

California Jobs First

Orange County Healthcare Sector Strategy Activation Plan

June 2025

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OC Healthcare Activation Plan: Strategy Overview

Topic	Sub-topic
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**Target Sector
Strategy - Brief
Overview and Sector
Strategies**

Sector: Healthcare

Orange County remains uniquely positioned to drive innovation in the Healthcare industry, increasing industry concentration, creating high-quality jobs, and helping residents live healthier lives. Healthcare is an integral and growing part of Orange County's economy. With over 20 hospitals run by 13 hospital systems,¹ the county is home to a broad and varied healthcare industry. As the regional population ages, residents will need better access to affordable, world-class healthcare services. Promoting healthcare industry growth will not only improve the quality of care provided by hospitals and clinics but will also create high-quality jobs.

The healthcare industry is a major contributor to Orange County's regional economy. Between the Ambulatory Healthcare Services (NAICS 621) and Hospitals (NAICS 622) sectors, healthcare contributed almost \$17 billion in gross regional product (GRP) in 2023, about 5.4 percent of the county's annual total.² The industry also represents a major source of employment for the region, with 136,000 jobs across the two sectors providing 8 percent of non-farm employment in the county.³ Average annual wages across the two sectors are around \$80,000, above the region's living wage of \$67,000 for a single adult in 2025.⁴

The industry is primed for substantial growth, with a 15% increase in healthcare jobs anticipated across the county by 2028.⁵ Many of these jobs, such as Nurse Practitioners, Paramedics, and Physical Therapists, provide high wages and are among the fastest-growing occupations nationwide⁶. Jobs for Registered Nurses (RNs), for example, grew 40 percent between 2013 and 2023, and they remain the most in-demand occupation in the region. Medical and Health Service Manager positions grew 54 percent over the same time period. Moreover, Healthcare professions that require an Associate's degree or less were some of the fastest-growing occupations in Orange County between 2014-2024, providing pathways to high-quality careers for workers without a four-year degree.⁷

Projected Healthcare industry growth can be met with a steady supply of qualified workers capable of filling current and future demand. The region is home to premier academic institutions offering healthcare education and career training. UCI School of Medicine offers several programs, including MD, MD/PhD, and specialized fellowships. As of 2024 there were

	<p>123 Healthcare industry programs offered by Orange County community colleges, comprising the sector with the sixth-most offerings.⁸ A number of workforce development initiatives also focus on Healthcare, such as the county’s K16 Collaborative and OC Pathways, a career development coalition between community colleges, businesses, high schools, and community organizations.</p> <p>The region has several top university medical systems, too, and new developments highlight investments across the industry. For example, University of California, Irvine, recently acquired four hospitals from Tenet Healthcare Corporation, and will finish constructing a \$1.3 billion hospital complex in Irvine in 2025. The campus will provide 144 beds, and will be anchored by a new hospital and specialty care centers. It is also the nation’s first all-electric, zero-emission hospital complex.⁹ City of Hope is also in the final stages of building a \$1.5 billion, 73-bed hospital focused exclusively on comprehensive cancer treatment.¹⁰ The county is also home to a strong and growing MedTech sector, with major industry players such as Edwards Lifesciences, Johnson & Johnson, and Medtronic located in Irvine. Cross-pollination between device manufacturers, hospitals, and a leading education system has developed a unique cluster around the healthcare sector.</p> <p>Driving growth in Orange County’s Healthcare industry are an aging population, an increasing demand for specialized medical care, and growing access to healthcare via telehealth and Medi-Cal expansion. Orange County’s median age increased from 36.7 in 2012 to 39.5 in 2022, and the proportion of senior residents is expected to grow from 18 percent in 2023 to nearly 30</p>
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¹ [Orange County](#)

² OC RPP2

³ [Private, NAICS Sub-Sectors, Orange County, California 2023 Annual Averages, All establishment sizes Source: Quarterly Census of Employment and Wages - Bureau of Labor Statistics](#)

⁴ [Living Wage Calculator - Living Wage Calculation for Orange County, California](#)

⁵ COE OC Health Sector Profile 2024

⁶ [10 Well-Paying, Fast-Growing Jobs in Healthcare | U.S. Department of Labor Blog](#)

⁷ [Orange County Occupations Projection Highlights](#)

⁸ [OC Sector Profile: Health - Centers of Excellence for Labor Market Research](#)

⁹ [UCI Health – Irvine - Care | UCI Health](#)

¹⁰ [Building OC's Only Hospital Exclusively Focused on Cancer | City of Hope](#)

percent by 2060.¹¹ This shift in population age also increases demand for specialized healthcare services to help manage chronic and age-related diseases. An expansion of telehealth availability during the Covid-19 pandemic increased access to healthcare, especially among certain disinvested communities.¹² Federal rules increased telehealth flexibility for Medicare, increasing uptake, but without policy action those flexibilities expire on September 30, 2025.¹³ California's 2024 expansion of Medi-Cal to offer full coverage to adults ages 26-49 also increased access to, and demand for, healthcare in Orange County.¹⁴

Supporting and accelerating investments into this sector can provide dramatic benefits to disinvested communities through increased access to high-paying jobs, improving financial equity, and increasing access to healthcare services. Not only a significant source of regional jobs and economic productivity, growing the region's healthcare industry could improve health equity by expanding access to more affordable services that improve long-term health and help avoid serious health concerns and costs. This is especially true for middle-age and older generations in disinvested communities who may be more susceptible to diseases or disabilities than residents in more affluent areas who likely have better access to or can afford health services.¹⁵ From both economic and equity perspectives, the region stands to benefit from improving support and access to this sector.

Strategy 1: Create Work-Based Learning Opportunities in High-Demand Industries. Create and expand work-based learning opportunities such as pre-employment training, soft skills training, registered apprenticeships, and internships that create entry points to the industry and grow foundational skills and improve the quality of life.

- **Near-term tactics:**

- Develop a resource hub to expand successful existing work-based learning opportunities for entry level workers.

¹¹ OC RPP2

¹² [2022 Community Health Needs Assessment](#)

¹³ [Telehealth Cliff Averted, for Now \(but September Is Six Months Away\) | Epstein Becker Green](#)

¹⁴ [Adult-Expansion](#)

¹⁵ OC RPP2

- Develop a regional Registered Apprenticeship Program for in-demand healthcare careers.
- Expand the California Collaborative Model for Nursing Education (CCMNE) to accelerate career development for nurses.
- Launch healthcare pre-employment bootcamps based on California Career Technical Education (CTE) [Model Curriculum Standards](#).

Strategy 2: Grow Mid-Level Technical Jobs and Develop Training Programs. Develop specialized training programs, such as certifications and credentials, and leverage organizations to create jobs that do not require a four-year degree.

- **Near-term tactics:**

- Launch a multi-stakeholder initiative to design short-term, industry-recognized certifications for mid-level healthcare roles (e.g. Medical Coders, Medical Laboratory Technician, Imaging Technician).
- Launch an industry-led career mobility program.
- Identify skills-based training pathways for bridging healthcare and medtech careers.

Strategy 3: Expand Awareness of Diverse Employment Opportunities. Ensure all high school-aged and adult students are exposed to a wide range of employment opportunities by broadening horizons and creating pathways to economic stability for individuals from diverse educational backgrounds, including those in non-college tracks.

- **Near-term tactics:**

- Launch multimedia healthcare career awareness campaign targeted at youth and adult learners from disinvested communities.
- Connect with high schools and technical schools to share resources on healthcare sector careers and workforce development initiatives such as OC Pathways.

Strategy 4: Foster Innovation and Sustainable Development. Leveraging its already existing industry cluster in Healthcare, Orange County must cultivate an environment that promotes innovation and business development with a special focus on small businesses.

- **Near-term tactics:**

- Develop a Healthcare Innovation District anchored by partnerships among universities, startups, hospitals, and medtech companies.
- Develop a Green Healthcare Infrastructure Fund via a public-private partnership (P3).
- Create an initiative to expand access to virtual healthcare (telehealth) services across Orange County.

A Note on Disinvested Communities and Resident Culture, Race and Ethnicity

As Orange County advances a healthcare system that supports working families and strengthens the local economy, it is imperative that we center the experiences and needs of communities that have been historically disinvested – particularly communities of color, immigrants, and families in low-income neighborhoods. This includes recognizing and addressing the barriers faced by American Indian/Alaska Native residents, Black and Latino families, and others who have long experienced exclusion from equitable access to high-quality, affordable healthcare and related services.

Disinvestment in these communities has led to a lack of healthcare options, outdated or insufficient infrastructure, and persistent shortages of culturally competent providers – especially in neighborhoods where care is most needed. Many residents in disinvested communities experience higher rates of chronic conditions such as diabetes, hypertension, and asthma; greater barriers to accessing mental health and behavioral health services; limited access to preventive care and health education; and challenges related to language and transportation.

The Activation Plan will intentionally focus on creating community-informed, culturally relevant strategies that reflect the unique needs, values, and lived experiences of families across Orange County. This includes prioritizing resources and supports for healthcare providers from underrepresented backgrounds, expanding access to

preventive and mental health services, and ensuring that both patient and provider voices are integrated throughout planning and implementation.

Through partnerships with trusted community organizations, and by investing in language-accessible, culturally responsive outreach and technical assistance, we aim to increase the participation and leadership of disinvested communities in shaping a more equitable healthcare system. Metrics will track progress not only in job creation and provider sustainability, but also in closing disparities in health outcomes, improving access to primary and preventive care, and addressing social determinants of health for residents most impacted by systemic inequities.

This intentional approach to equity moves us beyond one-size-fits-all solutions—toward a healthcare system that recognizes and meets the full spectrum of needs in Orange County’s diverse communities, creating lasting, meaningful opportunities for all.

Operating Structure to Organize and Execute

The execution of Orange County’s healthcare sector strategy will rely on a collaborative and inclusive organizational model that integrates key stakeholders from across the region. The strategy will be overseen by the Sector Investment Coordinator, within input from an Advisory Committee composed of representatives from public, private, and community organizations, tasked with setting priorities, monitoring progress, and ensuring alignment with regional economic and workforce development goals. The Sector Investment Coordinators will work closely with this Committee to ensure strategies are implemented effectively and resources are allocated efficiently, while also leveraging connections to state-level initiatives like California Jobs First.

Staffing and Operations

A Regional Implementation Team will manage day-to-day operations with a focus on facilitating partnerships and supporting stakeholders in executing projects. The Collaborative will prioritize building regional capacity by empowering existing organizations to lead initiatives, reserving direct involvement for high-priority projects only. SICs will prioritize coordination rather than direct implementation, but will be responsible for direct implementation until a better stakeholder or group of stakeholders can be found. Key roles include:

- **Project Manager:** Responsible for coordinating initiatives, tracking progress, and ensuring alignment with the sector’s strategic goals.
- **Workforce Development Coordinator:** Collaborates with local employers, educational institutions, and workforce boards to align training programs with industry needs and address skills gaps.
- **Community Engagement Specialist:** Focuses on outreach to underserved communities to improve equity and accessibility to programs, including addressing barriers like childcare and transportation.
- **Data Analyst:** Tracks outcomes such as job creation, training completions, and environmental impacts to inform decision-making and demonstrate progress.

If there are current Healthcare collaboratives that exist, the hope is that the structure(s) can absorb the responsibility of governing this plan, but if not, the governance model will follow a collaborative governance structure, with quarterly meetings held by the Steering Committee to review progress, identify challenges, and adjust tactics as needed. Subcommittees will focus on specific areas such as workforce development, innovation and entrepreneurship, sustainable development, and community engagement.

Regional Partners and Their Roles

The success of this strategy depends on strong partnerships with a wide network of organizations. Orange County has a strong public sector and nonprofit ecosystem to support healthcare industry growth. Coordination between these entities is ongoing, and has driven significant success. To maximize sector growth and the economic and social benefits to disinvested communities, the ecosystem will need to become more integrated, and partners will remain engaged and committed to the implementation of these strategies.

Many of these organizations already have a long track record of success helping to drive employment and business growth, workforce development, deep industry knowledge, educational attainment, public engagement, and a number of other programs and strategies aimed at improving the quality of life for all residents in Orange County. Together these partners and their expertise will help to drive the regional Healthcare industry while improving the lives of Orange County residents with a special focus on disinvested communities to help raise regional economic, social and health equity.

Suggested partners and their roles are below. This list is not comprehensive and is meant as a guide for the types of organizations that will be necessary for successful implementation.

- **Public Sector and Economic Development Organizations:**
 - **Orange County Business Council (OCBC):** Advocate for business interests, promote workforce alignment, and support regional economic development.
 - **Orange Workforce Association (OWA):** Lead workforce programs, including pre-employment training, apprenticeships, and job placements.

	<ul style="list-style-type: none"> ○ Orange County Health Care Agency (OC HCA): Coordinate public and private sector resources to promote community health. ○ OC Social Services Agency (OC SSA): Advise on healthcare sector strategies and potential impacts to Medi-Cal and adjacent programs. ≠ CalOptima Health: Facilitate access to Medi-Cal managed care, provide insights on member needs and service gaps, and collaborate on strategies to improve health outcomes and equity for Orange County's Medi-Cal population. <p>Educational Institutions and Workforce Training Providers:</p> <ul style="list-style-type: none"> ○ Orange County Department of Education (OCDE) and Regional Occupational Programs (ROPs): Provide career technical education (CTE) and pre-employment training for high school students. ○ Community Colleges (Orange Coast College, Saddleback College, and other CCCs): Develop and deliver certifications, stackable credentials, and sector-specific training programs. ○ 4 Year Universities (e.g. UCI, CSUF, Chapman, Concordia, UMASS Global): Partner on research initiatives, entrepreneurship programs, and workforce training. ○ OC Pathways: Connect community colleges, businesses, high schools, and community organizations to develop healthcare-focused curricula and career preparation activities. ○ Workforce Centered Non-Profits (e.g Hope Builders, Goodwill of Orange County, Vital Link): Advance equitable workforce pathways, provide wrap-around support services, and connect disinvested communities to semiconductor career opportunities. <ul style="list-style-type: none"> ● Small Business and Entrepreneurship Support Organizations: <ul style="list-style-type: none"> ○ Small Business Development Centers (SBDCs): Provide technical assistance, mentorship, and resources for small businesses in the healthcare sector. ○ OCTANe: Support MedTech startups and connect entrepreneurs to opportunities in healthcare sector. ○ RevHub and CIELO: Offer resources and mentorship for social enterprises and startups. ○ Apex Accelerator: Works with federal, state, and local partners to provide opportunities for companies new to government contracting. ● Healthcare and Industry Associations and Healthcare oriented non-profits:
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- **Hospital Association of Southern California (HASC):** Provide research and advocacy on behalf of hospitals and associated enterprises.
- **Healthcare Businesswomen's Association Orange County:** Provide educational and networking programs to support women in the Healthcare sector
- **Orange County Medical Association (OCMA):** Advocate for Orange County physicians and patients
- **HealthCare Oriented Non-Profits (e.g. Latino Health Access, The Cambodian Family, Community Health Initiative of Orange County):** Advance equitable workforce pathways, provide wrap-around support services, and connect disinvested communities to semiconductor career opportunities.
- **Healthcare Oriented Foundations:**
 - **California Healthcare Foundation (CHCF):** Develop research on healthcare sector trends and developments.
 - **Health Funders Partnership of Orange County:** Provide funding for healthy equity initiatives and advise on health equity impacts of sector strategies.
 - **The Healthcare Foundation for Orange County:** Invest in programs and services at local nonprofit hospitals, clinics, and community-based organizations.
- **Labor Unions**
 - **California Nurses Association (CNA):** Advocate for nurses' professional development, workplace safety, and quality patient care across Orange County healthcare settings.
 - **United Nurses Association of California (UNAC):** Represent and support nurses and allied health professionals, ensuring fair labor practices and contributing to workforce development initiatives.
 - **National Union of Healthcare Workers (NUHW):** Advance the rights of healthcare workers and collaborate on initiatives to improve working conditions and patient care standards
 - **SEIU-United Healthcare Workers West (SEIU-UHW):** Promote workforce advancement, provide training opportunities, and champion equitable healthcare workforce and patient outcomes.

Engagement with California Jobs First

Many of these organizations are already engaged with California Jobs First, leveraging state resources to drive workforce development and innovation. For example, the Orange County Workforce Development Board aligns its programs with state workforce priorities, while institutions like UC Irvine and Chapman University foster entrepreneurship and innovation supported by state and federal grants. Through this alignment, the sector strategy will capitalize on existing momentum while addressing regional needs with targeted programming and investments.

This interconnected operating structure ensures that Orange County's Healthcare sector strategy is well-positioned to drive economic growth, promote sustainability, and create equitable opportunities for all residents. Clear distinctions between the roles of the Steering Committee, Collaborative, and working groups will ensure streamlined governance and effective implementation.

Resourcing Across the Strategy	TBD based on updated costs and financing strategies in tactical workplan.
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Goals and Metrics Across the Strategy

Strategy 1 Goals

- **Grow entry-level jobs.**
 - Metrics: employment growth by occupation and wages; share of OC working-age population employed in Healthcare.
- **Create and expand entry-level work-based training programs.**
 - Metrics: number of new training programs offered; enrollment growth at existing programs; number of participants in new training programs; rate of participant job placement in sector.
- **Grow funding to support programs.**
 - Metrics: number and amount of grants, stipends, or other financial support opportunities for work-based learning; federal or state funding for healthcare training allocated to the county.
- **Expand major employers' local hiring commitments.**
 - Metrics: number of new employer local hiring commitments; number of disinvested community members hired.
- **Track and study successful interventions.**
 - Metrics: disaggregated data tracking the impact of training programs, job placement support, and business development initiatives.

Strategy 2 Goals

- **Grow mid-level technical jobs.**
 - Metrics: number of new supervisory and management positions
- **Grow industry-accredited credentialing and certificate programs.**
 - Metrics: number of new credential and certificates programs developed; number of participants in new programs.
- **Increase mobility into mid-level technical positions for entry-level workers.**
 - Management and supervisory jobs secured by program graduates; wage growth among workers moving into mid-level technical positions; number of workers switching out of the sector.

Strategy 3 Goals

- **Expand awareness of sector employment opportunities.**
 - Metrics: number of planning sessions hosted with local partners; attendance at planning sessions; marketing and informational materials developed; number of career fairs, school presentations, or other community events attended; number of new or expanded exposure programs
- **Create career pathways for individuals from diverse educational backgrounds.**
 - Metrics: partnerships formed with high schools, community colleges, and workforce development centers to educate students about healthcare career pathways; number and robustness of recruitment pipelines developed; transportation and childcare services or stipends provided to support new workers

Strategy 4 Goals

- **Prioritize innovation, business development, and collaboration to support cluster growth.**
 - Metrics: number of new businesses; number of cross-sector business partnerships; new or expanded entities fostering collaboration
- **Improve industry sustainability practices**
 - Metrics: number of opportunities for sharing knowledge and resources about sustainable practices (e.g. webinars, training sessions); number of commitments to American Hospital Association or other industry-recognized sustainability standards

Dependencies and Challenges

- a. Continued expansion of Medi-Cal and Medicare will support industry growth projections, but changes to federal healthcare policy or a state budget shortfall could short circuit growth and hinder access to care.
- b. Any unexpected change to demographic projections of an aging county may sharply curtail future investments.
- c. Low- and moderate-wage entry-level jobs may not attract the workforce necessary and may hinder attempts to recruit workers from disinvested communities into healthcare careers.
- d. Higher degrees are needed for many high-wage jobs in the industry, and the growing costs of attaining those degrees may deter workers from pursuing a healthcare career.
- e. Growth of middle-income technical jobs will require workers already in the field to upskill or acquire advanced degrees, which may be difficult for workers to acquire without financial support from employers.
- f. The healthcare market is concentrated, with several major hospital networks dominating the sector. Poor market conditions or financial distress affecting any of these organizations could halt growth and expansion plans, create labor market uncertainty, and potentially force hospital closures, which would have an outsized effect on the county's economy.
- g. Startup costs are high, and small business development is unlikely to play a major role in growing employment in the sector.
- h. Benefits of clustering in the Healthcare and MedTech sectors may not come to fruition, reducing innovation and limiting sector growth.
- i. Due to the significant number of organizations involved, prioritizing all these strategies among competing individual goals may prove challenging. It is imperative that organizations are well-aligned and working towards the same goals.

Activation Plan: Tactical Workplan

Strategy 1: Create work-based learning opportunities in high-demand industries. Create and expand work-based learning opportunities such as pre-employment training, soft skills training, registered apprenticeships, and internships that create entry points to the industry and grow foundational skills and improve the quality of life.

Tactic & Overview	Task	Responsible Parties	Timeline
<p>Tactic 1.1: Develop a resource hub to expand successful existing work-based learning opportunities for entry level workers.</p> <p>a. Purpose: Leverage existing resources, identify gaps, and create a menu of options for expanding work-based learning opportunities to meet industry needs and grow high-road jobs.</p> <p>b. Program design: The resource hub will be an inventory existing programs and best practices, and will be publicly available and presented to relevant agencies, companies, and education institutions.</p> <p>c. Team: SIC, Educational Institutions and Workforce Training Providers and Healthcare and Industry Associations and Healthcare non-profits and Public Sector and</p>	Task 1: Connect with existing industry-workforce partnerships to understand current OC work-based learning initiatives.	SIC, Educational Institutions and Workforce Training Providers and Healthcare and Industry Associations and oriented non-profits, and labor unions.	Q3 2025: Send connecting emails, host conversations
	Task 2: Identify and create a comprehensive list of available healthcare industry educational, training, and work-based learning programs (degree and non-degree), as well as foundations and nonprofits active in the region.	SIC, Educational Institutions and Workforce Training Providers and Healthcare oriented non-profits and Public Sector and Economic Development Organizations, and labor unions.	Q3 2025: Develop inventory of available programs and active institutions
	Task 3: Determine occupational skills most needed by industry and match them to existing programs. Identify gaps not covered by existing programs.	SIC, Educational Institutions and Workforce Training Providers and Healthcare and Industry Associations and Healthcare non-	Q4 2025: Create matrix of programs and gaps

<p>Economic Development Organizations.</p> <p>d. Costs: TBD</p> <p>e. Potential metrics: Number of resource hub users; instances of intentional engagement with hub to develop or expand programs</p>		profits and Public Sector and Economic Development Organizations.	
	Task 4: Identify successful work-based learning models in healthcare and adjacent sectors.	SIC, Educational Institutions and Workforce Training Providers and Healthcare and Industry Associations and Healthcare non-profits and Public Sector and Economic Development Organizations, and Labor Unions.	Q4 2025: Conduct research
	Task 5: Use California Career Technical Education (CTE) roadmap to design new and expanded opportunities.	SIC, Educational Institutions and Workforce Training Providers and Healthcare and Industry Associations and Healthcare non-profits and Public Sector and Economic Development Organizations, and Labor Unions.	Q4 2025: Develop 1-3 new or expanded opportunities
	Task 6: Identify federal and state funding to support new and	SIC, Educational Institutions and	Q4 2025: Identify two funding sources

	expanded apprenticeship programs and facilities that serve the industry.	Workforce Training Providers and Healthcare and Industry Associations and Healthcare non-profits and Public Sector and Economic Development Organizations, and Labor Unions.	Q1 2026: Begin preparing funding proposal
	Task 7: Launch resource hub	SIC, Educational Institutions and Workforce Training Providers and Healthcare and Industry Associations and Healthcare non-profits and Public Sector and Economic Development Organizations, and Labor Unions.	Q1 2026: Secure vendor, agree on site host, launch site
<p>Tactic 1.2: Develop a regional Registered Apprenticeship Program for in-demand healthcare careers.</p> <p>a. Purpose: Create high-road careers with industry-aligned qualifications.</p>	Task 1: Plug into existing industry-workforce healthcare sector partnerships to convene an apprenticeship advisory group comprised of hospitals, unions, educational and training institutions, and workforce development boards.	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic	<p>Q3 2025: Develop contacts and build relationships</p> <p>Q4: Host advisory group meetings</p>

<p>b. Program design: The SIC will convene organizations and will support project development. Apprenticeship curriculum development and registration will fall to the identified apprenticeship sponsors and relevant labor unions.</p> <p>c. Team: SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organization</p> <p>d. Costs: TBD</p> <p>e. Potential metrics: Number of apprentices trained; job placement for apprenticeship graduates</p>		Development Organization	
	Task 2: Connect with LAUNCH Apprenticeship Network ¹⁶ and discuss collaboration in Orange County.	SIC, Educational Institutions and Workforce Training Providers, and Labor Unions	Q3 2025: Develop contacts and host 1-on-1s
	Task 3: Identify top 2-3 in-demand healthcare occupations suitable for apprenticeships	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organization	Q3 2025: Conduct research and agree on target apprenticeship
	Task 4: Develop occupation standards for each occupation aligned to US Department of	Educational Institutions and Workforce Training Providers, and Labor Unions	Q4 2025: Develop standards for target apprenticeship

¹⁶ [Home - LAUNCH](#)

	Labor Registered Apprenticeship criteria. ¹⁷		
	Task 5: Identify a major healthcare employer to sponsor apprenticeship.	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organization	Q4 2025: Develop pitch for UCI on apprenticeship Q4 2025 - Q1 2026: Hold apprenticeship development meeting with UCI Health
	Task 6: Bring together employers and unions to agree on Project Labor Agreement (PLA) and local worker hiring goals.	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organization	Q1 2026: Agree on hiring goals and secure commitment
	Task 7: Develop curriculum for Related Technical Instruction (RTI)	Educational Institutions and Workforce Training Providers	Q1 - Q2 2026: Finalize RTI curriculum
	Task 8: Register apprenticeship with US Department of Labor and	Educational Institutions and Workforce Training	Q2 2026: Register apprenticeship

¹⁷ [Apprenticeship | U.S. Department of Labor](#)

	State of California Division of Apprenticeship Standards	Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organization	
	Task 9: Develop and implement recruitment campaign	Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations	Q1 2026: Develop recruitment campaign Q2 2026: Finish recruitment campaign
	Task 10: Launch first apprentice cohort	Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations	Q3 2026: Host launch event
	Task 11: Evaluate apprenticeship successes and challenges	Educational Institutions and Workforce Training Providers, Healthcare and	Q3 2026 - Ongoing: Monitor apprenticeship progress

		Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations	
<p>Tactic 1.3: Expand the California Collaborative Model for Nursing Education (CCMNE) to accelerate career development for nurses.</p> <ul style="list-style-type: none"> a. Purpose: Grow workforce to meet critical, in-demand RN positions. b. Program design: The SIC will help kick the project off and will attend meetings to ensure progress. Major hospital systems, universities, and community colleges will drive the program. c. Team: SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations d. Costs: TBD 	Task 1: Map all current dual-enrollment and early nursing exposure programs in OC high schools and colleges.	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations	Q3 2025: Inventory existing programs and build relationships
	Task 2: Convene existing CCMNE leadership teams from community colleges and UCs in the region.	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations	Q3 2025: Develop agenda for convening; host first convening

<p>e. Potential metrics: New programs adopting CCMNE model; nurses trained under new CCMNE programs.</p>	<p>Task 3: Survey nursing students and graduates to identify challenges and opportunities in existing programs.</p>	<p>SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations</p>	<p>Q3 2025: Design survey and identify goals</p> <p>Q4 2025: Launch survey; analyze results and develop recommendations</p>
	<p>Task 4: Create prospectus for expanding CCMNE partnerships in OC</p>	<p>Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations</p>	<p>Q1 2026: Draft prospectus; share with CCMNE leadership teams; identify local community colleges for partnerships</p>
	<p>Task 5: Recruit 3 additional OC community colleges to launch healthcare dual-enrollment pilots.</p>	<p>SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector</p>	<p>Q2 2026: Secure commitments from community colleges</p>

		and Economic Development Organizations	
	Task 6: Apply for grant funding (e.g. California Strong Workforce Program, HRSA Health Workforce Grants) to provide stipends to students and support start-up program costs.	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations	Q2 2026: Identify funds and submit applications
	Task 7: Launch new CCMNE program(s)	Educational Institutions	Q3 2026: Launch new program(s)
<p>Tactic 1.4: Launch healthcare pre-employment bootcamps based on California Career Technical Education (CTE) Model Curriculum Standards.</p> <p>a. Purpose: Use industry- and state-recognized training models to improve access to entry-level positions.</p>	Task 1: Identify and select 1-2 highest-need occupations in Orange County featured in CTE Model Curriculum Standards for bootcamp development.	Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations	Q3 2025: Research occupational profiles and host meeting to select based on regional highest-need

<p>b. Program design: Bootcamps for highest-need healthcare occupations in Orange County will be developed.</p> <p>c. Team: SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations</p> <p>d. Costs: TBD</p> <p>e. Potential metrics: Bootcamp programs launched; participation in bootcamp programs; number of participants entering first- or second-choice healthcare job.</p>	Task 2: Identify and contact training providers	Educational Institutions and Workforce Training Providers	Q3 2025: Create list of active CTE training providers and contact for availability
	Task 3: Develop and contract participant support services	Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations	Q3 2025: Identify funding source Q4 2025: Select training provider
	Task 4: Conduct outreach through existing employer and training provider networks	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations	Q1 2026: Launch outreach campaign

	Task 5: Launch cohort	Educational Institutions and Workforce Training Providers,	Q2 2026: Host launch event and highlight first cohort
	Task 6: Connect cohort graduates to job opportunities	Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations	Q3 2026: Bootcamp ends; provide career services to graduates Q4 2026: Spotlight successes
	Task 7: Develop scale-up plan.	Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations	Q4 2026: Draft scale-up plan and circulate for feedback Q1 2026: Finalize scale-up plan secure funding commitment

Strategy 2: Grow mid-level technical jobs and develop training programs. Develop specialized training programs, such as certifications and credentials, and leverage organizations to create jobs that do not require a four-year degree.			
Tactic & Overview	Task	Responsible Party	Timeline
<p>Tactic 2.1: Launch a multi-stakeholder initiative to design short-term, industry-recognized certifications for mid-level healthcare roles (e.g. Medical Coders, Medical Laboratory Technician, Imaging Technician).</p> <p>f. Purpose: Identify skills-based learning pathways to assist entry-</p>	<p>Task 1: Establish a Leadership Council with representatives from major healthcare systems, community colleges, unions, and workforce boards to provide overall vision and coordination. The council will authorize subcommittees aligned with project strategies.</p>	<p>SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations</p>	<p>Q3 2025: Identify leadership council members and build connections</p> <p>Q4 2025: Host first leadership council meeting</p>

<p>level workers grow into high wage healthcare careers.</p> <p>g. Program design: Bottlenecks and barriers in existing pathways for career growth will be identified. Curricula for certifications will be developed in line with industry-recognized frameworks to alleviate barriers and improve career mobility.</p> <p>h. Team: SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations</p> <p>i. Costs: TBD</p> <p>j. Potential metrics: Certification programs developed; participation in new programs; graduate career growth within 2 years.</p>	<p>Task 2: Workforce Subcommittee (established by the Leadership Council) identifies priority certifications and crosswalks to national industry-recognized frameworks.</p>	<p>Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations</p>	<p>Q4 2025: Develop list of certifications for presentation at leadership council meeting</p>
	<p>Task 3: Workforce Subcommittee identifies existing educational delivery partners and discusses program expansion opportunities.</p>	<p>Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations</p>	<p>Q4 2025: Create list of existing programs for presentation at first leadership council meeting</p>
	<p>Task 4: Curriculum/Industry Subcommittee (established by the Leadership Council) develops curriculum and assessments and ensures industry buy-in.</p>	<p>Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations</p>	<p>Q1 2026: Begin curriculum draft</p> <p>Q2 2026: Finalize curriculum and assessments</p>
	<p>Task 5: Subcommittees coordinate with the Leadership Council to launch the first cohort</p>	<p>Educational Institutions and Workforce Training Providers, Healthcare and</p>	<p>Q3 2026: Host launch event; monitor progress</p>

	of certification participants, ensuring alignment with strategic goals and stakeholder input.	Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	
<p>Tactic 2.2: Launch an industry-led career mobility program.</p> <p>k. Purpose: Upskill existing healthcare workers without requiring additional full degrees.</p> <p>l. Program design: Maps of career ladders, based on OC Pathways' existing work, will be created to inform strategic upskilling program development.</p> <p>m. Team: SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations</p> <p>n. Costs: TBD</p> <p>o. Potential metrics: New upskilling programs developed; funding secured; graduate career growth within 2 years.</p>	Task 1: Map career ladders	Educational Institutions and Workforce Training Providers	Q3 2025: Use OC Pathways materials to identify career steps from entry-level to mid-level jobs
	Task 2: Identify gaps in upskilling programs across Orange County	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q3 2025: Inventory upskilling programs and develop gap analysis
	Task 3: Build upskilling tracks with flexible learning modules	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q4 2025: Develop blueprints of learning modules Q1 2026: Gather feedback and finalize blueprints

	Task 4: Secure incentive funding for participants	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q4 2025: Identify funding streams and possible incentives Q2 2026: Finalize funding streams
	Task 5: Launch pilot upskilling programs	Educational Institutions and Workforce Training Providers	Q2 2026: Finalize upskilling programs Q3 2026: Host launch event for programs
	Task 6: Integrate employer-supported career coaching through mentorships and one-on-one career counseling	Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q1 2026: Draft career coaching plan Q2 2026: Finalize career coaching plan
	Task 7: Measure pilot outcomes	Educational Institutions and Workforce Training Providers	Q3 2026: Develop survey for program participants Q4 2026: Administer survey Q2 2027: Administer

			follow-up survey with participants to assess progress on career mobility goals
<p>Tactic 2.3: Identify skills-based training pathways for bridging healthcare and medtech careers.</p> <p>p. Purpose: Identify connections between healthcare and medtech careers to enable workers to expand career options and strengthen skilled labor pool within cluster.</p> <p>q. Program design: SIC will convene organizations before turning project management and training development to OCRC, OC Pathways, and OCTANe.</p> <p>r. Team: SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, Labor Unions, and Public Sector and Economic Development Organizations</p> <p>s. Costs: TBD</p>	Task 1: Identify overlapping skills, training requirements, and job duties	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q3 2025: Host initial meeting to outline goals and responsibilities
	Task 2: Partner with medtech employers to develop internships, mentoring, and other work-based training opportunities.	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q1 2026: Secure employer partnership(s) on at least one work-based training opportunity
	Task 3: Develop short, employer-aligned training that builds on healthcare foundational skills and bridges participants into medtech careers.	OCRC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public	Q4 2025: Identify existing training programs and best practices Q1 2026: Identify appropriate training

t. Potential metrics: New training modules launched; participation in trainings.		Sector and Economic Development Organizations	programs; begin development Q3 2026: Finalize training program
	Task 4: Launch training modules and provide short-term career navigation coaching for training participants.	Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q4 2026: Launch program Q1-Q2 2027: Provide career navigation services for participants and graduates.

Strategy 3: Expand awareness of diverse employment opportunities. Ensure all high school-aged and adult students are exposed to a wide range of employment opportunities by broadening horizons and creating pathways to economic stability for individuals from diverse educational backgrounds, including those in non-college tracks.

Tactic & Overview	Task	Responsible Party	Timeline
<p>Tactic 3.1: Launch multimedia healthcare career awareness campaign targeted at youth and adult learners from disinvested communities.</p> <p>a. Purpose: Expand awareness of healthcare sector careers.</p> <p>b. Program design: OC Pathways will lead campaign development and execution.</p>	Task 1: Develop media campaign strategy and goals focused on radio, digital, and social media platforms.	Educational Institutions and Workforce Training Providers	Q3 2025: Create and finalize campaign outline and budget
	Task 2: Partner with local agencies, educational institutions, and companies to secure funding.	SIC, Educational Institutions and Workforce Training Providers, and Public Sector and Economic Development Organizations	Q3 2025: Develop pitch deck for funders Q4 2025: Hold first funders meeting

<p>c. Team: SIC, Educational Institutions and Workforce Training Providers, and Public Sector and Economic Development Organizations</p> <p>d.</p> <p>e. Costs: TBD</p> <p>f. Potential metrics: Earned and unearned media; social media impressions</p>	Task 3: Hire consultant to develop comprehensive strategy and build out campaign.	Educational Institutions and Workforce Training Providers	Q4 2025: Draft RFQ and identify firms for outreach Q1 2026: Release RFP and encourage identified firms to apply Q2 2026: Begin contract for campaign
	Task 4: Execute plan and track engagement metrics	Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q2 2026: Launch campaign Q4 2026: End campaign
<p>Tactic 3.2: Connect with high schools and technical schools to share resources on healthcare sector careers and workforce development initiatives such as OC Pathways.</p> <p>g. Purpose: Bridge high school and technical school career education to build entry-level healthcare workforce.</p> <p>h. Program design: SIC host initial meetings with OCDE and provide research support. OCDE and OC</p>	Task 1: Select 3-5 high schools (located in disinvested communities) with strong STEM programs to build connections.	SIC, Educational Institutions	Q3 2025: Identify schools and approach administrators and teachers with idea
	Task 2: Identify school personnel (e.g. college counselors, science teachers) to target messaging to.	Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q4 2025: Develop additional materials needed beyond OC Pathways' career pathways diagrams

<p>Pathways will lead program management.</p> <p>i. Team: SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organization</p> <p>j. Costs: TBD</p> <p>k. Potential metrics: Number of new connections between high school and technical schools; number of high school and technical school graduates applying for jobs in the healthcare sector.</p>	<p>Task 3: Distribute materials from OC Pathways to target school personnel.</p>	<p>Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations</p>	<p>Q4 2025: Distribute materials</p>
	<p>Task 4: Attend career fairs, host meetings with school personnel.</p>	<p>Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations</p>	<p>Q1 – Q2 2026: Continue outreach and attendance at events</p>
	<p>Task 5: Develop articulation agreements between high schools and postsecondary institutions</p>	<p>Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations</p>	<p>Q2 2026: Begin discussions of potential articulation agreements after spring semester</p> <p>Q3 2026: Develop articulation agreements and build programs</p> <p>Q4 2026: Finalize agreements</p>

			Q1 2027: Prepare curriculum, new course offerings, and identify cohort for program launch.
	Task 6: Launch additional articulation agreements	Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q3 2027: Launch new courses
Strategy 4: Foster innovation and sustainable development. Leveraging its already existing industry cluster in Healthcare, Orange County must cultivate an environment that promotes innovation and business development with a special focus on small businesses.			
Tactic & Overview	Task	Responsible Party	Timeline
<p>Tactic 4.1: Develop a Healthcare Innovation District anchored by partnerships among universities, startups, hospitals, and medtech companies.</p> <p>I. Purpose: Build connections between anchor healthcare institutions, medtech companies, and startups.</p>	Task 1: Identify potential sites and institutions to anchor the innovation district, in consultation with the Strategy 4 Steering Committee.	SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic	<p>Q3 2025: Assess existing anchor institutions and healthcare campuses and conduct site analysis to assess feasibility.</p> <p>Q4 2025: Host initial conversations about district with anchor</p>

<p>m. Program design: SIC will convene organizations for District steering committee, which will take over project management responsibilities.</p> <p>n. Team: SIC, Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations.</p> <p>o. Costs: TBD</p> <p>p. Potential metrics: New tenants joining District in first year; new partnerships within healthcare/medtech cluster; patents emerging</p>		Development Organizations	institutions and local governments.
	Task 2: Form a Strategy 4 Steering Committee to provide oversight, coordination, and guidance across all tasks and initiatives under Strategy 4, including the development of the innovation district.	SIC Educational Institutions and Workforce Training Providers, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	<p>Q1 2026: Prepare and circulate prospectus of district with site analysis and feasibility study.</p> <p>Q2 2026: Convene initial steering committee meeting.</p>
	Task 3: Under the direction of the Strategy 4 Steering Committee, hire a consultant and develop a comprehensive Innovation District plan.	District steering committee	<p>Q3 2026: Secure commitments to formalize steering committee partnerships and pursue development of District.</p> <p>Q4 2026: Draft RFQ for consultant</p> <p>Q1 2027: Launch RFQ and hire winning applicant.</p> <p>Q2 2027: Finalize comprehensive plan.</p>

	Task 4: With support and advocacy from the Strategy 4 Steering Committee, secure city, county, and state incentives to encourage innovation and sustainable business development.	SIC, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q2 2027: Present to city/county agencies to secure funding; identify state and federal financing sources. Q4 2027: Secure financing and hire construction firm.
	Task 5: Oversee the initiation of construction for key facilities, ensuring that the Strategy 4 Steering Committee monitors progress and alignment with strategic goals.	District steering committee and construction firm	Q3 2028: Break ground on new construction.
<p>Tactic 4.2: Develop a Green Healthcare Infrastructure Fund via a public-private partnership (P3).</p> <ul style="list-style-type: none"> u. Purpose: Drive low-carbon development in the healthcare sector. v. Program design: SIC will convene organizations for potential P3 coalition. P3 coalition will steer program development and execution. w. Team: SIC, coHealthcare and Industry Associations, Healthcare 	Task 1: Develop fund design and governance structure	SIC, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q3 2025: Draft prospectus with design of fund and outline of possible governance structure.
	Task 2: Secure initial funding commitments	SIC, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic	Q3 2025: Host initial conversations about funding. Q1 2026: Secure initial funding commitments.

<p>Oriented Non-Profits, and Public Sector and Economic Development Organizations</p> <p>x. Costs: TBD</p> <p>y. Potential metrics: Amount of funds secured for Fund; investments in low-carbon development; GHG emissions avoided</p>		Development Organizations	
	Task 3: Establish sustainability criteria (e.g. LEED Standard)	P3 coalition	Q4 2025: Research best practices for LEED-certified healthcare facilities and develop criteria.
	Task 4: Develop and issue RFP for planning, predevelopment, or implementation projects.	P3 coalition	Q2 2026: Form P3 via signed agreement Q3 2026: Draft and issue RFP
	Task 5: Evaluate proposals and select first cohort of projects.	P3 coalition	Q3 2026: Form proposal evaluation committee Q4 2026: Score proposals and announce awards.
	Task 6: Launch projects	P3 coalition	Q1 2026: Host launch event for first projects
	Task 7: Provide Technical Assistance for planning and predevelopment projects.	P3 coalition	Q1 2026 - ongoing: Provide expert technical assistance for projects.

<p>Tactic 4.3: Create an initiative to expand access to virtual healthcare (telehealth) services across Orange County</p> <ul style="list-style-type: none"> f. Purpose: Building regional virtual care infrastructure and eliminating digital access barriers to grow jobs and improve access to care. g. Program design: The SIC will help kick the project off and will attend meetings to ensure progress. Major hospital systems, broadband providers, and CHIOC will lead the program. h. Team: SIC, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations i. Costs: TBD j. Potential metrics: Number of residents newly accessing telehealth services; expansion of telehealth services to low-income and disinvested communities 	<p>Task 1: Conduct a virtual care Needs Assessment in Orange county to identify service gaps.</p>	<p>SIC, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations</p>	<p>Q3 2025: Develop and issue RFQ for Needs Assessment.</p> <p>Q4 2025: Contract with consultant and conduct Needs Assessment; begin outreach to potential working group participants.</p>
	<p>Task 2. Utilize the existing Subcommittee (or relevant subcommittee under the main Steering Committee) to engage representatives from major hospital systems, broadband providers, community groups, and universities in identifying promising telehealth expansion opportunities.</p>	<p>SIC, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations</p>	<p>Q1 2026: Host first meeting of working group; agree on goals and workplan.</p>
	<p>Task 3: Connect with California Telehealth Network to determine feasibility of telehealth expansion in Orange County.</p>	<p>SIC, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations</p>	<p>Q1 2026: Schedule meeting(s) with California Telehealth Network to understand best practices.</p>

	Task 4: Identify promising funding opportunities and apply for grants from the California Advanced Services Fund (CASF), United Healthcare Empowering Health, Irvine Health Foundation, and other public and private sources.	SIC, Healthcare and Industry Associations, Healthcare Oriented Non-Profits, and Public Sector and Economic Development Organizations	Q2 2026: Identify funding opportunities and potential applicants; prepare applications. Q2 - Q4 2026: Submit proposals.

Appendix A – Healthcare Industry Data

Regional Employment Is About Equal to the National Average

An average area of this size typically has 195,570* jobs, while there are 191,384 here.

Region	2024 Jobs	2035 Jobs	Change	% Change
Orange County, CA	191,384	230,669	39,285	20.5%
National Average	195,570	219,306	23,736	12.1%
California	2,412,725	2,933,508	520,784	21.6%
United States	18,361,419	21,100,061	2,738,641	14.9%

*National average values are derived by taking the national value for your occupations and scaling it down to account for the difference in overall workforce size between the nation and Orange County, CA. In other words, the values represent the national average adjusted for region size.

Source: Lightcast's Occupation Overview (Occupation Codes 29 – Healthcare Practitioners and Technical Occupations and 31 – Healthcare Support Occupations)

Regional Compensation

For your occupations, the 2024 median wage in Orange County, CA is \$23.67/hour, while the national median wage is \$25.19/hr.

Region	10% Compensation	25% Compensation	50% Compensation	75% Compensation	90% Compensation
Orange County, CA	\$15.91/hour	\$17.87/hour	\$25.19/hour	\$49.18/hour	\$78.25/hour
National Average	\$15.24/hour	\$16.36/hour	\$23.67/hour	\$44.04/hour	\$64.11/hour
Cost Of Living Adjusted for Orange County	\$10.37/hour	\$10.66/hour	\$15.42/hour	\$32.04/hour	\$50.98/hour

Projections for average industry median compensation are expected to increase 54% by 2034 to \$38.69/hour.

Most Jobs are Found in the Individual and Family Services Industry Sector

Jobs	2024 Percent
Individual and Family Services	21.2%
General Medical and Surgical Hospitals	11.6%
Offices of Physicians	9.3%
Offices of Other Health Practitioners	6.0%
Offices of Dentists	5.8%
Outpatient Care Centers	5.2%
Other	41.0%

Source: Lightcast's Occupation Overview (Occupation Codes 29 – Healthcare Practitioners and Technical Occupations and 31 – Healthcare Support Occupations)

Demand

Top Companies	Unique Postings
Providence	3,581
University of California	3,235
University of California-Irvine	2,901
ScionHealth	1,884
Hoag Health System	1,859
Kaiser Permanente	1,374
Prospect Medical Holdings	1,100
Soliant Health	764
Children's Health Orange County	685
Banfield Pet Hospital	567
Top Job Titles	Unique Postings
Caregivers	2,353
Dental Assistants	1,772
Medical Assistants	1,750
Registered Nurses	1,347
Licensed Vocational Nurses	1,235
Speech Language Pathologists	1,168

Pharmacy Technicians	1,026
Physical Therapists	844
ICU Registered Nurses	777
Phlebotomists	772

Source: Lightcast's Occupation Overview (Occupation Codes 29 – Healthcare Practitioners and Technical Occupations and 31 – Healthcare Support Occupations)