TRANSCRIPT: The Hospice Workforce Solution for the Future—with Ron Hetrick | Part One

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Welcoming Economist Ron Hetrick

Chris Comeaux 0:27
Hello and welcome. I'm so excited today. We have back with us Ron Hetrick, who's a principal economist with Lightcast. Welcome back, Ron. It's so good to have you.

Ron Hetrick 0:37
Yeah, great to be back. It was uh we had a great time last time. Let's see what we can do today.

Chris Comeaux 0:41
Yeah, exactly. Well, uh let me just reintroduce you, but I'm not gonna ask you our traditional question about the superpower because we really want our listeners to go back and listen to part one. But that part one was so flipping good, I said, please come back and thanks again for agreeing to do this. So this is gonna be fun. But just in case folks are just kind of popping in for the first time. So Ron's a principal economist with Lightcast. He has over 34 years of labor force economic experience. He was the primary author of the demographic drought, who's gonna do the work, and the rising storm. And we talked a lot about that in the first one. He writes another topical labor economic trends frequently. He keynotes at conferences around the country on the current labor situation. He was a senior supervisory economist for eight years with the Bureau of Labor Statistics

in D.C. And had a 20-year stint as an advising economist for the largest staffing company in the U.S. before spending the past six years as the principal economist at Lightcast, which is a labor market information company. He's been quoted by many publications, CBS, CNBC, Wall Street Forbes, and numerous other nationally syndicated news channels, magazines on a weekly basis. He also provided analysis for prior Fed chairman, Alan Greenspan. He's been on the Council of Economic Advisors to the president, Congress, and numerous Fortune 100 companies and trade associations. And so, Ron, obviously, your bio predicted what I saw on the first show. I mean, you know your stuff. And so here was, I thought, how do I kind of segue into this second one? And so this is what I thought of. All right, I believe the forecast. So what in the heck are we gonna do? And so folks go to the forecast, well, then go back and listen to the first podcast because Ron does an amazing job with great data, statistics. As John Adams said, facts are stubborn things. And so there's some really good facts and statistics in that first one. So, so Ron, here's here's my first question to you.

Fixed Reimbursement Meets Wage Pressure

Chris Comeaux 2:37
And so it's this is a dilemma that keeps me up at night. Hospices all over the country are operating on a fixed Medicare reimbursement. We can't raise our actual revenue, our prices. So if the market says I got to pay a nurse 10, 15 grand more to compete for that nurse, I can't raise my prices, like maybe a restaurant or a manufacturer can. So, what happens to industries like healthcare, where the labor market is saying, hey, one of the solutions is you're gonna have to pay more, but the reimbursement model is stagnant. It's actually stopped.

Ron Hetrick 3:10
Yeah, I mean, I uh you start off with probably the most impossible question you could ever ask to him. There's just for years, people go, you know, how do I get around the price problem? And I'm like, if people have figured out that, then we would have solved it, you know, an eternity ago. I think here's the the way I look at things is that crisis always seems to beget some kind of corrective action. And so I look at the current situation, you know, 2026 and where we're at. And yes, we have gone through, if we when we talk about rising storm, it's a rising storm, it's like a hurricane, it has outer bands. It's not the storm, storm's coming. We're in the outer bands. And there's been years uh back in 21, 22 when things were really, really bad. Uh, and people at that point were panicking, you know, in certain industries they were just trying to outpay each other, which really didn't accomplish much of anything. You just basically borrowed a worker uh for a little bit uh until they went to the next thing. And then we went in between the bands, and I think people get a little

relaxed and they don't keep the urgency uh there to petition to get the kind of pricing that they're gonna need. So when you get to the next emergency, then everybody cares. And I think that just speaks to the way society handles problems. You know, if it thing, if something becomes a crisis, then people will finally start to listen. Well, at that point, you've just experienced a ton of pain that you really uh shouldn't have. So the answer to the question is if you're if you're strapped and you know you need more and you know you're really struggling uh to get things, the the goal is in the peaceful times, you know, in between, while you're in between the bands, you're building the case, you're doing the the research, you're talking to the right people, and you're saying what points, what data points are you do you need for this to happen? Like what trigger points can we start to benchmark this that if something, if this were to happen in society, if this particular unemployment rate or this were to be triggered, can we get it to trigger an automatic pay increase? And that's the kind of upfront work that you have to do because once it's kind of like in a hurricane, once you're in the hurricane, your options are really limited, right? So before the hurricane comes, you can board up your windows, you can sandbag around the base of your house, you know, you maybe even leave, leave your house and go to another area. But once the hurricane's there and the water is rising, you know, the winds are hitting, you can't go out and do any of these things. And so I think, you know, where I kind of arrived a couple of years ago when I kept getting asked this question was you all got caught, you know, to use kind of a weird uh analogy, but y'all got caught with your pants down here. Like you, you did you not see that this is coming? Did you not ever think about what would be the action plan for when we get there? So I think that, you know, at the end at the end of the day, we know that it's a competitive labor market, especially in the healthcare field. And that it's not going to get less competitive, it's going to get more competitive. That was really the point of the last show. So if that's the case, if you know that the storm is going to keep uh intensifying, then there's really no excuse for not, you know, coming up with solutions now. And another thing that I add to that is, you know, a single person sitting in a stadium screaming is probably not going to be heard by anybody. You know, there's a lot of noise going on in the stadium. But when the entire crowd is cheering, it motivates the people on the field. So it's not about one person going, here's what I gotta do. Here's what I'm gonna do this, and I'm gonna help fix this problem. It's like, no, it's about entire industry going, look, this is what's this is how this is going to be. We're gonna work with you, you tell us what we need to do from our end. Uh, but if you do that in a coordinated way, you invest in that front-end effort, then I think it pays off uh down the road. That is uh that's the best answer you're gonna get out of it. You know you need more money, the only other option is you go, well, they pay us this much, and anybody who wants our staff, you're gonna have to supplement what they're not paying with your own private earnings. And you know what? You're gonna get a good portion of the population that that's able to do that. But you know what? You're gonna get a significant poorer portion of the population that isn't gonna be able to do that. And

what's the solution for them? And I think that's the ultimate question. I think we're even in this world right now. What is the solution for people who simply you know can't meet these requirements to do? Like how how do we resolve this dilemma of we do not have the facility space to put these people? And increasingly that especially if you're not nursing all of the beds, you don't have nurses assigned to all the beds, and you have to send people home. What if they can't? What's the alternative?

Chris Comeaux 7:57
Right.

Ron Hetrick 7:58
I don't know. It's kind of my question back. Yeah, what if people thought about how do we handle it now when you have somebody at home or in a hospice facility? Uh either A, they can't meet the requirements, there, there's no family members to put them there.

Chris Comeaux 8:14
yeah

Japan Lessons And Virtual Caregivers

Chris Comeaux 8:15
Ron Hetrick 8:15
What do we do? How does it work?

Chris Comeaux 8:17
This is a great well, and by the way, to our listeners, so Ron and I said if we come back and do a part two, I said, you flip the script and ask me questions because I had so many things I wanted to, we just couldn't squeeze it in the first one because he did such a good job setting the table. Before I go there and answer your question directly, what I love about being around you, Ron, I already have a half a page of notes, which is really hard to facilitate an actual podcast. Well, I'm like, wait a minute, that just triggered an idea. But to hearken back to the first show, one of the things that you made me think about quite a bit, um, Japan is a fascinating case study. I've never been to Japan. I have written down, I'm going to go to Japan. I need to do a healthcare-filled trip. It's almost like getting in a time capsule, not necessarily to go and figure out the color by numbers, but to get that creative juices. Because I love really your first answer is you know, necessity has always been the mother of invention. Denial is not a good strategy, caught with the pants down. You convinced me 100% in the first podcast, this hurricane is coming. Okay. Well, that necessity is going to keep ratcheting up further and further. And there are no easy

answers here. I mean, again, though, that's why I started with the tough question, because most of my listeners are like, well, he says just raise prices or raise your wages. How the hell am I going to do that? Their Medicare's not giving me enough money to cover that. Necessity is the mother of invention. And if you do what you've always done, you're going to get what you've always got. All that to say, I'm going to figure out if I could get like a field trip of us to go to Japan and see if we could actually get like some really good healthcare people, et cetera. And again, I don't think we're going to come back and go, oh, we're just going to do what they're going to do. I think it's going to more get some creative juices going of this is what they've done. Because again, it'd be like going into a time capsule because they've navigated similar things. I would imagine, to your point too, your question of like, well, Japan's living this now. My daughter brought something to me this week, Ron. It's so good to have uh more teenagers in the in that age, because they look at technology so much differently, but they're always bringing stuff on social media like, hey, dad, you could probably use this for your job. Well, well, they're there are um beautiful villages in Japan that because their population is dying off and they're not backfilling that population, that they're literally almost giving beautiful homes away. Uh like homes with mountain views, and because these villages are dying. So you can imagine they are living that where their population has no other caregiver. And also they're not even backfilling people within those communities. And so, almost like the extreme amount of the case, which is why I think there's great learning there. Um, I've seen some really cool technological, I'll call them apps that are coming on the scene in our space that are anticipating what you're talking about, because we're going to see more and more patients that don't have a caregiver. Hospice was really designed to be that extra layer of support with the caregiver. So if that's going to be the last case, how do we, how do we adapt our model to work with the patient? So I'll just leave it this way. One immediate idea is technology that creates a net around the patient of sorts, but also a net that tells us when we need to intervene and being there. It's almost like creating that virtual caregiver without having that caregiver. The other thing that occurs to me is that, um, man, and I don't know how we're going to find the workforce, although this might get to my second question with you. We need more of the aids that put more of that personal hands on giving the baths, et cetera, and probably less nursing because we're going to have to reallocate. Um, not that we we may get less nurses anyway, because they're going to have less of them, but we've got to make sure that the high-level clinical professional staff, doctors, nurses, LCSWs, we've got to make sure anything they're doing that's busy work, we have to be ruthless with cutting that crap out because we're going to have to spread them over more and more people. And then the people we put in the home may have to be more hands-on care to be able to backfill that caregiver. So those are my immediate answers.

The Home Health Aide Shortage

Ron Hetrick 12:22

There's a little problem. A little problem in your in the way you're approaching that. And that is the number one projected growth job to 2035 is home health aid. So health aids, personal aids, uh, because of this situation. I mean, we're sending people to the home. Uh, you know, no nursing homes actually can consider how much of our population is aging. We I think we talked about this in the first uh call, their headcounts have actually been going down. Now, lately it's been going up, but that's kind of this reversing this huge pit that they had. But where we should be, given you know, the the disproportionate amount of our population server 65, doesn't seem to make sense because it was on a growth trend forever and now it's capped and now we're gonna end going down. But it speaks to the fact that people, you know, so many people were saying, I don't want to die in a nursing home. Like I want to, I want it to either be in an assisted assisted living facility or in my own home. Okay, well, then that's going to require a a ton of home health aids. Uh an occupation that pays like $35,000. Right. And when you're saying, look, it's not so much about the nurses, well, the nurses can make $80,000, $90,000. And then you got this home health aid, which, by the way, sits in a labor pool of nothing because there's just practically nobody left in our country who is in this kind of uh non-teenager years, uh, you know, less than $40,000 pay world. Like that is such a depleted labor pool. And manufacturing companies want them, and construction companies want them, and restaurants want them, and retail wants them. And you have this whole, you know, universe of a service economy, because that's what you have when you start to age as a society, looking for this same kind of, I'll call it cheap worker, but it's the cheap workers that we don't have. And that is why we had built such a dependency on you know immigration, because we could get them for cheaper, and they were willing to do the work. And for them, that was you know a good opportunity. So that's that's the issue is if we try to go to a model where look, it's it's gonna need to be more about the minimal care people. Well, this minimal care people are the exact people that we're really struggling to find right now, and as I anticipate, we'll get really, really uh way more intense as we get closer to 2030.

Chris Comeaux 14:38

So here's um it kind of leads to my second question, and then I want to circle back because I love that you're poking holes exactly why I want to do this with you. Um, well, before I go to my second question, it it breaks my heart to say this, but I did read that they had to do this in Japan. I wonder if that lower level labor, we may have to deploy some level of robots for some of that. And and or maybe it's like a team where you're making that the scarce resource of AIDS that you do have. Now, when we get to the end, I'm gonna make a case for we've got to have amazing retention. Like there is something

about hospice compared to home to nursing homes. We have a lot of great nursing home partners, but they are tough places to work. I think that hospice from a recruiting strategy standpoint, I think we sit in an advantageous position to get, but I still accept your premise because, okay, Chris, but yet that pool is still shrinking. So it's not going to be like it's a one-size-fits-all solution. However, I do think incredible cultures, retention. Last week I was in Houston, best places to work in America with six of our TCM members celebrating amongst the top places to work in America. That makes actually uh interesting recruitment. Last year, when it was a Best Places to Work in America, one of our hospices, Ron, the lady sitting next to me, is 78 years old. She's an aide at 78, and she's telling me this is her ministry. And I'm looking at her going, how can we clone you?

Older Workers And Uber Style Shifts

Ron Hetrick 16:08
Absolutely. I do believe that that's that is a thing. I mean, I have personally experienced uh through my oldest son with one with cerebral palsy, when we have traveled, uh once when we would go up to Tennessee, for example, friends of my mother, uh, who was you know around 80 at the time, they were the ones who would like, oh, we'll watch, you know, their son so you guys can go do things. So, you know, we I used to be a nurse, so I used to be this, and uh they were great with doing those kind of things. And it goes back to something I think we mentioned the first one, and that is when you get to the older worker, you know, they're not looking to marry you, they're looking to date you. So as easy as you can make that process of dating, like, hey, can you, you know, here by the way, here is a series of shifts that we've got coming up this week. And you can go onto this board at any same every time. We've already prevented these. Almost like an

Chris Comeaux 16:59
Uber. Like, what shifts do you want to cover?

Ron Hetrick 17:01
Exactly. You could go, you know what, Wednesday, I'm not doing anything. I can go to that person's house and and sit with them and help them, you know, be like the A to them. This is a model that I have seen. It started, I think the company came out of California initially. Uh, and they this is what they've been doing is they put shifts out there and have people, you know, have that ability to sign up for them. What I love is that, you know, if you put these things out there way in advance, then it gives people a chance to say, hey, I'm gonna clear out my Thursday in two weeks because I signed up to do this. And then what they do, the way this website worked is at the end of the day, you got like you basically signed off and you got paid. Like you got paid immediately. It wasn't

because the arrangement was just like an Uber. You know, you did the ride, so you get paid for the ride that you just did. And I absolutely adore the model. And I think it's something that with the right marketing, you know, this is something you could almost you could pretty much almost go into the churches of America and be like, we have this thing. Here is the site you go to to sign up. We're gonna do a background, we'll do these kind of things. Uh, and then you can just sit there and kind of pick things you want to do. I really do believe there's a bigger market for that than anybody realizes. This whole concept of full control over your work is uh something I think we're still figuring out uh just how powerful that can be. But I think it's really applicable to the older population.

Chris Comeaux 18:26
I wanted to ask you that last time. Yeah, I remember I still remember, like when I was growing up, Tom Peters was kind of the Jim Collins of the day. And if you know Tom Peters is a very prolific writer, wrote In Search of Excellence. Um, as he was kind of waning in his popularity, he wrote a book called Ink You, INC. And he kind of predicted that we would get to this place, and he's a baby boomer of like you're gonna be your own kind of corporation and you're gonna kind of shop yourself out uh fractionally. And in some respects, I think he was a prophet a little bit before his time. Because I did wonder like, I don't think the baby boomers want to totally go away and just be on the golf course. And I see so many struggle with cause and purpose. And so if you have this marketplace of needs and they can pick and choose, so it sounds like you're saying, yeah, that could be potentially, and I think by the way, to our listeners, there's gonna be no silver bullet in our discussions. What my aha is it's gonna be this huge, kind of broader strategy of all these pieces and parts that are going to enable us to kind of um solve this. It's maybe not a fitting analogy, but since you use the hurricane thing, like in World War II, it wasn't one silver bullet. Yeah, we remember D-Day and some of those things, but it was a total mobilization of our whole kind of country working on this in various ways. You know, the Ruby, was it Ruby the Riveter or whatever her name was?

Ron Hetrick 19:47
Rosie.

Chris Comeaux 19:47
Rosie the Riveter, exactly. So just all of that, I think it's going to be this huge kind of um broad force uh strategic initiative, which then I'm you know, I try to have my game on with Ron. I've got an acronym I thought of last night. I was talking to my wife, and she's like, man, that is so depressing, what you guys are gonna be talking about. And she's really good kind of challenging me. You're gonna have to come up with like a way to land the plane, which I will. But to go back to what you're saying in the beginning, Ron, what I'm also getting a vision of, and this is maybe where I would do want to go to Japan, but I

also think that the robotics and the AI are moving so quickly. Maybe it's like a team of a CNA with a robot, but also like lift chairs, because if a if I'm gonna have a baby boomer, they're not as physically able. So how can they still provide the care, but you help them be efficient? So it might be like a robot, you know, here's Robbie, my robot, with um Elvis, the uh CNA, which by the way, that's the lady that's 80 almost 80 years old. Her nickname is Elvis, and she's an amazing CNA. But I do, I'm like, and she's so she's skinny. And I'm like, how the hell is she still being a CNA? So maybe it's like, okay, I went on there, I found my shift, I'm gonna, and also they have uh Robbie the robot that's gonna be going out with me. Maybe that's kind of part of the solution.

Retirement Wealth And Searching For Purpose

Ron Hetrick 21:03

I don't know what more I could really add into uh into that, but I will say when you look at, so we look at the wealth accumulation of the boomers, which is unprecedented, right? Two income families probably both degreed for a lifetime, never happened ever in history. You know, that wealth accumulation has afforded them the ability to retire earlier than anybody's ever retired in the past, be retired longer than anybody's ever been retired in the past. For men, it went from 12.2 years retired till passing to 18.8 years. So, you know, that's a lot of years of dependency, a lot of years that you're doing everything that you want to do. Well, people don't understand this. The exes are richer than the boomers. A lot of people don't understand it because if you're thinking generationally as a population, obviously boomers are much bigger, but if you're talking about the per person income, exes are more successful. So we actually anticipate. That they're probably going to retire early as well. Well, you retire early and then what? You know, what's the purpose? What is your purpose? So I think the way I look at this is you're gonna have people that maybe were in the healthcare field who were doing a full-time job, and you want to give them an opportunity to not do that full-time. But but you may have people who were doing something completely different. Maybe they were professionals, you know, maybe they worked in the insurance industry, you know, maybe they worked for a bank and now they're, you know, about to retire and they're like, you know, all I know is I don't want to go back into an office. I don't want to do the same thing anymore. And then, you know, what's the path? How fast can we train people? How fast can we help people realize this of, hey, if you're looking for purpose in your retirement, but you don't want to, you don't want to get married, you just want to date, you know, how can we build a bridge that people can, you know, start to go through that? And then they look back and tell their friends on the other side of the bridge are like, hey, here's what I did after I retired. This, you know, I don't know if they'd be interested or not, but I mean, this is pretty amazing, you know, that I get to have these experiences. And this is, you know,

the one thing I always say when I when I speak to people is it's not about getting everybody to do something, right? Like, you know, even when we talk about this increasing number of people who are retiring earlier, a lot of people are like, well, I can't retire earlier. And I'm like, it's not about everybody being able to, it's about a certain percentage of that. And in a population large enough, if I can influence a quarter percent, a half a percent of something, that's hundreds of thousands of people. So this is if we just create, if we just get um create something new and more interesting and market it to the right people, get it in front of the right people, I believe you can start to make a dent here. And the answer to it, going back to what I was saying earlier, is you don't sit there and you go, hi am I gonna cover, you know, all of this. I got to hire 20 people to cover all of this demand. No, no, no. It's about breaking everything down. Here's how many shifts I'm gonna have to get covered. Here's probably the network of the number of people that I would need to be uh in my platform looking at what I've got coming up in order to hit this critical density and everything. And yes, it requires more work and load management, all this other kind of stuff. But if you start to work in figuring these things out now, this is a model you can take forward forever.

Chris Comeaux 24:21

That's so well said. You know, and I love it. No, there's so many pros in what you're saying here. Um, one of the things that we're actually gonna have this meeting with all of the hospices we work with. I've uh listened to a podcast about Elon Musk and first principles thinking. Like, how did he uh kind of totally recreate the space industry via SpaceX and Tesla? Well, he applied something called first principles thinking, which is what you're poking on, which is you got to break it down. Like you go into the basic elements of your business, and then you have to rethink those basic elements. And so it's interesting. I've been using the podcast, kind of inspired about that. And we're actually gonna have a whole meeting with our network going, let's apply first principles thinking to hospice and palliative care, break it down to its most basic principles, challenge those principles. And then if you kind of got those basic principles, then how do you rethink it and then recreate the business from there? Because we can't, again, if we do what we always done, we're gonna do what we always got, and it's not gonna go well for us as we go forward. You actually tweaked me, one of the prior podcasts. I asked a lady who's been in hospice from the very beginning. I'm like, because we do have like this Bible called our conditions of participation, Ron. So they're kind of guardrails that everyone is supposed to adhere to. And I said, What are some of the things that are in our conditions of participation that like staring us in the face that we missed? Or we we need to rediscover them. And her answer was volunteerism. And that volunteers are a critical part of what we do. So that's something that we've absolutely got to revamp, rethink that, rejuvenate that. Because a lot of our programs during COVID, because people couldn't leave their homes, their

volunteer programs literally went back to almost nothing. So recreating that is something I meant to say earlier. So let me ask you this question.

Skills Adjacency AI And Training Again

Chris Comeaux 26:04
I, in the first podcast, I threw out something that maybe sound like a crazy idea, which is you know, do we need to convert truck drivers? The reason why I'm saying that is supposedly, you know, with all the self-driving vehicles, we have all these truck drivers going to be totally displaced. Oh my God, people aren't gonna have jobs. Well, hey, we're having a problem in healthcare or we're and we're gonna have the hurricane. So are there these interesting, I'll use an analogy, like fishing pond of displaced workers that we can re-umfigure. To me, the training, we're gonna have to get incredibly um innovative. Again, I like to think in analogies. One of my favorite movies is The Matrix. And when Trinity's in the helicopter and she says, 'Download the helicopter protocol,' she flips her eyelids and she can fly the helicopter. As an analogy, can we create training programs where we could take these displaced workers that maybe AI is going to displace others, maybe programmers, et cetera, and plug and play them in healthcare? I'd love to hear your respond to that.

Ron Hetrick 27:01
Yeah. So this concept of this is called skills adjacency. And the the reality of skills adjacency is what we see in our research and our data is that people do things very similar to what they already do. So you're probably not going to get a trucker. What the truckers will probably do, uh, we actually know this is happening already. Uh, some of them are converting over to building the data centers now. Uh, you know, they're they're doing things that are adjacent into what they were doing that still kind of fall into their general interests and everything. So I don't look at it like that, but I do look at it as, you know, customer service rep uh, you know, things that could be automated from an office admin side, like a receptionist or an executive secretary or things like that. These are people already used to dealing with people. Maybe these people are really cranky. Uh, maybe they're not the happiest people, and they're the first line of defense, right? So you walk in in the company and they're the first line of defense. And it, I think it's easy for people like that, if they can look at what they're doing and think what I'm doing here is valuable and it's noble and it's good. Well, my goodness, what if you actually were to put them into a position that's really valuable and noble and good? So I think that, you know, where we are starting to see some displacement, I'm always gonna about talking too much about AI's abilities. But where you are starting to see some of this impact is that office admin world. You know, that's really the these kind of repetitive, even if it messes up a little bit,

still gonna be okay type of thing. That's kind of the dead on bullseye for where AI is focusing right now. There's some professional stuff, but mostly that's augmenting task. And so we don't really think that there's gonna be much displacement uh in those types of things. But you are seeing some maybe impact, maybe in insurance claims, for example. But what you're looking for are jobs that pay relatively the same, but the reward isn't uh it just doesn't seem like you can find easily see a reward. Versus in an industry like yourself, the the reward is more obvious. So at that point, it becomes a marketing conversation. Okay, how do I get this message in front of these people? Yeah, and so that's to me, that is uh that's life. That's everything, that's all of society. Like we've been doing this since the beginning of time. We just nowadays we need cleverer ways of talking about it, things written about it. But in the old days, you just kind of are like, we don't really need the person putting, you know, horseshoes on anymore, you know. And that person who had these certain skills was like, well, I might as well go into the assembly plant and help build a car because I'm already good with my hands and everything. And these transitions happened. Uh I think what happened over time, and I really do blame the surplus of labor. I've talked about this uh in demographic drought, the original paper back in 21. A surplus of labor made everybody do really wrong things. And that was we all asked for what I call the ready-made employee. Okay, I'm not building anything. You come to me built, okay? So I'm gonna create a job description that's insane, and anybody who comes in is gonna fit all of the things that I need, and I'm gonna get them, I'm gonna put them to work. But I'm not gonna do anything to add value to that person. That has that never happened before. For as long back as history ever existed, people went into jobs knowing practically nothing. And the people in those jobs brought them along, taught them things, and they grew through their career. But in the 70s and 80s and 90s, the boomers came in and there were so many of them that employers could get picky and they stopped. By the 90s and 2000s, they were dropping their training programs. They were no longer doing these things. Well, unfortunately, most of us, us people who are going to be listening to this, grew up in that time of the ready-made employee. And we kind of forgot that a lot of life is just people going from one place to the next place, coming alongside a good mentor, apprenticing, and learning that next job. We've almost made it impossible to continue to do what we did forever. And this is something we've been saying is we've got to undo this way of thinking. You know, the the concept of people keep talking talking about it, they call it skills-based hiring, which probably everybody's heard. And the company I work for is huge on skills-based, you know, hiring. They're they're huge on the concept of understanding skills and those skills that once somebody has them, that could go here, those skills could go here. And so you've seen kind of an explosion in this skills-based hiring. But what I crack up on is skills-based hiring isn't new, it's old, it's ancient. It's exactly what we did. Oh, you can use your hands. Come over here and do this. Okay, go over here and and do that. So I think that the the faster an industry embraces that model of just give me a body who's got the give me somebody who says, I like, I like what you

guys do. All right, here's how fast I can get you competent in this. Here's the certification we can do. We can have you up and running in who knows, eight weeks, but even during the eight weeks, you're gonna be side by side with one of our existing, you know, nurses or existing aides. And by the time you're done, we're gonna certify you in this, and you're gonna have had eight weeks of experience. Um, and then we're gonna, you know, bring you along like that. It's like you should be bragging about how well you do these things. And yet we're not. And I think part of it is there has been this ridiculous underlying belief that the tensions that we're in right now are gonna, well, they're gonna take care of themselves.

Chris Comeaux 32:32
yeah

Ron Hetrick 32:32
so that was the myth that I was trying to destroy the first time we talked. It's like, no, this is nothing, nothing of what of what's coming in 2030 to 2035. That this is literally not even close to what we're going. And these is not, they're not guesses. Like I said, we're we're looking at how the population's aging and the labor force is changing. And it's going to get a lot more

Preparing Now Before The Hurricane

Ron Hetrick 32:52
intense. And there's a if you do the right work now, then when you get to those days, you're gonna be like, you know what, he it wasn't so bad. That Ron, he Ron was wrong. It you know, it wasn't so bad. And I'm like, well, yeah, because maybe you sandbagged the the doors and you put the boards on your windows, and so you didn't feel the storm to the degree. I did my job.

Chris Comeaux 33:11
Yeah, exactly. That's exactly what you're after. Uh I mean, I love what you're poking on because I'm I'm realizing now that I came up and like I saw that lack of education, which has always made me passionate. I mean, that's why I have a podcast. I'm I'm trying to disseminate knowledge. I wrote a book about leadership, and it's because I saw that gap. And I guess I never connected those dots to you, just did. So, kind of putting a fine point in what you just said. Um, I do see some people as economic challenges are getting more in healthcare. Well, maybe we could eliminate some of our education department. What

I'm hearing, no, it's the exact opposite of what you're gonna need to do. In fact, you're gonna have to get very innovative of what you do in that department.

Jeff Haffner / Netsmart Ad 33:52

Don't miss Part Two of this episode coming this Friday.