

## A. Need for project

### *i. The Magnitude of the Problem.*

Since western contact in 1778, the Native Hawaiian people have struggled to recover from a rapid decline in population, and loss of land, language, and self-sustaining work (Papa Ola Lokahi, 1998). Westernization devalued key interdependent elements of the collectivist lifestyle, including access to resources to sustain one's self and family, and healthy living (Handy, 1999), and deconstructed these elements into independent fragments. Fast-forward to 2010, only 20% of Hawai'i residents self-identify as Native Hawaiian (Hawai'i, 2010). Many have lost touch with the traditional culture and do not fully embrace or benefit from Westernization. Today, Native Hawaiians are underrepresented in college enrollment, graduation, and living-wage jobs, and are overrepresented among high school dropouts, the unemployed, the underemployed, and the chronically ill (Hawai'i, 2010; Park CB, 2009). In this proposal we specifically address two interdependent problems affecting Native Hawaiians that are known to have generational consequences—education and employment.

#### 1. Native Hawaiian Education

Native Hawaiians comprise about 20% of the state's population, but only 10% of students across the 10 campuses of the University of Hawai'i (UH). Only 50% of Native Hawaiians enrolling in college graduate. Native Hawaiians have traditionally been underrepresented in nurse training programs at UH (Harrigan RC, 2003). In 2010, only half of the Native Hawaiians who enrolled in one of the six UH nursing schools graduated. Across all ethnicities in Hawai'i, only 5% Hawai'i nursing graduates are Native Hawaiian (Measuring our Progress. University of Hawai'i, 2008). Low enrollment and graduation of Native Hawaiians in Hawai'i can be attributed to lack of services and opportunities to close existing gaps. Specifically:

- a. Enrollment in vocational training is low, as students do not receive academic financial aid for entry-level training.
- b. Persistence from year to year is low, as students struggle with full-time enrollment to qualify for financial aid and work full-time to meet living expenses (Waller LR, 2009). For example, at Windward Community College [WCC, home UH campus of this proposal's Project Manager (PM)], the persistence rate is a disappointing 46%.
- c. Few "pathway" programs exist, and few resources target Native Hawaiians to succeed in pathways. An example of an educational-employment pathway program is one that takes students from entry-level Nurse Aide (NA) to vocational-level License Practical Nurse (LPN) to professional Registered Nurse (RN).
- d. For admission to nursing school, few alternatives exist to the high Grade Point Average (GPA) criterion. Students who become NAs and dare to climb the nursing career ladder will find that the six UH campus that offer nurse training will accept only those applicants with a 3.9 GPA. Although private nursing schools, including Hawai'i Pacific University (HPU) and Chaminade University (CU), accept students with lower GPAs, their tuition is very high (Hawaii Pacific University, 2011-12; Chaminade University, 2012).
- e. Few structured vocational training opportunities exist for undergrads that support science curricula. Structured training in a service learning model would help students develop critical thinking skills and "connect" the science curricula with real-world application so they gain competence in increasingly difficult courses and increase their GPA. Supports are needed to help students from disadvantaged backgrounds, especially those experiencing lifelong exposure to low socio-economic status (LSES)

and racism. They likely have had limited development of study skills, poor success in primary and secondary school, and few opportunities for higher education, and end up in low-wage jobs (Waller LR, 2009; Hatch, 2005; Jones, 2000).

## 2. Native Hawaiian Employment

- a. In Hawai‘i, Native Hawaiian families have the lowest mean family income of all major ethnic groups in the state (16% lower than the average) and the lowest per capita income (35% lower than the average) (Kana‘iaupuni, 2005). Native Hawaiians make up the smallest segment of the workforce (10.5%), compared to Asian (46.9%) and whites (24.2%) (Hawaii, Department of Labor and Industrial Relations, 2005). Employment disparities contribute to LSES and poor health. Consequently, Native Hawaiians have the shortest life expectancy of the state’s five largest ethnic groups, 74 years, compared to 79 years for Caucasians and 83 years for Japanese (Park CB, 2009). LSES also relates to food insecurity, poor dietary habits, physical inactivity, obesity, and limited access to healthcare (US Congress, 2011; Boyd J B. K., supports for and barriers to healthy living for Native Hawaiian young adults enrolled in community colleges., 2007).

The literature demonstrates a strong interrelationship among education, income level, and health outcomes, especially for minorities (Saydah S, 2010; Acosta-Mendez M, 2007; Farmer MM, 2005; Ross CE, 1995). The World Health Organization identified low educational attainment, illiteracy, and unemployment or under-employment as key risk factors for chronic disease (World Health Organization, 2008). Yet, interventions targeting social determinants tend to focus on one problem at a time (health, education, or employment) rather than using approaches that help

people advance their standard of living (Berry HL, 2010; van der Meer JB, 1998) , as is consistent with Native Hawaiian concepts of interdependence.

*ii. Extent to which Specific Gaps Will Be Addressed.*

The primary aims of the Pathway project are to address gaps in college enrollment and preparedness to be employed among Native Hawaiians and other disadvantaged students.

1. Native Hawaiian Education

a. Enrollment

- i. We align with the UH and WCC Strategic Plans to increase enrollment of Native Hawaiians by 3% in each year. Funding for a Nurse Instructor (NI) increases enrollment through tuition waved instruction. We also will add an online component, which will expand the number of students able to enroll.
- ii. Nurse aide entrance criteria are set at a low 9<sup>th</sup>-grade reading and math level, and training is as short as 6 weeks to get students to jobs.
- iii. The Nursing Pathway is designed in three phases with certificate or degree in each phase of NA (CNA), to pre-nursing (AA) to LPN to RN (licensure).

b. Persistence

- i. We align with the UH and WCC Strategic Plans to increase, from baseline, the year to year persistence from fall to fall, and spring to spring.
- ii. Funding for a service learning opportunity will close gaps in persistence by supporting students to earn income and make necessary connections between science curricula and real-world application.

2. Employment

- a. The Pathway closes gaps in income disparities by supporting students to persist in school and qualify for entry-level NA jobs.
- b. The Department of Labor estimates that Hawai'i needs 180 new Nurse Aides each year (US Department of Labor, 2010-11). With an additional year of training, they can become an LPN, earning ██████/year. With another year of training, the LPN can become an RN, earning ██████/year. The health care industry is estimated to be the fastest growing job market through 2018.
- c. As students persist, they internalize health knowledge as evidence by passing college exams, clinical training, and certification and licensure exams.

## **B. Quality of the Project Design**

### ***i. The Proposed Project is Appropriate to Needs***

In 2005, WCC attracted the greatest percentage of Native Hawaiian students in the UH system (33%) (Kuali'i Council, 2006). In 2008, the PM used Community-based Participatory Research (CBPR) methodology to engage an 18-member Advisory Panel (AP) to design a Living Wage survey that included students and academics. Findings of the AP led to the development of the 'Nursing Pathway out of Poverty' program. The Pathway was piloted in a 2009 Memorandum of Agreement (MOA) between WCC and Kapiolani Community College (KCC, another UH campus). Nurse aide students first earn the NA at WCC. Then, as pre-nursing students, they earn an Associate in Liberal Arts (AA) from WCC or KCC. At KCC, students earn an LPN and/or RN. Detail on these 'phases' is provided below.

The Pathway is winning state and national awards. For example, the PM was selected as a 2011 Community Health Leader by the Robert Wood Johnson Foundation for her innovative Pathway program to address education, employment, and health simultaneously.

The proposed service learning addition to the Pathway is appropriate to address several facts. Forecasts across the nation estimate that healthcare will continue to be the fastest-growing workforce industry. Training can start with low-level nurse aide and gradually advance to higher degrees with potential for incremental increases in wage. Health care training naturally imparts health knowledge that can reduce chronic disease.

***ii. Proposed Project Reflects Up-to-Date Knowledge from Research and Practice.***

1. Enrollment:

Finding from the ‘Living-Wage Survey’ study showed that WCC students needed more academic and non-academic supports than were then available (Boyd J H. J., 2011). Our progressive, evidence making, ‘Pathway’ method is new in Hawai‘i. However, we have nearly five years of experience in designing a program that increases enrollment of Native Hawaiians and improves retention, persistence, and completion.

Evidence of low enrollment of Native Hawaiians in nursing led us to partner with KCC to promote acceptance criteria appropriate for Native Hawaiians (Kuali`i Council, 2006).

Acceptance criteria now prioritize years of pre-nurse training, work, and volunteer experience—for example, immersion in hands-on training with masters in the field of nursing, service to community, college, and garden, and leadership among peers—plus a minimum GPA of 3.0. Since 2009, KCC has protected ten of its 80 seats for service-oriented Pathway students.

To ensure that students meet the 3.0 GPA criterion, we offer an innovative ‘*Preparatory to Nursing*’ (Prep) course. This course was designed based on evidence uncovered by KCC’s Dean of Allied Health and the PM as to why Native Hawaiians were not succeeding in nurse training programs. Through a weekly 2.5-hour class, the course combines all pre-nursing health science courses into one ‘body systems’ science course. Student achievement is assessed using NCLEX-RN pass on practice exams, and consistent NCLEX-RN scores of 85% are needed to get

into KCC's nursing program. KCC's Dean of the School of Allied Health acknowledges that we are increasing the number of Native Hawaiian graduates receiving an Associate Degree in Nursing (ADN) (Attachment: LtrSprt\_1\_KCC). Finally, to reduce stresses associated with having to work and maintain good grades, we propose in this grant to add a service learning opportunity so students can earn income while they train.

Letters supporting our growth may serve as comparable evidence of best practices (Attachments: LtrSprt\_2 to 7.). In response to evidence of low persistence from year to year, we designed the Pathway program with opportunities to advance in several phases, including:

Phase 1: Nurse Aide Training Program (NATP): Students seeking entry-level NA training are enrolled in the NATP. The Pathway follows federal antidiscrimination guidelines in enrolling students in NA training. To eliminate bias, students are asked to initiate the application process online. Seats in the course are reserved for students in the order of registration completion. The program enrolls a diverse population of students ranging in age from 17-71, mostly female, and 75% of students are Native Hawaiian and 25% are non-Native Hawaiian.

Once enrolled, students enter into the 8-week, non-credit course that includes 100 hours of didactic and 50 hours of clinical training in a skilled nursing facility. The course emphasizes the Hawaiian values of *mālama* (caring) and *kuleana* (responsibility). NA students receive six hours per week of agriculture science instruction by two RNs in the *Nursing Garden* classroom. Students gain knowledge of: 1) traditional gardening practices to perpetuate the indigenous plant based diet and disease prevention knowledge; 2) *Food as Medicine* approaches; and 3) Hawaiian language. Students graduate ready to work with agriculture in addressing sustainable food security and health promotion issues. Planned is the development by the PM of an online version of the didactic portions of the NA training program.

NATP students who complete the course and meet inclusion criteria (Pass NA course, apply to and pass state certification exam (CNA), enroll in higher education, and work or volunteer in a health care setting for at least 16 hours per month; preferably in elder care) may advance to Phase 2. Inclusion criteria were set by the self-governed student body.

Phase 2: Nursing Pre-requisites at WCC: NATP completers transition to credit courses and complete 1-2 years of pre-nursing courses, including anatomy and physiology, chemistry, microbiology, pharmacology, and others. They attend monthly leadership meetings, provide peer mentorship, and attend the Prep course (described above).

Students participate in innovative ‘*Teachers in Training*’ and ‘*Self-Governance*’ service learning opportunities supported by The Queen’s Medical Center of Hawai`i. They engage in serve learning as instructional aides and peer mentors. They work with staff to identify program weaknesses and plan interventions, which improve our ability to minimize dropout. They hone their own skills by instructing others and simultaneously reclaim the cultural art of using oratory to perpetuating knowledge. The training also stimulates interest in nursing faculty careers to eventually reduce the nurse instructor shortage (Yordy, 2006).

The planned addition of service learning at Lunalilo Home (a long-term care facility established by Hawaiian royalty to care for Hawaiians and others) will be added to Phase 2 (Attachment: NHEP\_WCC\_LunaliloMOU). The opportunity allows students to transfer knowledge of traditional gardening practices learned in the garden through healthy cooking demonstrations with residents at Lunalilo. They will perpetuate skills of the indigenous plant-based diet and test their *Food as Medicine* knowledge. The experience will mirror the clinical experience students can expect in the KCC nursing program. To transition to Phase 3, students must demonstrate excellence in cultural components of the Pathway including service learning as

peer mentors to new students, college, and community, leadership in student governance; sound attendance record to all classes; and sound employment records in NA jobs. The inclusion criteria were set by the self-governed student body of the Pathway to increase their readiness for jobs.

Phase 3. Transition to LPN and RN at KCC: After one year in the KCC ADN program, students are supported to take the LPN exam and seek an LPN position to increase their earning power. After earning their ADN, they are supported to take the RN exam.

All Phases of the Nursing Pathway: Students earn stipends to cover fees, books, uniforms, certification and licensing exam fees, and non-academic costs of education. And, they have continual access to individualized academic and career counseling, peer mentoring, and job placement services.

*iii. The extent to which the proposed project will be coordinated with similar or related efforts, and with other appropriate community, State, and Federal resources.*

Key of Acronyms of community, State, and Federal partners:

WCC: Windward Community College (state, UH) • POL: Papa Ola Lokahi (non-profit) • IH: `Imi Hale, Native Hawaiian Cancer Network (community-university partnership) • OHA: Office of Hawaiian Affairs (state) • KOM: Ke Ola Mamo (non-profit) • KCC: Kapi`olani Community College (state, UH) • KS: Kamehameha Schools (private) • QMC: Queen's Medical Center (non-profit) • LH: Lunalilo Home (non-profit) • GHH: Green House Hawai'i (non-profit).

We have long-standing collaborations with partners with expertise in education, employment, and health of Native Hawaiians (Table 1). Each is committed to continuing their support (LtrSprt\_2 to 7). The success of the program is owed to our partnerships. Collaborations started with WCC in 2007 in coordination with POL and IM to address local education,

employment, and health needs. Findings attracted OHA to support training of 50 Native Hawaiians for CNA jobs. Then KOM offered opportunities for nurse aides to practice entry-level skills in community settings. As nurse aides showed gains in skills we prepared students to transition to KCC's LPN and RN nursing programs. We secured funds from KS to support RN scholarships. We partnered with QMC to develop the '*Teachers in Training*', '*Self-Governance*' and '*Nursing Garden*' service learning opportunities to integrate cultural traditions for Native Hawaiians. New to our network as of 2011 is GHH. They bring years of experience in training homeless and unemployed for jobs in the agriculture industry.

In 2012, we began to partner with LH to complete the model of indigenous training with hands-on opportunities for NA to provide quality health care for seniors and for students to experience traditional hands-on training with masters (RNs) in patient-care environments. We're now planning to coordinate new services and opportunities with this grant. Specifically, we propose that our post-CNA, pre-nursing students earn stipends for working at LH while in school. Students who complete NA training overcome one barrier to employment, but struggle to overcome financial, academic, and social barriers that will affect their success over the next 2-4 years in the Pathway (Boyd J K. S., 2012). We are now planning for students to add 8-16 hours of service learning at LH, which will offer then a way to earn money will working in health care, rather than at other entry-level jobs while completing nursing pre-requisites. The proposed budget will support students to learn and earn.

**Table 1. Coordinated Resources to Support Project**

No	Activity	Coordinated Resources to Support									
		Nursing Pathway									
		NHEP	QMC	KS	WCC	KCC	POL	KOM	LH	IH	GHH
1	NA Training	X			X						
2	Garden Training		X		X					X	X
3	Pre-Nursing Phase		X		X						
4	CNA clinical training	X			X				X		
5	Service learning		X		X		X	X		X	
6	Student governance		X	X	X	X	X	X	X	X	X
7	Teachers in Training			X	X						
8	LPN to RN training			X	X	X					
9	Program development	X	X	X	X	X	X		X	X	X
10	Program dissemination	X	X	X	X	X	X		X	X	X

### C. Adequacy of resources

#### *i. Extent to which Costs are Reasonable in Relation to Number Served and Expected Benefits*

Based on proposed services and opportunities, we calculate that total costs are extremely reasonable given that 228 students will be on their way out of poverty during the three years program period at a [REDACTED] per student cost based on a [REDACTED] three year budget. The budget of approximately [REDACTED] per year will allow us to waive NA tuition for 180 new and supervise

48 academically promising NAs to advance through pre-nursing service learning at Lunalilo Home students over 3 years. Anticipated benefits include:

1. 180 disadvantaged students will earn and qualify for NA positions in long-term care.

Data show that the share of the population 65 years of age increased by 14.5% in 2010.

This trend will continue in the future, increasing the senior segment of the total population to 23.6 percent in 2040. (Hawai'i, 2010).

2. 48 academically promising NA graduates who meet all Pathway criteria will earn opportunities to participate in clinical training supported by this project. They will enter and succeed in the ADN program and become licensed as LPNs and RNs.

**ii. Relevance and Commitment of Each Partner**

The relevance of each partner as a collaborator with the Pathway program is described in section B.iii, above. We have experienced nearly five years of success thanks to long-standing collaborations with partners. We welcome the commitment of two new partners (LH and GHH) and will continue to seek out new partners. To obtain funding for the Pathway program, we approached organizations with a mission to improve Native Hawaiian and minority health, well-being, education, and income (Table 2).

<b>Commitment of Project Partners</b>			
<b>Partner</b>	<b>Period</b>	<b>Program Supports</b>	<b>Funds</b>
WCC	2007-	Provides faculty, staff, counseling, facilities, and garden space	Not calculated
OHA	2007-10	A Hawaiian serving agency, invested in Pathway out of Poverty to train Native Hawaiians for careers in nursing.	████████
POL	2007-	Hawaiian serving agency targeting Native Hawaiian well-being and PI's professional development.	████████

		<b>Commitment of Project Partners</b>	
<b>Partner</b>	<b>Period</b>	<b>Program Supports</b>	<b>Funds</b>
IH	2007-	College - Community partner supporting PI's professional development, program, publication, and dissemination.	████████
KCC	2009-	State community college protects seats for CNA transitioning to RN. Opened Pathway for Native Hawaiians.	Training
KS	2009-	Hawaiian serving agency, invested in MOA to pilot Pathway model, cultural supports, Prep Course, nursing tuition.	████████
QMC	2010-	Acute care medical center, Native Hawaiian serving agency provides stipends for service learning pre-RN	████████
KOM	2009-	Hawaiian serving agency targeting health services provides service learning for indigenous trained nurses.	N/A
GHH	2011-	Non Profit providing agriculture training and garden-based curriculum development support.	N/A

**Note:** Descriptions of partner abbreviations listed section B.iii

Between 2007 and 2010, ██████████ was raised to support Native Hawaiian and other underrepresented students in the Pathway program. Funds have been used to cover tuition, books, uniforms, and certification costs. WCC has supported the program by covering the PM and the program secretary and most program supply costs.

### iii. Extent to which Budget is Adequate to Support the Proposed Project

- Using grant funds to cover the cost of the ██████ FTE RN instructor will allow WCC to waive tuition in the NA training program. The cost of a clinical RN instructor is reasonable to develop a first of its kind opportunity for underserved students to have access to clinical training in the NA to Pre RN training period. The training will help students develop critical thinking skills.
- Up to 50 NA will be trained in Year 1, 60 in Year 2, and 70 in Year 3. The increase will be supported by the development of the online version of the didactic portion of the NA

training program. Tuition support will increase the number of students able to overcome financial barriers to school. In 2011, more than 150 individuals called WCC to inquire about the program, but only 45 enrolled, citing cost and scheduling barriers.

3. The cost of a ■ FTE Program Assistant will increase intake and transition services to help students move to higher education and jobs.
4. The cost of stipends for working at Lunalilo Home is reasonable, as students who work full-time jobs have not done well in junior college. Instead, students will have access to on-the-job type training, earn stipends, and develop a sense of value in the community from earning one's way. The training opportunity will also benefit Lunalilo residents, who will receive one-to-one care two days per week, 8 hours each day.

#### **D. Quality of the management plan.**

##### ***i. Adequacy of Management Plan to Achieve the Objectives***

The management plan is depicted in the tables below along a timeline that ensures that goals are met in a timely manner. The budget supports three program staff, including the Program Manager (PM), Program Assistant (PA), and the Nurse Instructor (NI). A subcontract to Lunalilo Home will support clinical supervision of students deployed there. Together the team will meet budgeted objectives to provide services for 180 students to enter the Nursing Pathway via the NATP, transition to pre-nursing credit courses at WCC, participate in pre-nursing service learning at Lunalilo Home, and transition to LPN or RN at KCC. The timeline of the management plan is adequate to achieve these objectives based on the following goals:

#### **Goal 1: Enrollment – Increase enrollment in college**

Objective 1: Increase enrollment of Native Hawaiian Students

Activities	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	Person Responsible
Promote enrollment in Native Hawaiian Communities /1 per semester	X					X				X			PM, PA
Advertise in college catalog and online	X	-	-	-	-	-	-	-	-	-	-	X	PM

**Goal 2: Meet workforce demand for Nurse Aides (NA).**

Objective 1: Retention – Increase by 10% each year from baseline NA completing training.

Activities	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	Person Responsible
NA training during 5 8 week sessions per year + 1 online session PY	X	-	-	-	-	-	-	-	-	-	-	X	PA, NI

Objective 2: 95% of all NA graduates apply to take certification exam

Activities	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	Person Responsible
Register NA graduates for NA exam		X		X			X			X		X	PA

Objective 3: 95% of all NA graduates who apply for certification pass exam

Activities	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	Person Responsible
Mandatory practice exam prior to American red Cross exam		X		X			X			X		X	PM, NI, PA

Objective 4: 96% of all NA graduates who pass certification transition to jobs

Activities	A U G	S E P	O C T	N O V	D E C	J A N	F E B	M A R	A P R	M A Y	J U N	J U L	Person Responsible
Resume support and mock interviews			X		X			X	X		X		PM, NI, PA

Goal 3: Transition – NA graduates pursue higher degrees

Objective 1: Increase 3% from baseline (##) per PY, NA grads transitioning to pre-Nursing

Activities	A U G	S E P	O C T	N O V	D E C	J A N	F E B	M A R	A P R	M A Y	J U N	J U L	Person Responsible
Transition students to higher education (pre nursing training)	X			X	X			X	X		X	X	PA, PM

Objective 2: Retention – Students complete the courses they enroll in with 0.1-0.2 increases in GPA (from baseline) each semester up to a minimum of 2.5 GPA (pre-LPN) or 3.0 GPA (pre RN) or greater.

Activities	A U G	S E P	O C T	N O V	D E C	J A N	F E B	M A R	A P R	M A Y	J U N	J U L	Person Responsible
Preparatory to Nursing Course mandatory	X	-	-	-	-	-	-	-	-	-	-	X	NI, PM

Objective 3: CNA demonstrate increase in knowledge and skill during service learning

Activities	A U G	S E P	O C T	N O V	D E C	J A N	F E B	M A R	A P R	M A Y	J U N	J U L	Person Responsible
Training at Lunalilo Home and Preparatory to Nursing Course		X	-	-	-	X	-	-	-	-	-		NI, PM

Goal 4: Meet workforce demands for LPN and RN

Objective 1: Persistence – NA grads persist to WCC AA and transition to KCC LPN or RN

Objective 2: Retention – Students enrolled in KCC LPN or RN training complete courses they enroll in with 2.5 GPA or greater.

Activities	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	Person Responsible
Academic and service training	X				X					X		X	PI, PM

Objective 3: 100% of all KCC (Pathway) LPN or RN graduates apply to licensure exam

Activities	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	Person Responsible
Peer mentor led study sessions/ apply to take exam	X	X								X	X	X	Peer mentors, PA

Objective 4: 96% of all LPN or RN graduates who pass licensure transition to jobs

Activities	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	Person Responsible
Peer mentor led study sessions/ apply to take exam	X	-	-	-	-	-	-	-	-	-	-	X	Peer Mentor, PA

ii. *Extent to which the Time Commitments for Staff are Appropriate.*

The objectives and goals of the program are listed above. Time commitments for key personnel are appropriate to meet all program goals as described below:

1. Program Manager (PM): ■ FTE is required to meet objectives, promote the NATP and Pathway program to increase enrollment, develop the online NA course, coordinate activities with community and college partners to increase retention, persistence, and graduation. The

PM also conducts evaluations, guides program modifications, meets reporting deadlines, and organizes annual reports to community. The PM is a tenured ■ FTE faculty member. The other ■ FTE is supported by WCC. The requested ■ FTE is allocated to the proposed project based on 5 years of experience in managing the program.

2. Program Assistant (PA): ■ FTE is required to provide registration support, conduct intake, maintain data, administer the Program Survey, and assist with transition guidance to jobs and higher education. The PA will assist with program evaluation and manage data for 180 NAPT students upon entrance to NAPT, and 48 academically promising student to transition to LPN or RN, and upon completion of all nurse training.
3. Nursing Instructor (NI): ■ FTE RN is required to provide in-class training to five in-class, 10-students cohorts, and two online trainings once the online curriculum is developed. A ■ RN instructor (36 hours per week) is requested based on the ■ FTE (30 hours per week) allocation for in-class instruction and ■ FTE (6 hours per week) allocation to individualized career guidance and course modification responsive to student surveys. The NI also provides individualized career guidance based on student assessment.
4. Subcontract with Lunalilo Home: Approximately ■ per year is requested to support on-site clinical supervision of pre-nursing students at Lunalilo Home by the RN at Lunalilo Home.

*iii. Adequacy of Mechanisms to Ensure High-Quality Products and Services.*

1. Students Surveys: Students complete an end of course survey with each 8-wk training session. Findings are used to improve training services, strategies, and materials and improve services for students.

2. Monthly Meetings: Students meet each month to inform program staff of weaknesses, needs, and accomplishments. The proposed expansion to add training at Lunalilo is an example of a program component added to improve the quality of the program in response to students as informants.
3. Reports : The PM submits annual reports to WCC that address enrollment, completion, retention, transition to certification and licensing exams, transition to jobs and higher education, and transition to and graduation from the KCC nursing program. Data from 2010-15 will be compiled in a 5-years Program Report.
4. Institutional Research data, students' surveys, and data from the Student Survey will be used to complete NHEP reports as appropriate.
5. The PM is required to apply for full professorship by 2015. The professional level of leadership and instruction required to earn professor status will be based, in part, on accomplishments of students and outcomes of the NHEP project.

## **E. Quality of the project evaluation**

### ***i. Extent to which Evaluation Methods are Appropriate to Context.***

Evaluation priorities are responsive to WCC's mission to support access and educational needs of Native Hawaiians (Windward Community College, 2012). To better understand students' experiences and effectiveness of the project we will track students from first contact through graduation and certificate or degree. We will use several methods of evaluation including student surveys, qualitative exit interviews, a longitudinal Student Survey at pre-NATP, transition to LPN or RN, and post nurse training. Evaluation methods are specific to the program goals and objectives as described below:

Goal 1: Enrollment – Increase enrollment in college

## Outcome 1: Increase enrollment of Native Hawaiians

Activities	When	Who	Evaluation
Promote college enrollment in Native Hawaiian communities, Advertise in college catalogs	One event per semester Yr1 Fall 12, Spring 13 Yr2 Fall 13, Spr 14 Yr3 Fall 14, Spr 15	Program Counselor / Program manager	Banner student information system

## Goal 2: Meet workforce demand for Nurse Aides (NA)

## Outcome 1: Retention – Increase each year by 3% from baseline (86%) NA completing training.

Activities	When	Who	Evaluation
NA training during five 8-week sessions per year + 1 online session in each Year.	Yr 1 (Sep, Nov, Jan, Mar, May + 1 (2-6 mos) self-paced online course) Yr 2 (Aug, Oct, Jan, Apr, Jun + 1 (2-6 mos) self-paced online course) Yr 3 (Aug, Oct, Jan, Mar, Jun + 1 (2-6 mos) self-paced online course)	Program Counselor	Banner student information system

## Outcome 2: 95% of all NA graduates apply to take certification exam

Activities	When	Who	Evaluation
Register NA graduates for NA exam	Yr1-3 - within 60 days of passing NA training	Program Assistant	Graduate interview / Hawai'i Red Cross CNA Center

Outcome 3: 95% of all NA graduates who apply for certification pass exam

Activities	When	Who	Evaluation
Mandatory practice exam prior to American Red Cross exam	1-3 - within 60 days of passing NA training	Program Assistant	Graduate leaver interview / Hawai'i Red Cross CNA Data Base

Outcome 4: 96% of all NA graduates who pass certification transition to jobs

Activities	When	Who	Evaluation
Resume support, mock interviews	Yr 1-3 - within 60 days of passing certification exam	Program Counselor / Program Assistant	Graduate leaver interview / Hawai'i Red Cross CNA Data Base

Goal 3: Transition - NA graduates pursue higher degrees

Outcome 1: Increase 3% from baseline (66%), per year, NA grads transition to pre-nursing courses

Activities	When	Who	Evaluation
Transition students to higher education (pre-nursing training)	Yr1 Spring 13 Yr2 Fall 13, Spr 14 Yr3 Fall 14, Spr 15	Institutional Researcher / Program Counselor / Program Manager	Banner student information system

Outcome 2: Improve retention, students complete courses with 0.1 – 0.2 increase in GPA (from baseline) per semester up to minimum 2.5 GPA (pre-LPN) or 3.0 GPA (pre-RN) or greater.

Activities	When	Who	Evaluation
Preparatory to Nursing course - mandatory	Yr1 Spring 13 Yr2 Fall 13, Spr 14 Yr3 Fall 14, Spr 15	Nursing Instructor / Program Manager / Institutional Researcher	Course grades / attendance record / Banner Student Information System

Outcome 3: CNA demonstrate increase in knowledge and skill during service learning

Activities	When	Who	Evaluation
Training at Lunalilo Home / Preparatory to Nursing course	Yr 1 Spring 13 Yr 2 Fall 13, Spr 14 Yr 3 Fall 14, Spr 15	Lunalilo Subcontract / NI / PM	Service learning evaluation / course grades

Goal 4: Meet workforce demands for LPN and RN

Outcome 1: Persistence - NA grads persist to WCC AA and transition to KCC LPN or RN

Activities	When	Who	Evaluation
Academic counseling / career guidance	Yr 1 Spring 13 Yr 2 Fall 13, Spr 14 Yr 3 Fall 14, Spr 15	Program Counselor / Program Manager	Banner student Information System / Exit or graduate leaver interview

Outcome 2: Retention – Students enrolled in KCC LPN or RN training complete the courses they enroll in with 2.5 GPA or greater

Activities	When	Who	Evaluation
Academic and clinical training	Yr 1 Spring 13	Nursing Instructor /	Banner Student
	Yr 2 Fall 13, Spr 14	Program Manager /	Information System
	Yr 3 Fall 14, Spr 15	Institutional Researchers	

Outcome 3: 100% of all KCC (Pathway) LPN or RN graduates apply to licensure exam

Activities	When	Who	Evaluation
Peer mentor lead study sessions / apply to take exam,	Yr 1 Spring 13	Peer Mentors /	Exit or graduate leaver
	Yr 2 Fall 13, Spr 14	Program Assistant	interview / Hawai`i
	Yr 3 Fall 14, Spr 15		State DCCA Data Base

Outcome 4: 96% of all LPN and RN graduates who pass licensure transition to jobs

Activities	When	Who	Evaluation
Resume support, mock interviews	On-going through all program years	Program Manager / Program Assistant	Graduate leaver interview

As nurse aide graduates transition to higher education at WCC and to KCC, the college uses the Banner Student Information System to track enrollment in college and courses, retention through semester, persistence each year from fall to fall and spring to spring, and graduation with certificate or degree.

Individualized exit interviews will be conducted by the PM and PA. Data will guide referral to academic and financial aid counseling, tutorial services, and individualized follow-up by Pathway staff.

**ii. *Extent to which Evaluation Methods Provide Timely Guidance for QA***

Banner tracking provides tracking from semester to semester, persistence of cohorts from fall to fall and spring to spring. End of semester data reporting allows for timely guidance and intervention for students who are earning low grades, or over enrolled in credit courses contributing to low overall GPA. Monthly meetings are an essential aspect of how we assess the quality of the program according to students. Exit interviews allow students to inform the program and college of their perceptions of their own strengths and weaknesses as well as the programs strengths and weaknesses.

**iii. *Extent to which Evaluation Methods Include Objective Performance Measures***

The evaluation methods presented above are consistent with academic assessments of student services and student outcomes. All assessments are conducted according to semester-based timelines unless described otherwise. Additionally, we will conduct a longitudinal Student Survey and qualitative exit interviews.