SUMMARY

Over the next decade, California’s health workforce is expected to require almost 450,000 new workers—mostly due to population growth and aging, but also to expanded coverage under the Affordable Care Act. While physicians and other highly trained clinicians are critical to health care delivery, the majority of health care jobs are technical and support positions—referred to in this report as the allied health workforce—that tend to require associate degrees or vocational certificates. Overall, about 40 percent of all health care jobs that need to be filled over the next decade will require some college but less than a bachelor’s degree.

The need for an adequately trained allied health workforce is an important component of California’s overall “skills gap”: in addition to a shortfall of workers with college degrees, by 2025 the state is projected to have a shortage of more than 1.5 million workers with some college education but less than a bachelor’s degree. To respond to this looming workforce gap, California’s two-year higher education institutions need to provide training opportunities for jobs that are well matched with future workforce demand. Current trends in degree completion in allied health programs indicate that there is room for improvement.

Recent growth in the number of associate degrees and postsecondary certificates in health programs has largely been driven by for-profit institutions. These institutions serve a high number of underrepresented students, but the higher cost of for-profit programs, their focus on short-term certificates that may not provide labor market returns, and the
mismatch between the training these institutions provide and health workforce demand are causes for concern. Given the importance of associate degrees and postsecondary certificates in growing health care occupations—and the need for a workforce that can serve California’s increasingly diverse population—the state needs to ensure that its two-year institutions are meeting demands and providing good employment opportunities.

To plan and prepare for future needs, state and regional decisionmakers need accurate information and timely analysis. The state has some capacity to monitor health workforce needs but would benefit from more information about training across the many occupational areas in the health care sector. In the absence of a state entity that coordinates policy planning and research across the state’s higher education system, individual public systems could share and combine their information. Linkages to employment information via the state Employment Development Department could be developed, and legislative action could improve the accessibility and consistency of health workforce training, employment, and wage information.

The state could increase and diversify its health workforce through California’s diverse and well-situated public two-year institutions. But to meet future workforce demands, community colleges will need to increase access to high-demand and high-return programs and improve student outcomes without losing sight of their open-access mandate. Targeted policies—involving the level and allocation of resources at state schools—could significantly increase the number of graduates in health fields within the next decade.

The health workforce is a large and growing part of California’s economy, but many additional workers will be needed over the near term to keep up with demand. With careful analysis, planning, and investment, the state can meet future health care needs and offer career opportunities to a diverse group of Californians.