
Best Practice Fact Sheet – Workforce Development

WELCOME BACK CENTER – National Initiative

Program

Description: Founded in 2001, this health care workers assistance program offers counseling and educational programs to internationally trained health professionals, including assistance in obtaining appropriate licenses, credentials, orientation and job placement to work in the U.S. health care system. This is a national initiative with programs in Washington, California, Colorado, Texas, Maryland, New York, Rhode Island, and Massachusetts. The founding center is in San Francisco.

Target Population: Health professionals from all over the world who have not been able to re-enter their professions because of difficulties in navigating the credentialing process; some of the clients may be TANF recipients, but this information is not asked or collected.

Goals:

- Support immigrants seeking to reenter the health care workforce by providing services that assist in the attainment and validation of credentials needed or licensure.
- Assist each participant in developing a career path plan that builds on each participant's skills, experience, and education.
- Build a bridge between the pool of internationally trained health workers and the need for linguistically and culturally competent health services in underserved communities.

Cost: Each center secures its own funding which comes from many sources, including federal and state governments and private foundations. Much of the funding for the California center comes from the California Wellness Foundation and Kaiser Permanente. In Washington, funding comes from the State Board of Community and Technical Colleges and BURST for Prosperity (a non-profit based in Renton, WA which is an initiative of the Children's Home Society of Washington). Funding levels determine how many clients can be served. In Washington, the annual budget is approximately \$250,000 with 2 ½ staff (who are located at the Highline Community College) providing intensive case management to clients. A portion of the budget goes to purchasing supplies (books, reference materials) that are provided on loan to clients.

Evidence: Descriptive and outcome data; Annie E. Casey study report on the Maryland Center.

The Welcome Back Center model has been selected by the Cities of Migration as one of 12 best practices in the world for immigrant integration, and will be presented as a case study at The Hague October 3-4, 2010; recognized by the JFK School of Government at Harvard as a 2008 Finalist for Innovations in American Government Awards.

Caseload Data: Educational case managers work with health professionals to assess their needs, refer them to ESL programs, health programs, or whatever classes that particular client needs to continue on their career pathway plan. Caseloads differ according to size of centers. In all eight states, 10,430 health professionals have participated in the Welcome Back Center services.

Assessment: A face-to-face initial assessment with each client is conducted by an Educational Case Manager to determine education needs. The assessment gathers the following information: a detailed post-high-school education history, detailed professional work history, history of any studies, certificates obtained in the U.S., work history in the U.S., determination of English proficiency and highest ESL level accomplished (when applicable), brief psychosocial history,

reason for emigration, and an assessment of motivation (strengths and weaknesses). A career pathway plan is then developed with the participant. The assessment is conducted using a standardized web-based data collection system that all Welcome Back Centers use. To determine English proficiency, each center uses its own tools. In Washington, English level is checked using the CASAS (Comprehensive Adult Student Assessment Systems).

Offered in

Washington:

Yes, the Puget Sound Welcome Back Center is housed at the Highline Community College in Des Moines, Washington. It has been open almost two years and has served 384 participants. The Highline Community College provides the facility for the Welcome Back Center.

Services Overview:

- Welcome Back Center assists participants in developing a career pathway plan that builds on their education, experience, and skills.
- In addition to receiving support in obtaining appropriate professional credentials and licenses for their profession, participants are also assisted in exploring relevant educational programs, job and volunteer opportunities, and alternative career options.
- All clients receive intensive case management, individualized orientation, counseling, and support.
- A nationwide curriculum is based on englishhealthtrain.org, which focuses on the development of the communication and job search skills necessary for employment in the health care field in the United States. Topics include health professions in the United States, career pathways, communication with patients and co-workers, health care systems, current critical health issues, and intercultural communication skills. The curriculum includes pre-and post-assessments.
- Free classes and workshops are offered, such as Communication in Health Care, Interviewing for Healthcare Jobs, Nurses' Support Groups, Pronunciation Labs, through partnerships with local community colleges.
- Career-guidance courses and, where appropriate, technical courses to address skills gaps. Contextualized ESL courses to help participants to improve their English proficiency, as needed.
- Assistance with planning a career and educational path that builds on participants' skills, experience and previous education
- Information about job opportunities and resume assistance
- Orientation to licensing procedures and assistance in obtaining the appropriate professional credentials and licenses.

Eligibility:

Internationally-trained health workers; in Washington State, client must be a CASAS level 3 ESL to be able to take advantage of classes and curriculum.

Findings:

In Washington State, there have been 2,215 encounters (meetings with clients) with 384 participants in two years of operation (as of August 2010). Of this group:

- 38 validated their licenses
- 20 passed licensing exams
- 11 obtained licenses in their original professions
- 12 entered new careers in health
- 27 obtained new employment in the health sector
- 2 MDs accepted into Residency Programs

In all centers together, as of June 2010, 10,430 people from 150 countries had participated in the Welcome Back Center services: Of those:

- 2,405 credentials were validated
- 1,411 passed their licensing exams
- 812 obtained licenses in their original professions
- 456 obtained advanced in their health career
- 1,526 found employment in the health sector for the first time
- 87 MDs were accepted into Residency Programs

- 41.6% were Nurses, 36.4% MDs, 9.4% DDS, and 12.6% other (other includes psychologists, speech therapists, pharmacists, midwives, physical therapists, social workers, and lab technicians)
- 46% of participants were from Latin America and 24% from Asia.
- 72% were female; 28% male
- English level (*scale of 1 – 10, 1 = beginning and 10 = advanced*): 41% 7-9; 23% 1-3; 21% 4-6; and 15% 10
- 20% had been in the country less than 12 months; 28% 1 to 3 years; 26% 10+ years; 15% 4 to 6 years; and 9% 7-9 years

Implications for Policymakers and Program Developers to Consider:

- A 2004 report from the Sullivan Commission—convened by Dr. Louis W. Sullivan, former U.S. Secretary of Health and Human Services, to address the nation's health gap—concluded, "the lack of minority health professionals in America is compounding the nation's persistent racial and ethnic health disparities." Critical shortages of minority representation across healthcare professions including nursing, pharmacology, dental hygiene, respiratory therapy, psychology and social work, is also cited as the primary cause of the poor healthcare for minorities in America.
- Among the most challenging aspects of the Welcome Back Center's work with immigrant health professionals is dealing with the emotional consequences of migration, including losses of country, family, professional identity, networks, and social standing along with the underlying reasons for migrating.
- These aspects are compounded by the complexity of licensure procedures, which are non-negotiable and confusing for anyone to follow. Because the procedures are so complicated, and newcomers to America are confused about the requirements, it is critical that agencies work together to help create a process that helps the immigrant health professionals meet the licensing requirements while at the same time adhering to their career pathway plans.
- The Welcome Back Center has created a model that works with licensing boards and requirements and helps the professionals pursue their goals in the most accelerated way possible, including a transferable curricula which fills educational gaps required in advance of licensure and publication of materials that allows the Welcome Back Center to serve as a technical assistance center for other jurisdictions seeking to replicate their model.
- Each professional is unique, and the process and time period to attain licensure is varied depending on individual need. Some are ready within 6 months; others take years. Developing a realistic professional strategy for participants takes time, many hours of case management (and encounters), a comprehensive assessment, and intensive support.
- The current "English as a Second Language" (ESL) programs work well with much of the LEP population, but health professionals have unique ESL needs related to the health profession.
- One of the challenges currently facing the health sector is the lack of culturally and linguistically diverse health professionals. This is especially true for the "safety net", community based and public health clinics and health services agencies that are often times the sole providers of health services for immigrant communities. Programs such as the Welcome Back Centers help to bridge this gap.
- Important aspects of care, such as treatment adherence and patient satisfaction improve significantly when the cultural and linguistic gap between the health services providers and their patients and clients is narrowed.

Resources: www.welcomebackinitiative.org ; Kristina Mason, Director, Puget Sound Welcome Back Center; welcomeback.highline.edu/; JFK School of Government at Harvard; <http://www.innovations.harvard.edu/awards.html?id=117071>; José Ramón Fernández-Peña, MD, MPA, Associate Professor, Dept. of Health Education, Welcome Back Initiative Director; Co-Director, Community Health Works of San Francisco, Ph. 415/405-0488; jrfp@sfsu.edu