

Minnesota FastTRAC Incubator
Interim Report – Supplemental Questions
Due March 16, 2009; email to mary.schmidt@state.mn.us
Questions? Call Mary at 651 259-7571

1. Workplan. Explain your progress toward fulfilling your work plan through end of February 2009. Explain any discrepancies between your work plan and activities/progress. Whenever possible, include qualitative information, e.g. number of courses delivered, number of enrollees in a program.

Please see attached Work Plan Summary. The BHW Pre-Nursing Incubator project is on target with the dates of the Work Plan. The main date change is that the course will not be complete on April 30, 2009 because the curriculum requires 100 hours of training. May 23 is the target for completing the course in both locations.

The Pre-Nursing classes in both Fergus Falls and Detroit Lakes were aggressively marketed. One thousand postcards, 500 brochures and several posters were developed and sent to at least 80 healthcare employers and five BHW partners in both locations; they distributed the information to prospective students. The course was advertised in the Community Ed. Bulletin, the newspaper, on radio and TV PSA's and in interviews with ABE coordinators. We were pleasantly surprised at the response to the marketing we did. In Fergus Falls alone, 30-40 phone and email inquiries were fielded. The Fergus Falls and Detroit Lakes ABE staff completed intakes and assessments for at least 25 people interested in the class. Sixteen qualified applicants enrolled at FFABE and six students enrolled at Detroit Lakes ABE. Classes in both locations began the week of Feb. 9. Students continue to be assessed with quizzes and tests. There is ongoing evaluation of curriculum; revision will take place in May 2009.

Richard Smestad, Director of Workforce Development, Central Minnesota Area Health Education Center (CMAHEC) conducted onsite visits with nursing leadership of four long term healthcare facilities explaining the training program, the grant that supported the program and the objectives of FastTRAC.

Each of these facilities employs nursing staff ranging from CNA's, to LPN's to RNs. These facilities support nursing home-based care and assisted living care. The employers were very satisfied with the academic curriculum that was presented to them, and were enthusiastic about the soft-skills components that had been added as a result of earlier employer-based input. All four facilities agreed to participate in the training by providing job shadowing opportunities and a nursing mentorship session.

2. Partnership.

a. Explain any developments in your partnership roles since the start of your grant, e.g. new partners, expanded roles.

A new partnership with CMAHEC has been forged and partnerships with other ABE consortia, Minnesota State Community and Technical College, West Central Initiative and Rural MN CEP have been expanded and strengthened. Several employees in each agency have a better understanding of how the other agencies operate; thus they are better able to refer clients to the appropriate place, and the clients can get the help they need more quickly.

FFABE implemented a Transition Committee in September 2007. There are members from MSCTC, Vocational Rehabilitation, Community Education and Rural MN CEP on this committee. They were informed about the FastTRAC grant, and several of them have been actively involved in grant implementation. After the grant was awarded, a new partnership began when it was determined that FFABE would start a new tutoring site at MSCTC in Fergus Falls.

Partner Activities:

ABE and CMAHEC completed direct mailings that included brochures, posters and postcards advertising the class to a targeted mailing list of regional long-term healthcare providers. These mailings were sent to healthcare administrative leadership of organizations with a letter asking the employers to support current CNA employees that would be good candidates for advancing in a health career.

ABE and CMAHEC completed interviews with local and regional news media, which included newspaper and television.

Healthcare employers have been contacted and presented with curriculum pieces and the job shadowing idea.

MSCTC provided classrooms and technical support. Their faculty and staff have given presentations to the classes regarding healthcare courses and college entrance requirements. CMAHEC and CEP plan to visit the classes to inform them about the services they have available.

ABE teachers are evaluating and revising the curriculum as they teach.

ABE has become the liaison for connecting the partner organizations to the Pre-Nursing class and, often, to build increased communication between the agencies. For example, when FFABE convened its Transition Committee meeting in February, there was new information from CEP about a summer youth program that could directly affect MSCTC. Because MSCTC was at the table, they could discuss the program with CEP immediately.

b. Explain how the MN FastTRAC initiative has strengthened your partnership and the capacity/commitment of various partners to your stackable credential model.

The FastTRAC initiative has provided the platform to develop and strengthen the relationships discussed in 2a. All the partners are working together to complete the grant activities. We are experiencing a “win-win” because not only are essential community and regional partnerships strengthened, but many clients benefit from the direct services offered. Each agency is better prepared to more readily refer people to the correct resource. We have also developed knowledge of what other partners have already accomplished in the area of stackable credentials.

All partners seem very committed to doing their part to cause the stackable credential model to succeed in this area. The capacity to succeed is mainly limited by lack of ABE funding. Because funding is limited, most ABE consortia employ only part time employees. This substantially limits the ability of ABE involvement in initiatives such as FastTRAC and other collaborative efforts.

ABE funding will also limit which consortia may have the capability of offering the Pre-Nursing course in the near future. At 100 classroom hours, the cost to ABE to offer the course would be at least \$5000. Many programs cannot budget that amount of money for one ABE course.

c. Which partner(s), if any, are not at the table that you want to engage (or engage more) to strengthen or expand your stackable credential model?

Stephen Larson of DEED has been indirectly involved in the initial stages of the grant and he continues to take an active interest in the activities and future funding of the Pre-Nursing course. However, we do not have a local DEED voice at the table.

3. Please share one important lesson you and your partners have learned around each of the following topics that are critical for a **stackable credential model** to work in Minnesota.

a. Availability of student support services so that adults persist and complete training/education endeavors:

The majority of these students are employed, but the cost of books and materials would be prohibitive for non-grant funded students. Some of the students have missed class because of childcare and work issues. Student support services would benefit those that can't afford childcare or must take an extra shift because they need the extra income.

b. Attracting and keeping employers engaged in your stackable credential model:

Employers are essential to this program. We have involved them from the beginning of the implementation phase of the grant. This pre healthcare training project was chosen for our FastTRAC application because we already had a sustainable group of employers and support agencies that were reliant on a stackable credential model. Healthcare Careers, and most specifically nursing, has relied on the ability to advance in the career field through multiple stop/start points or career ladder rungs. It is also very challenging in healthcare because of the many certifications and licensure requirements that are applied as someone advances to higher levels of healthcare professions.

Regional employers not only value the direct application of new skills and talents that these employees will bring to quality healthcare delivery, they can also use this program as part of a progressive retention program that ensures that quality employees are offered the opportunity for increased levels of responsibility and increased compensation.

c. Integrating basic skills, soft skills and occupation skills into training/education content:

The curriculum developers contextualized and integrated these skills into the Pre-Nursing curriculum. Employers will be able to address these skills during the job shadow.

4. Describe one key **policy change** that you consider most critical at the state system level (e.g. agency practice or regulatory change at ABE, MNSCU, Workforce Center/WIA, MFIP, etc) for your model to expand or replicate.

This project included a "train the trainer" session for 11 different ABE consortia. Two of the consortia were funded to pilot the pre-nursing class during the FastTRAC grant period. It will be

very difficult for the other ABE consortium to replicate this pre-nursing training due to the method in which ABE budgets are built and funding is released. Presently, because of the limited funding, most ABE consortia employ staff on a part time basis. This significantly limits the ability of ABE consortia to be involved in collaborative grants.

A recommended agency policy change would involve the method in which ABE funding is distributed. It is recommended that an "initiative fund" is created at the state ABE level that could fund unscheduled/unbudgeted projects.

Currently, projects similar to FastTRAC that may involve ABE consortia require that all funding come from outside grants or external partners.

This is a very common model, which has some success, but poses extreme difficulty during replication or sustainability.

ABE consortia would have exposure to many additional development opportunities if they had more than just in-kind contributions as a partner.

5. Attach a **financial report** that indicates budgeted and actual expenses through Feb. 28, 2009, of MN FastTRAC grant resources. Explain any discrepancies, modifications below.