

The ASHHRA Podcast

featuring Bo & Luke from The Bo & Luke Show

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00:06 - Bo

ASHHRA Nation. Welcome to this episode of The ASHHRA Podcast featuring myself, your co-host, Bo Brabo, and in studio, Luke Carignan. We're really excited to bring this episode to you. We have a special guest, his name is Geoffrey Roche. Geoffrey is the Senior Vice President, National Healthcare Practice and Workforce Partnerships with Core Education PBC, which stands for public benefit corporation. Luke, this is going to be a really good episode, because we haven't really dived into a lot of workforce solutions or education in the workforce, and so forth. So I think this is a really good time to do that with Geoffrey on the on the episode or on this podcast. And we're going to talk about things that he's passionate about; any projects that he has going on, that he can share with the audience, give people some inspiration around what's happening in workforce solutions, and how to use a company or individuals like Geoffrey to help you do better in your job. We know that today, it's more critical than ever to consider the education level and the types of things you need to educate your workforce on and are you taking a proactive approach to doing that, to help set yourself up for success and achieve the goals and objectives that you have in your organization? Or are you just letting your people kind of go about their own way in determining what education they need to do better in their jobs? So with that, Geoffrey, we want to welcome you to the show. Why don't you kick us off and tell the listeners a little about yourself?

01:31 - Geoffrey

Well, thank you, Bo. And thank you, Luke for having me. Geoffrey Roche; served as a senior vice president of the National Healthcare Practice, as well as lead our workforce partnerships team at an organization called Core Education PBC. And we're an operating partner to 13 different small to mid-sized colleges and universities across the country. And one of the areas of specialization, really, as we call it, our centers of excellence that we offer is really support for our colleges and universities, as it relates to their engagement with employers in the healthcare space, in the IT space, advanced manufacturing, and aerospace, particularly around workforce development programs. And, you know, obviously, it's a team that I have the privilege of leading and really important work and, and obviously, actually, you know, as we were really first introduced Bo, one of our wonderful partners is happens to be AdventHealth through the work that we do with AdventHealth University, and so really privileged to do that work and wonderful to be here with both of you.

02:36 - Bo

So that's fantastic. So you're saying that universities that you're partnered with, you're the operational partner that's actually going out and performing the work, if you will?

02:47 - Geoffrey

Yeah. So we support them. So I mean, as you know, in many cases, colleges and universities have done continuing education work around leadership development, professional development, but in some cases, they haven't been, you know, haven't gone, as you know, as deep or possibly as wide. And so we really help them scale programs, make sure that not only do they have the programs of today, but also programs of tomorrow, and really help them best meet the needs of their employers within the region. And so we really look at, you know, developing solutions that actually are really preparing for that future of work, but also where we sit today, you know, how do we help around recruitment, retention, upskilling, and career mobility?

03:26 - Bo

I think you made a key point there about the region, you know, the needs of their region. I think that's critical to narrow that down, versus trying to put in a big bucket and say, well, it's the needs of employers across the country. Well, maybe not. It's different from region to region. What got you into this line of work?

03:45 - Geoffrey

Interestingly enough, I'm a hospital administrator by training. And so I started in hospital administration, in June of 2008. Ironically, actually started in a community relations role at a healthcare systems hospital system that's now part of Lehigh Valley Health Network and I happen to be in the Northeast region for just under 10 years. That by far is still, you know, was the best job I ever had, you know, experience the best leadership that I could have ever experienced early in my career. And it was also where I first had the opportunity to lead. And so you know, I was promoted to a director level role, and I oversaw everything, essentially, external of the healthcare system, Public Affairs, government relations, all of our strategic partnerships. It was actually in that role where I worked with academia. And so that's also where I learned really on the other side of this, which is why this work is not just so passionate for me, because I learned how to help academia understand how they could actually be our partner. And so, you know, that's in many ways what got me into this, was following my time in healthcare, how could I help academia understand where they could be a solution provider to healthcare?

05:02 - Luke

What are what are some of the typical challenges that healthcare organizations are reaching out with today? Because Bo and I talked about this, it comes up on every episode, I think, though, post-pandemic, healthcare is innovating at an alarming pace. They're innovating quicker than the tech companies are. So I'm really curious too, in your opinion, how that's

evolved. Are you seeing patterns of what organizations are focusing on right now and what they're solving for?

05:32 - Geoffrey

Let me just say that if you look at the healthcare workforce, even before the pandemic, we were dealing with a lot of these challenges. So, issues of burnout, issues of not having enough supply to meet the demand, very real, pre-pandemic, very real post-pandemic, and extremely real where we sit today. The reality of it is, is we have not done a really good job of being very strategic about this, and really implementing the right solutions. If you look at healthcare as an industry, phenomenal industry, but despite the fact that it's all about people, we tend to not focus as much on the people in healthcare. You take succession planning; we haven't done enough in healthcare. And so today, this is what I call a multi-prong approach. We're dealing with recruitment challenges. We're dealing with retention challenges, but we're also dealing with issues around career mobility, and upskilling. And, you know, historically, healthcare has not had to worry as much about retention, because they have great benefits. Generally, their pay is very, very market value. But for the first time, in many, many years, we're really dealing with significant retention issues. And why I say that is that historically, we would lose somebody to another healthcare organization. Today, they're actually just leaving healthcare entirely, whether they're clinical or non-clinical, and they're going into totally different industries. That speaks to a larger problem. And one of the areas and obviously, you know this from having spoken with Olesea at AdventHealth, is you have leaders like Olesea who are thinking very strategically, deliberately and innovatively about this, we've got to replicate that. Because what has to happen is we have to think about in healthcare, the fact that every employee comes in whether clinical or non-clinical, and we have to be creating a journey for them. And within that journey, we have to be mindful of what does mobility look like for them. Everyone, at some point wants to move into something; may not be another degree, may not be another title, but they do want to do something to grow in their career. And if we're not intentional around helping them achieve that, we as an employer have really failed. And so has academia. Because if we're not intentional around helping students understand what the opportunities are, and preparing them for that, we've also failed. And so that's really where we got to bring both industries together.

08:06 - Bo

I think that is so fascinating. And it's great to hear you discuss that. The need to have more out there thinking strategically, and trying to solve for these with the right solutions. So are you seeing trends moving that way? Are you finding it difficult to get other people on that train? Are they seeing value in it, and it's just slow moving? Talk to us a little bit about that?

08:34 - Geoffrey

I think I'm encouraged. There's more dialogue than ever before on these topics. But as you know, healthcare tends to be a fairly slower, risk averse culture. It's why innovation, despite as being a buzzword in healthcare hasn't really taken off. There are some anomalies, but across the board a lot of opportunity. So I'm encouraged. I will say, as I work across the country,

more and more systems being willing to be open to the discussion. But I think what you're finding is, is we've got to move them from being open to actually implementing. And I think the examples of Olesea are really important, because I think if you look at what Olesea has done, is she has taken a system wide approach to say career mobility is important. And I want to incentivize, and actually a better word for it is I want to invest in my employees to choose their career path, and I'm going to help them do so. And so in their model they've invested in their employees to grow and not just do it with the traditional tuition reimbursement of 50-50. I'm going to do it and invest in you as an employee. And if you want to grow to become a pharm tech; let's say you're a food service worker (critical role in our healthcare system), but you want to grow to become a pharmacy technician. I'm going to invest in you, which is what AdventHealth has done, I'm going to invest in you through programs at AdventHealth University, to become a certified pharmacy technician. I will tell you that this is an area in healthcare, that has a lot of opportunity. In fact, I would argue every healthcare system that is not doing this today needs to look at how you invest in your employees around certifications. It can't just be about degree programs. We're in a different world. And we've got to support upskilling and career mobility.

10:32 - Luke

Totally agree. And I mean, with the workforce is just getting clobbered right now in healthcare, and it's not going to get any better. Right. So it's kind of one of the only ways that you can do it. You know, I think everyone, whether it's personally or in business is always looking for that quick fix, you know, and this might be one of those problems in society that we have right now, where there isn't a quick fix, because these positions aren't just coming out of thin air, we don't have enough people getting into them. And I empathize with that. Because if you're a leader, you know, and you stick your neck out there and say, hey, we're going to invest money in this, we're going to do this. I know it's the right thing to do. But oh, by the way, we might not see any ROI for like three years; that takes a special person to go out and start that initiative.

11:29 - Geoffrey

It does. And I will also say it takes someone who's readily noticing, not just the trends internally, but also the trends externally. And so, you know, I think it speaks to the need for healthcare systems, to really be thinking about, to your point, you've got to fill what you have today. But then at the same time, you got to think about how you create that additional supply. And so, you know, I've said all along, we've got to get to educating students in the K through 12 system, why healthcare is a special place to be. I look at why do they go into healthcare? And the short answer is, I didn't think I would ever, but my mom is a nurse. And I knew I would never be clinical. But I learned through an internship, that administrative leadership in healthcare could be a really special place to help caregivers do what they do best. And so for me, it was more of a vocation than a job. But what I learned in that was, there was something very special about it. I was with a chief nursing executive recently in the Boston area and she said to me, we've got to get back to the joys of nursing, and we've got to get back to the joys of why healthcare is a special place to be. And that's what we have to do.

We have to help people understand where the opportunity is and there's a lot of opportunity and culture in healthcare too. Because again, we haven't focused as much on people across the board. Healthcare people generally are all about their patients, but they also need to support one another to, or we can't be the most effective patient service providers as well. In that type of environment, we have a lot of work to do.

13:14 - Bo

So you just mentioned culture, so make sure you check out, and for our listeners, if you haven't done it yet, check out the episode with Carole Hackett and Tom Vernon at Houston Methodist, because I think they have the recipe for culture. So they're so good and just laid out, not just this theory, the strategy, the implementation, and actually how they do it on a continual annual basis, that specific thing in their healthcare system, which was really fantastic. And I think, Geoffrey, you made a good point earlier about not being as strategic as we need to be, but then also the importance of implementation. And I think that's one of the things Luke that we heard from Dr. Kent at UVA Health. And, you know, this is a good example for our listeners, and for our audience. Someone like Dr. Kent and his leadership team at UVA Health; he laid out when he came in, as the CEO, a 10-year strategic plan. But the key to that is there is one, they have a strategic plan. But then the key to that for him and his team, is the implementation. Like if this is the plan, and we are going to think beyond the now, we have to then kind of reverse that into what do we need to take care of what do we need to do? All those tasks, all those implementation type of tasks that we need to accomplish, month after month after month after month, that are actually going to lead us to successfully completing the objectives of our strategic plan. And they're not just like Luke said, those aren't necessarily one year plays. That might be a 3-year play. It could be a 7-year play, whatever fits into that 10-year span. It sounds like there just aren't enough people focused or truly committed to that today,

15:03 - Geoffrey

What I'm hearing, and if you look, even if you looked at healthcare, and obviously, you both have a lot of experience in it, too. There's not a lot of Chief Learning Officers. You know, there are organizations that have them. AdventHealth is a good example, they have a phenomenal Chief Learning Officer. Penn State Health in Pennsylvania has a wonderful Chief Learning Officer who's a dear friend and mentor of mine. But, you know, that is a newer role in healthcare, which is ironic, because even in academic healthcare systems, it's a newer role, yet in the very nature of an academic healthcare system, they're academic. And so, you know, I will tell you that learning and development, really, in my view, and again, I come from a healthcare background, where our director of learning and development was not just somebody who I was mentored by, but also somebody who I went to, to mentor other leaders in the organization to help. They're such a powerful department, but oftentimes in healthcare, we don't resource them well enough. And oftentimes, they're one of the areas that we also will cut budgets on when times get tougher. But the reality of it is, they are so critical when it comes to these areas, because as you know, learning is an art and a science.

And if we implement it with that approach, we can truly help our employees see the potential and actually achieve it. And that's what this really should be about.

16:35 - Luke

I think a lot more health systems and just healthcare as a whole is really going to embrace this quite a bit. And you can kind of see who's going to be the trailblazers, who's going to be at the, you know, the tail end of this, but we're getting to the point where we don't have a choice. Healthcare simply doesn't have a choice anymore because the companies that are doing this will thrive, and they will have the labor, the workforce to move forward and help people. And the ones that don't, I mean, I hate to say it, but you know, if you don't have the labor in the workforce to care for the people that, you know, business kind of folds at that point. So I think that it's gonna get better, I think.

17:18 - Bo

I would even project Luke, as time goes on, you know, we know there's a lot of mergers and acquisitions in healthcare and the hospital space. So the ones that are the trailblazers that are doing it, right, that are figuring this out, will continue to acquire, potentially the ones who aren't, who are challenged, who are having tough times and you know, an acquisition looks really positive to them, to take on those additional resources or to be able to absorb those resources into their own organization to do better. That might have an impact as well.

17:55 - Geoffrey

Let me just say, I mean, as somebody that was in a system that was acquired, you know, there's also an element around this that, and this is something I've talked with a lot of leaders about, too, that as healthcare has become larger, what's most important is that you can't take a system wide approach at all times to fix what could be a specific hospital challenge. So workforce is a challenge everywhere, but it still takes personalized solutions. Because each market is different. And so I think healthcare, you know, healthcare is the type of place where as systems have become larger, they always think, in the ivory tower of the system, we can say this, you could try, but the reality of it is, you want to set the tone, but then you want to collaborate with the local team to help really implement it. And in my experience, when you do that, you can have so much more results, because it's just more of a collaborative approach rather than a top-down approach.

18:56 - Bo

That's a very important point. I think for everyone listening. You may be in a large system, and you're spread across multiple states, multiple facilities. But when it comes to learning and development, make sure you hone that into a more focused approach, because you will have different needs in different locations, different places.

19:17 - Geoffrey

Well, and to your point, you're going to have data, you're going to have specific data in that respective hospital, in that respective ambulatory practice, that's going to help you deliver the solution that actually is going to help model the way and benchmark to actually see if you're moving the needle.

19:34 - Bo

Right, exactly. Absolutely. Excellent. Speaking of benchmarking and data? How much does data analytics play into the work that you do?

19:43 - Geoffrey

Everything we do. So even before we start work within a respective college university as an operating partner, and then actually do work, you know, with their employers, their healthcare systems. Everything we start with is on labor market data. And really understanding the needs of that specific region in that specific community. And then obviously, we also look at on that hospital, or excuse me, on the college or university side, if they have a nursing program, where have the students come from, you know, what healthcare systems have they done clinical experiences with? Where are they at today? Because you know, that type of data is really, really important. And, you know, again, I'm a firm believer in our work, just as much to Luke's point we're thinking about supporting the needs of today, we're also thinking about how do we create that long term healthcare employee. And so if we can get you in as a pharmacy tech, but then have you come back to a nursing program and become a nurse, we've achieved that idea. Or if we can have you start in one area and become, you know, an imaging tech or something else, we have to get thinking more and more about the stickiness of the journey of the healthcare career. So we focus a lot on data across the entire process of the system. And we also do a lot of work with workforce boards. So that, as we're thinking about creating more equity in the workforce, you know, not everyone can achieve the cost of an education. And so how do you leverage unique ways to help individuals actually be able to afford it, and achieve those goals? And so we do a lot of work in that space as well.

21:19 - Luke

That's cool. Let me ask for companies, for healthcare organizations that are doing nothing right now. And listeners, we're not going to call anyone out, but you know who you are? If you're listening to this, and you're like, oh my gosh, I know I need to do this, but we're not doing anything right now. Two things. Number one, where do they start? And then number two, and this will piggyback on that? How do they socialize it amongst the organization? And I truly believe in anything in business, everything either lives or dies based on how it's socialized amongst your coworkers. How do they do that? Where do they start? How do they socialize it? And with who? What would you recommend if someone gets to work, and they're like, I'm gonna send a couple emails and start this?

22:03 - Geoffrey

I think what's really critical about that is that so often, a lot of the workforce learning and development type of challenges in healthcare reside, or it's assumed that they reside in human resources. Sure, it makes sense because it's about our employees. But the reality of it is, is that human resources has so much on their plate, when you really think about it, benefits, retention, employee appraisals, you name it. And so, I am always a firm believer that if I, as a healthcare leader, myself, when we look at these issues, we have to look at this really with a very strategic lens. And therefore, anybody who's a healthcare leader has to own it. Everyone! And I'm a firm believer that in a healthcare system, there has to be a very strategic mindset, to see this as both a growth trajectory, and also maintain, you know, where we are today trajectory. And you really have to be in a position that the Chief Strategy Officer, the Chief Transformation Officer, you know, with the Chief Nursing Officer, the Chief Human Resource Officer, literally everyone that's in the C-Suite has to be focused on this. And then the functional leaders of each respective area are really critical to because guess what, they're the ones dealing with the pain points every day. So we all hear about nursing. But if you would go out and talk to the pharmacy directors, they're having the same exact challenges, because they don't have enough pharm techs. And so the pharmacists are doing that job on top of their own job. If you go out and talk to the O.R. directors, their nurses and their staff are frustrated, because there's not enough surge techs, they're having to do those jobs. And so we have to really create an interdisciplinary approach across all layers of the healthcare system, so that operational leaders and patient care leaders can be a part of the solution. Because if you would ask them, they've got a lot of really, really good ideas.

24:01 - Bo

I think that's the key. You have to be inclusive and ask those leaders for their ideas, because you're right, I guarantee they have them.

24:10 - Geoffrey

And you have to empower them. So you know, after you've asked, you have to empower them. And I see a lot of those qualities at some of the systems that I that I work with, and but to your point, there's a lot I could, you know, again, I wouldn't name names, but there are many that I've talked to that are large, large, integrated delivery systems that I pose questions to, do you have a strategic workforce development framework that you're working off of? And they don't. And what's interesting about that, is that again, when we're talking about this, we're talking about a full framework, not just recruitment, retention. We're talking about academic pathways. We're talking about what does learning and development look like. We're talking about K through 12 models. We're talking about dual enrollment, apprenticeships. When you go through the gamut so many of them do not have this and yet they wonder why their workforce is so challenged. Well, that's the opportunity. And you know, folks like myself want to be a part of that solution to help them because literally lives are on the line. When you look at workforce patient safety is impacted, quality is impacted, and the staff are impacted, and we can't continue in this trajectory.

25:21 - Bo

Wow, good stuff. You could talk all day about this stuff. I got to ask you this, because I would be remised if I didn't ask you this, because the very first line in your about section on your LinkedIn profile is you are a heart leader. What does that mean?

25:39 - Geoffrey

So for me, it really means that as a leader, you are always looking to connect with another person, and find in what ways you can be of support to them. And I'm a firm believer that, you know, a lot of people talk about it as servant leadership. But to me, it's more about connection. And if a leader is leading with heart, they're literally connecting with all those that they work with. That doesn't mean that I'm always going to be liked as a leader. But at the end of the day, it does mean that I'm going to connect with people. And then I'm going to build relationships that are authentic and genuine at all costs.

26:17 - Bo

I love that. I've never heard that before. But I think that's an excellent description. I think that's a great description. I think one of the best I've heard, just the basis of leadership. Dr. Matt Primack mentioned it. When we were recording with him, his episode comes out next week, he talked about leadership, he obviously didn't call it heart leader. But his description of his responsibility as the president of his healthcare system, his facility, was very similar to what you just said.

26:53 - Geoffrey

I have to give you, to be completely honest, I didn't come up with it. A good friend of mine who happens to be another healthcare leader said to me, when I was you know, I was asking him for his guidance on like, how would you describe me? And he said, well, first of all, you're the son of a nurse, because you always talk about your mom and what brought you into healthcare. He said, and second of all, why aren't you calling yourself a heart leader, because in every interaction, I've seen you, you always lead with your heart. And I said, I wouldn't know, I'm not a brand person. And so, you know, he came up with it. And so I never take credit for someone else's work. But to your point, as I thought about it, and it's interesting, because one of my other mentors I mentioned earlier, who's the Chief Learning Officer at Penn State Health, Hillary Miller, if you haven't met Hillary, she's a true dynamo in this space as well, in healthcare. Hillary has said to me numerous times, it's really, it's a massive skill when you truly connect with people. And whether professionally or personally, the impact that we can have when we do that authentically is just so magnificent. And so that's really what generated that interest in it.

28:04 - Bo

Nice! Well, thank you for sharing that, we really appreciate that. And before we let you go, we always give our guests an opportunity to pretty much end the show with something that you would like to share, whether that's talking about your company, talking about ways people can get a hold of you, whatever's on your mind, let us have it.

28:24 - Geoffrey

Yea, happy and thankful to both of you for being here. I would encourage anyone, feel free to reach out. Certainly, you can find me on LinkedIn just by searching my name - Geoffrey M. Roche. Happy to connect there and certainly, at any time happy to talk with any healthcare system that really wants to think innovatively and strategically around these issues. Because this is, as I mentioned earlier, really about doing everything we can for patients, but also doing every everything we can for our team, and so happy to do that.

28:56 - Luke

Excellent. Love it. Sounds good. ASHHRA listeners, thanks for your time. Geoffrey, thanks for joining us. Bo, we will talk again. ASHHRA listeners, that's a wrap!

About The ASHHRA Podcast

Co-hosts Bo Brabo and Luke Carignan from The Bo & Luke Show bring you the latest insights and trends in the world of human resources. Whether you're looking to stay up to date on the latest news and legislation or gain valuable insights into building a better workplace, the podcast has something for everyone. So sit back, relax, and join Bo and Luke every week for fresh episodes as they explore everything healthcare HR!

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