

# *Red Rocks Community College Case Study Report*

*Consortium for Healthcare Education Online*

**Education and Employment Research Center  
Released May 2015**

Renée Edwards  
Heather McKay

Education and Employment Research Center  
School of Management and Labor Relations  
Rutgers, The State University of New Jersey  
Janice H. Levin Building  
94 Rockefeller Road  
Piscataway, NJ 08854

[smlr.rutgers.edu/eerc](http://smlr.rutgers.edu/eerc)



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## **ABOUT RUTGERS SCHOOL OF MANAGEMENT AND LABOR RELATIONS**

Rutgers' School of Management and Labor Relations (SMLR) is the leading source of expertise on the world of work, building effective and sustainable organizations, and the changing employment relationship. The school is comprised of two departments—one focused on all aspects of strategic human resource management and the other dedicated to the social science specialties related to labor studies and employment relations. In addition, SMLR provides many continuing education and certificate programs taught by world-class researchers and expert practitioners.

SMLR was originally established by an act of the New Jersey legislature in 1947 as the Institute of Management and Labor Relations (IMLR). Like its counterparts that were created in the other large industrial states at the same time, the Institute was chartered to promote new forms of labor-management cooperation following the industrial unrest at the end of World War II. It officially became a school at the flagship campus of the State University of New Jersey in New Brunswick/Piscataway in 1994. For more information, visit [smlr.rutgers.edu](http://smlr.rutgers.edu).

## **ABOUT THE EDUCATION AND EMPLOYMENT RESEARCH CENTER**

Rutgers' Education and Employment Research Center (EERC) is housed within the School of Management and Labor Relations. EERC conducts research and evaluations on education and workforce development programs and policies. EERC research expertise includes community colleges, state and federal workforce developmental systems, skills development, college completion, and innovative and technology-based programs.

## INTRODUCTION

The Consortium for Healthcare Education Online (CHEO) is a United States Department of Labor (USDOL) Trade Adjustment Assistance Community College and Career Training (TAACCCT) funded grant project intended to develop new or redesigned online and hybrid courses leading to credentials in health care fields in high demand across the West and Midwest. CHEO is an interstate consortium consisting of eight colleges across Colorado, Wyoming, South Dakota, Montana, and Alaska. The consortium includes Pueblo Community College (PCC), Otero Junior College (OJC), Red Rocks Community College (RRCC), Laramie County Community College (LCCC), Lake Area Technical College (LATI), Great Falls College Montana State University (GFC MSU), Flathead Valley Community College (FVCC), and Kodiak College (KoC).

Each of the eight colleges is required to integrate the following components into its program/course design/redesign: 1) open education resources (OER), 2) use of the North American Network of Science Labs Online (NANSLO), 3) a CHEO-funded career coach, and 4) use of the CHEO Health Career Hub.

Open education resources (OER) are teaching tools and resources that are licensed for free, public use. They include teaching, learning, and research resources that reside in the public domain or have been released under an intellectual property license that permits their free use and re-purposing by others. Open educational resources include full courses, course materials, modules, textbooks, streaming videos, tests, software, and any other tools, materials, or techniques used to support access to knowledge.

Under the CHEO grant, consortium colleges are encouraged to use OER resources in the creation/redesign of their online or hybrid courses. Consortium colleges are also required to create or redesign their courses/programs so that they can be packaged and licensed OER for use by other educators and institutions. The CHEO colleges will package, license, and post their course material during the course of the grant. OER materials will be uploaded to a skills commons repository under MERLOT. The MERLOT skills commons repository consists of discipline-specific learning materials, learning exercises, and web pages, designed to enhance the teaching experience.

The North American Network of Science Labs Online (NANSLO) is a remotely operated robotic lab designed to innovate the distance lab experience for students through a web-based portal. CHEO partners will collaborate to develop lab exercises to be used in health- and science-related courses. Faculty in the designed/redesigned CHEO programs will incorporate the developed labs into courses, using one of the three NANSLO nodes. Nodes are equipped laboratories that remotely run the specified labs for consortium colleges. Three total nodes exist, one newly created under the CHEO grant at GFC MSU. The other two nodes are located at North Island College in Vancouver, British Columbia, and RRCC in Denver, Colorado.

The NANSLO science lab network is managed by the Colorado Community College System (CCCS). For the purposes of the CHEO grant, the Western Interstate Commission on Higher Education (WICHE) in Boulder, Colorado serves as the public's primary resource for information about NANSLO. WICHE coordinates communication among the network's lab partners and coordinates the faculty discipline panels that plan and develop individual science experiments for the nodes.

WICHE additionally serves as CHEO's professional development coordinator, scheduling webinars and workshops for instructional designers, faculty and career coaches through three years of the grant. Specifically, in the first year of the grant, WICHE was responsible for one face-to-face workshop that included instructional designers and faculty members, a separate face-to-face workshop for career coaches, and four webinars (two for faculty and two for coaches). In the second year of the grant, WICHE was responsible for a face-to-face workshop for faculty and one for coaches, as well as six webinars (three for faculty and three for coaches). In the third year of the grant, WICHE is responsible for one face-to-face workshop for faculty and one for coaches, in addition to six webinars (three for faculty and three for coaches). If subsequent support during any grant-funded year is deemed necessary, the PCC CHEO administration team is responsible. For example, based upon project needs relative to employer engagement and job placement, a second face-to-face workshop was provided for coaches in year three. The PCC CHEO team also provides organization and facilitation of annual face-to-face meetings for project leads. Additionally, 10 trainings for the CHEO Health Career Hub are the responsibility of College in Colorado. Hub trainings began in year two and extend into year three.

Each college in the consortium is required to employ a career coach to collaborate with employer partners, local workforce centers, community and nonprofit organizations, and students to ensure student access to CHEO resources. Within each of these areas of collaboration, coaches work according to their institution's needs to build CHEO programs, recruit and retain students for CHEO programs, and assist students in multiple ways as each institution designates. Coaches also track their interactions with students to report outcomes based on a model of "intensive advising," assisting students throughout their education with multiple interactions and points of intervention to ensure student success and, ultimately, employment.

The CHEO Health Career Hub is a sophisticated regional and web-based portal that promotes and supports those pursuing a career in health care fields with a wide variety of high-impact interactive tools and services. PCC, the lead applicant and fiscal agent for the CHEO grant, has worked with College in Colorado hub development and Kuder, a company that designs online career planning systems, to create the CHEO hub. The hub is to be used as a case management tool by coaches and as an interactive career management tool for students in CHEO programs across all eight consortium colleges.

This report is one of eight created to highlight each individual college's contributions to the

CHEO project to date. The purpose of this case study is to provide a summary of RRCC's activities, successes, and challenges to date and to identify the best practices, innovative strategies, and unique contributions of the college to the CHEO project to date. This case study begins with an overview of its methodology and data sources and then moves on to the contextual frame—demographic and socioeconomic background information about RRCC, its student population, and its service region. These sections are followed by a) a summary of the goals of RRCC's CHEO program, b) a discussion of the baseline targets and subsequent changes relative to the CHEO project, c) the identification of RRCC's emerging best practices, innovative strategies and unique contributions to CHEO, and d) a summary of successes and challenges to date along with next steps.

## **METHODOLOGY/DATA SOURCES**

This report examines the development and implementation of the first two years of the CHEO grant at RRCC, including experiences of the project team members and participating staff, faculty, and students. As such, this report uses qualitative data and analysis. Subsequent EERC evaluation reports will include outcome measures and report on quantitative data collection and analysis.

The qualitative methodology for this report includes content analysis of consortium goals and activities to date, relevant proposals, and project- and college-specific statements of work, quarterly reports, career coach tracking spreadsheets (also called “stitched-in reports”), strategic plan information and materials, and websites developed by individual colleges. EERC team members have also conducted phone and in-person interviews with the CHEO coordinator, grant administrators, senior WICHE administrators, college project leads, NANSLO Discipline Panel participants, and faculty and career coaches. EERC team members have also been participant–observers at many project workshops including those for faculty, project leads, instructional designers, and career coaches. Finally, members of the EERC team have “observed” conference calls with project leads and career coaches and joined in webinars.

Most interviews were taped and transcribed; non-taped interviews involved extensive note taking. These transcriptions and notes as well as the documents cited above have been coded through the use of NVivo qualitative data management software and analyzed by EERC team members to represent each college's individual story relative to the CHEO project.

As noted above, while quantitative analysis will be presented in subsequent reports, this summary is meant for contextual purposes only and will only utilize data from qualitative analysis. For this reason, grant targets relative to each college, student counts, course counts, NANSLO lab counts, industry- and workforce-related targets, and other quantitative objectives will not be discussed as part of this report.

## COLLEGE DESCRIPTION AND OVERVIEW OF STUDENT POPULATION

Established in 1969, RRCC is a nonresidential college with a main campus in Lakewood and an additional campus in Arvada, both suburbs of Denver, Colorado. Part of the Colorado Community Colleges System (CCCS), RRCC offers programs leading to professional certificates and two-year associate degrees. The college prides itself on unique offerings such as Emergency Management, Physician Assistant, Teacher Preparation, and the OSHA Training Program.<sup>1</sup>

During the 2012–2013 academic year, RRCC offered 114 certificate and 66 associate degree programs to 9,028 students. Of these students, college data shows 68 percent (N = 6,174) were part-time students, making RRCC's student population primarily part-time. The student population had an even gender division (exactly 50 percent female, N = 4,521), and about 21 percent of students identified themselves as ethnic minorities.<sup>2</sup>

Slightly over half of RRCC students are 25 or over (51 percent, N = 4,604), which is not surprising given the large number of part-time students enrolled, as non-traditional students (age 25 and over) generally have work or family responsibilities (or both) in addition to their academic responsibilities.<sup>3</sup> Fifty-three percent of RRCC students who earned a degree or certificate received a one-year certificate (as opposed to a two-year certificate or Associate's degree), the highest rate in the state.

### RRCC'S CHEO GOALS

The foundation of RRCC's interest in the CHEO grant was to expand student access to Allied Health programs. To meet this goal, the college planned to focus on enhancing the already existing Nurse Aide program by creating accelerated delivery through hybrid courses and adding three new certificates stackable after completion of the Nurse Aide program. The three proposed certificates included the Home Health Aide, Hospice Care Aide, and Medication Aide. After extensive research, RRCC refocused its third certificate from Medication Aide to the redesign of a Registered Nurse (RN) Refresher program (Nurse Refresher).

The Nurse Aide program is RRCC's primary focus. Redesigning the program allows students more flexibility to work while attending classes and to move through the program more quickly. Most Nurse Aide students are local residents, as they need to be present on campus for skills labs; however, many prefer the hybrid model, which allows them the flexibility to work or

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<sup>1</sup>*Red Rocks Community College Fact Sheet*. Retrieved August 19, 2014, from Red Rocks Community College Web Site: <http://www.rccc.edu/sites/default/files/institutional-research-factsheetfall2011.pdf>

<sup>2</sup>*Common data set 2012-2013*. Retrieved August 19, 2014, from Red Rocks Community College Web site: <http://www.rccc.edu/institutional-research/common-data> ; number of certificate and associate degree programs taken from the US News Web site

<sup>3</sup>*Community Colleges: Red Rocks Community College*. Retrieved August 19, 2014, from U.S. News & World Report Web site: <http://www.usnews.com/education/community-colleges/red-rocks-community-college-CC07109>

take care of home responsibilities. The majority of RRCC's Nurse Aide students are preparing for nursing school and use the program as a prerequisite. RRCC's career coach notes a good portion of Nurse Aide students are low-income, working, and/or single parents, all of which may contribute to the popularity of the hybrid program.

Prior to spring 2014, the Nurse Aid courses used a face-to-face instructional method. Beginning in spring 2014, the program moved to the hybrid format. The Nurse Aide program readies students to test for certification as a Certified Nursing Assistant (CNA) by taking the Colorado state written exam and skills evaluation. Higher rates of students pass certification exams since the transition to the hybrid format occurred.

CNAs are in great demand in the local job market, and the average annual wage of \$29,993 (2013) in the Denver-Aurora area is the highest among Colorado metropolitan areas,<sup>4</sup> and higher than both the national and statewide average (\$26,020 and \$28,120, respectively)<sup>5</sup>. In the Denver-Aurora area, most CNAs are employed by nursing and residential care facilities, which account for 55 percent of total employment, and hospitals, accounting for 23 percent. The hospital industry is one of the fastest growing industries in the Denver-Aurora region.<sup>6</sup>

The two new stackable certificates added to the program through CHEO are the Home Health Aide and Hospice Care Aide certificates. These are stackable credentials after the Nurse Aide certificate is completed and can be taken successively. The home health aide occupation is ranked number three among the fastest growing occupations nationwide, with a projected 48 percent growth by 2022.<sup>7</sup> Denver-Aurora's projections are not quite as high as the national average is; however, the occupation is still ranked in the top 25 fastest growing occupations.<sup>8</sup>

In 2013, employers offered home health aides slightly more in the Denver area and Colorado in general (\$24,932 and \$24,390, respectively) than the national average (\$22,050)<sup>9</sup>. The industries that employ most of the home health aides locally are ambulatory health care services, which

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<sup>4</sup>*Labor Market Facts*. Retrieved August 21, 2014, from Colorado LMI Gateway Web site: <https://www.colmigateway.com/vosnet/lmi/faq.aspx> (Profiles for a Specific Local Area, Industry or Occupation/Nursing Assistants/Denver-Aurora MSA)

<sup>5</sup>*Occupational Employment Statistics*. (2014, April 1). Retrieved August 21, 2014, from Bureau of Labor Statistics Web site: [http://www.bls.gov/oes/current/oes\\_co.htm#31-0000](http://www.bls.gov/oes/current/oes_co.htm#31-0000)

<sup>6</sup>*Labor Market Facts* Retrieved August 21, 2014, from Colorado LMI Gateway Web site: <https://www.colmigateway.com/vosnet/lmi/faq.aspx> (Questions on Industries in Your Local Area/What will be the fastest growing industries in an area/Denver-Aurora MSA)

<sup>7</sup>*Fastest Growing Occupations 2012-2022 period*. (2014, January 8). Retrieved August 19, 2014, from Bureau of Labor Statistics Web site: <http://www.bls.gov/ooh/fastest-growing.htm>

<sup>8</sup>*Labor Market Facts*. Retrieved August 21, 2014, from Colorado LMI Gateway Web site: <https://www.colmigateway.com/vosnet/lmi/faq.aspx> (Occupational information for your local area/Fastest growing occupations)

<sup>9</sup>*Occupational Employment Statistics*. (2014, April 1). Retrieved August 21, 2014, from Bureau of Labor Statistics Web site: [http://www.bls.gov/oes/current/oes\\_co.htm#31-0000](http://www.bls.gov/oes/current/oes_co.htm#31-0000)

account for 44 percent of total employment, and nursing and residential care facilities, accounting for about 34 percent.<sup>10</sup> Ambulatory health care services occupations are expected to grow considerably in the next 10 years in the Denver area and are ranked in the top twenty-five fastest growing industries in the metropolitan area.<sup>11</sup>

The Bureau of Labor Statistics (BLS) does not delineate between home health aides and hospice care aides as occupations. Industry practice sometimes refers to hospice care aides as “medical” or “clinical” “social workers.” Though other salary websites state the medical social worker salary as high as the \$40,000 range in Colorado, specific salary information and job growth is not available through the BLS. What is available, however, is information conveying the relevance and need of hospice workers nationally.

The National Hospice and Palliative Care Organization (NCPO) suggests that in the past decade, there has been a substantial growth in the number of hospice programs and patients who access such programs. In 2012, most patients received end-of-life care at home, accounting for 66 percent of the total locations. The majority of hospices were independent, freestanding agencies, accounting for 56 percent, followed by hospitals (21 percent) and home health agencies (17 percent). The predominant source of payment for hospice care in 2012 was Medicare (84 percent). These statistics illuminate the relevance of the Hospice Care Aide program and the need for hospice care professionals.

Due to industry demands, it was necessary to replace Medication Aide, as specified in the SOW, with the Nurse Refresher program. The Nurse Refresher Certificate existed previously at the college, although low enrollment caused the college to consider certificate discontinuance after fall of 2013. The college offered the previous version of the certificate as a traditional, face-to-face classroom program. The prior certificate curriculum had not been updated to current nursing strategies or technology and suffered from outdated material. The CHEO project offered an excellent opportunity for RRCC to redesign the outdated Nurse Refresher Certificate, better serve student needs, and increase competitiveness among area colleges. The Registered Nursing profession is expected to grow 37 percent by 2020 in Colorado, creating an influx of new nurses into the job market. The Colorado Nursing Association reports the nursing shortage in the Denver area is twice the national average.<sup>12</sup>

The Nurse Refresher was designed to serve RNs who have been out of the field for some time or who were trained and licensed but never worked as nurses.

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<sup>10</sup>*Labor Market Facts*. Retrieved August 21, 2014, from Colorado LMI Gateway Web site: <https://www.colmigateway.com/vosnet/lmi/faq.aspx> (Profiles for a Specific Local Area, Industry or Occupation/Home Health Aides/Denver-Aurora MSA)

<sup>11</sup>*Labor Market Facts*. Retrieved August 21, 2014, from Colorado LMI Gateway Web site: <https://www.colmigateway.com/vosnet/lmi/faq.aspx> (Questions on Industries in Your Local Area/What will be the fastest growing industries in an area/Denver-Aurora MSA)

<sup>12</sup>[www.nurses-co.org](http://www.nurses-co.org)

## CHEO PROGRAMS AND PROCESSES

### Development and Implementation

RRCC has made great progress in some areas meeting its original CHEO goals, but others have been slower to realize. Significant turnover in staff occurred at the college between grant proposal and implementation, including the dean, Nursing Programs director, and staff who originally conceptualized and prepared the CHEO proposal. Minimal information existed regarding original grant development and strategy. The project lead started eight months after grant award, delaying grant activity start. The new CHEO team, with several members of college instruction department leadership and faculty, approached the project. After the lead started, the team spent time evaluating the project to determine how the grant would work best for the college, industry, and the community.

After evaluation, the team determined that one of the original planned certificate programs, a Medication Aide certificate, was untenable based on labor market research. Research in the months following the original grant proposal, indicated nursing professionals and agencies reported a lack of need to hire medication aides in Colorado since the scope of practice for a certified medication aide is beyond the education level. Employers now prefer to hire licensed practical nurses (LPNs) since their educational background is better aligned with the scope of work. RRCC's career coach conducted extensive research that included job searches and employer feedback, during which she found only two available jobs for certified medication aides. These findings led to the CHEO team's decision to eliminate the certificate. Because of this, the college redesigned the Nurse Refresher Certificate as a better fit for the spirit of the grant. This process required that a change to RRCC's CHEO statement of work be approved by the grantor, which delayed RRCC's rollout of the programs. Unfortunately, this will result in low numbers of students served through the program during the grant period, but RRCC is highly encouraged that the program will ultimately be a success.

The college completed the other two certificate programs planned in the original proposal. Both the Home Health Aide and Hospice Care Aide programs were launched for the spring 2014 semester, creating two additional stackable credentials beyond the Nurse Aide program. Students who complete the Nurse Aide program are eligible to take the state test to become a certified nurse assistant (CNA). This is the first required certificate in the stack. The Nurse Aide certificate is a two-course, five-credit program. The college offers the course in three formats. One is an accelerated format, which can be completed in four weeks. The second is an eight-week term, delivered in a hybrid format, and the third is a full semester, in face-to-face format. The college plans to cancel the face-to-face version of the Nurse Aide program beginning spring 2015 because the two hybrid versions are so popular that the face-to-face version now has experienced extremely low enrollment. Students feel the hybrid program "fits into life" better. They are able to take their classes online and only come to campus for skills labs.

After completing the Nurse Aide certificate and becoming a CNA, students have the option to continue their education to receive either a Home Health Aide certificate or a Hospice Care Aide Certificate, or both. Each of the subsequent certificates is 2 ½ credits. The college designed the program to allow students to complete the Nurse Aide certificate and one of the two subsequent stackable certificates in one semester.

## **Redesign**

RRCC moved the courses to a hybrid method rather than fully online method, as the Nurse Aide, Home Health Aide, and Hospice Care Aide Certificates all require in-person clinicals or internships, respectively. In addition, hybrid courses are less expensive to develop than are online courses. RRCC is currently developing an official definition of hybrid course delivery; approximately 30 to 50 percent of the work in the CHEO hybrid courses is completed online. The hybrid modality combined with the accelerated delivery is a response to industry feedback that suggests that “the Nurse Aide students would benefit from more of an accelerative [sic], compact type of a school schedule.”

The hybrid portions of the programs include interactive online lecture content, online discussions, Dropbox activities, and quizzes. Faculty load PowerPoint slides online for their lectures and record voiceovers so students can listen to, as well as see, the lectures—comparable to what they would experience if the lectures were face to face. The CHEO instructional designer created interactive online content using SoftChalk. SoftChalk is eLearning authoring and content development software. The designer developed the courses to maximize student engagement and involvement. In addition to online coursework, students complete on campus skills labs, which involve hands-on learning and group activities.

Originally, the Nurse Aide and Hospice Care Aide both required a two-and-a-half day clinical, whereas the Home Health Aide Certificate required a three-day internship. The college modified this requirement based on CHEO team recommendations. Students in the Hospice Care Aide program now complete an internship rather than a clinical. Internships are a “job shadowing” experience, whereas clinicals are a “hands-on” experience. Because Hospice Care Aide students need to see and understand hospice work, it is important for students to shadow hospice workers in a real-world environment. Therefore, the college changed the Hospice Care Aide program from a clinical requirement to an internship requirement. These experiences are not only about patient care; students also must learn how to schedule and participate in team meetings, including note taking. RRCC began the CHEO grant period with one clinical site, a local hospital, with which it already had a long-standing relationship from other programs. Since that time, it has expanded its clinical and internship sites and now have several that serve all four programs. There are three clinical sites for students taking any of the Nurse Aide level programs; students use all three sites to complete their clinical, rotating through each site. The Home Health Aide Certificate and Hospice Care Aide Certificate have two internship sites. Currently, the Nurse Refresher has one clinical site.

The college made other changes to the Hospice Care Aide program since project inception. In the original statement of work, it was a 5½-credit program with four courses and a clinical component. This load just “felt too heavy” to the hospice subject matter expert; it entailed more credits than did the Nurse Aide program, which is the foundational certificate. Through feedback from employers, the RRCC CHEO team found that the Hospice Care Aide Certificate, as originally proposed, did not meet the needs of students or employers. The instructional designer and hospice subject matter expert redesigned the certificate as a two-credit “Introduction to Hospice and Palliative Care” certificate with a half credit internship. The instructional designer developed two new courses and the clinical to replace the previous five and recreated the program. The proposed changes must undergo an acceptance process before they may be implemented. The course changes are first reviewed and approved by the RRCC curriculum committee, before elevation to the state curriculum committee, and finally to CCCS for final approval, before the faculty may implement the course changes. At the time of writing this case study, the proposed changes passed the first step of the process and were on the way to the state committee for approval. The courses are slated to begin as planned in January 2015. The recreation of the Hospice Care Aide Certificate is an example of how dedicated RRCC is to creating the best and most useful programs for its students. As soon as faculty, staff, and the RRCC CHEO team saw the program was too cumbersome and heavy for students, they went to work redesigning it for a better fit.

The original grant proposal did not meet existing industry demand, and the new CHEO team spent time determining both the revised program direction and overall vision. The grantor limited the new team in how much the already accepted proposal could change, so staff found a way to work with two of the certificate programs and changed one element—replacing the Medication Aide program with the Nurse Refresher program. The team modified the other two certificates to better fit with workforce needs. CHEO staff felt the programs were “clunky” and that existing courses were just “lumped” together to create new programs without thinking about how those programs would work for the college and the community. The modifications to these certificates helped, but the addition of the Nurse Refresher Certificate to the SOW allowed the college to create something very much in line with the needs of the college and the community.

The Nurse Refresher course will be offered spring 2015 and is on track for this debut. There is already a wait list for the course, which indicates the program is a good fit for the workforce. The college previously offered the Nurse Refresher course, but it was drastically redesigned for the new certificate. The instructional designer redesigned the course from 12 credits of face-to-face instruction taught by 19 different faculty members to an eight-credit course sequence with a clinical component, taught in a hybrid format by one faculty member and a skills lab instructor. The designer streamlined the course to include current employment-specific and technology-related skills. Students read and review material online each week and then come to campus to learn hands-on skills and interact in group activities.

RRCC included an advanced cardiac life support certificate as a co-requisite taken concurrently with the Nurse Refresher course. This is a one-credit course that will take place in two full days of instruction as part of the Nurse Refresher course. Nursing professionals indicated that this will help students be more employable after finishing the refresher. As the subject matter expert at RRCC stated, “The more things you have on your résumé... [the] more employable [you are] to the hospitals.” An RRCC student echoed this to EERC staff: “...it’s actually really hard to find a job [if] on your resume . . . you don’t have something above somebody else. It’s competitive nowadays, and it’s very difficult [to find work unless you stand out].”

## **Recruitment and Enrollment**

RRCC focused considerable time on its recruitment processes. The nature of the Home Health Aide program specifically made recruitment a challenge; the state of Colorado does not require home health aides to be certified. The state requires applicants for home health positions to have a Nurse Aide Certificate, but the additional home health certification is not required. The certificate theoretically provides a competitive edge when applying for work, but it does not confer the ability to command greater pay. RRCC designed and distributed brochures on the program and conducted outreach through existing agencies that offer home health and hospice services. Several local employers regularly seek home health aides and contact RRCC to communicate job openings. The college uses this to encourage students to take the Home Health Aide Certificate courses, but recruitment is difficult when the certificate is not required by the state. RRCC placed an advertising banner on the front page of its website directing students to the new certificate programs. RRCC also engaged with its admissions team to make sure admissions is fully informed of the CHEO programs, their stackability, and benefits to students. The CHEO team put considerable effort into making sure college staff in general is aware of the programs and is able to describe them to prospective students. During a recruiting event, the career coach talked to students about their options in health care. When students said, “I want to be a nurse,” or “I want to be a doctor,” she talked to them about how to start with the Nurse Aide program, add the other certificates to it, and work from there.

Supplementing the recruitment effort is the CHEO Health Care Hub marketing project, planned for the near future. This will provide opportunities to disseminate information on all CHEO-related programs via radio, online, pay per clicks, Facebook, and public announcements.

RRCC has not separately marketed its Nurse Aide program that leads to the CNA Certificate, as so many students want to enter the program. Largely, this is because for students to continue their education to become a nurse or a doctor, and so on, experience in the field is often required, and students can gain those experience hours by working as CNAs. In addition, many nursing programs require students to have their CNA. There is also a high need for CNAs in the workforce, both locally and nationally. Therefore, no marketing is necessary for the Nurse Aide program.

The other major marketing focus for RRCC is securing clinical and internship sites. There are a number of colleges in the area that have similar Nurse Aide programs, and some locations were unable to accommodate more students. The college recently secured more clinical and internship sites; the career coach reports that securing sites has become easier now that relationships with industry are stronger than they used to be. Her outreach, and combined outreach with the workforce center, resulted in stronger relationships and more collaboration with employers. Because of this, employers have been more willing to help with internships and offer clinical sites.

To some degree, CHEO staff feel marketing and recruitment has been a challenge because of the Nursing program director vacancy. Without a program director, other staff, including RRCC's CHEO staff, has filled in, and it has been difficult to spend the amount of time necessary to devote to marketing and recruitment. In addition, interim staff does not have experience in the health-care field, so it's difficult to recruit employers without the industry connection.

## **NANSLO**

As mentioned previously, the North American Network of Science Labs Online (NANSLO) is a network of three science labs that serves the CHEO consortium and CCCS. RRCC primarily utilizes the Denver, Colorado, node, which is located on the RRCC campus.

## **Reception**

Incorporation of NANSLO into RRCC's nursing programs has been challenging. The health science faculty do not see a fit between what the NANSLO science labs offer and their health science courses. RRCC utilizes the NANSLO lab in General Biology I (Bio 111), General College Chemistry I (CHE 111), Physics Algebra-Based I (PHY 111), and Physics Calculus-Based I (PHY 211) through Colorado Community Colleges Online (CCCOnline).

## **Use to date**

Because staff do not see a fit between the Nurse Aide programs and NANSLO, the labs have not been integrated into CHEO courses. Some CHEO staff at the college do see a use for NANSLO, especially in the hard sciences realm, and are definitely enthusiastic about its usefulness for rural students to learn science:

If you had students who were not physically close to a community college, and we've got a lot of them in this state, and I would imagine in a lot of other states who want to go into an Allied Health program, and don't have the means to go to a four-year program with a dorm. They can do their pre-reqs, and when they get to their sciences, they can do the didactic at their local outreach of the community college because we all have satellite units everywhere. And then they can do the hands-on, like their dissections and all of their different anatomy and physiology things that they have to do in biology, they can

access that through the NANSLO lab. Once they're finished all of their pre-reqs, then they can go into nursing school or into premed and those kinds of things.

The enthusiasm for the NANSLO node, which is housed at RRCC, is definitely noticeable among faculty. The interim Nurse Aide Program director commented that "it is just the coolest thing you've ever seen." Its usefulness in the CHEO programs, however, is not obvious. For instance, the intent of the Nurse Refresher program is to refresh and test skills needed by nurses in the current job market. Therefore, the science labs are just not useful in the program: "We're not a fit. The Nurse Aide program with what NANSLO offers, with the microscopes . . . is not a [required] skill set [for a Nurse Aide.] . . . So there was never a connection from day one."

### **Future plans**

There is agreement that NANSLO labs will be useful for those students who wish to continue their education to other health-care programs, such as radiology and nursing. Especially if these students are remote, NANSLO will give them the opportunity to learn science online:

. . . The students whom we are dealing with, particularly in the Nurse Aide program, NANSLO, for some of them, is part of their next step. The rest of their pre-reqs, to go into whatever phase of [their career, for example] radiology has to have a lot of math and physics. They do a lot of the physics stuff. Nursing and other Allied Health need the biology, the anatomy, and physiology. So they do the biology, the chemistry, most nursing courses, [and] you have to have chemistry. And if these students were not physically close to a location where they could do that, they could not do those courses. So NANSLO fills that gap.

Aside from continued usage of the labs in prerequisites and through CCCOnline, RRCC does not identify a curricular alignment between the CHEO-enhanced courses and the NANSLO services.

### **OPEN EDUCATION RESOURCES**

Open education resources are teaching tools, lessons, interactive activities, recorded lectures, or any other teaching element that can be shared openly without copyright or licensing. As part of the requirements for the CHEO grant, the colleges integrate as many open educational resources (OER) as possible into their courses and design/redesign courses in such a way that the pieces can be shared as OER. RRCC is building new courses with as much OER as possible. Currently, curriculum review is ongoing to prepare the courses for the OER repository. The instructional designer discussed how she is addressing using content that reflects the state and national certification standards:

So even though [the subject matter expert] is starting with the PowerPoints that came with the textbook, we're taking that, and she's refining it to what she thinks . . . the

nurses would need in an employment setting. Then we're going through and modifying it, rephrasing, reworking, pulling in content that's OER so that when we get done with all this, we can upload as much as we can to OER.

The instructional designer used Creative Commons and MERLOT to locate OER resources that are applicable to the course content. Any parts of the courses that are not able to be licensed OER because they use proprietary information are being referenced so others can find them if they wish: "What's not OER, we have to pull out, and we can reference it and tell someone this part of the course is not openly licensed, but you can find it here, and then they can go find it themselves."

At the time of this report, the RRCC CHEO instructional designer had redesigned 15 courses totaling 27.5 credits for online delivery. All courses will be mapped for ease of navigation prior to being uploaded to the OER repository.

## **CAREER COACH**

### **Background**

RRCC's career coach has extensive experience working with TAA clients because of her background with a local workforce center. Because of her background in workforce development, she also understands the workforce system and is able to use that understanding to connect with workforce and build relationships. Her background also includes coordinating training programs in the private sector. She has a bachelor's degree in Social Work and a master's degree in Counseling and Career Development. She is also a certified résumé writer.

### **Role**

The career coach engages in very little traditional academic counseling, though she does coordinate with the academic adviser for the Allied Health programs; the majority of her focus is on coordinating with employers for internships and job placement and assisting students with career searches and resume writing.

She meets with students in the classroom usually on a day the instructor is testing students on their skills. For the students, this normalizes the experience of meeting with their career coach. It removes the stigma of "needing help" from the experience, as all students in the classroom interact with her. While the instructor meets with students in one corner, the career coach meets with others in another, reviewing their resumes and talking to students about job searches. Some instructors require resumes as part of the graded coursework, which has given her the opportunity to create a connection with students by helping them with this assignment and, at the same time, further develop a skill they will ultimately need. The career coach reports that this manner of reaching students has been a success. At the start of the grant, not all faculty members were willing to share their classroom time or encourage their students to visit her for

résumé assistance. In those cases, she felt that faculty just did not understand her role: “I don’t think they [saw] the need for it, and I just think that’s part of the education world . . . their classes [were] full, they’re busy, it [was] really hard for them to find time for me to come in.” She expressed that over time, the perception of her role at the college changed. At this point in the grant, the benefits she brings to students are becoming more evident to all faculty members: “I think the instructors are starting to see the value in [coaching] because students are starting to get jobs. I’m excited about that.”

The career coach notes that students move through the programs so fast that it is often difficult to connect with them:

What happens with our program is that students come in, and they’re in here eight weeks at the most. That’s why it’s so difficult to actually talk to them or spend time with them—because some of them can take a four-week course, and some of them can do weekend courses.

The majority of the career coach’s interactions with students is over the phone and via e-mail, though she prefers to meet students in person. She also tries to stay in touch with students who have found jobs so that they can share the interview questions and job process with her that she can then share with current and future students. In effect, she is creating success stories and assembling employment tips and experiences that past students share with current students. This encourages current students and gives an incentive to past students to stay in touch with her even after they have found employment.

In fact, the coach had a work study student help her, and they pulled a list of every student that had graduated from the Nurse Aide program and made calls to each student to touch base, find out employment information, and so on. This type of dedication by the coach creates relationships that continue even after students leave RRCC.

One of the most positive benefits the career coach position brought to RRCC is her ability to retain students as they begin their entry into the certificate programs. Prior to the coach’s arrival at the college, the background checks and paperwork required of students for the Nurse Aide program often frustrated students to the point where they would either quit or were not allowed to continue. The coach’s reminders are important for students in making sure they submit the proper paperwork and are timely completing their background checks:

I make sure that everything that the teachers are doing I’m aware of because I’m in contact with the student . . . I’m sending out reminders all the time. I send out an introduction letter. . . . I watch every day, I go in and check every each class that we have and who’s registered . . . . And I send out a [reminder]—because with the CNA program . . . [previously] we were losing a lot of students because the day before the class, they might get a note saying, hey, you need a drug test, you need a background check, you need immunizations . . . . So I’ve built a checklist and an introduction to

myself and what I can offer . . . . And then I send the checklist to them, and I introduce myself and what I can do for them during the class; [I] tell them welcome to our program. And then I watch the background checks. I watch everything so if [for example]—we have a class starting on Monday and . . . half the class . . . still doesn't have . . . their background check. So I send out reminders. And I think it's just helping because I was getting phone calls from people who were so upset when I first started here. [Students said,] "Nobody told me. Nobody told me." But now, they can't say that. I can go back in and say, "I sent you this e-mail on such and such day. You have been told." [The requirements were] explained.

Because of this, the college has been able to retain more students than previously because they complete the programs' requirements on time. Students who spoke to the EERC team praised the career coach repeatedly for her tenacity in keeping students on track:

If I call her and she can't get a hold of me because I work all the time, she e-mails me. She even e-mailed me on a survey that I just was too busy for and never got to for my CNA class, and I had never even met her before. And then when I was recruited, they told me to talk to her. So if I can't call her, I e-mail her. And she responds right back. If I call her and she doesn't answer, she calls me back. And if she doesn't get a response, she'll e-mail me.

When asked what would have happened if the career coach was not there, another student responded,

I probably wouldn't have my certificate, honestly. I probably would have never done anything because no one would have responded to me, and I wouldn't have actually known what I was getting myself into. She's actually trying to help me find a job with benefits as well. She said anything she finds she'll throw my way. She'll help me with my resume.

Students collectively felt the coach had been instrumental in their progress and ultimately in their success in passing their state CNA exams.

RRCC's career coach actively contact and collaborates with career coaches and others in similar roles, among several other community and technical colleges. For instance, she recently partnered with PCC's CHEO career coach to attend an employer open house. She also conducted a table event for the Hospice Care Aide program with Front Range Community College's career coach and worked with people in similar roles at Arapahoe Community College and Emily Griffith Technical College. Although these are not all CHEO career coaches, they are all TAACCCT career coaches or navigators or serve similar functions at their school.

## INDUSTRY/EMPLOYER/WFC INVOLVEMENT

As CHEO staff worked to establish CHEO programs at RRCC, receiving industry feedback was a crucial element in helping staff decide the best fit between programs, industry, and the community. The career coach conducted industry research relative to the programs originally proposed for the grant, including the Medication Aide program the college subsequently chose to eliminate. It was this industry research that led project staff to choose to bring back the Nurse Refresher program in lieu of the Medication Aide Certificate. The coach talked with industry representatives in the community about their need for employees in the various proposed programs. Industry response indicated: 1) an enormous need for CNAs, 2) a complete lack of need for medication aides, and 3) a lack of commitment to pay more for Hospice Care Aides or Home Health Aides with certificates, as any CNA with some experience can do the same jobs.

Industry also helps RRCC with curriculum design. The college hired several subject matter experts (SMEs) to help design industry-appropriate curriculum. Aside from curriculum design, industry representatives contact the RRCC career coach often to inform her of open positions so she can post jobs to the college job board and to inquire about recent graduates who may be good fits for employer needs. The coach notes that this relationship was not always so open. After she was hired, she literally started from scratch to build industry relationships. She opened the Denver area phonebook and started calling employers to introduce herself and to briefly discuss RRCC's CHEO programs. After the initial call, she visited employers, taking a workforce center liaison with her. She also invited employers to campus to tour college health-care program facilities and to show them the job board where she posts open positions for students. Now she finds that she no longer needs to use the phonebook or make the calls; instead, employers call her. She also mentioned that in the beginning, she called employers requesting clinical sites or internships, and this never resulted in any returned calls. When she shifted her strategy to state, "We are building these programs and looking for industry partnerships and feedback on our curriculum"; however, she started receiving calls. The coach continues to visit employers and also maintains phone contact. She will also occasionally send mass e-mails to employers, for example to invite them to a job fair or hiring event.

RRCC and the workforce center hosted hiring events to connect employers with students. The career coach e-mails and calls agencies and invites them to the events. Industry representatives are interested in the RRCC programs, especially the Nurse Aide program leading to the CNA Certificate, because there is a "definite need, and there is a shortage of . . . qualified CNAs and CNAs who will stay." As the turnover rate for CNAs is high, employers are constantly looking for them.

The career coach invited the business services representative from the workforce center to attend an RRCC Welcome Night. While the Nurse Aide program table was busy, the workforce center table was even busier. Parents visited the table asking, "What is the workforce center?" The increase in awareness among the college, employers, and community has been instrumental in building a relationship with and generating referrals from the workforce center.

The career coach also worked with RRCC's instructional designer to meet with employers and incorporate their needs into CHEO curriculum, especially with the recent decision to redesign the Nurse Refresher program. As the CHEO project lead states, RRCC is "using industry to inform the redesign, and [industry] partners are really excited about the refresher course."

The Nurse Refresher Certificates use an advisory committee, which in theory helps make decisions about curriculum and internship/clinical options. As is often the case, however, advisory committees are not as well attended by industry representatives as they are meant to be. As one RRCC staff member stated:

Red Rocks has an advisory committee for the Nurse Aide, RN [nurse] refresher program all under one . . . . We do currently [have] advisory committee meetings. Often it ends up being mostly interim people who show up. We have a really hard time getting outside people to come in because they're so busy.

This is partly the reason the instructional designer meets with employers individually to be sure employer input is received.

RRCC is working on developing relationships with employers and the workforce center, although the process has not been easy. RRCC's career coach feels there was initially "no connection—no understanding" about what the workforce center could do for the college and its students, and that in many ways, "people still don't understand the resources of the workforce center." Aside from the lack of understanding in general, on the side of the college, there has also been a lack of understanding relative to the college on the side of the workforce center. Workforce center staff have been hesitant to engage with the college, partly because RRCC's participation in Round 1 of the TAACCCT grant created some mistrust on the side of the workforce center. The center referred several people to RRCC's energy program, and after graduating, they did not find jobs. This caused the workforce center to be very guarded and cautious about stepping in and referring people again.

RRCC's career coach turned this around. She began working with the workforce center immediately after she was hired. With her previous background in workforce, she was able to expertly and effectively create relationships with the workforce center. She initially teamed up with the project lead and gave a presentation about the program and potential benefits to students in terms of the workforce. She reports they felt resistance after the presentation, and the general feeling among staff at the workforce center seems to be that because TAA dollars can amount to \$10,000 for training, and can only be used once, it doesn't make sense for clients to use the program to pay for a \$1,200 CNA Certificate. The career coach called "the TAA guy" in Denver and finally was able to secure some cooperation with the workforce center, which said it would help with TAA referrals. After many discussions among RRCC's CHEO staff and the workforce center regarding the Nurse Aide program and employment needs, students are now able to use Workforce Investment Act (WIA) dollars to complete the Nurse Aide

Certificate, with the option of stacking this with an associate's degree in nursing. Partly this resulted from the realization that students' progressing to nursing school can use the Nurse Aide courses as a prerequisite in order to use WIA funds to help pay for it. Additionally, many nursing programs either require, or strongly encourage, their applicants to have a CNA.

RRCC's project lead encouraged the Workforce Center contact to consider funding those clients who are only interested in earning their Nurse Aide Certificate. There are those students who want to use funding interested in gaining their certificate and working as CNAs. In those cases, it is not the role of the workforce center to dissuade them from attending the program of their choice simply because their dollars should be used for a bigger program.

Also, as all the nursing programs are short, one-semester programs, students are not eligible to receive financial aid. This means they must either pay for the program on their own or use TAA money, if they are eligible. For those eligible for TAA, pursuing a CNA can either be a viable way to receive employment, or a step toward their nursing degree. The project lead and career coach are working hard to encourage the workforce center to offer the Nurse Aide program at RRCC as an option for their clients.

The career coach developed a relationship with the workforce center's business services representative that has proven to be critical in building a partnership between the college and the workforce center. This relationship developed after the coach met the business services representative at an unrelated meeting. Realizing that both were actually working toward the same goals—employing people through relevant training, the two developed a working relationship. The career coach initially experienced high call volume from home health agencies asking for qualified home health aides to employ. Realizing that local businesses were calling the college directly and that the workforce center was effectively “out of the loop,” the coach went approached a business services representative and asked her to join in traveling to speak to some of the local employers. At the time this case study was written, the coach and workforce center representative had been traveling to local employers for about six months. Going to the businesses directly has been “very beneficial” for RRCC because as the coach notes, it not only established better relations between employers and the college, but also it served as an impetus for establishing a relationship between the college and the workforce center as well as the workforce center and local businesses: “When people understand what the workforce center does and what it can do for employers, the light goes on.” Strengthening these various relationships has led to referrals from the workforce center to RRCC.

## **PROFESSIONAL DEVELOPMENT**

RRCC's career coach regularly attends the WICHE-run professionalization webinars. She has found several of the webinars extremely helpful, particularly the ones that include career coaches from prior grant rounds. She thinks it would be helpful if the webinars included more “brainstorming” to allow coaches to build ideas together and to share how others “found success in reaching people.”

The coach also reports a positive initial response of RRCC students to the CHEO Healthcare Career Hub (hub). The coach recently incorporated the hub into her classroom meetings by telling students about it and by passing out hub postcards with log-on instructions including each student's user name and password. This permits the students to directly access the website address and enter their personal information. She shows the hub to the class and talks to them about ways they can use it. The hub is also accessible through RRCC's website.

Nursing faculty at RRCC report that they do not make use of the WICHE Wiki page or the resources included. They find it hard to find information because the Wiki is cluttered and has "too much going on."

The instructional designer underwent training through an organization called Quality Matters (QM) to become a certified peer reviewer for online and hybrid courses. QM is a Maryland based nonprofit organization that began as a consortium of two- and four-year institutions to support and maintain online programs and courses in the state.<sup>13</sup> In 2003, QM used grant funding to create a rubric based on relevant research and literature for the design and evaluation of online courses nationally. The organization offers a course review service in which certified QM peer reviewers evaluate submitted courses based on the most current QM review rubric. Course development is always a continual, ongoing process, and the QM review is a system of detailed course evaluation and feedback for online and hybrid courses from two- and four-year institutions that submit their courses for review. As a QM- certified peer reviewer, RRCC's instructional designer is trained in application of the QM rubric for online and hybrid courses. The QM rubric is the basis for the Nurse Aide, Hospice Care Aide, Home Health Aide, and Nurse Refresher course design. The instructional designer offers internal training on the QM rubric and best practices in online teaching to RRCC full-time and adjunct faculty involved in CHEO touched courses.

The RRCC instructional designer planned and presented a two-day workgroup for all CHEO instructional designers for the annual meeting in Boulder in May of 2014. At that meeting, all CHEO instructional designers reached consensus on processes for preparing CHEO courses for upload to the Department of Labor's OER repository.

## **RRCC'S INNOVATIVE STRATEGIES**

### **Unique workforce-specific programs**

RRCC's Hospice Care Aide Certificate is unique among consortium colleges, as is the Nurse Refresher. The college is focused on providing quality education to Allied Health students and allows students to move through their health care certificate(s) in a flexible and accelerated manner. The local labor market has a high need for CNAs and other health-care employees, and

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<sup>13</sup><https://www.qualitymatters.org/>

RRCC developed a strategy for allowing students to receive the training they need to quickly enter, or return to, the job market.

The nature of the certificates offered through the Nurse Aide program allows students to stack them, with the ability to receive three certificates in one program. There is some discussion at the college on whether or not this is the best arrangement of the programs. On one hand, a CHEO staff member at the college reports that the ability to stack is beneficial to students because it gives them options:

I see a lot of single moms in here that are kind of lost. They don't know what direction to go, especially with the CNA, if they just want to stay in CNA work. But then to give them that hope. . . . [that they] might be able to go on and [complete] two [more] years and . . . [earn an] RN. So . . . people get more excited about it.

On the other hand, some staff at the college see the stackability as a deterrent for both students and employers. Some students don't want to get their CNA license but do want to work as home health aides or have hospice-related training, and the way the programs are currently set up, the students are unable to do so. Students must first complete the nursing aid portion of the program before they can continue into either home health aide or hospice. For the college, this limits the ability to market the programs as training for incumbent workers as well as training for chaplains, volunteers, or social workers. For one thing, employers usually won't pay for the credits associated with the programs and don't want employees to first take the nurse aide portion in order to gain their Home Health Aide or Hospice Care Aide training because of the time and expense required. If the college were able to offer the home health and hospice portions as individual, no-credit trainings, it could be more marketable to employers for incumbent workers, and to students who do not need the nurse aide education, for a CNA certification.

Having the Home Health Aide and Hospice Care Aide Certificates as stackable and to be taken after completion of the Nurse Aide program seemed like an excellent idea in theory. Employers call RRCC often looking for people to fill home health positions. However, both of these positions offer low wages, and as certificates are not required, it is somewhat of a burden for students to pay for certificates they don't need. Additionally, very few people are actually stacking the certificates, as most of the Nurse Aide program participants are getting the education so they can receive their CNA in order to enroll in a nursing program.

In the state of Colorado, hospices are required to train their personnel and their volunteers. Therefore, there is a need for hospice training. This is a possible area of sustainability for RRCC in the future. However, this would require program modification to stand on its own, not be a stackable certificate on top of the CNA, and it would also have to be offered as a non-credit training, not a for-credit certificate.

The college is listening to what the workforce needs are in the community and is invested in setting its students up for success. As such, sustainability of the programs is important to RRCC. In the future, it is possible the programs may be reoriented to better serve employer needs, which will also serve students.

The new hybrid Nurse Refresher courses are a source of great excitement for RRCC and for industry representatives in the area. RRCC envisions a variety of types of students who would benefit from the new Nurse Refresher Certificate. In particular, industry partners are excited about the potential to assist incumbent nurses to stay on top of changes in the industry. Given the fast-paced nature of nursing and the many changes in the industry, nurses need to stay abreast of new strategies, technologies, and changes as they occur. According to one RN, "It is tough to keep up with the necessary knowledge for safe practice..."<sup>14</sup> RRCC's program is a way for employed nurses to keep their knowledge current and for nurses reentering the workforce to update their skills. It is also possible that RRCC's industry partners may include the program as part of regular incumbent worker training.

The Nurse Refresher program prepares nurses reentering the labor market to be relevant participant not just by reviewing nursing content but also by assisting students in understanding the expectations employers have of their nursing staff. The course incorporates a cooperative learning environment; teaches teamwork; delivers current information and training; refreshes anatomy and physiology, pathophysiology, pharmacology, and medical surgical nursing skills; and teaches why new skills sets are required. The Nurse Refresher also outlines best practices and educates students on how Joint Commission, Medicare and Medicaid guidelines, and Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) scores affect hospital reimbursements and jobs. A 90- or 120-hour clinical is required as part of the program to ensure certificate earners are prepared to enter or reenter the nursing profession. Students who have been out of nursing for six or more years will require the 120-hour clinical, whereas students who have been out for five or less years will require the 90-hour clinical. There is discussion at the college about making the clinical a flat 120-hour requirement, no matter how long the student has been out of nursing.

One of the subject matter experts assisting in the CHEO efforts works at the hospital where many of the students take their clinicals. She is able to witness firsthand how prepared the students are and how well-trained they are when they enter the hospital. She has been encouraged by how well the students have done during their clinicals.

RRCC is committed to developing programs that are industry- and workforce-specific. It is evident through the incredible amount of time and care college CHEO staff spent trying to best fit the proposed programs to industry need that this goal is critical to RRCC. Although some elements of its CHEO programming perfectly fit the college and workforce, others have been less successful. Instead of simply abandoning the less successful elements, however, CHEO staff

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<sup>14</sup> As quoted in Red Rocks Community College's Statement of Work Change Request dated July 2014.

worked tirelessly to conceptualize how to better fit the programs to industry need and have developed plans for the future, including offering the Home Health Aide and Hospice Care Aide programs as training certificates and directly involving industry for training incumbent workers. At the core of these plans is RRCC's dedication to developing workforce and industry partnerships.

## **SUMMARY OF CHALLENGES**

The college initially had some difficulty identifying the clear original goal for the CHEO grant application, as there has been personnel turnover. This left new staff to determine a clear direction for the CHEO project at RRCC; the creation of the Medication Aide Certificate is one example of this. The goal to create this program was part of the original proposal but had very little practical industry application, and therefore, the new staff changed direction by reinvigorating the Nurse Refresher Certificate.

Turnover also occurred at the administration and leadership level at the college. There was a significant learning curve to determine how to approach the student services piece, who should hire faculty, and how to reach grant targets. One CHEO staff member at the college noted that the whole process was difficult, as no model existed for how to make CHEO work at RRCC. Because RRCC participated in a round-one TAACCT grant, the person at the college who developed and integrated that program was a great resource to the CHEO team.

The college recently hired a new program director for the nursing programs who will serve to coordinate the four CHEO certificates. RRCC hopes this director will be permanent; having one director will organize and streamline the programs and help create leadership. Although the CHEO team has created its own strong leadership, having a program director overseeing all aspects of the various program pieces will certainly help the programs and the college.

The CHEO team struggled to find an identity for the nursing programs within the larger college. In many ways, other departments treat the new certificates programs as if they are temporary and "just grant projects." As one staff member said, "We're not [just] a project. We're a supplement to enhance and improve the existing Nurse Aide program, and that's the biggest educator." The team is working to further integrate into the college and is hoping the recent move to the Arvada campus and the construction of the new centralized health-care campus will help achieve this.

The affordability of the Nurse Aide program leading to the CNA Certificate is in question. Nursing students do not qualify for financial aid, as the program is too short. The cost of the program is \$1,200, but potential earnings are only \$10-\$12 an hour. CNA hours are also quite arduous, which can be a deterrent for students entering the program. This also adds to the high turnover rate in the job market.

In addition, the stackable certificate options for students beyond the CNA are also quite expensive. The program costs are approximately \$400 for the Home Health Aide Certificate and about the same for the Hospice Care Aide Certificate program. This may price the certificates out of reach for some students. This is an obstacle for recruitment efforts as well, especially because the certificates are not a requirement for jobs, though they do increase competitiveness.

RRCC's CHEO staff noted there has been low enrollment for the Home Health Aide Certificate program, which is not surprising, as the state does not require home health aides to have a certificate for employment purposes. CHEO staff members feel that unless the state changes the requirements for home health aides to earn a certificate, the program will not be sustainable after the grant period has ended. There has been more interest in the Hospice Care Aide Certificate; however, currently, neither certificate is required to work as a CNA.

CHEO staff members do encourage students to stack the additional credentials because they increase competitiveness. This has not been overly effective, however, as many students use the CNA Certificate as a stepping stone for nursing school and are less likely to continue in the program to take the stacked certificates. The project lead laid out the dilemma:

We can get people. We can recruit because a lot of those students . . . are going into other health industries. That's kind of a stepping stone. But for those people. . . who want to stay a CNA . . . they're difficult to find. . . . How do I recruit these students . . . these people who actually want to be a CNA and want to go into home health or hospice?

Low earning potential and difficult hours will remain a stumbling block for recruiting students into the CNA Certificate program.

RRCC staff members are concerned about the lack of industry regulation of CNA's and home health aides. In building relationships with home health agencies in the area, CHEO staff realized that some employers are seeking CNAs and home health aides, but do not require the CNA certificate. College staff joined a consortium of nursing aide instructors who are all nurses, and they are involving the state nursing association to lobby legislators to regulate the industry. As one staff member stated, "We all see as one of the things that should be part of that regulation is that you can't just hire somebody off the street. They need some formal education, which would be what we have developed." Until new regulations are set, programs such as RRCC's Home Health Aide Certificate are not popular choices for students, as they are not necessary to do the work.

RRCC's CHEO project struggled with how to fill the programs and still meet grant requirements, restrictions, and required timelines. The Hospice Care Aide program could be used by employers outsourcing their state-required training for all staff and volunteers, but it would need to be redesigned to be non-credit training and priced accordingly. Likewise, the home health program could be redesigned as a stand-alone training for people who want to learn how to be care providers, either for their own family or to volunteer or work at nursing

homes, but it would need to be a non-credit course and not a certificate. Neither of these redesign options may be funded under the grant.

RRCC's service area is also saturated with other community colleges that offer CNA Certificates, creating high rates of competition among the colleges. All these individual programs also require sites for internships and clinicals, which have increased the competition for the limited sites that are available. To some degree, this issue has been alleviated by the strong relationships CHEO staff built in a relatively short period. Clinical and internship sites have been added recently due to these relationships.

There is some concern that students completing the Nurse Refresher will still not be extremely hireable. Because the nursing job market is so competitive, a nurse who has been out of the job for many years may not be hired, even with the Nurse Refresher course completion. Some students may have to "start over" in the career ladder to work their way back up to where they were when they exited nursing.

The CHEO team early in the grant had difficulty finding funding for marketing purposes to update program information related to the redesigned and newly created certificates. Fortunately, the CHEO health care hub and its marketing material provide a great opportunity to promote CHEO-related project programming implementation.

## **SUMMARY OF ACHIEVEMENTS**

The Nurse Aide program has already had its first completers who have received their CNA Certificate and found employment. The workforce demand for CNAs in Colorado is high; however, many of RRCC's students intend to apply to nursing school. Nursing programs in Colorado are highly competitive, and those students applying for nursing program that have their CNA Certificate plus the additional Home Health Aide and Hospice Care Aide Certificates are more competitive than those applicants with only a CNA Certificate. Therefore, the nurse aid program serves a need for students who seek to enter the workforce as CNAs as well as for those who seek to enter nursing programs. With the addition of the Nurse Refresher Certificate, RRCC can also target incumbent workers and RNs reentering the industry.

The career coach successfully built many employer relationships. These relationships are critical to finding internship and clinical sites and placing graduates. Employers participated in hiring events and developing curriculum. RRCC expects greater employment outcomes for students with increased employer involvement, as employers tend to prefer graduates of curriculum in touch with the industry. By employing industry partners in the development of curricula, RRCC feels it is increasing the likelihood of its students' success in the job market.

The career coach, along with the project lead, also worked extremely hard to build workforce center relationships at the college. The coach's relationship with the business services representative at the workforce center and their joint visits with local employers not only strengthened the relationship between the workforce center and the college but also created

greater awareness in the community and the college regarding what workforce centers do and how they can help.

The CHEO team at RRCC breathed life into the CHEO concept at the college. Staff who saw the original vision at the time of the proposal were gone, leadership at the college had turned over, the campuses were geographically split relative to the health-care programs, and one of the proposed certificate programs was untenable. The current CHEO team assembled and began work to create and recreate the vision to something that not only served the college but also the students, workforce, and community. The programs have been united on one campus, and a new building is planned. The programs are working closely with industry and the workforce center, and strong relationships are being built. The CHEO programs at RRCC have come a very long way in a very short period.

## **NEXT STEPS**

RRCC has big plans for its future health-care building on the RRCC Arvada Campus. The college plans to integrate all Allied Health programs into the space, and all students, faculty and staff will be located in one area. The state of Colorado awarded the college capital construction funds for the new building, which is also funded by college reserves and by private donors. Additionally, RRCC would like to build a community clinic in one portion of the new building. The community has a need for such a clinic, and the local city government supports the plan. The city is very pleased at RRCC's commitment to the community and feels the college is creating jobs and bringing education closer to students. In addition, this will increase access to health care for underserved members of the community. One RRCC staff member commented on this need:

Even with the Affordable Care Act, we have underserved populations in Arvada for health care. What we want to do is have a clinic that can take care of those different sections of our community.

The plan creates an interdisciplinary health building complete with simulation labs, skills labs, and the medical clinic that will bring the nursing students, social services students, phlebotomist students, and so on together in one space to learn to work together in a real-life setting. Not only would students benefit from learning to work together and seeing real patients, but also the community would benefit, too.

College staff hopes the new program director is permanent. This position will bring continuity and cohesion to the Nurse Aide and Nurse Refresher programs and fill the leadership vacuum the programs have been experiencing.

RRCC also hopes to keep a career coach at the college after the grant period ends. The coach will serve the entire college, not only the Nurse Aide and Nurse Refresher programs, but RRCC has certainly seen the need for this type of position. Particularly because the career coach has so

drastically improved retention rate of students at the front end of the programs by helping them complete their paperwork and background checks, the college feels the position is valuable and sustainable.

The redesigned Hospice Care Aide Certificate courses are planned to begin spring 2015. The CHEO team will continue to redesign and “tweak” any hybrid courses it feels need adjustment moving forward. This is an indication of the team’s commitment to quality education and sustainability.

As the grant nears an end, the CHEO team plans to further discuss sustainability options for the Hospice Care Aide and Home Health Aide Certificates. The team will continue to include its employer and workforce partners in these conversations. As mentioned, some options for the future of these programs include incumbent worker training and non-credit training for volunteers and caregivers.