L.A. region K-16 collaborative

Executive Summary

STRENGTHENING L.A.'S HEALTH CARE TALENT PIPELINE

Empowering our Systems to Meet Health Care Workforce Needs

Los Angeles County is home to one of the most diverse and expansive public education systems in the nation. Its health care sector represents both a critical economic engine and a unique opportunity to drive equitable workforce development. As of 2022, the health care services industry employed nearly 500,000 payroll workers in Los Angeles County, accounting for more than 11 percent of the region's employment. As nearly 42,400 new health care jobs are already expected by 2026, educators play a critical role in guiding students into these growing, stable and often well-compensated fields. However, the systems that prepare students for these roles—K-12, community colleges and universities—face significant challenges in terms of equity, alignment and capacity. This executive summary provides an accessible interpretation of key labor market data from the full report into actionable recommendations for educators at every system level.

The upshot: there is a mismatch in the sector's significant labor market supply and demand that has profound implications for both students and the regional economy. Students seeking affordable pathways into health care careers often face limited community college options, forcing them toward expensive private programs that can cost three to four times more and saddle graduates with substantial debt. Meanwhile, health care employers struggle to fill essential positions, potentially limiting access to care across the region. By designing educational pathways that align with high-opportunity careers, educators can help relieve this health care labor crisis by helping students enter and succeed in roles that offer family-sustaining wages, job security and opportunities for upward mobility.

Los Angeles County's health care workforce needs are growing. The student pipeline exists. The economic returns are proven.

The question is whether educational systems can overcome long standing capacity constraints to meet this critical opportunity.

Key Labor Market Trends

- In 2022, **L.A. County's health care sector supported 498,650 jobs, with most growth in Ambulatory Care** (60 percent of all jobs). Projections in Ambulatory Care show a growth of 42,400 jobs by 2026, particularly in Nursing and Residential Care Facilities (+7,400 jobs) and Outpatient Care.

> L.A. County's self-sufficiency standard in 2024 for one single adult is $24.03/hour or $50,758 annually.
>
> Women's Center at the University of Washington Self Sufficiency Standard

- **Health care careers have vastly different earning potential and educational requirements.** For example, Home Health Aides earn an average annual salary of $32,404, while Nurse Practitioners earn nearly five times that amount, averaging $153,444. The educational demands mirror this gap: Home Health Aides typically need only a high school diploma and a short-term credential, whereas Nurse Practitioners must complete postgraduate education and years of clinical training. **Despite the clear wage progression across the sector, few structured educational pathways connecting lower-wage roles to higher-wage professions exist, limiting mobility of health care frontline workers.**

- **High-growth middle-skill** roles such as Radiologic Technologists, Dental Hygienists and Physical Therapist Assistants **offer salaries well above the Self-Sufficiency Standard**, while others, like Dental Assistants and LVNs, fall below that threshold for entry-level earners.

- **Workforce demographics in Los Angeles County reveal stark equity gaps**. Although Hispanic/Latino residents make up 48 percent of the county's population, they are overrepresented in low-wage health care roles—comprising 62 percent of Medical Assistants, for instance. In contrast, higher-wage positions like Nurse Practitioners are disproportionately held by white and Asian workers, with Hispanic/Latino individuals accounting for just 22 percent of that workforce. This imbalance underscores systemic barriers to advancement and highlights the need for more inclusive pathways into high-opportunity health care careers.

Federal Budget and Policy Outlook: L.A.'s health care system faces unprecedented uncertainty as pending federal actions threaten core funding streams. With L.A. County's health services deriving 80 percent of revenue from Medicaid, proposed caps and cuts could force service reductions without replacement funding. Scheduled Medicaid DSH cuts ($8 billion annually starting FY2026), potential Community Health Center Fund expiration (September 2025), and reduced CDC discretionary programs all jeopardize the safety net and workforce training infrastructure. The federal "unwinding" of pandemic protections is already increasing uncompensated care burdens. These fiscal headwinds will interact with local labor dynamics and may deepen equity gaps if funding cuts limit training capacity. **K-16 educators must act decisively now to expand health care workforce pipelines, as realizing L.A.'s projected health care job growth depends critically on educational systems adapting to this volatile funding environment and addressing the supply-demand gap before system capacity is further compromised.**

Recommendations for K-16 Educators

Engage in labor market information to advance equitable career pathways

Educators play a vital role in preparing students for meaningful, well-paying careers. By leveraging labor market information (LMI) to take strategic action, schools, colleges and workforce partners can better align education with regional economic opportunities—especially in health care, where job quality and accessibility vary widely.

Here are ways K-16 educators can take action with LMI:

Share Local Career Data with Students, Families and Staff

Use LMI to build awareness of in-demand health care careers, including wage levels, growth projections and education requirements. Present data in accessible formats to help students, caregivers, counselors and faculty understand the real opportunities—and barriers—within L.A. County's health care economy.

Map Existing Programs to High-Demand, High-Wage Occupations

Assess whether current course offerings and pathways align with occupations that offer self-sufficient wages. Identify gaps where program redesign or expansion is needed to better connect learners to health care roles with strong growth and advancement potential.

Build Employer Partnerships to Stay Responsive to Workforce Needs

Collaborate with local health care employers to understand evolving hiring trends, preferred credentials and opportunities for work-based learning. Use this information to co-design programs that are both learner-centered and industry-informed.

Communicate Wage and Career Outcomes Transparently

Empower students and families to make informed choices by clearly sharing wage outcomes, career trajectories and potential return on investment for health care training programs. This includes clarifying which roles offer sustainable wages and which may require further education to reach economic mobility.

Recommendations for Community College Educators

Expand capacity in programs tied to high-growth roles

For community colleges, five middle-skill occupations—**Radiologic Technologist, Physical Therapist Assistant, Dental Hygienist, Dental Assistant and LVN**—are expected to add more than 6,000 jobs in L.A. County through 2028. Yet, community colleges are not meeting demand. For example:

- 48 percent of Radiologic Technologist degrees and 60 percent of Dental Hygienist degrees come from public community colleges, an opportunity to understand successful approaches and grow programs to meet demand.
- LVNs are predominantly trained at private institutions, with community colleges contributing just 14 percent of completions.

Community colleges should work with regional employers and public agencies to:

- Increase faculty hiring pipelines and upgrade facilities by partnering with health care employers that have the most to gain in program growth.
- Address clinical placement shortages through partnerships and simulation-based learning.
- Prioritize investments in community college programs that have high-value market share and room to grow.

Improve program accessibility and reduce equity barriers

High-unit prerequisites, limited financial aid for extended certificates and complex admissions processes disproportionately impact low-income, first-generation and working students. **Institutions can support access and persistence by:**

- Using Credit for Prior Learning and Competency-Based Education to reduce time to completion and to capture prior knowledge, specifically useful when building stackable credentials.
- Providing embedded advising, child care and transportation support to allow students to attend full time and persist in college programs.
- Developing learn and earn opportunities that don't require students to choose between work and training.
- Creating real pathways that are stacked between entry roles (e.g., MA, CNA) to higher-wage opportunities.

Strengthen ADT and transfer pipelines in health-related majors

Though Associate Degrees for Transfer (ADTs) streamline transfer to CSU campuses, very few are available in health-related fields. In 2019-20, only 17 percent of all associate degrees in health were ADTs. **To improve upward mobility, colleges should:**

- Expand ADTs in public health, nutrition and behavioral health.
- Work with CSU partners to ensure ADT alignment with receiving majors.
- Improve advising so students understand the value and requirements of ADTs.

Recommendations for Four-Year College/University Educators

Align bachelor's degree programs with regional workforce needs

Universities in L.A. County offer key pathways in nursing, public health and health administration, yet many occupations, such as Clinical Lab Technologists or Health Information Managers, lack clear educational offerings. **Institutions should:**

- Identify gaps between available majors and regional occupational demand.
- Add or expand applied health degree offerings tied to growing roles.
- Partner with community colleges to offer clearer transfer pathways, including the growth of ADTs.

Use labor market data in curriculum and student advising

Students often major in health-related fields without understanding the job market, credentialing requirements or how their skills can be applied to multiple careers.
By integrating wage and job data into advising systems, universities can:

- Help students make informed decisions about majors.
- Reduce excess unit accumulation.
- Promote degree completion aligned with good jobs.

Support clinical partnerships and placement systems

An estimated 4.6 to 6.5 million additional clinical hours are needed to meet statewide health care training demand. Universities should:

- Co-develop clinical placement systems with local employers and community colleges.
- Create pilot programs to share clinical rotations and simulation models.
- Invest in faculty and preceptor development across shared sites.

In addition to K-16 educational partners, Los Angeles has a strong regional consortium structure positioned to leverage local assets and drive systematic innovation based on shared interests. Addressing health care pathway bottlenecks in education will require a multipronged regional partnership approach using a set of solutions simultaneously, rather than relying on a single solution. For example, an approach might combine addressing clinical practical hours through simulation, placements at alternative sites like Federally Qualified Health Centers, and limited time in hospital settings to satisfy training requirements and provide diverse experiences to students.

Conclusion

Educators in every segment play a crucial role in shaping a more inclusive and effective health care workforce pipeline. Labor market information reveals not only where the opportunities are, but also where systems fall short. **By integrating this information into planning, curriculum, advising and program design, the K-16 systems in Los Angeles County can better prepare students for careers that offer stability, purpose and prosperity—and ensure the region is ready to meet its health care demands for decades to come.**

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