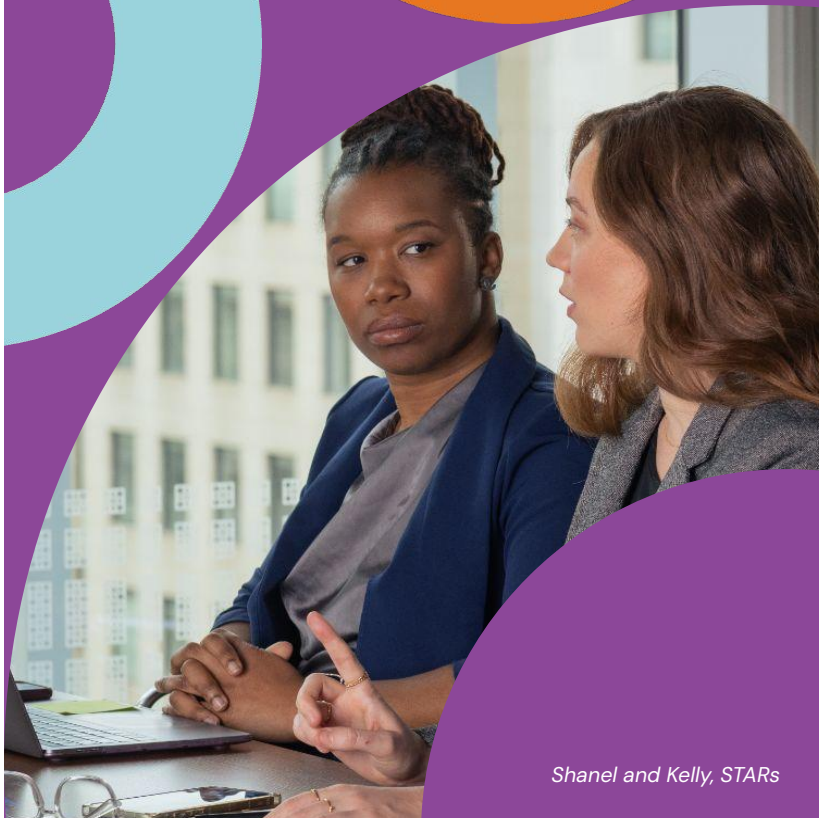
CASE STUDY

Building Healthcare Workforce Infrastructure That Lasts

What government leaders can learn from New York's utilization of the 1199SEIU Training & Employment Funds (TEF)

Opportunity @Work



Shanel and Kelly, STARs

Scaling proven workforce infrastructure: New York's investment in healthcare career pathways

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Healthcare employers across New York couldn't find enough workers and the shortage hit hardest at safety-net providers that serve Medicaid patients.

There were plenty of New Yorkers who could do this work, but they lacked pathways in.

The problem wasn't a lack of training. It was a lack of infrastructure to make training work.

Employers and training providers rarely planned together, so programs didn't match open jobs. Workers had no steady support to cover tuition or lost wages. And no one guided them from one step to the next.

In 2024, New York amended its existing Medicaid waiver to close the gap. Part of it funded career pathways programs with one goal: build a reliable pipeline of frontline health and social care workers.

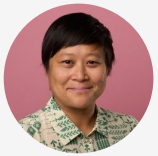
This case study shows how New York used 1199SEIU TEF to:

1. **Fill urgent shortages fast.** The state directed Medicaid waiver dollars to TEF with a clear target: recruit and train 6,000 New Yorkers for the 13 fastest-growing healthcare occupations by 2027.
2. **Test the innovative worker-centered model.** The state required TEF to serve non-union workers and employers, proving the approach could work for anyone.
3. **Scale what already worked.** Rather than build a new system, the state invested in TEF's existing infrastructure: co-governance, stable funding and career navigation.

What is 1199SEIU TEF?

A labor-management partnership that trains healthcare workers. Union and employer leaders govern it together, and employer contributions set in union contracts fund it.

The team behind the work



LIVIA LAM
Director
1199SEIU TEF



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THE PROBLEM

Healthcare has a workforce infrastructure gap.

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Across the country, healthcare employers face persistent vacancies, turnover, an aging workforce, and growing demand for care. At the same time, millions of workers—including workers Skilled Through Alternative Routes (STARs)—have the skills and potential to enter or advance in healthcare but need help navigating required costs, credentials, and transitions.

Healthcare employers face



- Persistent shortages and expensive vacancies
- Turnover and an aging workforce
- Training that does not always reflect demand
- Growing demand for care
- Rapid technological change

Workers face



- Limited visibility into healthcare careers
- Training costs and participation barriers
- Complex education, licensing, and hiring systems
- Few supported pathways into good jobs
- Uncertain opportunities for advancement

THE NORMAL RESPONSE

More training programs, without the infrastructure to turn training into careers.

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Enrollment and completion alone do not tell us whether workers gain new skills or advance, nor whether employers find the talent they need.

A program approach has a short-term horizon:

- Funds short-term training programs
- Competes for annual grants
- Success measured by enrollment
- Employers advise programs
- Providers operate separately
- Support ends at completion

VS.

An infrastructure approach is more durable:

- Long-term workforce partnerships
- Stable, predictable investment
- Success measured by completion, job placement, good wages, and advancement
- Employers and workers share decision-making power
- One intermediary coordinates the system
- Navigation continues into employment and advancement

The result: More activity. Transitory workforce capacity.

Success requires measuring hiring and advancement alongside completion—and sustained funding and staffing to help workers navigate the path from training to employment and career growth

THE SOLUTION

The 1199SEIU TEF Model

Three Elements that Work as One System

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Remove one leg of the stool and the others weaken.

Co-governance gives workers the security to attempt career moves they'd otherwise avoid.

Stable funding allows staff to plan long-term support.

Deep navigation turns that support into actual completion and placement. Most workforce programs treat these as separate best practices. TEF houses them in one system that drives results.



Shared Governance

A 50/50 labor-management board where workers and employers share real decision-making power. Frontline staff surface what's broken and fix it directly with employers in a structured, safe space. Workers have actual governance authority.

Stable Funding

Employers **dedicate a fraction of their payroll budget** to staff training. No annual appropriations scramble. No waiting for WIOA funding that will never cover demand. Everyone who benefits pays in. Everyone defends the fund because they see the value.

Whole Journey Navigation

400 staff means no one walks through a door alone.

Wraparound supports cover participation costs: transit, notary fees, tutoring, counseling. At-risk identification systems catch people before they drop out. Career navigation continues until job placement*.

* Services vary by program, funding source and depend on individual collective bargaining agreements and supplemental grant funding.

CASE IN POINT

New York State leveraged 1199SEIU TEF's proven program to meet its workforce needs

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About TEF

1199SEIU TEF is a neutral intermediary. State of NY leveraged the TEF model, turning State investment into training that employers will hire from.

The core role of TEF:

- Gives workers and employers equal say through a 50/50 labor-management board
- Finds the jobs employers actually need filled by talking with them every day
- Coordinates training, support, and placement in one system
- Places graduates with both union and non-union employers

How it worked:

- New York State directed over $600M of its Medicaid waiver dollars to workforce intermediary organizations, including TEF. To-date, TEF has enrolled over 8,000 New Yorkers that include over 6,000 from the community across 13 healthcare occupations
- **1199SEIU TEF provided the training model**
- **The State's program, Career Pathways Training (CPT), was built on that model**



> The Governor understood that scaling what already works is faster than building from scratch. We had 60 years of employer relationships and operational infrastructure. She chose to leverage that instead of starting a new program from zero."

HARNEEN CHERNOW

Director of Education
1199SEIU TEF

TEF's model sought to answer these core infrastructure questions:

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1	Who has the real authority to define the skills and pathways employers need?
2	Who has the real authority to define the skills and pathways employers need?
3	What are considerations for after a grant ends?

Career Pathways Training: the model in action

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Career Pathways Training (CPT) is how TEF applied its three core elements to train non-union New Yorkers outside a collective bargaining agreement.

Most programs: Advisory committees give input. Administrators decide.
TEF: Workers and employers co-govern. Frontline staff fix what's broken directly with employers in a safe, structured space.

That's real collaborative decision-making power, not just advice.

Here's how it works:

MATCHED TRAINING TO REAL EMPLOYER DEMAND	REMOVED ENROLLMENT BARRIERS	BUILT TWO PATHWAYS SIMULTANEOUSLY	MONITORED WHO WAS AT RISK BEFORE THEY QUIT	COORDINATED PLACEMENT WITH BOTH UNION AND NON-UNION EMPLOYERS
TEF staff talk to employers every day. They didn't guess which occupations were critical—they knew. The 13 fastest-growing roles came from direct employer conversations.	Participation costs stopped people before training started. TEF generally covered them: notary fees, coordination, tutoring supplies. Removed the cost of entry.	• New to healthcare pipeline: People entering healthcare careers for the first time (6,000+ enrolled) • Advancement pipeline: Incumbent healthcare workers training for higher-wage roles (NP, PA, RN, LPN, etc.) Running both let them reach 8,300+ enrollees instead of 6,000.	At-risk identification system catches people early. Tutoring, counseling, job intake navigation kick in before dropouts happen. Result: far fewer people leave mid-program.	TEF knows healthcare employers across NY. They placed graduates into both union-contracted hospitals and non-union community care settings, proving the model scales beyond collective bargaining.

Deep Dive on Innovation: the cost, who pays, and mutual benefit

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Most programs: Traditional workforce funding depends on annual appropriations and competitive grants that shift with political priorities.
TEF: Employers dedicate a fraction of their payroll to create a stable, dedicated funding stream. No annual scramble for money. No funding cliffs when grants end.

Real Costs

- Typical workforce grants report $3,000-$7,000 per person—excluding wraparound support, job navigation, and staff follow-up
- TEF's real cost includes participation costs covered, tutoring, counseling, and active job placement support
- It costs more because it does more

How it's funded

- TEF employers allocate a modest percentage of payroll to the fund, which builds the underlying training infrastructure
- The State of NY dedicated additional funds to quickly scale that infrastructure for critical roles

Why employers gladly pay the contribution

- Employers who pay in directly see the value: workers complete, get hired, stay in jobs
- Employers get the exact skills they need for the critical roles they're trying to fill
- They have a seat at the table through labor-management oversight
- A grant-funded program has no constituency. This one does.



> "It costs money to work. Transit, childcare, notary fees—these are important costs people factor that we strive to cover so they can actually participate."

LIVIA LAM

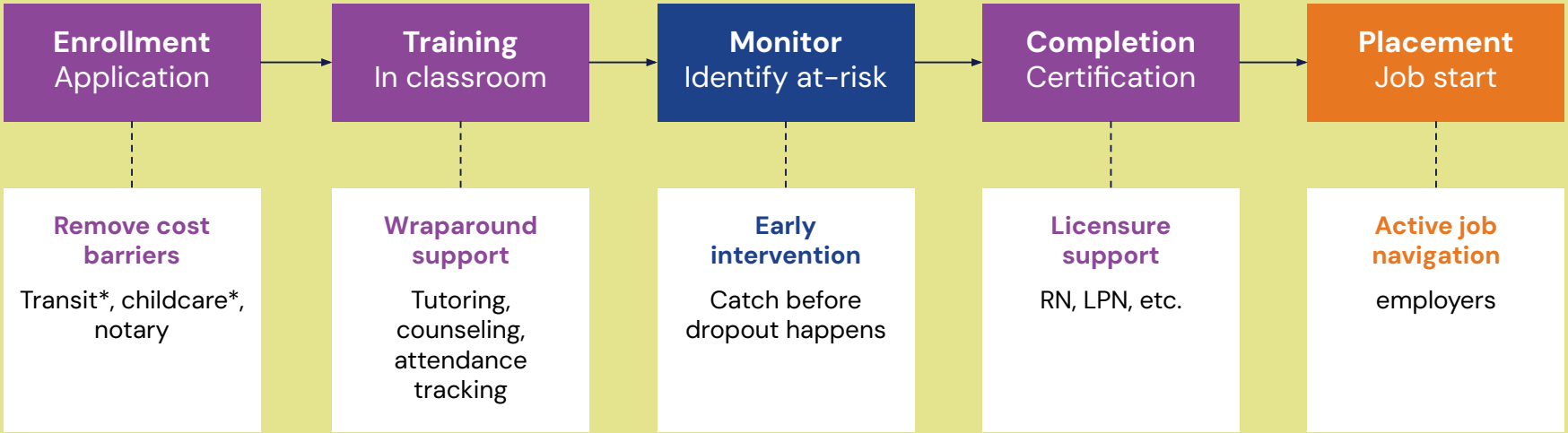
Director
1199SEIU TEF

Deep Dive on Innovation: Career navigation and what sets TEF apart

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Most programs: Most programs hand people off after training ends. They finish their GED and navigate the job market alone. They finish their credential and apply for a license all by themselves.
TEF: TEF keeps walking with them through the whole journey, from GED through job placement. That means tutoring, counseling, and navigation support. It means someone checks in when they're at risk.

With holistic supports, people finish.



* Services vary by program, funding source and depend on individual collective bargaining agreements and supplemental grant funding.

Who benefits from the TEF model? Everyone.

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Workers/learners

- Safety and security to take a risk on a new career
- Whole-journey support from enrollment through job placement
- Credentials that pay and enable advancement
- Economic mobility



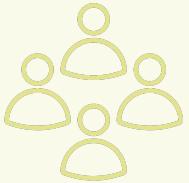
Employers

- Filled vacancies in hard-to-fill roles
- Skill alignment
- Workforce trained for actual skill and job demand
- Direct line to frontline insight
- Real-time curriculum adjustments based on what they need



The healthcare system

- Pipeline for the 13 fastest-growing occupations
- Good jobs resilient to automation
- Better-trained workforce, better patient care and health outcomes



The public

- Proof that innovative public dollars can fund creative healthcare workforce solutions at scale
- A replicable funding and governance model
- Reduced healthcare workforce shortages
- High quality healthcare services

INSIGHTS

Key takeaways for other systems

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The three elements only work together

Co-governance, stable funding, and deep navigation are usually separate best practices. TEF's results come from housing them in one system. Remove one and the others weaken.

Worker voice isn't a nice-to-have, it's risk insurance

Co-governance gives participants security to attempt career moves they'd otherwise avoid. There's a negotiated path back if training doesn't work out.

Holistic navigation separates dropout from completion

Adult learners face predictable barriers between GED, training credentialing, and job search. TEF removes the barriers by staying with people across the whole journey. At-risk identification catches people before they leave.

Participation costs are the hidden barrier

Transit, notary fees, childcare, tutoring—small costs stack up and push people out. Covering them is expensive, yet it's why people finish.

The model travels and scales

More than **6,000** nonunion community participants prove the capabilities built through collective bargaining work for employers and workers outside a bargained contract.

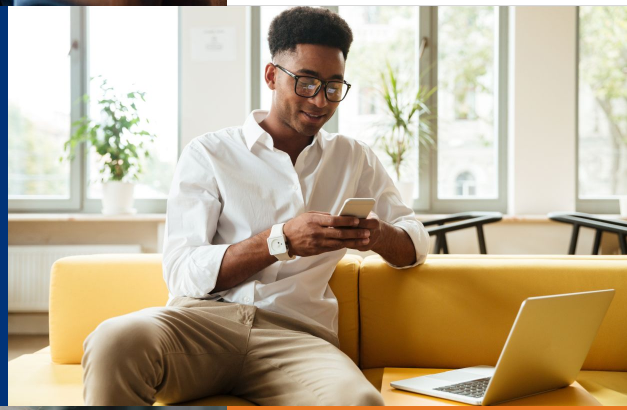
POLICY TAKEAWAYS

What it might take to replicate

1. **Innovative workforce funding –** Leverage federal waiver dollars to design creative healthcare workforce solutions. Direct funds to proven intermediaries and work around annual appropriations cycles.
2. **Labor-management governance –** Joint decision-making between workers and employers isn't decoration—it drives results.
3. **Stable training funding –** Payroll contributions outlast political cycles, and benefit both labor and management. Build funding streams through co-managed funds and collective bargaining, not discretionary grants.
4. **Wraparound support as core –** Tutoring, counseling, participation costs, job navigation aren't just nice - they're necessary. Fund them fully.
5. **Early intervention infrastructure –** Data systems and dedicated staff catch people before they drop out.
6. **Multi-year commitment –** Minimum 3+ years to build employer relationships and see placement results.



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About us

Opportunity@Work works directly with federal, state, and local governments to modernize hiring, expand career pathways, and implement skills-based talent practices that open public sector jobs to workers Skilled Through Alternative Routes (STARs).

We provide the data, tools, guidance, and peer learning environments that help public sector leaders remove unnecessary degree requirements, improve hiring efficiency, and build more inclusive and effective workforces.

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