

**Healthcare Workforce
Regional Partnership (HWRP)
Brightpoint Community
College Foundation**

**Bridging the Gap:
Healthcare Workforce Supply,
Demand, and Stakeholder
Response in GO Virginia Region 4**

Contract Number: 25001

June 30, 2025

Prepared by:
Carolyn Padovano, PhD, RN, FAAN
Joanna Davis, MPH
Samantha Pham, BS



Bridging the Gap: Healthcare Workforce Supply, Demand, and Stakeholder Response in GO Virginia Region 4

Background

GO Virginia Region 4 is facing a critical healthcare workforce shortage. Demand is outpacing supply in nearly every major occupation, from nursing and medical assisting to imaging, therapy, and dental care. This report synthesizes quantitative labor market data and qualitative insights from employers and educators to outline both the scope of the problem and the pathways toward solutions.

Part I of the report illustrates workforce data showing a persistent and growing gap in high-demand healthcare roles. Region 4 must fill hundreds of positions annually across nursing (RNs, LPNs, CNAs), medical assistants, dental hygienists and assistants, and therapists, many of which require specialized training or licensure that is currently hindered by limited program capacity. Despite strong job growth projections and clear career advancement pathways in many of these fields, the workforce pipeline is not keeping pace.

Part II of the report highlights the lived experience through stakeholder interviews of the region's employers, K–12 school systems, colleges, and workforce training centers. Stakeholders describe a competitive hiring environment, inadequate alignment between school programming and labor market needs, and insufficient support for students, especially those navigating economic and logistical barriers. Still, promising practices for workforce recruitment, development, and retention are emerging: internal career mobility teams, dual enrollment pipelines, earn-while-you-learn models, and career coaching have shown positive results when properly resourced and scaled.

Together, these insights reveal an urgent need for coordinated, aligned regional action.

Part I: Healthcare Workforce Comparison in Region 4: Summary of Data Trends

Region 4's healthcare workforce is under significant strain, with nearly every major clinical occupation experiencing high annual demand and projected long-term growth. Nursing-related roles (Registered Nurses (RNs), Licensed Practical Nurses (LPNs), and Certified Nursing Assistants (CNAs) account for the largest number of annual openings. Medical Assistants (MAs) show the highest projected growth rate at 21%. Allied health occupations, such as, Physical Therapists (PTs), Occupational Therapists (OTs), Radiologic/Imaging Technologists, and Respiratory Therapists are also facing double-digit growth statewide and require steady pipelines to meet ongoing demand. Together, the data underscore that Region 4's healthcare labor market is growing faster than training pipelines can sustain, highlighting an urgent need for targeted investments in education, retention, and career pathway alignment.

Table 1. Healthcare Occupations in Region 4: Annual Openings and Projected Growth

Occupation	Region 4 Employed (2022)¹	Region 4 Annual Openings (2022)¹	VA Projected Growth (2020– 2030)³	VA Annual Openings (Est.)^{2,5,6,7}
Registered Nurse (RN)	13,274	794	8%	4,190
Licensed Practical Nurse (LPN)	2,990	260	11%	1,886
Nursing Assistant (CNA)	6,188	818	13%	5,860
Medical Assistant (MA)	2,885	397	21%	2,150
Dental Hygienist	879	65	18%	300
Dental Assistant	1,425	187	18%	1,360
Physical Therapist (PT)	1,019	62	19%	300
Occupational Therapist (OT)	Est. ~400	Est. ~35	16%	250
Radiologic/Imaging Tech	1,062	84	7%	250
Respiratory Therapist (RT)	Est. ~350	Est. ~50	20%	250

Registered Nurses (RNs)

Registered Nurses are the backbone of the healthcare workforce, and shortages are widespread. Region 4 employs about 13,274 RNs and faces an estimated 794 RN openings per year to meet demand¹. This high turnover and growth reflect retirements of an aging nurse workforce and rising service needs. Statewide, Virginia’s RN employment is projected to grow ~8% from 2020 to 2030, outpacing the national RN growth of ~6%². This translates to about 4,190 RN job openings annually in Virginia when accounting for growth and replacements². However, nursing schools are struggling to expand capacity – Virginia will need thousands of new RNs each year for the foreseeable future to fill the gap. Region 4’s many hospitals and health systems (e.g. VCU Health, HCA hospitals) intensify the local demand. Table 2 summarizes the RN workforce outlook:

Table 2. Registered Nurse Demand in Region 4 and Virginia

Registered Nurses	Region 4 (2022) ¹	Virginia (Projection 2020–2030) ³
Employed RNs (Baseline)	~13,274	67,340 (2020)
Projected Employment	Not Available	72,900 (2030)
Projected Growth Rate	Not Available	+8% ²
Annual Job Openings	~794	~4,190 ²

Despite these large numbers of new RN jobs, the pipeline of new nurses is not keeping up. This supply/demand mismatch is evident in Region 4’s hospitals reporting persistently vacant RN positions.

Licensed Practical Nurses (LPNs)

Licensed Practical Nurses, who provide essential bedside and long-term care, are also in short supply. Region 4 has about 2,990 LPNs employed and needs roughly 260 new LPNs annually to fill open positions¹. Statewide projections show LPN roles growing ~11% from 2020 to 2030 – a faster-than-average rate – with an estimated ~1,886 LPN job openings each year in Virginia when including turnover⁴. Table 3 highlights the demand for LPNs:

Table 3. Licensed Practical Nurse Demand in Region 4 and Virginia

Licensed Practical Nurses	Region 4 (2022) ¹	Virginia (Projection 2020–2030) ³
Employed LPNs (Baseline)	~2,990	Not Available
Projected Growth Rate	Not Available	+11%
Annual Job Openings	~260	~1,886

The data confirm that LPNs represent one of the largest workforce gaps in healthcare, second only to RNs in overall nursing shortages.

Nursing Assistants (CNAs)

Certified Nursing Assistants (also called Nursing Aides) provide front-line patient care in hospitals, nursing homes, and home health settings. Region 4 has about 6,188 nursing assistants employed, with an extremely high annual demand of ~818 openings – even higher than for RNs¹. This reflects both growth and very high turnover in CNA roles, which are physically and emotionally demanding and often low-paid. Virginia projects a 13% growth in nursing assistant jobs from 2020 to 2030, with 5,860 openings each year statewide – one of the largest yearly openings of any occupation³. The table below outlines CNA workforce indicators:

Table 4. Nursing Assistant Demand in Region 4 and Virginia

Nursing Assistants	Region 4 (2022)¹	Virginia (Projection 2020–2030)³
Employed Nursing Assistants	~6,188	41,580 (2020)
Projected Growth Rate	Not Available	+13%
Annual Job Openings	~818	~5,860

Medical Assistants (MAs)

Medical Assistants are another high-need occupation, especially as outpatient clinics and physician offices expand. MAs perform clinical and administrative duties in doctors' offices, urgent care centers, and hospitals. Region 4 employs roughly 2,885 medical assistants and needs about 397 new MAs annually to fill openings¹. This field is one of the fastest growing: Virginia's MA jobs are projected to grow ~21% between 2020 and 2030, with about 2,150 openings each year statewide⁵. In Region 4, major health systems and private practices alike have a steady demand for MAs to support primary care and specialty practices. Table 5 summarizes the MA outlook:

Table 5. Medical Assistant Demand in Region 4 and Virginia

Medical Assistants	Region 4 (2022)¹	Virginia (Projection 2020–2030)⁵
Employed Medical Assistants	~2,885	14,480 (2020)
Projected Growth Rate	Not Available	+21%
Annual Job Openings	~397	~2,150

Such robust growth underscores the need to train more MAs. MA demand is rising rapidly, and without a pipeline increase, the gap between openings and filled positions will widen.

Dental Hygienists

Dental Hygienists, who provide preventive oral care and patient education, are also in short supply, though their numbers are smaller than dental assistants. Region 4 has roughly 879 dental hygienists, with around 65 openings per year for hygienist positions¹. Statewide, the occupation is expected to grow by about 18% this decade, adding ~930 jobs in Virginia (2020–2030)⁶. This high growth rate (around 18% in VA) reflects increasing demand for dental services and a push to improve oral health access. However, the supply of new hygienists is not keeping pace. The impact is significant because hygienists are critical to preventive care. The table below provides an overview:

Table 6. Dental Hygienist Demand in Region 4 and Virginia

Dental Hygienists	Region 4 (2022) ¹	Virginia (Projection 2020–2030) ⁶
Employed Dental Hygienists	~879	~5,100 (est. 2020) *
Projected Growth Rate	Not Available	+18%
Annual Job Openings	~65	Not Available

Dental Assistants

Dental Assistants are essential for dental practices, performing chairside assistance, sterilization of equipment, and administrative tasks. In Region 4, about 1,425 dental assistants work in the field, with ~187 job openings per year to keep up with demand¹. Virginia projects a 17–18% growth in dental assistant jobs over the decade, adding roughly 1,410 positions statewide (2018–2028)⁶. Table 7 shows data for dental assistants:

Table 7. Dental Assistant Demand in Region 4 and Virginia

Dental Assistants	Region 4 (2022) ¹	Virginia (Projection 2018–2028) ⁷
Employed Dental Assistants	~1,425	8,150 (2018)
Projected Growth Rate	Not Available	+18% ⁶
Annual Job Openings	~187	~1,360

Physical Therapists (PTs)

Physical Therapists are in critically short supply as the population ages and demand for rehabilitation services rises. Region 4 currently has about 1,019 physical therapists practicing and needs an estimated 62 additional PTs each year to meet demand¹. Across Virginia, PT employment is projected to grow roughly 19–20% over the decade, one of the higher growth rates among health professions⁶. Approximately 1,280 new PT jobs will be added statewide by 2030 (19.3% growth)⁶, which indicates there will be many hundreds of PT openings annually in Virginia. However, the supply of licensed PTs is not keeping up. In Region 4, hospitals, long term care facilities, rehabilitation centers, and home health agencies are all competing for a limited pool of PTs, leading to persistent vacancies. The following table highlights the PT workforce.

Table 8. Physical Therapist Demand in Region 4 and Virginia

Physical Therapists	Region 4 (2022) ¹	Virginia (Projection 2020–2030) ⁶
Employed Physical Therapists	~1,019	~6,630 (2020 est.)
Projected Growth Rate	Not Available	+19.3%
Annual Job Openings	~62	~300+

Occupational Therapists (OTs)

Occupational Therapists help patients regain daily living skills, and their services are increasingly needed in rehabilitation centers, long term care facilities, schools, and community health. Virginia forecasts a 16.0% growth in OT jobs from 2020 to 2030⁶ corresponding to around 480 new OT positions statewide in that period. Region 4 can expect significant OT job creation and turnover. The projected OT growth (16%) reflects the rising demand in eldercare, and in particular, helping seniors maintain independence.

Table 9. Occupational Therapist Demand in Region 4 and Virginia

Occupational Therapists	Region 4 (2022) ¹	Virginia (Projection 2020–2030) ⁶
Employed OTs	~400	~3,000 (2020 est.)
Projected Growth Rate	Not Available	+16%
Annual Job Openings	Est. ~35	~250

Radiologic/Imaging Technologists

Radiologic Technologists (including X-ray, CT, and MRI technologists) and other imaging techs are vital for diagnostic services, and Region 4 has a strong concentration of these professionals. The region's large hospital systems indicate Radiologic Technology employment above average in Region 4¹, yet shortages persist. Region 4 has about 1,062 radiologic technologists, with roughly 84 openings per year to meet demand¹. Statewide growth for radiologic technologists is more modest – projected at about 7.4% from 2020 to 2030 (around 420 new jobs in Virginia)⁶. Although this growth rate (~7%) is lower than some other health occupations, the field still experiences workforce gaps. The 84 annual openings suggest a need to train or attract nearly 8% of the current workforce each year – a challenge given the training required.

Table 10. Radiologic/Imaging Technologist Demand in Region 4 and Virginia

Radiologic/Imaging Technologist	Region 4 (2022)¹	Virginia (Projection 2020–2030)⁶
Employed Technologists	~1,062	~5,700 (2020 est.)
Projected Growth Rate	Not Available	+7.4%
Annual Job Openings	~84	~250

Respiratory Therapists (RTs)

Respiratory Therapists have gained heightened attention due to the COVID-19 pandemic and the prevalence of respiratory illnesses. They are critical in hospitals' ICU and pulmonary units, as well as in home oxygen therapy and pulmonary rehabilitation programs. Virginia expects a 20.4% growth in respiratory therapist jobs from 2020 to 2030⁶ – one of the fastest growth rates among allied health fields – adding about 500 new RT positions statewide in that period⁶. Region 4, with multiple large hospitals and specialty lung programs (e.g. VCU's respiratory care), bears a substantial portion of that demand. While exact regional employment isn't published, we can expect that employer demand is high, as Region 4 hospitals frequently have multiple open RT positions.

Table 11. Respiratory Therapist Demand in Region 4 and Virginia

Respiratory Therapists	Region 4 (2022)¹	Virginia (Projection 2020–2030)⁶
Employed RTs	Est. ~350	~2,450 (2020 est.)
Projected Growth Rate	Not Available	+20.4%
Annual Job Openings	Est. ~50	~250

Part II: Summary of Stakeholder Interviews and Identified Workforce Gaps/Needs

Employer Interviews

IPHI interviewed 4 people who represented 2 employer groups in Region 4 to gain additional knowledge on their top recruiting and hiring needs and to discuss their engagement with educational and workforce partners in order to help them fulfill these needs. We also explored their top barriers and challenges to recruiting and hiring, reviewed their top successes to retention, and examined if they could implement any policy or change to better support the healthcare workforce pipeline in their region, what would it be and why? Below is a summary of some of the themes that emerged as a result of these conversations.

Hiring Needs

The majority of the employers interviewed stated that their top hiring need is in the *area of nursing*. One employer predicted needing over 3,400 RNs within this next year while another validated that there were currently over 1,100 open positions for either an RN or an LPN in their facilities in Region 4 alone. Other positions being recruited/hired for in this pathway included *certified nursing assistants (CNAs), medical assistants (MAs), patient care technicians (PCTs), and care companions*. The next top hiring need reported was in the area of *imaging* with an employer group stating that they needed 550 new hires within the next year. Other hiring needs mentioned but to a lesser extent included respiratory therapists and surgical technicians.

Employers described partnering with high schools, training centers, and community colleges to create workforce development programs for students without plans after graduation who wanted access to resources and pathways to enter the workforce. Several successful partnerships were communicated to us with employers stating that they have effectively employed hundreds of students into entry level nonclinical programs and have advanced them now to clinical programs particularly in nursing, imaging, respiratory, and surgical technology programs. One suggestion was to “*more closely align high schools with academic partners when planning programs so that they could continue to support the top hiring needs of employers*” (i.e., the greater need for a certified nursing assistant (CNA) programs versus medical assistant (MA) programs).

Challenges/Barriers

One of the challenges that employers mentioned was in recruiting new hires to their organization; “*it’s a competitive market and there is a war for talent.*” It was explained that ever since COVID-19 hit, it has leveled the playing field because there is a shortage of healthcare workers and to attract and retain talent, an employer really needs to market why one would benefit working at its organization. Another challenge that an employer discussed who delivers training programs/pathways internally for their organization states “*once you fill these positions internally, where do go externally (which college) to fill the additional positions you need for this pathway, as there is a shortage of teachers and clinical placements.*” This barrier was similarly described for certified nursing assistants who wanted to continue with their education onto

nursing as “*there just aren’t enough spots in nursing schools and there aren’t enough nursing instructors.*” Some employers affiliated with schools also explained that some of their local hospitals had discontinued specialty services like obstetrics and gynecology (OB-GYN) forcing students/employees to seek clinical placements outside of their area posing transportation issues and potentially incompleteness of program.

Successes

The theme of *working closely/partnering with a team to recruit, hire, and onboard* in order to successfully attract and retain a qualified and engaged workforce was brought up by all the employer groups that we talked with. The employers described the strategies with which they accomplished this in various ways. Some employers used “*internal mobility teams*” which included career coaches and mentors to onboard and train new staff along their career pathway. They additionally used campaigns to encourage career growth, including professional development benefits like certification and degree programs and educational funding. Another employer discussed working internally with their “*HR team to develop their workforce development plan*” for their organization and illustrated their team as one that “*helped paint the picture/tell the story of what the organization needed because they had the data and reports of the turnover and hard to fill positions, and these are the positions that our team needs to help support and determine the most effective partnerships/credentials to pursue with workforce development organizations and community colleges.*” They further explained utilizing “*career development specialists*” who work with and shadow employees/program participants to make sure that they are getting the most out of their educational benefits.

Implementing Change or Policy to Support Workforce Development In Region

In order to better support the healthcare workforce pipeline in your region, some employers mentioned more closely aligning K – 12 needs with post-secondary and employment needs and suggested if the region’s school districts would consider using the same career exploration assessment tool/resource. “*If companies in the various sectors could lean in with K – 12 and create/select one career exploration platform/program perhaps this would lead to better alignment with workforce programming in their service areas resulting in work-ready talent.*” Employers also described wanting a dedicated team to the K – 12 efforts but stated because of the shortage of staff *we need to use these staff for clinical efforts.*

Another suggestion was made to *implement an Earn While You Learn Program.* This employer was investigating with community colleges and workforce development programs various methods of how to create programs where students can receive income while learning. For example, while students are completing their clinical rotations and providing care for patients and getting exposure to the environment and equipment while they are working in the hospital, or if they are already a CNA and are working towards an LPN, they would be able to obtain a salary during this clinical time.

University/College/Community College/County School Interviews

IPHI interviewed 6 people who represented 4 universities/colleges/community colleges/county schools in Region 4 to gain additional knowledge on how they recruit and retain students for their programs and to discuss what industry or career pathways they see as the most in demand for employers and students. We asked them to describe how they work with local healthcare employers to help them fulfill their workforce needs. We also explored the top barriers and challenges students face to entering and sustaining careers in the healthcare workforce and asked if there were specific support services provided to students to improve completion rates. We further probed to determine if student outcomes were tracked during and after they graduated. Lastly, IPHI examined with the interviewees if they could implement any policy or change to better support the healthcare workforce pipeline in their region, what would it be and why? Below is a summary of some of the themes that emerged as a result of these conversations.

Recruiting and Retaining Students

Various Recruiting Methods Used for Marketing and Outreach

IPHI interviewed a range of school systems throughout Region 4 including one school system who partners with 9 high schools, 3 advanced career education (ACE) centers, 47 elementary schools, and some alternative schools and jails; and another school system who services 23 community colleges/workforce programs, including their affiliated hospitals and non-profit healthcare entities, and some K – 12 schools. Therefore, the age range for recruiting students is elementary school to adult education. Recruitment was described in a wide variety of ways by starting to educate youth and their parents in concert with school counselors as young as the sixth grade by teaching them about healthcare opportunities, to more formal approaches of educating 11th and 12th grade students in certified, non-degreed healthcare programs to degreed healthcare programs offered by community colleges. Additionally, the school systems interviewed worked with marketing teams to develop healthcare materials, booklets, websites, and platforms/portals to describe key programs, career pathways/curriculum and the progression, salary structure, job opportunities, etc. They also described how they recruit by conducting community outreach and engagement with K – 12 educational systems and their partnerships with various healthcare providers, organizations, and associations. Job Fairs were described as one method of recruitment and an event cited was the *Life Ready Expo* – “a job fair on steroids” - with many businesses attending promoting their career pathways to students in grades 6 to 12. Another strategy mentioned was a *Career Rodeo* – “a kind of reverse job fair” - where students demonstrate their skills to employers hoping to land a job. Highlighting and marketing career pathways through the Adult Education Centers via *Career Mega Sales* or – “selling careers” - was also discussed. Using podcasts to educate the public was also alluded to.

Retaining Students via Navigators and Advisors

In order to retain students, the majority of the school systems stated they used navigators, advisors, and/or workforce staff to tend to the needs of the students and to keep them on track with their healthcare classes/programs. These staff provide support services to students and make sure they understand the credentials/degree requirements related to their program and coach them throughout to successfully complete their programs.

Challenges/Barriers

Lack of Understanding Career Paths

One of the challenges/barriers mentioned was around the students' understanding of the career path from the beginning and what it takes to complete the program. One suggestion was made to have an *“exploratory class of healthcare offerings in the 11th grade for students to educate as much as possible on successful careers and the degrees you need.”* Another recommendation was to have hospitals (employers) have a *“dedicated person to work with the community colleges.”*

Faculty Turnover/Retention Issues

Other challenges/barriers that were brought up by the school systems include: the *“shortage of faculty/staff”* to teach students; the *“lack of pay”* in the education area to attract getting qualified nurses, nurses aides, and/or medical assistance to teach; the *“lack of facilities, equipment, and resources”* to teach; and *“the need to change the narrative for K - 12 students”* to prepare them for a pathway of certification to degree (rather than directly to degree).

In-Demand Career Pathways to Serve Employer Needs

Nurses and Nursing Pathway Top Priority

The majority of school systems we interviewed discussed that in order to fulfill hospital systems and long term care facilities' needs the largest careers pathway(s) in demand was/were in the areas of CNA's, MA's, LPNs, and RNs. There was also a perception that there also may be a need for a pathway in imaging and oral health.

Support Services Provided to Improve Success

G3 Funding

The Get Skilled, Get a Job, Give Back (G3) program was mentioned most frequently as the top support service to students because it offers tuition assistance to students who qualify for in-state financial aid, have a family income below an identified threshold, and are enrolled in a healthcare program at an approved degree/certificate and noncredit workforce training programs or at an associate degree-granting public institution of higher education. Other tuition/financial

assistance programs were also described by community colleges and universities that offer assistance throughout the year.

Connection to Other Resources

Community connections coordinators were cited as one strategy to connect students to resources within communities in order to improve their success with completing programs. Examples of services provided included utility assistance, meals/food pantry access, and transportation. Other workforce training centers in addition to the strategies stated above also provide wellness and behavioral health programs for their students in order to coach and monitor while in programs. Some schools provide support with teams and include student advocates/counselors to help communicate students' needs in order to target the services they provide.

Measuring Student Outcomes

Successful Completion of Program and Employment

Each school system that we interviewed measured the student outcomes based on that student populations' goals. For example, if the students were completing a certificate with the goal of being employed, the school would measure the success rate of completion of the certificate along with successful employment. Similarly, if the goal of the student was to obtain employment at the same location where they completed their clinical rotation, then the school would measure the success based on that goal. Other colleges measured success based on the pathway. For instance, if a student wanted to go further in their academics, from RN to BSN, the measure of the outcome would be the completion of the BSN program.

We also discussed with the colleges if they follow and measure the success of the students post degree programs (while working) and we received varied responses. Some colleges responded that they use their own measurements (and did not elaborate), and some consider the student's education/completion of the academic program and gainful employment as the measure of success.

Implementing Change or Policy to Support Workforce Development In Region

Need for Standardized Career Paths/Ladders

In order to better support the healthcare workforce pipeline in your region, it was described what would help would be to *“start with being well informed about the expectations of the (healthcare) job and then also have a greater understanding of the possible career path so individuals know where they are going (i.e., what is needed for next level/career ladder; pay progression/promotion).”* It was suggested that all healthcare facilities have standardized career pathways established for all individuals on the date of hire and it should be incorporated into the onboarding and orientation process so that employees know their occupational pathway and their next steps towards raises, promotions, professional development, and career progression within a company (i.e., in order to promote job satisfaction, retention, succession planning).

Regulatory Barriers

Another recommendation discussed that may help build the healthcare pipeline and fill jobs quicker is if healthcare organizations could assign one point of contact/one dedicated employee to work specifically with schools for each career pathway/cohort and once the student has successfully completed the program, they are employed. Other discussions revolved around legalities - *how do we get beyond regulations to bridge gaps, for instance, to get students real world experience and opportunities?* The example was given that students could not gain clinical experience and/or have a clinical placement without being 18 years old and some high school students are 16, 17, 17 ½, or just shy of 18. In order to build a workforce, it was recognized that removing some of these barriers and being flexible will be needed.

Workforce Development/Training Center Interviews

IPHI interviewed 3 people representing 2 workforce development/training centers in Region 4 to gain additional knowledge on how they recruit and retain students/candidates for their programs and to discuss what industry or career pathways they see as the most in demand for employers and students/candidates. We asked them to describe how they work with local healthcare employers to help them fulfill their workforce needs. We also explored the top barriers and challenges students/candidates face when entering and sustaining careers in the healthcare workforce and asked if there were specific support services provided to improve employment success. We further probed to determine if employers were satisfied with the placement of new hires. Lastly, IPHI examined with the interviewees if they could implement any policy or change to better support the healthcare workforce pipeline in their region, what would it be and why? Below is a summary of some of the themes that emerged as a result of these conversations.

Recruiting and Retaining Students/Candidates

One workforce development/training center that we interviewed was established to improve the supply, distribution, retention, and quality of primary care practitioners and other healthcare professionals in medically underserved areas for the state of Virginia throughout its regional centers. The four main focus areas that they recruit and retain students/candidates for include: (1) community health worker program; (2) Area Health Education Center (AHEC) scholars program – two year health profession degree or certification program (i.e., medical, nursing, dental, OT, PT, etc.); (3) healthcare professional programs (i.e., graduate medical education and fellowships); and (4) high school healthcare pipeline programs.

Challenges/Barriers

The main challenge cited by workforce development/training centers that students face in completing programs include the financial commitment. It was explained to us that

many programs only have a “*modest stipend*” to offer (up to \$2,000) and this is not enough financial assistance for most students to be successful. Additionally, a lot of the employment opportunities offered after completion of the various programs are located in rural areas so sometimes it is *very difficult to attract candidates to these rural areas*. Making housing and the surrounding area appealing are strategies employers have had to consider in order to entice new hires.

In-Demand Career Pathways to Serve Employer Needs

The *most in demand career pathway described by workforce development/training centers to serve employer needs included nursing at all levels, nurse practitioners (NP), and physician assistants (PA)* – so essentially providers. They further described that their workforce development center has host sites throughout the state/region that deliver clinical training, and one challenge is that “*it depends on the location and how many students/candidates/professionals you can train.*” This can be a great barrier to serving employer needs and the interviewees suggested that they need better strategies “*to connect with schools in order to develop additional relationships for more clinical experiences/placements.*”

CHW training was another pathway that was mentioned that was *in demand with students* due to it being both an in-person and an on-line program. The program also has a funding incentive, a certification, and was recently approved for apprenticeship opportunities.

Support Services Provided to Improve Success

The main support mentioned by the workforce development center was the “*modest stipend*” offered (up to \$2,000) to some of the students for their programs. It was also stated that for graduate medical education (i.e., residency after medical school) that there was some funding available for residency spots in Virginia, but the amount was not cited. The only elaboration was that sometime the problem is “*when doctors complete their Virginia residency and training a lot of them end up leaving the state.*”

It was also mentioned during the interview that if childcare was provided as a support service to some of the students it would improve their success at completing the programs.

Measuring Student Outcomes

The workforce development center stated that they *survey the CHWs three, six, and nine months after they complete the certification program* to see if they’re employed and where they’re working. Similarly, they follow up and *survey the professionals that complete the AHEC scholars program one year after completion of program*, to see where they’re working, and they also check in with the employer to see how things are going. The workforce development program also offers continuing education (CE’s) to all who have attended their programs, and they measure student learning outcomes of all who participate.

Implementing Change or Policy to Support Workforce Development In Region

The one thing that the workforce development/training centers mentioned that they wished that they could implement to support their workforce in the region would be to be able to *treat their health professional programs as a paid internship so that their students could receive living wages. “Afterall, as they’re in school, they’re still working and providing a service.”*

Conclusion

This report documents a clear and widening gap between the region’s healthcare labor demand and its current capacity to train, attract, and retain qualified professionals across critical roles.

The data in Part I highlight occupations with the highest demand, especially in nursing, nursing support, imaging, physical and occupational therapy, where annual openings exceed available talent. Part II brings this to life through interviews with employers, educators, and workforce programs who describe daily struggles to fill positions, expand training access, and support students on the path to employment.

Across the region, stakeholders are experimenting with new models: career coaching, internal mobility programs, dual enrollment pathways, and earn-while-you-learn programs, that are already showing results. These strategies are promising, but remain under-resourced and fragmented.

The road ahead requires not just more programs, but better coordination. Building a resilient and equitable healthcare workforce will demand shared commitment to align education with industry, expand student supports, and ensure that every aspiring healthcare worker access the training, mentorship, and opportunities they need to succeed.

Region 4 is positioned not just to close its workforce gaps, but to lead the way in designing a healthcare pipeline that works for workers, for employers and educators, and for the communities they serve.

References

1. George Mason University Center for Health Workforce. *Regional Workforce Analysis: GO Virginia Region 4*. Published September 2022. Accessed May 29, 2025. https://vahlthwf.gmu.edu/wp-content/uploads/2022/09/Regional-Workforce-Analysis_GO4.pdf
2. Arizona College of Nursing. *What Is the Job Outlook for Nurses in Virginia?* Published February 21, 2024. <https://www.arizonacollege.edu/blog/what-is-the-job-outlook-for-nurses-in-virginia/>
3. U.S. Department of Labor, Employment and Training Administration. *Virginia Employment Trends: 29-1141.00 – Registered Nurses*. O*NET OnLine. <https://www.onetonline.org/link/localtrends/29-1141.00?st=VA>
4. *Best LPN Programs in Virginia – Accredited Online LPN Programs for 2025*. Published 2024. <https://research.com/degrees/best-lpn-programs-in-virginia>
5. MedAssisting.org. *Become a Medical Assistant in Virginia*. <https://medassisting.org/va/#:~:text=positive%20growth%20outlook,openings%20due%20to%20growth%20and>
6. Medical Technology Schools. *Demand for these health care jobs is increasing most in Virginia*. Stacker. Published February 26, 2024. <https://stacker.com/stories/virginia/demand-these-health-care-jobs-increasing-most-virginiastacker.com+1stacker.com+1>
7. CareerOneStop. *Projected Employment for Dental Assistants in Virginia*. U.S. Department of Labor, Employment and Training Administration. <https://stagechatbotapi.careeronestop.org/Toolkit/StateAndLocal/ProjectedEmployment.aspx?soccode=319091&location=Virginia&dataview=table>