# Eldercare Careers Project at Union County College Final Report

Prepared for the International Longevity Center
by
Paul Jurmo, Ed.D.
Dean, Economic and Continuing Education
Union County College
12-24 West Jersey Street
Elizabeth, NJ 07202

December 6, 2009

### **BACKGROUND**

In 2008, Union County College's Division of Economic Development and Continuing Education was awarded an Eldercare grant from the Met Life Foundation. This grant was part of a national eldercare careers project managed by the International Longevity Center.

UCC agreed to pilot curricula designed to help lower-skilled adults move into entry-level careers as home health aides and possibly other similar patient-care careers. Summarized below are:

- Project activities;
- Accomplishments and lessons learned;
- How we might continue this work in the future.

Special thanks are given to the project team:

- Curriculum Developer and Instructor Joanna Miles (who developed the curriculum and taught the two initial rounds of classes);
- UCC Retail Skills Center Employer Liaison Vanessa Torres (who coordinated outreach, information sessions, student assessments, communications with employers, reporting, and other administrative tasks for this project);
- Instructor Amy Dixon (who developed the "Introduction to Eldercare" PowerPoint and taught in round 2 and 3) and Instructor Aileen Vega (who brought special expertise in eldercare and career planning to the program and taught in round 3);
- UCC Retail Skills Center staff Joe Oliver and Anjuli Fernandez who provided administrative supports;
- Industry-Business Institute staff Eileen Mallor and Denise Petrosky (IBI is the UCC Department which administers the Retail Skills Center);
- The UCC Center for Economic and Workforce Development and Jefferson Park Ministries for helping us recruit students;
- UCC gerontology specialist Toby Marx, Nursing Professors Marianne Schubert and Linda McClung, the nursing students who made presentations to our students, and Dr. Patricia Castaldi (director of UCC's LPN program);

- the eldercare employers who gave us input into the curriculum and who provided further education and employment opportunities to our graduates;
- the MetLife Foundation and the International Longevity Center for the funding that supported this project and for their willingness to allow us to be creative;
- The Elizabeth Development Company for funding some of the pilot classes and to the Glimcher Corporation for continuing to provide us with free classroom and office space at the Jersey Gardens Mall Retail Skills Center;
- the wonderful students who participated so actively in our classes and allowed us to learn from them.

### **PROJECT ACTIVITIES**

# **Initial program planning:** Late 2008 – Spring 2009

- In this project, UCC had originally hoped to partner with a home health care company. In late 2008, UCC's Dean of Economic Development and Continuing Education notified the intended home health care partner that UCC had been awarded the grant. In early 2009, we learned that the company would not be able to participate in the pilot program, so the Dean began to develop alternative plans.
- The Dean met with a UCC gerontology specialist who clarified types of employment opportunities in the eldercare field, other local agencies involved in eldercare, and employers who might be willing to participate in the project.
- The Dean recruited a UCC ESL specialist to develop the initial pilot curriculum. We decided to focus initially on developing an "ESL for Healthcare Workers" curriculum because of the large number of immigrants who dominate entry-level eldercare positions in Union County and because UCC has extensive existing connections to the immigrant community through its successful ESL programs.
- The Dean and Curriculum Developer framed out the content and guidelines for the initial curriculum by:
  - Reviewing existing similar curricula<sup>1</sup> and web sites;
  - o Developing a grid which outlined the course content. (See sample below.)

Equipped for the Future (EFF) Skills

	Speaking	Listening	Reading	Writing	Math	Use Technology	Other
PHYSICAL NEEDS						recumology	
Eating/ Feeding							

<sup>&</sup>lt;sup>1</sup> The following curricula were particularly helpful: (a) The Adult Basic Education *Preparing for Careers in Health Care* (a curriculum based on the national Equipped for the Future basic skills standards which was developed by the Center for Literacy Studies at the University of Tennessee at Knoxville) and (b) the *Nursing Assistant Care* textbook by Alvare (Hartman Publishing, 2005) which provided official care guidelines. The *Top 100 Health Care Careers* (Jist Publishing, 2005) also provided useful information about various entry-level healthcare careers.

Dressing/				
Grooming				
Bathing/				
Hygiene				
Transporting				
Safety/				
Emergencies				
EMOTIONAL/				
SPIRITUAL				
NEEDS				
Emotional				
health				
Entertainment				
OTHER				
NEEDS				
Financial				
Legal				

- The Curriculum Developer then "filled in the blanks" of the grid with scenarios in which a caregiver has to apply a particular basic skill (e.g., speaking, listening) to the performing of a particular eldercare task (e.g., grooming a patient, feeding a patient). This framework then became the contents of the course, and the Curriculum Developer develop lesson plans in which course participants were engaged in practicing those particular basic skills as they would use them in eldercare situations. Activities included role-plays, problem-solving discussions, searching for information about a topic (e.g., dietary needs of the elderly) on selected web sites, and preparation of PowerPoint presentations in which students reported information they researched on the Internet. This curriculum was geared toward advanced-level ESL learners and required access to a computer-equipped classroom with Internet connections.
- The Dean negotiated with Jefferson Park Ministries (JPM), a local community-based organization which serves the Haitian community in the City of Elizabeth. Because many Haitians are interested in eldercare jobs, we agreed to set up our first pilot course at this organization. UCC staff set up a small computer lab (using a wireless modem paid for by the Met Life grant and five new computers donated by IBM). JPM staff recruited students for the course, and the first round of classes (a six-week program) got underway in May.

# **Initial Pilot Courses:** Jefferson Park Ministries, May – June 2009

The Curriculum Developer piloted an initial six-week round of classes at JPM. Eleven adults participated in these classes, held in JPM's classroom which was equipped with five new Internet-connected computers. Topics included patient/caregiver communication, nutrition and feeding, giving instructions to patients, the body, the home, home health aide duties, resume writing, health careers and basic computer skills.

While the classes were well received, with good attendance and a positive classroom atmosphere, these initial demonstrated the need for learners to be more carefully selected. Too many of the JPM learners lacked adequate English-language skills and an adequate basic education (e.g., familiarity with study skills and taking of multiple-choice quizzes) to benefit from the pilot curriculum, which was designed for more-advanced-level English language learners. As a result, not all of the original lesson content was used and some new lessons were created in response to learner interests and abilities while adhering to the original framework as much as possible.

# The Curriculum Developer/Instructor reported:

Although the lessons were modified (to be relevant to lower-level) English language learners, some of the activities would also be suitable for an advanced level class. For example, in the nutrition segment of the course, the students watched a short video of a patient being fed by a nursing aide in accordance with nursing guidelines. Together, the students talked about and identified each step of the procedure orally, and written support was provided (the instructor wrote the student responses on the board). In an advanced level class, groups of students could take one video each, discuss, identify and write the various steps before creating and presenting a PowerPoint presentation of the procedures to the rest of the group. Although both activities introduce one or more procedures, the pilot session content was limited by the mismatch of the learners' levels to the course . . . (This mismatch) required lessons to be adapted to provide more support to the English language learners needs while also addressing healthcare occupational topics.

## Second Round of Pilot Courses: UCC Retail Skills Center, July 2009

- After taking an additional few weeks to revise the curriculum based on the experience
  at JPM, the Curriculum Developer was joined by a second Instructor to teach two
  new classes during the month of July. These classes were expanded to 48 hours (4
  days per week, 3 hours per day for 4 weeks) and held at UCC's Retail Skills Center, a
  training center located at Jersey Gardens Mall.
- To ensure that participants had adequate levels of English, basic skills, and understanding of and commitment to the purposes of the program, UCC staff made special efforts to recruit a strong pool of students. We did this by:
  - Reaching out to local residents who had come to UCC asking for healthcarerelated training;
  - Getting the word out to local residents through our existing network of ESL students;
  - O Holding an orientation session in which candidates learned about the program and took a simple written assessment. (The assessment consisted of simple questions which the participants wrote responses to. This gave us concrete evidence of the participants' English language skills and of their understanding of the purpose of the program.) Applicants also met face-to-

face with the Program Coordinator who confirmed – in English – that the applicants had an adequate grasp of English and of the course's purposes and requirements.

- This strengthened student selection process proved to be a good idea, as the 17 students in the second round of classes (one held in the morning, one in the evening) were much more ready to participate in class activities. The new participants had stronger levels of English skills, knew what to expect of the program, and were able to engage actively in classroom activities. These learners were all Spanish-speaking adults, had higher levels of English and in general higher levels of education than those who participated in the first set of pilot classes.
- During the second round, we also made new efforts to reach out to employers to get their input into the course content, clarify their workforce needs, and establish relationships and mechanisms which could lead to their employing our program graduates. In July we met with representatives of a nursing home and two home health care companies. We also had phone conversations and email exchanges with a hospital, a hospice, two nursing homes, a home care company, two adult day centers, and other healthcare employers. All of these employers gave us positive feedback about the purpose and content of our pilot courses and stated their interest in hiring our graduates.

# <u>Third Round of Pilot Classes</u>: UCC Retail Skills Center and UCC Plainfield Campus, September – November 2009

In the months of September to mid-November, UCC staff:

- Expanded the expertise in our Instructor team by hiring a new instructor who had experience in the home care industry and in career planning. The previous two Instructors had special expertise in teaching English to English language learners and in the use of innovative adult education practices such as the Equipped for the Future standards and the uses of educational technologies.
- Recruited and selected participants (almost all Spanish speakers) from the cities of Elizabeth and Plainfield. The Plainfield students were primarily students who had already participated in UCC non-credit ESL programs and were comfortable with the building and instructor and what she proposed to teach.
- Conducted two more pilot courses: We piloted two more classes in October and November, one at UCC's Retail Skills Center (at the Jersey Gardens Mall in Elizabeth) and one at the UCC campus in Plainfield.
- Developed and piloted an "Introduction to Eldercare Careers" Workshop: In September, one of our Instructors designed an "Introduction to Eldercare" workshop featuring a PowerPoint presentation. This workshop was designed to be used (a) in the information workshops in which potential participants learn about eldercare careers and decide whether to register for our "ESL for Healthcare Workers" course, (b) in the "ESL for Healthcare Workers" course itself, and (c) in local adult education and career centers as a tool to help participants develop awareness about healthcare career options. The PowerPoint summarizes the job

- opportunities available in the eldercare field and what job seekers can do to pursue eldercare training and jobs.
- Placed successful graduates of UCC classes into classes at a local home health aide company: UCC had originally hoped to work with a home health aide company to place graduates of our "ESL for Healthcare Workers" course into home health aide classes and jobs at that company. Though that original partnership didn't materialize, we nonetheless did follow through on that idea and created a new partnership with an alternative home care company. We identified strong candidates from the second and third rounds of pilot classes and placed them in home health aide classes run by that company. The success rates (for completing the classes, passing the state licensing exam, and getting jobs in that company) have been very high. The home care company has asked us to continue sending them candidates and states that our graduates (whom we carefully select based on a number of criteria and then trained in relevant skills) were "dream" candidates for the company.
- Further revised "ESL for Healthcare Workers" curriculum: Based on our experience in the three rounds of pilot classes, we continually revised our curricula. Our instructors have identified which features of the curriculum worked particularly well (e.g., activities about "empathy," the use of Internet resources and PowerPoint presentations) and some new topics and activities (e.g., the "Introduction to Eldercare" PowerPoint, discussions of health insurance issues) to add to the curriculum. We also began working with the UCC nursing department to bring nursing students and faculty into the eldercare classes as resource persons.

## ACCOMPLISHMENTS AND LESSONS LEARNED

### **Numbers served**

A total of 85 learners participated in a total of 258 instructional hours in the three rounds of pilot courses:

Round	Dates	Number of instructional hours per class	Location	Enrollment	Number who went on to further HHA training
1	05/04/09 – 06/18/09	30	Jefferson Park Ministries	12	0
2	07/06/09 – 07/30/09	48	Retail Skills Center (Elizabeth) Morning class	15	8
2	07/06/09 – 07/30/09	48	Retail Skills Center (Elizabeth) Afternoon class	9	3
3	10/05/09 -	45	Retail Skills Center	16	12

	11/04/09		(Elizabeth) <i>Morning class</i>		
3	10/05/09 -	45	Retail Skills Center	12	8
	11/04/09		(Elizabeth) Afternoon class		
3	10/02/09 -	42	UCC Campus in Plainfield	21	0
	11/13/09		_		
		Total: 258		Total: 85	31

# **Impacts on learners**

Virtually all learners achieved varying degrees of the following:

- <u>Improved understanding of career and training options</u> in the eldercare and healthcare fields:
- Improved understanding of basic eldercare procedures;
- Improved understanding of needs of eldercare patients;
- <u>Improved "EFF Skills"</u> (i.e., basic skills defined by the National Institute for Literacy in its Equipped for the Future initiative) needed for work in eldercare positions (These skills include speaking, listening, problem-solving, teamwork, research, use of technical documents, and others.);
- <u>Increased comfort using basic Microsoft Office software</u> (e.g., for Internet searchers, PowerPoint presentations, saving of documents, e-mail, etc.);
- Increased comfort in re-connecting to education (e.g., getting their GEDs);
- <u>Increased interest in continuing their education and exploring various career options</u> in healthcare (e.g., adult day care, medical office) and other fields (e.g., childcare);
- <u>Increased familiarity with on-line resources</u> they can use for career and personal development;
- <u>Improved understanding of health insurance</u> concepts and procedures.

31 participants went on to participate in free home health aide classes at Dignified Home Care (a company in Elizabeth). Of that number, 11 completed the 90- hour Dignified home health aide class, 11 passed the state home health aide certification test, and 11 got a job at Dignified. (At this writing, 20 students are taking the HHA course and will be done in January 2010.)

#### Infrastructure developed

This relatively modest project has had tremendous results for UCC's noncredit career-related services. The project served as a "learning lab" where our staff developed:

### ■ a career pathway model/template

The project gave us resources to pull together a creative, hard-working team which wanted to design and field test a model career pathway program for entry-level workers in a growing eldercare field. We wanted to draw on our prior experience and on research, and we knew we had only limited time to do this. We

quickly went to work to develop a curriculum and put other procedures in place. We continuously improved the curriculum and procedures over three rounds of classes and created a model (template) of a career pathway program that we not only now feel comfortable using for healthcare-related course but for other career pathway programs, as well. (In fact, we are now using this model in the programs we are running for entry-level workers in the transportation/logistics/ distribution industry. We are also exploring how to adapt this model to a "green jobs" initiative.) The model consists of these components:

- careful recruitment and selection of participants: After the first round of classes, we quickly concluded that careful selection of participants would be vital. Students need to have a solid understanding of and commitment to the program goals and requirements (of time, work, etc.) and the right level of basic skills (in this case, participants needed an advanced level of English fluency). We ensured that we got the right mix of students by:
  - <u>publicizing the program correctly</u> (by stating in marketing materials and in information sessions both the benefits and requirements of the course);
  - conducting a simple written and oral assessment to determine the participant's understanding of the course content and requirements, asking them to sign a commitment statement, and having the ability to reject some candidates if they did not demonstrate the appropriate commitment and skill level.
- <u>a high-quality curriculum</u>: We drew on considerable prior experience and research in the work-related adult basic education fields to develop a curriculum model with these features:
  - practice in the application of Equipped for the Future basic skills as they are used in entry-level eldercare jobs;
  - <u>practice in other useful skills (e.g.</u>, study skills, use of basic computer software, test-taking skills) learners need for further education and jobs;
  - use of engaging, interactive instructional methods.
- o <u>well-prepared and –supported instructors</u>: This included some guest speakers from the healthcare industry.
- well-equipped facilities: In all cases, classes had access to a comfortable classroom and a computer lab with Internet access.
- mechanisms for using assessment and certificates to monitor learner progress and motivate focused participation.
- connection to employers: We involved healthcare employers in these ways:
  - We interviewed them to get their input into the content of the curriculum.
  - A number of eldercare and healthcare representatives visited the classes as guest speakers.
  - We established an agreement with one home care company to enroll selected graduates from our program into the company's

home health aide classes. Those who pass the state licensing exam were then guaranteed a job with the company. Some students will also be attending home health aide classes offered by the Union County Division on Aging.

- <u>healthcare curricula</u>: We developed a 42-hour "ESL for Healthcare Curriculum" and an "Introduction to Eldercare" PowerPoint presentation.
- <u>well-prepared staff</u>: We now have a solid team of staff and consultants able to carry out this program in the future.
- <u>relationships with potential students</u>: We have now established a reputation within local immigrant communities that we are able to provide these kinds of courses. Many of the graduates of our pilot classes have expressed strong interest in continuing these kinds of healthcare related classes. Some have moved into other occupational classes that we began recently.
- <u>relationships with potential partner organizations</u>: We have now established relationships with some local community based organizations which might in the future provide us with students and instructional facilities.
- <u>relationships with employers</u>: We have established relationships with a number of employers who are willing to consider our program graduates for employment and otherwise work with us in the future.
- <u>relationships with funders</u>: We have established a relationship with at least one funding agency (i.e., the Elizabeth Development Company) which might be willing to continue to help us secure funds for future such programs. We are now exploring further funding options from other sources, as well.
- expanded industry focus for UCC's Retail Skills Center: This program has helped the UCC Retail Skills Center to build on its prior experience training entry-level workers for retail careers and to expand its work into other industries. This was a goal of the Center for this year, and this project helped us meet that goal.

### HOW WE MIGHT CONTINUE THIS WORK IN THE FUTURE

Because of the positive response from program participants, our own staff and instructors, a key partner (the Elizabeth Development Company), several eldercare companies with whom we worked, a partner community based organization, and faculty of the UCC nursing school, we hope to continue implementing and improving this "ESL for Healthcare" program and other healthcare-related programs. (We have recently added two eldercare classes to the 2010 calendar for March.)

To do so, we are considering taking the following steps:

- <u>Develop an Eldercare Careers Web site</u>: Develop web site where information and links developed in this pilot project can be made available to (a) those interested in pursuing eldercare careers and (b) employment specialists and adult educators who work with job seekers.
- Eldercare job fair: Hold a "job fair" in early 2010, to help our program participants meet with employers who are looking for well-prepared job candidates.
- Have our the staff and instructors who worked on this project further review the results of the program (as summarized above) and the curricula developed, to identify areas that might be strengthened and expanded on in the future. We need to critically question what worked and what didn't work well and be willing to change. For example:
  - O How can we build in more practice around particular English language needs (e.g., vocabulary, grammar, spelling, pronunciation)? Might this be done in class, in various self-study activities (using specially-created podcasts or web sites, or by using existing web sites, audio-cassettes, computer software)? Might we set up extra conversation groups with trained professionals or volunteers, to give participants an opportunity to continue working on their English outside class?
  - O While it was convenient to recruit students directly from other existing ESL classes (because they knew and liked their instructor and her teaching style), those students might have not been so motivated to continue pursuing education and work in eldercare after the class because they knew they could go back to a free ESL class after the eldercare class was completed.
  - O How can we more systematically build meaningful and appropriate assessments (e.g., quizzes, sample work, teacher observation of student performance, etc. organized into a portfolio) and certification into this program, to help students stay focused on achieving outcomes that mean something when they seek a healthcare related job? And what kind of course evaluation activities should we implement (to gauge what we are doing well and how to improve such programs in the future)?
  - We should explore how a student who gets a job as a home health aide might continue getting further ESL or other training once she/he is employed.
  - O How can we better work with UCC's nursing and allied health programs (e.g., to have faculty and students come in to make presentations to our students)?

- O How can we build more test-taking exercises into the curriculum, to prepare them to move into higher level training where test taking is required?
- Besides classes leading to entry-level home health aide jobs, what other kinds of healthcare programs might we offer?
- Might we borrow from the courses that we are now offering related to the transportation/logistics/distribution industry and offer an expanded series of courses including:
  - "Introduction to Eldercare Careers" PowerPoint (already completed)
  - "Healthcare/Eldercare Career Planning" course (20 hours),
  - "ESL for Eldercare/Healthcare" course (already completed, possibly re-organized into two 24-hour courses),
  - other specialized workshops and courses:
    - Financial Literacy for Home Health Aides,
    - Tips for Health Living (nutrition, exercise, stress management, etc.)
    - Emergency Medical Technician
    - Medical secretary
    - Health Care Informatics
    - Medical Terminology 101
    - Recreation Personnel at an Adult Day Care Center
    - Healthcare Administration: Medical Records
    - Aging and Disability: Needs and Services
    - Hospice and Palliative Care
    - Medical Transcript
- How can we be sure to secure appropriate classroom space and get necessary computer access codes and other logistical "basics" in an efficient way?
- Train more UCC staff and instructors in this model. They might thereby (a) adapt piece of this curriculum in their adult basic education and workforce development programs, (b) create similar programs for other industries, and (c) create transition procedures to move their students into this program and vice versa.
- Reach out to the partners with whom we have worked on this project (i.e., program participants, a key partner[the Elizabeth Development Company], several eldercare companies with whom we worked, a partner community based organization, and faculty of the UCC nursing school) to ask them for suggestions on (a) how the current program might be strengthened; (b) additional healthcare-

related programs we might offer, and (c) whether and how they might work with us on such programs.

- Reach out to other funders to ask them to support continuation of the current program and/or creation of new healthcare-related programs.
- <u>Follow up with the pilot students</u> during the coming year to determine how the program impacted them over time.

<u>For more information</u>, please contact Dr. Paul Jurmo (<u>Jurmo@ucc.edu</u>, 908-659-5103) or Vanessa Torres (<u>vtorres@ucc.edu</u>).