

UNIVERSITY OF ALASKA
HEALTH WORKFORCE SURVEY 2009

The Alaska Center for Rural Health (ACRH) and the Institute of Social and Economic Research (ISER) request your participation in an important study to help the University of Alaska and its health-care-industry partners develop education, training, and recruitment strategies to ensure that you will be able to access qualified health workers. We would like to know how many persons your organization employs in selected health occupations and how many positions are currently vacant. It is also important to learn how many new graduates you are able to hire, so the University and other educational institutions do not flood or underestimate the market. To help us understand your workforce challenges, we are also asking what you believe to be the underlying causes of your vacancies.

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- Mail this hard-copy in the enclosed, self-addressed, stamped envelope.
- Send us an email (anmlw@uaa.alaska.edu) and we will send an electronic copy you can return to the same e-mail address.
- FAX your completed form to 907-786-7739.
- Provide the information verbally via telephone to the ISER staff interviewer who will soon be contacting you.

If you have any questions, feel free to ask your interviewer, or call Meghan Wilson at 786-5408.

Survey Instructions:

For the occupations listed below, **please answer these questions:**

- 1. How many positions of this type do you have in your organization?** *Please include only Budgeted Full-Time plus Part-Time positions, but not Relief/Pool/Temporary/Contract. If an employee wears two job "hats", please count them under both occupations.*
- 2. How many of your positions of this type are vacant at this time?** *Please include all those positions now filled by a temporary worker/traveler/contractor that you would prefer to have filled by a permanent employee.*
- 3. Do you hire new graduates in this occupation?**
- 4. How many of your current vacancies could you fill with new graduates?**
- 5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?**

Appendix B: Health Workforce Surveys (Behavioral Health)

6. What do you believe are the main underlying causes of your vacancies?

Organization:			City:		Number:	
Contact person:			Phone:		Email:	
Occupations	Q1. How many positions of this type do you have in your organization (budgeted, full-time plus part-time positions, but not relief/pool/temporary/contract)?	Q2. How many positions of this type are vacant at this time (including positions now filled by temporary employees you would prefer to have filled by permanent employees)?	Q3. Do you hire new graduates in this occupation? (Circle Yes or No)	Q4. How many of your current vacancies could you fill with new graduates?	Q5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?	
Physicians						
Psychiatrist			Yes No			
Professional Nurses						
Case Manager/Nurse Case Manager			Yes No			
Psychiatric Nurse			Yes No			
Psychiatric Nurse Practitioner			Yes No			
Registered Nurse			Yes No			
Nurse Manager			Yes No			
Other Nursing Staff						
Certified Nursing Assistant			Yes No			
Home Health Aide			Yes No			
Licensed Practical Nurse			Yes No			
Personal Care Attendant			Yes No			
Other Clinicians/Therapists						
Occupational Therapist			Yes No			
Pharmacist			Yes No			
Physical Therapist			Yes No			

Appendix B: Health Workforce Surveys (Behavioral Health)

Speech Therapist			Yes	No		
Speech-Language Pathologist			Yes	No		
Behavioral Health						
Behavioral Health Aide / Village Counselor (certificate)			Yes	No		
<u>Behavioral Health Clinician</u> (Examples: <i>Behavioral Health Counselor/Counselor Children's Therapist Clinical Therapist Mental Health Specialist/Therapist (Masters Level)</i>)			Yes	No		
Chemical Dependency Counselor; Substance Abuse Counselor (certificate)			Yes	No		
<u>Case Manager/Care Coordinator</u> (Examples: <i>Clinical Associate Community Support Services Coordinator Family Support Specialist Family Services Team Facilitator Mental Health Associate Service Planner/Coordinator Skills Development Specialist (Bachelor's or Associate Degree)</i>)			Yes	No		
<u>Human Services Worker</u> (Examples: <i>Activity Therapist Crisis Center Advocate Direct Care Provider Direct Support Personnel Family Services Worker Family Services Caseworker Family Advocate Individual Service Provider Life Coach/Life Skills Specialist Mental Health Associate Residential Aide</i>)	HS Diploma		Yes	No		
	Associate Degree		Yes	No		
Licensed Marital and Family Therapist			Yes	No		
Licensed Professional Counselor (MA/PhD)			Yes	No		
Psychiatric Aide/Technician			Yes	No		
Psychologist/Psychological Associate (Master's)			Yes	No		
Clinical Psychologist (PhD)			Yes	No		

Appendix B: Health Workforce Surveys (Behavioral Health)

Social Worker	BSW			Yes	No		
	MSW			Yes	No		
	LCSW			Yes	No		
Allied Health							
Pharmacy Technician				Yes	No		
Physical Therapy Assistant				Yes	No		
Respiratory Therapist				Yes	No		
Health Education and Community Wellness							
Dietitian				Yes	No		
Nutritionist				Yes	No		
Managers and Administrators							
Administrator/Director/CEO/ Manager				Yes	No		
<u>Behavioral Health Supervisor</u> (Examples: <i>Chief Clinical Officer</i> <i>Clinical Coordinator</i> <i>Clinical Program</i> <i>Coordinators</i> <i>Director of Behavioral Health</i> <i>Village Clinical Supervisor</i>)				Yes	No		
Health Information Director/Manager				Yes	No		
Human Resources Director				Yes	No		
Medical Director				Yes	No		
Nurse Executive/Director of Nursing				Yes	No		
Information and Reimbursement							
Billing Clerks and Technicians				Yes	No		
Billing Supervisor				Yes	No		
Certified Coder				Yes	No		
Coding Clerks and Technicians				Yes	No		
Coding Specialist				Yes	No		
Compliance Officer/Auditor				Yes	No		
Medical Records Clerks and Technicians				Yes	No		

Appendix B: Health Workforce Surveys (Behavioral Health)

Transcriptionist			Yes	No		
Occupations not listed (please specify)						
			Yes	No		
			Yes	No		
			Yes	No		
			Yes	No		

Appendix B: Health Workforce Surveys (Behavioral Health)

Q6. For your organization, what are the Top Two underlying causes of vacancies when they occur? Select only two. Please add any reasons not listed.

- (a) Inadequate pool of trained/qualified workers
- (b) Insufficient compensation package
- (c) Inadequate training opportunities
- (d) Naturally stressful job
- (e) Rural isolation
- (f) Scheduling/shift work
- (g) Organizational workplace issues
- (h) Other (please specify) _____
- (i) Other (please specify) _____

Please feel free to provide any comments or suggestions.

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Survey Instructions:

For the occupations listed below, **please answer these questions:**

1. **How many positions of this type do you have in your organization?** *Please include only Budgeted Full-Time plus Part-Time positions, but not Relief/Pool/Temporary/Contract. If an employee wears two job "hats", please count them under both occupations.*
2. **How many of your positions of this type are vacant at this time?** *Please include all those positions now filled by a temporary worker/traveler/contractor that you would prefer to have filled by a permanent employee.*
3. **Do you hire new graduates in this occupation?**
4. **How many of your current vacancies could you fill with new graduates?**
5. **Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?**

Appendix B: Health Workforce Surveys (Dental Clinics)

6. What do you believe are the main underlying causes of your vacancies?

Organization:		City:		Number:	
Contact person:		Phone:		Email:	
Occupations	Q1. How many positions of this type do you have in your organization (budgeted, full-time plus part-time positions, but not relief/pool/temporary/contract)?	Q2. How many positions of this type are vacant at this time (including positions now filled by temporary employees you would prefer to have filled by permanent employees)?	Q3. Do you hire new graduates in this occupation? (Circle Yes or No)	Q4. How many of your current vacancies could you fill with new graduates?	Q5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?
Clinicians/Therapists					
Dentist			Yes No		
Allied Health					
Dental Assistant			Yes No		
Dental Health Aide Therapist			Yes No		
Dental Hygienist			Yes No		
Managers and Administrators					
Administrator/Director/CEO/Manager			Yes No		
Information and Reimbursement					
Billing Clerks and Technicians			Yes No		
Billing Supervisor			Yes No		
Coding Clerks and Technicians			Yes No		
Medical Records Clerks and Technicians			Yes No		
Occupations not listed (please specify)					
			Yes No		
			Yes No		
			Yes No		

Appendix B: Health Workforce Surveys (Dental Clinics)

Q6. For your organization, what are the Top Two underlying causes of vacancies when they occur? Select only two. Please add any reasons not listed.

- (a) Inadequate pool of trained/qualified workers
- (b) Insufficient compensation package
- (c) Inadequate training opportunities
- (d) Naturally stressful job
- (e) Rural isolation
- (f) Scheduling/shift work
- (g) Organizational workplace issues
- (h) Other (please specify)_____
- (i) Other (please specify)_____

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- 3. Do you hire new graduates in this occupation?**
- 4. How many of your current vacancies could you fill with new graduates?**
- 5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?**

Appendix B: Health Workforce Surveys (Diagnostic Imaging)

6. What do you believe are the main underlying causes of your vacancies?

Organization:			City:		Number:	
Contact person:			Phone:		Email:	
Occupations	Q1. How many positions of this type do you have in your organization (budgeted, full-time plus part-time positions, but not relief/pool/temporary/contract)?	Q2. How many positions of this type are vacant at this time (including positions now filled by temporary employees you would prefer to have filled by permanent employees)?	Q3. Do you hire new graduates in this occupation? (Circle Yes or No)	Q4. How many of your current vacancies could you fill with new graduates?	Q5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?	
Physicians						
Radiation Oncologist			Yes No			
Radiologist			Yes No			
Professional Nurses						
Registered Nurse			Yes No			
Allied Health						
Echocardiography Technician			Yes No			
Mammographer			Yes No			
Medical Assistant			Yes No			
Medical Technologist			Yes No			
MRI/CT Technician			Yes No			
Nuclear Medicine Technician			Yes No			
Radiologic Technician			Yes No			
Sonographer			Yes No			
Other Clinicians/Therapists						
Physician Assistant			Yes No			
Managers and Administrators						
Administrator/Director/CEO/			Yes No			

Appendix B: Health Workforce Surveys (Diagnostic Imaging)

Manager					
Health Information Administrator/Director/Manager			Yes	No	
Human Resources Director			Yes	No	
Information and Reimbursement					
Billing Clerks and Technicians			Yes	No	
Billing Supervisor			Yes	No	
Coding Clerks and Technicians			Yes	No	
Coding Specialist			Yes	No	
Medical Records Clerks and Technicians			Yes	No	
Occupations not listed (please specify)					
			Yes	No	
			Yes	No	
			Yes	No	
			Yes	No	

[Continue with Page 4]

Appendix B: Health Workforce Surveys (Diagnostic Imaging)

Q6. For your organization, what are the Top Two underlying causes of vacancies when they occur? Select only two. Please add any reasons not listed.

- (a) Inadequate pool of trained/qualified workers
- (b) Insufficient compensation package
- (c) Inadequate training opportunities
- (d) Naturally stressful job
- (e) Rural isolation
- (f) Scheduling/shift work
- (g) Organizational workplace issues
- (h) Other (please specify) _____
- (i) Other (please specify) _____

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- 3. Do you hire new graduates in this occupation?**
- 4. How many of your current vacancies could you fill with new graduates?**
- 5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?**

Appendix B: Health Workforce Surveys (Hospitals/Nursing Homes)

6. What do you believe are the main underlying causes of your vacancies?

Organization:			City:		Number:	
Contact person:			Phone:		Email:	
Occupations	Q1. How many positions of this type do you have in your organization (budgeted, full-time plus part-time positions, but not relief/pool/temporary/contract)?	Q2. How many positions of this type are vacant at this time (including positions now filled by temporary employees you would prefer to have filled by permanent employees)?	Q3. Do you hire new graduates in this occupation? (Circle Yes or No)		Q4. How many of your current vacancies could you fill with new graduates?	Q5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?
Physicians						
Emergency Physician			Yes	No		
Family Physician			Yes	No		
General Internist			Yes	No		
Psychiatrist			Yes	No		
Radiation Oncologist			Yes	No		
Radiologist			Yes	No		
Professional Nurses						
Case Manager/Nurse Case Manager			Yes	No		
Critical Care/ER/ICU Nurse			Yes	No		
Family Nurse-Practitioner			Yes	No		
Nurse Anesthetist			Yes	No		
Nurse Consultant			Yes	No		
Nurse Educator			Yes	No		
Nurse Manager			Yes	No		
Nurse-Midwife			Yes	No		
Pediatric Nurse-Practitioner			Yes	No		

Appendix B: Health Workforce Surveys (Hospitals/Nursing Homes)

Psychiatric Nurse			Yes	No		
Psychiatric Nurse-Practitioner			Yes	No		
Public Health Nurse			Yes	No		
Registered Nurse			Yes	No		
Women's Health-Care Nurse-Practitioner			Yes	No		
Other Nursing Staff						
Certified Nursing Assistant			Yes	No		
Home Health Aide			Yes	No		
Licensed Practical Nurse			Yes	No		
Personal Care Attendant			Yes	No		
Other Clinicians/Therapists						
Dentist			Yes	No		
Physician Assistant			Yes	No		
Occupational Therapist			Yes	No		
Pharmacist			Yes	No		
Physical Therapist			Yes	No		
Speech Therapist			Yes	No		
Speech-Language Pathologist			Yes	No		
Behavioral Health						
Behavioral Health Aide/Village Counselor (certificate)			Yes	No		
<u>Behavioral Health Clinician</u> (Examples: <i>Behavioral Health Counselor/Counselor</i> <i>Children's Therapist</i> <i>Clinical Therapist</i> <i>Mental Health Specialist/Therapist</i> <i>(Masters Level)</i>)			Yes	No		
Chemical Dependency Counselor; Substance Abuse Counselor (certificate)			Yes	No		
<u>Case Manager/Care Coordinator</u> (Examples: <i>Clinical Associate</i> <i>Community Support Services Coordinator</i>)			Yes	No		

Appendix B: Health Workforce Surveys (Hospitals/Nursing Homes)

<i>Family Support Specialist</i> <i>Family Services Team</i> <i>Facilitator</i> <i>Mental Health Associate</i> <i>Service Planner/Coordinator</i> <i>Skills Development Specialist</i> <i>(Bachelor's or Associate Degree)</i>						
Human Services Worker <i>(Examples: Activity Therapist</i> <i>Crisis Center Advocate</i> <i>Direct Care Provider</i> <i>Direct Support Personnel</i> <i>Family Services Worker</i> <i>Family Services Caseworker</i> <i>Family Advocate</i> <i>Individual Service Provider</i> <i>Life Coach/Life Skills</i> <i>Specialist</i> <i>Mental Health Associate</i> <i>Residential Aide)</i>		HS Diploma		Yes	No	
		Associate Degree		Yes	No	
Licensed Marital and Family Therapist				Yes	No	
Licensed Professional Counselor (MA/PhD)				Yes	No	
Psychiatric Aide/Technician				Yes	No	
Psychologist/Psychological Associate (Master's)				Yes	No	
Clinical Psychologist (PhD)				Yes	No	
Social Worker	BSW			Yes	No	
	MSW			Yes	No	
	LCSW			Yes	No	
Allied Health						
Clinical Lab Assistant				Yes	No	
Dental Assistant				Yes	No	
Dental Health Aide Therapist				Yes	No	
Dental Hygienist				Yes	No	
Echocardiography Technician				Yes	No	
EEG Technician				Yes	No	
EKG Technician				Yes	No	
EMT/ETT				Yes	No	

Appendix B: Health Workforce Surveys (Hospitals/Nursing Homes)

Mammographer			Yes	No		
Massage Therapist			Yes	No		
Medical Assistant			Yes	No		
Medical Lab Technician			Yes	No		
Medical Technologist			Yes	No		
MRI/CT Technician			Yes	No		
Nuclear Medicine Technician			Yes	No		
Paramedic			Yes	No		
Pharmacy Technician			Yes	No		
Phlebotomist			Yes	No		
Physical Therapy Assistant			Yes	No		
Radiologic Technician			Yes	No		
Respiratory Therapist			Yes	No		
Sonographer			Yes	No		
Sterile Processing Technician			Yes	No		
Surgical Technician/ Surgical Technologist			Yes	No		
Health Education and Community Wellness						
Community Health Representative			Yes	No		
Community Wellness Advocate			Yes	No		
Dietitian			Yes	No		
Health Educator			Yes	No		
Nutritionist			Yes	No		
Village Health Educator			Yes	No		
Community Health Aide/Practitioner (CHAP)			Yes	No		
Managers and Administrators						
Administrator/Director/CEO/ Manager			Yes	No		
<u>Behavioral Health Supervisor</u> (Examples:			Yes	No		

Appendix B: Health Workforce Surveys (Hospitals/Nursing Homes)

Chief Clinical Officer Clinical Coordinator Clinical Program Coordinators Director of Behavioral Health Village Clinical Supervisor)					
Health Information Administrator/Director/Manager			Yes	No	
Hospital Administrator			Yes	No	
Human Resources Director			Yes	No	
Medical Director			Yes	No	
Nurse Executive/Director of Nursing			Yes	No	
Information and Reimbursement					
Billing Clerks and Technicians			Yes	No	
Billing Supervisor			Yes	No	
Certified Coder			Yes	No	
Coding Clerks and Technicians			Yes	No	
Coding Specialist			Yes	No	
Compliance Officer/Auditor			Yes	No	
Medical Records Clerks and Technicians			Yes	No	
Transcriptionist			Yes	No	
Occupations not listed (please specify)					
			Yes	No	
			Yes	No	
			Yes	No	
			Yes	No	

Appendix B: Health Workforce Surveys (Hospitals/Nursing Homes)

Q6. For your organization, what are the Top Two underlying causes of vacancies when they occur? Select only two. Please add any reasons not listed.

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- (d) Naturally stressful job
- (e) Rural isolation
- (f) Scheduling/shift work
- (g) Organizational workplace issues
- (h) Other (please specify) _____
- (i) Other (please specify) _____

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- 2. How many of your positions of this type are vacant at this time?** *Please include all those positions now filled by a temporary worker/traveler/contractor that you would prefer to have filled by a permanent employee.*
- 3. Do you hire new graduates in this occupation?**
- 4. How many of your current vacancies could you fill with new graduates?**
- 5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?**

Appendix B: Health Workforce Surveys (Labs)

6. What do you believe are the main underlying causes of your vacancies?

Organization:			City:		Number:	
Contact person:			Phone:		Email:	
Occupations	Q1. How many positions of this type do you have in your organization (budgeted, full-time plus part-time positions, but not relief/pool/temporary/contract)?	Q2. How many positions of this type are vacant at this time (including positions now filled by temporary employees you would prefer to have filled by permanent employees)?	Q3. Do you hire new graduates in this occupation? (Circle Yes or No)	Q4. How many of your current vacancies could you fill with new graduates?	Q5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?	
Allied Health						
Clinical Lab Assistant			Yes	No		
Medical Lab Technician			Yes	No		
Medical Technologist			Yes	No		
Nuclear Medicine Technician			Yes	No		
Phlebotomist			Yes	No		
Managers and Administrators						
Administrator/Director/CEO/Manager			Yes	No		
Human Resources Director			Yes	No		
Information and Reimbursement						
Billing Clerks and Technicians			Yes	No		
Billing Supervisor			Yes	No		
Coding Clerks and Technicians			Yes	No		
Medical Records Clerks and Technicians			Yes	No		
Occupations not listed (please specify)						
			Yes	No		
			Yes	No		

Appendix B: Health Workforce Surveys (Labs)

Q6. For your organization, what are the Top Two underlying causes of vacancies when they occur? Select only two. Please add any reasons not listed.

- (a) Inadequate pool of trained/qualified workers
- (b) Insufficient compensation package
- (c) Inadequate training opportunities
- (d) Naturally stressful job
- (e) Rural isolation
- (f) Scheduling/shift work
- (g) Organizational workplace issues
- (h) Other (please specify) _____
- (i) Other (please specify) _____

Please feel free to provide any comments or suggestions.

THANK YOU VERY MUCH FOR YOUR ASSISTANCE

UNIVERSITY OF ALASKA
HEALTH WORKFORCE SURVEY 2009

The Alaska Center for Rural Health (ACRH) and the Institute of Social and Economic Research (ISER) request your participation in an important study to help the University of Alaska and its health-care-industry partners develop education, training, and recruitment strategies to ensure that you will be able to access qualified health workers. We would like to know how many persons your organization employs in selected health occupations and how many positions are currently vacant. It is also important to learn how many new graduates you are able to hire, so the University and other educational institutions do not flood or underestimate the market. To help us understand your workforce challenges, we are also asking what you believe to be the underlying causes of your vacancies.

We have included in this survey a list of health occupations typically found in your type of organization. If you do not have positions in a particular listed occupation, please just skip it. If you have additional occupations to include, feel free to add them in the spaces provided at the end of the survey. All information you provide will be kept strictly confidential.

Depending upon the complexity of your organization, we would expect it to take about 15 minutes to complete this survey. We understand the demands on your time, and so we offer several options for completing the survey. You may

- Mail this hard-copy in the enclosed, self-addressed, stamped envelope.
- Send us an email (anmlw@uaa.alaska.edu) and we will send an electronic copy you can return to the same e-mail address.
- FAX your completed form to 907-786-7739.
- Provide the information verbally via telephone to the ISER staff interviewer who will soon be contacting you.

If you have any questions, feel free to ask your interviewer, or call Meghan Wilson at 786-5408.

Survey Instructions:

For the occupations listed below, **please answer these questions:**

- 1. How many positions of this type do you have in your organization?** *Please include only Budgeted Full-Time plus Part-Time positions, but not Relief/Pool/Temporary/Contract. If an employee wears two job "hats", please count them under both occupations.*
- 2. How many of your positions of this type are vacant at this time?** *Please include all those positions now filled by a temporary worker/traveler/contractor that you would prefer to have filled by a permanent employee.*
- 3. Do you hire new graduates in this occupation?**
- 4. How many of your current vacancies could you fill with new graduates?**
- 5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?**

Appendix B: Health Workforce Surveys (Medical Clinics/Offices of Physicians)

6. What do you believe are the main underlying causes of your vacancies?

Organization:		City:		Number:	
Contact person:		Phone:		Email:	
Occupations	Q1. How many positions of this type do you have in your organization (budgeted, full-time plus part-time positions, but not relief/pool/temporary/contract)?	Q2. How many positions of this type are vacant at this time (including positions now filled by temporary employees you would prefer to have filled by permanent employees)?	Q3. Do you hire new graduates in this occupation? (Circle Yes or No)	Q4. How many of your current vacancies could you fill with new graduates?	Q5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?
Physicians					
Emergency Physician			Yes No		
Family Physician			Yes No		
General Internist			Yes No		
Psychiatrist			Yes No		
Radiation Oncologist			Yes No		
Radiologist			Yes No		
Professional Nurses					
Case Manager/Nurse Case Manager			Yes No		
Critical Care/ER/ICU Nurse			Yes No		
Family Nurse-Practitioner			Yes No		
Nurse Consultant			Yes No		
Nurse Educator			Yes No		
Nurse Manager			Yes No		
Nurse-Midwife			Yes No		
Pediatric Nurse-Practitioner			Yes No		
Psychiatric Nurse			Yes No		

Appendix B: Health Workforce Surveys (Medical Clinics/Offices of Physicians)

Psychiatric Nurse-Practitioner			Yes	No		
Public Health Nurse			Yes	No		
Registered Nurse			Yes	No		
Women's Health-Care Nurse-Practitioner			Yes	No		
Other Nursing Staff						
Certified Nursing Assistant			Yes	No		
Home Health Aide			Yes	No		
Licensed Practical Nurse			Yes	No		
Personal Care Attendant			Yes	No		
Other Clinicians/Therapists						
Dentist			Yes	No		
Pharmacist			Yes	No		
Physician Assistant			Yes	No		
Behavioral Health						
Behavioral Health Aide/Village Counselor (certificate)			Yes	No		
<u>Behavioral Health Clinician</u> (Examples: <i>Behavioral Health Counselor/Counselor</i> <i>Children's Therapist</i> <i>Clinical Therapist</i> <i>Mental Health Specialist/Therapist</i> <i>(Masters Level)</i>)			Yes	No		
Chemical Dependency Counselor; Substance Abuse Counselor (certificate)			Yes	No		
<u>Case Manager/Care Coordinator</u> (Examples: <i>Clinical Associate</i> <i>Community Support Services Coordinator</i> <i>Family Support Specialist</i> <i>Family Services Team Facilitator</i> <i>Mental Health Associate</i> <i>Service Planner/Coordinator</i> <i>Skills Development Specialist</i> <i>(Bachelor's or Associate Degree)</i>)			Yes	No		
<u>Human Services Worker</u> (Examples: <i>Activity Therapist</i> <i>Crisis Center Advocate</i>)			Yes	No		

Appendix B: Health Workforce Surveys (Medical Clinics/Offices of Physicians)

<i>Direct Care Provider</i> <i>Direct Support Personnel</i> <i>Family Services Worker</i> <i>Family Services Caseworker</i> <i>Family Advocate</i> <i>Individual Service Provider</i> <i>Life Coach/Life Skills Specialist</i> <i>Mental Health Associate</i> <i>Residential Aide)</i>		HS Diploma							
		Associate Degree		Yes	No				
		Licensed Marital and Family Therapist			Yes	No			
		Licensed Professional Counselor (MA/PhD)			Yes	No			
		Psychiatric Aide/Technician			Yes	No			
		Psychologist/Psychological Associate (Master's)			Yes	No			
		Clinical Psychologist (PhD)			Yes	No			
		Social Worker	BSW			Yes	No		
			MSW			Yes	No		
			LCSW			Yes	No		
Allied Health									
Clinical Lab Assistant				Yes	No				
Dental Assistant				Yes	No				
Dental Health Aide Therapist				Yes	No				
Dental Hygienist				Yes	No				
EEG Technician				Yes	No				
EKG Technician				Yes	No				
Mammographer				Yes	No				
Massage Therapist				Yes	No				
Medical Assistant				Yes	No				
Medical Lab Technician				Yes	No				
Medical Technologist				Yes	No				
Pharmacy Technician				Yes	No				
Phlebotomist				Yes	No				
Physical Therapy Assistant				Yes	No				

Appendix B: Health Workforce Surveys (Medical Clinics/Offices of Physicians)

Radiologic Technician			Yes	No		
Sonographer			Yes	No		
Sterile Processing Technician			Yes	No		
Health Education and Community Wellness						
Community Health Representative			Yes	No		
Community Wellness Advocate			Yes	No		
Health Educator			Yes	No		
Managers and Administrators						
Administrator/Director/CEO/Manager			Yes	No		
<u>Behavioral Health Supervisor</u> (Examples: <i>Chief Clinical Officer</i> <i>Clinical Coordinator</i> <i>Clinical Program Coordinators</i> <i>Director of Behavioral Health</i> <i>Village Clinical Supervisor</i>)			Yes	No		
Health Information Administrator/Director/Manager			Yes	No		
Human Resources Director			Yes	No		
Medical Director			Yes	No		
Nurse Executive/Director of Nursing			Yes	No		
Information and Reimbursement						
Billing Clerks and Technicians			Yes	No		
Billing Supervisor			Yes	No		
Certified Coder						
Coding Clerks and Technicians			Yes	No		
Coding Specialist			Yes	No		
Compliance Officer/Auditor			Yes	No		
Medical Records Clerks and Technicians			Yes	No		
Transcriptionist			Yes	No		

Appendix B: Health Workforce Surveys (Medical Clinics/Offices of Physicians)

Occupations not listed (please specify and use reverse side if necessary)					
			Yes	No	
			Yes	No	
			Yes	No	
			Yes	No	

Q6. For your organization, what are the Top Two underlying causes of vacancies when they occur? Select only two. Please add any reasons not listed.

- (a) Inadequate pool of trained/qualified workers
- (b) Insufficient compensation package
- (c) Inadequate training opportunities
- (d) Naturally stressful job
- (e) Rural isolation
- (f) Scheduling/shift work
- (g) Organizational workplace issues
- (h) Other (please specify) _____
- (i) Other (please specify) _____

Please feel free to provide any comments or suggestions.

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- Send us an email (anmlw@uaa.alaska.edu) and we will send an electronic copy you can return to the same e-mail address.
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If you have any questions, feel free to ask your interviewer, or call Meghan Wilson at 786-5408.

Survey Instructions:

For the occupations listed below, **please answer these questions:**

- 1. How many positions of this type do you have in your organization?** *Please include only Budgeted Full-Time plus Part-Time positions, but not Relief/Pool/Temporary/Contract. If an employee wears two job "hats", please count them under both occupations.*
- 2. How many of your positions of this type are vacant at this time?** *Please include all those positions now filled by a temporary worker/traveler/contractor that you would prefer to have filled by a permanent employee.*
- 3. Do you hire new graduates in this occupation?**
- 4. How many of your current vacancies could you fill with new graduates?**
- 5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?**

Appendix B: Health Workforce Surveys (Tribal Health Organizations)

6. What do you believe are the main underlying causes of your vacancies?

Organization:		City:		Number:	
Contact person:		Phone:		Email:	
Occupations	Q1. How many positions of this type do you have in your organization (budgeted, full-time plus part-time positions, but not relief/pool/temporary/contract)?	Q2. How many positions of this type are vacant at this time (including positions now filled by temporary employees you would prefer to have filled by permanent employees)?	Q3. Do you hire new graduates in this occupation? (Circle Yes or No)	Q4. How many of your current vacancies could you fill with new graduates?	Q5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?
Physicians					
Emergency Physician			Yes No		
Family Practice Physician			Yes No		
General Internist			Yes No		
Psychiatrist			Yes No		
Radiation Oncologist			Yes No		
Radiologist			Yes No		
Professional Nurses					
Case Manager/Nurse Case Manager			Yes No		
Critical Care/ER/ICU Nurse			Yes No		
Family Nurse-Practitioner			Yes No		
Nurse Anesthetist			Yes No		
Nurse Consultant			Yes No		
Nurse Educator			Yes No		
Nurse Manager			Yes No		
Nurse-Midwife			Yes No		
Pediatric Nurse-Practitioner			Yes No		

Appendix B: Health Workforce Surveys (Tribal Health Organizations)

Psychiatric Nurse			Yes	No		
Psychiatric Nurse-Practitioner			Yes	No		
Public Health Nurse			Yes	No		
Registered Nurse			Yes	No		
Women's Health-Care Nurse-Practitioner			Yes	No		
Other Nursing Staff						
Certified Nursing Assistant			Yes	No		
Home Health Aide			Yes	No		
Licensed Practical Nurse			Yes	No		
Personal Care Attendant			Yes	No		
Other Clinicians/Therapists						
Dentist			Yes	No		
Occupational Therapist			Yes	No		
Pharmacist			Yes	No		
Physical Therapist			Yes	No		
Physician Assistant			Yes	No		
Speech Therapist			Yes	No		
Speech-Language Pathologist			Yes	No		
Behavioral Health						
Behavioral Health Aide/Village Counselor (certificate)			Yes	No		
<u>Behavioral Health Clinician</u> (Examples: <i>Behavioral Health Counselor/Counselor</i> <i>Children's Therapist</i> <i>Clinical Therapist</i> <i>Mental Health Specialist/Therapist</i> <i>(Masters Level)</i>)			Yes	No		
Chemical Dependency Counselor; Substance Abuse Counselor (certificate)			Yes	No		
<u>Case Manager/Care Coordinator</u> (Examples: <i>Clinical Associate</i> <i>Community Support Services Coordinator</i>)			Yes	No		

Appendix B: Health Workforce Surveys (Tribal Health Organizations)

<i>Family Support Specialist</i> <i>Family Services Team</i> <i>Facilitator</i> <i>Mental Health Associate</i> <i>Service Planner/Coordinator</i> <i>Skills Development Specialist</i> <i>(Bachelor's or Associate Degree)</i>						
Human Services Worker (Examples: <i>Activity Therapist</i> <i>Crisis Center Advocate</i> <i>Direct Care Provider</i> <i>Direct Support Personnel</i> <i>Family Services Worker</i> <i>Family Services Caseworker</i> <i>Family Advocate</i> <i>Individual Service Provider</i> <i>Life Coach/Life Skills Specialist</i> <i>Mental Health Associate</i> <i>Residential Aide</i>)		HS Diploma		Yes	No	
		Associate Degree		Yes	No	
Licensed Marital and Family Therapist				Yes	No	
Licensed Professional Counselor (MA/PhD)				Yes	No	
Psychiatric Aide/Technician				Yes	No	
Psychologist/Psychological Associate (Master's)				Yes	No	
Clinical Psychologist (PhD)				Yes	No	
Social Worker	BSW			Yes	No	
	MSW			Yes	No	
	LCSW			Yes	No	
Allied Health						
Clinical Lab Assistant				Yes	No	
Dental Assistant				Yes	No	
Dental Health Aide Therapist				Yes	No	
Dental Hygienist				Yes	No	
Echocardiography Technician				Yes	No	
EEG Technician				Yes	No	
EKG Technician				Yes	No	
EMT/ETT				Yes	No	

Appendix B: Health Workforce Surveys (Tribal Health Organizations)

Mammographer			Yes	No		
Massage Therapist			Yes	No		
Medical Assistant			Yes	No		
Medical Lab Technician			Yes	No		
Medical Technologist			Yes	No		
MRI/CT Technician			Yes	No		
Nuclear Medicine Technician			Yes	No		
Paramedic			Yes	No		
Pharmacy Technician			Yes	No		
Phlebotomist			Yes	No		
Physical Therapy Assistant			Yes	No		
Radiologic Technician			Yes	No		
Respiratory Therapist			Yes	No		
Sonographer			Yes	No		
Sterile Processing Technician			Yes	No		
Surgical Technician/ Surgical Technologist			Yes	No		
Health Education and Community Wellness						
Community Health Representative			Yes	No		
Community Wellness Advocate			Yes	No		
Dietitian			Yes	No		
Health Educator			Yes	No		
Nutritionist			Yes	No		
Village Health Educator			Yes	No		
Community Health Aide/Practitioner (CHAP)			Yes	No		
Managers and Administrators						
Administrator/Director/CEO/ Manager			Yes	No		
<u>Behavioral Health Supervisor</u> (Examples:			Yes	No		

Appendix B: Health Workforce Surveys (Tribal Health Organizations)

Chief Clinical Officer Clinical Coordinator Clinical Program Coordinators Director of Behavioral Health Village Clinical Supervisor)					
Health Information Administrator/Director/Manager			Yes	No	
Hospital Administrator			Yes	No	
Human Resources Director			Yes	No	
Medical Director			Yes	No	
Nurse Executive/Director of Nursing			Yes	No	
Information and Reimbursement					
Billing Clerks and Technicians			Yes	No	
Billing Supervisor			Yes	No	
Compliance Officer/Auditor			Yes	No	
Medical Records Clerks and Technicians			Yes	No	
Transcriptionist			Yes	No	
Coding Clerks and Technicians			Yes	No	
Certified Coder			Yes	No	
Coding Specialist			Yes	No	
Occupations not listed (please specify)					
			Yes	No	
			Yes	No	
			Yes	No	
			Yes	No	

Appendix B: Health Workforce Surveys (Tribal Health Organizations)

Q6. For your organization, what are the Top Two underlying causes of vacancies when they occur? Select only two. Please add any reasons not listed.

- (a) Inadequate pool of trained/qualified workers
- (b) Insufficient compensation package
- (c) Inadequate training opportunities
- (d) Naturally stressful job
- (e) Rural isolation
- (f) Scheduling/shift work
- (g) Organizational workplace issues
- (h) Other (please specify) _____
- (i) Other (please specify) _____

Please feel free to provide any comments or suggestions.

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We have included in this survey a list of health occupations typically found in your type of organization. If you do not have positions in a particular listed occupation, please just skip it. If you have additional occupations to include, feel free to add them in the spaces provided at the end of the survey. All information you provide will be kept strictly confidential.

Depending upon the complexity of your organization, we would expect it to take about 5 minutes to complete this survey. We understand the demands on your time, and so we offer several options for completing the survey. You may

- Send us an email (anmlw@uaa.alaska.edu) and we will send an electronic copy you can return to the same e-mail address.
- FAX your completed form to 907-786-7739.
- Provide the information verbally via telephone to the ISER staff interviewer who will soon be contacting you on May 11th.

If you have any questions, feel free to ask your interviewer, or call Meghan Wilson at 786-5408.

Survey Instructions:

For the occupations listed below, **please answer these questions:**

- 1. How many positions of this type do you have in your organization?** *Please include only Budgeted Full-Time plus Part-Time positions, but not Relief/Pool/Temporary/Contract. If an employee wears two job "hats", please count them under both occupations.*
- 2. How many of your positions of this type are vacant at this time?** *Please include all those positions now filled by a temporary worker/traveler/contractor that you would prefer to have filled by a permanent employee.*
- 3. Do you hire new graduates in this occupation?**
- 4. How many of your current vacancies could you fill with new graduates?**
- 5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?**
- 6. What do you believe are the main underlying causes of your vacancies?**

Appendix B: Health Workforce Surveys (Paramedics)

Organization:		City:		Number:	
Contact person:		Phone:		Email:	
Occupations	Q1. How many positions of this type do you have in your organization <i>(budgeted, full-time plus part-time positions, but not relief/pool/temporary/contract?)</i>	Q2. How many positions of this type are vacant at this time <i>(including positions now filled by temporary employees you would prefer to have filled by permanent employees?)</i>	Q3. Do you hire new graduates in this occupation? <i>(Circle Yes or No)</i>	Q4. How many of your current vacancies could you fill with new graduates?	Q5. Approximately how many months has the vacancy existed <i>(the longest current vacancy for this occupation)?</i>
Paramedics					
Paramedics			Yes No		
Fire with EMS			Yes No		
Other (Please list)			Yes No		
TOTAL:					

Q6. For your organization, what are the Top Two underlying causes of vacancies when they occur? Select only two. Please add any reasons not listed.

- (a) Inadequate pool of trained/qualified workers
- (b) Insufficient compensation package
- (c) Inadequate training opportunities
- (d) Naturally stressful job
- (e) Rural isolation
- (f) Scheduling/shift work
- (g) Organizational workplace issues
- (h) Other (please specify) _____
- (i) Other (please specify) _____

Appendix B: Health Workforce Surveys (Paramedics)

Q7. What is the Fire Chief paid status? (circle only one)

- (a) Paid
- (b) Volunteer

Q8. What is the training officer paid status? (circle only one)

- (a) Paid
- (b) Volunteer

Please feel free to provide any comments or suggestions.

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We have included in this survey a list of health occupations typically found in your type of organization. If you do not have positions in a particular listed occupation, please just skip it. If you have additional occupations to include, feel free to add them in the spaces provided at the end of the survey. All information you provide will be kept strictly confidential.

Depending upon the complexity of your organization, we would expect it to take about 15 minutes to complete this survey. We understand the demands on your time, and so we offer several options for completing the survey. You may

- Mail this hard-copy in the enclosed, self-addressed, stamped envelope.
- Send us an email (anmlw@uaa.alaska.edu) and we will send an electronic copy you can return to the same e-mail address.
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If you have any questions, feel free to ask your interviewer, or call Meghan Wilson at 786-5408.

Survey Instructions:

For the occupations listed below, **please answer these questions:**

- 1. How many positions of this type do you have in your organization?** *Please include only Budgeted Full-Time plus Part-Time positions, but not Relief/Pool/Temporary/Contract. If an employee wears two job "hats", please count them under both occupations.*
- 2. How many of your positions of this type are vacant at this time?** *Please include all those positions now filled by a temporary worker/traveler/contractor that you would prefer to have filled by a permanent employee.*
- 3. Do you hire new graduates in this occupation?**
- 4. How many of your current vacancies could you fill with new graduates?**
- 5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?**

Appendix B: Health Workforce Surveys (Pharmacies)

6. What do you believe are the main underlying causes of your vacancies?

Organization:			City:		Number:	
Contact person:			Phone:		Email:	
Occupations	Q1. How many positions of this type do you have in your organization (budgeted, full-time plus part-time positions, but not relief/pool/temporary/contract)?	Q2. How many positions of this type are vacant at this time (including positions now filled by temporary employees you would prefer to have filled by permanent employees)?	Q3. Do you hire new graduates in this occupation? (Circle Yes or No)	Q4. How many of your current vacancies could you fill with new graduates?	Q5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?	
Clinicians/Therapists						
Pharmacist			Yes	No		
Allied Health						
Pharmacy Technician			Yes	No		
Managers and Administrators						
Administrator/Director/CEO/Manager			Yes	No		
Health Information Administrator/Director/Manager			Yes	No		
Human Resources Director			Yes	No		
Information and Reimbursement						
Billing Clerks and Technicians			Yes	No		
Billing Supervisor			Yes	No		
Coding Clerks and Technicians			Yes	No		
Coding Specialist			Yes	No		
Medical Records Clerks and Technicians			Yes	No		
Occupations not listed (please specify)						
			Yes	No		

Appendix B: Health Workforce Surveys (Pharmacies)

			Yes	No		
			Yes	No		

Q6. For your organization, what are the Top Two underlying causes of vacancies when they occur? Select only two. Please add any reasons not listed.

- (a) Inadequate pool of trained/qualified workers
- (b) Insufficient compensation package
- (c) Inadequate training opportunities
- (d) Naturally stressful job
- (e) Rural isolation
- (f) Scheduling/shift work
- (g) Organizational workplace issues
- (h) Other (please specify) _____
- (i) Other (please specify) _____

Please feel free to provide any comments or suggestions.

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For the occupations listed below, **please answer these questions:**

- 1. How many positions of this type do you have in your organization?** *Please include only Budgeted Full-Time plus Part-Time positions, but not Relief/Pool/Temporary/Contract. If an employee wears two job "hats", please count them under both occupations.*
- 2. How many of your positions of this type are vacant at this time?** *Please include all those positions now filled by a temporary worker/traveler/contractor that you would prefer to have filled by a permanent employee.*
- 3. Do you hire new graduates in this occupation?**
- 4. How many of your current vacancies could you fill with new graduates?**
- 5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?**

Appendix B: Health Workforce Surveys (Physical/Occupational/Speech Therapy)

6. What do you believe are the main underlying causes of your vacancies?

Organization:			City:		Number:	
Contact person:			Phone:		Email:	
Occupations	Q1. How many positions of this type do you have in your organization (budgeted, full-time plus part-time positions, but not relief/pool/temporary/contract)?	Q2. How many positions of this type are vacant at this time (including positions now filled by temporary employees you would prefer to have filled by permanent employees)?	Q3. Do you hire new graduates in this occupation? (Circle Yes or No)	Q4. How many of your current vacancies could you fill with new graduates?	Q5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?	
Clinicians/Therapists						
Occupational Therapist			Yes	No		
Physical Therapist			Yes	No		
Speech Therapist			Yes	No		
Speech-Language Pathologist			Yes	No		
Allied Health						
Massage Therapist			Yes	No		
Physical Therapy Assistant			Yes	No		
Managers and Administrators						
Administrator/Director/CEO/Manager			Yes	No		
Information and Reimbursement						
Billing Clerks and Technicians			Yes	No		
Billing Supervisor			Yes	No		
Certified Coder			Yes	No		
Coding Clerks and Technicians			Yes	No		
Medical Records Clerks and Technicians			Yes	No		

Appendix B: Health Workforce Surveys (Physical/Occupational/Speech Therapy)

Occupations not listed (please specify and use reverse side if necessary)					
			Yes	No	
			Yes	No	

Q6. For your organization, what are the Top Two underlying causes of vacancies when they occur? Select only two. Please add any reasons not listed.

- (a) Inadequate pool of trained/qualified workers
- (b) Insufficient compensation package
- (c) Inadequate training opportunities
- (d) Naturally stressful job
- (e) Rural isolation
- (f) Scheduling/shift work
- (g) Organizational workplace issues
- (h) Other (please specify) _____
- (i) Other (please specify) _____

Please feel free to provide any comments or suggestions.

THANK YOU VERY MUCH FOR YOUR ASSISTANCE

UNIVERSITY OF ALASKA
HEALTH WORKFORCE SURVEY 2009

The Alaska Center for Rural Health (ACRH) and the Institute of Social and Economic Research (ISER) request your participation in an important study to help the University of Alaska and its health-care-industry partners develop education, training, and recruitment strategies to ensure that you will be able to access qualified health workers. We would like to know how many persons your organization employs in selected health occupations and how many positions are currently vacant. It is also important to learn how many new graduates you are able to hire, so the University and other educational institutions do not flood or underestimate the market. To help us understand your workforce challenges, we are also asking what you believe to be the underlying causes of your vacancies.

We have included in this survey a list of health occupations typically found in your type of organization. If you do not have positions in a particular listed occupation, please just skip it. If you have additional occupations to include, feel free to add them in the spaces provided at the end of the survey. All information you provide will be kept strictly confidential.

Depending upon the complexity of your organization, we would expect it to take about 15 minutes to complete this survey. We understand the demands on your time, and so we offer several options for completing the survey. You may

- Mail this hard-copy in the enclosed, self-addressed, stamped envelope.
- Send us an email (anmlw@uaa.alaska.edu) and we will send an electronic copy you can return to the same e-mail address.
- FAX your completed form to 907-786-7739.
- Provide the information verbally via telephone to the ISER staff interviewer who will soon be contacting you.

If you have any questions, feel free to ask your interviewer, or call Meghan Wilson at 786-5408.

Survey Instructions:

For the occupations listed below, **please answer these questions:**

- 1. How many positions of this type do you have in your organization?** *Please include only Budgeted Full-Time plus Part-Time positions, but not Relief/Pool/Temporary/Contract. If an employee wears two job "hats", please count them under both occupations.*
- 2. How many of your positions of this type are vacant at this time?** *Please include all those positions now filled by a temporary worker/traveler/contractor that you would prefer to have filled by a permanent employee.*
- 3. Do you hire new graduates in this occupation?**
- 4. How many of your current vacancies could you fill with new graduates?**
- 5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?**

Appendix B: Health Workforce Surveys (School Districts)

6. What do you believe are the main underlying causes of your vacancies?

Organization:			City:		Number:	
Contact person:			Phone:		Email:	
Occupations	Q1. How many positions of this type do you have in your organization (budgeted, full-time plus part-time positions, but not relief/pool/temporary/contract)?	Q2. How many positions of this type are vacant at this time (including positions now filled by temporary employees you would prefer to have filled by permanent employees)?	Q3. Do you hire new graduates in this occupation? (Circle Yes or No)	Q4. How many of your current vacancies could you fill with new graduates?	Q5. Approximately how many months has the vacancy existed (the longest current vacancy for this occupation)?	
Physicians						
Family Physician			Yes	No		
Professional Nurses						
Family Nurse-Practitioner			Yes	No		
Pediatric Nurse-Practitioner			Yes	No		
Nurse Manager			Yes	No		
Psychiatric Nurse			Yes	No		
Psychiatric Nurse-Practitioner			Yes	No		
Registered Nurse			Yes	No		
Other Nursing Staff						
Certified Nursing Assistant			Yes	No		
Home Health Aide			Yes	No		
Licensed Practical Nurse			Yes	No		
Personal-Care Attendant			Yes	No		
Other Clinicians/Therapists						
Occupational Therapist			Yes	No		
Physical Therapist			Yes	No		
Speech Therapist			Yes	No		

Appendix B: Health Workforce Surveys (School Districts)

Speech-Language Pathologist				Yes	No		
Behavioral Health							
Behavioral Health Aide/Village Counselor (certificate)				Yes	No		
Behavioral Health Clinician (Examples: <i>Behavioral Health Counselor/Counselor</i> <i>Children's Therapist</i> <i>Clinical Therapist</i> <i>Mental Health Specialist/Therapist</i> <i>(Masters Level)</i>)				Yes	No		
Chemical Dependency Counselor; Substance Abuse Counselor (certificate)				Yes	No		
Case Manager/Care Coordinator (Examples: <i>Clinical Associate</i> <i>Community Support Services Coordinator</i> <i>Family Support Specialist</i> <i>Family Services Team Facilitator</i> <i>Mental Health Associate</i> <i>Service Planner/Coordinator</i> <i>Skills Development Specialist</i> <i>(Bachelor's or Associate Degree)</i>)				Yes	No		
Human Services Worker (Examples: <i>Activity Therapist</i> <i>Crisis Center Advocate</i> <i>Direct Care Provider</i> <i>Direct Support Personnel</i> <i>Family Services Worker</i> <i>Family Services Caseworker</i> <i>Family Advocate</i> <i>Individual Service Provider</i> <i>Life Coach/Life Skills Specialist</i> <i>Mental Health Associate</i> <i>Residential Aide</i>)		HS Diploma		Yes	No		
		Associate Degree		Yes	No		
Licensed Professional Counselor (MA/PhD)				Yes	No		
Psychologist/Psychological Associate (Master's)				Yes	No		
Clinical Psychologist (PhD)				Yes	No		
Social Worker	BSW			Yes	No		
	MSW			Yes	No		
	LCSW			Yes	No		
Allied Health							

Appendix B: Health Workforce Surveys (School Districts)

Physical Therapy Assistant			Yes	No		
Health Education and Community Wellness						
Community Health Representative			Yes	No		
Community Wellness Advocate			Yes	No		
Dietitian			Yes	No		
Health Educator			Yes	No		
Nutritionist			Yes	No		
Managers and Administrators						
Health Information Administrator/Director/Manager			Yes	No		
Nurse Executive/Director of Nursing			Yes	No		
Information and Reimbursement						
Compliance Officer/Auditor			Yes	No		
Medical Records Clerks and Technicians			Yes	No		
Occupations not listed (please specify)						
			Yes	No		
			Yes	No		
			Yes	No		

Appendix B: Health Workforce Surveys (School Districts)

Q6. For your organization, what are the TOP TWO underlying causes of vacancies when they occur? Select only two. Please add any reasons not listed.

- (a) Inadequate pool of trained/qualified workers
- (b) Insufficient compensation package
- (c) Inadequate training opportunities
- (d) Naturally stressful job
- (e) Rural isolation
- (f) Scheduling/shift work
- (g) Organizational workplace issues
- (h) Other (please specify) _____
- (i) Other (please specify) _____

Please feel free to provide any comments or suggestions.

THANK YOU VERY MUCH FOR YOUR ASSISTANCE