



RAY MARSHALL CENTER
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CareerAdvance[®] Implementation Study Findings Through July 2013



Prepared for the Health Profession Opportunity Grant Program
Administration for Children and Families
U.S. Department of Health and Human Services

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GLOSSARY OF ACRONYMS AND ABBREVIATIONS

ACF.....	Administration for Children and Families
ADN.....	Associate’s Degree in Nursing
ANS.....	Academic Nursing Skills
AUA.....	Advanced Unlicensed Assistant
CAP or CAP Tulsa	Community Action Project of Tulsa County
CNA.....	Certified Nurse Aide
EPP.....	Educational Pathways Program
GED.....	General Educational Development
GPA.....	Grade Point Average
HESI.....	Health Education Systems, Inc.
HIT.....	Health Information Technology
HPOG.....	Health Profession Opportunity Grant
LPN.....	Licensed Practical Nurse
MA.....	Medical Assisting
NCLEX-PN.....	National Council Licensure Examination – Practical Nurse
NCLEX-RN.....	National Council Licensure Examination – Registered Nurse
PCT.....	Patient Care Technician
Pharm Tech.....	Pharmacy Technician
Pre-Reqs.....	Pre-requisite courses in a degree program
RN.....	Registered Nurse
TABE.....	Test of Adult Basic Education
TCC.....	Tulsa Community College
Tulsa Tech.....	Tulsa Technology Center
UPS.....	Union Public Schools
WIA.....	Workforce Investment Act of 1998

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ABOUT CAREERADVANCE®

CareerAdvance®, administered by the Community Action Project of Tulsa County (CAP Tulsa), is a program that provides training for parents of Head Start and Early Head Start children.¹ It is part of an explicit two-generation strategy focused on promoting family economic security by developing the human capital of parents while their preschool children are achieving in a resource-rich learning environment. CareerAdvance® builds on CAP Tulsa's strong system of Early Head Start and Head Start centers by adding high-quality career-oriented training for parents in occupations that offer family-supporting income, benefits, and opportunities for career advancement in the healthcare sector.

The program began in 2009 as a career pathway program for parents interested in pursuing nursing occupations in the growing healthcare sector. After the initial pilot year, CareerAdvance® moved into regular operations and was subsequently (September 2010) awarded a 5-year expansion grant through the Health Profession Opportunities Grant Program (HPOG) from the Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services. This grant has enabled the program to serve more parents by expanding its training options into other healthcare career pathways, including health information technology and other allied health professions (e.g., medical assisting, pharmacy technician, radiography, and physical therapy assistant).

Key components of the CareerAdvance® program model include:

- A sector-focused career pathways training approach that is generally organized as a progressive, stackable series of trainings, with each step resulting in a credential valued by employers. Training is provided by Tulsa Community College (TCC) and Tulsa Technology Center (Tulsa Tech).
- Career Coaches who serve as counselors, mentors, guides, and advocates for participants to help them learn to navigate the often unfamiliar world of postsecondary education. The coaches meet regularly with individual participants to develop goals and career advancement plans and connect them with support services and other resources. Coaches also facilitate partner meetings, which provide a forum for participants to reflect on their experiences, conduct group problem-solving sessions, hear guest speakers address a variety of topics, and practice other skills.

¹ For more information about CareerAdvance® see: <http://captulsa.org/our-programs/family-advancement/careeradvance/>

- Peer support networks are facilitated through weekly partner meetings and cohort-based instruction. Participants benefit from strong connections to other students who are in similar situations (i.e., parents of young children), form study groups, carpool, and encourage each other to persevere.
- Performance incentives provide participants the possibility of earning up to \$3,000 annually to help off-set some of the costs of participation (such as foregone earnings). Participants can earn \$200 per month for regular attendance, and bonuses of up to \$300 for accomplishing specific milestones and maintaining at least a B average in all classes attempted per semester.
- A shared expectations participation agreement that spells out the mutual responsibilities and commitments of the participant and the program to one another.

The *CareerAdvance*[®] program is the subject of a multi-methods evaluation, the CAP Family Life Study, which includes implementation, outcomes, and impacts components led by researchers at the Institute for Policy Research at Northwestern University, the Ray Marshall Center at The University of Texas at Austin, Columbia University, and New York University. Previous reports from the *CareerAdvance*[®] implementation evaluation are available on the Ray Marshall Center website at www.raymarshallcenter.org. A full list of reports on the CAP Family Life Study can be found on the CAP Tulsa website: <http://captulsa.org/innovation-lab/family-life-study/>. Future reports will document additional findings from the implementation study and will highlight results from the outcomes and impacts studies.

EXECUTIVE SUMMARY

This report examines fundamental changes in the *CareerAdvance*[®] program that directly relate to the experience and progress of participants through July 2013 (the end of the fourth program year) and the recruitment of Cohort 8 in April 2013. *CareerAdvance*[®] has evolved over time from a single nursing career training pathway in 2009 to four healthcare career pathways in 2013. The evolution of the program has led to many changes and has increased opportunities for program participants. Additionally, through coordination among Community Action Project of Tulsa County (CAP Tulsa) staff, Ray Marshall Center researchers and Workforce Matters consultants, the Educational Pathways Program (EPP) was created and subsequently launched by CAP Tulsa in January 2013 under the *CareerAdvance*[®] umbrella. The EPP is intended to help parents build basic skills for future entry into postsecondary education or workforce training opportunities.

A key finding of the implementation study to date is that CAP Tulsa has approached the design of the *CareerAdvance*[®] program and the development of supplemental support programs as a continuous improvement process. The program model, its pathways, and other components have all been refined over time to address participant concerns, barriers to progress, and other factors. Because of these changes, few cohorts have experienced exactly the same program. This report examines key program modifications over time, documents participation and progress in *CareerAdvance*[®], and explores factors that appear to impede or support participant progress.

Findings indicate that factors impeding participant progress include continuous program modification, challenges associated with aligning labor market demand with *CareerAdvance*[®] programming, and ensuring participants secure needed academic credentials to advance in their respective pathways. Factors appearing to support participant progress include the consumer-driven nature of the program, significant support offered to students by career coaches and peers, and investment in basic skills training that enhances a participant's likelihood of successfully completing a career pathway in the long run. This implementation study incorporates feedback from focus groups and interviews in order to provide insight from participants directly affected by the program, as well as CAP Tulsa staff and its training

partners. This feedback has been instrumental to the design of *CareerAdvance*[®] throughout the program implementation process.

CAREERADVANCE® IMPLEMENTATION STUDY FINDINGS THROUGH JULY 2013

The CareerAdvance® implementation study seeks to document the evolution of the program as it has moved from a pilot project which started in August 2009 into regular operations. The study examines modifications in program design in order to understand how, when, and why changes were made. It is an essential source of information for interpreting the outcomes and impacts of CareerAdvance® participation as part of the CAP Family Life Study.² Four prior published reports document implementation study findings from the design phase in 2009-2010 through the recruitment of Cohort 6 in Summer 2012.³

This report examines key changes in the CareerAdvance® program that directly relate to the experience and progress of participants through July 2013 (the end of the fourth program year) and the recruitment of Cohort 8 in April 2013. A key finding of the implementation study to date is that the Community Action Project of Tulsa County (CAP Tulsa) has approached the design of the CareerAdvance® program as a continuous improvement process. Modifications to the original program design include the addition of new career training options; refinements to the recruitment, screening, and selection process; and changes to the program’s career pathways, participation agreement, support services, and performance incentives. The implementation of these modifications can play an important factor in whether or how an individual progresses through the program.

² For more information on the CAP Family Life Study (FLS) see:

<http://captulsa.org/innovation-lab/family-life-study/>

³ All reports available at: www.raymarshallcenter.org

CareerAdvance® Timeline	
May 2008	Began labor market and education/workforce systems analyses
Dec. 2008	Outlined program components
July 2009	Established partnerships with Tulsa Community College (TCC) and Tulsa Technology Center (Tech)
Aug. 2009	Nursing recruitment 1 st nursing cohort begins with Certified Nurse Aide (CNA) training
May 2009	Nursing recruitment
Aug. 2010	2 nd nursing cohort begins with CNA

Sep. 2010	Received Health Professions Opportunity Grant (HPOG) award from US Dept. of Health & Human Services
Oct. 2010	Nursing recruitment
Jan. 2011	3 rd nursing cohort begins
Apr. 2011	Health Information Technology (HIT) pathway introduced
May 2011	Nursing and HIT recruitment Recruitment expands beyond CAP facilities
Aug. 2011	Patient Care Technician training launched as part of the nursing pathway 4 th cohort begins with nursing and HIT participants
Sep. 2011	Nursing and HIT recruitment CAP Family Life Study receives HPOG University Partnership funding
Jan. 2012	5 th cohort begins with nursing and HIT participants
Mar. 2012	1 st contracted PCT training class at TCC begins
Apr. 2012	Nursing, HIT, and Medical Assisting (MA) recruitment
Aug. 2012	6 th cohort begins with nursing and HIT career path participants as well as participants solely seeking MA training

Key Research Questions for the Implementation Study

The evaluation of CareerAdvance® implementation seeks to answer three key research questions:

1. How has CareerAdvance® changed over time and why?
2. What progress have CareerAdvance® participants made over time?
3. What program and institutional factors contribute to or impede participant progress through CareerAdvance®?

This report will present findings related to each of these questions through July 2013.

Research Data Sources

The implementation study draws on multiple sources of data to answer these questions:

- Biweekly calls with CareerAdvance® staff
- Interviews with CAP Tulsa and CareerAdvance® staff as well as key partners, including employers and training providers
- CAP Tulsa program and family records through the Child-Plus data system
- CareerAdvance® participant progress data and administrative records
- Reviews of CareerAdvance® program documents, marketing materials, and other resources
- Participant and Career Coach focus group sessions and interviews

Organization of this Report

Following this brief introduction, the report is divided into three main sections: key program modifications over time; CareerAdvance® participation and progress; and factors that impede or support participant progress. The final section provides a report summary and details next steps for the implementation study.

CareerAdvance® Timeline

Aug. 2012	Planning for the Educational Pathways Program (EPP) begins
Sept. 2012	Pharmacy Tech training option introduced
	Nursing, HIT, and Pharmacy Tech recruitment
Oct. 2012	First two participants accepted for RN program at TCC: one through LPN-to-RN bridge and one through the traditional program
Jan. 2013	7 th cohort begins with nursing, HIT, and Pharmacy Tech participants
	First RN students begin program classes at TCC
	EPP's 1 st cohort launched
Apr. 2013	Allied Health program introduced
	Nursing, Medical Assisting, Pharmacy Tech, and Allied Health recruitment
July 2013	8 th cohort selected for training in nursing, Medical Assisting, Pharmacy Tech, and Allied Health

KEY PROGRAM MODIFICATIONS OVER TIME

One result of the continuous improvement focus at CAP Tulsa is that it has approached the development of CareerAdvance® with an openness and willingness to change. The program's growth and refinement over time are detailed in the following sections to identify the challenges faced and how the program has responded. It serves as an example of how one community has approached the implementation of a sectorally-focused, career pathway training program for parents of young children in Head Start and Early Head Start programs.

Career Training Options

Nursing Career Pathway

CareerAdvance® began with a single nursing career training pathway of four linear steps: Certified Nurse Aide (CNA), Geriatric Technician, Licensed Practical Nurse (LPN), and Registered Nurse (RN). Figure 1 shows the initial pathway model used for Cohorts 1 through 3.

Figure 1. Initial CareerAdvance® Nursing Career Pathway

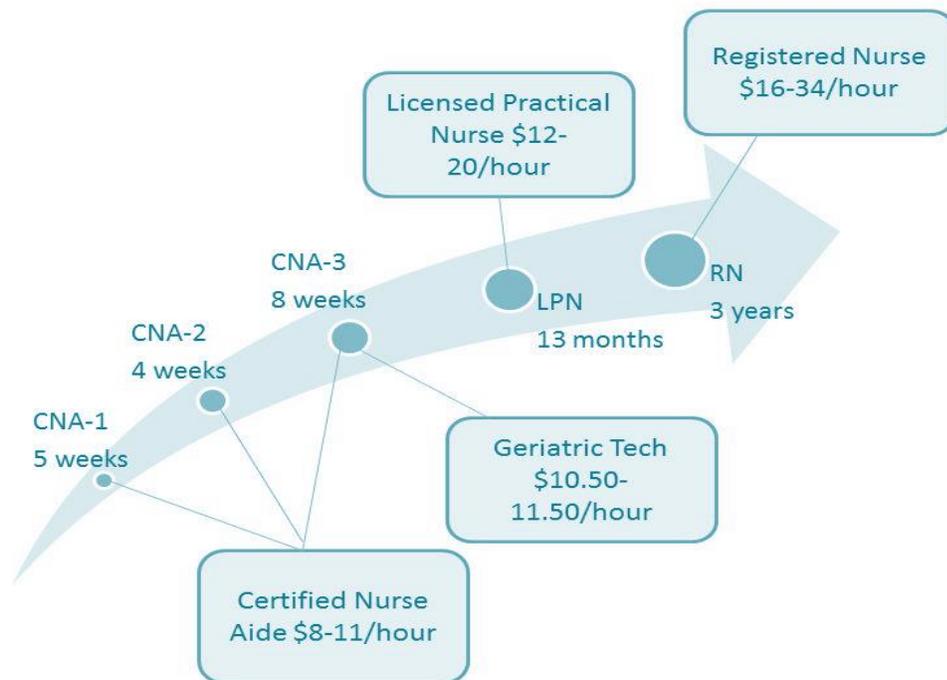
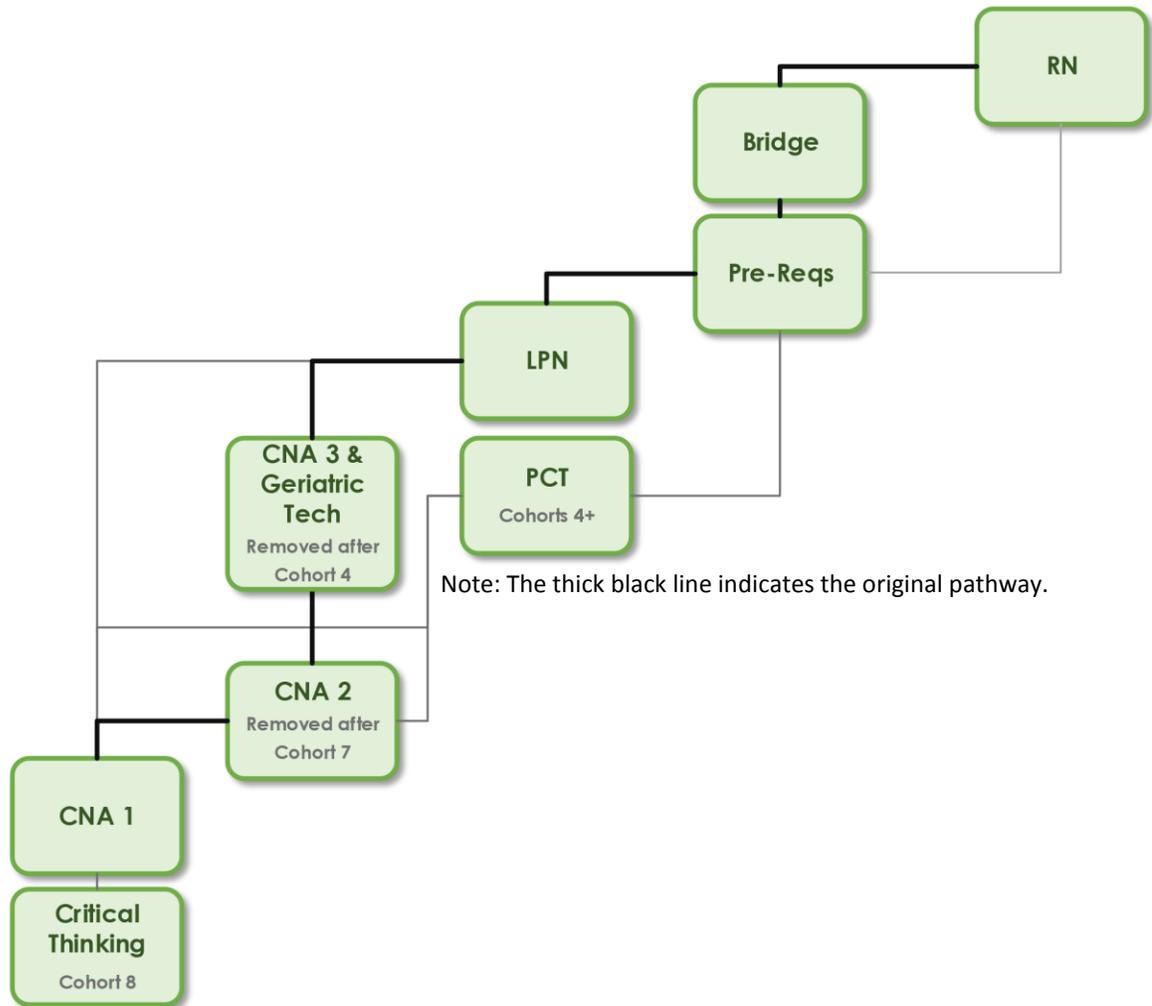


Figure 2 illustrates the complexity of the nursing career pathway as it has been modified from Cohorts 1 through 8. Part of this complexity has evolved due to testing and exam hurdles that participants face as they move along the pathway. The introduction of the Patient Care Technician (PCT) training option in Cohort 4 is a key example of this: too few participants in Cohorts 1-3 passed the LPN entrance exam to move forward. Other changes were the result of feedback from students and employers. The elimination of the CNA Level 3 training and its associated Geriatric Technician Certificate after Cohort 4 were a result of evidence that employers did not recognize the credential and from student feedback about the length and utility of the course. The nursing pathway did not change in Cohorts 6 or 7.

Cohort 8 participants will complete only CNA1 along with a 16-week class at TCC: Critical Thinking for Nurses. This change comes from continued feedback from participants about the utility of the CNA2 class and the length of time required to get into the RN program. The Critical Thinking class was recommended by TCC nursing faculty as a needed skill and an option that would earn participants an additional point on their registered nursing admissions application. The implementation of these changes and how participants progressed through the modified nursing pathway will be discussed in a future report.

Figure 2. Complexity of Nursing Career Pathway through July 2013

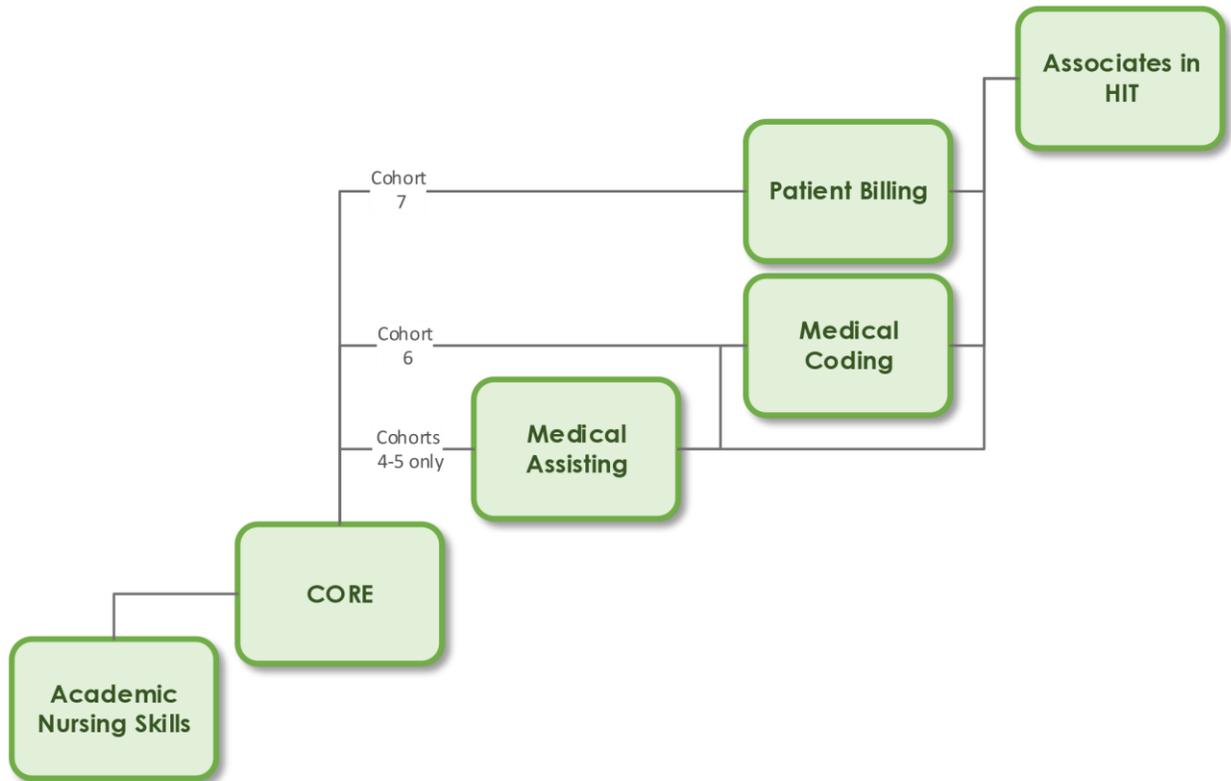


Other Occupational Training Pathways

With HPOG funding, CAP has instituted several changes to the CareerAdvance® program’s training options. The biggest change was the introduction of the Medical Assisting/Health Information Technology (HIT) pathway in Cohort 4 and its refinement over subsequent cohorts, including the separation of Medical Assisting training into its own pathway for Cohort 6. Cohort 7 courses began in the spring, which required the addition of a new step to the HIT pathway: a medical billing and insurance course at Tulsa Technology Center. The billing and insurance course, however, does not provide transfer credits to the HIT program at

TCC, which only starts classes in the fall semester. Figure 3 below illustrates the various HIT career pathways that have been offered by CareerAdvance®.

Figure 3. CareerAdvance® Pathway in Health Information Technology as of July 2013

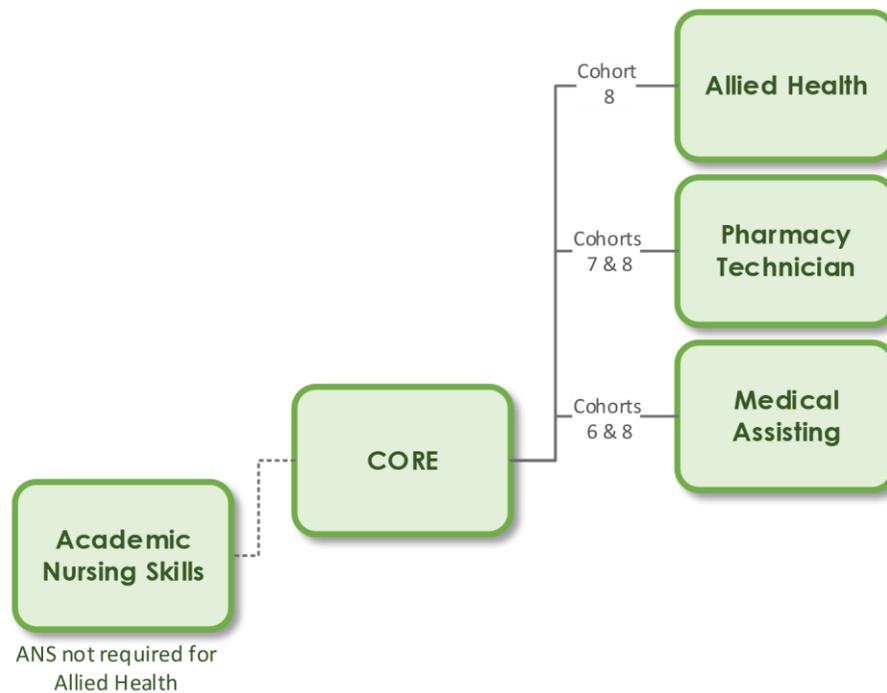


Other occupations⁴ supported by the CareerAdvance® program include Pharmacy Technician (added in Cohort 7) and Allied Health, which started enrolling participants in Cohort 8. These occupations are different from prior CareerAdvance® offerings given the fact that they are not explicitly connected to a career pathway. Referenced by CareerAdvance® staff as “one-and-done” trainings, Medical Assistant (9 months) and Pharmacy Technician (6 months) are shorter-term training options targeted at parents who need a quicker return to work than the other pathways may offer. However, starting hourly wages for these occupations also tend to be lower on average (\$10-12/hour for Pharmacy Tech and \$11-19/hour for Medical Assistant) than starting wages for most other CareerAdvance® options.

⁴ Note that Medical Assisting is included in the HIT pathway and in Other Occupations due to changes in the program structure.

Allied Health is being offered to Cohort 8 in Fall 2013. It is the first CareerAdvance® option that focuses on individuals pursuing one of five Allied Health associate’s degree programs at TCC: Radiography, Sonography, Occupational Therapy Assistant, Physical Therapy Assistant, or Respiratory Care. The common general education and pre-requisite requirements across these programs provide a platform for building peer support, though participants will not necessarily be in the same class in the same semester. This is a change from the typical CareerAdvance® pathway model in which a participant cohort completes one or semesters in classes with the same group of students. The next report in this series will document how participants in the new Allied Health pathway are progressing.

Figure 4. Other Occupational Training Programs Through CareerAdvance®



Changes in recruitment and enrollment

The recruitment and enrollment process for CareerAdvance® has been refined over time to address program modifications and grant requirements. While testing has always played a role in the program, basic skills assessments have become an important part of the selection process. Other changes include the addition of a career interest survey, a required drug test,

and a writing sample to better identify individuals most likely to succeed in training. Table 1 below documents changes to the recruitment process from Cohort 1 to Cohort 8. Note that each cohort’s requirements build on those of the prior cohort, unless a change is specifically indicated.

Table 1. Changes in CareerAdvance® Eligibility Standards, Application Requirements, and Selection Criteria

Cohort	Eligibility Standards	Application Requirements	Selection Criteria
C 1	<ul style="list-style-type: none"> • Adult at least 18 years old • Legally qualified to work in the U.S. 	<ul style="list-style-type: none"> • TABE, COMPASS, and WorkKeys testing following application • Interview with program manager • Separate application for Workforce Investment Act (WIA) funding through Workforce Tulsa 	<ul style="list-style-type: none"> • Strong interest in healthcare careers
C 2		<ul style="list-style-type: none"> • Interview with program manager <i>or Career Coach</i> 	<ul style="list-style-type: none"> • Pass a criminal background check • Tuberculosis test
C 3	<ul style="list-style-type: none"> • Citizen or legal resident for at least 5 years • Speak English well enough to participate 	<ul style="list-style-type: none"> • TABE and COMPASS scores required as part of the application process • Application for WIA funding dropped 	<ul style="list-style-type: none"> • Implemented interview rating system based on 8 criteria: attitude, desire to work, desire for healthcare employment, work history, healthcare work experience, flexible work schedule, high motivation, low debt ratio
C 4	<ul style="list-style-type: none"> • Eligibility tied to workforce standards of healthcare employers 	<ul style="list-style-type: none"> • COMPASS scores required with initial application • TABE scores required prior to interview 	<ul style="list-style-type: none"> • 3 criteria added to rating system: participant dress/language, financial stability, and access to transportation
C 5			<ul style="list-style-type: none"> • Participants are expected to be able to shoulder some of the financial burden of participation (such as purchasing their own school supplies)
C 6 and 7	<ul style="list-style-type: none"> • Speak English well enough to participate <i>and succeed</i> 	<ul style="list-style-type: none"> • Complete a career interest inventory • Submit a personal statement of 1-3 paragraphs 	<ul style="list-style-type: none"> • Selected participants must pass a drug test within one week of acceptance into the program
C 8			<ul style="list-style-type: none"> • Allied Health program requires testing as <i>College Ready</i> based on TABE and COMPASS exams.

Source: CareerAdvance® staff and program documents.

Table 2 below presents application, selection, and enrollment data for CareerAdvance® Cohorts 1-8.⁵ The Nursing pathway is presented in Table 2a. Interest appears to remain high for this occupation, while interest in the other occupations offered by CareerAdvance® (Table 2b) has been mixed. Lower shares of nursing applicants are selected for enrollment into the program than are applicants for other occupations.

Table 2a. Application, Selection, and Enrollment Data for Nursing Cohorts

	Nursing							
	C1	C2	C3	C4	C5	C6	C7	C8
Began application process	24	21	31	27	34	33	41	39
Interviewed	21	15	25	25	24	33	24	22
Completed all application steps^a	19	15	25	25	30	30	23	21
Selected for enrollment	15	13	15	16	15	18	18	18
Enrolled in CareerAdvance®	15	10	15	15	12	18	15	18

^a Beginning with Cohort 3, a completed application required taking the COMPASS® exam and the TABE tests.
Source: CareerAdvance® administrative data

Table 2b. Application, Selection, and Enrollment Characteristics for Other Occupations

	Health Information Technology					Medical Assisting			Pharmacy Technician		Allied Health
	C4 ^b	C5 ^b	C6	C7	C8	C6	C7	C8	C7	C8	C8
Began application process	28	16	12	11	N/A	6	N/A	14	3	13	8
Interviewed	22	14	10	7	N/A	5	N/A	12	1	9	6
Completed all application steps^a	22	13	9	7	N/A	5	N/A	12	1	9	6
Selected for enrollment	16	13	7	7	N/A	6	N/A	12	1	9	6
Enrolled in CareerAdvance®	15	12	6	5	N/A	6	N/A	7	1	8	4

^a Beginning with Cohort 3, a completed application required taking the COMPASS® exam and the TABE tests.

^b Medical Assisting was a required first step for participants in HIT in Cohorts 4 and 5.

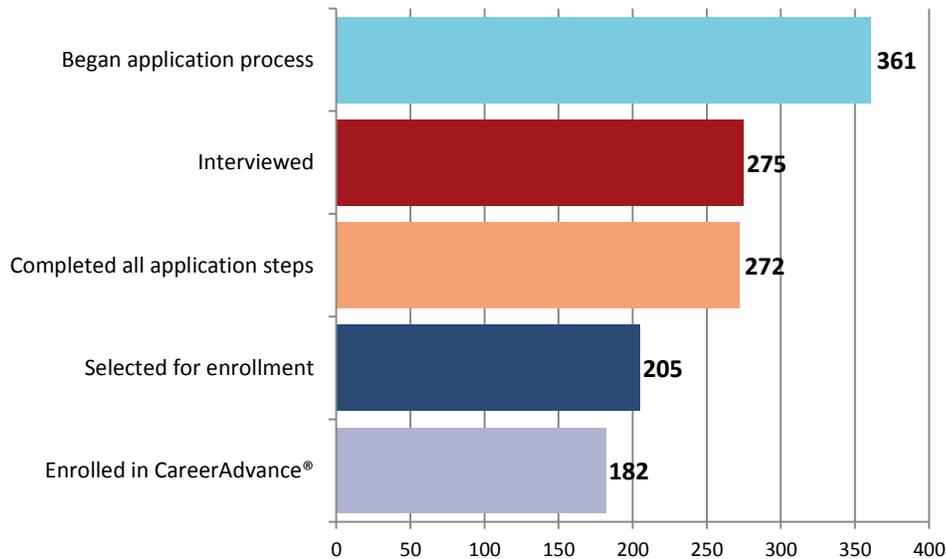
Note: N/A indicates that the training was not offered for that cohort.

Source: CareerAdvance® administrative data

⁵ Enrollment numbers for the CareerAdvance® implementation study are based solely on CareerAdvance® administrative data. These numbers may not match enrollment numbers reported for the CAP Family Life Study due to differences in the way some individuals are tracked. For example, in the CAP Family Life Study, an individual who was originally assigned to the matched comparison group but who later joined the CareerAdvance® program would only be tracked with the matched comparison group rather than the participant group. The CareerAdvance® implementation study, however, would consider that person as a participant.

Figure 5 below summarizes the application, selection, and enrollment data across all cohorts and occupations. Note that across all cohorts one-half of the 361 parents who began the application process ultimately enrolled in CareerAdvance®.

Figure 5. CareerAdvance® Application through Enrollment Summary



Changes in basic skills preparation

Many CAP Tulsa parents lack high school-level skills or credentials, and typically have been out of school for several years. While Adult Basic Education and GED preparation have always been key components of CareerAdvance®, starting with Cohort 3, coaches relied on pre-enrollment exams to help determine if a potential candidate is ready to take advantage of the program. The first exam is the Test of Adult Basic Education (TABE®), which covers four subjects: Reading, Language, Math Computation, and Applied Math. Scores are given as grade-level equivalents (Table 3). Mean TABE® Reading scores for the groups were typically around the 10th to 12th grade-levels. Mean TABE® Math Computation scores were much lower, however, around the 8th and 9th grade-levels. Skill levels also ranged widely within individual cohorts and pathways, with some individuals in a cohort testing at the 1st and 2nd grade-levels while others tested at the highest 12th grade-level.

Table 3. Entry TABE® Test Scores by Nursing and Other Occupation Cohorts

		Reading	Language	Math Computation	Applied Math
Nursing					
Cohort 3 (n=15)	Mean	9.9	10.5	7.9	9.7
	Range	6.4 - 12.9	5.6 - 12.9	3.5 - 12.9	6 - 12.9
Cohort 4 (n=15)	Mean	12.2	10.9	8.6	11.0
	Range	9.1 - 12.9	4.8 - 12.9	4.9 - 12.9	5.9 - 12.9
Cohort 5 (n=11)	Mean	10.0	8.1	8.0	8.1
	Range	6.4 - 12.9	2.9 - 12.9	4.4 - 12.9	2.4 - 11
Cohort 6 (n=18)	Mean	11.9	11.5	7.9	10.8
	Range	7.6 - 12.9	7.7 - 12.9	3.5 - 12.1	6.4 - 12.9
Cohort 7 (n=15)	Mean	12.2	11.5	8.8	11.0
	Range	10 - 12.9	7.7 - 12.9	5.3 - 12.9	7.6 - 12.9
Other Healthcare Occupations^a					
Cohort 4 (n=15)	Mean	11.0	11.5	8.6	10.6
	Range	7.6 - 12.9	5.6 - 12.9	3.9 - 12.1	3.5 - 12.9
Cohort 5 (n=12)	Mean	11.0	10.5	8.1	9.7
	Range	6.6 - 12.9	0 - 12.9	2.5 - 12.9	1.7 - 12.9
Cohort 6 (n=10)	Mean	10.3	9.7	8.0	10.0
	Range	7.4 - 12.9	5.6 - 12.9	4.4 - 12.1	6.7 - 12.9
Cohort 7 (n=6)	Mean	12.4	10.5	7.8	9.3
	Range	10 - 12.9	7.7 - 12.9	4.2 - 11.2	6.7 - 11

^a Due to low numbers of enrollees, test results for Health Information Technology, Medical Assisting, and Pharmacy Technician are reported aggregately by cohort.

Note: Scores are presented as grade-level equivalents. Data are reported for the entry cohort for each individual.

Source: CareerAdvance® administrative records

The second test that is used in CareerAdvance® selection is the COMPASS® Exam, which is also administered by many colleges and universities to assess college readiness and identify any need for remedial/developmental education courses. The test has three sections: Reading, English, and Algebra; each section is scored on a 100-point scale (Table 4). Each college establishes its own standards, which often vary within an institution depending on the demands of specific programs. At Tulsa Community College, “A COMPASS® Placement score of 66+ on the Algebra test is needed to go straight into college level math. A COMPASS® Placement score of 75+ is needed on the English test as well as a score of 80+ on the Reading test to go straight

into college level writing.”⁶ No cohort’s average COMPASS® Algebra score met TCC standards for college-level math. Two groups (Cohort 4 nursing and Cohort 7 other occupations) had, on average, the COMPASS® Reading and English scores needed to meet TCC standards for college-level writing. The remaining cohorts fell short on the English assessment, with two groups testing, on average, below TCC standards on both exams.

Table 4. Entry COMPASS® Test Scores by Nursing and Other Occupation Cohorts

		Reading	English	Algebra
Nursing				
Cohort 3 (n=13)	Mean	77.0	60.3	39.6
	Range	56 - 93	12 - 97	23 - 98
Cohort 4 (n=15)	Mean	86.7	78.0	39.9
	Range	64 - 99	22 - 99	23 - 70
Cohort 5 (n=11)	Mean	71.4	49.4	34.0
	Range	50 - 90	7 - 94	19 - 56
Cohort 6 (n=18)	Mean	84.7	71.9	41.4
	Range	64 - 99	25 - 99	18 - 75
Cohort 7 (n=15)	Mean	86.5	74.8	46.5
	Range	76 - 97	35 - 99	21 - 86
Other Healthcare Occupations^a				
Cohort 4 (n=14)	Mean	83.0	66.5	36.6
	Range	71 - 99	5 - 99	26 - 51
Cohort 5 (n=12)	Mean	85.3	65.0	39.4
	Range	53 - 98	10 - 99	25 - 61
Cohort 6 (n=11)	Mean	80.8	50.5	32.3
	Range	64 - 96	6 - 87	20 - 45
Cohort 7 (n=6)	Mean	86.2	78.5	27.8
	Range	80 - 95	42 - 96	21 - 32

^a Due to low numbers of enrollees, test results for Health Information Technology, Medical Assisting, and Pharmacy Technician are reported aggregately by cohort.

Note: Scores are presented as grade-level equivalents. Data are reported for the entry cohort for each individual.

Source: CareerAdvance® administrative records

⁶ Email from Online Advisement, Tulsa Community College. onlineadvisement@tulsacc.edu. July 25, 2012.

From Academic Nursing Skills to The CareerAdvance® Educational Pathways Program

From the start, CareerAdvance® has combined basic skills and GED preparation classes with the initial step of the career pathway. Skill-building classes are generally offered within a nursing/healthcare context to reinforce and support participant's learning in their occupational courses. Seventy-three people have participated in what became known to most participants as Academic Nursing Skills (ANS). The course combines math, reading, and writing skills preparation for the GED exam with review and skill-building instruction for those with a high school credential testing below 9th grade skills levels. Participants in ANS attend class for six hours per week over the course of one 16-week semester, for a total of 96 hours of instruction. For Cohorts 6 and 7 participants in ANS, the instructor was required to develop an individual education plan for each student based on their TABE and COMPASS exam scores.

Despite the ANS course offering, one of the primary reasons applicants are not considered for enrollment in CareerAdvance® is low basic skills as demonstrated on the TABE and COMPASS exams. CAP Tulsa realized that there was a need for a separate, focused program to get more parents academically ready for postsecondary education and career training opportunities including those offered through CareerAdvance®. In Fall 2012 on the recommendation of Ray Marshall Center researchers, CAP Tulsa consulted with Workforce Matters, an Austin, Texas-based human capital development consulting firm, to design an effective adult education/college preparation program for parents through specification of a recommended curriculum and collaboration with providers to define teaching and learning goals.

The Educational Pathways Program (EPP) was launched by CAP Tulsa in January 2013 under the CareerAdvance® umbrella. The program is intended to help parents build basic skills for future entry into postsecondary education or workforce training opportunities. For *School-Ready* parents with very low basic skills (5th grade and below), CAP Tulsa developed referrals to community-based organizations that could provide more focused instruction. CAP Tulsa has contracted with Union Public Schools (UPS) to provide classes for *Skill-Ready* individuals, those testing at the 6th-8th grade level. *College-Bound* individuals, those testing at the 9th-12th grade

level, take classes at Tulsa Tech. There is also a component for *Career-Bound* individuals, those who are in or ready to attend college or who are ready to obtain employment.

A key feature of the EPP design is program intensity. Parents in the Skill-Ready and College-Bound pathways are engaged in 16 hours of instruction and one 2-hour partner meeting per week. Participants are in class Monday through Thursday from 9 a.m. to 2 p.m., for 16 weeks—a total of 256 hours of instruction. Partner meetings are facilitated by the EPP Career Coach. In addition, a dedicated Family Support worker is assigned to EPP participants; this worker attends partner meetings and provides individual counseling and support.

In its first semester, EPP enrolled 36 parents. Of those, three School-Ready parents were given referrals to other literacy organizations in the community. Initially, 17 parents were enrolled in the Skill-Ready pathway at UPS and 9 parents in the College-Bound pathway at Tulsa Tech. Seven parents enrolled in the Career-Bound pathway. A mid-point assessment by CAP⁷ showed that five participants exited due to employment or outside demands on their time and resources, including family and health issues. Of the 31 remaining in the program, three participants moved into a higher pathway during the first 8-weeks of the semester (from School-Ready to Skill-Ready, or from Skill-Ready to College-Bound or Career-Bound). Fifty-three percent showed improvement of at least one grade-level on the mid-point TABE test (after approximately 120 hours of instruction).

By comparison, after 16-weeks of class ANS participants had completed approximately 96 hours of instruction; in that time, only 29% showed an increase on their final TABE exam score of at least one grade-level. CAP Tulsa staff concluded that the high-dosage/high-intensity instruction in EPP appeared to result in better progress for parents with low basic skills than lower-intensity alternatives. They cautioned, however, that some participants reported feeling challenged by the commute between the CAP early childhood center and their EPP classes, which were typically taught at Tulsa Tech and Union Public School locations in Tulsa. Others were struggling to find the balance between their family/work/school commitments. To help participants learn to cope with these challenges, in weekly partner meetings EPP Coaches

⁷ This section drawn from “Is CareerAdvance® Educational Pathways a “Good Deal”? A mid-point discussion of the costs and benefits observed during the first half of EPP Cohort 1.” (2013). Tulsa, OK: Community Action Project of Tulsa County.

emphasize study, planning, and time managements skills; facilitate the development of the cohort's peer support network; and connect participants with other resources to help them succeed in education and the labor market.

During focus group sessions and individual interviews in May 2013, consultants from Workforce Matters sought information from EPP participants and their instructors about their experience during the program's first semester of operations. Participants reported that the program structure and weekly partner meetings were helpful and constructive. Program staff and instructors also reported that the program design appeared to contribute to participant retention and completion. While the intensity of the program had been a concern at first, participants did not report that the hours in class were a challenge.

Other Program Changes

Since the last implementation report in October 2012, CAP Tulsa has introduced other changes to the CareerAdvance® program model. These changes included new incentives for participants in prerequisite courses, an expansion of activities fully- or partially-supported by the program over the summer break, staff changes, and modifications to the shared expectations agreement.

Incentives for General Education and Prerequisite Courses

In the last year, more CareerAdvance® participants entered into general education and pre-requisite coursework for associate's degree programs in nursing and HIT at TCC. However, at the urging of their coaches, few of these participants took on a full-time course load. In nursing and many allied health programs, an applicant's grade-point average (GPA) can be a significant selection criterion. For example, a cumulative minimum GPA of 3.4 to 3.5 was required to be competitive in recent nursing applicant pools at TCC. The Career Coaches advised students that it would be better to take a semester or two on a part-time basis to allow them to adjust to college-level courses and maintain a high GPA, rather than take a full course load and risk becoming overwhelmed by school, family, and work obligations.

To address equity and budgetary concerns, CAP Tulsa introduced a new incentive structure for participants in general education and prerequisite courses for associate degree

programs. Participants will be allowed to take two courses per semester (a half-time load) for up to two semesters and still earn \$200/month for attendance. At the end of the semester, those who maintain at least a 3.0 average will earn a \$25 bonus for each credit hour undertaken. After two semesters, individuals who continue to take less than a full-time course load will see the incentive drop to \$100/month, though they will still be able to earn the same bonus for maintaining at least a B average. These incentive changes were introduced to participants as part of the review of the incentive structure at the start of the Fall 2012 semester.

Summer Activities

Summer activities have grown in importance for *CareerAdvance*[®] participants as new pathway training options have been added. The program will pay for participants to work on GED preparation, get tutoring in basic skills or specific subjects, participate in college jumpstart or developmental programs, or take classes at Tulsa Tech or TCC. While these activities do allow participants to continue moving toward their career goals, the growth has presented new challenges for the program in terms of support services, particularly childcare and performance incentives.

In the summer of 2012, *CareerAdvance*[®] coaches encouraged participants who continued to struggle with math, reading, or writing exams to take advantage of opportunities at TCC and CAP Tulsa. MathPath at TCC was a 2-week math jumpstart program. Reading and writing clubs organized by coaches allowed participants to independently practice language skills. Participant reviews of all three programs were mixed—while participants felt they had gained something from the summer activity, they did not advance their skills as much as they had hoped.

In the summer of 2013, *CareerAdvance*[®] offered a variety of opportunities to current participants. Medical Coding and HIT participants were offered an online medical terminology course through TCC. Nursing participants in pre-requisite classes were offered the choice to either take the summer off, or continue taking classes; 18 participants chose to take at least one class over the summer. *CareerAdvance*[®] also offered participants, including those accepted into Cohort 8, the opportunity to take a science refresher class. The class was

developed by an adult education instructor who worked with EPP in the spring. The class was held twice a week for three weeks and provided a refresher/introduction to science concepts in biology, chemistry, and anatomy and physiology.

Staff Changes

Planning for EPP ultimately led CAP Tulsa to reorganize the agency's programs for adults. As part of the new Family Advancement department, *CareerAdvance*® includes both adult learning/developmental education (EPP) and career pathways (nursing, HIT, and other occupations). The EPP is staffed by a Lead Project Specialist and a Career Coach. Career pathways are staffed by a Lead Project Specialist and three coaches. With some shifting of current CAP Tulsa staff, two new employees were hired to fill openings for EPP and HIT Career Coaches in the late fall of 2012.

These staff changes required some current *CareerAdvance*® participants to transfer to another coach, including someone who was completely new to the program and CAP Tulsa. In prior years, participants in the nursing pathway had reported concerns when they were moved from one Career Coach in CNA to another coach for PCT, LPN, and prerequisites. The personalities of the coaches and differences in subject matter and intensity resulted in rough transitions for some individuals. The transition was similarly rough for HIT participants, many of whom reported feeling disconnected from their new coach. Participants felt that the timing of the transition and the number of participants assigned to the new coach resulted in too few of the personal interactions needed to build a strong relationship.

Shared Expectations

In Spring 2013, Career Coaches identified two issues that resulted in changes to the Shared Expectations Participation Agreement that participants and coaches sign upon entry into the program. First, coaches reported that there was a general perception among participants that being in *CareerAdvance*® meant that the program would take care of anything that might hinder an individual's progress. Whenever a coach turned down a request for something (rent assistance, car repair, etc.) there was significant pushback from the participant.

To address the issue, the Shared Expectations agreement was revised to delineate participant and program responsibilities more explicitly.

The second issue identified by coaches related to individuals who chose not to take certification exams at the completion of a training program, but who still wanted to participate in *CareerAdvance*[®]. In some instances, participants delayed the exam for one year or more despite multiple requests from coaches for them to attempt the exam. These individuals were given verbal and written notice that the program required them to attempt the exam in order to continue, sometimes to no response. To address this issue, the Shared Expectations Agreement was revised to clarify that within one semester participants must attempt each licensure exam that they have completed the requirements for in order to continue in *CareerAdvance*[®].

CAREERADVANCE® PARTICIPATION AND PROGRESS

The primary purpose of CAP Tulsa’s continuous improvement process for CareerAdvance® is to improve operations in order to better help participants progress through an occupational training program and obtain career employment at a level that provides for family financial stability over time. The following sections examine participation and progress in the nursing and health information technology pathways, as well as the other occupational offerings.

Demographics of Participants

Table 5 provides a demographic snapshot of participants and families in the first seven cohorts of CareerAdvance®.

Table 5. Profile of CareerAdvance® Participants, Cohorts 1-7

	Cohort 1	Cohort 2	Cohort 3	Cohort 4	Cohort 5	Cohort 6	Cohort 7
Number Enrolled	15	10	15	30	24	30	21
Gender							
Female	100.0%	90.0%	93.3%	90.0%	95.8%	96.7%	100.0%
Male	0.0%	10.0%	6.7%	3.3%	4.2%	3.3%	0.0%
Unspecified				6.7%			
Single Parent Families	40.0%	70.0%	53.3%	76.7%	70.8%	70.0%	71.4%
Race/Ethnicity							
Hispanic	13.3%	10.0%	20.0%	6.7%	12.5%	10.0%	23.8%
Black	33.3%	50.0%	33.3%	36.7%	41.7%	46.7%	33.3%
White	46.7%	10.0%	40.0%	26.7%	33.3%	26.7%	33.3%
Asian	0.0%	10.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Native American	6.7%	0.0%	0.0%	10.0%	8.3%	3.3%	9.5%
Multi- or Bi-Racial	0.0%	0.0%	0.0%	6.7%	4.2%	6.7%	0.0%
Other	0.0%	20.0%	6.7%	13.3%	0.0%	6.7%	0.0%
English is Primary Family Language	80.0%	90.0%	73.3%	96.7%	95.8%	90.0%	100.0%
Mean Age	32.3	35.1	26.3	29.9	30.5	29.1	30.0

Source: CAP Child Plus data system and CAP staff. Note: Data collected up to three years prior to enrollment in CareerAdvance®.

Table 5. Profile of CareerAdvance® Participants, Cohorts 1-7 continued

	Cohort 1	Cohort 2	Cohort 3	Cohort 4	Cohort 5	Cohort 6	Cohort 7
Education Level							
Less than high school diploma/GED/12th	46.7%	0.0%	26.7%	0.0%	25.0%	20.0%	4.8%
High school diploma/GED/12th	20.0%	70.0%	40.0%	63.3%	50.0%	43.3%	47.6%
Some college or advanced training	20.0%	10.0%	0.0%	16.7%	8.3%	10.0%	14.3%
College degree and/or training certificate	13.3%	10.0%	26.7%	13.3%	12.5%	23.3%	33.3%
Unspecified	0.0%	10.0%	6.7%	6.7%	4.2%	3.3%	0.0%
Employment Status on Application for Early Childhood Program							
Full time (35 hours or more)	0.0%	20.0%	46.7%	30.0%	16.7%	30.0%	14.3%
Part time (< 35 hours)	13.3%	10.0%	13.3%	16.7%	8.3%	10.0%	4.8%
Full time and training	0.0%	0.0%	0.0%	6.7%	4.2%	0.0%	14.3%
Part time and training	0.0%	0.0%	6.7%	0.0%	4.2%	3.3%	0.0%
Training or school only	0.0%	0.0%	0.0%	3.3%	16.7%	13.3%	9.5%
Not employed or unemployed	73.4%	60.0%	26.7%	33.3%	50.0%	36.7%	52.4%
Retired or disabled	13.3%	0.0%	0.0%	3.3%	0.0%	3.3%	0.0%
Unspecified	0.0%	10.0%	6.7%	6.7%	0.0%	3.3%	4.8%
Annual Family Eligibility Income							
\$0 to \$1,000	20.0%	10.0%	6.7%	30.0%	4.2%	13.3%	14.3%
\$1,001 to 10,000	40.0%	30.0%	20.0%	26.7%	54.2%	30.0%	42.9%
\$10,001 to 20,000	13.3%	30.0%	26.7%	20.0%	16.7%	20.0%	23.8%
\$20,001 to 30,000	20.0%	10.0%	20.0%	6.7%	16.7%	23.3%	9.5%
Over \$30,000	6.7%	20.0%	26.7%	16.7%	8.3%	13.3%	9.5%
Mean	\$10,593	\$18,182	\$19,877	\$12,401	\$12,278	\$16,097	\$12,064
Poverty Level / Eligibility Status							
100% / Eligible	80.0%	70.0%	60.0%	73.3%	62.5%	56.7%	76.2%
101-130%	13.3%	10.0%	6.7%	0.0%	8.3%	6.7%	0.0%
> 130% / Over income	0.0%	0.0%	13.3%	16.7%	8.3%	16.7%	4.8%
Foster child	6.7%	10.0%	0.0%	0.0%	4.2%	0.0%	0.0%
Homeless	0.0%	0.0%	6.7%	3.3%	0.0%	6.7%	4.8%
Public assistance	0.0%	10.0%	13.3%	6.7%	16.7%	13.3%	14.3%

Source: CAP Child Plus data system and CAP staff.

Note: Data collected up to three years prior to enrollment in CareerAdvance®.

Table 5. Profile of CareerAdvance® Families, Cohorts 1-7 continued

	Cohort 1	Cohort 2	Cohort 3	Cohort 4	Cohort 5	Cohort 6	Cohort 7
Total Number of Children, All Ages	37	32	40	66	67	67	54
Number of Children per Household, All Ages							
1	6.7%	20.0%	20.0%	33.3%	16.7%	36.7%	19.0%
2	53.3%	40.0%	33.3%	33.3%	37.5%	30.0%	33.3%
3	26.7%	10.0%	26.7%	16.7%	29.2%	16.7%	28.6%
4	13.3%	0.0%	0.0%	13.3%	8.3%	10.0%	14.3%
5 or more	0.0%	30.0%	20.0%	3.3%	8.3%	6.7%	4.8%
Mean	2.5	3.2	2.7	2.2	2.6	2.2	2.5
Ages of Children in Household							
0 to 2	21.6%	17.1%	17.5%	21.2%	22.4%	7.5%	27.8%
3 to 4	34.2%	25.7%	37.5%	40.9%	25.4%	38.8%	25.9%
5 to 9	40.5%	34.3%	32.5%	21.2%	32.8%	34.3%	24.1%
10 to 14	2.7%	12.3%	12.5%	7.6%	10.4%	17.9%	13.0%
15 to 19	2.7%	8.6%	0.0%	6.1%	7.5%	1.5%	5.6%
20 and older	0.0%	0.0%	0.0%	0.0%	1.5%	0.0%	3.7%
Missing	0.0%	0.0%	0.0%	3.0%	0.0%	0.0%	0.0%
Mean	4.7	7.9	5.6	5.7	6.5	6.4	6.1
Median	4.0	6.0	4.0	4.0	5.0	5.0	4.0

Source: CAP Child Plus data system and CAP staff.

Note: Data collected up to three years prior to enrollment in CareerAdvance®.

Nursing Pathway Participation and Progress

Table 6 provides information on the progress of nursing pathway participants from Cohorts 1-7. As of July 2013, each of these cohorts had completed at least one semester of the CareerAdvance® program. The table also reports on training-related employment documented in program records.

Of the 94 participants who enrolled in the first CNA training, 82% passed the state certification exam, and 53% obtained employment as a CNA over the period examined. Of the 31 participants who subsequently enrolled in the PCT program, 90% completed the program though less than half have attempted or passed the state’s required Advanced Unlicensed Assistant (AUA) certification exam. Five CareerAdvance® participants obtained employment as a PCT or AUA. Forty-four participants have applied to the LPN program, with 19 accepted by

Tulsa Tech and 15 enrolled. Through July 2013, 83% of CareerAdvance® LPN graduates passed the national NCLEX-Practical Nursing exam.

Table 6. Participant Progress in Nursing Pathway through July 2013

Career Path Step	Milestone	C1	C2	C3	C4	C5	C6	C7	Totals
CNA	Started Class ^a	14	10	15	15	11	14	15	94
	CNA 1 Completed	14	8	13	13	7	12	12	79
	CNA Certification Exam Passed	13	8	13	13	7	11	12	77
	CNA 2 Completed	13	5	15	14	9	14	15	85
	CNA 3 Completed	7	5	7	13	N/A ^b	N/A ^b	N/A ^b	32
	Geriatric Tech Certificate Obtained	7	5	7	12	N/A ^b	N/A ^b	N/A ^b	31
	CNA Employment Obtained	10	3	12	5	6	5	9	50
PCT/AUA	Enrolled	1	1	3	13	5	8		31
	Completed	1	1	3	11	5	7		28
	AUA Certification Exam Passed	0	0	3	7	2	1		13
	PCT/AUA Employment Obtained	0	0	1	4	0	0		5
LPN	Application	5	6	13	0	1	8	11	44
	Accepted	4	3	5	N/A	1	3	3	19
	Enrolled	4	3	3	N/A	1	2	2	15
	Graduated	4	1	1	N/A	0			6
	NCLEX-Practical Nursing (PN) Exam Passed	4	0	1	N/A	0			5
	LPN Employment Obtained	2	0	1	N/A	0			3
RN	Working Towards General Ed Requirement	4	0	4	10	3	3		24
	Completed General Ed Requirement	1	0	1	0	1	0		3
	LPN-to-RN Bridge Program Application	1	0	1	N/A	0			2
	Application	1	0	1	6	1			9
	Enrolled	1	N/A	1	N/A	1			3
	Graduated				N/A				0
	RN Exam Passed				N/A				0
	RN Employment Obtained				N/A				0

Note: In this and following tables, gray boxes indicate that a cohort has not yet reached a particular milestone.

^aThis number includes individuals who entered the program with prior CNA certification and did not take CNA 1 or the CNA certification exam. This number does not include those who enrolled but never started the first class.

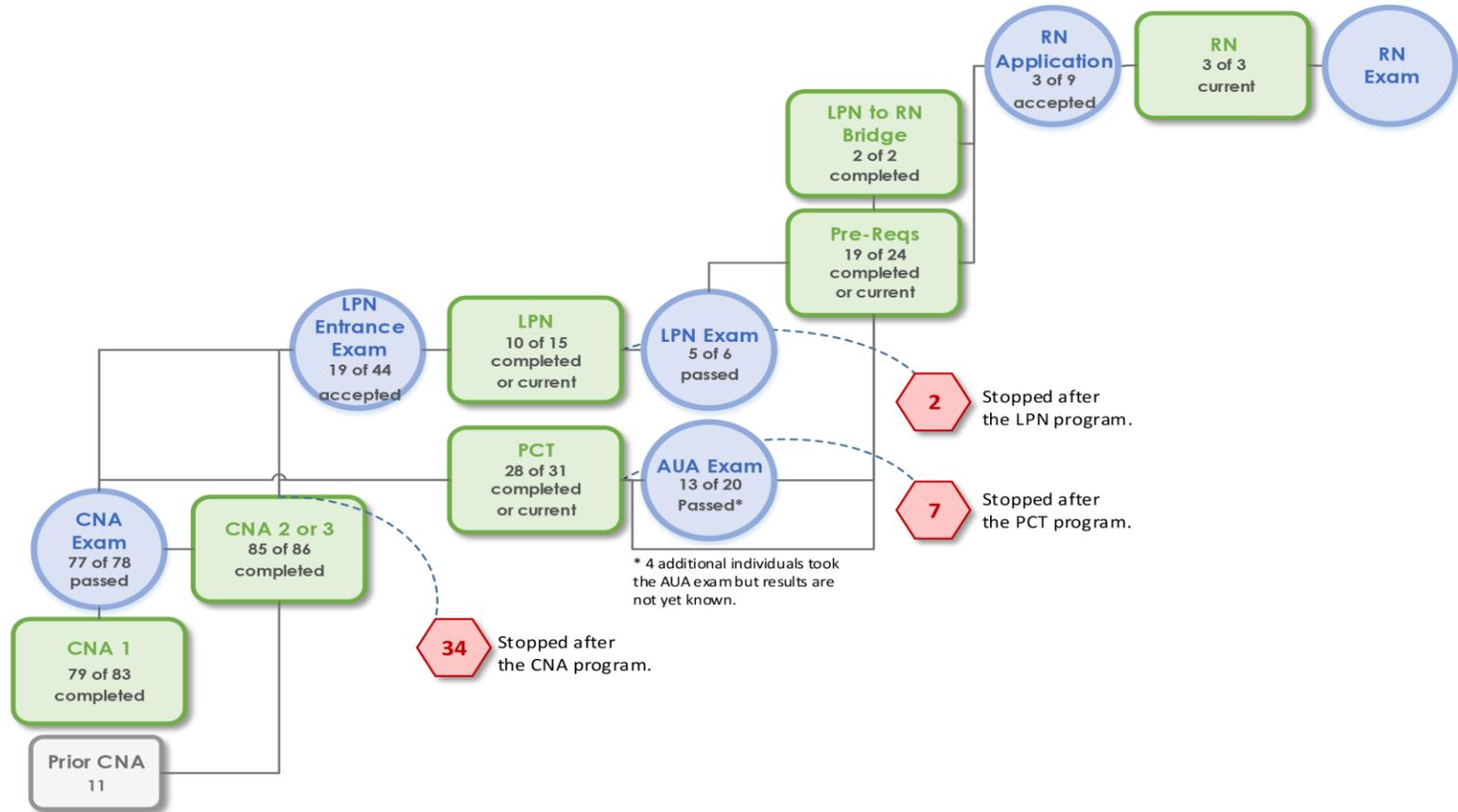
^bCNA 3 and its associated Geriatric Tech Certification were dropped from the pathway in Cohort 5. Cohort 7 is the last cohort who will complete CNA 2.

Source: CAP administrative records submitted on August 15, 2013.

Figure 6 looks at the flow of all of the nursing participants through the pathway over time. The green squares represent each section of the nursing pathway; blue circles indicate either entrance or certification exams; and red hexagons show the number of participants who stopped out at various points (“stopped” includes those who formally exited the program as well as those who have no data indicating that they continued with courses).

Note the chart at the bottom of the figure that illustrates how enrollment declines over successive stages. Of the 94 who began CNA1, 86 enrolled in CNA2 or CNA3. Enrollment drops by roughly half over the next two training stages (PCT/LPN and Bridge/Pre-Requisite). Few participants had enrolled in the RN program by July 2013.

Figure 6. Progress Along Nursing Career Pathways through July 2013



Number Who Started Each Training Program



(Does not include 7 individuals who enrolled but did not start classes.)

Health Information Technology Pathway Participation and Progress

Table 7 and Figure 7 detail the Health Information Technology (HIT) pathway in CareerAdvance®. This pathway has been modified with each subsequent cohort to better meet the needs of participants and employers. The HIT pathway spans programs at Tulsa Tech and TCC. At Tulsa Tech, pathway training has included Medical Assisting, Medical Coding, and Patient Billing and Insurance. At TCC, pathway training leads to an associate’s degree in Health Information Technology. Note that in the following discussion Medical Assisting participants are included in both the HIT and other healthcare career pathways since the training was the first required step for participants in HIT Cohorts 4 and 5 before its designation as a “one-and-done” option in Cohort 6.

Table 7. Participant Progress in Training for HIT Pathway through July 2013

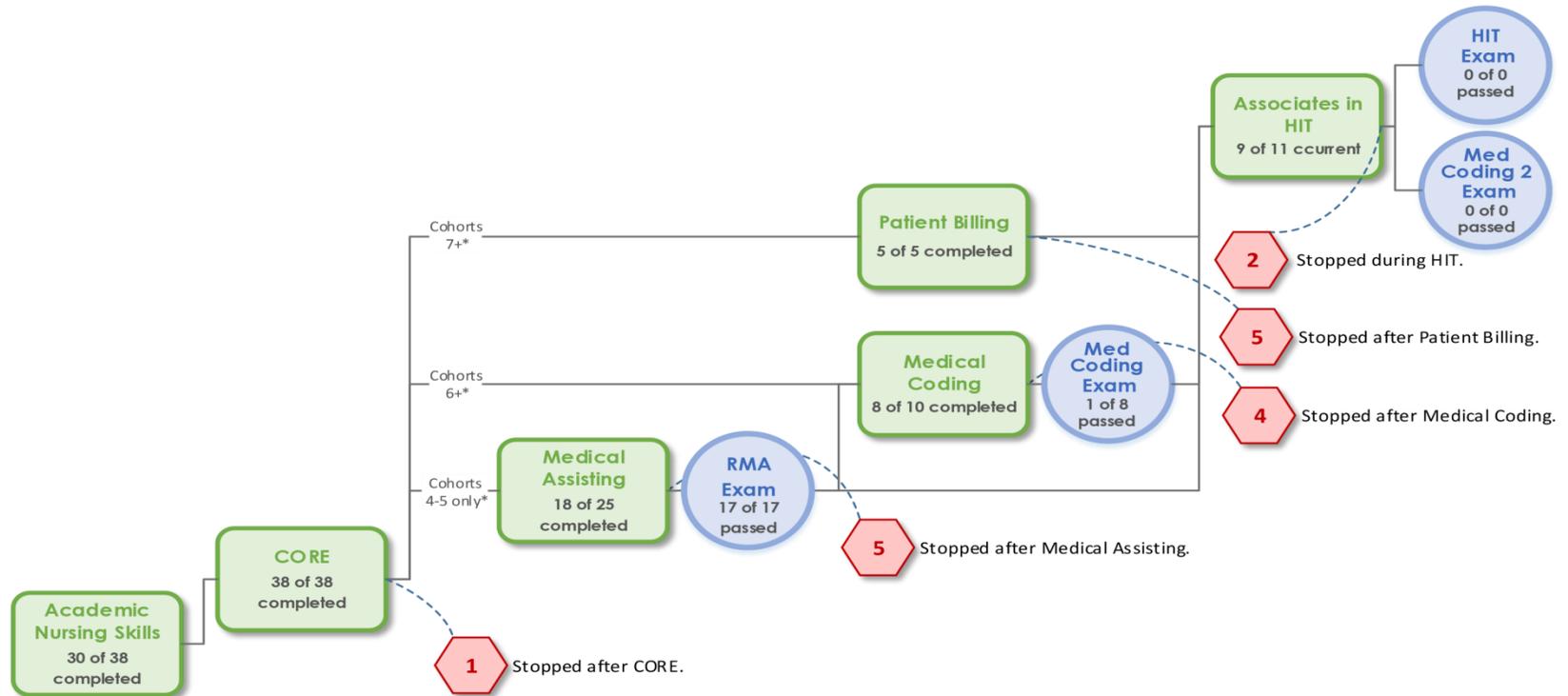
	Cohort 4	Cohort 5	Cohort 6	Cohort 7	Totals
Initial Enrollment	15	12	6	5	38
Medical Assisting Start	15	10	N/A ^a	N/A ^a	25
Medical Assisting Completed	9	9	N/A ^a	N/A ^a	18
Registered Medical Assistant (RMA) Exam Passed	9	8	N/A ^a	N/A ^a	17
MA Employment Obtained	6	2	N/A ^a	N/A ^a	8
Medical Coding Start	3	1	6	N/A ^a	10
Medical Coding Completed	2	1	5	N/A ^a	8
Certified Professional Coder Exam Passed	0	0	1	N/A ^a	1
MC Employment Obtained	0	0	0	N/A ^a	0
Patient Billing Start	N/A ^b	N/A ^b	N/A ^b	5	5
Patient Billing Completed	N/A ^b	N/A ^b	N/A ^b	5	5
Patient Billing Employment Obtained	N/A ^b	N/A ^b	N/A ^b	0	0
HIT Start	5	6			11
Certified Coding Associate’s Exam Passed					
HIT Associate’s Degree					
Registered HIT Exam Passed					
HIT Employment Obtained					

Notes: ^a In Cohort 6, MA was removed from the HIT pathway.

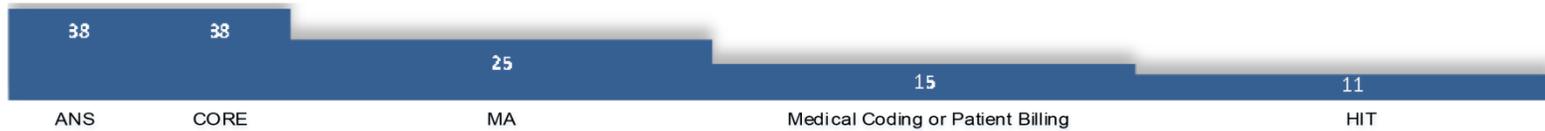
^b Patient Billing added to the HIT pathway in Cohort 7 to replace the Medical Coding option.

Source: CAP administrative records submitted on August 15, 2013.

Figure 7. Health Information Technology (HIT) Pathway through July 2013



Number Who Started Each Training Program



*For Cohorts 4-5, Medical Assisting was part of the pathway to Associates in HIT. Patient Billing introduced with Cohort 7.

Participation and Progress in Other Healthcare Career Training

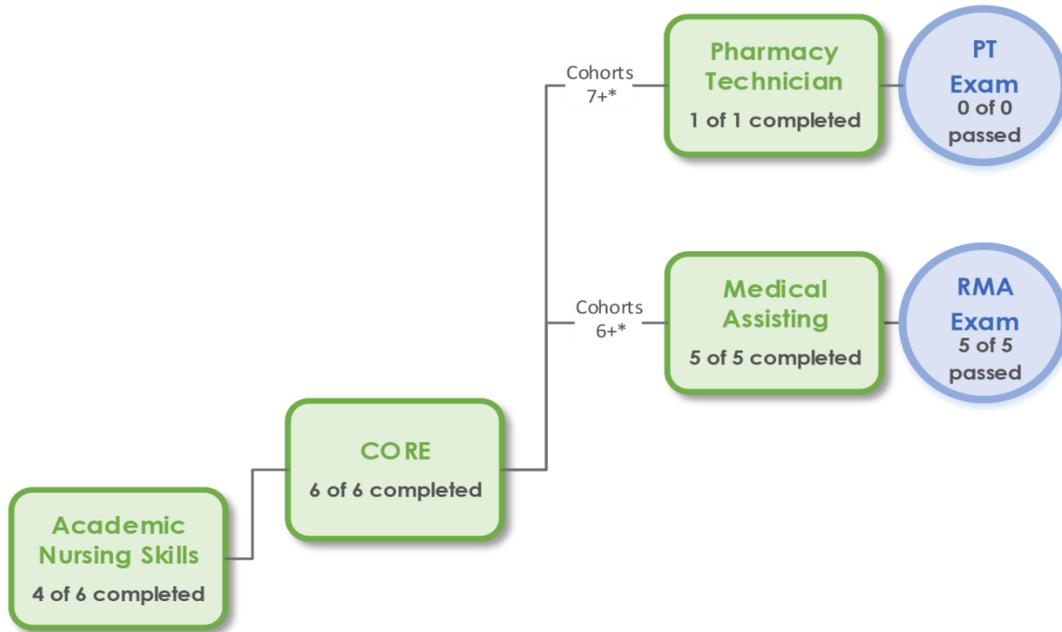
Table 8 and Figure 8 detail participant progress in the “one-and-done” CareerAdvance® training options: Medical Assisting (Cohort 6) and Pharmacy Technician (Cohort 7). While the number of participants in each program was low, initial outcomes do appear to show strong completion rates. It should be noted that the Pharmacy Tech participant attended CORE and partner meetings with Cohort 7 HIT participants in the patient billing and insurance course.

Table 8. Participant Progress in Other Healthcare Career Training Programs

	Cohort 6	Cohort 7	Totals
Medical Assisting			
Medical Assisting Start	5	N/A	5
Medical Assisting Completed	5	N/A	5
Registered Medical Assistant (RMA) Exam Passed	5	N/A	5
MA Employment Obtained	3	N/A	3
Pharmacy Technician			
Pharmacy Technician Start	N/A	1	1
Pharmacy Technician Completed	N/A	1	1
Pharmacy Technician Exam Passed	N/A	0	0
Pharmacy Technician Employment Obtained	N/A	0	0

Source: CAP administrative records submitted on August 15, 2013.

Figure 8. Other Healthcare Occupations Offered by CareerAdvance®



* Beginning with Cohort 6, Medical Assisting became a separate career training program. Previously, Medical Assisting was part of the HIT pathway. Pharmacy Technician classes were offered beginning with Cohort 7.

July 2013 Participation Snapshot

Table 9 provides a snapshot of the status of participants in CareerAdvance® as of July 2013. Table 9a documents the number of active nursing pathway participants from Cohort 1 through Cohort 7, as well as the number who exited after achieving a credential and the number who exited prior to achieving a credential. Roughly 36% of individuals who had ever enrolled in CareerAdvance® were considered active in July 2013.

Table 9a. CareerAdvance® Nursing Participants: Status as of July 2013

	Nursing							Total
	C1	C2	C3	C 4	C 5	C6	C7	
Enrolled	14	10	15	15	12	14	15	95
Active	3	0	7	7	5	6	5	33
Achieved Credential and Exited	10	5	4	3	5	6	10	43
Exited Prior to Achieving Credential	1	5	4	5	2	2	0	19

Source: CAP administrative records submitted on August 15, 2013.

Table 9b documents the status of participants in other occupational programs, indicating the number who are active participants, the number who exited after achieving a credential, and the number who exited prior to earning a credential.

Table 9b. CareerAdvance® Participants in Other Occupations: Status as of July 2013

	Health Information Technology				Medical Assisting		Pharmacy Technician	Total
	C 4	C 5	C 6	C 7	C 6	C 7	C 7	
Enrolled	15	12	6	5	6	N/A	1	39
Active	3	7	4	0	0	N/A	0	14
Achieved Credential and Exited	5	4	1	5	5	N/A	1	21
Exited Prior to Achieving Credential	7	1	1	0	1	N/A	0	10

Source: CAP administrative records submitted on August 15, 2013.

FACTORS THAT IMPEDE OR SUPPORT PARTICIPANT PROGRESS

There are two key sources of information for understanding participant progress through the CareerAdvance® program: focus groups and exit interviews. This section will summarize findings from both sources to identify factors that appear to impede or support participant progress through a career pathway.

Findings from Focus Group Sessions

Focus groups are conducted twice a year with participants from all levels of the program.⁸ Questions for the focus group sessions concentrated on the participants' chosen career pathway and training, program experiences, work and personal finances, home and family, personal growth and challenges, and suggestions for program improvement.

Impeding Factors

Factors that hinder progress or otherwise present barriers to participant success are considered impeding factors. CareerAdvance® participants highlighted multiple impeding factors in the most recent focus group sessions held in December 2012 and May 2013. Among these, time management, partner meetings, incentive policies, and teacher quality/course design issues were common across participants at various levels.

CareerAdvance® participants frequently mentioned that balancing school, work, and life commitments was a challenge. Several reported getting less sleep in order to have time for their family and their studies. One participant, who works 12-hour night shifts on the weekend as a PCT, reported that she *"literally fell asleep in an exam on a Monday because I was tired. It was dull and everybody was quiet and [I realized] oh, my gosh, I'm taking a test!"* Other participants who worked weekends after being in school all week reported feeling like they had little time for anything else in their lives. Some participants felt that trying to work and go to school at the same time was overwhelming. *"I can't even get laundry done, much less work."*

The perceived utility of program components was also an issue of time. Based on participant feedback, the HIT pathway was modified to drop the initial training component in Medical Assisting. This nine-month program had no direct relation to the rest of the pathway

⁸ In December 2012, focus group sessions were also held with individuals who voluntarily left CareerAdvance®.

and tended to attract people who were more interested in personal interactions with patients than would be typical in an HIT or medical coding position. In the nursing pathway, the last two CNA training steps were ultimately dropped from the program after negative feedback from participants and the realization that completion of the courses did not result in improved labor market outcomes or better academic standing. The frequency of partner meetings, which are held weekly when participants first enter CareerAdvance[®], also became a frustration point for some. In response, participants in later career steps only participate in partner meetings biweekly or monthly. This change has allowed coaches to meet more often with participants on a one-to-one basis to discuss individual needs and advancement goals.

Being enrolled in a pilot group—a newly designed component of the CareerAdvance[®] training program—can present challenges. While the pilot group provides valuable information to CAP Tulsa and its training partners about the design of various components, the participants themselves often have to work through less than ideal conditions. The length of the CareerAdvance[®] pathways and the way the project has unfolded mean that CAP Tulsa program staff do not yet have any participant that has gone all the way through the nursing or HIT pathway. Therefore, participants in the cohorts examined here have, in many ways, been part of the pilot group; they have been the first to enter a new career option or have gone through components that are no longer required.

During a December focus group, participants in the first CareerAdvance[®] Medical Coding class reported multiple frustrations with classroom facilities, the instructor, and the experience in general.

“The teachers need to be more effective; they need to know how to work with adults with different learning styles.”

“It just feels like it was put together at the last minute. It wasn’t well thought-through.”

“There is only one computer in the classroom; we are trying to use our smartphones to finish assignments. This is a class for work that is done almost entirely on computers.”

During the May focus group, these same Medical Coding participants reported that there had been some progress, including better access to computers. They noted, however, that they continued to be dissatisfied with the facilities and expressed concerns about signs of mold on the walls and ceiling. *“A lot of us have been really down with sinus infections and*

asthma and bronchitis that we never had before... [then] we have to miss school, which also affects our [incentive] pay."

Supportive Factors

Most participants identified numerous ways that CAP Tulsa, the CareerAdvance® program, Family Support staff, and their families were supporting them in their pursuit of career training. For some, the motivation was personal: *"I don't want to be stuck in just another job; I want a career."* Participants in the patient billing and insurance class framed their motivation in terms of their own self-confidence:

"It's made me feel important again...I'm setting an example for my children."

"It just really, really boosts up your self-confidence...I'm doing something my kids are gonna be proud of."

"I'm actually in motion towards a better future."

Other participants highlighted key features of CareerAdvance®, such as peer support, the Career Coach, and financial incentives, all intentionally-designed, evidence-based program components. Participants seem to particularly value the peer support that develops within cohorts. *"We keep each other going."* *"It helps to have people [in class] who understand about being a mom and going to school."* Another shared that:

"I'm taking PCT for the second time. The first time I was just in the regular [Tulsa Community College] class, and I wasn't as serious. I didn't know how important it was to be in a group that has had similar life experiences. It's easier this time because I'm with my CareerAdvance® group."

The Career Coach guides participants as they progress through the program. The participants' connection with the coach as someone who is committed to helping them achieve success was stressed by multiple participants as a key factor in their progress. *"She is always there; she keeps motivating us – we aren't alone."* One participant noted that *"[The coaches] help you recognize that you have to do something for yourself, not just your kids."*

A focus group with the first CareerAdvance® participants to enter the RN program at TCC highlighted how important the coach's encouragement continues to be as participants move along a pathway. As they related:

“You get to that burnout point and you’re just exhausted, brain is on overload...I know I don’t want to quit but sometimes I feel like I just want a break, but I know if I do it will be so hard to get back into it.”

“You really have to keep your focus, and I will say I have my mental breakdowns every once in a while, but [the Career Coach] is always there to pick me up. [She says] ‘it’s okay, keep going’.”

Another way that CareerAdvance® differs from many occupational training programs is the level and type of financial support available to participants. Through a monthly incentive for good attendance and gas cards to cover some of the transportation costs associated with participation, the program seeks to make the program financially feasible for parents through supports that are conditional on performance. *“It’s awesome; you’re getting paid to learn.”*

Participants also report a strong connection with CAP Tulsa as a key factor in their continued participation and success. *“CAP treats you like family. They want you and your kids to do better and be better.”* Others agreed with the sentiment expressed by one participant, *“They make you responsible. You have to be involved...with the kids. [They have] all these different things for you and your child to do together...It’s just so good.”*

Findings from Exit Interviews

Exit interviews are conducted when a participant has no scheduled next steps, or when a participant has been terminated from CareerAdvance® by CAP Tulsa staff or expelled from class by one of the education providers. As part of the federal HPOG grant requirements, coaches conduct exit interviews when participants leave CareerAdvance® in order to obtain cohort members’ perceptions and opinions of various components of the program as well as to document employment. Participants from Cohorts 1-3 who exited CareerAdvance® after the start of HPOG funding may have also completed exit interviews.

The exit interview technique has been used in business and industry for over sixty years.⁹ Recently, universities and colleges have also conducted exit interviews to investigate student attrition and faculty retention. Although some criticism arises around biased reporting,

⁹ Doll, Paddy A. and Keith W. Jacobs. (1988). “The Exit Interview for Graduating Seniors.” *Teaching of Psychology*. Vol. 15, No. 4, Pp. 213 – 214.

the exit interview continues to be a useful tool for program staff to obtain direct feedback from participants.

Upon exit from the program, all participants go through an exit interview with the CareerAdvance® coach on an individual basis. Typically, cohort members complete a face-to-face interview with the Career Coach when they leave the program. When individuals are not available to meet with the Career Coach, they may do the interview via mail or by means of telephone survey. In some cases, a coach may complete an exit interview based on the best information they have available. The CareerAdvance® exit interview focuses on four main areas: exit reasons, employment, education and training information, and participants' perception of their experience with the CareerAdvance® program. The interview form contains both multiple choice questions and questions in an open-ended format.

The exit interview approach is a particularly useful tool for CareerAdvance® staff to collect data on reasons for early exit. Future research will explore the interrelationship of various factors in exit decisions. Participants' responses also contribute to the assessment of needs and service quality, and provide direction in the planning process for future improvements of the CareerAdvance® program.

Summary of Exit Interview Participants

Through August 2013, a total of 56 participants from Cohorts 1 to 7 completed an exit interview. One individual was dropped from the analysis due to multiple exits. Forty-three participants completed the exit interview by themselves, while the Career Coach completed 12 interviews based on their knowledge of the participant. Table 10 shows the breakdown of exit interviews completed by cohort. It is important to note that, in each cohort, participants progress in the program at a different pace depending on which career path step they are taking at the time. The exit interview form asked individuals to report if they had completed training prior to exiting. Therefore, individuals could either report an exit at a graduation point (the completion of a training step) or an early exit prior to completion. Currently, the exit interview only asks a general exit-point question; in the future it might be helpful to break this down into specific curriculums taken or credentials achieved by cohort members.

Table 10. Enrollment, Exit Interview Completion, and Exit Point, by Cohort

	Nursing							Health Information Technology				Medical Assisting
	C1	C2	C3	C4	C5	C6	C7	C4	C5	C6	C7	C6
Enrolled in CareerAdvance®	15	10	15	15	13	18	15	15	12	6	5	6
Total Number of Exit Interviews	3	5	5	7	7	11	0	10	5	0	1	1
Interview Completed By Participants	2	4	5	5	4	9	N/A	8	4	N/A	1	1
Interview Completed By Career Coach	1	1	0	2	3	2	N/A	2	1	N/A	0	0
Exit Point Reported as at Graduation ^a	3	2	4	6	3	7	N/A	3	2	N/A	0	0

^a Exit points were reported on the exit interview form. Individuals either exit at a graduation point (the completion of a training step) or exit early. Two interviews were missing exit-point data.
 Source: CareerAdvance® exit interview data available through August 2013.

Exit Reasons

In order to develop a better understanding of the program results, CareerAdvance® staff have also used the exit interview to investigate what causes participants to leave the program. On the interview form, participants were asked to rank the top three reasons for their exit (the complete list of reasons is shown in the box below). Where rankings were not available and relative importance could not be determined,¹⁰ responses were still used to calculate the most frequently reported reasons for exit.

Exit Interview List of Possible Reasons for Exit	
Employment	Reserve Military called to active duty
Moved out of program area	Relocated to mandated residential program
Health care occupation is "not for me"	Other: Terminated by school
Did not like the program	Other: Terminated by CareerAdvance
Participant dropped out/unable to locate	Other: Child non-attendance
Institutionalized	Other: Academic reasons
Participant health, mental health, or medical issue	Other: Financial reasons
Deceased	Other: Conflicts about program with family/significant other
Family Care	Other: Demands on time and resources

¹⁰ In some instances, reasons were selected by check mark rather than ranked.

Table 11 presents a summary of exit reasons across all cohorts. Employment is the most frequently reported reason across all exiters. For participants whose exit point was at graduation, half ranked employment as the primary or secondary reason for their exit. To some extent, this reflects the career-oriented nature of the program.

Table 11. Reasons for Exit from CareerAdvance®, by Exit Point

	Exit Point at Graduation^a N=30	Early Exit N=23
Most Reported Reason	Employment (18)	Academic Reasons (12)
Ranked Reasons		
Primary	Employment (10)	Academic Reasons (4)
Secondary	Employment (5) Family Care (5)	Demands on time and resources (6)
Tertiary	Demands on time and resources (5)	Family Care (5)

Note: The number in parentheses indicates the number of exiters who selected that reason/ranking.

Source: CareerAdvance® exit interview data available through August 2013.

The majority of exiters reported academic reasons as at least one of the causes in their decision to leave CareerAdvance®. For participants who exited prior to a graduation point, academic reasons were cited as the primary reason for exit. In fact, the application requirements and selection standards for CareerAdvance® have gradually evolved for later cohorts, as program staff started to realize that individuals who demonstrated stronger academic abilities before enrollment are much more likely to succeed in advanced career training programs. Not surprisingly, the exit interview confirmed this idea. When a sizable number of participants leave a program due to academic reasons, it is important to continue putting emphasis on candidates’ basic academic skills and their completion of preliminary testing—requirements that can ultimately promote participants’ advancement in both training and future employment, preferably in the healthcare field.

Across all exit interview participants, external stressors like family care and demands on time and resources also influenced exit decisions. Thus, the exit interview offers additional insights on the significance of helping participants cope with external pressure during the course of their study. While the CareerAdvance® program provides incentives and childcare assistance for program participants, the support might still be inadequate for those who have

extremely limited resources, which often coincides with increased family responsibilities.

Exits for Employment

In the exit interview, *CareerAdvance*® participants also provided additional information on their post-program employment status by answering a few specific job-related questions. Table 12 shows some basic indicators of employment for both graduates and early-exiting individuals. Overall, 70% of those whose exit points were at graduation reported to have found employment, while less than 4 in 10 “early exiters” had obtained employment. On average, program exiters were engaged in regular employment at less than a full-time basis with a median wage rate around \$11 per hour. Both groups of exiters overwhelmingly secured employment in the healthcare field, and the majority of those entered into a healthcare occupation. It is worth mentioning that even those who exited *CareerAdvance*® before training completion largely ended up joining the healthcare labor market. The employment information indicates that during their course of study, program participants gained familiarity with the healthcare industry. Program staff including both instructors and Career Coaches might have contributed to this by building connections to employers through clinical training and other activities. Starting in August 2013, the exit interview form added an additional question about job title, which will serve as a better indicator for measuring the training-relatedness of employment for future cohorts.

Table 12. Employment Information at Exit from *CareerAdvance*®, by Exit Point

	Exit Point at Graduation N=30	Early Exit N=23
Number Employed at Exit	21	9
Median Starting Hourly Wage	\$11.00	\$10.8
Average Weekly Hours	29	35.8
Number with Health Insurance Available through Employer	8	4
Number in Healthcare Occupation	17	7
Type of Employer		
Healthcare Employer	16	9
Tribal Organization	2	0
Other	3	0

Source: *CareerAdvance*® exit interview data available through August 2013.

Participant Comments

Participants’ comments and feedback are also gathered as part of the exit interview. In this part, exiters were invited to rate the supportiveness of each program element, to which a numerical value (a Likert scale) of 1 to 5 was assigned. Table 13 shows a summary of all responses. For almost every program element, the overwhelming majority of participants gave the highest rating, which indicates very high support.

Table 13. Exiter Ratings of CareerAdvance® Program Elements

	Extremely Supportive (5)	Mostly Supportive (4)	Moderately Supportive (3)	Somewhat Supportive (2)	Not At All Supportive (1)
Financial Support (tuition, fees, books, etc.)	92.5%	5%		2.5%	
Financial Bonuses and Performance Incentives	75%	7.5%	10%	7.5%	
Emergency Financial Resources	82.4%	8.8%	2.9%	2.9%	2.9%
Peer Support (e.g. partner meetings)	64.1%	15.4%	12.8%	7.7%	
Career Coaches	95%		5%		
Proximity to Child's CAP Education Center	69.2%	7.7%	15.4%	5.1%	2.6%
Access to Quality Childcare Arrangements	82.1%	10.3%		5.1%	2.6%
Program's Focus on the Healthcare Field	85%	10%	2.5%	2.5%	
Ability to Stop and Restart the Program	86.8%	10.5%	2.6%		
Offering of GED/Adult Education/ESL Classes	71%	16.1%	6.5%		6.5%

Note: The number in parentheses indicates the Likert-scale ranking.
 Source: CareerAdvance® exit interview data

To supplement the ratings and capture participants’ perspectives on a broader range of subjects, the exit interview also asked open-ended questions on a variety of topics, including participants’ most and least favorite things about the CareerAdvance® program; CareerAdvance® staff, operations, and requirements; and program partners (such as TCC and Tulsa Tech). Many participants identified one of the program components from Table 13 as their favorite thing about CareerAdvance®. As one mother put it:

"I loved the program. It worked perfectly with my kids' schedule with school. I received all the training I needed to pursue a job in the healthcare field. Incentives helped each month with bills. I would have never been able to go to school if it wasn't for CareerAdvance®."

Almost all participants enjoyed the support from program staff and appreciated their help. Feedback indicates that participants largely welcomed partner meetings, a unique component of CareerAdvance®. However, some comments indicated a preference for more informal arrangements outside of the classroom at a convenient location for all. Several exiters mentioned the supportive atmosphere and shared goals within their cohort:

"What worked for me is the other parents who had the same goal and supported each other."

"I loved that our classes became close like a family and helped each other to succeed."

Aside from the positive feedback about CareerAdvance®, participants did raise some concerns about the program. A few students suggested that CareerAdvance® should provide counseling services to help students cope with emotional pressure or offer a class about stress management. Exiters from early cohorts reported that they wanted to be able to skip LPN and move directly onto the RN program after completing CNA.¹¹ Some found it difficult to rearrange their schedule based on class meetings.

Participants also pointed out that some instructors could have been better prepared for the class. They wished that instructors had been more organized and adopted a more individualized approach toward each student. In terms of overall academic experience, one constructive suggestion raised was for participants at TCC to be able to see their tests¹² and understand *"why the grade reflects what was missed on the tests."*

Despite some of the problems, participants did highlight their positive experience with CareerAdvance® overall. Since its initial inception, the program has always valued participants' feedback. The exit interview has provided another venue for cohort members to communicate their experience and put forward suggestions for continuous improvement.

¹¹ It is worth noting that a few issues brought up by earlier cohort participants have already been resolved. For example, program staff developed a four-month Patient Care Technician (PCT) course at TCC as an alternative pathway for individuals who were not admitted by the LPN program.

¹² TCC nursing division policy appears to bar students from viewing their graded exams.

SUMMARY AND NEXT STEPS

The implementation of the *CareerAdvance*[®] program has been defined by its orientation towards continuous improvement. From the outset, *CareerAdvance*[®] was designed to incorporate components that were bolstered by rigorous evidence. The program is also grounded in a Theory of Action/Logic Model that explicitly lays out how each component is expected to function and the outcomes/impacts that should result from the effort. The program model, its pathways, and other components have all been refined over time to address participant concerns, barriers to progress, and other factors. *CareerAdvance*[®] itself is very much a work in progress, as few cohorts have experienced exactly the same program.

The study of the implementation and expansion of the *CareerAdvance*[®] program has highlighted multiple strengths that appear to support participant progress, as well as a few challenges that still need to be addressed. Key program strengths include:

- *CareerAdvance*[®] has great flexibility for allowing students to decide how much training they want. Students can stop when they like and still have skills and credentials that will help them obtain employment in the stable, growing field of healthcare.
- *CareerAdvance*[®] has been modified based on feedback from, and the performance of, actual participants. This process makes the program very consumer-focused.
- *CareerAdvance*[®] has been willing to expand training opportunities to include options for those who do not desire to work in a clinical setting and those who prefer shorter-term training options that allow them to get back into the labor market quickly.
- *CareerAdvance*[®] supports students as a team through cohort-based activities and individually, which helps each person advance toward their education and employment goals. This support is greatly appreciated by participants as evidenced in focus groups and interviews.
- *CareerAdvance*[®] has shown a genuine interest in ensuring that students are successful in their schooling by developing remedial education programs, tutoring, and summer skill enhancement activities to help individuals prepare for the rigors of college-level coursework. The program has also raised enrollment standards to ensure that those who are accepted have adequate skills to succeed in the classroom.

Remaining challenges that could be addressed by *CareerAdvance*[®] include:

- Because the program is being continuously improved, every cohort is effectively a pilot project. This means that every group of students is experiencing a new program and that staff are constantly having to adjust their approach. *CareerAdvance*[®] should use its last two years of HPOG funding to work towards a stable program model.
- *CareerAdvance*[®] has yet to establish the strong relationships with employers and the Tulsa healthcare industry that would help to guide program development and refinement and lead to stronger employment outcomes for participants. More input from employers would help the program better shape its offerings to match the needs of the labor market.
- Early data shows that as students move through the nursing pathway, the share of participants who acquire a credential after training declines. *CareerAdvance*[®] recently changed its Shared Expectations Participation Agreement to explicitly state that participants are expected to attempt certification exams within one semester of completing training. In the next report, researchers will explore whether or not this change makes a difference in credential rates.

CAP Tulsa can rely on HPOG to support *CareerAdvance*[®] operations for two more years. After that, it will be important for CAP Tulsa and its partners to develop other resources— hopefully regular funding sources in the community as part of ongoing programs for parents and children—to support it. Part of the pitch for sustaining the *CareerAdvance*[®] program can and should be drawn from the growing body of evidence that the program design works for parents of young children.

In the next implementation study report, researchers will further examine exit interview data and continue to document program modifications and participant progress over time. While the CAP Family Life Study is not yet at a point where it can provide rigorous impact estimates for parents and their children, the early results from staff/partner interviews and focus groups with Career Coaches and participants suggest that the components are working as expected. It is hoped that the impacts will follow. As researchers in the CAP Family Life Study begin to examine participant outcomes and impacts, the context of the participant experience will be critical to understanding and reporting findings.