals with career and financial counseling and assistance services.

**Integrated Training Model**

The training fund has created a high-quality, one-stop educational institution that meets students where they are educationally. The fund’s programs can serve individuals who qualify for high-skilled employment as effectively as it can those who may be months away from achieving real success in the local labor market.

Low-skilled students who need academic support are placed in workforce-contextualized literacy programs. They can progress into health care preparatory courses and then into high-level occupational training or college-level course work that will qualify them for family-sustaining employment.

More than an educational philosophy, this approach to constructing educational and occupational pathways is supported by significant programmatic and physical infrastructure. The training fund was a national pioneer in developing this model of integrated workforce occupational training and education, and its contributions have been recognized by the U.S. Departments of Labor and Education as trail-blazing work (Table 1).

The fund’s student-centered approach to education and training incorporates individualized career coaching and case management to help individuals obtain the educational credentials and professional certifications they need to achieve their academic and career goals.
Career coaches support students from the time of application through training, job search and placement, and retention. The fund also helps students attain financial stability with workshops and individual financial counseling that address credit repair, debt management, household budgeting, accessing public benefits, and the earned income tax credit.

Training fund representatives meet regularly with employer partners and conduct surveys to assess the needs of regional health care employers. This industry feedback is used to shape training programs to produce graduates equipped with the skills they need to obtain employment or advance along their current career pathway.

The organizational stability and close working relationships with employers that are essential to the success of multi-employer labor-management training partnerships have also enabled the training fund to move beyond developing career ladders within union members’ current employment relationships to creating opportunities in the broader community. As a joint effort by labor and management to meet the health care sector’s long-term workforce needs, the fund has leveraged its deep understanding of the sector to create training and employment pipelines that align academic course work with entry-, mid-, and professional-level credentialled occupational training.

In the behavioral health field, for instance, the fund trains low-income (often unemployed or previously incarcerated) community residents in recovery from substance abuse or addiction to become entry-level peer support specialists at outpatient behavioral health facilities. It supports union members at inpatient facilities as they acquire the industry credentials necessary to move into better-paid or supervisory positions through articulation agreements negotiated with local educational institutions. And, through tuition-reimbursement programs, it funds the continuing education of other union members as they complete associate’s, bachelor’s and master’s degrees.

### Table 1. District 1199C Training & Upgrading Fund programs and services.

| Core educational programs provided by the training fund | • Credentialed occupational/technical programs in six career pathways: nursing, health information, allied health, behavioral health, childcare, and community health |
| • Full- and part-time programs providing college credit and leading to certificates/degrees at area colleges and universities |
| • Health care–contextualized literacy, numeracy, digital literacy, workforce readiness, and academic skills instruction |
| • College preparatory and pre-nursing/pre-allied health classes |
| • GED® classes and testing |
| • English language learning classes and citizenship preparation |
| • Career exploration and occupational training opportunities for in-school and out-of-school youth |
| • Employer-based customized training programs, such as OSHA-approved safety and health curricula, customer service skills, and cultural competence |
| Additional training fund services available to union members and community residents | • Job placement services referring pre-screened candidates to more than 100 area health care facilities |
| • Financial planning workshops and financial counseling |
| • Free tax preparation and public benefits enrollment |
| • Comprehensive academic assessment center placing students from throughout Philadelphia into literacy classes citywide |
| • Job readiness workshops on résumé preparation and interviewing, job search, and networking skills |
| • Career exploration workshops, job fairs, and an annual health care career fair for youth |

Expanding the Model

The District 1199C Training & Upgrading Fund has recently become the centerpiece for an expanded regional approach to health care workforce and economic development. In 2005, it established the Greater Philadelphia Healthcare Partnership (GPHP), which brings together health industry stakeholders for the purpose of identifying current and projected employment trends, aggregating training needs, and developing workforce and training strategies.

Strategies focus both on incumbent workforce skill upgrading—to keep up with new technologies and skill sets required in the changing health care workplace—as well as the need for new talent in emerging-growth areas. GPHP currently includes more than a hundred partners: almost ninety employers, as well as academic institutions, labor unions and nonprofit organizations, and four local Workforce Investment Boards. Employer partners include both union and non-union employers, with a recent growth of non-union partners participating in an on-the-job training (OJT) program funded by the U.S. Department of Labor that targets long-term unemployed workers.

As the mix of health care organizations changes, GPHP has expanded its employer membership to include health care organizations that are showing growth. Traditionally, the partnership’s largest constituencies have been acute care hospitals and long-term care facilities. More recently, GPHP has engaged large physician practices and community health providers, two examples of growing health care organizations in the Philadelphia area.

Yvonne Jones, CEO of Urban Solutions, Inc., a community health care organization, is one of these new partners. Jones and Urban Solutions participated in GPHP’s OJT initiative. “OJT allowed me to take risks with employees

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I knew others wouldn’t hire,” says Jones. “That’s resulted in loyal employees, with hardly any turnover.”

The credibility resulting from a strong track record of delivering quality programs and attaining excellent outcomes enables the training fund and GPHP to implement ambitious, innovative workforce projects that assist both job seekers and union members.

“Some very capable employees just don’t know what opportunities are available to them,” says Cheryl Whitfield, vice president for human resources at Inglis, a union employer. “The training fund has the credibility with both union members and management to act as a catalyst, supporting our employees in realizing their career goals and finding direction.”

**Leveraging the Labor–Management Relationship**

Multi-employer labor–management joint training funds have tangible benefits for the unions and employers who lead them: more-effective training and placement, improved hiring and lower turnover for employers, and career and salary advancement opportunities for low-wage workers who would have difficulty accessing or succeeding in traditional degree programs.

As the District 1199C Training & Upgrading Fund’s work demonstrates, these benefits can be extended to the broader community by leveraging employer relationships and industry knowledge with other funding mechanisms.

A key factor in the success of this model for health care training is the leadership of a union that binds multiple employers in one region together, in both the initiation of the partnership and its sustained growth. The union’s interest in maintaining and expanding employer participation in a city or region gives employers some assurance that they will not be subject to the “free rider” problem should they commit relatively large resources to a multi-employer endeavor. The union, with members in every participating employer workplace, has a strong interest in ensuring widespread recruitment and outreach to its members, which helps to ensure maximum use of available training opportunities.

Labor and management’s overlapping interests can drive the creation of a regional, sector-based strategy that aggregates industry-wide training needs but can also respond quickly and flexibly to individual employers’ needs with customized training or support the growth of emerging occupations.

“We need to make sure that employers have staff ready to work,” says District 1199C President Henry Nicholas, describing the fund’s role. “Management and the union need a joint vision of how we transition together, as health care changes.”

The stability of union–employer relationships is critical in enabling the training model to expand beyond unionized employers and union members to a workforce development effort that benefits the health of the community as a whole. As District 1199C’s accomplishments demonstrate, this expanded impact can be achieved without undercutting either union or employer interests—in fact, since its inception, District 1199C’s training fund has been a source of both new union members and new, highly qualified employees that is advancing both the shared and unique interests of labor and management alike.

Unions and employers in other industries—including hospitality, construction, and manufacturing—have also created joint training partnerships to expand access to career advancement for low-wage and unemployed workers while meeting employers’ needs for well-trained employees. Like the District 1199C Training & Upgrading Fund, these other regional multi-employer labor–management partnerships have proven to be sustainable models for addressing issues of unemployment and underemployment.

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**Peter Chomko**

Peter Chomko manages research and development projects for the District 1199C Training & Upgrading Fund. He is a graduate of the Master of City Planning program at the University of Pennsylvania School of Design, with a concentration in community and economic development.

**Cheryl Feldman**

Cheryl Feldman has been employed for thirty-six years with the District 1199C Training & Upgrading Fund. The training fund provides educational opportunities for the members of District 1199C, the National Union of Hospital and Healthcare Employees, AFSCME, and community residents, with an emphasis on workforce and career ladder programs supporting the economic advancement of low-wage incumbent workers, the long-term unemployed, immigrants, and out-of-school youth.

**Sally Klingel**

Sally Klingel is the director of labor–management programs at the Scheinman Institute on Conflict Resolution in Cornell University’s ILR School, where she specializes in training, research, and design assistance on conflict and negotiation systems and labor–management partnerships.