OPRE 2015-08 | February 2015



Cook Inlet Tribal Council Tribal Health Profession Opportunity Grants (HPOG) Program—Overview and Preliminary Outcomes

This practice brief is one in a series of practice briefs being developed by the Tribal HPOG evaluation team, comprised of NORC at the University of Chicago, Red Star Innovations and the National Indian Health Board (NIHB). The briefs are used to disseminate important lessons learned and findings from the Evaluation of the Tribal Health Profession Opportunity Grants (HPOG) program, which is funded by the Office of Planning, Research and Evaluation (OPRE) within the Administration for Children and Families (ACF). The HPOG program is funded by the Affordable Care Act to support 32 demonstration projects, including five Tribal Organizations and Colleges, to train Temporary Assistance for Needy Families (TANF) recipients and other low-income individuals as healthcare professionals. The Tribal HPOG program aims to meet local healthcare demands by increasing the number of well-trained health professionals in tribal communities. The program is designed using a career pathways approach where students advance through related trainings that build on each other to deepen students' healthcare knowledge and skills. This practice brief provides an overview of the Cook Inlet Tribal Council, Inc. (CITC) Tribal HPOG program and key findings to date.

OVERVIEW OF THE CITC TRIBAL HPOG PROGRAM

Cook Inlet Tribal Council, Inc. (CITC) is a Tribal HPOG grantee serving American Indian and Alaska Native (AI/AN) people within the Municipality of Anchorage and throughout the Cook Inlet Region. The native population in Anchorage is comprised of people from rural native villages and regions across Alaska that have come to reside in the Anchorage metropolitan area. CITC is a non-profit tribal social service organization that administers Tribal TANF within the Municipality of Anchorage and serves as a satellite One-Stop Operator, providing extensive supportive services to low-income AI/AN job seekers. The CITC HPOG program provides health profession training to AI/ANs who receive Tribal TANF or who are low-income. CITC leads the recruitment and screening of HPOG participants, as well as the provision of supportive services, including rental assistance, gas cards or bus passes, childcare assistance, food cards, tuition and textbook payments, and equipment for students' clinical rotations. CITC partners with the Alaska Vocational Technical Center (AVTEC) and South Central Area Health Education Center (SCAHEC) to administer the Tribal HPOG program. AVTEC provides academic instruction to program participants through offering Certified Nursing Assistant (CNA), Licensed Practical Nursing (LPN), Registered Nursing (RN), Medical Billing and Coding (MBC), and Medical Office Assistant (MOA) training programs. SCAHEC delivers the orientation for program participants and exposes them to healthcare professions through job shadowing experiences at local medical facilities.

The findings to date section on program structures, program processes, and program outcomes is derived from three site visits to CITC which included key informant interviews with administrative and program implementation staff,

FINDINGS TO DATE

Program Structures

- Strong organizational capacity and ability to leverage other funding sources. Client referrals to HPOG are well-coordinated, with staff across CITC collaborating to ensure that any qualifying individual with an interest in healthcare is connected to HPOG. In addition to the HPOG program, CITC administers Tribal TANF; General Assistance; child care services; Women, Infants, and Children (WIC); and job seeking services. Staff strategically leverage other resources at CITC to enhance and extend HPOG funds to support participants' training and avoid duplication of services. For example, staff ensure that TANF resources are fully expended for TANF clients before using HPOG funding.
- Ability to adapt training programs to local workforce needs. CITC found that the job availability for medical coders and billers in the Anchorage area was not as great as anticipated, due to local healthcare facilities outsourcing their coding and billing positions. As a result, MBC graduates often found employment as medical office assistants, receptionists, or secretaries, which did not allow them to utilize their coding credentials. CITC worked with AVTEC to replace the MBC program with the medical office assistant program, another short-term program which better prepares participants for the local positions available in medical offices.
- Potential for mutually beneficial partnerships with local employers. CITC has maintained strong partnerships with AVTEC and SCAHEC since the start of HPOG, and also seeks opportunities to collaborate with local employers. HPOG staff have realized the potential for a mutually beneficial partnership with

focus groups with CITC students, and completer and non-completer phone interviews with CITC students. Information was pulled directly from the interviews and focus groups.





"This whole program is life changing for me. I don't know if I would've come back to school. I always wanted to be a nurse, but financially, being a single mom, there is no way I could have done it without this program. This program just makes me want to go, go, go...I can't believe I am here and done and it is all because of this program supporting me through it all. It has completely changed my life."

-CITC Program Participant

local employers, such as the Alaska Native Medical Center (ANMC), the Alaska Native Tribal Health Consortium (ANTHC), and Southcentral Foundation (SCF). Both ANMC and SCF have an Alaska Native hiring preference policy as a means for promoting culturally competent care and are seeking AI/AN applicants to fill various positions within their organizations. Not only is the CITC HPOG program training Alaska Natives who could fill those job openings, but the majority of HPOG participants

report that their ultimate goal is to work at these facilities in order to serve the Alaska Native community.

Program Processes

- Rigorous screening procedures for prospective participants. In an effort to support student success and ensure that students are academically ready for the program, the CITC HPOG program only admits applicants who fulfill basic eligibility criteria, achieve minimum TABE reading and math skill levels, pass a background check, and express interest in a healthcare profession as demonstrated on a resume, essay, and letters of reference. HPOG staff report that this intensive screening process results in better prepared students entering the program, thereby improving retention and successful training completion.
- Importance of job shadowing experience at program onset. Prior to starting training, HPOG participants take part in a job shadowing experience coordinated by SCAHEC. The job shadow exposes participants to the daily demands of health professions. In most cases, the experience affirms the individual's choice to pursue training. Current participants report that it was helpful in illustrating the realities of their chosen health profession. HPOG staff also feel that the job shadow is an important strategy for student retention, as it helps students make an informed decision about their commitment to a career in healthcare.
- Seamless delivery of extensive supportive services. CITC assesses participant needs initially during intake and continuously throughout student enrollment. Participants feel that their academic and basic living needs are comprehensively addressed through a variety of services. CITC is able to cover participant needs so seamlessly that many AVTEC instructors indicated they are unaware of which of their students are enrolled through the HPOG program and receiving support services.

Program Outcomes²

- Strong progress towards achieving enrollment, completion, and employment goals. To date, the CITC HPOG program has enrolled 242 participants in training programs, and 67 percent have graduated.³ As reported during evaluation site visits, the majority of participants who initially entered the CNA program have ascended the career ladder toward the LPN and RN levels, and some have obtained employment as CNAs or LPNs as they continue to advance their education. Students feel that the opportunity provided by CITC to receive training has been life-changing, and they would like to use their training to fill needed jobs and directly serve the Alaska Native community.
- Focus on self-sufficiency. One of the goals of the CITC HPOG program, which aligns with the organizational mission of CITC, is

² Although the evaluation describes preliminary outcomes for program

participants, we do not know what the outcomes for participants would have

for HPOG participants to achieve self-sufficiency. HPOG graduates report feeling more independent, and if not already employed, are confident that their training will enable them to find work to support their families. HPOG graduates who obtain employment generally no longer need supportive services. CITC staff report that many clients have been able to discontinue TANF services following participation in the program.

Perception of the program as having a high return on investment. HPOG participants and stakeholders all feel highly satisfied with the program and perceive that it has a positive return on investment. Staff intend to quantify the savings associated with individuals no longer being eligible for and/or needing public assistance by calculating program costs for one participant, as

compared to the costs associated with a TANF client who does not have the opportunity to receive training and become employed. Additionally, the program is viewed as having value not only to the participants, but also to participants' children, by modeling success, and to the community, by helping to create a culturally competent workforce that can fill needed health professions.

"Being Native, we want to be active within our community. In my experience working as a CNA, we had a lot of elders coming in we were taking care of. They live out in villages their whole life. People who were extremely ill, dealing with dementia – our being Native made a big difference in their willingness to work with us."

-CITC Program Participant

This report is in the public domain. Permission to reproduce is not necessary.

Submitted to:

Hilary Forster, Project Officer
Office of Planning, Research and Evaluation
Administration for Children and Families
U.S. Department of Health and Human Services
Contract Number: HHSP23320095647W

Project Director:

Michael Meit, MA, MPH NORC at the University of Chicago 4350 East West Highway, Suite 800 Bethesda, MD 20814

Acknowledgments:

We would like to acknowledge the Tribal HPOG grantees for their review and contributions to this practice brief.

Suggested citation:

Meit, Michael, et al. (2015). Cook Inlet Tribal Council Tribal Health Profession Opportunity Grants (HPOG) Program Overview and Preliminary Outcomes. OPRE 2015 08. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services: NORC at the University of Chicago, Red Star Innovations, National Indian Health Board.

Disclaimer

The views expressed in this publication do not necessarily reflect the views or policies of the Office of Planning, Research and Evaluation, the Administration for Children and Families, or the U.S. Department of Health and Human Services. This report and other reports sponsored by the Office of Planning, Research and Evaluation are available at

http://www.acf.hhs.gov/programs/opre/index.html.



been in the absence of the program.



³ Enrollment and completion data is from the System as of 02/18/2015 (n=242).

National Indian Health Board

