

OREGON COMMUNITY COLLEGES WORKFORCE DEVELOPMENT

ADVANCING CAREER PATHWAYS 2014

CASE STUDY: ROGUE COMMUNITY COLLEGE

Basic Healthcare Certificate: A Foundational Milestone toward an Allied Health Career

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BACKGROUND & ORGANIZATIONAL CONTEXT

Pathways

Oregon Career Pathways Initiative launched in 2004 with initial investments at five colleges, expanded to eleven colleges in 2006, and by 2007 the state had scaled this work in all 17 community colleges. Funding was provided through the Oregon Department of Community Colleges and Workforce Development (CCWD) through WIA Incentive Grants and Strategic Reserve Funds. The guiding vision of the Career Pathways Initiative is to ensure that Oregonians can obtain the skills to enter and advance in demand occupations. Its two overarching goals are:

- To increase the number of Oregonians with certificates, credentials, and degrees in demand occupations, and
- To articulate and ease student transitions across the education continuum from high school to community college, from pre-college (ABE/GED/ESL) to credit postsecondary, and from community college to university or a job.
(Oregon Community College Workforce Development, 2013)

Community colleges have invested in and leveraged Career Pathways locally through federal Carl D. Perkins funds, community college general fund, other foundation and federal grants, and Workforce Investment Act funds.

The Pathways Initiative addresses a long standing tension between job seekers needing to up-skill or change careers quickly and postsecondary education's traditional sequential structure which challenged the timely turnaround needs of the workforce. Community college degrees notoriously take years to complete due to a common need to build academic skills to become program-ready, therefore stalling their entry into a hungry labor market. It was the perception of workforce agencies that students who enter Career Technical Education (CTE) programs take several years to complete a degree or certificate before they can go out and work in their field. This is where career pathways offered an innovation within the educational system and in service to regional economic development- to provide education that quickly jumpstarts a student into a skilled worker getting them into an entry-level job in their chosen field. As a higher percentage of community college students both work and go to school, short term "stackable" certificates offer an approach that can meet multiple needs for both students/workers and employers.

The foundation of Career Pathways involved the development of Career Pathways Certificates of Completion (CPCC) which is the key innovation in this educational framework. CPCC is the abbreviation in statute and in the Oregon Community College Handbook. With a focus on Career Technical Education (CTE) CPCC's were designed to address employer identified skill sets that would ensure entry level and job advancement opportunities. CPCC's are stackable certificates within CTE Associate of Applied Science AAS degrees. The CPCC's have to be wholly contained in an already existing Associate of Applied Science (AAS) degree at the college. While community college's CTE programs can be determined by local labor market needs, proposing a new program has to be approved internally by the college first

and then by the state, which can take up to, or longer than, one year. By restricting course inclusion in CPCC's to those already in a state approved degree, the approval process streamlined to a 45 day state program approval process focused on essential elements illustrated on a career pathways roadmap recognizing that the AAS program had already been approved and the certificate is a subset of a degree. CPCC courses already being contained in an AAS degree also ensured that there would be no duplication of effort and once a CPCC was completed the corresponding credits/courses could be applied to the next certificate or degree in the program, thus the stackable credential concept was embedded in career pathways certificates.

Carl Perkins IV

During the same period that Oregon's Career Pathways initiative was starting to scale across the state, Carl Perkins IV legislation (2006) was enacted requiring a stronger partnership between secondary and post-secondary CTE programs. Perkins IV emphasized the importance of alignment between secondary and postsecondary CTE programs so that young people can move efficiently and quickly to and through postsecondary education and training systems. (Jobs for the Future, 2014) This reauthorization required that Programs of Study (POS) be developed which linked CTE and academic skills courses with an articulated alignment between high school and community college. These educational partners worked closely together to develop POS in many CTE programs where there were high school courses which would serve as a pathway into college. This reorienting of Perkins was similar to the goals of Pathways and in many colleges the Pathways Coordinator/Director also served as the Perkins lead. Pathways Initiative also sought to create short term certificates that high school students could begin while still completing their high school diploma. Research on secondary to post-secondary transitions suggests that students are more likely to enroll in higher education if they have some college course work completed during high school. Therefore, in Oregon there was an integration of Career Pathways with Programs of Study early on due to the many common objectives and practices of each funded initiative. Creating short term Career Pathways Certificates at the community college level provided an opportunity for high schools to get their students started on a college certificate that could be completed shortly after high school. In fact, for high schools that aligned and articulated their CTE POS with colleges, some students could graduate with a college certificate in addition to their high school diploma.

Career Pathways Systems as defined by Jobs for the Future matches the Oregon Model to align and integrate academic and CTE coursework that is organized in stackable credentials that have been vetted and are recognized by local employers as having value in the labor market. (JFF 2014, pg. 2) The alignment within a Perkins-based Program of Study has strengthened the movement of high school students through postsecondary coursework which gives them college credits and an impetus to complete this first credential, either a Career Pathways Certificate of Completion (CPCC) or Less Than One Year Certificate (LTOY).

Integrated Model

The intersection between the Oregon Career Pathways Initiative their Program of Study directives illustrate a perfect blend when compared to the national frameworks for Programs of Study and Career Pathways Systems. Here are some natural examples of leverage between the **Six Key Elements for Career Pathways** and *Ten Essential Components of Programs of Study* (JFF, 2014, Table 1; pg. 11)

- 1. Building Cross-System Partnerships:** High schools and community colleges have worked closely as *partners* on accelerating the progression through a CPCC's in CTE programs through use of dual credit, *credit transfer agreements*, and college courses available on line or taken at the college with high school support of tuition, scholarships, scheduling, transportation and careful *guidance, counseling, and advising*.
- 2. Engaging employers,** identifying key industries, and aligning with industry needs: All college CTE programs have Employer Advisory Committees, with POS collaborations, these group meetings are now a blend of CC and HS teachers along with regional employers. These groups discuss *college and career readiness standards* as well as *technical skills assessments*.
- 3. Redesigning Programs:** There is greater influence in the high school and community college when designing new credentials and determining *course sequences* to maximize dual credit opportunities and *technical skills assessments* which in some cases means providing professional development/certification for high school teachers to expand their offerings and to share *teaching and learning strategies*.
- 4. Pursuing funding, sustainability, and scale in support of systems change:** There was a timely convergence of Pathways and Programs of study. Perkins *funds were leveraged* at the community colleges with state strategic funds for CTE program pathway development. *Oregon Strategic Funds invested millions of dollars into CTE program development* along with embedded student services beyond regional Perkins dollars. This created *sustainable CPCC's* and *rapidly scaled this effort* for credential enrollment starting in high school and completing during or shortly after high school diplomas with a natural progression to further certificates and degrees, including articulation into university. *Perkins and Career Pathways investments are a solid commitment to systems change*.

STACKABLE CREDENTIALS

Short-term certificates in Oregon's community colleges are Career & Technical Education (CTE) programs that prepare students for middle-skill occupations: jobs that require more than a high school diploma but less than a bachelor's degree. In Oregon there are two types of short-term certificates:

- **Career Pathway Certificates of Completion (CPCC) and Less Than One Year (LTOY) certificates.** Both are 12-44 credits and serve as intermediate steps toward an associate's degree. Short-term certificates are designed to provide completers with competencies to qualify for an entry-level job in the labor market and to accommodate the life situations of many students. (CCWD, 2013, pg.4)

The Oregon State Board of Education approved Career Pathway Certificates in July 2007. Since that time, more than 350 have been developed and are currently offered at all of Oregon's 17 community colleges. In addition, the colleges offer more than 100 LTOY programs. Short-term certificate programs average 22 credits. (CCWD, 2013 pg.4)

Initially, determining which career pathways to develop at each college was based on finding programs willing to cooperate because they had received employer feedback that there was either;

- labor market need for workers, or
- Programs experienced low numbers of students completing AAS degrees because they were getting jobs with the skills that they had obtained from the program.

Certificates initially were produced by early adopters and numbers grew through the diffusion of this innovation. Then with an advancing completion agenda, colleges were increasingly concerned about students completing certificates and degrees. Faculty reviewed common student exit points from their programs into jobs and then worked closely with their employer advisory boards to determine essential skills sets, including academic intelligence developed by general education courses such as math, writing, psychology and matched them with existing college/program courses. These were collaborative efforts to design CACC's as they were proposed, vetted, and then revised until programs, college, and employers agreed on learning outcomes.

The Basic Health care Certificate developed at Rogue Community College is one such example.

BASIC HEALTH CARE CERTIFICATE (BHC)

In spring 2008 the Oregon Department of Community Colleges and Workforce Development (CCWD) hosted a Healthcare Career Pathways Summit in Eugene Oregon with 40+ hospital & long term care employers participating as part of 17 teams led by community colleges. These summit teams, facilitated by community college Pathways leads, also included K-12, university, and workforce partners. Their charge was to explore and develop local solutions to health care workforce shortages that were predicted across Oregon.

Rogue Community College (RCC) assembled a 22 person health care advisory group before this summit (See Appendix A). There were two overriding concerns voiced at the initial meeting:

- 1) Lack of skilled entry level workers, and
- 2) Rate of young people entering health care field.

In this region there was only one of 14 high schools at the time that had a CTE program in health care. Even with Perkins IV funds there was no discussion of creating a new health care CTE program at any high school. Health care professionals discussed the many career paths that exist within their industry some of which don't necessarily require college certificates and degrees. They gave multiple examples of how a hospital or long term care facility can upgrade jobs of incumbent workers through internal training. The group expressed the basic skills needed for an entry level worker as primarily information

based; meaning could be learned in a class vs. skills based experience. They indicated that workers could receive skills based training once an employee.

The Basic Healthcare Career Pathways Certificate (referred to as BHC/Basic Healthcare Certificate) concept was produced out of a series of local and state meetings in spring 2008. As the regional health care advisory group discussed their repetitive concern over the lack of entry programs for healthcare, particularly for high school students locally, and the limited variety of allied health care training in the Rogue Valley. They were able to articulate and describe what skills and education they look for in entry level employees and elaborate on difficulties in hiring people who are work ready. As one solution, they hoped to entice more high school youth to consider health care. Knowing that acceptance into nursing programs is difficult; these employers want to help find other career paths and technical training for students. To promote their incumbent workers, healthcare administrators expressed a desire for flexible post-secondary training opportunities. As a result of these discussions, RCC Pathways applied and was funded by grant from CCWD to develop the Basic Healthcare Pathways Certificate concept. The deliverables included overall program outcomes, science and math advising guides for healthcare programs, labor market research, employer engagement, and online conversion/revision for five of the foundation courses, and new curriculum about health care careers.

STRATEGIES

The BHC was originally built into RCC's AAS in Computer Support Technician: Health Care Informatics Option. The Pathways office worked closely with the Computer Science department and their advisory board as well as the regional health care advisory group to select classes and make curriculum adjustments to the overall degree so that the BHC would have the breadth suggested by industry. Program Learning Outcomes were developed by a volunteer group of professionals (hospital and long term care human resources) and educators (nursing instructors and Area Health Education Consortium) who identified nine outcomes for the BHC.

- Communicate effectively with awareness and sensitivity to diverse populations and needs.
- Practice self-care in order to manage workplace stressors.
- Developed ability to make effective decisions in a complex and dynamic environment.
- Craft a professional style that integrates responsibility, accountability, respect, and teamwork.
- Foster and develop competency with regulations and language in healthcare systems.
- Sharpen self-confidence and diplomacy within a professional skills set in order to advocate for the patient.
- Excel at computer skills required for job performance.
- Match natural abilities and interests with attributes and requirements for success in healthcare careers in order to identify and pursue potential career pathways.

- Gain awareness of current issues and trends within the healthcare industry as well as the knowledge to locate current information concerning these topics.

This certificate focused on work readiness for a particular industry with an added emphasis on awareness and motivation to seek training and education for the versatile positions in health care. It was important to have students identify health care careers other than nursing, doctors, and dentistry. There was consensus that what the region needed were entry level workers with a knowledge base that would propel them through the career pathways available within the healthcare systems.

This health care advisory group also identified several key considerations for the design and implementation of the Basic Healthcare Certificate (BHC) such as:

- program structure,
- course delivery schedule,
- professional development for incumbent workers,
- student support services,
- tuition and instructional costs,
- recruitment,
- dual credit integration with high schools, and
- asynchronous delivery.

Working within the confines of the instructional system for credit based courses, online efficacy for certain topics, and maximizing dual credit opportunities with high schools, the Basic Healthcare Certificate (BHC) was proposed and approved by CCWD during the 2009-10 academic year. RCC launched the BHC during this academic year by offering this cluster of courses in partnership with the original stakeholders, including high schools students in small schools with healthcare themes, incumbent workers, and youth in WIA (Workforce Investment Act) bridge programs into the health care field. There was high enthusiasm for the BHC, particularly because it was a Career Pathway Certificate with 20-26 credits (depending on math and writing levels). In several participating schools, there were up to five of the eight original classes that might be available as dual credit. The BHC pilot was a versatile offering through RCC to address a broad base of educational goals and student profiles for high schools, community college, and incumbent workers.

CRITICAL INNOVATIONS

There was an attempt in the original BHC to use courses that were already online or converted to online as part of the original grant deliverable. One course, Exploring Health care Careers was designed specifically for this certificate and in response to the health care advisory group and many large health care employers. It was their reiterated experience that potential employees had a limited perception of

jobs in health care—primarily nurses and doctors. This course explores a myriad of health care careers ranging from the emerging Community Health Care Worker, to EKG Technician, to alternatives like Acupuncture and Homeopathy. Some general college courses were altered to have a health care focus such as Human Relations at Work. Adding courses meant that the Health care Informatics degree also had to include them in their AAS course electives so that the BHC remained inclusive to its AAS home.

There was also a concerted effort to use courses in the BHC that were available to high schools for dual credit, if that high school was offering the class. In several local high schools student could work on the BHC with a combination of dual credit (RCC-College Now) and taking online courses to complete the degree. Also included was a first aid class which is not offered online but is readily available in most high schools as dual credit. There were several “small schools” or academies within local high schools that had a focus on health care careers. These small schools were developed with funding by the Gates Foundation with the intention that large schools divided into smaller (approximately 200 student head count), theme based schools would provide students with deeper identification with each other and staff because of the connected learning and familiarity with each other. (Stronger, smaller high schools, 2003). These were the schools that were most active in enrolling and supporting students on this pathway. With the support of the grants from CCWD, RCC was able to pilot the BHC in several high schools.

The first version of the Basic Health care Career Pathways Certificate was well received by high schools and ASANTE. ASANTE is the region’s largest health care system. They selected a cohort of ten incumbent workers and committed full tuition and book support for this group to take BHC classes over a period of two years. With initial state grant funds, RCC offered scholarships to high school students who were enrolled in health care focused small schools. In addition several area high schools have a dedicated RCC Foundation grant that pays full tuition and book for students who take CTE (Career Technical Education) courses at the college. There was a significant drop in enrollment when state scholarship funds were no longer available. Incumbent health care workers and high school students are more apt to enroll in BHC when there is tuition and book support.

BHC CERTIFICATE EVOLUTION

The US Departments of Education, Health and Human Services, and labor provide the following definition of career pathways : series of connected education and training strategies and support services that enable individuals to secure industry relevant certification and obtain employment within an occupational area to advance to higher levels of future education and employment in that area. (JFF, 2014 Appendix-1letter). [The BHC collaboration] emerged from a united occupational workforce group, created a focus to align systems that could lead to industry-recognized credentials and quality employment (JFF, 2014, pg. 3). However, due to the constraints of the college program/ career pathways certificate approval process, the Basic Health Care certificate was embedded in a healthcare Informatics degree which has a fairly specific job track. While a student could get their BHC and enter the workforce on a health care pathway for in-house technical training, job advancement within the health care system, the options for stacking credentials were limited.

Health Care was identified as an Oregon state sector strategy in 2011. Therefore, in 2012 Local Workforce Investment Boards across the state identified healthcare as an area to focus in the development of local industry sector strategies. These strategies are employer driven partnerships that leverage workforce, training, economic development and other services to meet the needs of key industries within a regional labor market. Led by three leading institutions, the local Workforce Investment Board (WIB), Southern Oregon University (SOU), and Rogue Community College (RCC) a regional healthcare advisory group, Rogue Workforce Partnership Health Care Steering Committee, was established in January 2012 (see Appendix B). This brought health care industry leaders together to comprehensively coordinate healthcare education and workforce issues for the region by establishing a coordinated and collaborative relationship. The steering committee works together to generate responsive solutions to healthcare employer's hiring, staff development and other related workforce training and education needs. RCC's response to the regional labor market needs for a broader variety of health care professionals was to create a new Allied Health Department as there was an expressed need for more skills based education and training in health care. (Oregon Workforce Investment Board, 2012)

The college's receipt of a second round Trade Adjustment Assistance Community College and Career Training (TAACCCT) grant was a catalyst for the next phase of the BHC. The advent of an Allied Health department at the college meant a new objective to link the BHC to other Allied Health programs that were being developed with the grant. In TAACCCT II, RCC received funds to develop new allied health care pathways such as CNA2, Clinical Lab Assistant, and to open up partnership with two Oregon community colleges (Lane Community College and Linn Benton Community College) which were offering Physical Therapy Assistant and Occupational Therapy Assistant. Yet the Basic Health care Certificate was still wholly contained in RCC's AAS: Computer Support Technician: Health Care Informatics Specialist Option and received state approval in this configuration. Due to the restrictive nature of the BHC as a pathway into Informatics, it limited the other health care pathways to which it could be aligned. In 2012-2013 the BHC was converted to a Less Than One Year certificate (LTOY). This gave the certificate the flexibility to add electives that were more skills based. Thus, the Basic Health Care Certificate began evolving.

Challenges

Several added classes expanded the list of electives which gave students more options for classes depending of their education and career goals. One example of addressing appropriate course content was Anatomy and Physiology (A&P). The original course levels (BI121 or BI231) were designed for nursing and massage students. The Science department developed a new, basic and online course for the BHC (BI100SB). With three different course offerings students can select an A&P course at the level of difficulty required by their educational goal. The BI100SB is the only online option which gives incumbent workers and high school students more flexibility in taking this required course of the BHC.

The next stage of evolution occurred when two original core classes were moved to the electives list, additional options for writing and math were listed along with a significant increase in electives that

expanded to include options from Chemistry, Criminal Justice, Emergency Services, Health Education, Nursing Assistant, Psychology, and Sociology. The revised description states that “This certificate is unique in that it provides a diverse range of electives from which students can choose in order to focus either on a specific interest area (e.g., community health worker or nursing assistant) or to survey topics and issues that are relevant in Allied Health professions.” (Rogue Community College, 2013)

The BHC underwent more change the following year in response to an increasing emphasis at a local, state, and national level to provide more “latticed” and “stackable” credentials for students’ progression through school. For 2014-15 the BHC was redesigned to include specialty track electives, which are 6-10 credits each, which meet requirements included in one or more of RCC’s health-related programs. RCC’s Allied Health Department had developed several new programs with TAACCCT 2 grant so there were more elective choices to add. The result meant that there are three potential dual certificates, and multiple latticed or stackable credentials. These tracks include:

- Nursing Assistant – can receive dual certificates
- Community Health Worker – can receive dual certificates
- EMT – can receive dual certificates and is stackable to Paramedicine
- Health Care Informatics
- Medical Assistant
- Human Services
- Clinical Lab Assistant
- Nursing (RN)
- Dental Assisting
- Fitness Technician
- Massage Therapy

One of the intentions in this redesign is to provide a program option for students who want the BHC in order to enter a health care field with a several tracks for skill specialty and also have this initial certificate apply to other allied health programs. A long standing concern for students who diligently prepared for entrance into our nursing programs and were not accepted had nowhere to go, but now a student can use the BHC as a base to work toward entrance to the RN or LPN program but if that student is not accepted into their preferred program, s/he probably still has most of the prerequisites for RCC’s Clinical Lab Assistant or Medical Assistant certificate programs or for RCC’s partnership Physical Therapist Assistant or Occupational Therapy Assistant AAS programs. In this pathway option students may have to take a few additional courses to meet their newly selected program course requirements but it adds relevance and value to what they have already completed and gives them other options in the health care field and preparatory education.

The evolution of the Basic Health Care certificate as an entry level certificate to one that is a meaningful starting point for any student looking to enter a health care program/career through RCC has been a rich journey for the college and a successful response to regional employer needs for a variety of health care workers.

MAJOR PARTNERS

The U.S. Departments of Education, Health and Human Services, and Labor are working together to promote the use of Career Pathways approaches as a promising strategy to help youth and adults acquire marketable skills and industry-recognized credentials through better alignment of education, training and employment, and human and social services among public agencies and with employers. (Advancing CTE, 2012, pg. 4).

The Basic Health Care certificate has grown from the guidance of collaborative efforts from multiple educational institutions which serve as governing bodies and education providers such as the Office of Career Technical and Adult Education (OCTAE), Department of Education (DOE), and Department of Labor (DOL), along with state and local workforce boards, and all sectors health care providers. The original Pathways Health Care Advisory group which consisted of home health, long term care and hospitals was replaced by the Rogue Workforce Partnership Health Care Steering Committee which has grown to include Coordinated Care Organizations (CCO), mental health, dental, medical office, alcohol and drug treatment. (CCO's are an initiative of the Oregon Governor's office as a response to Affordable Care Act. They act as local health entities that will deliver health care and coverage for people eligible for the Oregon Health Plan-Medicaid and Medicare). The collaboration of this effort has informed the training and educational pathways for the high skill, high wage, and high demand health care labor market in the region.

BY THE NUMBERS / OUTCOMES

RCC Student Data

Completers 2012-13	8
Completers 2013-14	26
Continued enrollment	20

High School Student Participation

2013-14		2012-13	
Students participated	71	Students participated	38
Number of schools	7	Number of schools	7
Number of BHC classes	110	Number of BHC classes	54
Classes passed	97	Classes passed	50
Classes failed	13	Classes failed	4

SUSTAINABILITY

The Basic Health Care certificate has become a foundational certificate at RCC. Since 90% of the course work within the certificate was already established college courses, the BHC students created more demand for existing courses. This was an intentional curriculum development strategy to avoid having to support program-only courses once grant dollars were gone. In addition, now that the BHC is latticed into eleven different Allied Health program its longevity as an entry program at the college is insured.

SCALING FOR IMPACT

Two other Oregon colleges (Columbia Gorge Community College and Lane Community College) have adopted the Basic Health Care certificate based on their college's own course work and appropriate AAS home degree.

The BHC has been one of the colleges most innovative career pathways certificates developed as part of pathways initiative. RCC's initial creative alignment to Health Care Informatics to give the certificate a home degree got the certificate established but quickly proved to be somewhat limiting. Shifting the BHC to a LTOY (Less Than One Year) certificate opened up options for meaningful additions to specific health care skills, which were not required in the Informatics degrees. By responding to the projected need in the labor market, as articulated by the large and involved Rogue Workforce Health Care Steering Committee, the BHC became an essential component to entry into all of the college's Allied Health programs.

The function of this certificate as an entry into all health programs has sparked interest in creating other basic certificates such as: Basic Industrial Tech, Basic Business and Information Tech, which are both under development in the 2014-15 academic year with the support of Perkins funds. These basic "lattice certificates" provide an introduction into CTE fields so that a student can have opportunities to explore several aspects of CTE areas without having to commit to one specific degree yet still earn a career pathways certificate that is stackable credential which can be applied to several CTE certificates and degrees.

For high school students this opens up a world of exploration with meaningful credits that move them toward post-secondary enrollment and completion of certificates and degrees. With a Basic Health Care certificate, Basic Industrial Tech certificate, Basic Business and Information Technology certificate in place along with the Oregon Transfer Module (general education requirements for freshman year) high school students can organize their dual credit-College Now and Early College classes with a goal for entry into college beginning with a stackable credential Career Pathways Certificate. The model of the Basic Health Care certificate provided the stimulus to develop similar entry level pathways into the college for all students. Pathway certificates teach real workplace skills so that students can work while continuing their education in career focused programs.

As Career Pathways Systems for adults have been evolving and maturing, a parallel effort has taken shape in CTE systems and institutions that prepare young people for college and careers. The 2006 reauthorization of the Carl D. Perkins Career and Technical Education Act (Perkins IV)

emphasized the importance of alignment between secondary and postsecondary CTE programs so that young people can move efficiently and quickly to and through postsecondary education and training systems. In a coordinated, non-duplicative progression of courses leading to industry-recognized credentials or degrees at the postsecondary level, it includes, where appropriate, the opportunity for high school students to earn college credits. (JFF, 2014, pg.3)

Advancing Career Pathways has asked colleges and high schools to merge the efforts of the career pathways system for adults with the Programs of Study requirement for high schools and community colleges. To address the economic and labor market needs facing the region, the college and high schools want to focus on middle skill occupation thus there is a collaborative effort to develop Career Pathways Certificates of Completion with these Career Technical Education programs. The goal is to provide more options for High School and Adult Basic Skills students, as well as people exploring career advancement in industry. The Basic Health Care certificate is an excellent example of providing a new Aligned Model of certificate, an entry into Career Technical Education through a stackable credential, and industry guided preparation for the workforce.

SYSTEMIC FRAMEWORK

The Basic Health Care Certificate emerged from a dynamic college process to develop a certificate that had both educational and entry level work place value. This certificate's evolution from a career pathways certificate embedded into the AAS for Computer Support Technician: Health Care Informatics Option, to a LTOY, to a lattice certificate that can stack to eleven certificates and degrees, has sparked the college to adapt this concept for entry into other CTE areas. The process of consulting with local industry for labor market need, area high schools about existing CTE programs and dual credit opportunities, and collaborating internally to create these integrated lattice certificates has become a systemic approach to supporting multifaceted Pathway development into career technical education and careers.

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Appendix A:

Rogue Community College: Health Care Advisory Team Sample Representation

Organization
VA Domiciliary
Oregon Institute of Technology
ASANTE Health System (5 reps)
Community Health Center
Laurel Hill Nursing
Skylark Nursing Home
The Job Council (WIA)
Providence Hospital
Grant Pass High School/ Three Rivers Hospital
Grants Pass High School : Health Occupations
So. Medford High School
Rogue Valley Manor (2 reps)
AHEC: Area Health Education Center (2 reps)
So. OR Education Service District (SOESD)
RCC: Dental Assistant Program
RCC: Science Dept.
RCC: Computer Science: Health Care Informatics
RCC: Emergency Medical Technician Dept.
RCC: Nursing Dept.
RCC: Dean of Instruction & Pathways Coordinator

Appendix B:

Rogue Healthcare Workforce Steering Committee Members

The Job Council/Rogue Workforce Partnership	Royale Gardens Health & Rehabilitation
Signature Home Health	College Dreams
LaClinica delValle	Addictions Recovery Center
Rogue Community College (3 reps)	The Job Council
Valley Immediate Care (2 reps)	Jackson County Health & Human Services
OSU-SO Research & Extension Center	Providence Medford Medical Center
Rogue Valley Physicians	Senator Wyden’s Office
Mid-Rogue Independent Physician’s Assoc.	Prospect House, LLC (Adult Foster Care
Medford Rehabilitation and Healthcare	Woollard Ipsen Management (2 reps)
ASANTE	All Care CCO
Mid-Rogue Independent Physician’s Assoc	
Southern Oregon University (2 reps)	
The Job Council/Rogue Workforce Partnership (2 reps)	
Care Oregon	
Siskiyou Pacific	
OHSU, School of Nursing, Ashland Campus	
RV Manor/Pacific Retirement (2 reps)	
VA – So. OR Rehab Centers & Clinics	
RCC Nursing Dept. Chair and Co-Director Oregon Consortium for Nursing Education	
Providence Health Services	