Bridge to Nursing
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Massachusetts Community Colleges

COMMONWEALTH CORPORATION
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Information regarding these projects was gathered from a combination of the following: original applications for funding, conversations with key staff from one or more of the partners within each project and Promising Practice Case Studies submitted to the Commonwealth Corporation, listed below. Complete Round Six Case Studies may be found in the Case Studies Section of the ECCLI Virtual Library www.commcorp.org/programs/eccli/virtuallibrary.html.

- Creating Quality Resident-Centered Care: A Continuous Journey in Culture Change
  Loomis Communities
- Growing Your Own Nurses: Building A Culture of Learning Through Effective Partnerships, Educational Programs and Career Counseling
  Notre Dame Long Term Care Center and Holy Trinity Nursing and Rehabilitation Center
- Seated and in Your Seat at the Table: Creation of a Community Partnership for Development of Nurses on Cape Cod
  Cape Cod Health Care
- Enabling Nursing Home Employees to Reach Their Full Potential: The Genesis Westford House and Lowell Cluster Career Development Initiative
  Westford House and Lowell Cluster, Genesis HealthCare
- “Campus on a Campus”: A Case Study
  Heritage Hall, Genesis Healthcare
- Passage to Nursing
  The Boston Home, The German Centre, Sherrill House
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Executive Summary

The primary goal of the Extended Care Career Ladder Initiative (ECCLI) is to improve the quality of long-term care across the Commonwealth. In order to do this, ECCLI seeks to stabilize the direct care workforce by creating opportunities for skill development and career advancement. Since 2000, the initiative has provided the opportunity for more than 140 nursing homes, skilled nursing facilities and home care agencies to offer training and educational opportunities to their entry level workers, particularly certified nursing assistants (CNAs.) The initial rounds of funding invited project proposals that focused on career ladder steps primarily within the CNA role. Training topics were chosen based on assessments of both the facility and the workers’ needs. The career ladder trainings that have been offered have expanded the knowledge and skills of CNAs and transformed their role within the caregiving team.

In addition to high turnover of CNAs, extended care facilities and home care agencies are also experiencing a shortage of nurses. For this reason, funding for ECCLI Round Six was specifically targeted to encourage sites with well-established career ladder programs to extend their career ladders up to the level of licensed practical nursing (LPN).

Information gathered from ECCLI sites to date shows that the knowledge and skill gap between CNA and LPN is quite large, even with the CNA career ladder. If facilities wish to support their CNAs to become nurses, they will need to provide more intensive coursework and support services than those offered within the current CNA career ladders. This guide outlines a model that can be used by extended care facilities and home care agencies that are collaborating with an education partner to develop a bridge to nursing program. It describes the critical components of a program needed to help employees bridge the gap and be prepared to enroll in a nursing program. It also describes institutional practices needed to support a successful bridge program and the basic components that a program should include. Information collected from the projects that are experimenting with bridge to nursing activities shows that they have all followed a similar model. Differences between the various bridge to nursing programs are primarily based on whether the bridge program was the major focus of the project, or just one part of it. Examples from the various projects are provided throughout the guide to support key concepts and a short profile of each project is included in the final section.

Note: Information has been gathered from the projects listed in the acknowledgements. Each project contains a combination of skilled nursing facilities, assisted living facilities, rest homes and home care agencies. In the text, the projects will be referred to by the name of their lead site, or in the case of the Intercare Alliance, as the “Alliance.”
Introduction and Background

In 2000, Massachusetts introduced the Extended Care Career Ladder Initiative, (ECCLI) an initiative designed to address high turnover and vacancy rates among paraprofessionals in extended care facilities. Projects funded through this initiative, administered by Commonwealth Corporation, developed and implemented career ladder programs for direct care workers in their facilities. Since the initial phase of funding, a total of seven distinct rounds of funding have occurred. As intended, the first several rounds focused on developing career ladders within the CNA role itself. Through these projects, hundreds of entry-level workers have received education and training in critical areas such as Restorative, Alzheimer’s Disease and Dementia as well as training in soft skills areas such as Effective Communication, Cultural Diversity and Leadership.

In addition to high turnover and vacancy rates among CNAs, the extended care industry is also facing a critical shortage of licensed nursing personnel at both the practical and registered nursing levels. With a nursing shortage occurring across all sectors, extended care facilities have trouble attracting the limited number of nurses who are available, in part because they are unable to match the salaries offered within acute care settings. In recognition of this, many facilities have begun to implement “grow your own” strategies, for their employees who wish to become nurses. Although many nursing homes offer tuition reimbursement for job-related course work, these new strategies typically cover tuition costs and include a formal system of supports to greatly increase the likelihood of participants’ success.

A bridge to nursing program consists of a set of courses and supports which assist workers in transitioning from an entry level position to a licensed nursing position. A transition program should include activities and services such as assessments of academic skills and career interests, career counseling or advising, remedial work in reading, writing and math, workshops to acquaint students with the expectations of college level work and possibly prerequisite or corequisite courses. If a facility decides to “grow its own nurses,” the size and scope of their program will be based upon several variables including the number of interested employees they wish to support, how close these students are to being ready to enroll in a nursing program and the staff time and financial resources that the facility is able or willing to contribute. On one end of the spectrum, a facility might choose to support just two or three employees per year to take prerequisite courses and enroll in a nursing program. Informal support for these students might be provided by a current staff member such as the Staff Development Coordinator or the employee might be directed to seek out supports where they attend classes. On the other end of the spectrum are larger sites with greater resources and many
interested employees. These facilities, often members of large, multi-site organizations are able to develop and offer bridge activities to many employees along a wide range of readiness. Often, they can use internal resources, such as current staff and designated staff development funds to provide many of the above mentioned services including career coaching, remedial education and tuition support for nursing courses.

**Partnering Model**

The model most common to the Round Six sites involves a group of facilities which have joined together to develop a bridge to nursing program that moves direct care workers through CNA career ladder levels, and then through pre-nursing activities and ultimately into a nursing education program. Many of the partner facilities involved in these projects have an established relationship developed through a previous round of ECCLI funding. A few facilities are receiving ECCLI funds for the first time and are developing their CNA career ladders at the same time that they are collaborating with other partners to support workers in bridge to nursing activities. Partnering with other sites is a good way to share the costs of developing and implementing activities. It may also mean that services can be offered to students with a wider range of needs because the program can group together students from the various facilities who have similar academic needs. Successfully partnering with other sites requires a great deal of effort on the part of the administrators at the initial stages of a program and also as program activities roll out. This is also true for the project coordinator who must work to keep all partners informed and involved.

**Strategies for Success**

Before a facility, or a group of facilities, decides to develop a bridge to nursing program, it may be helpful to look at other transition programs that have been developed to support entry level workers to begin college level coursework. Specifically, models for adult basic education (ABE) programs developed in workplace settings can provide guidance. Reviews of ABE programs describe quality programs as having the following characteristics:

- a solid understanding of the population to be served,
- strong initial and on-going support from administrators and supervisors
- institutional integration of the program
- effective collaboration between partners,
- ongoing data collection**

In terms of the population to be served, entry-level workers within the extended care industry share many

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**Adapted from the FY2000 Request for Proposals for Adult Basic Education Competitive Grants, Issued by the Commonwealth of Massachusetts, Department of Education on August 13, 1999.**
characteristics with their counterparts in other industries. In particular, English may not be their first language, many do not have a high school diploma or its equivalent, and many lack the necessary literacy and numeracy skills to advance. Because of the low wages prevalent at this skill level, many people must work more than one job or numerous over time shifts in order to support themselves and their families. Juggling multiple work responsibilities to support their basic needs for food, housing, childcare and transportation can make it difficult to focus on furthering their education even when the payoff may be substantial. To be successful, a program must take into account conflicting time commitments and skill deficiencies as well as how long it has been since the person has been in school.

The existence of on-going effective support from facility administrators is vital. Good leaders can provide vision and demonstrate that support for these activities is important and expected from all levels across the organization. Support and input are also needed from directors of nursing, staff development coordinators, directors of human resources, operations managers and front-line supervisors. (Case Study: The Alliance) Support from front-line supervisors is particularly important as activities roll out and staffing issues arise when CNAs leave the floor to attend classes. If multiple sites are involved, it becomes even more important for all managers to stay current with program activities and any changes that are made.

Like other successful transition programs, facilities should work to integrate bridge to nursing activities into education and training programs that already exist within the institution. If a successful career ladder is already operating, the facility most likely has a program coordinator in place and may already be offering advising and tutoring to a wide range of career ladder participants. Expanding these services to meet the needs of workers participating in bridge programs may be the most feasible thing to do. It is important however, for administrators and program staff to recognize that these students may need more and different services in order to move toward enrollment in a nursing program. For example, some facilities are using volunteer tutors to work with employees on their basic English and math skills. For their students taking bridge courses, tutoring may need to be more intensive and provided by professional tutors.

Those operating comprehensive workplace education programs should recognize that providing targeted education and training opportunities to the largest group of workers within a facility can have a tremendous impact on the work culture and the day-to-day operations of the facility as a whole. One of the goals of the initiative is to increase the knowledge and skills of the entry level workers and recognize their contributions to the care giving team. Doing this successfully may create the need for changes to the work systems throughout that facility. Data gathered from ECCLI projects has shown that the ECCLI career ladders have
changed the role of the CNAs within the care-giving team and across the facility. Facilities differed greatly in the extent to which they addressed the impact of these changes. Some administrators recognized the potential issues that might arise and worked proactively to address them. (For an excellent example see the Loomis Communities Case Study at www.commcorp.org/programs/eccli/virtuallibrary.html. In other facilities, changes to the way that members of the care-giving team work with one another have evolved gradually and adjustments in practice were allowed to happen naturally. Providing management training to managers and supervisors while offering career ladder training to CNAs may help to address any issues that arise.

The main objective of extended care facilities is to provide high quality care to the people who need their services, not to design and implement workforce development programs for their employees. Therefore, since the first rounds of ECCLI funding, facilities have been encouraged to collaborate with organizations with workforce development expertise including community colleges, local workforce investment boards, community-based organizations, career centers and others. Professionals from these organizations can help to assess the needs of the organization and its employees, develop appropriate curriculum and provide ongoing feedback as the program rolls out. In terms of the community colleges, because of the range of courses and services offered, representatives from several departments are typically involved including Business and Industry, Nursing, and Admissions. Many of the ECCLI sites have also contracted with WorkSource Partners, a workforce development organization which provides career counseling, case management and partnership development services.

Since the first rounds of funding, it has become clear that effective and on-going collaboration between all partners is crucial to the success of career ladder programs. As extended care facilities established their initial career ladder programs, they typically encountered issues around scheduling, providing adequate coverage on the floors during training and class attendance. Effective communication between the facility and its workforce development partners and the willingness of partners to be flexible and make programming changes as needed were key to keeping the programs running. These same issues arise and may be exacerbated for bridge program activities since they often include remedial and/or developmental courses, which meet weekly for two to four hours and require work outside of class.

Data Collection

As programs are developed and implemented, a clear and systematic way to gather, track and evaluate data is important for many reasons. For individual program participants, documentation of their
accomplishments can provide important motivation to continue with career ladder activities and confidence to pursue their career goals. For facilities, data is needed for evaluation purposes to allow them to review the original goals of the program and how well they were met. Also, although facilities may be committed to providing educational opportunities for their employees, they would be unable to do so unless they experience a positive business impact from the program as well. (Case Study: The Alliance) So far, the data shows that the career ladder programs are having a positive impact on retention and vacancy rates for CNAs. It is too early, at this point, to determine whether the bridge to nursing activities are having any impact on retention and vacancy rates. Finally, data from the individual facilities that is collected and analyzed at the state level by Commonwealth Corporation can be used as evidence of the initiative’s success and shared so that other non-ECCLI sites can learn from it.

**Program Components**

The strategies described above constitute the overarching structure under which a successful bridge to nursing program will operate. Whether a bridge program is developed as an extension of current career ladder programming or as a stand alone program, in order to get started, a successful program will need, at a minimum, a director or coordinator at the lead site and a working committee made up of representatives from various levels of the organization to provide feedback and logistical support. If other sites are involved, the program will need input and support from each site’s administrator and a designated contact person to manage activities and act as a resource for students. At least two project groups have also realized that having a dedicated space for employees involved in career ladder activities to meet for classes or study groups, can be quite beneficial for the program. (See profiles below of Heritage Hall and Intercare Alliance.)

Critical components of a successful transition program include the following:

- A program director or key person (at each site)
- Outreach to potential participants
- Career counseling/advising
- Academic assessments
- Courses and workshops to address specific knowledge and skill gaps
- Institutional practices that support participants and address barriers

Within the ECCLI funded sites, many of these components were implemented with the CNA career ladder programs. Unless an employee is already academically prepared to enroll in an LPN program, s/he would be expected to complete the facility’s CNA II and III trainings as part of working toward their ultimate goal of becoming a nurse. As they become involved in bridge activities they will continue to receive advising and support.
**Program Director**

A strong program director (or coordinator) can be the key to a program’s success. To be effective, s/he must understand and address the needs of all stakeholders, including the program participants, their immediate supervisors, administrators, educational partners and the funding agency. A promising candidate should have experience working with adult learners and experience with issues affecting the elderly. It might also be helpful if s/he were a nurse. As the project lead, the program director is the point person for questions and support on site and at partner sites as well. S/he will be in charge of all logistical aspects including which courses are offered and when, where, and by whom they will be taught. To manage this, she will need to work closely with educational partners. The program director is also charged with project administration and data collection. If there are other facility partners, a designated point person to disseminate information and handle on-site issues is highly recommended.

**Outreach**

Facilities have used a variety of strategies to inform workers about career ladder opportunities including bridge to nursing activities. Strategies include mailing fliers out with individual paychecks, posting fliers throughout facilities, putting announcements in the organization’s newsletter and promoting the program at unit and facility-wide meetings. In addition, based on the scheduled cycle of activities, the program coordinator should schedule and promote group information sessions that allow workers from all three shifts to attend. These sessions provide more details about the program’s offerings and how workers can access them. Early in the process, workers are typically encouraged to complete a survey or questionnaire about their personal career plans and goals. (Case Study: Heritage Hall) Program staff then review the responses and arrange one-to-one meetings with interested workers.

A common occurrence when a program like this is offered within a facility is that the most highly motivated employees take advantage of the initial round of offerings. Once the most highly motivated employees have enrolled in program activities, those still hesitant may need more intensive outreach. At this point, written descriptions and large group information sessions may not be enough to get them involved. The program coordinator or other involved administrators may need to approach employees individually and encourage them to complete the interest survey and meet with a career counselor. The program coordinator should also look to the first group of career ladder participants who are typically excited about their experiences and eager to spread the word. As employees move along the career ladder, they will continue to need ongoing support and encouragement from the program coordinator and their managers.
Career Counseling/Advising

At the first career counseling or advising session, the employee typically begins to draft an individual career action plan which includes short and long-term goals as well as potential barriers for meeting these goals. This written action plan provides a concrete guide for employees and is particularly helpful because it breaks long-term goals into attainable steps. (Case Study: Heritage Hall) The education plan may include goals related to obtaining a GED, improving language skills, becoming a nurse or obtaining a certificate or degree in another field. This process can be both exciting and anxiety producing for participants because many of them have not had any formal schooling in many years and until now, may have thought that advanced training such as that needed to become a nurse was far beyond their reach.

In addition to a discussion of career goals, career counseling typically includes information about education and training opportunities offered by the facility. Depending on the specific goals and how prepared the employee is, educational programs offered by nearby colleges or universities may also be reviewed. For employees who have clear goals and the self-motivation to accomplish them, formal counseling sessions may only occur once or twice with informal check-ins over time as necessary. For these few, a review of the available nursing programs, their admission requirements and financial aid options may constitute the bulk of the discussion. Most employees, however, will need a substantial amount of support and remedial education in order to realize their dream of becoming a nurse. If they have the resources, most organizations will work with any employee who says that they want to work toward becoming a nurse even though it may take several years. For employees who are not interested in pursuing a nursing degree or formal education beyond that offered through the facility’s career ladder program, career counseling sessions offer the opportunity for the student to discuss problems that they are encountering with their supervisors related to their career ladder activities or academic difficulties that they may be uncomfortable discussing with the instructor. (Case Study: Westford House)

Career counseling may be provided by internal staff such as the staff development coordinator, other qualified staff or by an outside vendor with expertise in this area such as WorkSource Partners. (Case Study: Heritage Hall) Once the program is established, external vendors may then provide “train-the-trainer” opportunities, including guidance and materials so that internal staff can begin performing these services. Once an employee begins to take classes at the community college s/he can also access formal academic advising and informal support from course instructors.

Case Management

The coaching and support services provided to these workers may be done as part of a case management model. Case management includes the career advising component and also provides support to the employee to work through related issues which might hinder their efforts. These issues might include
financial pressures, time management, and the need to balance work, family and school responsibilities. “Case management is the continual process of assessing, planning, facilitating and implementing an action plan to achieve a specific goal or outcome....” (Case Study: Loomis) The number of workers who receive case management services and the extent to which they do will depend on the resources and focus of each facility.

**ECCLI Case Management Definition**

ECCLI defines case management as an employee-centered, goal-oriented relationship between a case manager, (internal or consultant), and an employee that is designed to promote career development, increased job satisfaction and performance. This process includes coaching and supporting an employee from career planning and assessment, through properly sequenced services, (most often including training), to achievement of the employee’s selected goals. It also involves helping an employee plan for participation in training, offering feedback and encouragement, strategizing to address issues as they arise, and keeping current with all required reporting.

Case management also includes working with the organization, on behalf of the worker, in the form of trouble-shooting, problem-solving, and ongoing progress communication with the employee’s supervisors, instructors, and administrators. Because of this, case management is much more than a line-staff function, and requires it be part of a comprehensive approach and have the support of the entire organization to be successful.

Key case management concepts:

- One service strategy for the employee
- Relationship with mutual respect
- Partnership at the employee and organizational levels
- Flexible, creative problem-solving approach

**Academic Assessments**

Early in the process, based on their expressed goals, most facilities require participants to complete some type of academic assessment. To assess the reading, writing, and math skills of their employees, most facilities use the assessments offered by their partner community colleges including the College Placement Test (CPT), the Test of Adult Basic Education (TABE) and ESL assessment tools as needed. Because some employees have shown reluctance or fear of taking the CPT, facilities try to make the experience less stressful by offering it on site when possible (Case Study: Westford), or providing transportation for a group of employees to take it together on the campus. Some facilities offer a math or English “brush up” to help employees to prepare for the CPT, but most just help to familiarize people with how to take a test on a computer.
Results of the assessments are useful for both the individual and the facilities. For the individual, an understanding of their current academic skills is important as they consider their short and long term career goals. The facility, meanwhile, will use the aggregated assessment results to determine at what levels the majority of employees are currently functioning and therefore where the most need for remediation might be.

**Institutional Practices That Support Participation**

In order for a career ladder program and a subsequent bridge to nursing program to be successful, administrators and supervisors need to do more than voice their support for program components. They also need to demonstrate their support financially and by being flexible with operational routines which might make it easier and less stressful for workers to take advantage of the educational opportunities offered.

Given the time constraints that many entry level workers face, asking them to attend training on their own time is unlikely to lead to a high level of participation. This is, in part, why the legislation which authorizes ECCLI requires that facilities agree to pay employees their regular wages for at least 50% of the time that they spend in training or class in order to receive ECCLI funding. The employee then “contributes” the remaining time. Some facilities believe that having employees contribute some of their own time strengthens their commitment to complete a training component. Other facilities with differing philosophies and greater resources pay employees for 100% of the time spent in class. Regardless of the exact figure, a facility’s willingness to participate in an ECCLI career ladder project and agree to the required payment for release time sends a strong message to their workers about their commitment to them. If classes are offered on site, which many are, this can also be very helpful to employees whose lives may already be overscheduled.

Other supportive practices include flexible scheduling, tutoring, assistance with college applications and financial aid forms, support for group study and employee referrals to community resources. (Case Study: Heritage Hall) Flexible scheduling for students can be crucial but really only works for a unit to the extent that it can be done in advance. Last minute changes in course scheduling can cause coverage issues and may create resentment among coworkers. Most of the projects also offer academic tutoring to students engaged in bridge activities either through the college, qualified internal staff or in the case of the Intercare Alliance, by residents in their assisted living facility.

In terms of peer support, Mount Wachusett Community College (MWCC) and its partners believe that moving students through activities and courses as a cohort can have a tremendously positive impact on
student success. Moving students through as a group allows them to form supportive relationships with each other and should start as soon as possible, with the remedial courses if possible.

**Common Courses and Workshops**

The majority of those who take the College Placement Test (CPT) are not ready for college level work. Those tested tend to break down into three levels of student need or readiness: remedial, college level developmental courses or college level. If a facility decides to focus on those employees needing remedial education, it would most likely offer sections of basic reading, writing and math. Another facility with students who placed higher on the assessments might offer sections of college-level developmental math or english. Students completing these courses would then be ready for English composition, introduction to psychology or other general education requirements for the nursing program. Once they reach this point, several of the programs require students to complete a student success workshop while others encourage students to take it and offer to pay for it. A student success workshop is a standard offering at all of the campuses and typically covers study skills, test taking, time management strategies, and how to do research, etc. As ECCLI projects have expanded their collaboration with the community colleges, some schools, including Mount Wachusett Community College have considered developing student success workshops focused specifically on students enrolling in nursing programs.

**English for Speakers of Other Languages (ESOL)**

Most of the facilities expected that a large number of their employees would need English language remediation through ESOL courses. The assessment results confirmed that many entry-level employees lacked the literacy and general academic abilities to participate in the clinical career ladder offerings such as CNA II Restorative. Many needed ESOL or a basic education “brush up.” This applied to housekeeping and dietary personnel as well as many who were already working as CNAs, even though a basic facility with English is necessary to become certified. Despite the need for ESOL, several sites reported difficulty in enrolling students in the classes. At Westford House, the partners expected ESOL classes to be in high demand. When it came time to run the classes, however, there were not enough students; most either had transportation barriers or worked multiple jobs and could not dedicate time to the classes.

At the Intercare Alliance, employees tested into several different levels of ESOL ranging from beginning to advanced. Because of the difficulties of attending classes, even though the course was taught on site by QCC, they didn't have enough students to run a separate class at each level. The class that they eventually ran included a mix of several levels, which makes instruction more difficult and individual progress slower, even if the instructor is highly skilled.
The following section contains a brief description of the ECCLI projects which have developed and implemented a substantial bridge to nursing program. Some of the projects focused on employees who just needed support and encouragement, not academic remediation, to be ready to enroll in a nursing program. Others focused their project activities on the largest group of employees, usually those who needed remediation in several areas. As discussed above, each project had a project director and provided support services to participants including career counseling and case management, to the extent that resources allowed. In those instances where these services were not specifically supported by grant funds, the project director or other qualified staff provided these services informally. The courses and workshops that were offered were fairly similar although approaches vary to address the specific needs of the facility and its participants.

Heritage Hall, in collaboration with Holyoke Community College (HCC), has spent the last four years developing their educational programs into what they term the Campus on a Campus (COAC). Through this program, they provide college-level and pre-college courses on site to employees and to the community at large. During its first year, based on the needs of the organization and the employees, the program included assessments, career counseling, workshops and courses in adult basic education and pre-nursing courses including introduction to psychology. The project also allows students access to PLATO, self-directed learning software which covers all academic topics from K-12, GED preparation and preparation for the Nursing Entrance Test. Since the first year, English 101, sociology and human development, typically part of a nursing education program, have been added. Offering these courses to students before they enroll in and begin their actual nursing courses allows them to “lighten their load” and increases their likelihood of success. At Heritage Hall, the COAC Learning Resource Center is open throughout the day and offers the opportunity for informal check-ins with program staff. It also maintains a healthcare library, provides internet access and has computers available for students to use PLATO.

The success of the COAC Learning Center is due, in large part, to strong leadership demonstrated by key administrators from the start. They have been involved and committed throughout each phase of programming and have successfully communicated their enthusiasm and high expectations for each program component and each participant. Early on, the management team worked closely with the program director to design a three tiered program management structure including the steering committee, the advisory committee and the implementation team. The steering committee is the operational group for the program that sets up and implements program activities. It is
run by the program leader and program director. The advisory committee, comprised of the administrators and other departments heads, oversees the program as a whole and reviews the actions of the steering committee in light of the corporate mission and its policies. It may include members from external partner organizations. The implementation team includes nurse managers and other front line supervisors and is responsible for scheduling, staffing and other implementation issues that arise. Each of these groups meets regularly to review program activities and provide feedback based on their role within the overall structure. Participation from administrators and supervisors at all levels of the organization has promoted support of the educational programs which has been crucial, particularly as new components are rolled out.

Heritage Hall is also collaborating with **Loomis Communities** (Loomis), a continuing care retirement community and industry competitor located just twelve miles away. In previous rounds of funding, in addition to career ladders programs for CNAs, Loomis focused on designing and implementing a comprehensive, system-wide culture change initiative. With Round Six funding, Loomis agreed to share its knowledge and experience to help Heritage Hall implement a similar culture change initiative. At the same time, Heritage Hall is working with staff at Loomis Communities to develop, among other services, a bridge to nursing program. The immediate goal is for three Loomis employees to enroll in the practical nursing program at Holyoke Community College.

The **Intercare Alliance**, a group of more than ten extended care facilities has worked with Quinsigamond Community College (QCC) for several years to offer both an LPN training program and Bridge-to-LPN courses and support services to employees from the various facilities. During the spring of 2002, the Alliance worked with QCC to develop a proprietary practical nurse program to be offered in the evening, exclusively for Alliance employees. The twenty-four students who enrolled in this program were chosen from an original group of forty-eight high performing employees identified by the facilities. Initial assessment results for this group showed that the majority would need remedial coursework in both math and English to be prepared to enroll in college level courses. Once this remediation was complete, the 24 most qualified students attended classes in human biology, psychology and a non-credit student success course to prepare them for college-level work. These students also completed a math for meds class before they actually started the PN program.

Based on the assessment results for the second group of students, the Alliance realized that they would require more extensive remediation and support services in order to be successful since many lacked a high school credential, and had significant English and math skill deficiencies. Working with WorkSource Partners and QCC, the Alliance developed bridge-to-nursing courses and supports, which include formal and informal outreach mechanisms, one-on-one career counseling and needs assessments for interested employees, and college prep classes in math and English. When they are ready, students can then take college-level biology and psychology.
During this time, the Alliance also established the Notre Dame Educational Bridge Center. The Center, located at Notre Dame Extended Care Center, has three classrooms, computers and study space for students and office space for program staff. The center is open to employees from all members of the Intercare Alliance and the courses taught by QCC take place here.

At Westford House, the career interest surveys showed that most employees fell into one of two groups: those who needed to obtain a GED before moving on and those who had a high school diploma or its equivalent but tested as needing remediation in all areas. Based on these results, the facility offered a 160-hour GED prep course and sections of basic English, basic writing, basic math and algebra. Once employees have completed necessary remedial courses, the program offers the following courses on a rotating basis: pre-algebra, algebra, introduction to college reading, English composition, introduction to psychology and introduction to cultural anthropology (several of which are required for the practical nursing program.) For students who are anxious because they have been out of school for many years, the program allows people who place into a higher level course to take a lower level course in the same subject if space is available. (Case Study: Westford House) After successfully completing the above college-level courses, students are ready to take the Nursing Entrance Test, the first step to enrolling in a nursing education program. Unfortunately, the first group of students who took this exam did poorly. The program now offers an “LPN exam coaching class,” to assist students with this step.

One problem that Westford House and other projects encountered was a high number of students dropping out of courses before completion. This became quite costly since the facility had to pay for the student’s slot regardless of completion. To deal with this, Westford House required students to sign a contract stipulating that they had until the end of the second class session to decide whether they would continue or not. Addressing the issue in such a forthright manner seems to have helped; there have been fewer drop outs since this policy was adopted.

Benjamin Healthcare Center (BHCC) is working with the Worker Education Program (WEP) of the Service Employees International Union 2020 (SEIU) of which their employees are members, to provide the majority of bridge to college activities. For Benjamin Healthcare employees who are interested in becoming nurses, the WEP offered ESOL classes, and an external diploma program. This program provided a “brush up” on reading, writing and math for its graduates who want to pursue a college certificate or degree program. For students who were ready, BHCC, through Roxbury Community College, then provided one section each of college level math, English, science and human physiology. Due to funding restrictions, BHCC has been unable to offer ongoing, formal career advising and case management services, but the teacher of the above
courses has developed strong bonds with the students and offers informal counseling and support as needed.

Within the **Boston Home** partnership, employees from each of the three facilities who were interested in becoming nurses were recruited and then underwent baseline testing to determine their current academic and literacy levels. The 30 CNAs with the highest skill levels were selected to participate in a 45-week passages to nursing course to be offered two hours per week over three 15-week sessions. The course was intended to help students develop skills that they would need to succeed in college level nursing courses including study skills, time management and critical thinking skills. The major difference is that this would be done in the context of medical language and nursing competencies. The baseline testing indicated, however, that most participants would need a strict focus on basic literacy skills before any medical contextualization was attempted. Therefore, the first 15-week session was revised to focus on broader concepts and comprehension exercises and was taught by an ESL instructor with whom the facility had worked in the past. As planned, the second and third sessions of the course, taught by a nursing faculty member, provided language skill building exercises using nursing fundamentals concepts and vocabulary. Students were also given the opportunity, over the summer break, to work on developing computer skills at their work site.

The passages course requires a strong commitment from students and a fair amount of studying outside of class. At each of the three sites, a site coordinator was identified to provide career counseling and opportunities for application and review of materials to both individual and small groups of students. The site coordinators eventually developed a mentoring relationship with each of the program participants. The program director believes that the students who continue to attend this course have also formed a strong bond, providing essential academic and personal support to each other.

The **Cape Cod Healthcare** project focused primarily on twenty employees chosen from seven sites who were brought together to form a nursing class cohort. The practical nursing program offered to these students was provided by the Upper Cape Regional Technical School on the campus of the Cape Cod Regional Technical School located on the Mid-Cape. The expectation is that the Mid-Cape school will obtain approval from the Board of Registration in Nursing in the near future to offer a similar program themselves. The bridge to nursing services that these students received prior to entering the program included prep classes to take the Nursing Entrance Test (many did not pass it initially) and a twelve hour prep class offered during the summer before classes started. This class included study skills, test taking, and time management strategies.

With supplemental funding, the **Leo LaChance Center**, in partnership with Mt. Wachusett Community
College (MWCC) and six other facilities expanded the career ladder activities that they initially developed with Round Two funding. One of the key components of their project expansion was an intensive Bridge-to-LPN/RN program. The first step for the program was a recruitment campaign conducted on all sites to identify employees wishing to become nurses. All interested employees were then encouraged to take the CPT at MWCC. A review of the top performers showed that most would need college level developmental courses in reading, writing, and math before they could begin the actual courses within the LPN program. MWCC, believing in the effectiveness of the cohort model, moved these students quickly through the remedial courses as a group. Remedial classes in writing, reading and math were run on a seven-week schedule meeting two times per week for three hours. Most of the students took all three sections. Once these remedial courses were complete, the students were encouraged and supported to take English 101, human biology, and introduction to psychology prior to enrolling in the nursing program. In addition to these courses, bridge students were also encouraged to attend a ten-hour student success training and a ten-hour science prep training which covered such topics as: how to read a science textbook, how to conduct laboratory assignments and how to prepare for science exams. Workshops similar to both of these trainings are also offered at many of the other community colleges. Students in this cohort also received intensive case management support from the program coordinator.

Neville Center and its facility partners worked with Cambridge College to identify employees from across the sites who were interested in becoming nurses. Based on the assessment results, the project offered prep courses to students at two distinct levels of readiness. One group enrolled in a college credit-bearing readiness course called “Learning to Learn.” It covered computer skills, math, reading and writing and was taught for three hours per week for 12 weeks. Students who completed this course will likely require additional academic preparation prior to enrolling in college-level courses. A second group of students were assessed to be college-ready. To prepare them for the rigor of college courses, this group was offered a six-week non-credit course similar to the student success workshops offered by the community colleges which focus on study skills, writing research papers and effective time management.

Non-ECCLI Bridge to Nursing Programs

All of the community colleges offer support services to students working toward enrollment in both practical nursing and registered nursing programs. The services include academic advising by nursing faculty whenever possible, to plan a student’s course load and sequence of courses; student success workshops focused on skills and strategies to improve performance in prerequisite science courses such as human biology; and the formation of study groups to provide peer support for historically challenging prerequisites such as chemistry.
Key components for a successful bridge-to-nursing program, as identified by program coordinators and their education partner counterparts:

- A project coordinator at every site to do counseling and manage program activities
- Individual support services such as tutoring and advising
- Peer support, both formal by maintaining a cohort and informal through student-initiated study groups

Conclusion

The projects reviewed above are all at various stages in terms of their bridge to nursing programs. Some already have practical nursing graduates who have passed their licensing exams and are now working in their new role within their facility. Others have employees who are currently enrolled in practical nursing programs. Instead of waiting until each project had completely implemented their bridge program, it is important to share their experiences at this midpoint to inform and assist other facilities who may have employees who are interested in becoming nurses and will need a bridge to nursing program to achieve their goals.

The facilities and their partners have invested an enormous amount of staff time and financial resources to develop and implement the basic career ladder for CNAs. Now, through continued funding, they are working to develop courses and supports to give some of their CNAs the opportunity to become nurses. Although potentially costly, these courses and supports are crucial to the success of students who are working through these necessary bridge to nursing activities.
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