



**Regional Activation Plan
Sierra Region
Updated February 20, 2026**

Target Sector Strategy - Brief Overview

Target Sector Strategy for Healthcare Workforce Development

This strategy fosters robust collaboration among high schools, community colleges, local government, local hospitals, and healthcare providers to address persistent workforce shortages and create tailored educational pathways that upskill individuals and support living-wage careers. In rural regions like the Sierra, the delivery of healthcare and workforce development is shaped by unique challenges—including geographic isolation, limited infrastructure, aging populations, and economic disparities—that require a targeted and inclusive approach.

The Healthcare Industry Sector Coordinators will guide the implementation and governance of this strategy. These coordinators serve as a regional convener of healthcare employers, educators, public agencies, tribal representatives, and community-based organizations, ensuring a coordinated approach to workforce investment that is grounded in data, regional need, and shared responsibility.

By investing in regionally responsive education, training, and adaptive skill-building programs, the Sierra can cultivate a workforce that is technically competent and resilient in the face of evolving healthcare demands. Rural healthcare systems often struggle to recruit and retain professionals due to fewer career advancement opportunities, lack of affordable housing, professional isolation, and limited family services. This strategy addresses those barriers by building localized talent pipelines and expanding access to credentialing through dual enrollment programs, distance learning, and experiential learning opportunities within the community.

A regional health needs assessment has identified urgent issues such as shortages in mental and behavioral health services, chronic disease prevention, and emergency preparedness linked to climate-related threats. In the Eastern Sierra, women's health is at a critical point in which the last labor and delivery unit is on the verge of closing. The residents in this area would then need to travel between 4-6 hours for labor and delivery services. These challenges are compounded in rural areas, where limited transportation and broadband access further restrict healthcare access. Expanding educational programs that prepare students for critical healthcare roles—especially those tied to public health, telehealth, and emergency response—will fill key vacancies, reduce reliance on external staffing, and help ensure local populations receive consistent, quality care.

This strategy is also deeply aligned with California's broader economic, equity, and sustainability goals. Training initiatives will prepare workers for high-demand roles while reducing unemployment and supporting a resilient healthcare infrastructure. Partnerships with state agencies and local stakeholders will facilitate the development of standardized curricula and certifications that reflect real-time labor market needs, making regional programs more competitive and scalable.

A critical component of long-term workforce sustainability is the development of career and technical education (CTE) pathways and dual enrollment programs that engage students as early

as middle and high school. These pathways offer students—particularly those from underserved and rural backgrounds—a head start on healthcare careers, reducing both time and cost to credential attainment while building a locally rooted workforce that is more likely to stay and serve in their communities.

Further, the integration of healthcare workforce development with climate resilience—such as preparing professionals for disaster response and environmental health roles—will enhance both human and ecological well-being. This intersectional approach supports a more responsive and agile healthcare system, especially in remote and disaster-prone communities.

To ensure equitable outcomes, the region is centering historically marginalized voices in the design and implementation of this strategy. The Sierra region’s approach to California Jobs First has prioritized community engagement as a cornerstone, cultivating a transparent, participatory process that incorporates local wisdom and prioritizes those most affected by current workforce inequities. By involving residents, community-based organizations, educational partners, and industry leaders in co-creating this strategy, the region is ensuring that the benefits of workforce investments are broadly distributed and reflect the unique identities and needs of its communities.

In doing so, the Sierra region is not only addressing urgent healthcare workforce gaps but also positioning itself as a model for rural innovation—where economic development, public health, and social equity are inextricably linked and community-driven.

a) This sector was prioritized for immediate implementation for the following reasons:

- i) The healthcare industry was identified as a fast growing workforce sector. There is a shortage of providers, nurses, physical therapists, behavioral healthcare workers, EMT’s, and ancillary care providers in the region. Upskilling individuals in the region would reduce these shortages and provide economic stability. Further, having an adequate amount of healthcare providers would help to address the identified healthcare priorities.

(1) According to EDD data, the healthcare industry represents over 7% of California’s employment and generates \$14.6 billion in economic output.

- ii) This sector has a location quotient of 0.66, indicating that the region employs fewer healthcare sector workers than the statewide average, indicating additional growth opportunities to support rural healthcare needs. There were no suggestions for potential areas of growth opportunities. However, upon further discussion with workforce employers, there are significant needs in nursing, medical assisting, certified nursing assistants, physical therapy assistants, emergency medical technicians, behavioral health and women’s health providers, and radiology technicians.

- iii) This sector employs 5,854 constituents throughout the region, accounting for nearly 9.3% of all regional employment. The demand for healthcare services is generally more consistent with population numbers and demographics. Because of this

employment numbers should fluctuate with regional growth and existing service needs. Many of the counties in the region have a large percentage of older adults. This population tends to have more chronic illness and requires more specialty care. While there may be fewer people in the rural areas, the higher percentage of elderly dictates the need for additional healthcare services which translates to additional employment opportunities for healthcare workers in the region. Further, many areas are experiencing a demand for specialty services. This is especially important for those older adults who have a lack of transportation and find it difficult to travel to more urban areas.

- iv) Jobs across this sector are expected to grow 9.6% by 2030, translating into 650 new jobs.
- v) The healthcare industry sector represents a wide range of median annual wages, with salaries ranging from the low \$30,000 range, to upward of \$150,000, indicating a variety of jobs within this sector, many of which are quality jobs for the region.
- vi) Community health employment spans a broad spectrum, providing pathways from minimally trained home health positions to professional roles that require higher education credentials, such as a bachelor's, graduate, or post-secondary degree.
 - (1) Top-paying jobs in this sector require internships or residencies before entering various occupational roles
 - (2) Providing additional education and training opportunities throughout the region could enable more people to work in this sector and support higher wage opportunities.
- vii) Significant growth opportunities exist focusing on improving access, training, and infrastructure.
 - (1) Expand training programs by collaborating with community colleges such as Cerro Coso and Columbia Colleges to offer healthcare certifications and degrees, increasing local talent.
 - (2) Develop partnerships with four year universities that include medical schools and master's degrees to continue the education for the local workforce pipeline.
 - (3) Expand telehealth services to reach remote areas, ensuring all residents can access specialist care.
 - (4) Upgrade facilities to provide comprehensive services including mental health and long term care.
 - (5) Develop mobile health units to serve isolated and underserved populations, improving access to essential care.
 - (6) Strengthen partnerships between healthcare providers, educational institutions, and community organizations to align resources and improve service delivery.

- (7) Explore shared resource models and collaborative agreements to maximize healthcare delivery efficiency.
 - (8) Invest in affordable housing for healthcare workers to attract and retain talent in the region.
- viii) State and Federal funding for healthcare education and training make this an opportune time for action.
- (1) There has been an increase in the amount of programs that promote workforce education and training in rural areas.

b) The Sierra region will advance this target sector over the first 18 months of implementation through the following strategies. These strategies have been prioritized for their critical role in establishing core infrastructure for further action and their potential to achieve early wins to sustain momentum.

- i) Develop a shared rural California advocacy campaign to increase funding and access to rural healthcare (particularly for low-income and disinvested communities) and increase region-wide awareness of local health needs and wellness initiatives.**

- (1) Establish the Sierra Healthcare Industry Partnership (SHIP)

Near-Term Tactics

- (a) The SHIP will create collaborations among local government, hospitals, tribal partners, FQHC's, providers, and education partners in the region. Quarterly convening will take place with in-person and virtual meetings.
 - (b) Collaborate with partners to raise awareness and provide education within communities about disease prevention, wellness initiatives, and outdoor exercise activities.
 - (c) Identify gaps in healthcare needs by county and subregion, such as limited access to long-term care facilities, specialty, comprehensive reproductive health, and behavioral health services.
 - (d) Plan and implement a public health campaign to enhance healthcare accessibility in the region.
- (2) Identify gaps in healthcare needs for the Sierra region, such as limited access to long-term care facilities, comprehensive reproductive health, and behavioral health services.

Near-Term Tactics

- (a) Summarize existing healthcare challenges and assets in the Sierra region.
- (b) Develop partnerships and identify funding to ensure needed healthcare services in the region.

- (3) Align with other California rural regions to develop a shared understanding of rural healthcare challenges and opportunities.

Near-Term Tactics

- (a) Reach out to other rural regions through existing networks and relationships.
 - (b) Develop shared rural healthcare issues and share them with essential partners.
 - (c) Engage RCRC and UCSF for follow-up implementation steps related to their Rural Healthcare study.
 - (d) Create partnerships with regional healthcare workforce partners to provide resources for educational partners.
- (4) Market existing and new public health awareness and education campaigns, including wellness initiatives.

Near-Term Tactics

- (a) Identify partners who provide health and wellness education in the region.
 - (b) Identify regional mass media, organizational, and other communication channels to distribute health awareness information and champions to lead efforts
 - (c) Ensure all materials are translated and distributed through culturally appropriate channels.
- (5) Evaluate students' mental health challenges in schools and work with educators, counselors, and mental health professionals to develop comprehensive strategies for addressing these needs within the school environment.

Near-Term Tactics

- (a) Create an early intervention action plan for at-risk youth
- (b) Partner with local behavioral health entities to provide awareness and communication campaigns
- (c) Improve accessibility to mental health providers
- (d) Establish a cross-functional mental health task force

ii) Create upskilling and upward mobility pathways for local workers to move into high wage healthcare jobs, lowering dependency on out-of-area workers.

- (1) Expand community college offerings to include nursing and healthcare certification programs to meet the growing demand for healthcare workers

Near Term Tactics

- (a) Audit existing community college offerings
 - (b) Identify partnerships between community colleges and healthcare partners to develop new certificate programs
 - (c) Market existing certificate programs across the region.
 - (d) Expand funding for on-campus housing at community colleges to support regional training needs to provide access to those requiring more reliable transportation or are too far from the campus to attend daily.
 - (e) Consider boot camp or residency-style training to reduce the housing burden on students and faculty.
- (2) Expand and expedite educational offerings related to broad spectrum of healthcare careers
- (a) Identify current and future workforce needs
 - (b) Support local college to create programs to support workforce needs (ie. Nursing, Medical Assisting, Certified Nursing Assistant, Phlebotomy, Emergency Medical Technician, Physical Therapy Assistant, and Radiology Technician).

Near Term Tactics

- (c) Focus educational offering on existing workforce gaps
 - (d) Expand funding for supportive services to ensure student success in training completion and subsequent employment (tools, clothing, books, childcare, etc.)
- (3) Enhance and expand high school career technical education pathways focusing on healthcare professions to provide early exposure and training opportunities.

Near Term Tactics

- (a) Audit existing high school career technical education pathways across the region
 - (b) Develop partnerships between high schools, community colleges, and healthcare institutions to identify career technical education pathways and certificate opportunities for high school students.
- (4) Identify and develop talent pipelines and foster partnerships between the healthcare industry and secondary schools.

Near Term Tactics

- (a) Convene healthcare and postsecondary partners.
- (b) Audit existing higher education healthcare offerings.

- (c) Develop partnerships with medical schools to provide residency opportunities.
 - (d) Audit existing job shadowing/internships and other on-the-job learning opportunities at healthcare agencies and institutions.
 - (e) Amplify career outreach to recruit interested students.
- (5) Incentivize healthcare worker certification programs to attract more individuals to pursue careers in healthcare.

Near Term Tactics

- (a) Identify funding sources to support the completion of certificate programs.

iii) Address facility shortages using cost-saving models like shared resources, collaborative agreements between healthcare providers, mobile health promoting co-location, or creative facility use, such as using a high school at night for a community college training program.

- (1) Develop specific partnerships for access to highly specialized care needs, such as cancer and behavioral health.

Near Term Tactics

- (a) Convene healthcare partners to review data finding in gaps in specialized services.
 - (b) Explore models to provide shared healthcare services to meet regional gaps.
- (2) Establishing Joint Powers Authorities and memorandums of Understanding will promote collaboration between counties and healthcare facilities. This collective effort will improve healthcare services and share resources for regional specialty care, ensuring all patients have access to necessary care.

Near Term Tactics

- (a) Convene local governments to explore the JPA model
 - (b) Research best practices for shared governance healthcare models
 - (c) Research best practices for collaborative health models including co-location of services, shared funding models, and creative shared facility use (such as using a high school at night for a community college training program).
- (3) Expand mobile health and support services to reach underserved rural areas and populations with limited access to healthcare facilities, particularly on the East side.

Near Term Tactics

- (a) Identify high-priority areas of need where mobile services would be most beneficial.

- (b) Identify partners and funding sources to provide mobile services.
 - (c) Market mobile service offerings and ensure all materials are translated and shared through culturally competent communication channels.
- (4) Identify and develop talent pipelines and foster partnerships between the healthcare industry and secondary schools.

Near Term Tactics

- (a) Convene healthcare and postsecondary partners.
 - (b) Audit existing community colleges, the University of California, and California State University healthcare offerings.
 - (c) Audit existing job shadowing/internships and other on-the-job learning opportunities at healthcare agencies and institutions
 - (d) Amplify career outreach to recruit interest students.
- (5) Explore the benefits and challenges of integrating tribal cultural practices into the modern healthcare and how traditional knowledge can best serve diverse community needs in mainstream healthcare.

Near Term Tactics

- (a) Convene tribal organizations and healthcare providers to identify partnership opportunities.
 - (b) Build and expand tribal health networks to serve tribal and non-tribal community members.
- (6) Identify philanthropic or public funding to build and sustain innovative collaboration amongst service providers.

Near Term tactics

- (a) Collaborate with local government and healthcare institutions to understand funding opportunities and gaps.

Operating Structure to Organize and Execute

- 1) In the intermediate term, implementation will be incubated through the region's existing workforce and economic development entities. Entities such as the Mother Lode Workforce Development Board, through Mother Lode Workforce Development Board administered by Mother Lode Job Training (MLJT), Sierra Healthcare Industry Partnership (SHIP), Sierra Business Council (SBC), HealthForce Partners, and Healthcare Career Connections (HCC) have expertise within the Healthcare Industry sector and have strong working relationships with regional sector firms and other relevant entities such as local governments, community-based organizations, and community colleges such as Columbia College and Cerro Coso College. Of particular relevance, Mother Lode Job Training has a track record of delivering

and administering programs within this sector in partnership with relevant entities and industry partners.

- a) MLJT and Dr. Jennifer Burrows have been assigned the Sector Navigator role in the Healthcare Industry sector and have agreed to invest significant time and resources over the course of their contract with Sierra Business Council to implement the strategies and tactics outlined in the Regional Strategic Plan Part II. MLJT and Dr. Jennifer Burrows will play a pivotal role in aligning regional workforce development efforts with the goals outlined in the regional strategic plan as well as this activation plan.
- b) MLJT will specifically dedicate time from its Business Services Manager, Economic Development Manager, Deputy Director, and Executive Director, and Dr. Jennifer Burrows all of whom have relevant experience in implementing sector strategies. These individuals have experience in economic development, workforce development, strong social capital, and regularly engage with external institutions as collaborators to achieve common goals by directing their internal activities toward shared strategies and outcomes. All individuals are skilled in managing complex processes and operations to facilitate successful completion of strategic goals while fostering collaboration and inclusivity.
 - i) Mother Lode Job Training and Dr. Jennifer Burrows have received funding for sector coordination to continually administer sector strategy over the contracted period. MLJT and Dr. Jennifer Burrows will report on progress to the regional convener on a regular cadence, with additional follow-up provided as key activities are accomplished, milestones are achieved, and challenges are encountered.
 - ii) MLJT and Dr. Jennifer Burrows will actively participate in Regional Governance Committee meetings to collaborate with stakeholders, share insights and ensure ongoing regional alignment. These meetings will provide a platform for MLJT to contribute to the decision-making process, address emerging challenges, and identify opportunities for cross-sector collaboration that will enhance the impact of the healthcare industry sector initiatives. Additionally, Alex Bloom (Economic Development Manager, MLJT & CSEDD) has been appointed as the Non-Voting Chair of the Regional Governing Council and Dr. Jennifer Burrows is a voting member of the Regional Governing Council and will ensure ongoing alignment with the regional strategic and activation plans.
 - iii) In its role as sector navigator, MLJT and Dr. Jennifer Burrows will lead efforts (in collaboration with SBC, HealthForce Partners, and Health Career Connection) to convene industry partners, educational institutions, local governments, and community-based organizations, fostering a coordinated approach to the workforce and economic development components of the strategic plan. These efforts could include activities such as organizing training programs, securing additional resources, and creating additional pathways for equitable workforce participation. These efforts will be instrumental in driving the success of the activation plan and driving sustainable economic vitality for the Sierra region.
 - iv) As a core element of strategic implementation for the activation plan, the Sector Coordinators will be focusing on establishing a sustainable infrastructure to support and grow the healthcare industry sector. This initiative will be structured as a cluster initiative, which will initially be incubated by the sector coordinators, leveraging their

expertise, regional connections and resources. This cluster initiative will serve as a centralized hub for coordinating efforts to advance the healthcare industry sector strategy.

- (1) This initiative will work closely with key stakeholders such as post-secondary education, local governments, councils of governments, economic development organizations, hospital districts, public health departments, local high schools, and behavior health providers align resources, expertise, and efforts. Ongoing collaboration will involve designees from these organizations who will contribute technical expertise, social capital, and additional capacity to achieve the near-term goals of this initiative. To formalize collaboration, the initiative will seek to establish institutional agreements or memorandums of understanding with select strategic organizations. To address specific needs and opportunities, the sector coordinators will incorporate workgroups and subcommittees. These groups will provide targeted input on key areas such as workforce training, educational programs, and methods to meet the healthcare needs in the region. This will include public outreach ensuring the initiative remains adaptable and responsive to the region's evolving priorities and challenges.
- (2) The cluster initiative aims to catalyze regional economic development and support the healthcare needs of the region combining resources that can uplift the local workforce to support the current healthcare needs. Anticipated impacts could include supporting job creation, enhancing collaboration, driving innovation, and securing sustainable funding pipelines for long-term sector growth. Through this focused effort, the cluster initiative will become the cornerstone of the region's activation plan, fostering economic growth and ensuring the sustainability of its healthcare industry.
- (3) To achieve the goals of the Healthcare Industry sector and foster interregional collaboration, a structured, multi-tiered operating framework will be established. This structure will include a Sierra Healthcare Innovation Partnership (SHIP) which will create working groups to identify the healthcare workforce needs in the region and collaborate to identify initiatives to create solutions. This partnership will be composed of representatives from local government, workforce boards, industry leaders, educational entities, tribal entities, and community-based organizations across participating regions. The council will oversee strategic planning, funding prioritization, and the establishment of performance metrics. Subcommittees focused on specific initiatives will coordinate efforts across counties and shared sectors. This collaborative will promote efficiency, minimize redundancies, and maximize the collective impact of investments and programs across the state.

Resourcing Across the Strategy

- 1) The Sierra region's Healthcare sector is prepared to address critical challenges and capitalize on emerging opportunities through strategic investments and partnerships in this sector. However, as we advance our work, a full picture of resourcing will continue to develop alongside the completion of key studies and funding decisions.
- 2) Since the adoption of the Regional Summary part 2, our 2024 Strategic Plan, four healthcare focused and two sustainable agriculture project submissions through the Sierra Jobs First Catalyst Fund RFP highlight the region's innovative capacity and commitment to advancing this sector. These projects, currently under review, provide a foundation for

addressing workforce development, supporting local healthcare needs, addressing food insecurities, and economic revitalization in alignment with our strategies and tactics. They include:

- a) *Hillside Mobility*: Provides transportation to healthcare appointments for residents in rural regions.
 - b) *Hybrid EMS Training Program*: Collaborates with Cerro Coso Community College to provide in person and hybrid training for emergency medical technicians (EMT's). The will help upskill individuals in the region and address the shortage of paramedics and EMTs in the region.
 - c) *Toiyabe Indian Health Dental Clinic*: This project would collaborate with Mono, Inyo, and Alpine counties to provide dental services. With a lack of dental providers in the region, this mobile dental clinic would provide free and low cost care to the region.
 - d) *Sierra Region Community Health worker/Promoter program*: Aims to conduct a regional analysis to determine the need for community health workers. Based on the identified criteria, a collaboration with Cerro Coso Community College and Columbia College would be established to create a curriculum and training.
 - e) *Blue Heron Project*: 10 acre farm in Inyo County. Focused on increasing use of locally sourced food for consumption. This project will help with food scarcity in rural areas.
 - f) *Eastern Sierra Farm Fresh*: reducing food waste and improving local access to food through regenerative agriculture.
 - g) *Central Sierra USDA Meat Processing Facility Feasibility Study*: Study to understand if a single meat processing facility will be feasible for locally sourced meat in the Eastern Sierra.
- 3) Mother Lode Job Training and Dr. Jennifer Burrows have contracted with SBC to provide sector navigation services for the Healthcare Industry sector in the amount of \$350,000, an initial investment in aligning resources and convening agencies and businesses in the sector. Tactics associated with this contract include:
- a) Initiate sector specific workgroup(s) to address the workforce (job training) and economic development (job creation) components of tradable sector growth
 - b) Initiate a sector-specific employer engagement strategy
 - c) Seek additional funding in partnership with agencies engaged in sector collaboration
- 4) The Sierra region's key next steps in resourcing will prioritize strategic financial planning through comprehensive cost analysis, multi-source funding acquisition, collaborative stakeholder engagement, and targeted alignment with broader regional development objectives
- a) Given the dynamic nature of project approvals and funding availability, the region's immediate focus will be to:
 - i) **Conduct a Sector Cost Study**: To understand the total cost of implementing the strategies outlined in this activation plan, a detailed study will need to be completed. This analysis will provide the basis for future resourcing efforts, including securing additional funding and refining priorities.
 - ii) **Secure and Leverage Diverse Funding Sources**: Catalyst funding opportunities will serve as an initial seed for action. Future funding opportunities will be sought from other sources such as the Department of Healthcare Access and Information (HCAI), Health Career Connection (HCC) and other state and federal initiatives through the USDA, Inflation Reduction Act, Department of Labor, and California Workforce Development Board. To sustain operations and expand programming, private-sector investments and philanthropic contributions will also be pursued.
 - iii) **Strengthen Regional Partnerships**: Collaborating with tribal nations, local governments, community-based organizations, and private entities will be essential to leveraging existing resources and identifying innovative funding mechanisms

- iv) Integrate Existing Efforts with State and Federal Goals: Aligning the region's priorities with state healthcare objectives such as upskilling current healthcare employees and creating training programs to meet the demand for nursing, dental, and mental health providers will improve the competitiveness of grant applications and enhance the long-term viability of funded projects.
- 5) The Sierra region's resourcing efforts aim to establish a robust financial foundation that catalyzes regional development, enables rapid project initiation, and creates a sustainable funding mechanism to drive strategic initiatives.
 - a) Anticipated outcomes of strategic and diversified resourcing efforts include (but are not limited to):
 - i) Build the capacity to launch foundational initiatives such as workforce training hubs, technological innovation labs, feasibility studies, and regional networks.
 - ii) Achieve early wins that demonstrate momentum, such as securing ready-to-go projects awarded under regional catalyst funding
 - iii) Creation of a scalable and sustainable funding framework that ensures the successful implementation of all strategies over the next decade

Goals and Metrics Across the Strategy

- 1) To successfully advance the Healthcare Industry sector and achieve meaningful progress in the near future, several goals and outcomes have been identified, aligned with our prioritized strategies and tactics. These goals focus on creating foundational infrastructure, fostering interregional collaboration, and achieving early successes to build momentum. By emphasizing actionable objectives, this framework ensures that our efforts drive tangible economic, workforce, educational, and community benefits while positioning the Sierra region as a leader in the healthcare industry. The following goals and measures will guide implementation and provide a clear roadmap for progress.
 - a) Workforce Development & Pipeline Expansion
 - i) Expand and diversify the healthcare workforce to meet current and future labor demands
 - ii) Increase in healthcare program enrollment (e.g., CNA, LVN, RN, Allied Health) by 5% annually.
 - iii) Number of students completing work-based learning experiences (e.g., clinical rotations, apprenticeships).
 - iv) Number of new training programs created in high-demand fields (e.g., behavioral health, nursing, dental, physical therapy).
 - v) 5% increase in underrepresented populations entering the healthcare workforce.
 - vi) Graduate job placement rate within 6 months of program completion.
 - b) Employer Engagement & Industry Alignment
 - i) Strengthen partnerships with healthcare employers to ensure training aligns with evolving needs
 - ii) Increase the number of active employer partners engaged in advisory boards or curriculum development.
 - iii) Improve the frequency of employer feedback loops (surveys, focus groups, quarterly meetings).
 - iv) Increase percentage of programs with curriculum updated in collaboration with industry input
 - v) Increase the number of internships, externships, or preceptorships offered annually by local employers
 - c) Equity and Access in Healthcare Careers

- i) Promote inclusive pathways into healthcare careers for underserved and rural populations
 - ii) Increase in scholarship or support services provided to disadvantaged students
 - iii) Improve the participation rate in bridge programs or stackable credential pathways
 - iv) Increase the number of students in remote/rural areas accessing hybrid or online healthcare education
 - v) Identify outcomes data disaggregated by race, ethnicity, gender, and socioeconomic status.
- d) Regional Capacity Building
- i) Enhance healthcare training infrastructure across the region
 - ii) Increase the number of new simulation labs or mobile training units
 - iii) Increase the number of high schools and community colleges implementing healthcare career pathways
 - iv) Improve the regional capacity to train and certify key roles (e.g., number of available clinical placements).
 - v) Establish public-private partnerships established to invest in training infrastructure.
- e) Retention and Advancement in the Healthcare Workforce
- i) Support professional growth and retention of current healthcare workers
 - ii) Number of incumbent worker upskilling programs launched
 - iii) Improve number of participants advancing to higher-skill positions or roles.
 - iv) Decrease in turnover rates among healthcare staff (tracked via partner organizations).
 - v) Satisfaction rate of participants in continuing education or career ladders.
- f) Community Health Outcomes
- i) Align workforce strategies with community health needs and outcomes
 - ii) Improvement in local health indicators (e.g., access to care, vaccination rates, chronic disease management).
 - iii) An increase of community health workers or public health professionals trained and deployed
 - iv) Increase percentage of healthcare workforce residing in and serving underserved communities.
 - v) Reduction in vacancy rates in critical care positions across the region

Dependencies and Challenges

- 1) The successful implementation of the Healthcare Industry sector strategies relies on several key dependencies and the ability to address significant challenges. While there are significant opportunities to grow the healthcare training, workforce, and create sustainable jobs, the complexity of these efforts necessitates innovative approaches and robust partnerships. Addressing these dependencies and challenges requires proactive planning, effective stakeholder coordination, and comprehensive resource orchestration. By anticipating potential obstacles and dependencies, the Sierra region can develop contingency plans to stay on track and ensure long-term success. Ensuring timely action, minimizing risks, and maintaining flexibility will be key to advancing this sector and positioning the Sierra region as a leader in the healthcare industry.
- 2)
 - a) **Dependencies:**

i) Industry Engagement

- (1) Healthcare employers and industry leaders must be actively involved in identifying skill gaps, shaping curriculum, and offering clinical placements.
- (2) Ongoing dialogue ensures that workforce programs remain responsive to real-world labor market demands.

ii) Education & Training Providers

- (1) Community colleges, universities, adult education, and K-12 systems need to align curriculum with industry needs.
- (2) Dependencies include faculty capacity, program funding, and access to clinical training sites.

iii) Workforce Development System

- (1) Collaboration with workforce boards, career centers, and job placement agencies is essential to recruit, train, and connect talent to jobs.
- (2) Successful strategies depend on shared data systems, coordinated outreach, and wraparound services (e.g., transportation, childcare).

iv) Supportive Policies and Funding

- (1) Federal, state, and local funding streams and policy frameworks must support training, apprenticeships, and scope-of-practice flexibility.
- (2) Dependencies include regulatory support, reimbursement policies, and grants for workforce innovation.

v) Data and Labor Market Intelligence

- (1) Reliable, up-to-date labor market data and student outcome tracking are crucial for decision-making.
- (2) Stakeholders depend on cross-agency data sharing, program evaluation, and real-time feedback loops.

vi) Community-Based Organizations (CBOs)

- (1) CBOs help engage and support underserved populations through culturally relevant outreach, case management, and basic needs support. They are critical partners in ensuring equitable access to training and careers in healthcare.

vii) Technology & Infrastructure

- (1) Implementation relies on access to simulation labs, virtual training tools, and telehealth platforms. Coordination of Electronic Health Records in the region is essential to allow healthcare facilities to share patient information to ensure continuity of care and a better patient experience.

- (2) Digital literacy and broadband access are also vital—especially in rural or underserved areas.

viii) Inter-Sector Collaboration

- (1) SHIP will be the primary convenor of the regional collaborations and partnerships
- (2) Healthcare strategies benefit from partnerships across sectors such as housing, education, public health, and economic development.
- (3) These partnerships support social determinants of health and help build a comprehensive, resilient workforce ecosystem.

b) **Challenges**

i) Workforce Shortages and Burnout

- (1) Ongoing vacancies in critical roles such as nurses, behavioral health specialists, physical therapy, and medical assistants.
- (2) High turnover and burnout, especially post-COVID, leading to loss of experienced professionals.
- (3) Aging workforce, with many nearing retirement and not enough new workers entering the pipeline.
- (4) A lack of broadband internet in the region decreases the opportunities for online educational training and the ability for patients to receive telehealth care.

ii) Limited Training Infrastructure

- (1) Insufficient clinical placement sites, particularly in rural or underserved regions.
- (2) Capacity constraints at community colleges and vocational programs (e.g., lack of faculty, space, or simulation labs).
- (3) Burdensome regulatory requirements for program approval and clinical partnerships.

iii) Misalignment Between Training and Industry Needs

- (1) Lag time in updating curriculum to reflect real-time labor market demands and evolving scopes of practice.
- (2) Inconsistent employer engagement, making it hard to align programs with current skill needs.
- (3) Lack of standardized career pathways across institutions and employers, especially in allied health.

iv) Barriers to Entry for Students

- (1) Financial barriers, including tuition, books, uniforms, transportation, and lost wages during training.
 - (2) Academic preparedness gaps, especially in math, science, and ESL.
 - (3) Life responsibilities (e.g., childcare, eldercare, work) limit participation in full-time programs.
- v) Geographic and Equity Gaps
- (1) Rural and frontier communities struggle to attract and retain healthcare professionals.
 - (2) Disparities in access to healthcare careers among low-income, minority, and first-generation students.
 - (3) Lack of bilingual and culturally competent staff to serve diverse populations.
- vi) Data and Policy Limitations
- (1) inconsistent data collection on workforce outcomes and regional job openings.
 - (2) Slow policy adaptation to expand scopes of practice or introduce new roles like Community Health Workers.
 - (3) Funding silos that restrict integrated approaches across education, workforce, and healthcare systems.
- vii) Retention and Career Advancement Challenges
- (1) Limited opportunities for career mobility and upskilling in entry-level roles.
 - (2) Credential stacking pathways are often unclear or uncoordinated.
 - (3) Employers may underinvest in incumbent worker training, especially in small or rural facilities.
 - (4) Lack of retention incentive packages such as loan forgiveness, housing stipends, and rural bonuses

Activation Plan: Strategy One

Strategy: Develop a shared rural California advocacy campaign to increase funding and access to rural healthcare (particularly for low-income and disinvested communities) and increase region-wide awareness of local health needs and wellness initiatives			
Tactic & Overview	Task	Responsible Party	Timeline
<p>Tactic 1 Establish a Sierra Healthcare Industry Partnership (SHIP)</p> <p>Purpose: Healthcare Industry Working group will bring partners of the industry together to identify healthcare needs in the region</p> <ul style="list-style-type: none"> a) Program Design: Collaborate with industry leaders to determine workforce and healthcare needs in the region b) Leadership: Sierra Healthcare Industry Partnership c) Costs: Estimated \$20k state grants and private sector investment. d) Metrics: Create quarterly working groups and semi-annual conferences. Improve healthcare resources throughout the region. Number of individuals reached by health campaign 	Task 1: Create a healthcare industry working group data base of participants	Sierra Healthcare Industry Partnership	12-18 Months
	Task 2: Schedule meetings on a regular cadence	Sierra Healthcare Industry Partnership	Quarterly
	Task 3: Work with SHIP stakeholders to plan and implement a public health campaign to enhance accessibility in the region	Sierra Healthcare Industry Partnership	18 Months
	Task 3: Create a website that will provide access to Activation Plan, Regional Health Needs Analysis, and any other pertinent documents for other agencies to use as a resource	Sierra Healthcare Industry Partnership	18 Months

<p>Tactic 2 Identify gaps in healthcare needs for the Sierra region, such as limited access to long-term care facilities, comprehensive reproductive health, and behavioral health services</p>	<p>Task 1: Perform a regional healthcare needs analysis based on individual counties health needs assessment.</p>	<p>Sector navigator/consultant</p>	<p>Ongoing</p>
<p>a. Purpose: Understanding the gaps in healthcare will help to provide a roadmap to allocate resources</p>	<p>Task 2: Conduct stakeholder analysis to determine individual county needs</p>	<p>Sector navigator/consultant</p>	<p>Ongoing</p>
<p>b. Program design: Engage stakeholders from each county and review health needs assessments</p> <p>c. Team: MLJT, Dr. Jennifer Burrows</p> <p>d. Costs: \$75,000-\$125,000</p> <p>e. Potential metrics: Completion of regional health analysis. Develop partnerships with stakeholders to meet the needs in the region. Number of grants applied for and received.</p>	<p>Task 3: Identify state, federal, private funding to fill the identified gaps in the region</p>	<p>Sector navigator/consultant</p>	<p>Ongoing</p>

	Task 4: Align with other rural counties in collaboration with the Sierra Health Industry Partnership (SHIP) to create a stronger alliance to obtain grant funding.	Sector navigator/consultant	Ongoing
<p>Tactic 3: Align with other California rural regions to develop a shared understanding of rural healthcare challenges and opportunities</p> <p>a. Purpose: Aligning with other regions will help to bring additional resources and partners into the Sierra region.</p> <p>b. Program design: Collaboration with regional partners within the state and seek to collaborate on funding opportunities</p> <p>c. Team: MLJT/SHIP</p> <p>d. Costs: \$50,000-\$100,000K</p> <p>e. Potential metrics: Secure partnerships in other regions. Identify potential collaborations for additional funding sources</p>	Task 1: Develop a unified policy advocacy program	Sector navigator/consultant	12-18 Months
	Task 2: Share best practices and Innovate Models	Sector navigator/consultant	Ongoing
	Task 3: Convene a statewide/regional rural health collaborative network	Sector navigator/consultant	Ongoing

<p>Tactic 4: Market existing and new public health awareness and education campaigns including wellness initiative</p> <p>a. Purpose: To amplify the visibility, reach, and impact of public health and wellness campaigns</p> <p>b. Program design: Create initiatives to improve regional health outcomes</p> <p>c. Team: Regional Collaboration with local public health agencies, CBO's, hospitals, tribal organizations, and county government</p> <p>d. Costs: \$80,000-\$120,000</p> <p>e. Potential metrics: Create public health awareness in region. Improved patient health outcomes. Number of people reached.</p>	<p>Task 1: Partner with community-based organizations and schools</p>	<p>Industry Sector Navigator, EDO, WDB</p>	<p>Ongoing</p>
	<p>Task 2: Collaborate with public health departments to create targeted campaigns to address public health issues</p>	<p>Industry Sector Navigator, CBO's, public health departments</p>	<p>Ongoing</p>
	<p>Task 3: Create a multilingual and culturally responsive messaging campaign</p>	<p>Industry Sector Navigator, CBO's, public health departments</p>	<p>12-18 Months</p>
<p>Tactic 5: Evaluate students' mental health challenges in schools and work with educators, counselors, and mental health professionals to develop comprehensive strategies for addressing</p>	<p>Task 1: Inventory and map existing school based mental health resources</p>	<p>Industry sector coordinator/ Educational Institutions,</p>	<p>6-12 Months</p>

<p>these needs within the school environment</p> <p>a. Purpose: To identify and understand the scope of student mental health challenges and create a unified, evidence-based approach</p> <p>b. Program design: Engage regional advocacy, participate in regional mental health initiatives.</p> <p>f. Team: Local educational institutions/Sector navigator</p> <p>c. Costs: Low Cost (Staff Time) and leveraging Tactic 4 existing resources.</p> <p>d. Potential metrics: New policies developed, culturally appropriate educational materials, creation of sustainable programs</p>	<p>Task 2: Develop and Distribute Culturally and Linguistically Relevant Educational Materials</p>	<p>Industry sector coordinator/ Educational Institutions,</p>	<p>18-24 Months</p>
	<p>Task 3: Identify and Pursue Sustainable Funding Sources</p>	<p>Industry sector coordinator/ Educational Institutions,</p>	<p>Ongoing</p>

Activation Plan: Strategy Two

Strategy: Create upskilling and upward mobility pathways for local workers to move into high wage healthcare jobs, lowering dependency on out-of-area workers.

Tactic & Overview	Task	Responsible Party	Timeline
<p>Tactic 1: Expand community college offerings to include nursing and healthcare certification programs to meet the growing demand for healthcare workers.</p> <p>a. Purpose: Create needed training programs to support the workforce needs and upskill current employees</p> <p>b. Program design: Convene workgroups to identify need programs, develop mentoring and support the local workforce.</p> <p>c. Team: Workforce stakeholders, educational partners, industry sector coordinator</p> <p>d. Costs: Utilization of existing K-16 funding and leverage grant opportunities. \$500,000-\$1,000,000.</p> <p>e. Potential metrics: Programs will be develop to meet the local workforce needs. Upskilling will occur to provide higher paying jobs to support the region. New</p>	Task 1: Create advisory panels with local workforce partners and educational systems to identify needed training programs.	Industry Sector Coordinator	6-12 Months
	Task 2: Utilize K-16 grant funds to support high school healthcare career pathways.	Industry sector coordinator/educational partners	6-8 Months
	Task 3: Partner with local workforce partners to create precepting/mentoring/internship programs for students	Industry sector coordinator/educational partners/workforce stakeholders	Ongoing
	Task 4: Establish a rural workforce mapping and planning tool	Industry sector coordinator/educational partners/workforce stakeholders	Ongoing

students enrolled in training programs.			
<p>Tactic 2: Expand and expedite educational offerings related to broad spectrum of healthcare careers.</p> <p>a. Purpose: Creating more educational programs for various healthcare careers will help support workforce needs and expand healthcare offerings in the region.</p> <p>b. Program design: Create educational course offering to support local workforce needs</p> <p>c. Team: Sector coordinator, educational partners, workforce partners</p> <p>d. Costs: \$500,000-\$1,000,000</p> <p>e. Potential metrics: New course offerings will be provided in the region.</p>	Task 1: Meet with local workforce partners to determine needs in the region. Analyze data to identify shortages in key healthcare sectors.	Healthcare sector coordinator/workforce partners	6-12 Months/Ongoing
	Task 2: Partner with local community colleges to support curriculum development to meet the local workforce needs.	Industry sector coordinator/educational partners	6-12 Months/Ongoing
	Task 3: Identify funding sources to support curriculum development, equipment, and instructors to support new educational course offerings.	Industry sector coordinator/educational partners	Ongoing
Tactic 3: Enhance and expand high school career technical education pathways focusing on healthcare professions to provide early exposure and training opportunities	Task 1: Strengthen Career Awareness & Exploration by hosting career fairs, guest speakers, and mentoring programs	Consultants, Industry leaders, healthcare partners, educational partners	Ongoing

<p>a. Purpose: To create equitable, accessible, and high-quality healthcare career pathways for high school students through enhanced CTE programs that build awareness, interest, and foundational skills in healthcare professions, thereby supporting workforce development and postsecondary success.</p> <p>b. Program design: Leverage and develop partnerships, develop an advocacy strategy, highlight regional priorities create CTE programs to support the needs of students and the workforce partners</p> <p>c. Team: Workforce Boards, industry leaders, academic institutions, tribal organizations, healthcare organizations</p> <p>d. Costs: \$200,000-\$400,000</p> <p>e. Potential metrics: Increased CTE programs. Increased enrollment, number of new students enrolled</p>	<p>Task 2: Establish Dual Enrollment & Articulation Agreements</p>	<p>Consultants, Industry leaders, healthcare partners, educational partners</p>	<p>6-12 Months</p>
	<p>Task 3: Collaborate with hospitals, clinics, and public health agencies to offer job shadowing, internships, and clinical observation hours for high school students</p>	<p>Consultants, Industry leaders, healthcare partners, educational partners</p>	<p>Ongoing</p>

<p>Tactic 4: Identify and develop talent pipelines and foster partnerships between the healthcare industry and secondary schools.</p> <p>a. Purpose: To strengthen the future healthcare workforce by creating intentional, collaborative talent pipelines that connect secondary education with healthcare industry needs, ensuring students are informed, prepared, and aligned with high-demand career opportunities.</p> <p>b. Program design: Create comprehensive, student-centered pathways that integrate academic instruction, technical training, and real-world experience.</p> <p>c. Team: Workforce Boards, Academic partners, industry leaders, Healthcare organizations</p> <p>d. Costs: \$150,000-\$300,000</p> <p>e. Potential metrics: Formal partnerships will be established to support local academic training programs, number of students enrolling in new academic programs, Number of new pathways</p>	<p>Task 1: Identify and formalize partnerships with academic institutions, research organizations, and industry leaders</p>	<p>Consultants, Industry leaders, healthcare partners, educational partners</p>	<p>6-12 Months</p>
	<p>Task 2: Conduct Regional Workforce and Education Alignment Assessments</p>	<p>Consultants, Industry leaders, healthcare partners, educational partners</p>	<p>6-12 Months</p>
	<p>Task 3: Promote Employer Investment in youth talent through shadowing, internships, preceptorships, and mentoring.</p> <p>Task 4: Support recruitment and retention strategies to keep local talent within the region</p>	<p>Consultants, Industry leaders, healthcare partners, educational partners</p>	<p>Ongoing</p>

Activation Plan: Strategy Three

Strategy: Address facility shortages using cost-saving models like shared resources, collaborative agreements between healthcare providers, mobile health, and creating hub and spoke models between facilities to attract and retain essential services and providers to the region.

Tactic & Overview	Task	Responsible Party	Timeline
<p>Tactic 1: Develop specified partnerships for access to highly specialized care needs, such as cancer, women’s health, labor and delivery, cardiology, and behavioral health.</p> <p>a) Purpose: To increase community access to specialized healthcare services by establishing strategic partnerships with expert providers in high-need areas such as oncology, women’s health, cardiology, and behavioral health, thereby improving patient outcomes, care continuity, and local workforce readiness.</p> <p>b) Program design: Identify, formalize, and leverage partnerships with specialty healthcare providers to fill gaps in local care access</p>	<p>Task 1: Identify Priority Areas for Specialized Care</p>	<p>Consultants, Industry leaders, healthcare partners, educational partners, tribal partners</p>	<p>6-12 Months/Ongoing</p>
	<p>Task 2: Forge Partnerships with Specialty Providers and facilities to share services and providers.</p> <ul style="list-style-type: none"> Partner with larger hospitals to provide telehealth specialty visits 	<p>Consultants, Industry leaders, healthcare partners, educational partners, tribal partners</p>	<p>6-12 Months/Ongoing</p>
	<p>Task 3: Integrate Services into Local Settings</p> <ul style="list-style-type: none"> Expand use of mobile clinics and telehealth platforms to reach rural and underserved populations. Support an electronic health records platform to be shared by hospitals and clinics in the region. 	<p>Consultants, Industry leaders, healthcare partners, educational partners, tribal partners</p>	<p>18-36 Months and Ongoing</p>

<p>c) Team: Workforce Boards, consultant, healthcare partners, educational partners</p> <p>d) Costs: \$500,000-\$1,000,000</p> <p>e) Potential metrics: Improve the number of specialty services offered in the Sierra region.</p>			
<p>Tactic 2: Establish Joint Powers Authorities and memorandums of Understanding to promote collaboration between counties and healthcare facilities. This collective effort will improve mental health services and share resources for regional specialty care, ensuring all patients have access to necessary care.</p> <p>a. Purpose: To strengthen regional collaboration among counties and healthcare facilities through the establishment of Joint Powers Authorities (JPAs) and formal Memorandums of Understanding (MOUs), with the goal of enhancing access to mental health and specialty care services through coordinated governance, shared resources, and streamlined service delivery.</p>	<p>Task 1: Map Regional Service Gaps and Resource Needs</p> <ul style="list-style-type: none"> • Conduct a regional needs assessment focusing on mental health and specialty care access. • Identify redundancies, underserved populations, and opportunities for service consolidation. 	<p>Consultants, Industry leaders, healthcare partners, educational partners, tribal partners, government partners</p>	<p>6-12 Months/Ongoing</p>
	<p>Task 2: Coordinate Funding and Grant Strategies</p> <ul style="list-style-type: none"> • Pursue shared funding opportunities (e.g., state behavioral health grants, federal rural health programs). • Develop pooled funding models for shared staffing, facilities, and technology. 	<p>Consultants, Industry leaders, healthcare partners, educational partners, tribal partners, government partners</p>	<p>Ongoing</p>
	<p>Task 3: Develop Legal and Governance Structures</p> <ul style="list-style-type: none"> • Work with legal counsel to draft Joint Powers Agreements and MOUs. 	<p>Consultants, Industry leaders, healthcare partners, educational partners, tribal partners, government partners</p>	<p>12-18 Months</p>

<p>b. Program design: The program will establish a regional governance framework such as a Joint Powers Authority that enables multiple counties and healthcare providers to jointly plan, fund, and deliver mental health and specialty care services</p> <p>c. Team: MLJT, Governing bodies, mental health partners, sector coordinator</p> <p>d. Costs: Low Cost – Staff Time, \$50,000-\$100,000</p> <p>Potential metrics: Formalized JPAs and MOUs established, number of cross-county or multi-agency initiatives launched, frequency of steering committee meetings and interagency planning sessions</p>	<ul style="list-style-type: none"> Establish decision-making authority, fiscal management processes, and dispute resolution mechanisms. 		
<p>Tactic 3: Expand mobile health and support services to reach underserved rural areas and populations with limited access to healthcare facilities, particularly on the East side.</p> <p>a. Purpose: To reduce healthcare disparities by expanding mobile</p>	<p>Task 1: Design and Equip Mobile Health Units</p> <ul style="list-style-type: none"> Procure and outfit vans or buses with exam space, diagnostics, internet connectivity, and telehealth capabilities. Develop mobile teams with medical, behavioral health, and support personnel. 	<p>Industry leaders, healthcare partners, educational partners, tribal partners, government partners</p>	<p>24-36 Months/Ongoing</p>

<p>health and support services that deliver timely, culturally responsive care to underserved and geographically isolated communities ensuring equitable access to preventative, primary, and behavioral health services.</p> <p>b. Program design: The program will deploy mobile clinics and outreach teams to deliver health and wellness services directly to underserved communities.</p> <p>c. Team: MLJT, CSEDD, Industry Leaders, Community-Based Organizations</p> <p>d. Costs: \$500,000-\$1,000,000</p> <p>e. Potential metrics: Number of mobile clinic visits conducted per month/quarter, number of unique patients served in rural and East side communities, percentage increase in healthcare access points in underserved ZIP codes, number of service locations added through mobile deployment</p>	<p>Task 2: Partner with Local Organizations</p> <ul style="list-style-type: none"> • Collaborate with community-based organizations, tribal health programs, public health departments, and faith-based institutions to enhance outreach and trust. • Leverage existing referral networks for continuity of care. 	<p>Industry leaders, healthcare partners, educational partners, tribal partners, government partners</p>	<p>Ongoing</p>
	<p>Task 3: Ensure Culturally Competent, Bilingual Services</p> <ul style="list-style-type: none"> • Recruit staff who reflect the communities served. • Offer health education and materials in multiple languages. 	<p>Industry leaders, healthcare partners, educational partners, tribal partners, government partners</p>	<p>Ongoing</p>

<p>Tactic 4: Identify and develop talent pipelines and foster partnerships between the healthcare industry and secondary schools.</p> <p>a. Purpose: To build a strong and sustainable healthcare workforce by aligning secondary education programs with industry needs through intentional partnerships. This ensures early exposure, relevant skill-building, and seamless transitions from high school to healthcare careers or postsecondary education.</p> <p>b. Program design: The program is designed to create structured, industry-informed career pathways beginning in high school. It focuses on early career exploration, hands-on learning, certifications, and dual enrollment opportunities</p> <p>c. Team: MLJT, educational and workforce partners</p> <p>d. Costs: Low Cost/Staff Time</p> <p>e. Potential metrics: Number of high schools with established healthcare CTE pathways, percentage increase in student</p>	<p>Task 1: Develop Healthcare-Focused CTE Pathways</p> <ul style="list-style-type: none"> • Launch or enhance career technical education (CTE) programs in fields such as nursing, medical assisting, public health, and behavioral health. • Embed industry-recognized credentials and soft skills training. 	<p>Industry leaders, healthcare partners, educational partners, tribal partners</p>	<p>6-12 Months/Ongoing</p>
	<p>Task 2: Expand Dual Enrollment and Articulation Agreements</p> <ul style="list-style-type: none"> • Partner with community colleges and universities to offer dual credit or early college coursework. • Ensure that high school programs seamlessly articulate into postsecondary healthcare programs. <p>□</p>	<p>Industry leaders, healthcare partners, educational partners, tribal partners</p>	<p>6-12 Months/Ongoing</p>
	<p>Task 3: Promote Career Awareness and Student Engagement</p> <ul style="list-style-type: none"> • Host career days, panels with healthcare professionals, and interactive workshops. • Provide students with individualized academic and career planning tools. 	<p>Industry leaders, healthcare partners, educational partners, tribal partners</p>	<p>Ongoing</p>

<p>enrollment in healthcare-related courses, number of dual enrollment courses offered in healthcare fields, number of students earning industry-recognized certifications</p>			
<p>Tactic 5: Explore the benefits and challenges of integrating tribal cultural practices into modern healthcare and how traditional knowledge can best serve diverse community needs in mainstream healthcare.</p> <p>a) Purpose: To promote culturally responsive and equitable healthcare by exploring how tribal cultural practices and traditional knowledge can be respectfully integrated into mainstream healthcare systems. This approach aims to enhance trust, improve health outcomes, and address the unique needs of Indigenous and diverse communities.</p> <p>b) Program Design: The program will engage tribal leaders, traditional healers, healthcare providers, and community members in a collaborative</p>	<p>Task 1: Facilitate Community and Tribal Consultations</p> <ul style="list-style-type: none"> • Host listening sessions with tribal elders, cultural practitioners, and community members. • Document perspectives on healthcare access, cultural safety, and integration opportunities. 	<p>Industry leaders, healthcare partners, educational partners, tribal partners</p>	<p>Ongoing</p>
	<p>Task 2: Build Partnerships with Tribal and Healthcare Entities</p> <ul style="list-style-type: none"> • Establish MOUs between tribal organizations and healthcare systems to formalize collaboration. • Develop shared goals and respectful communication protocols. 	<p>Industry leaders, healthcare partners, educational partners, tribal partners</p>	<p>12-18 Months</p>

<p>exploration of how Indigenous healing practices and cultural values can complement Western medicine.</p> <p>c) Team: Indian Health Services and Tribal Clinics/Travis Nabahe for contracts and tribal priorities</p> <p>d) Costs: \$150,000</p> <p>e) Potential Metrics: Number of traditional practices integrated or piloted, number of healthcare sites with designated spaces for cultural or spiritual practices</p>	<p>Task 3: Develop Provider Education and Cultural Competency Training</p> <ul style="list-style-type: none"> • Create training modules for healthcare staff on tribal history, cultural healing practices, and respectful engagement. 	<p>Industry leaders, healthcare partners, tribal partners</p>	<p>24-36 Months/Ongoing</p>
<p>Tactic 6: Develop and enhance technological resources</p> <p>a) Purpose: To create a more robust technological infrastructure to support providers for continuity of patient care.</p> <p>b) Program Design: Partner with local health care facilities to</p>	<p>Task 1: Support regional partnerships for a centralized electronic health records to provide continuity of care of patients between facilities</p> <ul style="list-style-type: none"> • Collaborate with regional providers to determine a centralized Electronic Health Records to support collaboration and continuity of care between facilities 	<p>Industry leaders, healthcare partners, tribal partners</p>	<p>12-24 months-ongoing</p>

<p>collaborate on a shared technological infrastructure.</p> <p>c) Team: Toiyabe Indian Health Services, Mammoth Hospital, Northern Inyo Hospital, Southern Inyo Hospital, Adventist, MAC, Chicken Rancheria</p> <p>d) Costs: Unknown</p> <p>e) Potential Metrics: Capacity for facilities to share patient information, number of telehealth platforms, the development of a technical assistance program.</p>	<p>Task 2: Improve telehealth infrastructure</p> <ul style="list-style-type: none"> • Create telehealth access throughout region • Develop partners through a hub-and-spoke model to provide access through telehealth to larger facilities for specialty services 	<p>Industry leaders, healthcare partners, tribal partners</p>	<p>12-24 months-ongoing</p>
	<p>Task 3: Identify opportunities for group purchasing and shared management of tech resources.</p> <ul style="list-style-type: none"> • Coordinate with regional providers to identify opportunities for group purchasing and sharing of resources 	<p>Industry leaders, healthcare partners, tribal partners</p>	<p>12-24 months-ongoing</p>