

## Sector Training Strategies During the COVID-19 Pandemic

### Issue Brief – Lessons from the America’s Promise Partnerships

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The COVID-19 pandemic (herein referred to as the pandemic) required workforce development agencies, education and training providers, and community-based organizations to adjust their operations and service delivery to meet employers’ needs while ensuring the health and safety of their communities and workforces. This brief draws on data collected from virtual site visits with 18 of the 23 America’s Promise Job Driven Training (America’s Promise) grant programs as part of a comprehensive implementation study to explore the development of and services provided by regional grant partnerships involving workforce development agencies, institutions of higher education, economic development

#### Study background

**Chief Evaluation Office**  
U.S. DEPARTMENT OF LABOR 

This issue brief is part of a study funded by the U.S. Department of Labor (DOL), Chief Evaluation Office that explores the implementation and impact of the America’s Promise Job Driven Training grants, which 23 organizations received in 2016. These grants, funded by DOL’s Employment and Training Administration, support creating and expanding regional workforce partnerships—including workforce development agencies, institutions of higher education, economic development agencies, employers, and community-based organizations—aimed at preparing workers for careers in middle- to high-skilled industries and occupations. ▲

agencies, employers, and community based organizations.<sup>1</sup> It highlights creative approaches and challenges to adjusting service delivery in the changing context of the pandemic as well as adaptations used to meet the needs of the sectors most commonly targeted by the America’s Promise grants – the advanced manufacturing, health care, and information technology (IT) industries. Exhibit 1 summarizes key findings. Virtual site visits occurred from August to November 2020 and involved interviews conducted over video with grant and partner managers, employers, and frontline staff, and focus groups with America’s Promise program participants. Each visit included, on average, 12 interviews.

### Exhibit 1. Summary of broad and industry-specific findings

<b>Virtual case management, intake, and job placement</b>	<ul style="list-style-type: none"> <li>• Virtual outreach, intake, and case management required new approaches, technologies, and flexibility.</li> <li>• Success in virtual job placement and career fairs required investment of staff time and technology.</li> <li>• New barriers to training participation and completion emerged despite the creative use of resources and referral networks.</li> </ul>
<b>Advanced manufacturing industry</b>	<ul style="list-style-type: none"> <li>• Advanced manufacturing in grantee target areas faced initial shutdowns with mixed demand for products upon reopening.</li> <li>• Many hands-on trainings offered by grantees were halted or discontinued throughout pandemic, while some shifted to hybrid or in-person learning with strict capacity and distancing rules.</li> <li>• Grantees targeting advanced manufacturing noted the potential to increase incumbent worker training.</li> </ul>

<sup>1</sup> Additional information about all 23 America’s Promise Job Driven Training grant programs can be found here: <https://www.dol.gov/newsroom/releases/eta/eta20161117>

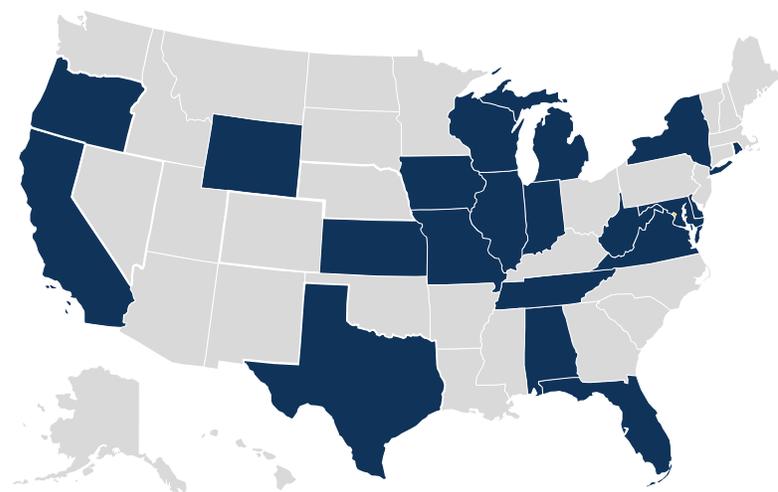
<p><b>Healthcare industry</b></p>	<ul style="list-style-type: none"> <li>• The healthcare industry in grantee target areas saw furloughs and layoffs as demand for preventative, routine, and elective care fell.</li> <li>• The pandemic amplified existing shortages in the critical health care workforce.</li> <li>• Grantees noted that participant concerns about COVID-19 exposure limited interest in health care jobs.</li> <li>• Delays in required clinical training components and certifications prevented some participants from completing training timely.</li> </ul>
<p><b>Information technology industry</b></p>	<ul style="list-style-type: none"> <li>• Grantees reported few IT industry disruptions in their target areas due to the pandemic.</li> <li>• They also reported that the IT industry transitioned smoothly to virtual learning.</li> <li>• An increased pool of qualified applicants posed challenges for job placement of the grantees' participants.</li> </ul>

## Experiences shifting to remote work environments for staff

As the implications of the pandemic became clearer and states and jurisdictions began implementing stay-at-home orders in March and April 2020, the 18 America’s Promise grant partnerships adapted their operating procedures to shift staff to virtual work environments. Stay-at-home orders in the states where America’s Promise grant partnerships were located lasted an average of six weeks, ranging from 3.5 to 10 weeks before phased reopening began (Figure 1). Five grant partnerships spanned multiple states with varying pandemic-related restrictions, resulting in different rules for organizations within the same partnership. At the time of the site visits in fall 2020, five grantees were still fully remote and 11 reported returning to hybrid operations with a mix of virtual and in-person services (two did not specify). New in-person operations typically did not resemble their pre-pandemic status. For example, some agencies organized staff into cohorts with staggered time in the office, whereas others had some staff returning and others remaining remote.

The infrastructure and staff experience to facilitate the shift to remote work varied widely across grant partnerships. Managers at two grant partnerships led by institutions of higher education noted many staff already worked virtually and the shutdown simply expedited plans to provide virtual options to more staff. In contrast, the grant manager from one workforce grantee reported none of its staff had ever worked remotely prior to the pandemic, and the shift required the purchase of updated technology. Frontline staff, including case managers and job developers, across grant partnerships described needing to adjust to remote work. Previously, frontline workers could easily check-in with one another to ask questions or coordinate service delivery. They reported that the shift to fully remote work made this kind of informal collaboration less frequent.

**Figure 1. State locations of America’s Promise grantee organizations**



## Strategies for virtual intake, case management and job placement

America's Promise grantees and their partners, like other organizations providing employment and training services, had to adapt their approaches to enrolling participants, providing case management, and placing participants in employment (Volpe 2020). Of the 18 partnerships, five grant managers indicated that they briefly paused new enrollments during the early months of the pandemic; instead, they focused on modifying strategies to best serve existing participants. The remainder reported continuing enrollment while adjusting their service approaches. Staff across all partnerships shared their perceptions of lessons learned for supporting virtual services:

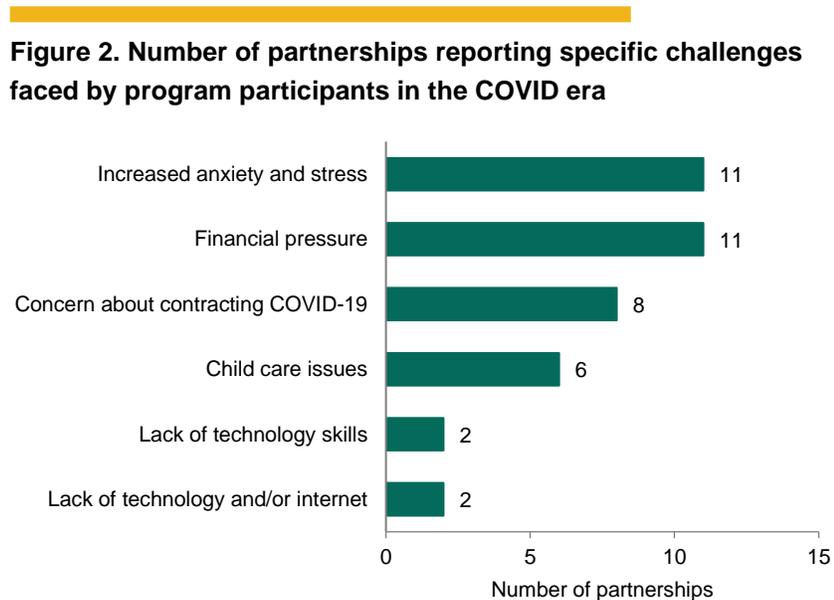
- **Implementing virtual information sessions and intake procedures required new approaches, technologies, and flexibility.** Those partnerships that continued enrollment shifted from in-person information sessions to online meeting platforms (such as Zoom, WebEx, and Google Meet) or recorded videos to describe specific America's Promise grantee service offerings and eligibility criteria to potential applicants. Frontline staff from one partnership described a move away from formal assessments, such as the Test for Adult Basic Education, with the move to virtual intake and instead asked participants to complete a written response expressing their interest and conducted interviews to assess fit, interest, and aptitude for the training. As partnerships transitioned to hybrid services after states lifted stay-at-home orders, they began to offer in-person intake services. Frontline staff from five partnerships reported holding in-person enrollment by appointment only by the time of the study's virtual site visits.
- **Completing required enrollment paperwork required new logistics and proved difficult for some partnerships.** Frontline staff from five partnerships mentioned that the need for participants to provide and complete hard-copy paperwork posed logistical challenges. Two noted they met with participants in outdoor locations such as gas stations and parking lots to complete paperwork. Three chose to use programs such as DocuSign to complete paperwork remotely, although one noted navigating the DocuSign platform was confusing for participants and contributed to challenges.
- **Engaging participants in virtual case management provided opportunities for greater flexibility but also introduced new challenges.** Case management shifted to phone, email, text message, and online meeting platforms. Case managers from three partnerships said this provided greater flexibility and accommodated participants' schedules more easily (for example, meeting during participants' lunch breaks), without transportation challenges and the time needed to travel. One case manager also said participants craved connection during the pandemic, making them more responsive to outreach. Another case manager described meeting participants for socially distanced walks, which maintained connections and provided opportunities to distribute bus passes. Other grant partnerships, however, faced difficulties. One grant manager said frontline staff struggled with the "huge paradigm shift" in adapting their processes and mindset to serve participants virtually. Frontline staff from two partnerships suggested the quality of case management diminished due to challenges establishing rapport and engaging participants meaningfully by phone. Yet another case manager said monitoring work-based learning was more difficult because telephone interviews with participants and supervisors did not elicit the same quality of feedback as in-person visits and interviews.
- **Conducting virtual job placement services and career fairs required additional investment of staff time and technology to be successful.** Four partnerships moved job placement services onto virtual platforms, such as posting documents and recordings of job readiness workshops to partnership websites. Managers and frontline staff from six partnerships also reported using virtual job or career fairs with mixed success. One partnership, for example, used the virtual career fair platform Brazen. Organized by career concentration, employers pre-screened participants' resumes

and then held individual interviews through a queue during the fair. Although the grant manager reported the fairs to be effective, he said it required more planning than a traditional job fair. By comparison, another grantee held a virtual job fair using the Zoom online meeting platform, but without a dedicated career fair service platform, and reported major challenges. The grant manager explained that some employers did not log in as expected and, as a result, large breakout rooms prevented participants from speaking with employers one-on-one. Given the cost of virtual service platforms, the grantee was working on improvements and its own infrastructure for such virtual events.

- Addressing new barriers to training participation and completion proved challenging even with creative use of resources and referral networks.** New participant needs quickly emerged due to the pandemic (Figure 2). The transition to virtual services highlighted and, according to respondents, exacerbated the digital divide. Both managers and frontline staff indicated that some participants lacked technology (including laptops, tablets, monitors, smartphones, and ethernet cables), and many parents had to share devices with children who needed them for online school. Access to reliable Internet connections and broadband posed challenges in many areas, especially rural communities. Only three grant partnerships reported leveraging resources to provide laptops and Wi-Fi hotspots to fill the technology gap. Even when technology was available, frontline staff noted that participants needed extra support to use it effectively.

Participants also faced child care issues as day cares and schools closed or shifted to hybrid instruction. Concerns about exposure to COVID-19, pressure to enter employment quickly to pay for basic needs, and increased anxiety and stress associated with the pandemic and civil unrest related to other events happening in 2020 posed further challenges. Grant partnerships

strengthened existing connections to organizations providing food assistance, stipends, scholarships, and rent and utility assistance and ensured participants were aware of available community resources. Two partnerships also began making referrals to local mental health providers.



Source: Virtual site visits with 18 America’s Promise partnerships

### Industry-specific considerations during the pandemic

The pandemic disproportionately affected certain industries as states began shelter-in-place orders and demand for products and services shifted. The America’s Promise grant program focused on training participants for middle- to high-skilled careers in high-demand industries. Each grant partnership could target one or more industry. Across the 18 partnerships included in virtual site visits, advanced

manufacturing was a target industry for 11 grant partnerships, healthcare for nine grant partnerships, and IT for 10 partnerships.<sup>2</sup> Unemployment was below four percent in these industries before the pandemic, but each experienced a spike in spring 2020. Nationwide, unemployment in the manufacturing sector jumped to more than 13 percent in April 2020, while health care and social assistance reached 10 percent and professional and technical services (which includes the information technology industry) rose to six percent (Figure 3). Although respondents described variation within and across regional economies, industry patterns influenced their approaches to both training and job placement.

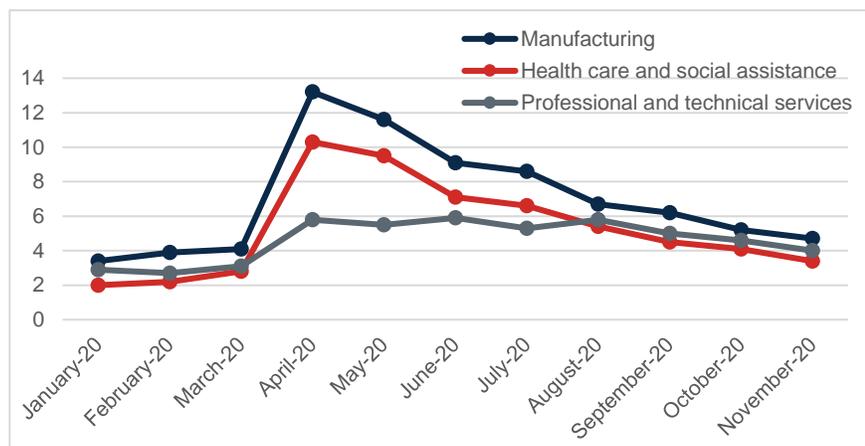
 **Advanced manufacturing**

Respondents in all 11 grant partnerships that targeted advanced manufacturing discussed a period of initial shutdowns in local manufacturing facilities. Grant managers from five partnerships reported no significant impact on regional manufacturing when facilities reopened; however, managers from the remaining six discussed layoffs, furloughs, and hiring freezes among manufacturing employer partners. Among those six, the types of manufacturing that respondents reported as having declines early in the pandemic included aviation production and parts, coal, medical devices for elective surgeries, equipment for live events, custom cabinetry, and craft brewing. Those mentioned as expanding hiring included essential health care and sanitation products, home improvement and furnishings, automobiles, defense, and utility trailers.

Meeting social distancing requirements in training facilities and on manufacturing floors posed a unique challenge for advanced manufacturing. Experiences varied by training program both across and within partnerships. Grant managers and training partners from seven of the 11 partnerships reported they discontinued or paused at least some

advanced manufacturing classes because they required hands-on in-person training on the machines. Examples include trainings for machinists, robot programmer, robotics technician, industrial maintenance technician, and welding. Respondents from three of these partnerships as well as the four grant partnerships that did not experience major disruptions reported adapting at least some of their advanced manufacturing trainings for in-person or hybrid learning with social distancing and safety protocols. For example, one training provider used a hybrid model with lectures held online and labs requiring hands-on practice conducted in-person. Labs had a strict limit of nine students per session and they reconfigured equipment to allow for at least six feet of social distancing.

**Figure 3. Monthly national unemployment rates, by target industries**



Source: U.S. Bureau of Labor Statistics Current Population Survey 2021

<sup>2</sup> Of the 18 partnerships, 10 targeted a single industry, 4 targeted two industries, and 4 targeted all three industries.

Another training provider split the in-person training into shorter sections with reduced capacity in each classroom to ensure proper social distancing. Participants rotated through sections until completing them all. Three other partnerships also used an online service called ToolingU for simulated activities until in-person learning was available.

Participants' discomfort with online learning appeared to hinder participation across four partnerships that offered hybrid and online manufacturing training programs. Frontline training staff from these partnerships noted some individuals interested in manufacturing had never learned online, were less comfortable with virtual training, or preferred hands-on learning. One instructor explained that teaching and learning hands-on skills in a virtual environment requires a different mindset and additional support to ensure success.

**“It’s like drivers education because you don’t get it until you’re behind the wheel; manufacturing is the same way; until you feel it, see it, and hear it with all of your senses, you don’t get it.”**  
**-- Manufacturing instructor on the need for hands-on training**

Given challenges adjusting classroom training, two grantees worked with local manufacturers to shift or renew their focus on training incumbent workers. One grant manager reported local employers were reassessing their compliance with safety regulations and had employees train on Occupational Safety and Health Administration regulations while sheltering in place. To avoid layoffs or furloughs, the other retooled existing employees' skills as they shifted to producing essential pandemic-related products.



## Health care

Of the 18 grant partnerships involved in virtual site visits, nine provided training for clinical health care careers, with four focusing exclusively on the health care sector. Although the pandemic created a more acute need for essential workers, including clinical health care workers, grantee and partner managers indicated that pandemic-related restrictions affected the types of positions needed and posed barriers to training and certifying participants and placing them in jobs. To overcome these barriers, the health care-focused partnerships developed creative solutions to adapt trainings and meet employers' needs.

The demand for workers declined in some parts of the health care industry. Managers and frontline staff from six partnerships indicated that employers, typically hospital systems, placed restrictions on elective surgeries, and decreased demand for preventative and routine health care resulted in furloughs and/or layoffs. For example, one partnership that offered surgical technologist training saw a substantial drop in demand for workers. Two health care employers from another partnership laid off 500 employees.

At the same time, the health care sector had to quickly develop new testing sites and COVID-19 treatment units that required increased hiring for clinical positions. Employers and grantee organizations from three grant partnerships noted the pandemic heightened already acute shortages for clinical health care workers in their regions. Employers pointed to intense competition for workers both within and outside their communities. As one employer highlighted, hospital systems in neighboring states offered very high wages to recruit health care workers, further amplifying the existing local shortage of health care workers. A training provider from another partnership noted demand for certified nursing assistants (CNAs) and medical assistants (MAs) remained high, and many employers in the region offered hazard pay or bonuses to attract new hires given the risk of COVID exposure.

Despite increased demand for health care professionals, frontline staff at four partnerships reported some participants were concerned about entering health care careers given the increased risks to themselves and

their families due to the pandemic. For example, one focus group respondent worked at an urgent care provider that transitioned to conducting COVID-19 testing during the pandemic. Concerned about direct exposure to COVID-positive patients, the individual resigned. One CNA training provider noted drops in both enrollment and training completion due to hesitancy about patient-facing health care careers.

Training providers from all nine health care-focused partnerships shifted classroom components to virtual learning models. At least some training providers across each partnership also began to offer hybrid or in-person training as of summer or fall 2020. In-person components used reduced class sizes to ensure social distancing, rotated smaller groups of students for partial in-person instruction, and in one case conducted regular COVID-19 testing.

The pandemic, however, created major disruptions to the clinical training components and certification exams required for health care professionals.

Frontline training staff across five grant partnerships reported that participants faced delays in training completion because required clinical training components needed to earn certifications were not available. According to job developers and case managers, many clinical placement sites, often long-term care facilities, discontinued placement offerings throughout spring and summer. As of fall 2020, health care partnerships restarted clinical placement of participants, but many placement sites restricted the number of students they could take at a given time. Program participants in these five partnerships also faced delays in testing for certification exams. In these instances, states paused certification exams during the pandemic because they require written and in-person practical assessments of clinical practices that could not be completed virtually.

**“CNA and MA [training programs] stopped overnight.... As we are coming back to full operational levels, it is challenging because the pipeline [for clinical workers], which was already challenging pre-COVID, is now gone. We are really trying to figure out how to navigate through that because we were very dependent on the [America’s Promise] pipeline.”**

***-- Health care employer on disruption in the hiring pipeline)***

Despite these challenges, some grant partnerships eventually identified creative solutions to overcome clinical training delays to ensure participants could complete training and enter employment. One training provider, for example, worked with state licensing entities to ensure flexibility given the unprecedented conditions and enabled participants to gain clinical experience by practicing techniques on one another rather than working directly with patients. Another partnership sought to identify new clinical placement sites, such as rehabilitation centers, in place of hospitals or long-term care facilities. As the pandemic progressed, at least two states also took steps to loosen licensing requirements for employment, which allowed participants from four partnerships to enter employment without completing licensing exams. When continued delays in clinical placements or exams prevented students from completing training, grant partnerships also worked with employers to identify other placement opportunities to meet critical needs. For instance, employers from two partnerships created new positions to support COVID-19 screenings, such as taking temperatures and completing questionnaires with hospital visitors and staff.



Unlike advanced manufacturing and health care, grant managers from the 10 grant partnerships that targeted the IT industry reported no detrimental effects of the pandemic on the industry or its demand for workers. In fact, three managers reporting marked growth in the IT industry in their regional economies.

IT grant partnerships were well positioned to shift to virtual instruction and continue supporting industry demand for workers. Of these 10 grant partnerships, frontline staff from five reported at least some of their technology training programs were already virtual or portions were recorded, making the transition straightforward. Training staff from another two partnerships had already planned or begun the transition to virtual learning before the pandemic, so they simply accelerated those efforts. The remaining three reported supporting the transition with few challenges given the nature of their offerings and instructors' technology proficiency.

Some grant partnerships adjusted the structure of IT courses to make online learning easier. For example, frontline staff from two partnerships split the content of longer in-person classes into shorter online sections and required participants to conduct more independent exercises. Another added teacher assistants to all virtual offerings. This enabled the instructors to use smaller break-out rooms in Zoom to ensure participants could receive more individualized instruction. Teacher's assistants also monitored and responded to questions in the chat window while the main instructor led the lesson. Across partnerships, respondents also reported recording and posting training sessions to enable participants to listen again to material as needed.

Despite the smooth transition to virtual training, respondents from four IT-focused grant partnerships noted uncertainty about the state of the economy coupled with a larger supply of available workers affected participants' job placement success. Managers from three of these partnerships said they put new on-the-job training, internships, externships or apprenticeships on hold during the pandemic, noting these opportunities often led to full-time employment. The grant manager from the other partnership indicated that, although the technology sector had not slowed, employers were cautious about hiring new entrants to the industry given economic uncertainty. One respondent described a deep IT talent pool in the region and, given the recession, training graduates were competing for jobs against highly qualified individuals with more work experience.

**“Virtual training was much more accessible to our participants.... We’re still enrolling participants with the same interest and drive, but removing the location barrier helps them stay engaged.”**

***-- IT partner on the benefits of virtual training***

## Implications for the future

Although the pandemic created unique conditions that might not persist for future job training programs, strategies used by America's Promise partnerships offer insights into adapting service models to virtual service delivery. The unprecedented shift to virtual services in 2020 helped grant partnerships establish a more agile infrastructure, such as user-friendly online learning platforms, that they could choose to continue leveraging going forward. Industry-specific findings suggest the advantages and disadvantages of using virtual platforms depends on the content and structure of training offerings. The findings also highlight innovative solutions to address key challenges when adapting training models. As the economy continues to evolve through the recession that resulted from the COVID-19 pandemic, regional grant partnerships can draw on these lessons to continue adapting their approaches to support job seekers and meet the changing needs of their regional employers.

## Reference

Volpe, Liana. "A Practical Guide for Frontline Service Providers During the COVID-19 Pandemic." New Brunswick, NJ: Heldrich Center for Workforce Development, 2020. Available at [https://heldrich.rutgers.edu/sites/default/files/2020-10/Suddenly\\_Virtual\\_A\\_Practical\\_Guide\\_for\\_Frontline\\_Service\\_Providers\\_During\\_the\\_COVID-19\\_Pandemic.pdf](https://heldrich.rutgers.edu/sites/default/files/2020-10/Suddenly_Virtual_A_Practical_Guide_for_Frontline_Service_Providers_During_the_COVID-19_Pandemic.pdf).

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