Healthcare Workforce Pathways:

Student & Educator Perspectives from the WA State HOSA Fall Leadership Conference

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Qualitative Research Evaluation

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Today's Agenda

01 **Study Purpose & Context**
Why we went to HOSA and what we were looking for

02 **Methodology**
Who we talked to and how we collected and analyzed data

03 **Student Perspectives**
Three key themes on exposure, mentorship, and barriers

04 **Educator Perspectives**
Five key themes from teachers and HOSA advisors

05 **Recommendations**
Three priority action areas for the Council

06 **Discussion**
Questions and next steps

Purpose & Context

Study Purpose

Examine how high school students and educators experience healthcare career pathways in Washington State, with attention to:

- Access & equity
- System-level barriers
- Strengths and gaps in the current landscape
- Actionable opportunities for improvement

Who Partnered on This Work

WA State DOH

Center for Access to Whole Person Care (CAWPC) / HSWI

WTECB

Washington Workforce Training & Education Coordinating Board

HOSA Washington

Health Occupations Students of America — statewide student org

Methodology

Mixed-methods qualitative approach

12	23	4
Students	**Teachers & Advisors**	**Data Sources**
2 feedback sessions Rotating small-group format	2 fishbowl discussion sessions Urban & rural districts	Facilitator notes, whiteboards, survey, written reflections

Analysis Approach

All qualitative data uploaded to ATLAS.ti for systematic iterative thematic analysis · **Triangulation** across facilitator notes, whiteboard photographs, written reflections, and open-ended survey responses · Verbatim participant language used to illustrate themes

Three Key Themes from High School Students (n=12)

THEME 01

Exposure is Most Powerful When Hands-On, Relational, and Real

Classroom instruction alone isn't enough. Site visits, HOSA events, simulations, and athletic training experiences were described as pivotal moments.

THEME 02

Mentorship and Trusted Adults Are the Primary Navigators of the System

Students rely on teachers, coaches, and advisors — not formal systems — to discover and access opportunities. School counselors are limited in capacity.

THEME 03

Structural and Financial Barriers Limit Access for Motivated Students

Age restrictions on internships, geographic isolation, 'pay-to-play' programs, and rigid course structures are system design failures, not student motivation failures.

Student Theme 1: Exposure is Most Powerful When Hands-On, Relational, and Real

What Students Told Us

- Classroom instruction builds a foundation, but isn't enough to make careers feel attainable
- HOSA events, site visits, and peer demonstrations shifted students' sense of possibility
- Hospital field trips were cited as pivotal — seeing real departments and team workflows
- Athletic training / sports medicine offered early, real-world responsibilities
- Non-clinical roles (biomedical engineering, diagnostics, medical devices) rarely highlighted — students want them
- When experiential learning was absent, coursework felt disconnected from future goals

> *"The atmosphere and seeing all the projects and posters [at HOSA] helped me imagine myself in similar pathways and recognize healthcare roles I had not previously considered.*
>
> *— Student participant*

Key Implication

Exposure works best when it is experiential, visible, and grounded in real contexts — not limited to bedside clinical roles.

Student Themes 2 & 3: Mentorship and Structural Barriers

STUDENT THEME 2

Mentorship & Trusted Adults Navigate the System

- Access to opportunities depended on specific individuals — teachers, coaches, HOSA advisors
- School counselors described as limited in scope and capacity (focused on scheduling, not careers)
- Mentors who 'got to know you,' 'shared their own journey,' and 'actually helped connect you' were transformative
- Relational support is unevenly distributed and highly dependent on chance

"Sometimes it's not even about an opportunity. It's just having someone who believes in you and pushes you."

STUDENT THEME 3

Structural & Financial Barriers Limit Even Highly Motivated Students

- Age restrictions block internships & job shadows for under-18 students
- Geographic isolation — 'Most opportunities are in Seattle' / 'If you're on this side of the ferry, it's just harder'
- 'Pay-to-play' programs that promise experience raise equity concerns — *"why should my unpaid labor cost money?"*
- Rigid course sequences and lack of guidance compound barriers

"Most opportunities are in Seattle. If you're on this side of the ferry, it's just harder."

Five Key Themes from Teachers & HOSA Advisors (n=23)

01	Strong Pathways Exist but Lack Consistent Structural Support
02	Age Restrictions & Liability Severely Limit Work-Based Learning
03	Rural Geography and Transportation Compound Inequities
04	Simulation, Space & Equipment Are Essential but Unequally Funded
05	Teachers Are Fighting Apathy, Rigor Gaps, and Structural Misalignment

Educator Themes 1 & 2: Structural Support and Work-Based Learning Barriers

EDUCATOR THEME 1

Strong Pathways Exist but Lack Consistent Structural Support

- Innovative programs exist: MA-C embedded in high schools, CNA partnerships, dual-credit courses
- Programs are sustained largely by individual educator effort, not durable institutional infrastructure
- Educators wear too many hats — program design, employer partnerships, student placement, troubleshooting
- Programs are fragile: vulnerable to disruption if one educator changes roles
- Tension between innovation and fragility — success depends on local capacity, not system support

"I wish there were two or three of me."

EDUCATOR THEME 2

Age Restrictions & Liability Severely Limit Work-Based Learning

- Under-18 age restrictions are the most significant single barrier — even in workforce-shortage regions
- Large health systems cite HR capacity, accreditation, and legal compliance as blockers
- Small providers (PT offices, local clinics, EMS) more flexible and willing to engage students
- 'The PT office hired our students. Then the big systems suddenly got interested.'
- Teachers want clear WAC guidance, liability protections, and state-level leadership

"The PT office hired our students. Then the big systems suddenly got interested."

Educator Themes 3–5: Geography, Infrastructure & System Misalignment

EDUCATOR THEME 03

Rural Geography & Transportation Compound Inequities

- Distance from clinical sites + limited transport = structural exclusion
- Healthcare jobs may exist locally, but willing employer partners are scarce
- 'Rural will always have a barrier because we're just not near opportunities'
- In-school simulations, mobile labs, and virtual tools are critical alternatives

EDUCATOR THEME 04

Simulation & Infrastructure Essential but Unequally Funded

- VR platforms, anatomage tables, and skills labs are critical — especially where clinical placement is limited
- Access varies widely by district; funding information is opaque and inconsistently shared

"Healthcare takes space. You can't do it in a regular classroom."

"We can simulate skills, but not decision-making without better tools."

EDUCATOR THEME 05

Teachers Navigating Apathy, Rigor Gaps & Misalignment

- *"It feels like two schools within one school"* — highly motivated and disengaged students coexist
- Academic readiness gaps (math, reading) can become barriers
- Poor course sequencing discourages students before they access engaging content
- Teachers need systems-level solutions to maintain student momentum

Three Priority Action Areas for WA State Healthcare Workforce Development

01

Expand Early Experiential Exposure

Through Coordinated Applied Learning

Coordinate simulations, skills labs, and structured site visits for grades 9–10. Incorporate non-clinical roles. Invest in VR and simulation tools. Leverage HOSA and regional events.

02

Strengthen Mentorship & Navigation Supports

Reduce Reliance on Individual Gatekeepers

Formalize mentorship roles in CTE/HOSA programs. Build centralized pathway guidance resources. Create flexible entry/re-entry structures. Partner with WA AHEC for regional mentor pools.

03

Reduce Structural Barriers to Work-Based Learning

Through Policy Alignment & Investment

Issue clear WAC guidance for under-18 students in healthcare settings. Create scalable employer entry points. Invest in simulation infrastructure in rural districts. Centralize funding communications.

Recommendation 1: Expand Early Experiential Exposure to Healthcare Careers

Key Strategies

1. Expand access to applied learning (simulations, skills labs, site visits) for students in grades 9–10
2. Intentionally highlight non-clinical roles: biomedical engineering, diagnostics, health IT, medical devices
3. Leverage HOSA conferences and regional events to showcase peer projects and concrete pathway examples
4. Invest in simulation and VR tools to provide meaningful exposure where clinical placements are not feasible

Model Programs

Kaiser Permanente Health Care Simulation Lab (CA)

HS students rotate through simulated emergency care, ICU procedures, and clinical tasks using high-fidelity mannequins under clinician supervision.

Ballad Health Academy Mobile Simulation Lab (TN)

Mobile sim lab delivers advanced training directly to rural high schools — no hospital travel required. Shareable across multiple sites without duplicating facilities.

Recommendations 2 & 3: Mentorship, Navigation, and Reducing Structural Barriers

RECOMMENDATION 02

Strengthen Mentorship & Navigation

- Formalize mentorship & pathway navigation within CTE and HOSA programs
- Develop centralized student/family-facing pathway resources with clear on-ramps
- Support professional development for educators as pathway guides
- Create flexible entry/exit/re-entry structures for students at all stages
- Partner with WA AHEC to establish regional, role-based mentor pools aligned to pathway categories

RECOMMENDATION 03

Reduce Structural Barriers to Work-Based Learning

- Issue clear, consistent state guidance on WAC 296-125 for healthcare settings (allowable tasks, supervision, liability)
- Create structured, scalable employer entry points — not one-off relationship building
- Invest in simulation and instructional infrastructure, prioritizing rural/isolated districts
- Centralize grant and funding communications across schools and CTE directors
- Pilot a regional healthcare work-based learning hub with state implementation guidance

Key Takeaways

- Interest in healthcare careers is strong — but pathways remain uneven, opaque, and dependent on individual relationships
- Students and teachers are navigating fragmented systems largely on their own, raising serious equity concerns
- Innovation exists at the district level, but is fragile — programs depend on individual educators, not systems
- Three priority levers: experiential exposure at scale, formalized navigation supports, and structural policy alignment

Questions & Discussion

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In collaboration with the WA Workforce Training & Education Coordinating Board