

Attachment A: Health e-Workforce Consortium Abstract

1. **Applicant Name:** Bellevue College
2. **Applicant City/State:** Bellevue, Washington
3. **Consortium Members and State**

Consortium Member Colleges	Location
Bellevue College (Lead)	Bellevue, WA
Bellingham Technical College	Bellingham, WA
Clark College	Vancouver, WA
Clover Park Technical College	Tacoma, WA
Pierce College	Tacoma, WA
Renton Technical College	Renton, WA
Spokane Community College	Spokane, WA
Whatcom Community College	Bellingham, WA
Northern Virginia Community College	Annandale, VA

4. Areas Served by Grant

Cities	Counties Served	State
Online course delivery to all cities in Washington and Virginia	Clark, King, Pierce, Spokane, Whatcom	Washington
	Fairfax, Prince William, Alexandria, Arlington, Fauquier, Spotsylvania, Loudon.	Virginia

5. **Total Funding Request:** \$11,775,297
6. **Subtotal Requested Funding Amount by Consortium Members:**

Consortium Member Colleges	Location	Funding Request
Bellevue College (Lead & Member)	Bellevue, WA	\$6,365,057
Bellingham Technical College	Bellingham, WA	\$643,796
Clark College	Vancouver, WA	\$542,266
Clover Park Technical College	Tacoma, WA	\$602,142
Pierce College	Tacoma, WA	\$571,459
Renton Technical College	Renton, WA	\$751,429
Spokane Community College	Spokane, WA	\$754,109
Whatcom Community College	Bellingham, WA	\$531,281
Northern Virginia Community College	Annandale, VA	\$1,013,758

7. **Project Name:** Health e-Workforce Consortium
8. **Project Description:** The Health e-Workforce Consortium will provide training in the high-demand, high-wage field of Health Information Technology for veterans and their eligible spouses, TAA-eligible individuals, and others, while addressing gaps in educational

infrastructure and stimulating employment. Project initiatives to address these gaps include: a) Development and pilot of a Federally Registered Health IT Apprenticeship, launched in the veterans community; b) National Veterans Health IT Career Services Initiative; b) Curricula for new core Health IT courses and specialized areas of concentration; c) Evidence-based online course materials; d) Faculty development in Health IT; e) Training of 2,093 TAA-eligible individuals, veteran and their eligible spouses, and others in Health IT and Health IT-infused health care professions; f) Evidence-based student services to promote student retention and completion; g) A prior learning assessment model, and a subset for veterans; h) Development of EMR-STAR—a nationally accessible, cloud-based electronic medical record software access point for academic use; i) Development of statewide IT and Health IT core curriculum in Washington; j) A cross-institution collaborative program development model; and k) Expansion (WA), creation (VA) and modeling of State Health IT Industry – Education Councils and State Community College Health IT Collaboratives.

Credentials to Be Developed and Awarded:

Certificates	Certificates	Degrees
Health IT	Health IT-Infused Medical Assistant	AAS - Nursing
Healthcare Analytics	Health IT-Infused Radiologic Technician	AAS - Health IT
Health IT Database Administration	Health IT-Infused Physical Therapy Assistant	
Health IT Security	Health IT-Infused Pharmacy Technician	
Healthcare Network Administration	Health IT-Infused Hemodialysis	
Mobile Healthcare Applications		

9. Populations to Be Served:

TAA-eligible workers in Washington and Virginia	Veterans and their eligible spouses in Washington, Virginia and nationally	Dislocated and other workers in Washington and Virginia
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10. Targeted Industry: Health Information Technology

11. Employer Partners:

Health Information Management Systems Society (HIMSS)	Center for Healthcare Information Research and Policy (CHIRP)
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Washington Health IT Industry–Education Council	U.S. Department of Veterans Affairs
MultiCare	S’Klallam Tribe

12. Public Workforce System Partners:

- Seattle-King County Workforce Development Board
- Northwest Workforce Council
- Pierce County Workforce Development Council
- Spokane Area Workforce Development Council
- Southwest Washington Workforce Development Council
- Washington State Labor Council
- Virginia Department of Workforce Development Rapid Response Team

13. Other Key Partners: Washington State Labor Council; The National Information, Security, and Geospatial Technology Consortium, Collin County Community College District

14. Public Contact Information: Patricia Dombrowski, Director, Life Science Informatics Center, Bellevue College, Bellevue, WA; 425.564.3164; patricia.dombrowski@bellevuecollege.edu.

15. Percentage of OER Program Materials Developed vs. Percentage of Licenses or Purchased Program Materials: 100% of program materials will be developed as open educational resources. Post grant sustainability of EMR-STAR academic access to electronic health records may require subscription, through a nonprofit entity.

16. Data Tags: Assessment technology; Career pathways; Certificate attainment; Civic and community engagement; Competency-based training; Degree attainment; Employer partnership; Enhanced course articulation; Enhanced student services; Health information technology; Industry-driven competencies; Industry-recognized credentials; Job placement; Mentoring; Mobile devices; Modular curriculum; Online teaching/learning; Open educational resources; Registered apprenticeships; SCORM; Skill Assessments; Stackable credentials; Technology enabled learning; Veteran student services; Web based training

SECTION 1. STATEMENT OF NEED

The *Health e-Workforce Consortium*, composed of nine community colleges, workforce, industry and labor partners, proposes to expand and improve the ability of community colleges in Washington, Virginia and throughout the United States to deliver education and career training programs in Health Information Technology (Health IT). In addition to TAA-eligible workers, a special focus is assisting U.S. military veterans and their eligible spouses to enter this high-demand field. The project opens wide the opportunity to enter a high-demand, well-paying field to the 300,000 veterans returning from Iraq and Afghanistan,¹ their eligible spouses, TAA-qualified workers, and others.

Distinct from medical records and coding, Health IT is a discrete program of study characterized by comprehensive management of health information across computerized systems and its secure exchange between consumers, healthcare providers, government and quality entities, and insurers. Differing from IT in other sectors, applications and systems share a unique set of parameters within healthcare. They are very much tied to patient safety and confidentiality, as well as continuous feedback for medical research, quality of care and operational efficiencies. Government regulations now drive implementation of information technology in healthcare, and create an ever growing need for Health IT workforce.

Health information technology is increasingly viewed as the most promising tool for improving the overall quality, safety and efficiency of the health delivery system.² IT is found in every healthcare setting and extends well beyond the implementation of electronic medical records. In addition to healthcare providers, medical device manufacturers, clinical software vendors and

¹ Major Brian Ketz, Military Fellow, Department of Labor. ONC Community College Consortium, conference call, March 22, 2012.

² Chaudhry, B., Wang, J., & Wu, S. et al., (2006). Systematic review: Impact of health information technology on quality, efficiency, and costs of medical care, *Annals of Internal Medicine*, 144(10), 742–752.

insurance companies all must achieve interoperability with clinical systems to meet new federal expectations. To prepare the workforce, community colleges must offer certificates and degrees which support the broad base of IT in healthcare. The Washington Industry-Education Council reported that currently only two Health IT programs are available for learners out of 34 community and technical colleges.³ Northern Virginia Technical College (NOVA) is one of only two Virginia community colleges, out of 23, with a Health IT program.

High quality, engaging curriculum is needed to create healthcare concentrations in both IT and Allied Health programs. Faculty must have the opportunity to understand Health IT. Led by Bellevue College, the nine-college *Health e-Workforce Consortium* will leverage two significant recent federal investments in community college Health IT, amplifying and extending both, and will provide a technology-intensive infrastructure for community college Health IT program development across the nation. Specifically, the *Health e-Workforce Consortium* will:

1. Develop and pilot a Federally Registered **Veterans Health IT Apprenticeship**.
2. **Develop and pilot 10 new Health IT certificate programs** and infuse Health IT into six existing healthcare programs to address employer-identified gaps. These efforts will leverage the \$82M federal investment (\$6.4M to Bellevue College) by the Office of the National Coordinator for Health Information Technology in the Community College Consortia to Educate Health IT Professionals by building on newly developed curricular resources.
3. **Train 2,093** veterans, TAA-eligible individuals, and others in high-demand, high-wage Health IT and Allied Health professions.

³ Washington Health Information Industry-Education Council. (2012). Health IT education resource inventory. Retrieved from <http://www.healthit.wa.gov/documents/inventory.pdf>.

4. **Leverage a current National Science Foundation award** to Bellevue College by implementing a **national, entry level Health IT certification**, as an element of the Veterans Health IT Apprenticeship and other certificates created by the Consortium.
5. Create dynamic, multi-faceted **faculty development** for IT, Allied Health, and Nursing instructors who are charged with educating new professionals for careers that increasingly require knowledge of Health IT.
6. Develop **cloud-based academic access to electronic medical record (EMR)** software for student use, to overcome the most significant single challenge in preparing workforce in Health IT today, and scale for use nationally and sustainably.
7. Implement a **National Veterans Health IT Career Services Initiative** in partnership with the largest Health IT professional association, the Health Information Management and Systems Society (HIMSS).
8. Implement a model for **State Community College Health IT Collaboratives**, and **State Health IT Industry–Education Councils** and provide consultation to states interested in adoption.
9. Create and implement a **Prior Learning Assessment model** for Health Information Technology, including a subset of considerations for veterans.
10. Provide robust and **innovative student services** through personalized academic coaching, technology-enabled feedback mechanisms, and digital prior learning assessment tools.
11. Actively **disseminate nationally**, all curricula, online course materials, tools, and best practices.

The impetus for this undertaking is to provide career-building opportunities for veterans, TAA-eligible workers, and others in this extremely fast-growing industry, and equip community

college faculty to make meaningful connections with curriculum and sustainable tools for content delivery.

i. Serving the Education and Training Needs of Veterans and TAA-Eligible Workers

Factor 1: Impact of Foreign Trade - The *Health e-Workforce Consortium* is made up of representation from Washington and Virginia. Both regions have significant military installations and veterans' communities. In 2010, the Bureau of Labor Statistics reported over one million unemployed veterans in the nation, 27,869 in Washington and 25,731 in Virginia.⁴ The 300,000 military personnel returning from Iraq and Afghanistan will increase the ranks of those who have served the country and are now in need of a career entry point into civilian life.

Since 2007, and as of 2011, 167 Virginia companies with 23,468 workers have been certified for TAA assistance. In Washington during the same period, 396 companies were certified, resulting in 10,746 eligible workers. Veterans constitute approximately 15% of Washington's 8,000 TAA enrollments.

All *Health e-Workforce Consortium* courses will be developed to support these constituencies. The strong focus on accessible, online learning programs is evidenced by commitment to web-based delivery, and courseware developed to Online Learning Initiative (OLI) and Center for Applied Special Technology (CAST) standards.

Company	TAW #	Type of workers	Decision Date
<i>Washington</i>			
AT&T Services	73986	IT professionals	8/4/2010
Hewlett-Packard Company	72867	IT professionals	1/25/2010
Continental Graphics Corp.	74745	IT professionals	2/17/2011
DP-DHL	74236	IT professionals	7/14/2010
Serena Software Inc.	74113	IT professionals	7/6/2010
Weyerhaeuser Corp. Hdqtrs.	73303	Corporate, admin, IT	6/2/2010
St. Joseph's Hospital	81246	Med transcriptionists	2/3/2012

⁴ Bureau of Labor Statistics. (20 May 2012). Employment situation of veterans [Press release]. Retrieved from <http://www.bls.gov/spotlight/2010/veterans>.

Lynx Medical Systems	75176	Medical coders	2/16/2011
<i>Virginia</i>			
EMC Corporation	74473	Software engineering	8/27/2010
Health Net, Inc.	70166Q	IT professionals	8/25/2009
DataDirect Technologies	74409	IT professionals	8/4/2010

Factor 2: Partnerships with Applicable TAA Agencies - Each of the nine colleges comprising the *Health e-Workforce Consortium* has partnered with and executed a Memorandum of Understanding with their local Workforce Investment Board (WIB). Examples of commitment include assisting with student tracking, identifying eligible students, contributing to Consortium Advisory Board, advising how best to serve students across agencies, and, especially, connecting workers with employers. The Seattle-King County Workforce Development Council has agreed to facilitate a process to extract Employment Security Division student data for these projects. Organized labor is another important workforce partner instrumental to the success of the project. The Washington State Labor Council will provide marketing and outreach services to promote Consortium awareness. Activities will include meeting with statewide Rapid Response Teams from One-Stop WorkSource Center staff. They will also provide training for Consortium Student Navigators regarding TAA funding procedures. Northern Virginia Community College (NOVA) will collaborate with the Dept. of Workforce Development Rapid Response Team. NOVA will ensure the Rapid Response Team staff is aware of Consortium Health IT programs, and provide them with marketing materials to facilitate referral of affected employees to Health IT program opportunities.

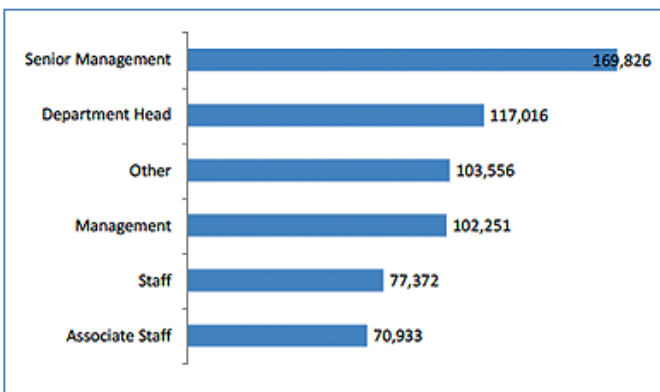
Factor 3: Education and Training Needs of Veterans and TAA-Eligible Workers in the

Communities to Be Served – Data from the Washington State Employment Securities

Department reveals the typical Washington TAA-eligible worker is 39+ years of age, and half of the eligible TAA population has some college experience—good indicators of suitability for

repositioning to Health IT employment. The TAA-eligible population in Washington includes dislocated IT professionals from companies such as AT&T, Hewlett-Packard, DP-DHL, NYK Business Systems America, Inc., Serena Software, and Weyerhaeuser. The mean age of trade-impacted workers in Virginia is 45. Of these workers, over 40% have attended college. In the past four years, 10 Northern Virginia-based employers have experienced TAA-certified layoffs. Eight of these 10 companies are STEM employers such as Hewlett Packard, Avaya, and Verizon. The need for job-focused training is apparent for the one million out-of-work and/or returning veterans and their eligible spouses. Veterans of conflicts are often uniquely suited to transition into Health IT employment. Most are technology natives trained and immersed in the digital tools of war. Many have assimilated the skills and experience to effectively intersect with digital systems, interoperability issues, mobile devices, and telemedicine technologies.

**Average Salary by Professional Level
HIMMS 2010 Compensation Survey⁵**



A National Science Foundation report characterizes the Gulf War II era veteran: “Many of the new veterans will have an interest in and talent for technical fields. Of enlisted members, 35% serve in electronics, communications, medical, or other technical fields.”⁶

Young veterans are generally better educated than their civilian peers, indicating capacity to succeed in Health IT programs. “In 2009 nearly half of Gulf War Era II veterans had some

⁵Healthcare Information Management & Systems Society. (2010). Compensation Survey Results. Retrieved from <http://www.himss.org/surveys/compensation/asp/index.asp>.

⁶ Report of the National Science Foundation Workshop on Enhancing the Post 9/11 Veterans Educational Benefit (2009). *Veterans’ Education for Engineering and Science*. McLean, VA: National Science Foundation. Retrieved from http://www.stem2veterans.org/sites/pdf/National_Science_Foundation_Workshop-Veterans_Education_for_Engineering_and_Science.pdf.

college or an associate degree, compared with 30% of nonveterans. Fewer than 2% of recent veterans had not completed high school, compared with about 14% of nonveterans.”⁷ The proposed Federally Registered Veterans Health IT Apprenticeship specifically addresses this demographic. Especially suitable for disabled veterans and a significant number of TAA-eligible IT workers, the apprenticeship is calibrated towards technologically-adept former service members who can benefit from online and on-the-job training.

Bellevue College’s experience directing the federally funded ONC Community College Consortium to Educate Health IT Professionals in the 10 northwestern states (2010-2012) informed proposal design. With over two years of experience developing and implementing Health IT programs for dislocated IT workers, and assisting them into related employment, lessons learned for optimization of effort and effect can be deployed across the Consortium. TAA-eligible workers have been among ONC student cohorts. Average participant age was 46, and often had decades-long tenure at companies such as AT&T. This segment of TAA-eligible workers has proven to be successful in a Health IT program of study, and employable upon completion. This evidence supports expansion of these training efforts to the TAA population across the nation.

TAA-eligible medical transcriptionists and medical coders also have an ideal skill base upon which to build and progress in Health IT. Others, including Allied Health professionals, are challenged by technology at the point of care. A lack of these skills can endanger patient safety and impede progress in health care transformation. The *Health e-Workforce Consortium* will devote resources to developing 1) curricula elements for infusion into existing Nursing and Allied Health programs, and 2) a Nursing and Allied Health program self-study process for

⁷Bureau of Labor Statistics. (20 May 2012). Employment situation of veterans [Press release]. Retrieved from <http://www.bls.gov/spotlight/2010/veterans>.

faculty. This online self-study tool will result in specific recommendations for elimination of dated curricula, addition of relevant, Consortium-developed Health IT modules, and faculty development resources.

Additional Employment Barriers: Veterans and TAA-Eligible Workers - Veterans and TAA-eligible workers are in transition and have deep work experience. Both need to reframe employment and all related aspects of life. The director of the Ohio nonprofit AMVETS Center notes a barrier for many veterans is lack of understanding about how military skills translate into civilian work, as well as the challenge of adjustment to civilian culture.⁸ Adjustment frequently includes acknowledgement that emotional support is required to ensure academic and employment success. *Health e-Workforce Consortium* member NOVA will provide leadership in training Consortium student success staff to support veterans. Bellevue College will leverage expertise gained from a current Microsoft grant aimed at community college veterans' services. Proposers have formalized a relationship with the dominant Health IT professional association, HIMSS, to welcome military veterans and their eligible spouses into the Health IT sector. TAACCCT support will underwrite a HIMSS National Veterans Career Services Initiative. "A HIMSS Hero's Welcome to Health IT" will provide a framework for veterans and employers to actively participate in the industry-driven initiative described in the sidebar adjacent to this section. TAA-eligible workers most suited to Health IT

A HIMSS Hero's Welcome to Health IT

- Convene employers
- Web job site: JobMine.himss.org
- Veterans Special Interest Group - conferences
- Veterans Academic Program Connector
- State Chapter Roll Out
- Monthly webinars by veterans, for veterans
- Vet to vet e-Mentoring
- Veterans Initiative Task Force/ Emerging Professionals Community

⁸ AMVETS Career Center. (2011). Career center for veterans to launch new initiative [Press release]. Retrieved from <http://www.thisweeknews.com/content/stories/delaware/news/2011/11/04/career-center-for-veterans-to-launch-new-initiative.html>.

will have a preexisting skill set in information technology--as do numerous TAA workers in Washington. Typical barriers noted within the Washington Health IT Community College Collaborative include: industry-recognized credentials, opportunities to acquire experience in a healthcare setting and a well-defined sense of purpose tied to a specific career goal.⁹ Proposed strategies are structured to address all of those barriers, and to continuously evaluate the efficacy of each intervention.

ii. Evidence of Job Opportunities in Health IT

As digitally-enabled healthcare grows, so grows demand for Health IT professionals. The U.S. Bureau of Labor Statistics forecasts a 20% gain in Health IT jobs, through 2020, and healthcare support occupations to grow by 34.5%.¹⁰ Job titles appropriate to Consortium graduates include Health IT Analyst, Clinical Informatics Specialist, Health IT Network Analyst, Database Administrator, Implementation Support Specialist, and Trainer. These positions are found in hospitals, clinics, physician practice groups, public health, insurance providers, long-term care facilities, clinical software vendors, and medical device manufacturers. The increased use of patient portals, digitized medical imaging, electronic health records, mobile devices for patient monitoring, and digital communication among geographically dispersed health care providers are all indications of the massive migration to computer-based systems occurring in the U.S. health care system. Not as well-recognized are the significant and ever-increasing data needs of health insurers, public health, pharmacies, and individual practitioners. Indisputably, healthcare is becoming a series of information-driven encounters structured around an emerging IT infrastructure alight with opportunity.

⁹ American Council on Education. (2010). Report on Veteran Success Jam Conference: *Ensuring Success for Returning Veterans*. Online.

¹⁰ Bureau of Labor Statistics. (2012). Occupational outlook handbook. Retrieved from <http://www.bls.gov/ooh/healthcare>.

Because Health IT is an emerging profession, limited state-level jobs data are available via the traditional routes. However, Health IT employers in Washington have affirmed workforce need most recently at two 2012 industry focus groups. Frustration with the lack of trained Health IT workers is well documented by the Washington Health IT Industry–Education Council. And in a 2011 survey of Washington Health IT employers conducted by Bellevue College, 96% of respondents indicated that current IT programs are not sufficient to fill workforce need in Health IT. Nationally, extensive evidence of workforce need in Health IT was assembled in 2009, to support an investment of over \$80M dollars of American Recovery and Reinvestment Act (ARRA) funding for this purpose. The ONC estimated at least 50,000 Health IT jobs would be created, due to regulations enacted to speed adoption of electronic medical records.¹¹ Results of a February 2012 survey of HIMSS members also point to the increasing need for new Health IT workers. Lack of staffing resources was cited as the most significant barrier to implementing Health IT. Nearly two-thirds of the 302 IT executive-level respondents expect to add staff in the next year to successfully implement IT initiatives.¹²

The e-Health Initiative, a nonprofit organization in the Health IT sector, warns there are more Health IT job opportunities than qualified individuals.¹³ Based on a 2012 national survey of 5,105 physicians, 35% of Washington physicians, and 34% of Virginia physicians have adopted electronic medical records¹⁴-- a meaningful barometer of the need for Health IT workers. The

¹¹ Hersh, W. (2010). The health information technology workforce: Estimations of demands and a framework for requirements. *Applied Clinical Informatics*, 1, 197–212. Retrieved from <http://skynet.ohsu.edu/~hersh/aci-10-workforce.pdf>.

¹² Healthcare Information Management Systems Society. (2012). HIMSS leadership survey: IT staffing shortage key barrier to meeting IT priorities. *Healthcare IT News*. Retrieved from <http://www.healthcareitnews.com/news/2012-himss-leadership-survey-it-staffing-shortage-key-barrier-meeting-it-priorities>.

¹³ eHealth Initiative. (2012). Issue brief: How the HITECH Act is helping generate jobs in Health Information Technology. Retrieved from <http://www.ehealthinitiative.org/resources/view.download/54/210.html>.

¹⁴ The Doctors Company Market Research. (2012). The future of health care: A national survey of physicians. Retrieved from http://www.thedoctors.com/ecm/groups/public/@tdc/@web/documents/web_content/con_id_004676.pdf.

Health e-Workforce Consortium will have national impact on this shortage by 1) developing and disseminating relevant curricula and innovative online courseware, 2) implementing faculty development, 3) creating efficient career pathways with stackable credentials, 4) providing training for industry-recognized entry-level Health IT credentials, 5) establishing cloud-based resources for student access to electronic medical records systems, and 6) enacting a national Veterans Health IT Career Services Initiative. The U.S. Department of Veterans Affairs is actively exploring a commitment to hire Consortium graduates, through the Veterans Health IT Apprenticeship (a Consortium project).

Factor 3: Understanding of Skills Required in the Targeted Industries & Occupations - The *Health e-Workforce Consortium* leaders are embedded in the Health IT sector through service on national and state boards, attending frequent addresses to national audiences regarding workforce development in the sector, and administration of national and state support for Health IT educational programs. Employers are engaged, and already participating in the important work the Consortium will advance and expand. The project's Executive Director is the current Chair of the HIMSS National Career Services Taskforce. HIMSS, the largest Health IT professional association in the world and the Washington Health IT Industry–Education Council have committed to active participation in the Consortium effort, including comment and review on curricula development.

iii. Gap Analyses

Factor 1: Gaps in Existing Educational and Career Training Programs - *Summary of community outreach process used to identify the organizations engaged.*

State Level: In preparation for this proposal Bellevue College founded the Washington Health IT Industry–Education Council in 2011. It is convened by the Washington Health Care Authority, a state entity providing policy recommendations to elected officials and administering health

benefits for over a million people. Council members represent the full spectrum of state healthcare employers, as well as all K-12 to graduate-level Health IT education programs. Input from two Council-hosted focus groups shaped Consortium goals. Council membership devoted attention to proposal design and committed to ongoing collaboration.

National Level: HIMSS, a principal partner, has supplied industry access, data, and expert guidance. The Department of Veterans Affairs provided access to its National Health Informatics Initiative work group, who are instrumental in defining the Federally Registered Health IT Apprenticeship. Also, assembled by Bellevue College for the new NSF-funded Health IT certification, a national Body of Knowledge Experts has defined entry-level competencies, which will inform Consortium curricula.

Gap 1: Faculty Development Needed in Health IT - Through ARRA funding, the Office of the National Coordinator for Health IT (ONC) invested in the development of Health IT curricula resources for educators and implementation of short-term training for students with either IT or healthcare experience. ONC funding disallowed faculty professional development, consistent with the aggressive timeline specified by ARRA. Now, a widespread need for IT and Allied Health faculty development is apparent and pressing. ONC Community College Consortia regional directors identified lack of faculty development as one of two principal limiting factors to workforce development in Health IT.¹⁵ The American Medical Informatics Association notes, “The use of electronic medical records is rapidly increasing. However, the integration of this technology into the education of health professionals has largely remained to be explored.”¹⁶

¹⁵ Health Information and Management Systems Society’s 2012 Annual Conference, Las Vegas. ONC Workforce Development Listening session - personal participation. February 21, 2012.

¹⁶ Borycki, E., Armstrong, B., Kushniruk, A. (2009). Proceedings of AMIA Annual Symposium: *From Prototype to Production: Lessons Learned from the Evolution of an EHR Educational Portal*. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2815372/>

When recently graduated nurses were surveyed about preparation during their nursing program, respondents showed unfamiliarity with using appropriate technology.¹⁷

In a 2012 survey of Washington community college faculty conducted by the Washington IT Center of Excellence, the majority of respondents strongly agreed that Health IT development is a priority. Two faculty constituencies are in need of professional development

to adequately prepare learners for employment. IT faculty require training and exposure to specific healthcare applications and systems, and direction regarding how IT is uniquely applied in healthcare. Allied Health faculty need understanding of how students interface with clinical IT systems, electronic medical records, and technology at the point of care. Hospitals and clinics are unwilling to continue to bear the cost of this training once students are onsite for their clinical rotations.

Gap 2: Health IT Curriculum Void - Curricular elements created with ONC funding are specific to one aspect of Health IT. A rich resource, they were intended to serve a short-term workforce need and are limited to a narrow range of specific workforce roles. It is time now to bridge the gap between ONC curricula and the implementation of evidence-based online courses. As workforce need rises rapidly in this sector, severe budget cuts prevent many community colleges from composing and implementing Health IT programs. Outside the narrow range of the ONC resources, little in the way of program building material is available. To meet workforce need,

Leveraging the ONC Investment

The ONC Community College Consortia has sparked health IT programs in over 100 community colleges

The *Health e-Workforce Consortium* will fan the flame by greatly broadening:

Faculty Development in Health IT

Evidence-Based Online Health IT Courseware for National Dissemination

¹⁷ Kovner, C. T., Brewer, C. S., Siratom, Y., Fairchild, S. (2010). New nurses view of quality improvement education. *The Joint Commission Journal on Quality and Patient Safety*, 36(1).

community colleges in Washington, Virginia and across the country require current, durable curricula and online courseware developed to the highest research-based standards.

Gap 3: Evidence-Based Materials and Student Support for Online Programs - A recent Columbia Teachers College study of 51,000 students in Washington State Community and Technical Colleges found strong evidence that “students were more likely to fail or withdraw from online courses than from face-to-face courses.” They also found that “students in online courses often complain of technical difficulties, a sense of isolation, a relative lack of structure, and a general lack of support, all of which may contribute to low completion rates.” They noted that colleges had “expended a substantial amount of resources to provide supports for online students and faculty. However, most of these supports are provided on a passive basis, rather than being proactively pushed to students and faculty.”¹⁸ The Consortium will apply and disseminate best practices in online course design and student support to promote persistence.

Gap 4: Inadequate Prior Learning Assessment Processes - Inadequate Prior Learning Assessment (PLA) processes impede student progress. In a six-year Center for Adult Education and Learning (CAEL) study of 62,475 students at 48 postsecondary institutions, data showed PLA students had higher persistence and graduation rates than other adult students.¹⁹ These results call for robust PLA options for adult learners. However, the CEO of CAEL, notes, “Lots of institutions have a PLA policy on the books but don't do much with it. An amazingly small number of people actually get credit for prior learning.”²⁰ Obstacles such as burdened faculty

¹⁸ Xu, D.X., Smith-Jaggars, S. (2011). *Online and Hybrid Course Enrollment and Performance in Washington State Community and Technical Colleges*. New York, NY: Community College Research Center, Teachers College, Columbia University.

¹⁹ Klein-Collins, R. (2010). Fueling the race to postsecondary success: A 48-Institution study of prior learning assessment and adult student outcomes. *The Council for Adult & Experiential Learning*. Retrieved from http://www.cael.org/pdf/PLA_Fueling-the-Race.pdf.

²⁰ Kamenetz, A. (2011). The transformation of higher education through prior learning. *Change*. Retrieved from <http://www.changemag.org/Archives/Back%20Issues/2011/September-October%202011/transformation-full.html>.

and administrators, and labor-intensive portfolio reviews will be removed by a dedicated Consortium Prior Learning Assessment Specialist to guide member colleges.

Gap 5: Academic Electronic Medical Record Access Resource - In 2012, all five regional directors of the national Community College Consortia for the Education of Healthcare Professionals agreed the single greatest barrier to workforce development in Health IT is lack of student hands-on experience with electronic medical record (EMR) software systems. Health IT software vendors are unwilling to provide affordable academic access—a sign of an emerging industry. To ensure that graduates are work-ready, the mission-critical curriculum development project described above (Gap 2) must be augmented with opportunities intended to give students hands-on experience with EMR systems. Currently, the cost is prohibitive for budget-strapped community colleges. Employers such as the New York Hospital of Queens and Children’s Hospital of Seattle have asked for a student resource to break this central barrier to workforce development efforts.

With TAACCCT support, a vendor-neutral, scalable resource under HIMSS’ respected auspices can provide nationwide EMR access to students, to equip them for employment. Though grant funding will support initial development, we anticipate this sustainable resource will be available to students through HIMSS on a subscription basis after the grant period.

Gap 6: Health IT Training Aligned with a Respected Industry Certification - HIMSS and Bellevue College are currently funded by NSF to create a national, entry-level technician certification in Health IT (CSHIMS), as well as preparatory curriculum. This long-established and productive academic-industry partnership now seeks TAACCCT support to open academic and career pathways in Health IT for veterans, TAA-eligible workers, and others, through the implementation of training programs aligned with the certification.

Veteran employment is a national priority. Health IT is a viable career option for technology-adept veterans and TAA workers. The CSHIMS credential is a productive first step toward well-paid Health IT careers for both groups. Apprenticeship, a well-established, productive path in the veterans' community, emphasizes practical experience and progressive mastery with clear supervision; apprenticeship mirrors military training.

With TAACCCT support, HIMSS can serve as a crossroads and neutral broker to connect Health IT employers and veterans. The HIMSS National Veterans Career Services Initiative will establish inroads, encouragement, and opportunity for veteran employment in the full spectrum of Health IT employment settings. Following the example of the Dept. of Veterans Affairs, they will also likely implement the Federally Registered Veterans Health IT Apprenticeship. As HIMSS raises awareness, and incites action, an entire industry can focus on this worthy national goal. Additionally, community colleges across the country will have a focal point for Health IT career resources and connection to the veteran community.

Gap 7: Continuous Industry Feedback Mechanism - U.S. higher education budget contraction began in 2009. Since then, efficiency in education has become an intense focus. Health IT education quickly obsolesces without targeted information from industry. To create and sustain a permanent employer commitment and connection, Bellevue College founded the Washington Health IT Industry–Education Council. Piloted in 2012, the Council has system-level members from all state K-12 through graduate Health IT related programs. They join high-level representatives from employer associations, such as the Washington chapters of HIMSS, the American Medical Association, and the Hospital Association. The Washington Health IT Industry Education Council is unique in the nation. Immediate value has been derived from the Washington pilot, noted by educators from other states, including Virginia, California, Ohio, and

Oregon, who are interested in replication. This fledgling organization has more to do in Washington, and, importantly, in other interested states. Proposed deliverables include: 1) Continuous employer/educator feedback loop to encourage program growth and workforce reception for graduates; 2) ‘Key Industry Expert’ series for educators; 3) State Health IT program inventory for prospective learners and advisors; 4) Dissemination of Council information to stakeholders via web and business social media; 5) Consultation with Virginia and other interested states, regarding Council development and implementation; and 6) Documentation of best practices.

Strategic Alignment - Collaboration with industry and industry associations to develop stackable credentials: The *Health e-Workforce Consortium* is structured around alignment with the largest, most prominent and dynamic national and state industry associations in the sector.

Concentration on employer driven associations, rather than individual employers was a strategic decision, supporting the project’s goal of broad national impact. HIMSS collaboration provides the greatest access to data, policy insight, industry principals and employers available. HIMSS depth and reach matches the Consortium’s ambitions. Regional alignment with industry is accomplished through state Health IT Industry–Education Councils, and state chapters of HIMSS. Each of these strong affiliations brings Consortium member colleges closer to workforce partners and representatives from public health, tribal health organizations and rural health providers, all of whom are active in HIMSS and Industry–Education Councils.

Additionally, interaction with members of the Department of Veterans Affairs National Health Informatics leadership has and will continue to strengthen the Consortium’s understanding of how best to serve military veterans, eligible spouses, TAA workers, and others.

Analysis of Gaps in Institutional Ability to Implement Core Elements				
Collaboration with industry to develop stackable credentials	Online learning programs to accelerate completion rates	Articulation agreements between applicant institutions	Capture & use of data for continuous improvement	Coordination with public workforce system organizations
Evidence -Based Design				
<i>Gap: Lack of hardwired connection to industry, for educational program review.</i> Proposed Actions: 1) Incorporate CSHIMS certification into stackable certificates; 2) Vet courses & certificates with state Health IT Industry–Education Council; 3) Define Apprenticeship by industry	<i>Gap: Lack of resources & expert contribution to courseware development & implementation.</i> Proposed Action: All Consortium courses will be developed for online delivery, incorporating OLI & CAST standards for uniform delivery	<i>Gap: Lack of resources to advocate & execute durable agreements based on best practices.</i> Proposed Actions: 1) Member College Presidents’ commitment to synthesis of an all-college Common IT Core Curriculum; 2) intention to articulate Health IT programs to the Bellevue College baccalaureate degree	<i>Gap: Lack of central procedures in alignment with DoL ETA reporting requirements & program continuous improvement expectations.</i> Proposed Actions: 1) Using proven design, the Consortium Data, Compliance & Reporting Mngr. will establish data tools & procedures	<i>Gap: Need for well documented avenues of information exchange & interaction.</i> Proposed Action: Activate proposal stage agreements with WIBS to assist Consortium with information gathering, employing best practices from TAACCCT Round 1 interactions
Stacked & Latticed Credentials				
<i>Gap: Lack of enduring, focused industry commitment to education program formation & sustainability.</i> Proposed Actions: 1) Apprenticeship & CSHIMS certification constructed using industry expert input supported by NSF.	<i>Gaps: Lack of state-wide coordination in the development of certificates & courses dead-ends students.</i> Proposed Action: Curriculum will be developed to rigorous Consortium standards, including inter-institution transferability	<i>Gap: Lack of resources to develop & execute articulation agreements.</i> Proposed Action: Consortium articulation agreements support attainment of stacked & latticed credentials, apprenticeship & industry recognized certification	<i>Gap: Need for standardized data exchange between colleges & state agencies, & among institutions.</i> Proposed Action: 1) Credential attainment & student progress will be part of student profile info. analyzed at Consortium level;	<i>Gap: Lack of information exchange regarding credential development & availability.</i> Proposed Action: Workforce partners in WA & VA are committed to connecting learners to training opportunities, across service areas,

2) WA Industry-ED Council vets 10 new Health IT certificates			2) Activate model for WIB-to-college data conveyance model	administered by various agencies
Online & Technology-Enabled Learning				
<i>Gap: Lack of current inflow of industry expectations for customized training for incumbent workers.</i> Proposed Action: Leverage recent industry partner (WA AMA; MultiCare Health System; Microsoft) participation in course development for ONC Region A; document & disseminate	<i>Gap: Lack of evidence based standards & professional development.</i> Proposed Actions: 1) Develop & implement online curriculum development & instructional design standards; 2) OLI & CAST best practices	<i>Gap: Articulation agreements between colleges at significant distance from one another, rendering them ineffective for many students.</i> Proposed Action: Prioritize geographic distribution of agreements, to serve place bound students	<i>Gap: Analysis of student & faculty data re:online learning is typically isolated & often archived without action.</i> Proposed Actions: 1) Student interaction & success data captured & analyzed via learning management system; 2) Academic coaches & faculty add context to analysis & improvement	<i>Gap: College faculty & staff lack connectivity to other perspectives from entities serving students in a variety of ways.</i> Proposed Actions: 1) Workforce system representatives serve on program/advisory boards; 2) Input to online education will strengthen continuous improvement
Transferability & Articulation				
<i>Gap: Program design can lack a business perspective that could impede student recruitment efforts.</i> Proposed Action: Leverage business perspective & guidance when planning credentials, such as messaging/ market position	<i>Gap: Lack of resources to make essential state infrastructure changes to online learning.</i> Proposed Actions: 1) Common IT Core Curriculum; 2) PLA; 3) All college articulation agreement to Health IT BA	<i>Gap: Lack of resources & collaboration facilitation necessary to advance this complex process.</i> Proposed Actions: 1) Incubate processes for articulation agreements; 2) Document & replicate	<i>Gap: No information base from which to draw conclusions regarding effectiveness of transfer & articulation agreements.</i> Proposed Action: Capture articulation & transfer data to track student persistence and academic path.	<i>Gap: Absence of the voice of workforce partners in the transfer & articulation process.</i> Proposed Actions: 1) Activate proposal stage MOU's; 2) Ask workforce partners for surveillance on best regional articulation & transferability practice & institutions positioned for agreement

Factor 2: Impact of Gap Analysis – The impact of identified gaps is discussed in the Needs section and throughout this document. In aggregate, gaps detailed above describe educators and institutions without resources, poised and capable of making sizable gains for veterans, TAA-eligible individuals, and others, in a dramatically expanding industry sector. Employment opportunity is demonstrable. However, TAACCCT students are hindered in their ability to attain it through lack of job-targeted curricula, ill-equipped faculty, web-based access to electronic medical record systems, stackable credentials, and employer connections.

SECTION 2. PROJECT DESCRIPTION

The opportunity to welcome, accompany and support military veterans, those dislocated due to overseas job migration, and others into the new and rapidly growing field of Health Information Technology motivates this proposal. Health IT is a bright light for employment. This Consortium will be a beacon to aspiring workers, especially unemployed veterans and TAA-eligible workers. *Health e-Workforce Consortium* project elements are derived from formative interaction with national and regional Health IT employers, and Health Information Management Systems Society (HIMSS). Significant direction was received from the sector's largest industry association, HIMSS. Guidance has been received from industry expert interviews; Health IT Industry–Education Council focus groups; and, as the by-product of Bellevue College's current funded Health IT projects, through the Office of the National Coordinator for Health IT (ONC) and the National Science Foundation (NSF).

Deliverables
1. Veteran's Health IT Federally Registered Apprenticeship
2. Curriculum development, piloting and meaningful national dissemination
-IT Common Core Curriculum
-Health IT Common Core Curriculum
-10 Certificates
-Curricular elements for infusion into Nursing & 6 Allied Health programs of study

3. Prior Learning Assessment model for Health IT, including a subset for veterans
4. Cloud-based national academic access to electronic medical record software applications
5. Faculty development, with virtual, live and recorded sessions for national dissemination
6. Recruitment, retention (example: individualized academic coaching), and employment services for Veterans, TAA-eligible and others
7. HIMSS National Veterans Health IT Career Services Initiative
8. Expansion and replication of Washington Health IT Industry–Education Council, and Community College Health IT Collaborative
9. Training 2,093 students, including TAA-eligible individuals, veterans and their spouses

i. Evidence-Based Design

Implementation Strategies - Eight institutions in Washington State will collaborate to identify common core courses in IT (aligned with the new Microsoft Technology Associate certificate) and Health IT (aligned with the new CSHIMS certification), solving credit transfer challenges for students. This much needed, cost-saving step for higher education aligns common core curriculum with industry certifications, and better serves students, saving time and money. Consortium online programs will be developed to evidence-based standards, derived from organizations such as Carnegie Mellon’s Open Learning Initiative (OLI) group (the gold standard in online course design). Critical elements in OLI courses include interactive learning environments that provide opportunities for students to apply and synthesize skills and knowledge, feedback mechanisms for learners, and the use of technology to track students’ progress and provide feedback loops. OLI’s research results are compelling. In comparison studies, OLI students often completed courses in half the time of peers in traditional courses. In one study comparing retention rates in a course at a large public university with that of OLI

students in a similar course, the OLI course had a 99% completion rate vs. 41% in the traditional course.²¹

Additional evidence-based online learning features include formative assessment and the incorporation of effective visuals. Reports from the National Science Research Council and other studies show that learning improves with timely and targeted feedback regarding student work.²² According to OLI, “results from a recent study show that students not only perform better from this continual feedback approach, but they can learn the materials more quickly.”²³ Applying sound multimedia principles is another research-supported method of promoting learner absorption of online content. Many studies have shown that learning is significantly enhanced when instruction includes both visual aids and verbal descriptions.^{24,25} The Consortium plans to incorporate all of these elements in online course design to promote student engagement, achievement, and persistence.

Research points to the increasingly important role of non-academic supports in student retention. Significant evidence suggests that early intervention through counseling and other student support services can improve student persistence and academic performance.²⁶ An extensive literature review in 2011 “identified the following mechanisms as instrumental to a student’s

²¹ Thille, C. (2010). Educational technology as a transformational innovation. *The White House Summit on Community Colleges Conference Paper*. Retrieved from <https://oli.web.cmu.edu/openlearning/files/theinitiative/publications/education-technology-as-a-transformational-innovation.pdf>.

²² Hattie, J. and Timperley, H. (2007). The power of feedback. *Review of Educational Research*, 77(1), 81-112.

²³ Lovett, M., Meyer, O., & Thille, C. (2008). The Open Learning Initiative: Measuring the effectiveness of the OLI statistics course in accelerating student learning. *Journal of Interactive Media in Education*. Retrieved from <http://jime.open.ac.uk/2008/14>.

²⁴ Davenport, J. L., Yaron, D., Klahr, D., & Koedinger, K. (2008). Proceedings of the 8th international conference on International conference for the learning sciences - Volume 1: *When do diagrams enhance learning? A framework for designing relevant representations*. Utrecht, The Netherlands. Retrieved from <https://oli.web.cmu.edu/openlearning/files/theinitiative/publications/davenporticls08final.pdf>.

²⁵ Clark, R. C., & Mayer, R. E. (2011). *E-Learning and the Science of Instruction. Proven Guidelines for Consumers and Designers of Multimedia Learning*. (3rd ed.). San Francisco, CA: Pfeiffer.

²⁶ Bailey, T. R., and Alfonso, M. (2005). *Paths to Persistence: An Analysis of Research on Program Effectiveness at Community Colleges*. New Agenda Series, 6(1). Indianapolis, IN: Lumina Foundation for Education. Retrieved from <http://www.luminafoundation.org/publications/PathstoPersistence.pdf>. [strong]

persistence in college: creating social relationships, clarifying aspirations and enhancing commitment; developing college know-how; and making college life feasible.”^{27,28}

Student coaching has been shown to be especially effective in improving student persistence in training programs. A Stanford University study tracked 13,500 undergraduates at eight colleges and universities. They found that students who received coaching had a 10-15% higher retention rate than their peers. The coaches checked in with students regularly, and provided guidance on goal-setting and tips on time management. The lead researcher added, “not only does coaching improve the likelihood students will remain in college, but expenditures on coaching are much smaller than the costs of other methods to encourage persistence in college.”²⁹

ii. Stacked and Latticed Credentials

Consortium Formation - The *Health e-Workforce Consortium* is composed of nine community colleges in Washington and Northern Virginia. Each member will develop and award industry recognized credentials.

<i>Health e-Workforce Consortium</i> Credential Development					
Institution	Area of Concentration	Certificate	Infuse Into Existing	Degree	Pilot
Bellevue	Associate Degree-Nursing		X		X
	Certificate-Radiologist Technician	X			X
	Certificate-Analytics	X			X
	Certificate-Health IT	X			X
	Certificate: <i>Certified Specialist in</i>	X			X

²⁷ Karp, M. M. (2011). Toward a new understanding of non-academic student support: Four mechanisms encouraging positive student outcomes in the community college. (CCRC Working Paper No. 28, Assessment of Evidence Series). New York, NY: Columbia University, Teachers College, Community College Research Center. Retrieved from <http://ccrc.tc.columbia.edu/Publication.asp?UID=860>. [strong]

²⁸ Jaggars, S. S., & Xu, D. (2011). Online and hybrid course enrollment and performance in Washington State community and technical colleges. (CCRC Working Paper No. 31). New York, NY: Columbia University, Teachers College, Community College Research Center. Retrieved from <http://ccrc.tc.columbia.edu/Publication.asp?uid=872>. [strong]

²⁹ Bettinger, E. & Baker, R. (2011). The effects of student coaching in college: An evaluation of a randomized experiment in student mentoring. (National Bureau of Economic Research Working Paper No. 16881). retrieved from http://ed.stanford.edu/sites/default/files/bettinger_baker_030711.pdf. [strong]

	<i>Healthcare Information & Mgt Sys</i>				
Bellingham	Associate Degree-Nursing Certificate-Radiologic Technician Certificate-Health IT		X X		X X
Clark	Certificate-Pharmacy Technician Associate Degree-Nursing	X	X X		X X
Clover	Certificate-Hemodialysis		X		X
NOVA	Associate Degree-Nursing Certificate-Medical Assistant Associate Degree-Health IT Certificate-Health IT		X X	X	X X X X
Pierce	Certificate-Medical Assistant Certificate-Healthcare Database Admin	X			X X
Renton	Certificate-Medical Assistant	X			X
Spokane	Certificate-Health IT Certificate-Mobile Health Applications	X			X X
Whatcom	Associate Degree-Nursing Certificate-Medical Assistant Certificate-Physical Therapist Assistant Certificate-Health IT Security	X	X		X X X X
All	Certificate – Core IT	X			X

All Washington colleges are previously affiliated through the Washington Health IT Community College Collaborative. Each member has identified an area of particular program strength in IT, Nursing, and/or Allied Health for curriculum development, piloting and national dissemination to Consortium standards. Final concentration decisions were based on suitability for veterans and TAA-eligible workers, in conjunction with a strong employment outlook. Northern Virginia Community College (NOVA) joined the Consortium to implement new curricula and leverage expertise in veterans outreach and academic service, increasing overall impact. Consortium collaborators were challenged with commitment to rapid program deployment, adopting leading edge instructional innovation, and fidelity to veterans and TAA-eligible learners.

The *Health e-Workforce Consortium* will sustain continuous guidance from national and state industry partners. These strong affiliations result in identification of high-value, high-demand

Health IT courses and credentials. Member college areas of concentration within Health IT build on an institutional strength. They include: information security for healthcare, data analytics for healthcare, and database administration in healthcare. These certificates in high demand areas will serve learners by providing stand alone or strategic learning, or as stepping stones towards a bachelor's degree. Consortium member college presidents have committed to work toward program articulation to the Bachelors Degree Health IT at Bellevue College. The proposed Veterans Health IT Apprenticeship is a landmark in the sector, and includes preparation for the HIMSS Certified Specialist in Health Information & Management Systems certification (now under development by Bellevue College, funded by the NSF).

To advance Health IT education nationally, the Consortium will actively disseminate project deliverables and best practices in prior learning assessment and veteran support through our extensive national Health IT network. All curricula and online course elements (SCORM-compliant and open source, Creative Commons licensed) will be available electronically through a web-based portal. Outreach and professional development for educators will include online live web meetings, modular demonstrations and overviews of programs and materials, and the EMR-STAR resource. The Consortium also plans to leverage the new DoL Health IT Virtual Career Network site to promote national uptake.

Prior Learning Assessment (PLA), although recognized as an important accelerator to student attainment, is a casualty of reduced funding in many states planning to implement *Health e-Workforce Consortium* curriculum and initiatives. The Consortium will provide leadership and resources for member colleges in this area. A Prior Learning Assessment Specialist will work with member colleges to facilitate credit for prior learning and provide standards of service and continuous improvement oversight. The Specialist will build on evidence based PLA foundations

established by groups such as the Council for Adult and Experiential Learning (CAEL)³⁰, the American Council on Education (ACE)³¹, and the Virtual Career Network (VCN)³² to garner credit for prior learning, including military training and experience. Veterans constitute a unique subset of students seeking PLA and require specialized evaluation services. A Health IT prior learning assessment model, and one for veterans, will be published and disseminated by the Consortium. Institutionalizing these practices will create sustainable impact, as colleges incorporate these methods and tools into standard operations.

iii. Online and Technology-Enabled Learning

In March 2012, Bellevue College completed an ONC project resulting in 4,720 Health IT students enrolled in 23 colleges in 10 states. Bellevue College alone customized online curriculum for more than 1,000 geographically dispersed VA medical facility staff. A high degree of experience and innovation resulted from these two years of successful technology-enabled learning development and implementation. All Consortium programs will be developed to the evidenced based standards in Section 2i. The Consortium will support and encourage transformative feedback on both content and user experience from learners, faculty and academic coaches, and will have mechanisms in place to act on this important input.

Health e-Workforce Consortium Online and Technology-Enabled Learning Standards -

To systematically increase the rate of completion for all learners, lead institution Bellevue College will establish evidence-based instructional design standards and consult with member college staff and faculty, drawing on documented best practices used by benchmark organizations such as Carnegie Mellon. The courses will also feature common navigational structures to create a consistent user experience for learners progressing through stackable

³⁰ <http://www.cael.org/Whom-We-Serve/Adult-Students/Earn-College-Credit>

³¹ <http://www.acenet.edu>

³² <http://www.vcn.org/healthcare/pla>

credentials across institutions. A full featured, uniform user experience will mitigate frustration with technology—a significant attrition factor for online learners.³³ Experts at the lead institution will review online course materials to ensure evidence-based design. Standards include:

Interactivity, formative assessment and multimedia elements: Online courses will include a high degree of interactivity, formative assessment and feedback. Scenario-based learning activities and online discussion boards will offer pervasive opportunities throughout the learning experience for student-student, student-faculty, and student-technology interactions. Social media will augment coursework, initiated by Consortium staff to assist in online community building.

Learners will receive regular targeted feedback to promote learning, engagement and persistence. Academic Coaches will monitor progress using learning platform metrics and check ins with students regularly. Graphics and other multimedia elements will be incorporated to enhance learning and engage students. Strong research indicates these elements will promote better learning outcomes and student engagement.³⁴

Programs will leverage technology to build community and engage learners. Examples include real-time interactive webinars; “just-in-time” video postings by instructors on timely relevant topics; live (recorded for later access) web meetings with industry experts; industry bloggers in online courses; LinkedIn forums; an online “student lounge” in course sites to facilitate student-student connections; online spaces for student affinity groups, such as veterans; and announcements about industry-related events. Through an online Consortium “faculty lounge”

³³ Jaggars, S. S. (2011). *Online learning: Does it help low-income and under prepared students?* (CCRC Working Paper No. 26, Assessment of Evidence Series). New York, NY: Columbia University, Teachers College, Community College Research Center.

³⁴ Bettinger, E. & Baker, R. (2011). The effects of student coaching in college: An evaluation of a randomized experiment in student mentoring. (National Bureau of Economic Research Working Paper No. 16881). retrieved from http://ed.stanford.edu/sites/default/files/bettinger_baker_030711.pdf.

instructors can connect, as pilot classes get underway, for informal meetings with colleagues across campus and across the country. These best of breed online course elements will be disseminated statewide and nationally to create efficiencies.

Simulation and game-based activities: The EMR-STAR

web-based access to multiple electronic medical record (EMR) systems will be constructed to scale up to a much-needed national resource, curated by HIMSS.

This innovative cloud-based resource will provide interactive simulation of the clinical information

EMR-STAR

- Multiple Electronic Medical Record Systems for student use
- Cloud-based
- Online case-based learning scenarios and real interactions with the applications and anonymized patient data

systems used in Health IT jobs. The EMR experience will also include scenarios and game-based learning activities to help learners become familiar with EMR functions and features.

Technology-based continuous improvement mechanisms: Academic Coaches will monitor student performance in Health IT programs through technology-enabled tracking tools. They will check in with students if they see signs of impeded progress and determine appropriate timely interventions. At the end of each course, Coaches will review assessment data to identify course elements in need of revision. Next, Curriculum Development Specialists will revise learning activities to promote improved learning outcomes.

Personalized Instruction: *Health e-Workforce Consortium* outreach to veterans, TAA-eligible workers and others will begin an uninterrupted continuum of early intervention, encouragement and support, as learners prepare for employment. In traditional settings, by the time instruction is underway, some learners typically are already disengaged, and may abandon their training goal. This is especially true for older students, veterans and TAA-eligible workers who may be engulfed in a variety of transition issues. Anchoring each member college's student services are

a Program Manager, Academic Coach, and Student Navigator, as well as Consortium leadership, evaluation and quality control. Academic Coaches will help students develop personal learning plans and goals, assist in identifying cognitive strengths and weaknesses and areas of interest, and map a path to a successful academic experience. In addition to helping students navigate college life and systems, Student Navigators will assist them to employment. Veteran support will stem from NSF recommendations for optimizing teaching and learning for veterans.³⁵

Continuous Improvement: Consortium member college presidents have formally committed to full participation in integrated program assessment, reflection and improvement. Extracting timely information regarding learner experience, performance, progress, comprehension, and instructor feedback is critical. Learning platform metrics will be mined; surveys of students and faculty will provide context. These sources and other input from regular Consortium stakeholder meetings will be used for real time improvement of instruction and support services, throughout the pilot period. The *Health e-Workforce Consortium* is designed to maximize benefit from this data, extract meaning and implement rapid improvements.

Access: Programs will be developed and implemented to centralized standards, and reviewed continuously. Consortium members will use Center for Applied Special Technology (CAST) guidelines as a reference for universal design to recruit and sustain disabled veterans in Health IT programs. Curricula will be developed for flexible delivery.

iv. Transferability and Articulation

Washington Consortium colleges will agree on a common credit bearing curriculum for IT and Health IT foundation courses, enabling student transfer. They will be embedded in associate

³⁵ Veterans' Education for Engineering and Science. *Report of the National Science Foundation Workshop on Enhancing the Post 9/11 Veterans Educational Benefit*. April 2009. Page 4. Retrieved from http://www.stem2veterans.org/sites/pdf/National_Science_Foundation_Workshop-Veterans_Education_for_Engineering_and_Science.pdf [preliminary]

degree and certificate programs in IT and/or Health IT-related areas. Students completing certificates with TAACCCT support will have new opportunity for degree attainment. In Washington, college approval is followed by that of the State Board for Community and Technical Colleges. Curriculum advisory committees at each college must approve credit certificate formation, and are predisposed to do so, as a result of the proposal-stage president's agreement required for Consortium membership. Implementing a strong Prior Learning Assessment process will facilitate the transfer of non-traditional experience and skills to accelerate time to, and increase the likelihood of completion, and reduce overall student costs. Northern Virginia Community College (NOVA) will develop an associate degree in Health IT with TAACCCT support, and articulate to Bellevue College's Bachelors Degree in Health IT. NOVA's degree approval process includes stakeholder support, Curriculum Committee and Administrative Council and College Board internal approval, followed by that of the state accreditation body.

The Bellevue College BA in Health IT is designed as a pathway for graduates of two-year degrees in IT or a healthcare field. Consortium colleges are pledged to articulating their IT, healthcare, and Health IT programs to the BA to provide an option that is rarely available to community college two-year professional/technical degree graduates. By reviewing alignment between course content and learning outcomes, migration paths will be identified for graduates of the candidate programs. In a survey of students from these programs, 68% expressed interest in transferring into the new BA degree program.

v. Strategic Alignment

Coordination with Employers and Industry - All *Health e-Workforce Consortium* proposed activity is derived from industry; all enterprise will flow from it. HIMSS, the world's largest Health IT professional society, is a prominent partner in this funding request. The U.S. Dept. of

Veterans Affairs, MultiCare, Dell Computers, and the Port Gamble S’Klallam Tribe have all agreed to explore hosting apprenticeships. The Washington Health IT Industry–Education Council (and, with TAACCCT funding, its Virginia counterpart), was founded to guarantee coordination. Extensive current and recent Health IT projects by Bellevue College with the Office of the National Coordinator for Health IT and the National Science Foundation is the basis of Consortium industry alignment.

Coordination with the Public Workforce System - Each Consortium member college has already executed a Memorandum of Understanding with its Workforce Investment Board (WIB) partner, to support this proposal. WIBs have committed to assisting learners through Consortium advisory board membership, and ongoing strategic guidance regarding employer connections and student access to federal and state agencies. Bellevue College and the Seattle-King County Workforce Development Council (WDC) have agreed to pioneer a TAACCCT data collection collaboration. The WDC will act as a conduit for student and comparison cohort employment measure tracking for all member colleges, extracting critical state employment metrics.

Outreach and Coordination with Educational Institutions and Other Organizations - The *Health e-Workforce Consortium* has significantly engaged TAACCCT Round 1 recipients and laid groundwork for extensive collaboration. Formative guidance has been received from awardees of the National STEM Consortium; The National Information, Security, and Geospatial Technology Consortium; and Air Washington. This proposal was informed by their advice on partnership, staffing, reporting design, budget and outreach. If funded, the *Health e-Workforce Consortium* has pledged to maintain exchange with these and other grantees.

Section 3: Work Plan and Project Management

i. Project Work Plan - Health e-Workforce Consortium					
Activities		Implementer(s)	Costs	Time	Deliverables
Priority 1: Federally Registered Veterans Health IT Apprenticeship					
Strategies	Develop & pilot	Lead; BC Contractor: Lynn Wilson Workgroup	Total: <u>\$108,182</u> Year 1: \$54,061 Year 2: \$27,757 Year 3: \$26,364 Year 4: \$0	<i>Start Date:</i> Month 1 <i>End Date:</i> Month 36 <i>Milestones:</i> *Curriculum Completed *Pilot sites Identified *Students Enrolled	*Curriculum *Employers Guide
Priority 2: Health IT Curricula to Address Employer-Identified Gaps					
Strategies	Develop, review, implement, & disseminate	Lead: BC; Curric. Lead; College & Consortium Curric. Dev. Specialists; Assoc. Dir; Faculty SMEs; Ed. Technologist; Faculty; College PMs; e-learning assistants	Total: <u>\$2,026,813</u> Year 1: \$856,061 Year 2: \$651,906 Year 3: \$518,846 Year 4: \$0	<i>Start Date:</i> Month 3 <i>End Date:</i> Month 36 <i>Milestones:</i> *Hire staff across colleges: Month 3 *Curriculum Complete: Month 24 *Pilot Completion: Month 36 *Dissemination Month 13-36	*10 certificates *IT and Health IT core *Curricular elements for infusion *Courseware for all of the above *Dissemination of modular elements
Priority 3: Faculty Development in Health IT					
Strategies	Develop, implement, & disseminate	Faculty Dev. Specialist; College PMs; Faculty	Total: <u>\$1,311,619</u> Year 1: \$445,446 Year 2: \$436,688 Year 3: \$429,485 Year 4: \$0	<i>Start Date:</i> Month 6 <i>End Date:</i> Month 36 <i>Milestones:</i> *Hire Staff: Month 3 *Elements Completion: Month 18 *Dissemination: Ongoing	*Synchronous, online & recorded faculty development opportunities
Priority 4: Cloud-Based Electronic Medical Record Academic Access (EMR-STAR)					
Strategies	Develop, implement, pilot, & create sustainability path	Lead: BC Contractors: Center for Healthcare Information Research and Policy & HIMSS	Total: <u>\$1,374,507</u> Year 1: \$458,169 Year 2: \$458,169 Year 3: \$458,169 Year 4: \$0	<i>Start Date:</i> Month 1 <i>End Date:</i> Month 36 <i>Milestones:</i> *Hire Staff: Month 1 *Onboard Vendors: Month 3-36 *Curriculum: Months 3-12 *Pilot: Month 12	*5-9 EMR software applications access *Curriculum *Student Access Guide *Faculty Orientation Resource

Priority 5: National Veterans Career Service Initiative					
Strategies	Develop & Implement “A HIMSS Heroes’ Welcome to Health IT”	Lead: BC Contractor: HIMSS	Total: <u>\$226,014</u> Year 1: \$75,338 Year 2: \$75,338 Year 3: \$75,338 Year 4: \$0	Start Date: Month 1 End Date: Month 36 Milestones: *Hire Staff *Initiative Plan Completed *Implementation	*Employer outreach *Employment resources *Annual & Virtual Conference events *Monthly webinars *e-Mentoring *Industry Advocacy *Special Interest Group *Career Services Task Force Outreach
Priority 6: State Community College Health IT Industry–Education Councils					
Strategies	Expand/ implement model, & consult	Lead: BC Contractor: Washington Health IT Industry–Education Council	Total: <u>\$229,476</u> Year 1: \$76,492 Year 2: \$76,492 Year 3: \$76,492 Year 4: \$0	Start Date: Month 1 End Date: Month 36 Milestones: *Hire Staff: Month 3 *Program Inventory: Month 8 *Key Expert Series Start Month 12 *National Outreach: Months 24	*State program inventory online resource *Key Expert Series *Model Documentation *Consultation
Priority 7: Prior Learning Assessment					
Strategies	Develop, implement, pilot, & document PLA strategies for vets & others	Navigators, Instructional Support Staff, & PLA Specialist	Total: <u>\$915,406</u> Year 1: \$235,321 Year 2: \$340,768 Year 3: \$339,317 Year 4: \$0	Start Date: Month 3 End Date: Month 36 Milestones: *PLA Plan Completion: Month 6 *PLA Member College Mtg. Month 7 *PLA Implementation: Months 7-36	*PLA Plan *PLA Veterans Plan *College implementation guide and training to facilitate dissemination *Implementation

Priority 8: Student Services					
Strategies	Recruitment & Retention, Employment Services	Navigators, Employment Specialist, PLA Specialist, Veteran PM	Total: <u>\$545,281</u> Year 1: \$158,578 Year 2: \$182,098 Year 3: \$204,605 Year 4: \$0	<i>Start Date:</i> Month 3 <i>End Date:</i> Month 36 <i>Milestones:</i> *Student Services Plan, month 3; *Marketing plan, month 1-3 *Recruit cohorts, months 7-24; *Consortium staff training, months 4-6	*Marketing plan *Student services plan *Staff training resources *Link to Priority 5 *One-on-one employment advising *Employment links through social media
Priority 9: Evaluation & Continuous Improvement					
Strategies	Program & fiscal data capture, analysis, & reporting; implement & oversight of continuous improvement & evaluation; admin. resources	Data Compliance & Reporting Mgr.; Fiscal Compliance Mgr.; Exec. Dir; Assoc. Dir.; College PMs; External Evaluator	Total: <u>\$1,481,016</u> Year 1: \$378,514 Year 2: \$387,957 Year 3: \$383,730 Year 4: \$330,815	<i>Start Date:</i> Month 1 <i>End Date:</i> Month 48 <i>Milestones:</i> *Staff Hired: Month 3 *Evaluation Plan: Month 2 *Consortium Cont. Improvement Cabinet formed & activated: Month 6 *Advisory Board formed: Month 6 *Survey instrument activated: Month 4 *Consortium Procedures Manual: Month 6	*Continuous Improvement plan *Consortium Procedures Manual *Consortium Data and Fiscal Reporting Instruments *Monthly Consortium Meetings & Notes
Please note: 1) Expenditures for Fringe Benefits (\$2,058,916), Indirect (\$575,368), and third-party Evaluation (\$727,070) are not reflected in the dollar amounts shown in the project plan. 2) Equipment will not be purchased for this grant.					

The *Health e-Workforce Consortium* lead institution, Bellevue College, is the current recipient of two federal investments in community college Health IT workforce development. An NSF award (\$500k, through August, 2013) and funding from the ONC (\$6.4M, through October, 2012) have resulted in a high performing team, with notable experience in Health IT. This proposal leverages and expands that work to the benefit of veterans, TAA-eligible workers and others. Leading a 23-college, 10-state Health IT Consortium from 2010-2012 to exceed program goals within budget and ahead of schedule has resulted in a well-functioning, industry-focused management and implementation group—ideally suited to administer a TAACCCT Consortium

Factor 1: Effective Project Management and Staff

<i>Health e-Workforce Consortium Management Team</i>	
Executive Director (1 FTE Years 1-4)	Patricia Dombrowski
Director, Northwestern States, ONC <i>Community College Consortium to Educate Health IT Professionals</i> ; Principal Investigator, NSF ATE award <i>Health IT Certification, Curriculum & Dissemination</i> ; Director, Bellevue College Life Science Informatics Center; Director, DoL CBJT award (health programs expansion); Director, DoL President's High Growth Jobs Initiative award (life science informatics); Principal Investigator, NSF Computer Pathways award (STEM student community building through contextual web based gaming); Founder, Washington Health IT Industry- Education Council; Chair, HIMSS National Career Task Force (2012-13)	
Associate Director (1 FTE Years 1-3.5)	Margaret Murphy
Associate Director, Northwestern States, ONC <i>Community College Consortium to Educate Health IT Professionals</i>	
Data, Compliance and Reporting Manager (1 FTE Years 1-4)	Anne Turner
Data, Compliance & Reporting Manager, Northwestern States, ONC <i>Community College Consortium to Educate Health IT Professionals</i> ; Interim Director, DoL CBJT (expanding health programs); Program Manager, NSF ATE <i>Health IT Certification, Curriculum & Dissemination</i>	
Fiscal Compliance Manager (1 FTE Years 1-4)	Diane Heriot
Fiscal Compliance Manager, Northwestern States, ONC <i>Community College Consortium to Educate Health IT Professionals</i> ;	

Program Manager, DoL CBJT (expanding health programs)	
Curriculum Lead (.20 FTE Years 1-2)	Michele Royer, PhD
Curriculum Lead, Northwestern States, <i>ONC Community College Consortium to Educate Health IT Professionals</i> ; Curriculum Lead, Bellevue College Health IT Baccalaureate and certificate program development; Curriculum Lead, NSF Curriculum and Standards Development Lead, DoL Presidents High Growth Jobs Initiative;	
Instructional Designer (1 FTE Years 1-3)	Nicole Bunselmeyer
Instructional Designer, Northwestern States, <i>ONC Community College Consortium to Educate Health IT Professionals</i>	

Organizationally, the project will be administered through lead institution, Bellevue College. Vice President of Workforce Development, Paula Boyum, Ph.D. will exercise overarching responsibility for the *Health e-Workforce Consortium*. Project support will be provided by Bellevue College administrative departments. Fiscal oversight will be provided by Bellevue College's grants and contracts manager, and an accountant from the college's finance department. All eight Washington member colleges are members of the Washington Community College Health IT Collaborative, led by Bellevue College. Member colleges are recipients of prior grants, and proficient in their administration. A requirement of Consortium membership is adequate staffing, to underwrite success. All are pledged to rapid hire of a dedicated Program Manager, half time Curriculum Development Specialist and half time Student Navigator. Four Washington Member Colleges are round 1 TAACCCT awardees. These colleges will begin *Health e-Workforce Consortium* work with a prior institutional investment in TAACCCT compliance. NOVA will function as a member college, in implementation and staffing structure. The *Health e-Workforce Consortium* will benefit greatly from the combined powerhouse of experience and synergistic project management, exceptional in the area of Health IT in the community college arena today. Consortium Executive Director Patricia Dombrowski,

recognized in March, 2012, as one of 12 industry leaders out of 30,000 members (Spirit of HIMSS Award) has successfully directed two prior DoL grants, two National Science Foundation awards, an ONC ten-state consortium and founded the Washington Health IT Industry–Education Council. The superlative professionals working with her are a group of industry experts, each personally dedicated to the community college mission.

Factor 2: Effective Management Structures - *Please see attached organizational chart.*

Resilient leadership, data-driven resource allocation and continuous internal evaluation will characterize management. Member colleges are committed to procedures, goals, and the flexibility required in an innovation-focused collaboration dedicated to quality improvement. Staffing is calculated to allow for both focus and a high return on investment. The Consortium Continuous Improvement Cabinet, composed of representative member college and central Consortium staff, will be charged with quality control, and ensuring deliverables exceed expectations. Through Consortium Advisory Board participation, industry, workforce and labor will act as catalysts for evaluation and improvement.

Factor 3: Effective Systems & Processes - Presidents from all *Health e-Workforce Consortium* colleges signed participation agreements, as a condition of membership. Separate from the Consortium Agreement, this pledged their institution to rapid hiring, timely responsiveness and reporting. The *Health e-Workforce Consortium* proposal rests on bedrock of commitment to the highest standard of performance in fiscal, compliance, programs and evaluation. Bellevue College has recently and historically demonstrated this uncompromising focus on data collection and reporting integrity. Two recent DoL grants, and an ONC consortium award (now in no cost extension) were monitored with commendation and no findings. In the latter, data collection processes developed by Bellevue College staff were used as models for grantees nationwide.

Bellevue College's accounting systems and processes are fully operational, meet regulatory requirements as outlined in OMB Circulars A-21 and 29 CFR part 95, and include procurement procedures compliant with Federal, state, and Washington State Board for Technical and Community College system rules and regulations for timely and accurate financial and performance reporting. Bellevue College Procurement Office follows guidelines and procedures in accordance with the Washington State Office of Financial Management when planning, soliciting, awarding and administering contracts. Grant funds will be recorded and tracked separately, and fiscal procedures will follow generally accepted accounting principles. Bellevue College understands and agrees that the project will be subject to evaluation by the U.S. Secretary of Labor to measure its effectiveness and will support all evaluations.

Factor 4: Well Defined Roles and Responsibilities for Consortium Members - The *Health e-Workforce Consortium Agreement* is attached to this document. Consortium membership includes these requisite responsibilities:

Consortium Membership Responsibilities	
Design	1. Prioritizing veterans and TAA-eligible workers 2. Identification of an area of Health IT curriculum development and piloting, creating stackable certificates (WA) 3. Implementation of Consortium curriculum and instructional design standards 4. Post proposal pre-hiring actions, for a rapid start, if funded 5. Uniform staffing structure 6. President's commitment to continuous process improvement in all grant activity 7. Articulation to Bellevue College Bachelors of Applied Science in Health IT 8. Use of centralized Consortium development resources 9. Identify faculty for subject matter experts and professional development participation; plan for release and substitution 10. Timely reporting, accurate data, responsive communication

Development	1. Participation in the synthesis of a Common IT Core Curriculum, as the basis for all Health IT certificates (WA) 2. Adherence to Consortium review and approval process for curriculum development, prior to pilot 3. Piloting of new certificates within one year of award 4. Support of Veterans Health IT Federally Registered Apprentice pilot sites 5. Regular participation in Consortium meetings and peer member mentoring 6. Deliverables production schedule, and Progress Against Goals meeting schedule 7. Locally appropriate Veterans and TAA-eligible outreach strategy determination 8. Training on Consortium data collection and reporting procedures and expectations 9. Contribution to Consortium Policy and Procedures Manual 10. Continuous process evaluation, communication and improvement
Delivery	1. Marketing of programs to Veterans, TAA-eligible workers and others 2. Learner ‘early and often’ support and navigation services 3. Workforce and Labor partner guidance in student-employer connection 4. Agile adjustments to student and employer apprenticeship structure 5. Facilitation of web-based support communities for both learners and faculty 6. Timely reporting and deliverables 7. Process for internalization of state Industry–Education Council guidance 8. Leadership and participation in state Community College Health IT Collaborative 9. Continuous process evaluation, communication and improvement
Implementation	1. Develop Member and Consortium academic and career pathway documentation 2. Present ongoing pilot results to state Community College Collaborative & Industry-Education Council, for k-12 through graduate program alignment 3. Dissemination of student and faculty tested curricula, incorporating transformative feedback 4. Advising protocol for students interested in Health IT certifications and trajectory to Bellevue College Bachelors of Applied Science in Health IT

Factor 5: Sustainability Plan - The *Health e-Workforce Consortium* is designed for sophisticated data inflow, analysis, reporting and improvement. Actionable metrics are the foundation for creative innovation in this landmark undertaking. The Data, Compliance and Reporting Manager’s central Consortium role is critical to the translation of this valuable information into life changing activity for veterans, TAA-eligible workers and others. To ensure ready access and transparency, the Manager will provide dashboard representation and a repository of project data such as veterans’ and other learners’ feedback and progress, progress

against goals, and transformative feedback. These data are the basis for regular individual member college and Consortium check-ins, on both program and fiscal elements. They define adjustments required for short term goal setting and reinforce the continuous improvement process. Just as importantly, this information defines the path forward at each step of grant and post-grant activity. The repository will be an invaluable resource to determine which deliverables are most suitable for colleges nationwide wishing to deploy them.

On a Consortium level, data provide snapshots to members and contractors to generate transformative feedback and course improvements. Ongoing review of data and progress against goals is the basis of Consortium transaction and innovation. Data will, for instance, influence intensity of outreach to target populations, and drive the support services offered. Fiscal management will be data driven and transparent, providing the lead and members with a clear and practical basis for continuous improvement and exemplary stewardship.

Employer engagement is not a discrete element in this organization plan; it is implicit in every component. The largest Health IT industry association in the world, HIMSS, is committed to changing employers' perspective on veterans' employment forever. Industry-Education Councils will be created or expanded and offered as a model, along with mentoring to all states in the nation. Community College Health IT Collaboratives in two states will turn industry guidance into action. Hardwiring employers to educators in a vast new sector, to provide opportunities for veterans, TAA workers and others is the reason for Consortium formation.

SECTION 4. OUTCOMES

i. Analysis of Outcome Projections

Factor 1: Complete and Accurate Projections

Outcome Projections Table			
Outcome Measures		Targets for TAACCCT Program	
1	Total Unique Participants Served	Year 1: 407 Year 2: 878 Year 3: 808	Total: 2,093
2	Total Number of Participants Completing a TAACCCT-Funded Program of Study	Year 1: 127 Year 2: 614 Year 3: 674	Total: 1,415
3	Total Number of Participants Still Retained in Their Program of Study or Other TAACCCT-Funded Program	Year 1: 212 Year 2: 435 Year 3: 453	Total: 1,100
4	Total Number of Participants Completing Credit Hours	Year 1: 388 Year 2: 842 Year 3: 805	Total: 2,035
5	Total Number of Participants Earning Credentials	Year 1: 159 Year 2: 607 Year 3: 657	Total: 1,423
6	Total Number of Participants Enrolled in Further Education After TAACCCT-funded Program of Study Completion	Year 1: 40 Year 2: 143 Year 3: 169 Year 4 (follow up): 185	Total: 537
7	Total Number of Participants Employed After TAACCCT-funded Program of Study Completion	Year 1: 35 Year 2: 365 Year 3: 437 Year 4 (follow up): 245	Total: 1,082
8	Total Number of Participants Retained in Employment After Program of Study Completion	Year 1: 31 Year 2: 323 Year 3: 441 Year 4 (follow up): 278	Total: 1,073
9	Total Number of Those Participants Employed at Enrollment Who Received a Wage Increase Post-Enrollment	Year 1: 14 Year 2: 145 Year 3: 161 Year 4 (follow up): 108	Total: 428

Factor 2: Appropriate Targets Projected - Each Consortium member will develop and launch a new Health IT certificate program and/or infuse existing Nursing and Allied Health programs with Health IT curriculum. The data detailed in the Outcomes Projections Table were developed

through a structured process whereby each Consortium member analyzed and submitted program-specific data on student performance and outcomes for their planned grant programs. All projection outcomes data were reviewed by the lead Consortium data analyst for accuracy and appropriateness, and referenced against DoL's TAACCCT-specific measure definitions. Data were then compiled in aggregate to produce Consortium outcome projections. Each member college president has committed to timely achievement of these goals.

Factor 3: Appropriate Balance of Deliverables and Outcomes - Proposed *Health e-Workforce Consortium* activity focuses on rapid national dissemination of tested resources. Deliverables are data driven, complex, original and innovative, designed to help cash-strapped community colleges initiate or expand Health IT programs, at a time when they are needed. 2,093 veterans, TAA-eligible workers and others will be served directly. Cutting edge programs will immerse learners in a full spectrum of support and employment services. The Consortium will improve and expand the capacity of media rich, online Health IT programs in Washington, Virginia and across the country, and forge new state Health IT Industry–Education Councils and Community College Health IT Collaboratives. It will change forever the face of opportunity in a well-paying industry for military veterans and dislocated workers.

ii. Process or System for Tracking and Reporting Outcome Measures

Factor 1: Existing Tracking Procedures - The *Health e-Workforce Consortium* will gather and report data from two states, necessitating a high level of strategic planning and coordination. Below are the existing tracking procedures in place within Consortium states.

Washington - The current system for collecting and reporting student metrics in the Washington community college system is called the Student Management System (SMS). This proprietary system was created in the 1980s to fulfill Washington's extensive reporting requirements. The SMS tracks varied student metrics pertaining to demographics, enrollment, performance, and

completion. Given the capability of the SMS to deliver critical information outlined in 11 of the 14 annual reporting performance measures, Washington colleges are primed to deliver critical information with minimal start-up effort. Washington's Employment Securities Department (ESD) tracks the common employment measures required for annual reporting on participants and comparison cohort members. *Health e-Workforce's* lead institution, Bellevue College, is working closely with ESD, the WIBs, and other TAA Round 1 recipients in Washington to ensure proposed reporting processes for this project leverage existing procedures developed to achieve reporting outcomes for TAA Round 1 participants.

Virginia - The Virginia Community College System has established data sharing agreements with the Virginia Employment Commission (VEC) and is establishing additional agreements with federal and other state wage data systems. VEC data are regularly merged with student completion data to provide colleges with data on employment and graduate earnings. Through a \$17.5 million federal grant to the Virginia Department of Education (VDOE) and a \$1 million DoL grant to the VCCS, Virginia is developing a state longitudinal database system (VLDS) to link pre-school, secondary, and postsecondary systems, workforce development programs, and employment data to assess the long-term impact of workforce training programs, compare outcomes of programs, spur continuous improvement, and improve the data used for economic and community development. In January, 2013, the VLDS will be available for education and wage records and will serve as a primary data source for many of the proposed outcome metrics requiring participant-level data, including credential attainment, persistence in postsecondary education, wage earnings, and employment retention outcomes.

Factor 2: Well-Defined Plan to Address Gaps in Tracking - All necessary information items needed to fulfill DoL reporting requirements have been identified and are available to the project

team. Gaps pertain to data access and delivery of employment information. To close those gaps, *Health e-Workforce* is collaborating with Air Washington, Washington's Round 1 TAA awardee and the Seattle-King County Workforce Development Council to ensure that both projects are utilizing the same reporting mechanisms. This will not only strengthen the efforts and data integrity of both projects, but also will reduce impacts to the state's Employment Securities Department. Virginia's VLDS system will provide education and wage record data for project reporting purposes with data access available many months prior to the Year 1 annual reporting deadline. The *Health e-Workforce Consortium* is committed to leveraging all resources to provide meaningful data for analysis and continuous project improvement.

iii. Using Data for Continuous Improvement

Factor 1: Well-Defined Plan for Formal Data Reviews - The Consortium will utilize data captured during the course of quarterly and annual reporting as part of a cycle of continuous improvement, overseen by the Consortium Continuous Improvement Cabinet. To successfully apply the lessons learned through data, a series of access points and procedures will ensure full transparency to all stakeholders. The Data, Compliance and Reporting Manager will lead the Consortium using a Data Review Plan that supports overarching goals of continuous improvement and innovation. Maintaining and disseminating a real-time dashboard representation of program, fiscal and outcome measures, the Data, Compliance and Reporting Manager will work directly with all members to capture and analyze metrics not only for DoL's 14 annual outcome measures, but also towards progress against goals, and the capture of transformative feedback from learners, faculty, industry and others.

Data Review Plan		
Monthly	Quarterly	Annually
-Individual meetings with each Consortium member -Review of program and fiscal measures against forecasts -Monthly review ensures early identification of barriers, and immediate opportunity for improvement	-Continuous Improvement Cabinet review of all data measures against goals -Planning for next steps and improvement -Development and execution of mitigation strategies, if data indicates barriers to progress	-All project participants, including external evaluation team, will review results of Annual Outcome Measures reporting

The Project Director and the Compliance and Reporting Manager will also collaborate actively with the Evaluation Team to ensure their expertise contributes to the cycle of continuous improvement.

Program Evaluation Plan - The *Health e-Workforce Consortium* Evaluation Plan, designed by Social Policy Research Associates (SPR), details a rigorous ongoing assessment, well aligned with the magnitude of the proposed undertaking. Selection and procurement of a third party evaluator for the *Health e-Workforce Consortium* project will be initiated within two weeks of notice of funding. The Bellevue College Procurement Office will oversee the procedure, adhering to guidelines and procedures for sole source contracting, in accordance with the Washington State Office of Financial Management, to facilitate SPR's evaluation contract.

Section 5: Commitment to Submit Non-Program Participant Data

The *Health e-Workforce Consortium* affirms that either the lead institution or a Consortium institution will transmit information annually on students enrolled in selected non-TAACCT-funded credit and/or non-credit programs during the grant period of performance.

Health e-Workforce DOL TAACCCT Cost Proposal

Part I. The Cost Proposal

A. SF-424 & SF-424A forms - attachments

B. Budget Narrative - detailed narrative is included in budget workbook for each of the following consortium. The indirect cost rate and amount for each consortium member are included in the respective workbooks.

1. Bellevue College (BC) - Consortium Lead
2. Bellevue College - Consortium Member
3. Bellingham Technical College (BTC)
4. Clark College (CC)
5. Clover Park Technical College (CPTC)
6. Pierce College District (PC)
7. Renton Technical College (RTC)
8. Spokane Community College (SCC)
9. Whatcom Community College (WCC)
10. Northern Virginia Community College (NOVA)

C. Detail of how the consortium will address and break down the 10% administrative cost limit.

Consortium 10% administrative cost limit was managed by allowing all consortium colleges to charge a maximum 8% indirect cost rate (colleges have or will apply for approved indirect cost plan) which will be calculated as 100% administrative cost. Additional administrative cost incurred during the operation of this grant will be covered by the consortium colleges. In addition the BC Lead budget includes; 8% administrative duties of the Project Manager at each consortium college, 25% administrative duties of Executive Director, and 100% Fiscal Compliance Manager, and the remaining allowable administrative cost taken as indirect. Bellevue College will supply and monitor reporting documents to consortium members for itemizing program and administrative cost at least quarterly for tracking and reporting purposes.

Total Administrative Cost Detail

Total Direct Charges \$11,199,930 X 10% = \$1,119,993

Administrative Cost Items	Consortium College										Total Admin. Cost
	BC - Lead	BC - Member	BTC	CC	CPTC	PC	RTC	SCC	WCC	NOVA	
Indirect Positions	\$114,828	\$59,781	\$47,689	\$40,168	\$44,603	\$42,330	\$55,661	\$55,860	\$39,354	\$75,093	
Executive Director (25%)	\$117,820										
Fiscal Compliance (100%)	\$249,340										
Project Manager (8%)		\$19,235	\$19,235	\$19,235	\$18,612	\$18,522	\$23,153	\$20,838	\$18,773	\$19,863	
Total Administrative Cost	\$481,988	\$79,016	\$66,924	\$59,403	\$63,215	\$60,852	\$78,814	\$76,698	\$58,127	\$94,956	\$1,119,993

**Health e-Workforce DoL TAACCCT
Annual Budget**

Budget Item	Year 1	Year 2	Year 3	Year 4	Total
Personnel	\$1,907,166	\$1,875,407	\$1,716,827	\$282,405	\$5,781,805
Fringe Benefits	\$683,080	\$665,011	\$606,335	\$104,490	\$2,058,916
Travel	\$43,650	\$36,462	\$33,018	\$4,415	\$117,545
Equipment	\$0	\$0	\$0	\$0	\$0
Supplies	\$62,042	\$11,950	\$11,950	\$2,450	\$88,392
Contractual	\$845,377	\$952,475	\$748,918	\$383,602	\$2,930,372
Other	\$95,200	\$43,200	\$38,200	\$46,300	\$222,900
Total Direct	\$3,636,515	\$3,584,505	\$3,155,248	\$823,662	\$11,199,930
Indirect	\$199,923	\$182,736	\$175,739	\$16,969	\$575,367
Total	\$3,836,438	\$3,767,241	\$3,330,987	\$840,631	\$11,775,297

**Health e-Workforce DoL TAACCCT
Budget Narrative - Bellevue College Lead**

CATEGORY / ITEM:					Requested
	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL
a. Personnel					
EXECUTIVE DIRECTOR (\$86K; 1 FTE Y1-Y4) Overall responsibility for project design, implementation, outcomes, budget, reporting and compliance.	\$86,000	\$86,000	\$86,000	\$86,000	\$344,000
ASSOCIATE PROGRAM DIRECTOR (\$69,513; 1 FTE Y1-Y3.5) Executive Director's alternate; direction of curriculum development, instructional design and faculty development. Assist in overall management of all aspects of project implementation, management, reporting, outreach and evaluation.	\$69,513	\$69,513	\$34,757	\$0	\$173,783
CONSORTIUM CURRICULUM LEAD (\$65,660; .20 FTE Y1-Y2) Creates Consortium curriculum standards, provides review, comment and approval for Member College curriculum development	\$13,132	\$13,132	\$0	\$0	\$26,264
CONSORTIUM CURRICULUM & FACULTY DEVELOPMENT SPECIALIST (\$52K; 1 FTE Y1-Y2) Manages all curriculum development (approximately 15 HIT courses, and curricular elements for nursing approximately 4 allied health professions); provides milestones; ensures adherence to Consortium standards, manages nursing and allied health program "self study" and infusion process; manages and facilitates Core IT Curriculum synthesis process; quality controls all deliverables, liaises with DoL for dissemination; creates and maintains grant and Consortium required reporting; organizes virtual and onsite curriculum development – related events.	\$52,000	\$52,000	\$0	\$0	\$104,000
INSTRUCTIONAL DESIGN & IMPLEMENTATION SPECIALIST (\$52K; 1 FTE Y1-Y3) Creates Consortium ID standards; provides consultation and leadership in the application of e-learning resources to curricula. Leads ID virtual and in person events, and ongoing professional development. Ensures uniform adherence to Consortium standards; creates and maintains grant and Consortium required reporting. Designs VA Apprenticeship curriculum.	\$52,000	\$52,000	\$52,000	\$0	\$156,000
REPORTING & COMPLIANCE MANAGER (55K; 1 FTE Y1-Y3; .5 FTE Y4) Manages student data and reporting intake, rollup, quality control and compliance; provides compliance strategies, consulting and regular monitoring to member colleges. Selects and manages data applications and systems. Manages regular meetings with Member College Program Managers.	\$55,000	\$55,000	\$55,000	\$27,500	\$192,500

**Health e-Workforce DoL TAACCCT
Budget Narrative - Bellevue College Lead**

FISCAL COMPLIANCE MANAGER (\$52K; 1 FTE Y1-Y3; .5 FTE Y4) Provides fiscal compliance strategies, consulting and oversight to member colleges; manages contractual relationships; monitors all grant participants; produces all fiscal reporting for grantor and Bellevue College; manages all grant related Bellevue College budgets; liaises with BC grant fiscal manager; provides dashboard information for Exec. Director; manages all hiring intake and payroll functions.	\$52,000	\$52,000	\$52,000	\$26,000	\$182,000
EMPLOYMENT SPECIALIST (\$52K; 1FTE Y2-Y3) Central Consortium employment resource specialist, liaises with national and state employers and staffing organizations, designs and implements social media student-to-employment plan; leverages veteran-specific resources for Consortium deployment; develops overall Consortium employment objectives, milestones and timeline; initiates a community of profession with all Member College Navigators; designs and maintains employment tracking system; ensures collaboration with Employment Security Division and peer organizations in CA and VA; collaborates with HIMSS National Veterans Career Services Initiative; creates and maintains grant and Consortium required reporting. Interfaces with WDC and WIBS.	\$0	\$52,000	\$52,000	\$0	\$104,000
PRIOR LEARNING ASSESSMENT SPECIALIST (\$52K; .5 FTE Y1-Y3) In collaboration with Member Colleges, designs and guides implementation of PLA procedures in Consortium. Liaises with Member College Project Managers in VA, to help guide PLA implementation in grant funded programs. Provides specialized veterans PLA information to Member Colleges, and assists in timely implementation.	\$26,000	\$26,000	\$26,000	\$0	\$78,000
PROGRAM COORDINATOR (\$36K; 1 FTE Y1-Y3; .5 FTE Y4) Supports project logistics; communication; scheduling; virtual and in person meetings; purchasing; travel; duplication and web maintenance.	\$36,000	\$36,000	\$36,000	\$18,000	\$126,000
EDUCATIONAL TECHNOLOGIST (\$52K; .5 FTE Y1; 1 FTE Y2-Y3) Designs, implements and supports project data collection and systems, web communication, digital standards, cloud storage, web mobile applications and tech support plans.	\$26,000	\$52,000	\$52,000	\$0	\$130,000
TECHNICAL SUPPORT SERVICES - PT Hourly (\$20/hr X 780 hrs per yr) As needed, to support go-live online course implementations and novel e learning strategies, virtual meetings, data quality control and project computing needs.	\$15,600	\$15,600	\$15,600	\$0	\$46,800

**Health e-Workforce DoL TAACCCT
Budget Narrative - Bellevue College Lead**

E-LEARNING ASSISTANT - PT Hourly (\$20/hr x 780 hrs per yr) Assists ID Specialist in Member College support; provides front line course management and curricular element implementation problem solving and support, sometimes on after business hours and weekend schedules; assists faculty with video elements and new technologies.	\$15,600	\$15,600	\$15,600	\$0	\$46,800
a. Total Personnel	\$498,845	\$576,845	\$476,957	\$157,500	\$1,710,147
b. Fringe Benefits					
EXECUTIVE DIRECTOR at 37%	\$31,820	\$31,820	\$31,820	\$31,820	\$127,280
ASSOCIATE PROGRAM DIRECTOR at 37%	\$25,720	\$25,720	\$12,860	\$0	\$64,300
CONSORTIUM CURRICULUM LEAD at 37%	\$4,859	\$4,859	\$0	\$0	\$9,718
CONSORTIUM CURRICULUM & FACULTY DEVELOPMENT SPECIALIST at 37%	\$19,240	\$19,240	\$0	\$0	\$38,480
INSTRUCTIONAL DESIGN & IMPLEMENTATION SPECIALIST at 37%	\$19,240	\$19,240	\$19,240	\$0	\$57,720
REPORTING & COMPLIANCE MANAGER at 37%	\$20,350	\$20,350	\$20,350	\$10,175	\$71,225
FISCAL COMPLIANCE MANAGER at 37%	\$19,240	\$19,240	\$19,240	\$9,620	\$67,340
EMPLOYMENT SPECIALIST at 37%	\$0	\$19,240	\$19,240	\$0	\$38,480
PRIOR LEARNING ASSESSMENT SPECIALIST at 37%	\$9,620	\$9,620	\$9,620	\$0	\$28,860
PROGRAM COORDINATOR at 37%	\$13,320	\$13,320	\$13,320	\$6,660	\$46,620
EDUCATIONAL TECHNOLOGIST at 37%	\$9,620	\$19,240	\$19,240	\$0	\$48,100
TECHNICAL SUPPORT SERVICES ,E-LEARNING ASSISTANT - PT Hourly at 10%	\$3,120	\$3,120	\$3,120	\$0	\$9,360
b. Total Fringe Benefits	\$176,149	\$205,009	\$168,050	\$58,275	\$607,483
c. Travel					
Exec Dir & Assoc Dir Out of state: 1 trip=\$1,393 (\$630 airfare + \$71 per diem x 3 + \$150 lodging x 2 + \$250 transport & internet service = \$1,393) DoL, HIMSS, Conference travel for dissemination; meet with CHIRP vendors and contractor, veterans employment event, etc. 4 trips ea Y1-Y3; 1 trip ea Y4 (26 trips total)	\$11,144	\$11,144	\$11,144	\$2,786	\$36,218
Compliance & Reporting Mgr & Fiscal Mgr DoL, monitoring: 1 trip ea Y1-Y3=6 trips=\$8,358	\$2,786	\$2,786	\$2,786	\$0	\$8,358
Curriculum/Faculty Dev Specialist Northern VA faculty events at NoVa; 1 trip Y1-Y2=\$2,786	\$1,393	\$1,393	\$0	\$0	\$2,786
Employment Specialist HIMSS, NoVA, Conference travel: 2 trips Y1; 1 trip Y2-Y3=4 trips = \$5,572	\$2,786	\$1,393	\$1,393	\$0	\$5,572

**Health e-Workforce DoL TAACCCT
Budget Narrative - Bellevue College Lead**

c. Total Travel	\$18,109	\$16,716	\$15,323	\$2,786	\$52,934
e. Supplies					
Computer station Program Manager, Navigator	\$11,000	\$0	\$0	\$0	\$11,000
Netbooks	\$2,200	\$0	\$0	\$0	\$2,200
Consumables (paper, batteries, pens)	\$3,600	\$3,600	\$3,600	\$1,200	\$12,000
Meetings & even supplies Program Manager; Curriculum Dev Specialist; Navigator; Instructional Support	\$600	\$600	\$600	\$0	\$1,800
Headsets for virtual meeting events Program Manager; Curriculum Dev Specialist; Navigator; Instructional Support	\$549	\$0	\$0	\$0	\$549
Copying & digital media duplication	\$1,000	\$1,000	\$1,000	\$200	\$3,200
e. Total Supplies	\$18,949	\$5,200	\$5,200	\$1,400	\$30,749
f. Contractual					
CHIRP (Sole Source) - Services provided: develop electronic medical record academic library	\$464,924	\$495,624	\$317,624	\$16,000	\$1,294,172
Linda Reeder (Sole Source) - Services provided: create an online self-study instrument for nursing and allied health programs to assess readiness for infusion of health IT into instructional programs	\$12,600	\$0	\$0	\$0	\$12,600
Lynn Wilson (Sole Source) - Services provided: direct the development of a Federally Registered Health IT Apprenticeship	\$54,061	\$27,757	\$26,364	\$0	\$108,182
HIMSS (Sole Source)(Initiative 1) National Veterans Career Services Initiative - Will provide the following services: work with Department of Defense and Veteran's Administration and health care organizations to gain commitment to national veterans career services initiative; list jobs with preference for veterans; and create Hero's Welcome at annual national conference exhibits	\$62,543	\$99,104	\$101,299	\$37,693	\$300,639
HIMSS (Sole Source) (Initiative 2) National EMR Academic Library - Services provided: recruitment, management and oversight of vendor and educational institution participation in the National EMR Academic Library	\$39,013	\$70,413	\$70,413	\$65,000	\$244,839
WA Health IT Industry - Education Council Enlarge WA Health IT Industry – Education Council (Sole Source) - Services provided: Convene and Chair Council, to create continuous loop feedback for employers and educators & encourage relevant educational program growth and workforce reception for graduates	\$76,492	\$76,492	\$76,492	\$0	\$229,476

**Health e-Workforce DoL TAACCCT
Budget Narrative - Bellevue College Lead**

Washington State Labor Council (Sole Source) - Services provided: provide marketing and outreach services to promote awareness of grant-sponsored programs and services among TAA-eligible and veteran groups	\$7,550	\$5,844	\$0	\$0	\$13,394
Social Policy Research (sole source) - Services provided: Conduct evaluation of grant project; see attached evaluation plan	\$128,194	\$177,241	\$156,726	\$264,909	\$727,070
f. Total Contractual	\$845,377	\$952,475	\$748,918	\$383,602	\$2,930,372
h. Other					
Conference registrations, subscriptions	\$600	\$600	\$600	\$0	\$1,800
Outreach activity on behalf of Consortium	\$4,400	\$4,400	\$4,400	\$0	\$13,200
Data services; Cloud storage; licences	\$6,000	\$5,000	\$5,000	\$500	\$16,500
Subscription to NEER Perfect \$65 per student x 400 students	\$26,000	\$0	\$0	\$0	\$26,000
Web design & maintenance services 100 hrs @ \$45/hr	\$4,500	\$0	\$0	\$0	\$4,500
Programming reports & query building 100 hrs @ \$45/hr	\$4,500	\$0	\$0	\$0	\$4,500
Contractual - post production services min of 15 courses @\$3K per course	\$0	\$0	\$0	\$45,000	\$45,000
h. Total Other	\$46,000	\$10,000	\$10,000	\$45,500	\$111,500
i. Total Direct Charges (a. - h.)	\$1,603,429	\$1,766,245	\$1,424,448	\$649,063	\$5,443,185
j. Indirect (2% limited) (Approved Rate 46% direct salaries)	\$37,276	\$37,276	\$37,276	\$3,000	\$114,828
k. BC LEAD TOTAL CHARGES	\$1,640,705	\$1,803,521	\$1,461,724	\$652,063	\$5,558,013

Health e-Workforce DoL TAACCCT
Budget Narrative - Bellevue College Member

CATEGORY / ITEM:					Requested
	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL
a. Personnel					
PROJECT MANAGER (1 FTE Y1-Y3; .5 FTE Y4) Manage implementation of project including staffing, budgeting, community outreach, partnerships, achievement of strategies, monitoring of progress, continuous improvement, and reporting.	\$54,000	\$54,000	\$54,000	\$13,500	\$175,500
STUDENT NAVIGATOR (.5 FTE) Provide program participant individual program advising to help bridge academic learning, student services, and community resources necessary for success. Collaborate with program partners to offer students job retention and career advancement support, as well as prepare, submit, and present all reports, updates, and information to the Project Manager.	\$26,000	\$26,000	\$26,000	\$0	\$78,000
STUDENT INSTRUCTIONAL SUPPORT (.5 FTE) Primary responsibilities include: a) assisting students with goal-setting and time management; b) monitoring student progress in online courses; c) checking in with students regularly to determine any needed support; and d)Identifying any online course elements that may need revision (reflected in low scores by majority of participants).	\$13,000	\$26,000	\$26,000	\$0	\$65,000
CURRICULUM DEVELOPMENT SPECIALIST (.5 FTE, develop 2-3 courses) Primary responsibilities include: a) developing curricula and online course materials for new Health IT certificate programs; and b) ensuring that all curricula meet approved criteria and that online course materials are developed to prescribed evidence-based standards.	\$54,000	\$0	\$0	\$0	\$54,000
FACULTY SUBJECT MATTER EXPERT - Core IT Curriculum (1 quarter release)	\$3,650	\$0	\$0	\$0	\$3,650
FACULTY SUBJECT MATTER EXPERT - Rad Tech Infusion (2 quarters release)	\$7,300	\$0	\$0	\$0	\$7,300
FACULTY SUBJECT MATTER EXPERT - Nursing Infusion (1 quarter release)	\$3,650	\$0	\$0	\$0	\$3,650
FACULTY FOR PILOT COURSES \$68K=\$7,555 per course - Y1: 1 course; Y2: 11 courses; Y3: 3 courses	\$7,555	\$83,105	\$22,665	\$0	\$113,325
FACULTY STIPEND for Consortium professional development participation 2 instructors x 2 events at \$350 per event	\$1,400	\$1,400	\$1,400	\$0	\$4,200
FACULTY STIPEND for review & comment on HIT course for health professions 3 stipends @ \$350 ea	\$1,050	\$0	\$0	\$0	\$1,050
TECHNICAL ASSISTANT - PT Hourly for webinars, event technology, instructor & student tech assistance, cloud storage, manipulation and retrieval, etc. PT hrly \$25/hr: 110 hrs per qtr, 2 quarters Y1; 3 qtrs Y2 & Y3	\$5,500	\$8,250	\$8,250	\$0	\$22,000
DATA ANALYTICS - PT Hourly SUBJECT MATTER EXPERT (60 hrs @ \$60/hr)	\$3,600	\$0	\$0	\$0	\$3,600
a. Total Personnel	\$180,705	\$198,755	\$138,315	\$13,500	\$531,275

**Health e-Workforce DoL TAACCCT
Budget Narrative - Bellevue College Member**

b. Fringe Benefits					
PROJECT MANAGER at 37%	\$19,980	\$19,980	\$19,980	\$4,995	\$64,935
STUDENT NAVIGATOR at 37%	\$9,620	\$9,620	\$9,620	\$0	\$28,860
STUDENT INSTRUCTIONAL SUPPORT at 37%	\$4,810	\$9,620	\$9,620	\$0	\$24,050
CURRICULUM DEVELOPMENT SPECIALIST at 37%	\$19,980	\$0	\$0	\$0	\$19,980
FACULTY SUBJECT MATTER EXPERT (Core IT, Rad Tech, Nursing) at 37%	\$5,402	\$0	\$0	\$0	\$5,402
FACULTY FOR PILOT COURSES at 37%	\$2,795	\$30,749	\$8,386	\$0	\$41,930
FACULTY STIPEND (professional dev., review HIT course) at 20%	\$490	\$280	\$280	\$0	\$1,050
TECHNICAL ASSISTANT, DATA ANALYTICS at 10%	\$910	\$825	\$825	\$0	\$2,560
b. Total Fringe Benefits	\$63,987	\$71,074	\$48,711	\$4,995	\$188,767
c. Travel					
Mileage to meetings and events at .55 per mile; mileage 900	\$495	\$495	\$495	\$200	\$1,685
c. Total Travel	\$495	\$495	\$495	\$200	\$1,685
e. Supplies					
Computer, printer, monitor \$1,100 x 2; netbook \$700 x1 Computer: Project Manager & Student Navigator; Netbook: Curriculum Development Specialist	\$2,900	\$0	\$0	\$0	\$2,900
Office supplies, paper, pens, toner, ect.	\$300	\$300	\$300	\$100	\$1,000
Meeting & Event supplies	\$300	\$300	\$300	\$0	\$900
Web cameras for virtual meeting attendance 4 x 41.99 PM; Curr Dev Specialist; Navigator; Instructional Support	\$168	\$0	\$0	\$0	\$168
Headsets for virtual meetings 4 x 54.99 PM; Curr Dev Specialist; Navigator; Instructional Support	\$220	\$0	\$0	\$0	\$220
Copying, including policy and procedure manual, reports, curriculum, etc.	\$350	\$150	\$150	\$0	\$650
e. Total Supplies	\$4,238	\$750	\$750	\$100	\$5,838
h. Other					
Virtual & regional professional association conference registrations	\$500	\$500	\$500	\$0	\$1,500
Program marketing, outreach and student recruitment activity	\$4,500	\$2,500	\$2,500	\$0	\$9,500
Phone & Postage	\$200	\$200	\$200	\$100	\$700

**Health e-Workforce DoL TAACCCT
Budget Narrative - Bellevue College Member**

Veterans org outreach 80 hrs per yr x \$50/hr x 2 yrs	\$4,000	\$4,000	\$0	\$0	\$8,000
h. Total Other	\$9,200	\$7,200	\$3,200	\$100	\$19,700
i. Total Direct Charges (a. - h.)	\$258,625	\$278,274	\$191,471	\$18,895	\$747,265
j. Indirect (8% limited) (Approved Rate 46% direct salaries)	\$20,690	\$22,262	\$15,318	\$1,512	\$59,781
k. BELLEVUE TOTAL CHARGES	\$279,315	\$300,536	\$206,789	\$20,407	\$807,046

Health e-Workforce DoL TAACCCT
Budget Narrative - Bellingham Technical College Member

CATEGORY / ITEM:					Requested
	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL
a. Personnel					
PROJECT MANAGER (1 FTE Y1-Y3; .25 FTE Y4) Manage implementation of project including staffing, budgeting, community outreach, partnerships, achievement of strategies, monitoring of progress, continuous improvement, and reporting.	\$54,000	\$54,000	\$54,000	\$13,500	\$175,500
STUDENT NAVIGATOR (.5 FTE) Provide program participant individual program advising to help bridge academic learning, student services, and community resources necessary for success. Collaborate with program partners to offer students job retention and career advancement support, as well as prepare, submit, and present all reports, updates, and information to the Project Manager.	\$26,000	\$26,000	\$26,000	\$0	\$78,000
STUDENT INSTRUCTIONAL SUPPORT (.5 FTE) Primary responsibilities include: a) assisting students with goal-setting and time management; b) monitoring student progress in online courses; c) checking in with students regularly to determine any needed support; and d) Identifying any online course elements that may need revision (reflected in low scores by majority of participants).	\$13,000	\$26,000	\$26,000	\$0	\$65,000
CURRICULUM DEVELOPMENT SPECIALIST (.5 FTE, develop 2-3 courses) Primary responsibilities include: a) BTC will create a Health Information Technology certificate option; and b) Pathway will include alignment with State IT core courses and target BTC's Computer Networking and Computer Software Support program students.	\$27,000	\$0	\$0	\$0	\$27,000
FACULTY SUBJECT MATTER EXPERT - Core IT Curriculum (1 quarter release)	\$3,436	\$0	\$0	\$0	\$3,436
FACULTY SUBJECT MATTER EXPERT - HIT Course Development (3 quarters release)	\$10,308	\$0	\$0	\$0	\$10,308
FACULTY FOR PILOT COURSES \$68K=\$7,555 per course - Y1: 1 course; Y2: 2 courses; Y3: 2 courses	\$7,555	\$15,110	\$15,110	\$0	\$37,775
FACULTY STIPEND for Consortium professional development participation 2 instructors x 1 events @ \$350 per event	\$700	\$700	\$700	\$0	\$2,100
TECHNICAL ASSISTANT - PT Hourly for webinars, event technology, instructor & student tech assistance, cloud storage, manipulation and retrieval, etc; PT hrly \$25/hr: 110 hrs per quarter, 2 quarters Y1; 3 quarters Y2 & Y3	\$5,500	\$8,250	\$8,250	\$0	\$22,000
a. Total Personnel	\$147,499	\$130,060	\$130,060	\$13,500	\$421,119
b. Fringe Benefits					
PROJECT MANAGER at 37%	\$19,980	\$19,980	\$19,980	\$4,995	\$64,935
STUDENT NAVIGATOR at 37%	\$9,620	\$9,620	\$9,620	\$0	\$28,860
STUDENT INSTRUCTIONAL SUPPORT at 37%	\$4,810	\$9,620	\$9,620	\$0	\$24,050

Health e-Workforce DoL TAACCCT
Budget Narrative - Bellingham Technical College Member

CURRICULUM DEVELOPMENT SPECIALIST at 37%	\$9,990	\$0	\$0	\$0	\$9,990
FACULTY SUBJECT MATTER EXPERT (Core IT, HIT) at 37%	\$5,085	\$0	\$0	\$0	\$5,085
FACULTY FOR PILOT COURSES at 37%	\$2,795	\$5,591	\$5,591	\$0	\$13,977
FACULTY STIPEND at 20%	\$140	\$140	\$140	\$0	\$420
TECHNICAL ASSISTANT at 10%	\$550	\$825	\$825	\$0	\$2,200
b. Total Fringe Benefits	\$52,970	\$45,776	\$45,776	\$4,995	\$149,517
c. Travel					
Program Manager Driving to Bellevue for Consortium Meeting Per diem \$71/day x 2 days; mileage 200 miles at .55; lodging \$162; incidentals \$15x2	\$444	\$444	\$444	\$0	\$1,332
Navigator Driving to Bellevue for Consortium meeting Per diem \$71/day x 2 days; mileage 200 miles at .55; lodging \$162; incidentals \$15x2	\$444	\$444	\$444	\$0	\$1,332
1 Faculty Driving to Bellevue for Core IT Curriculum Synthesis Meeting Per diem \$71/day x 2 days; mileage 200 miles at .55; lodging \$162; incidentals \$15x2	\$444	\$444	\$444	\$0	\$1,332
Curriculum Specialst Driving to Bellevue for Curriculum Development Meeting Per diem \$71/day x 2 days; mileage 200 miles at .55; lodging \$162; incidentals \$15x2	\$444	\$0	\$0	\$0	\$444
1 Faculty Driving to Bellevue for Curriculum Meeting Per diem \$71/day x 2 days; mileage 200 miles at .55; lodging \$162; incidentals \$15x2	\$444	\$0	\$0	\$0	\$444
2 Faculty Driving to Bellevue for Faculty Development Per diem \$71/day x 2 days; mileage 200 miles at .55; lodging \$162; incidentals \$15x2	\$888	\$888	\$888	\$0	\$2,664
Mileage to meetings and events at .55 per mile; Y1-3: mileage 500; Y4: mileage 200	\$275	\$275	\$275	\$110	\$935
c. Total Travel	\$3,383	\$2,495	\$2,495	\$110	\$8,483
e. Supplies					
Computer, printer, monitor \$1,100 x 2: Program Manager, Navigator	\$2,200	\$0	\$0	\$0	\$2,200
Consumable office supplies, such as paper, pens, toner	\$300	\$300	\$300	\$100	\$1,000
Meeting & Event supplies	\$300	\$300	\$300	\$0	\$900
Web cameras for virtual meeting attendance 4 x 41.99: Program Manager, Curriculum Dev Specialist; Navigator, Instructional Support	\$168	\$0	\$0	\$0	\$168
Headsets for virtual meetings 4 x 54.99: Program Manager, Curriculum Dev Specialist; Navigator, Instructional Support	\$220	\$0	\$0	\$0	\$220
Copying, including policy and procedure manual, reports, curriculum, etc.: Copy budget in Y4 for follow-up and reporting	\$350	\$150	\$150	\$150	\$800
e. Total Supplies	\$3,538	\$750	\$750	\$250	\$5,288

Health e-Workforce DoL TAACCCT
Budget Narrative - Bellingham Technical College Member

h. Other					
Virtual & regional professional association conference registrations					
Memberships: COMPTIA, Microsoft IT Academy	\$500	\$500	\$500	\$0	\$1,500
Program marketing,outreach and student recruitment activity	\$4,500	\$2,500	\$2,500	\$0	\$9,500
Phone & Postage	\$200	\$200	\$200	\$100	\$700
h. Total Other	\$5,200	\$3,200	\$3,200	\$100	\$11,700
i. Total Direct Charges (a. - h.)	\$212,590	\$182,281	\$182,281	\$18,955	\$596,107
j. Indirect (8% limited) (Approved Rate 20% direct cost)	\$17,007	\$14,582	\$14,582	\$1,516	\$47,687
k. BELLINGHAM TOTAL CHARGES	\$229,597	\$196,863	\$196,863	\$20,471	\$643,794

Health e-Workforce DoL TAACCCT
Budget Narrative - Clark College Member

CATEGORY / ITEM:					Requested
	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL
a. Personnel					
PROJECT MANAGER (1 FTE Y1-Y3; .25 FTE Y4) Manage implementation of project including staffing, budgeting, community outreach, partnerships, achievement of strategies, monitoring of progress, continuous improvement, and reporting.	\$54,000	\$54,000	\$54,000	\$13,500	\$175,500
STUDENT NAVIGATOR (.5 FTE, Y1 (6 mos), Y2-Y3 (12 mos)) Provide program participant individual program advising to help bridge academic learning, student services, and community resources necessary for success. Collaborate with program partners to offer students job retention and career advancement support, as well as prepare, submit, and present all reports, updates, and information to the Project Manager.	\$10,400	\$20,800	\$20,800	\$0	\$52,000
STUDENT INSTRUCTIONAL SUPPORT (.5 FTEY, Y1(6 mos), Y2 -Y3(9 mos)) Primary responsibilities include: a) assisting students with goal-setting and time management; b) monitoring student progress in online courses; c) checking in with students regularly to determine any needed support; and d)Identifying any online course elements that may need revision (reflected in low scores by majority of participants).	\$15,550	\$23,325	\$23,325	\$0	\$62,200
CURRICULUM DEVELOPMENT SPECIALIST (.5 FTE, develop 2-3 courses) Primary responsibilities include: a) developing curricula and online course materials for new Health IT certificate programs; and b) ensuring that all curricula meet approved criteria and that online course materials are developed to prescribed evidence-based standards.	\$23,325	\$0	\$0	\$0	\$23,325
FACULTY SUBJECT MATTER EXPERT - Core IT Curriculum (6 lecture contact hrs + 13 hrs (.33 FTE) at \$31.30)	\$4,029	\$0	\$0	\$0	\$4,029
FACULTY SUBJECT MATTER EXPERT - HIT Course Development (6 lecture contact hrs per quarter + 13 hrs (.33 FTE) at \$31.30)	\$12,087	\$0	\$0	\$0	\$12,087
FACULTY STIPEND for Consortium professional development participation 2 instructors x 2 events at \$350 per event	\$700	\$700	\$700	\$0	\$2,100
INSTRUCTIONAL & CLASSROOM SUPPORT TECH III - PT Hourly \$18.02/hr: 110 hrs per quarter, Y1:2 quarters; Y2 -Y3:3 quarters	\$3,964	\$5,947	\$5,947	\$0	\$15,858
a. Total Personnel	\$124,055	\$104,772	\$104,772	\$13,500	\$347,099
b. Fringe Benefits					
PROJECT MANAGER at 37%	\$19,980	\$19,980	\$19,980	\$4,995	\$64,935
STUDENT NAVIGATOR at 37%	\$3,848	\$7,696	\$7,696	\$0	\$19,240
STUDENT INSTRUCTIONAL SUPPORT at 37%	\$5,754	\$8,630	\$8,630	\$0	\$23,014

**Health e-Workforce DoL TAACCCT
Budget Narrative - Clark College Member**

CURRICULUM DEVELOPMENT SPECIALIST at 37%	\$8,630	\$0	\$0	\$0	\$8,630
FACULTY SUBJECT MATTER EXPERT (Core IT, HIT) at 37%	\$5,963	\$0	\$0	\$0	\$5,963
FACULTY STIPEND at 20%	\$140	\$140	\$140	\$0	\$420
INSTRUCTIONAL & CLASSROOM SUPPORT TECH III at 10%	\$396	\$595	\$595	\$0	\$1,586
b. Total Fringe Benefits	\$44,711	\$37,041	\$37,041	\$4,995	\$123,788
c. Travel					
Program Manager Driving to Bellevue for TAACCCT Grant Consortium Meeting Per diem: \$71/day x2 days; mileage: 350 miles at .55=\$193, lodging: \$ 137, incidentals \$15x2	\$502	\$502	\$502	\$0	\$1,506
Navigator Driving to Bellevue for TAACCCT Grant Consortium meeting Per diem: \$71/day x2 days; mileage: 350 miles at .55=\$193, lodging: \$ 137, incidentals \$15x2	\$502	\$502	\$502	\$0	\$1,506
1 Faculty Driving to Bellevue for Core IT Curriculum Synthesis Meeting Per diem: \$71/day x2 days; mileage: 350 miles at .55=\$193, lodging: \$ 137, incidentals \$15x2	\$502	\$502	\$502	\$0	\$1,506
Curriculum Specialst Driving to Bellevue for Curriculum Development Meeting Per diem: \$71/day x2 days; mileage: 350 miles at .55=\$193, lodging: \$ 137, incidentals \$15x2	\$502	\$0	\$0	\$0	\$502
1 Faculty Driving to Bellevue for Curriculum Meeting Per diem: \$71/day x2 days; mileage: 350 miles at .55=\$193, lodging: \$ 137, incidentals \$15x2	\$502	\$0	\$0	\$0	\$502
2 Faculty Driving to Bellevue for Faculty Development Per diem: \$71/day x2 days; mileage: 350 miles at .55=\$193, lodging: \$ 137, incidentals \$15x2	\$1,004	\$1,004	\$1,004	\$0	\$3,012
Mileage to miscellaneous meetings and events at .55: mileage 1000; incidentals \$15x3 days	\$595	\$595	\$595	\$298	\$2,083
Program Manager Driving to Bellevue for regional Health Informatics Consortium meeting (3 times per year)	\$1,502.00	\$1,502.00	\$1,503.00	\$0	\$4,507
c. Total Travel	\$5,611	\$4,607	\$4,608	\$298	\$15,124
e. Supplies					
Computer, printer, monitor \$1,100 x 2: Program Manager, Navigator	\$2,200	\$0	\$0	\$0	\$2,200
Consumable office supplies, such as paper, pens, toner	\$300	\$300	\$300	\$100	\$1,000
Meeting & Event supplies	\$300	\$300	\$300	\$0	\$900
Web cameras for virtual meeting attendance 4 x 41.99: Program Manager; Curriculum Dev. Specialist; Navigator; Instructional Support	\$168	\$0	\$0	\$0	\$168
Headsets for virtual meetings 4 x 54.99Program Manager; Curriculum Dev. Specialist; Navigator; Instructional Support	\$220	\$0	\$0	\$0	\$220
Copying, including policy and procedure manual, reports, curriculum, etc.	\$350	\$150	\$150	\$0	\$650

**Health e-Workforce DoL TAACCCT
Budget Narrative - Clark College Member**

e. Total Supplies	\$3,538	\$750	\$750	\$100	\$5,138
h. Other					
Virtual & regional professional association conference registrations	\$250	\$250	\$250	\$0	\$750
Program marketing,outreach and student recruitment activity	\$4,500	\$2,500	\$2,500	\$0	\$9,500
Phone & Postage	\$200	\$200	\$200	\$100	\$700
h. Total Other	\$4,950	\$2,950	\$2,950	\$100	\$10,950
i. Total Direct Charges (a. - h.)	\$182,865	\$150,120	\$150,121	\$18,993	\$502,099
j. Indirect (8% limited) (Approved Rate 42% direct salaries)	\$14,629	\$12,010	\$12,010	\$1,519	\$40,168
k. CLARK TOTAL CHARGES	\$197,494	\$162,130	\$162,131	\$20,512	\$542,267

Health e-Workforce DoL TAACCCT
Budget Narrative - Clover Park Technical College Member

CATEGORY / ITEM:					Requested
	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL
a. Personnel					
PROJECT MANAGER (1 FTE Y1-Y3, .25 FTE Y4) Manage implementation of project including staffing, budgeting, community outreach, partnerships, achievement of strategies, monitoring of progress, continuous improvement, and reporting.	\$52,252	\$52,252	\$52,252	\$13,063	\$169,819
STUDENT INSTRUCTIONAL SUPPORT (.5 FTE) Primary responsibilities include: a) assisting students with goal-setting and time management; b) monitoring student progress in online courses; c) checking in with students regularly to determine any needed support; and d) identifying any online course elements that may need revision (reflected in low scores by majority of participants).	\$13,718	\$13,718	\$13,718	\$0	\$41,154
CURRICULUM DEVELOPMENT SPECIALIST (.5 FTE, develop 2-3 courses) Primary responsibilities include: a) developing curricula and online course materials for new Health IT certificate programs; and b) ensuring that all curricula meet approved criteria and that online course materials are developed to prescribed evidence-based standards.	\$27,000	\$0	\$0	\$0	\$27,000
FACULTY SUBJECT MATTER EXPERT - Core IT Curriculum (1 quarter release)	\$3,000	\$0	\$0	\$0	\$3,000
FACULTY SUBJECT MATTER EXPERT - HIT Course Development (3 quarters release)	\$10,000	\$0	\$0	\$0	\$10,000
FACULTY FOR PILOT COURSES (Y1: .75; YR2-3: 1 FTE)	\$39,000	\$52,000	\$52,000	\$0	\$143,000
FACULTY STIPEND for Consortium professional development participation 1 instructors x 2 events at \$350 per event	\$700	\$700	\$700	\$0	\$2,100
a. Total Personnel	\$145,670	\$118,670	\$118,670	\$13,063	\$396,073
b. Fringe Benefits					
PROJECT MANAGER at 37%	\$19,333	\$19,333	\$19,333	\$4,833	\$62,832
STUDENT INSTRUCTIONAL SUPPORT at 37%	\$5,076	\$5,076	\$5,076	\$0	\$15,228
CURRICULUM DEVELOPMENT SPECIALIST at 37%	\$9,990	\$0	\$0	\$0	\$9,990
FACULTY SUBJECT MATTER EXPERT (Core IT, HIT) at 37%	\$4,810	\$0	\$0	\$0	\$4,810
FACULTY FOR PILOT COURSES at 37%	\$14,430	\$19,240	\$19,240	\$0	\$52,910
FACULTY STIPEND at 20%	\$140	\$140	\$140	\$0	\$420
b. Total Fringe Benefits	\$53,779	\$43,789	\$43,789	\$4,833	\$146,190
c. Travel					

**Health e-Workforce DoL TAACCCT
Budget Narrative - Clover Park Technical College Member**

Program Manager Driving to Bellevue for Consortium Meeting					
Per diem: \$72/day x2 days; mileage: 104 miles at .55=\$57, lodging: \$ 137, incidentals \$15x2	\$369	\$369	\$369	\$0	\$1,107
1 Faculty Driving to Bellevue for Core IT Curriculum Synthesis Meeting	\$369	\$369	\$369	\$0	\$1,107
Curriculum Specialist Driving to Bellevue for Curriculum Development Meeting	\$369	\$0	\$0	\$0	\$369
1 Faculty Driving to Bellevue for Curriculum Meeting	\$369	\$0	\$0	\$0	\$369
2 Faculty Driving to Bellevue for Faculty Development	\$369	\$0	\$0	\$0	\$369
Mileage to meetings and events 464 x .55 per mile	\$255	\$255	\$255	\$102	\$867
c. Total Travel	\$2,100	\$993	\$993	\$102	\$4,188
e. Supplies					
Computer, printer, monitor \$1,100 x 2:					
Program Manager, Navigator	\$2,200	\$0	\$0	\$0	\$2,200
Consumable office supplies, such as paper, pens, toner	\$300	\$300	\$300	\$100	\$1,000
Meeting & Event supplies	\$300	\$300	\$300	\$0	\$900
Web cameras for virtual meeting attendance 4 x 41.99:					
Program Manager; Curriculum Dev. Specialist; Navigator; Instructional Support	\$168	\$0	\$0	\$0	\$168
Headsets for virtual meetings 4 x 54.99:					
Program Manager; Curriculum Dev. Specialist; Navigator; Instructional Support	\$220	\$0	\$0	\$0	\$220
Copying, including policy and procedure manual, reports, curriculum, etc.	\$350	\$150	\$150	\$0	\$650
e. Total Supplies	\$3,538	\$750	\$750	\$100	\$5,138
h. Other					
Virtual & regional professional association conference registrations	\$250	\$250	\$250	\$0	\$750
Program marketing, outreach and student recruitment activity	\$1,500	\$1,500	\$1,500	\$0	\$4,500
Phone & Postage	\$200	\$200	\$200	\$100	\$700
h. Total Other	\$1,950	\$1,950	\$1,950	\$100	\$5,950
i. Total Direct Charges (a. - h.)	\$207,037	\$166,152	\$166,152	\$18,198	\$557,539
j. Indirect (8% limited) (Approved Rate 49% direct salaries)	\$16,563	\$13,292	\$13,292	\$1,456	\$44,603
k. CLOVER PARK TOTAL CHARGES	\$223,600	\$179,444	\$179,444	\$19,654	\$602,142

**Health e-Workforce DoL TAACCCT
Budget Narrative - Pierce College Member**

CATEGORY / ITEM:					Requested
	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL
a. Personnel					
PROJECT MANAGER (1 FTE Y1-Y3; .25 FTE Y4) Manage implementation of project including staffing, budgeting, community outreach, partnerships, achievement of strategies, monitoring of progress, continuous improvement, and reporting.	\$52,000	\$52,000	\$52,000	\$13,000	\$169,000
STUDENT NAVIGATOR (Career Coach) (.5 FTE) Primary responsibilities include student outreach and recruitment, student advising, career services, and health IT employer outreach.	\$26,000	\$26,000	\$26,000	\$0	\$78,000
STUDENT INSTRUCTIONAL SUPPORT (.5 FTE) Primary responsibilities include: a) assisting students with goal-setting and time management; b) monitoring student progress in online courses; c) checking in with students regularly to determine any needed support; and d) identifying any online course elements that may need revision (reflected in low scores by majority of participants).	\$12,500	\$25,000	\$25,000	\$0	\$62,500
CURRICULUM DEVELOPMENT SPECIALIST (.5 FTE) Primary responsibilities include: a) work with faculty SME to convert existing curriculum to online/hybrid and process through internal/external approval; and b) ensuring that all curricula meet approved criteria and that online course materials are developed to prescribed evidence-based standards.	\$24,500	\$0	\$0	\$0	\$24,500
FACULTY SUBJECT MATTER EXPERT Core IT Curriculum - 1 quarter backfill	\$3,462	\$0	\$0	\$0	\$3,462
FACULTY SUBJECT MATTER EXPERT HIT Course Development (3 quarters 1/3 released time)	\$10,386	\$0	\$0	\$0	\$10,386
FACULTY FOR PILOT COURSES Cost of instruction for two new database for Health IT courses taught online/hybrid	\$0	\$6,924	\$6,924	\$0	\$13,848
FACULTY STIPEND for Consortium professional development participation: 1 instructors x 2 events at \$350 per event	\$700	\$700	\$700	\$0	\$2,100
PT Hourly for technical assistance (instructor & student technical assistance, cloud storage, manipulation and retrieval) for newly developed database for Health IT courses; part-time hourly, \$25/hour x 5 hours per week x 10 weeks; 3 quarters year 2 and 3 for infusion of new courses and software into CIS and nursing labs	\$0	\$3,750	\$3,750	\$0	\$7,500
a. Total Personnel	\$129,548	\$114,374	\$114,374	\$13,000	\$371,296
b. Fringe Benefits					
PROJECT MANAGER at 37%	\$19,240	\$19,240	\$19,240	\$4,810	\$62,530

**Health e-Workforce DoL TAACCCT
Budget Narrative - Pierce College Member**

STUDENT NAVIGATOR at 37%	\$9,620	\$9,620	\$9,620	\$0	\$28,860
STUDENT INSTRUCTIONAL SUPPORT at 37%	\$4,625	\$9,250	\$9,250	\$0	\$23,125
CURRICULUM DEVELOPMENT SPECIALIST at 37%	\$9,065	\$0	\$0	\$0	\$9,065
FACULTY SUBJECT MATTER EXPERT (Core IT, HIIT) at 37%	\$5,124	\$0	\$0	\$0	\$5,124
FACULTY FOR PILOT COURSES at 37%	\$0	\$2,562	\$2,562	\$0	\$5,124
FACULTY STIPEND at 20%	\$140	\$140	\$140	\$0	\$420
MEDIA SPECIALIST at 10%	\$0	\$375	\$375	\$0	\$750
b. Total Fringe Benefits	\$47,814	\$41,187	\$41,187	\$4,810	\$134,998
c. Travel					
Program Manager Driving to Bellevue for Consortium Meetings Per diem: \$72/day x2 days; mileage: 120 miles at .55=\$66, lodging: \$ 137, incidentals \$15x2	\$377	\$377	\$377	\$0	\$1,131
Navigator Driving to Bellevue for Consortium meetings Per diem: \$72/day x2 days; mileage: 120 miles at .55=\$66, lodging: \$ 137, incidentals \$15x2	\$377	\$377	\$377	\$0	\$1,131
1 Faculty Driving to Bellevue for Core IT Curriculum Synthesis Meetings Per diem: \$72/day x2 days; mileage: 120 miles at .55=\$66, lodging: \$ 137, incidentals \$15x2	\$377	\$377	\$0	\$0	\$754
Curriculum Specialist Driving to Bellevue for Curriculum Development Meetings Per diem: \$72/day x2 days; mileage: 120 miles at .55=\$66, lodging: \$ 137, incidentals \$15x2	\$377	\$0	\$0	\$0	\$377
1 Faculty Driving to Bellevue for Curriculum Meeting Per diem: \$72/day x2 days; mileage: 120 miles at .55=\$66, lodging: \$ 137, incidentals \$15x2	\$377	\$0	\$0	\$0	\$377
2 Faculty Driving to Bellevue for Faculty Development Per diem: \$72/day x2 days; mileage: 120 miles at .55=\$66, lodging: \$ 137, incidentals \$15x2	\$754	\$754	\$754	\$0	\$2,262
Mileage to meetings and events at .55 per mile; mileage 112	\$62	\$62	\$61	\$0	\$185
c. Total Travel	\$2,701	\$1,947	\$1,569	\$0	\$6,217
e. Supplies					
Computer, printer, monitor \$1,365 x 2: Program Manager, Career Coach	\$2,730	\$0	\$0	\$0	\$2,730
Consumable office supplies, such as paper, pens, toner	\$300	\$300	\$300	\$100	\$1,000
Meeting & Event supplies	\$300	\$300	\$300	\$0	\$900

**Health e-Workforce DoL TAACCCT
Budget Narrative - Pierce College Member**

Web cameras for virtual meeting attendance 4 x 41.99: Program Manager; Curriculum Dev. Specialist; Navigator; Instructional Support	\$168	\$0	\$0	\$0	\$168
Headsets for virtual meetings 4 x 54.99: Program Manager; Curriculum Dev. Specialist; Navigator; Instructional Support	\$220	\$0	\$0	\$0	\$220
Copying, including policy and procedure manual, reports, curriculum, etc.	\$350	\$150	\$150	\$0	\$650
e. Total Supplies	\$4,068	\$750	\$750	\$100	\$5,668
h. Other					
Virtual & regional professional association conference registrations	\$250	\$250	\$250	\$0	\$750
Program marketing,outreach and student recruitment activity	\$4,500	\$2,500	\$2,500	\$0	\$9,500
Phone & Postage	\$200	\$200	\$200	\$100	\$700
h. Total Other	\$4,950	\$2,950	\$2,950	\$100	\$10,950
i. Total Direct Charges (a. - h.)	\$189,081	\$161,208	\$160,830	\$18,010	\$529,129
j. Indirect (8% limited) (Approved Rate 40% direct salaries)	\$15,126	\$12,897	\$12,866	\$1,441	\$42,330
k. PIERCE TOTAL CHARGES	\$204,207	\$174,105	\$173,696	\$19,451	\$571,459

Health e-Workforce DoL TAACCCT
Budget Narrative - Renton Technical College Member

CATEGORY / ITEM:					Requested
	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL
a. Personnel					
PROJECT MANAGER (1 FTE Y1-Y3, .25 FTE Y4) Manage implementation of project including staffing, budgeting, community outreach, partnerships, achievement of strategies, monitoring of progress, continuous improvement, and reporting.	\$65,000	\$65,000	\$65,000	\$16,250	\$211,250
STUDENT NAVIGATOR (.5 FTE) Provide program participant individual program advising to help bridge academic learning, student services, and community resources necessary for success. Collaborate with program partners to offer students job retention and career advancement support, as well as prepare, submit, and present all reports, updates, and information to the Project Manager.	\$23,000	\$23,000	\$23,000	\$0	\$69,000
STUDENT INSTRUCTIONAL SUPPORT (1 FTE; 2 cohorts) Primary responsibilities include: a) assisting students with goal-setting and time management; b) monitoring student progress in online courses; c) checking in with students regularly to determine any needed support; and d) identifying any online course elements that may need revision (reflected in low scores by majority of participants).	\$13,000	\$52,000	\$52,000	\$0	\$117,000
CURRICULUM DEVELOPMENT SPECIALIST (.5 FTE, develop 2-3 courses) Primary responsibilities include: a) developing curricula and online course materials for new Health IT certificate programs; and b) ensuring that all curricula meet approved criteria and that online course materials are developed to prescribed evidence-based standards.	\$27,000	\$0	\$0	\$0	\$27,000
FACULTY SUBJECT MATTER EXPERT - Core IT Curriculum (1 quarter release)	\$3,436	\$0	\$0	\$0	\$3,436
FACULTY SUBJECT MATTER EXPERT - HIT Course Development (3 quarters release)	\$10,308	\$0	\$0	\$0	\$10,308
FACULTY FOR PILOT COURSES \$7,555 per course - Y1: 1 course; Y2-3: 2 courses	\$7,555	\$15,110	\$15,110	\$0	\$37,775
FACULTY STIPEND for Consortium professional development participation: 1 instructors x 2 events at \$350 per event	\$700	\$700	\$700	\$0	\$2,100
TECHNICAL ASSISTANT - PT Hourly for webinars, event technology, instructor & student tech assistance, cloud storage, manipulation and retrieval, etc.: PT hourly , \$25/hr: 110 hrs per quarter, Y1: 2 quarters; Y2-3: 3 quarters	\$5,500	\$8,250	\$8,250	\$0	\$22,000
a. Total Personnel	\$155,499	\$164,060	\$164,060	\$16,250	\$499,869
b. Fringe Benefits					
PROJECT MANAGER at 37%	\$24,050	\$24,050	\$24,050	\$6,013	\$78,163

Health e-Workforce DoL TAACCCT
Budget Narrative - Renton Technical College Member

STUDENT NAVIGATOR at 37%	\$8,510	\$8,510	\$8,510	\$0	\$25,530
STUDENT INSTRUCTIONAL SUPPORT at 37%	\$4,810	\$19,240	\$19,240	\$0	\$43,290
CURRICULUM DEVELOPMENT SPECIALIST at 37%	\$9,990	\$0	\$0	\$0	\$9,990
FACULTY SUBJECT MATTER EXPERT (Core IT, HIT) at 37%	\$5,085	\$0	\$0	\$0	\$5,085
FACULTY FOR PILOT COURSES at 37%	\$2,795	\$5,591	\$5,591	\$0	\$13,977
FACULTY STIPEND at 20%	\$140	\$140	\$140	\$0	\$420
TECHNICAL ASSISTANT at 10%	\$550	\$825	\$825	\$0	\$2,200
b. Total Fringe Benefits	\$55,930	\$58,356	\$58,356	\$6,013	\$178,655
c. Travel					
Program Manager Driving to Bellevue for Consortium Meeting mileage: 23 miles at .55=\$13 per trip	\$13	\$13	\$13	\$0	\$39
Navigator Driving to Bellevue for Consortium meeting mileage: 23 miles at .55=\$13 per trip	\$13	\$13	\$13	\$0	\$39
1 Faculty Driving to Bellevue for Core IT Curriculum Synthesis Meeting mileage: 23 miles at .55=\$13 per trip	\$13	\$13	\$13	\$0	\$39
Curriculum Specialst Driving to Bellevue for Curriculum Development Meeting mileage: 23 miles at .55=\$13 per trip	\$13	\$0	\$0	\$0	\$13
1 Faculty Driving to Bellevue for Curriculum Meeting mileage: 23 miles at .55=\$13 per trip	\$13	\$0	\$0	\$0	\$13
2 Faculty Driving to Bellevue for Faculty Development mileage: 23 miles at .55=\$13 per trip	\$26	\$26	\$26	\$0	\$78
Mileage to meetings and events at .55 per mile: mileage 500	\$275	\$275	\$275	\$110	\$935
c. Total Travel	\$366	\$340	\$340	\$110	\$1,156
e. Supplies					
Computer, printer, monitor \$1,100 x 2: Program Manager, Navigator	\$2,200	\$0	\$0	\$0	\$2,200
Consumable office supplies, such as paper, pens, toner	\$300	\$300	\$300	\$100	\$1,000
Meeting & Event supplies	\$300	\$300	\$300	\$0	\$900
Web cameras for virtual meeting attendance 4 x 41.99: Program Manager; Curriculum Dev. Specialist; Navigator; Instructional Support	\$168	\$0	\$0	\$0	\$168
Headsets for virtual meetings 4 x 54.99: Program Manager; Curriculum Dev. Specialist; Navigator; Instructional Support	\$220	\$0	\$0	\$0	\$220
Copying, including policy and procedure manual, reports, curriculum, etc.	\$350	\$150	\$150	\$0	\$650
e. Total Supplies	\$3,538	\$750	\$750	\$100	\$5,138

Health e-Workforce DoL TAACCCT
Budget Narrative - Renton Technical College Member

h. Other					
Virtual & regional professional association conference registrations	\$250	\$250	\$250	\$0	\$750
Program marketing,outreach and student recruitment activity	\$4,500	\$2,500	\$2,500	\$0	\$9,500
Phone & Postage	\$200	\$200	\$200	\$100	\$700
h. Total Other	\$4,950	\$2,950	\$2,950	\$100	\$10,950
i. Total Direct Charges (a. - h.)	\$220,283	\$226,456	\$226,456	\$22,573	\$695,768
j. INDIRECT (8% limited) (Application in review for approved rate)	\$17,623	\$18,116	\$18,116	\$1,806	\$55,661
k. RENTON TOTAL CHARGES	\$237,906	\$244,572	\$244,572	\$24,379	\$751,429

Health e-Workforce DoL TAACCCT
Budget Narrative - Spokane Community College Member

CATEGORY / ITEM:					Requested
	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL
a. Personnel					
PROJECT MANAGER (PE I) (1 FTE Y1-Y3 (Step advancement after 2 years); .25 FTE Y 4) Manage implementation of project including staffing, budgeting, community outreach, partnerships, achievement of strategies, monitoring of progress, continuous improvement, and reporting.	\$57,759	\$57,759	\$60,166	\$14,440	\$190,124
WORKFORCE NAVIGATOR (.5 FTE) Provide student recruitment, experiential learning opportunities, placement, program participant individual program advising to help bridge academic learning, student services, and community resources necessary for success. Collaborate with program partners to offer students job retention and career advancement support, as well as prepare, submit, and present all reports, updates, and information to the Project Manager.	\$26,000	\$26,000	\$26,000	\$0	\$78,000
STUDENT INSTRUCTIONAL COORDINATOR -PT Hourly (\$17.66 hr X20 hrs wk) Primary responsibilities include marketing/identifying interested students, workforce funding assistance, student retention such as placement testing, resource referral, experiential learning, etc.	\$18,366	\$18,366	\$18,366	\$0	\$55,098
CURRICULUM DEVELOPMENT SPECIALIST (.5 FTE, develop 2-3 courses) Primary responsibilities include: a) developing curricula and online course materials for new Health IT certificate programs; and b) ensuring that all curricula meet approved criteria and that online course materials are developed to prescribed evidence-based standards.	\$14,835	\$0	\$0	\$0	\$14,835
FACULTY SUBJECT MATTER EXPERT - Core IT Curriculum (33% release time/1 quarter)	\$3,297	\$0	\$0	\$0	\$3,297
FACULTY SUBJECT MATTER EXPERT - HIT Course Development (33% release time/3 quarters)	\$9,890	\$0	\$0	\$0	\$9,890
FACULTY FOR PILOT COURSES Category A Adjunct rate = \$3,297 per 5 credit course X 6 courses for Year 1 (Cohort to begin Spring/Summer with 2 courses each quarter and another cohort to begin Summer Quarter with 2 courses); 16 courses X \$3297= \$52,752 (4 courses each quarter) for Year 2; 14 courses X \$3297 = \$46,158 for Year 3.	\$19,782	\$52,752	\$46,158	\$0	\$118,692
FACULTY STIPEND for Consortium professional development participation 1 instructors x 2 events at \$350 per event	\$700	\$700	\$700	\$0	\$2,100
TECHNICAL ASSISTANT - PT Hourly for webinars, event technology, instructor & student tech assistance, cloud storage, manipulation and retrieval, etc.: Part-time hourly , \$25/hr: 110 hrs per quarter, Y1: 2 quarters; Y2-3: 3 quarters	\$5,500	\$8,250	\$8,250	\$0	\$22,000
a. Total Personnel	\$156,129	\$163,827	\$159,640	\$14,440	\$494,036

Health e-Workforce DoL TAACCCT
Budget Narrative - Spokane Community College Member

b. Fringe Benefits					
PROJECT MANAGER at 37%	\$21,371	\$21,371	\$22,261	\$5,343	\$70,346
WORKFORCE NAVIGATOR at 37%	\$9,620	\$9,620	\$9,620	\$0	\$28,860
STUDENT INSTRUCTIONAL SUPPORT at 37%	\$6,795	\$6,795	\$6,795	\$0	\$20,385
CURRICULUM DEVELOPMENT SPECIALIST at 37%	\$5,489	\$0	\$0	\$0	\$5,489
FACULTY SUBJECT MATTER EXPERT (Core IT, HIT) at 37%	\$4,879	\$0	\$0	\$0	\$4,879
FACULTY FOR PILOT COURSES at 37%	\$7,319	\$19,518	\$17,078	\$0	\$43,915
FACULTY STIPEND at 20%	\$140	\$140	\$140	\$0	\$420
TECHNICAL ASSISTANT at 10%	\$550	\$825	\$825	\$0	\$2,200
b. Total Fringe Benefits	\$56,163	\$58,269	\$56,719	\$5,343	\$176,494
c. Travel					
Program Manager Flying to Bellevue for Consortium Meeting Per diem: \$71/day x2 days; Flight \$229; \$54 rental car, lodging: \$ 137, parking \$20 = \$582	\$582	\$582	\$582	\$0	\$1,746
Navigator Flying to Bellevue for Consortium meeting Flying Navigator: \$229 flight; \$54 rental car; per diem \$71/day x2 days; lodging: \$137; Parking \$20 = \$582	\$582	\$582	\$582	\$0	\$1,746
1 Faculty Flying to Bellevue for Core IT Curriculum Synthesis Meeting Flying Navigator: \$229 flight; \$54 rental car; per diem \$71/day x2 days; lodging: \$137; Parking \$20 = \$582	\$582	\$582	\$582	\$0	\$1,746
Curriculum Specialst Flying to Bellevue for Curriculum Development Meeting Flying Navigator: \$229 flight; \$54 rental car; per diem \$71/day x2 days; lodging: \$137; Parking \$20 = \$582	\$582	\$0	\$0	\$0	\$582
1 Faculty Flying to Bellevue for Curriculum Meeting Flying Navigator: \$229 flight; \$54 rental car; per diem \$71/day x2 days; lodging: \$137; Parking \$20 = \$582	\$582	\$0	\$0	\$0	\$582
2 Faculty Flying to Bellevue for Faculty Development Flying Navigator: \$229 flight; \$54 rental car; per diem \$71/day x2 days; lodging: \$137; Parking \$20 = \$582	\$1,164	\$1,164	\$1,164	\$0	\$3,492
Mileage to meetings and event at .55 per mile: Y1-3, mileage 500; Y4, mileage 250	\$275	\$275	\$275	\$138	\$963
c. Total Travel	\$4,349	\$3,185	\$3,185	\$138	\$10,857
e. Supplies					

Health e-Workforce DoL TAACCCT
Budget Narrative - Spokane Community College Member

Computer, printer, monitor \$1,596 x 2:					
Program Manager, Student Curriculum Assistant	\$3,192	\$0	\$0	\$0	\$3,192
Consumable office supplies, such as paper, pens, toner	\$300	\$300	\$300	\$100	\$1,000
Meeting & Event supplies	\$300	\$300	\$300	\$0	\$900
Web cameras for virtual meeting attendance 4 x 41.99:					
Program Manager; Curriculum Dev. Specialist;Instructional Support	\$168	\$0	\$0	\$0	\$168
Copying, including policy and procedure manual, reports, curriculum, etc.	\$350	\$150	\$150	\$0	\$650
e. Total Supplies	\$4,310	\$750	\$750	\$100	\$5,910
h. Other					
Virtual & regional professional association conference registrations: HIMSS	\$250	\$250	\$250	\$0	\$750
Program marketing,outreach and student recruitment activity	\$4,500	\$2,500	\$2,500	\$0	\$9,500
Phone & Postage	\$200	\$200	\$200	\$100	\$700
h. Total Other	\$4,950	\$2,950	\$2,950	\$100	\$10,950
i. Total Direct Charges (a. - h.)	\$225,901	\$228,981	\$223,244	\$20,121	\$698,247
j. Indirect (8% limited) (Approved Rate 37% direct salaries)	\$18,072	\$18,318	\$17,860	\$1,610	\$55,860
k. SPOKANE TOTAL CHARGES	\$243,973	\$247,299	\$241,104	\$21,731	\$754,107

Health e-Workforce DoL TAACCCT
Budget Narrative - Whatcom Community College Member

CATEGORY / ITEM:					Requested
	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL
a. Personnel					
PROJECT MANAGER (1 FTE Y1-Y3; .25 FTE Y 4) Manage implementation of project including staffing, budgeting, community outreach, partnerships, achievement of strategies, monitoring of progress, continuous improvement, and reporting.	\$52,000	\$52,633	\$53,320	\$13,330	\$171,283
STUDENT NAVIGATOR (.50 FTE years 2-3, Y1 is 5 months @\$42,000 FTE) Provide program participant individual program advising to help bridge academic learning, student services, and community resources necessary for success. Collaborate with program partners to offer students job retention and career advancement support, as well as prepare, submit, and present all reports, updates, and information to the Project Manager.	\$8,750	\$21,273	\$21,549	\$0	\$51,572
INSTRUCTIONAL COORDINATOR (.50 FTE Y2-Y3, Y1 is 4 months @\$42,000 FTE) Primary responsibilities include: a) assisting students with goal-setting and time management; b) monitoring student progress in online courses; c) checking in with students regularly to determine any needed support; and d)Identifying any online course elements that may need revision (reflected in low scores by majority of participants).	\$7,000	\$21,273	\$21,549	\$0	\$49,822
CURRICULUM DEVELOPMENT SPECIALIST (Y1: 400 hours @\$25 per hour) Develop 1 Health IT course	\$10,000	\$0	\$0	\$0	\$10,000
FACULTY SUBJECT MATTER EXPERT - Core IT Curriculum (1 quarter backfill)	\$3,828	\$0	\$0	\$0	\$3,828
FACULTY SUBJECT MATTER EXPERT - HIT Course Development (1 quarter backfill)	\$3,828	\$0	\$0	\$0	\$3,828
FACULTY SUBJECT MATTER EXPERT - Allied Health Course Infusion (2 quarters for PTA; 1 quarter MA; 1 quarter Nursing/ \$3,600 per program backfill per quarter)	\$14,400	\$0	\$0	\$0	\$14,400
FACULTY FOR PILOT COURSES (Y2- 2 courses; Y1 - 1 course)	\$0	\$7,555	\$7,555	\$0	\$15,110
FACULTY STIPEND for Consortium professional development participation - 3 instructors x 2 events at \$250/event	\$1,050	\$1,050	\$0	\$0	\$2,100
PT Hourly for technical assistance (webinars, event technology, instructor & student tech assistance, cloud storage, manipulation and retrieval, etc.) IT at \$15.50/hour: 110 hours per quarter, Two quarters Year 1; 3 quarters Years 2 and 3 and one for curriculum/program support at \$12.50/hour: 110 hours per quarter, 2 quaters year 1 and 3 quarters years 2 and 3	\$6,160	\$9,240	\$9,240	\$0	\$24,640
a. Total Personnel	\$107,016	\$113,024	\$113,213	\$13,330	\$346,583
b. Fringe Benefits					
PROJECT MANAGER at 37%	\$19,240	\$19,474	\$19,728	\$4,932	\$63,374

Health e-Workforce DoL TAACCCT
Budget Narrative - Whatcom Community College Member

STUDENT NAVIGATOR at 37%	\$3,238	\$7,871	\$7,973	\$0	\$19,082
INSTRUCTIONAL COORDINATOR at 37%	\$2,590	\$7,871	\$7,973	\$0	\$18,434
CURRICULUM DEVELOPMENT SPECIALIST at 37%	\$3,700	\$0	\$0	\$0	\$3,700
FACULTY SUBJECT MATTER EXPERT (Core IT, HIT, Allied Health) at 37%	\$8,161	\$0	\$0	\$0	\$8,161
FACULTY FOR PILOT COURSES at 37%	\$0	\$2,795	\$2,795	\$0	\$5,590
FACULTY STIPEND at 37%	\$389	\$389	\$0	\$0	\$778
TECHNICAL ASSISTANT, CURRICULUM DEV. PROGRAM at 10%	\$616	\$924	\$924	\$0	\$2,464
b. Total Fringe Benefits	\$37,934	\$39,324	\$39,393	\$4,932	\$121,583
c. Travel					
Program Manager Driving to Bellevue for Consortium Meeting Per diem: \$72/day x2 days; mileage: 200 miles at .55=\$110, lodging: \$ 137, incidentals \$15x2	\$421	\$421	\$421	\$0	\$1,263
Navigator Driving to Bellevue for Consortium meeting Per diem: \$72/day x2 days; mileage: 200 miles at .55=\$110, lodging: \$ 137, incidentals \$15x2	\$421	\$421	\$421	\$0	\$1,263
1 Faculty Driving to Bellevue for Core IT Curriculum Synthesis Meeting Per diem: \$72/day x2 days; mileage: 200 miles at .55=\$110, lodging: \$ 137, incidentals \$15x2	\$421	\$421	\$0	\$0	\$842
Curriculum Specialist Driving to Bellevue for Curriculum Development Meeting Per diem: \$72/day x2 days; mileage: 200 miles at .55=\$110, lodging: \$ 137, incidentals \$15x2	\$421	\$0	\$0	\$0	\$421
1 Faculty Driving to Bellevue for Curriculum Meeting Per diem: \$72/day x2 days; mileage: 200 miles at .55=\$110, lodging: \$ 137, incidentals \$15x2	\$421	\$0	\$0	\$0	\$421
3 Faculty Driving to Bellevue for Faculty Development Per diem: \$72/day x2 days; mileage: 200 miles at .55=\$110, lodging: \$ 137, incidentals \$15x2	\$1,263	\$1,253	\$0	\$0	\$2,516
Mileage to meetings and events at .55 per mile: mileage 500	\$242	\$242	\$242	\$121	\$847
c. Total Travel	\$3,610	\$2,758	\$1,084	\$121	\$7,573
e. Supplies					
Computer, printer, monitor \$1,500 x 2 and nodes: Program Manager, Navigator	\$3,000	\$0	\$0	\$0	\$3,000
Consumable office supplies, such as paper, pens, toner	\$300	\$300	\$300	\$0	\$900

Health e-Workforce DoL TAACCCT
Budget Narrative - Whatcom Community College Member

Web cameras for virtual meeting attendance 4 x 41.99: Program Manager; Curriculum Dev. Specialist; Navigator; Instructional Support	\$168	\$0	\$0	\$0	\$168
Headsets for virtual meetings 4 x 54.99: Program Manager; Curriculum Dev. Specialist; Navigator; Instructional Support	\$220	\$0	\$0	\$0	\$220
Copying, including policy and procedure manual, reports, curriculum, etc.	\$350	\$350	\$350	\$0	\$1,050
e. Total Supplies	\$4,038	\$650	\$650	\$0	\$5,338
h. Other					
Virtual & regional professional association conference registrations	\$250	\$250	\$250	\$0	\$750
Program marketing, outreach and student recruitment activity	\$4,500	\$2,500	\$2,500	\$0	\$9,500
Phone & Postage	\$200	\$200	\$200	\$0	\$600
h. Total Other	\$4,950	\$2,950	\$2,950	\$0	\$10,850
i. Total Direct Charges (a. - h.)	\$157,548	\$158,706	\$157,290	\$18,383	\$491,927
j. Indirect (8% limited) (Approved Rate 21.6% direct cost)	\$12,604	\$12,696	\$12,583	\$1,471	\$39,354
k. WHATCOM TOTAL CHARGES	\$170,152	\$171,402	\$169,873	\$19,854	\$531,281

Health e-Workforce DoL TAACCCT
Budget Narrative - North Virginia Community College Member

CATEGORY / ITEM:					Requested
	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL
a. Personnel					
PROJECT MANAGER (1 FTE, Y1-3, .25 FTE Y4. 3% col adjustment) Compliance & reporting, veterans outreach and deliverables mgt. Manage implementation of project including staffing, budgeting, community outreach, partnerships, achievement of strategies, monitoring of progress, continuous improvement, and reporting.	\$54,000	\$55,620	\$57,289	\$14,322	\$181,231
STUDENT NAVIGATOR (.5 FTE : 3% COL adjustment in Y2, Y3, and Y4) Provide Veterans & student retention and employment services , individual program advising to help bridge academic learning, student services, and community resources necessary for success. Collaborate with program partners to offer students job retention and career advancement support, as well as prepare, submit, and present all reports, updates, and information to the Project Manager.	\$30,000	\$39,000	\$40,170	\$0	\$109,170
VETERANS PROGRAM MANAGER (1 FTE: 3% COL ADJUSTMENT IN Y2,Y3, AND Y4) Provide Veterans student retention and employment services for consortium member colleges.	\$54,000	\$55,000	\$57,289	\$0	\$166,289
CURRICULUM SPECIALIST - Nursing or Allied Health infusion (.5 FTE) Implement Self Study and resulting recommendations for curriculum update; Primary responsibilities include: a) developing curricula and online course materials for new Health IT certificate programs; and b) ensuring that all curricula meet approved criteria and that online course materials are developed to prescribed evidence-based standards.	\$26,250	\$0	\$0	\$0	\$26,250
SUBJECT MATTER EXPERT - Associate Degree Development (Y1: 1500 hrs @ \$50.00/hr)	\$75,000	\$0	\$0	\$0	\$75,000
FACULTY FOR PILOT COURSES Salary \$90k = \$10000 per course: ONLY for classes not otherwise offered. 3% COL adjustment in Y2 and Y3.	\$10,000	\$20,600	\$21,218	\$0	\$51,818
FACULTY STIPEND for Consortium professional development participation 2 instructors x 2 events at \$625 per event	\$1,250	\$1,250	\$1,250	\$0	\$3,750
TECHNICAL ASSISTANT - PT Hourly for webinars, event technology, instructor & student tech assistance, cloud storage, manipulation and retrieval, etc., \$35/hr: 110 hrs per quarter, Y1: 2 quarters; Y2-3: 3 quarters	\$7,700	\$11,550	\$11,550	\$0	\$30,800
INSTRUCTIONAL STUDENT SUPPORT - PT Hourly \$20/ hr: 10 hrs per week, Y1: 20 wks; Y2-3: 40 wks	\$4,000	\$8,000	\$8,000	\$0	\$20,000
a. Total Personnel	\$262,200	\$191,020	\$196,766	\$14,322	\$664,308

Health e-Workforce DoL TAACCCT
Budget Narrative - North Virginia Community College Member

b. Fringe Benefits					
PROJECT MANAGER at 37%	\$19,980	\$20,579	\$21,197	\$5,299	\$67,055
STUDENT NAVIGATOR at 37%	\$11,100	\$14,430	\$14,863	\$0	\$40,393
VETERANS PROGRAM MANAGER at 37%	\$19,980	\$20,350	\$21,197	\$0	\$61,527
CURRICULUM SPECIALIST at 37%	\$9,713	\$0	\$0	\$0	\$9,713
SUBJECT MATTER EXPERT at 37%	\$27,750	\$0	\$0	\$0	\$27,750
FACULTY FOR PILOT COURSES at 37%	\$3,700	\$7,622	\$7,851	\$0	\$19,173
FACULTY STIPEND at 20%	\$250	\$250	\$250	\$0	\$750
TECHNICAL ASSISTANT, INSTRUCTIONAL STUDENT SUPPORT - PT Hourly at 10%	\$1,170	\$1,955	\$1,955	\$0	\$5,080
b. Total Fringe Benefits	\$93,643	\$65,186	\$67,313	\$5,299	\$231,441
c. Travel					
Program Manager to Bellevue for Consortium Meeting Per diem: \$71/day x3 days;; lodging: \$150 x2 nights, other transport & incidentals \$100, air fare: \$575	\$1,188	\$1,188	\$1,188	\$0	\$3,564
Veterans Program Manager to Bellevue for Consortium meeting, per diem: \$71/day x 3 days, lodging: \$150 x 2 nights, other transport & incidentals \$100, air fare: \$575	\$1,188	\$1,188	\$1,188	\$0	\$3,564
Mileage to meetings and events at .55 per mile: mileage 1000	\$550	\$550	\$550	\$550	\$2,200
c. Total Travel	\$2,926	\$2,926	\$2,926	\$550	\$9,328
e. Supplies					
Computer, printer, monitor, docking station \$1600 x 3: Program Manager, Navigator, Veteran's Program Manager	\$4,800	\$0	\$0	\$0	\$4,800
Telephone 3@ \$350 each: Program Manager, Navigator, Veteran's Program Manager	\$1,050	\$0	\$0	\$0	\$1,050
Office Furniture for 2 people (Maximum allowable \$5K)	\$5,000	\$0	\$0	\$0	\$5,000
Consumable office supplies, such as paper, pens, toner	\$400	\$400	\$400	\$200	\$1,400
Meeting & Event supplies	\$300	\$300	\$300	\$0	\$900
Web cameras for virtual meeting attendance 4 x \$42: Program Manager,; Curriculum Dev. Specialist; Navigator, Veteran's Program Manager	\$168	\$0	\$0	\$0	\$168
Headsets for virtual meetings 4 x \$55: Program Manager; Curriculum Dev. Specialist; Navigator; Veteran's Program Manager	\$220	\$0	\$0	\$0	\$220
Copying, including policy and procedure manual, reports, curriculum, etc.	\$350	\$150	\$150	\$0	\$650
e. Total Supplies	\$12,288	\$850	\$850	\$200	\$14,188

Health e-Workforce DoL TAACCCT
Budget Narrative - North Virginia Community College Member

h. Other					
Virtual & regional professional association conference registrations	\$900	\$900	\$900	\$0	\$2,700
Industry-Education Concil formation, outreach, communication	\$2,500	\$2,500	\$1,500	\$0	\$6,500
Program marketing,outreach and student recruitment activity	\$4,500	\$2,500	\$2,500	\$0	\$9,500
Phone & Postage	\$200	\$200	\$200	\$100	\$700
h. Total Other	\$8,100	\$6,100	\$5,100	\$100	\$19,400
i. Total Direct Charges (a. - h.)	\$379,157	\$266,082	\$272,955	\$20,471	\$938,665
j. Indirect (8% limited) (Approved Rate 44.10% direct cost)	\$30,333	\$21,287	\$21,836	\$1,638	\$75,094
k. NOVA TOTAL CHARGES	\$409,490	\$287,369	\$294,791	\$22,109	\$1,013,759

Health e-Workforce Consortium Agreement

By & between: Bellevue College and Bellingham Technical College, Clark College, Clover Park Technical College, Northern Virginia Community College, Pierce College District, Renton Technical College, Spokane Community College, and Whatcom Community College

As members of the Health e-Workforce TAACCCT Consortium, we agree to work together to achieve the outcomes and deliverables defined within the proposal submitted to the U.S. Department of Labor in response to solicitation SGA/DFA PY 11-08, 200.

We agree and are committed to carrying out all activities described within the Project Work Plan to achieve all project defined goals, described within our *Consortia Letter of Commitment*.

Consortium funding will be administered by Bellevue College in the spirit of a cooperative agreement, a financial mechanism in which substantial programmatic involvement is anticipated. Reimbursement to Consortium Member Colleges will be made for previously approved allowable expenses up to the College's budgeted amount, each year. Payments will be made if the Member College is reaching project milestones and producing agreed upon deliverables in a timely manner. If the Member College is unable to honor its commitment an alternate budget and / or funding basis will be substituted.

In performing its responsibilities under this consortium agreement the consortium college hereby certifies and assures that it will fully comply with regulation and cost principles, including any subsequent amendments as stipulated in the Grant Agreement. The total reimbursement from the Lead College to consortium colleges for allowable provision of services shall not exceed the budgeted amount approved in the Grant Agreement. The Lead College has the authority to withhold payment if the Consortium College fails to make significant progress toward achieving outcomes as defined in the grant proposal.

Bellevue College (Lead)	Bellevue College (Member)	Bellingham Technical College	Clark College	Clover Park Technical College
\$5,558,012	\$807,046	\$643,796	\$542,266	\$602,142
Northern Virginia Community College	Pierce College District	Renton Technical College	Spokane Community College	Whatcom Community College
\$1,013,758	\$571,458	\$751,429	\$754,109	\$531,281

We agree to the following responsibilities:

Responsibilities of Lead College – Bellevue College
• Serve as liaison to Department of Labor • Ensure compliance with terms of TAACCCT grant award and special conditions • Provide Consortium leadership and resources, including curriculum development, instructional design, and employment services • Represent Consortium to industry partners and veterans associations • Manage contractors

• Develop policies and procedures to collect and report required project and student data • Direct Consortium activity to support timely deliverable production and dissemination
Responsibilities of Washington Consortium Colleges
• Rapid project staff hiring, with a goal of full staffing within 1 month of award • Meet member project milestones on time and within allowable cost • Timely reporting and responsiveness to Consortium lead requests for data and fiscal information • Participation in Consortium virtual and in person meetings • Develop and implement recruitment, retention and placement strategies, emphasizing veterans needs • Identify one college representative to fully participate in synthesis of the Washington IT Common Core Curriculum • Complete articulation determination, to Bellevue College Healthcare Technology Management BAS
Responsibilities of Northern Virginia Community College
• Rapid project staff hiring, with a goal of full staffing within 1 month of award • Timely reporting and responsiveness to Consortium lead requests for data and fiscal information • Participation in Consortium virtual and in person meetings • Develop and implement recruitment, retention and placement strategies, emphasizing veterans needs • Identify one college representative to fully participate in synthesis of the Washington IT Common Core Curriculum • Complete articulation determination, to Bellevue College Healthcare Technology Management BAS • Provide outreach leadership to national veterans associations for Consortium • Develop a Northern Virginia Health IT Community College Collaborative and Industry – Education Council

We, the members of the consortium agree to and designate Bellevue College as the lead institution that will serve as the grantee and contact for the U.S. Department of Labor. As the grantee, Bellevue College will be responsible for the overall fiscal and administrative responsibilities of the grant; and we as members of the consortium, agree to provide Bellevue College with all information needed to meet the reporting requirements of the grant.

Read to and Agreed:

Bellevue College



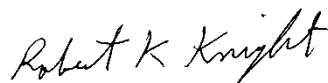
Laura Saunders, Interim President

Bellingham Technical College



Patricia McKeown, President

Clark College



Bob Knight, President

Clover Park Technical College



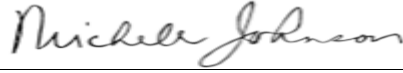
John Walstrum, President

Northern Virginia Community College



Robert Templin, President

Pierce College District



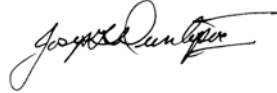
Michele Johnson, Chancellor

Renton Technical College



Steven Hanson, President

Spokane Community College



Joe Dunlap, President

Whatcom Community College



Kathi Hiyane-Brown, President



33 W. Monroe St., Suite 1700
Chicago, IL 60603
Tel (312) 915-9538
Fax (312) 915-9511

April 30, 2012

Dr. Paula Boyum
Vice President of Workforce Development
Bellevue College
3000 Landerholm Circle SE
Bellevue, Washington 98007

Dear Dr. Boyum,

The *Health e-Workforce* proposal developed by your institution is an important and timely approach to address a growing industry demand for an e-workforce. In my role as Chair of the Board of Directors of the Health Information & Management Systems Society (HIMSS), I am continually taking the pulse of the industry and assessing our workforce needs. I have seen a significant need for our industry to continue to attract, and retain, talented information technology professionals.

Based on the results of a study published in *Characterizing the Healthcare Information Technology Workforce: Analysis from the HIMSS Analytics™ Database*, resources needed “to move the entire country to higher levels of adoption (Stage 4) will require an additional 40,784 IT professionals”. It is through this example and others that I am confident that the HIMSS membership of more than 35,000 healthcare IT professionals (with representation from over 550 corporate members) will welcome an opportunity to support military veterans and their eligible spouses, displaced workers and others seeking entry into our industry through a commitment to training and employment. We are especially interested in assisting with the definition of your program strategies and goals, as well as providing our review and comments about the health IT curricula for national dissemination.

From my perspective as Senior Director of Government and Industry Affairs with Siemens Healthcare, one of the world’s leading providers of health IT, imaging and laboratory diagnostics, I appreciate the obvious value to employers that implementation of *Health e-Workforce* will bring. To give you some background, Siemens is Europe’s largest engineering company and is a major player in many U.S. industries. Hiring veterans has been a major corporate initiative for us and I am proud to say that in 2011, alone, Siemens hired more than 520 veterans. Veterans at Siemens, including both enlisted and Junior Military Officers, represent a group of highly skilled individuals who can fill a diverse array of roles – from Field Engineers to Service Technicians to Sales and Marketing.

As we look at accelerating the pace at which these valuable individuals can enter the workforce, development and dissemination of industry-driven curricula and corresponding faculty development to speed deployment will result in a new wave of job-ready candidates in our rapidly expanding sector. Equipping students with hands-on experience with electronic health records software is an important element of a job seeker’s profile. This proposal creates the means and distribution channels to help raise the bar of workforce readiness in health information technology.

On behalf of HIMSS, I support funding of the *Health e-Workforce* TAACCCT proposal.

A handwritten signature in cursive script, reading "Charlene S. Underwood".

Charlene Underwood, MBA, FHIMSS
Sr. Director, Government Relations, Siemens Medical Solutions
Chair, HIMSS Board of Directors



STATE OF WASHINGTON
HEALTH CARE AUTHORITY

626 8th Avenue, SE • P.O. Box 45502 • Olympia, Washington 98504-5502

May 10, 2012

TO: Paula Boyum, Vice President, Workforce Development, Bellevue College
FROM: Richard K. Onizuka, Assistant Director, Health Care Policy
RE: Commitment to Bellevue College *Health e-Workforce* DoL TAACCCT Proposal

Dear Dr. Boyum:

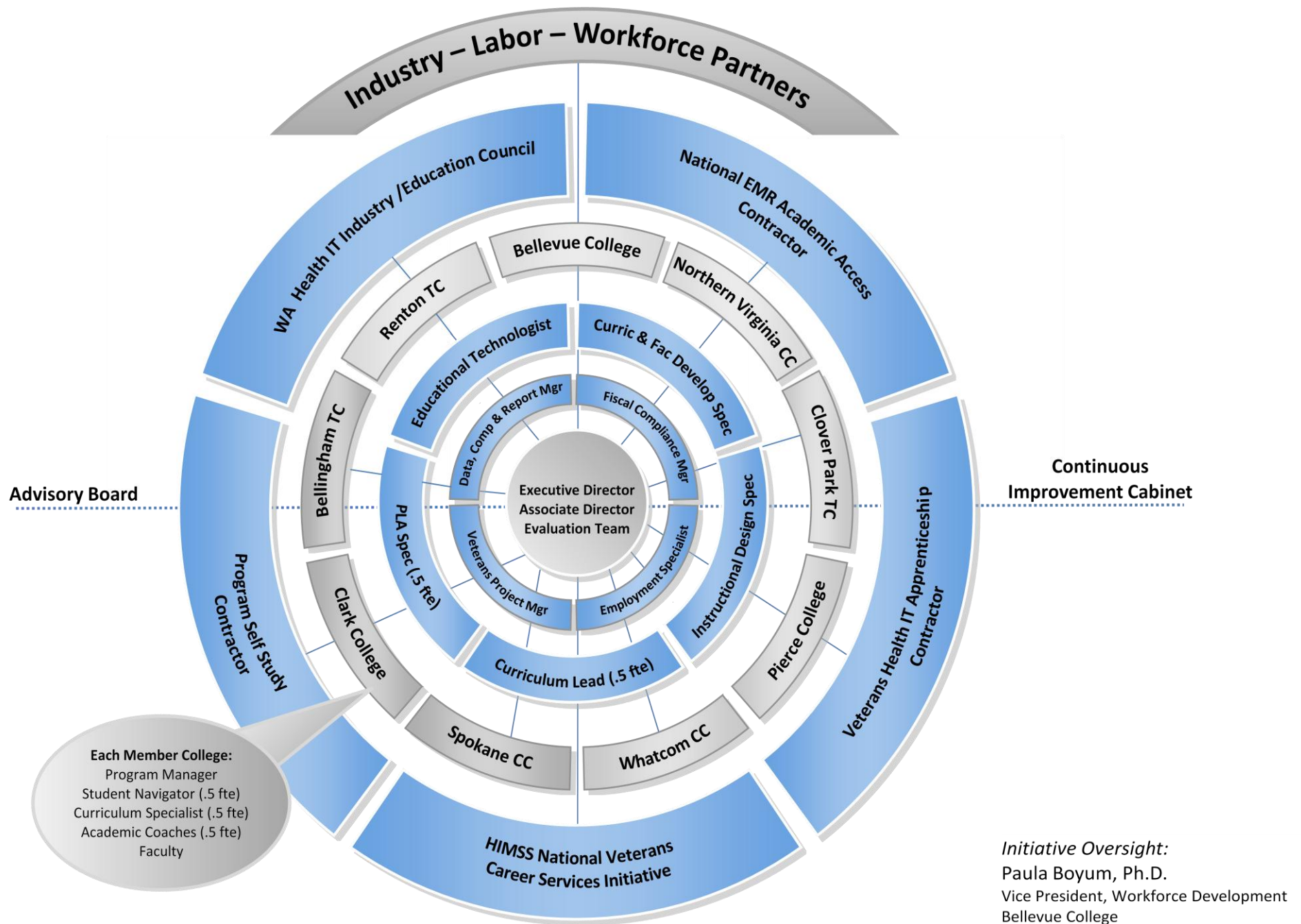
The Washington eHealth Collaborative Enterprise (eHCE) is a work group within the Health Care Authority that is responsible for coordinating statewide activities relating to the federal HITECH Act and state health information infrastructure activities. As Assistant Director, I convene the Washington Health Information Technology Industry – Education Council, a group formed to accelerate efficient workforce production in this sector.

Please accept the Council's strong commitment to the *Health e-Workforce* proposal, led by Bellevue College. Our membership, composed of representation from professional associations spanning the employer spectrum in this industry and education partners from K-12, community colleges, four year institutions and university graduate programs, agrees to contribute review and comment on proposed health IT programs and curricula, and act as a conduit for workforce needs assessment and connections with industry. The strong veterans service component to the proposed work is very much aligned with both our state's and Council's intentions.

Sincerely,

Richard K. Onizuka, PhD

Health e-Workforce Consortium



Health e-Workforce Consortium Program Evaluation Budget Narrative

Developed by Social Policy Research Associates for Bellevue College

The total estimated cost for the evaluation activities described is \$727,071. Evaluation costs assume a 48-month period of performance. Line items for the budget, by calendar year, are as follows:

Budget Summary

	Total	Year 1	Year 2	Year 3	Year 4
Staff Labor	\$556,274	88,141	134,992	119,273	213,867
Staff Travel	\$35,969	7,641	10,391	7,641	10,296
Materials and Supplies	\$400	100	100	100	100
Subcontract Costs	\$117,300	28,200	27,300	25,600	36,200
G&A on Non-Labor Costs	\$17,128	4,112	4,458	4,112	4,446
TOTAL COSTS	\$727,071	128,194	177,241	156,726	264,909

Detail on Costs

Labor Costs

Labor hours are based on the project manager's best estimate of level of effort required to complete the tasks detailed in the evaluation narrative. These labor hours are shown in the tables below; the first table shows labor hours by calendar year, and the next shows labor hours for each of the three major tasks: the implementation study, the surveys, and the outcomes and impact analysis. Labor hours for both SPR and SPR's subcontractor, SESRC, are shown.

Estimated Labor Hours, by Labor Category and Year

	TOTAL	2013	2014	2015	2016
SPR Labor					
Sr. Fellow	356	100	40	60	156
Principal Investigator/Project Manager	2,112	456	592	428	636
Quantitative Analyst	1,554	16	286	486	766
Policy Analyst II	888	192	272	112	312

	TOTAL	2013	2014	2015	2016
Policy Analyst I	448	112	112	112	112
Policy Analyst I	768	112	272	112	272
Editor	64	0	36	8	20
TOTAL SPR	6,190	988	1,610	1,318	2,274
SESRC Labor					
Sr. Analyst	783	190	185	172	236
Jr. Analyst	83	17	15	17	34
TOTAL SESRC	866	207	200	189	270
TOTAL LABOR	7,056	1,195	1,810	1,507	2,544

Estimated Labor Hours, by Labor Category and Major Task

	TOTAL	Implementation Study	Surveys	Outcomes/ Impacts
SPR Labor				
Sr. Fellow	356	160	44	152
Principal Investigator/Project Manager	2112	1948	68	96
Quantitative Analyst	1554	224	0	1330
Policy Analyst II	888	888	0	0
Policy Analyst I	448	448	0	0
Policy Analyst I	768	768	0	0
Editor	64	24	24	16
TOTAL SPR	6190	4460	136	1594
SESRC Labor				
Sr. Analyst	783	480	303	0
Jr. Analyst	83	0	83	0
TOTAL SESRC	866	480	386	0
TOTAL LABOR	7,056	4,940	522	1,594

SPR's labor costs are calculated based on actual labor costs of individuals in the categories, multiplied by SPR's indirect costs negotiated in an Indirect Cost Rate Agreement approved by the Division of Cost Determination, U.S. Department of Labor, plus fee. A salary inflation rate of 3 percent is assumed for labor occurring beyond 2012.

SPR's labor categories being used in this project can be described as follows:

Senior Fellow. *Duties:* Serves as senior advisor to other project leaders; conducts reviews to ensure quality of deliverables. *Degree and Experience Requirements:* Ph.D. or equivalent AND at least 20 years of social policy research experience AND outstanding performance in substantial management and technical advisory roles.

Principal Investigator/Project Manager. *Duties:* Provides technical direction and monitors project progress and budget; supervises project team members; serves as the primary client contact; leads project design, data collection, and analysis. *Degree and Experience Requirements:* Ph.D. degree OR Masters degree and equivalent experience in social policy research AND experience in project oversight and management.

Quantitative Analyst. *Duties:* Develops the analysis plan and conducts statistical analysis; provides specifications to programmers and analyzes results. *Degree and Experience Requirements:* Ph.D. degree OR Masters degree and equivalent experience AND expertise in data analysis and statistical methods.

Policy Analyst II. *Duties:* Contributes to the design of projects by drafting site visit protocols, and survey questions; collects data through on-site interviews and observations, telephone interviews, and document reviews; prepares detailed site visit reports following established outlines. *Degree and Experience Requirements:* Masters degree AND at least 2-3 years of experience

Policy Analyst I. *Duties:* Collects data through on-site interviews and observations, telephone interviews, and document reviews; prepares detailed site visit reports following established outlines. *Degree and Experience Requirements:* Masters degree OR Bachelors degree and at least 2-3 years of experience.

SPR Staff Travel

SPR is located on the West Coast, so travel costs will be modest. Nonetheless, we have budgeted for airfare, per diem and other transportation expenses for activities associated with the implementation study and for periodic project briefings. A total of 20 trips are assumed over the life of the project, with trips associated with the implementation study, including travel time. Roundtrip airfare was budgeted at \$250/trip. Travel costs were computed in a manner consistent

with FAR 31.205-46. Hotel expenses are based on the maximum allowed hotel rate for the area of proposed travel . The proposed travel costs include meals and incidental expenses at the M&I rate established for the area of proposed travel, as well as ground transportation costs.

Subcontract Costs.

SPR intends to subcontract with Washington State University's Social and Economic Sciences Research Center (SESRC). SESRC is located in the Seattle area, and its staff are familiar with the state's community college system and UI wage data system. SESRC will be charged with leading the survey tasks and assisting with the implementation study, report writing, and project briefings. SESRC has budgeted its costs at \$117,300.

Materials and Supplies

A modest amount has been budgeted for binders and folders, and other materials that may be needed by the project.

General and Administrative Costs

SPR has an Indirect Cost Negotiation Agreement with the Division of Cost Determination, U.S. Department of Labor. That agreement provides for a provisional general and administrative rate of 12.56% on non-labor costs, exclusive of subcontract costs in excess of \$25,000 per year.

Qualifications of Evaluation Contractor

SPR is nationally known for its rigorous evaluations of career transition and workforce investment programs. Over the past two decades, it has conducted scores of evaluations for U.S. DOL and other clients, including implementation, outcomes and impact studies. It also has very relevant content expertise for carrying out the proposed project.

For example, SPR recently concluded a seven-year, \$9 million *Evaluation of the Trade Adjustment Assistance Program* for DOL. This project involved an in-depth implementation study as well as an impact analysis. As part of the implementation study, SPR's field staff conducted annual waves of multi-day site visits to more than 30 states and 50 local offices where

TAA services were delivered. Based partly on SPR's recommendations in its implementation study, provisions of the TAA program were significantly amended with the passage of the Trade Adjustment Assistance Extension Act (TAAEA), signed into law in 2011.

Also as part of this study was a quasi-experimental evaluation of the impacts of TAA on participants' education and training, credential attainment, and employment and earnings. This component of the study made use of administrative data from states on TAA services provided to participants, Unemployment Insurance (UI) wage records, and survey data, and used propensity score matching methods for selecting a comparison group.

Among its other recent national implementation studies, SPR conducted the *Evaluation of the Science, Technology, Engineering and Mathematics (STEM) Demonstration*, which entailed the study of efforts by workforce agencies and community colleges around the nation to enhance training opportunities in STEM fields. Similarly, it recently concluded the *Evaluation of the Technology-Based Learning Initiative*, which looked at the efforts of nine community colleges and five universities to use technology-based learning and distance learning in health care, information technology, and other high-growth, high-demand occupations to expand access to training and to meet the needs of industry for skilled employees. In both of these projects, SPR was selected by DOL as its national evaluation contractor. Among other implementation studies carried out by SPR are the *Evaluation of the Career Advancement Account Demonstration*, the *Evaluation of Strategies to Stem School Violence*, the *Evaluation of the Pathways to College Network*, the *Evaluation of the School-to-Work Model Centers*, and the *Evaluation of Washington State's School-to-Work Skills Standards*, among many others.

SPR also has extensive experience conducting quasi-experimental and experimental impact evaluations. Among its recent experimental evaluations, SPR is leading the random assignment

Evaluation of the Second Chance Act Adult Demonstration for the U.S Department of Justice, and the *Evaluation of the Reintegration of Ex-Offenders Initiative* for U.S. DOL. Additionally, it is currently working with a team of other firms on the random assignment *Evaluation of the Workforce Investment Act Adult and Dislocated Worker Programs* and the *Evaluation of YouthBuild*. All these projects are multi-million dollar random assignment studies that are national in scope. In addition to the evaluation of TAA just cited, SPR also has conducted numerous quasi-experimental evaluations and outcomes studies, including the *Evaluation of Washington State's School-to-Work Initiative* and the *Evaluation of the TAA-WIA Co-Enrollment Pilot Project*, among others.

Health e-Workforce Consortium Program Evaluation Plan

Developed by Social Policy Research Associates for Bellevue College

The Health e-Workforce Consortium proposal holds great promise of elevating workforce development related to health information technology, both for consortium members and nationwide. However, it is imperative that the innovative approaches the partnership proposes are fully documented and their impacts assessed.

Summary Evaluation Statement

As previously described, the consortium is planning on developing a veterans' health IT apprenticeship and career services initiative, promoting the professional development of faculty, developing enhanced and new curricula, establishing cloud-based national access to health records software, and targeting and assessing TAA-eligibles, veterans, and other eligible students in the courses of study affected by the initiative. Outcomes will include those measured at the college-level (e.g., innovative curricula and credential programs with national reach), the employer-level (e.g., greater satisfaction with those hired from the program), and the student-level (e.g. academic achievements, credentials, employment). Both formative and summative evaluation activities are planned. Specifically, the evaluation will include an intensive implementation study to document the project's start-up, evolution and maturation; a survey of faculty and employers, to measure faculty and employer satisfaction; an outcomes analysis; and a quasi-experimental analysis of impacts on students' academic and employment outcomes. Results will be disseminated in an Interim Report, due at the project's midpoint, and a Final Report, due at the project's conclusion. Additional deliverables include briefing papers and oral briefings, provided throughout the funded period. Evaluation will focus on documenting innovative training strategies and practices, to promote continuous improvement and the emergence of evidence-based practices nationwide.

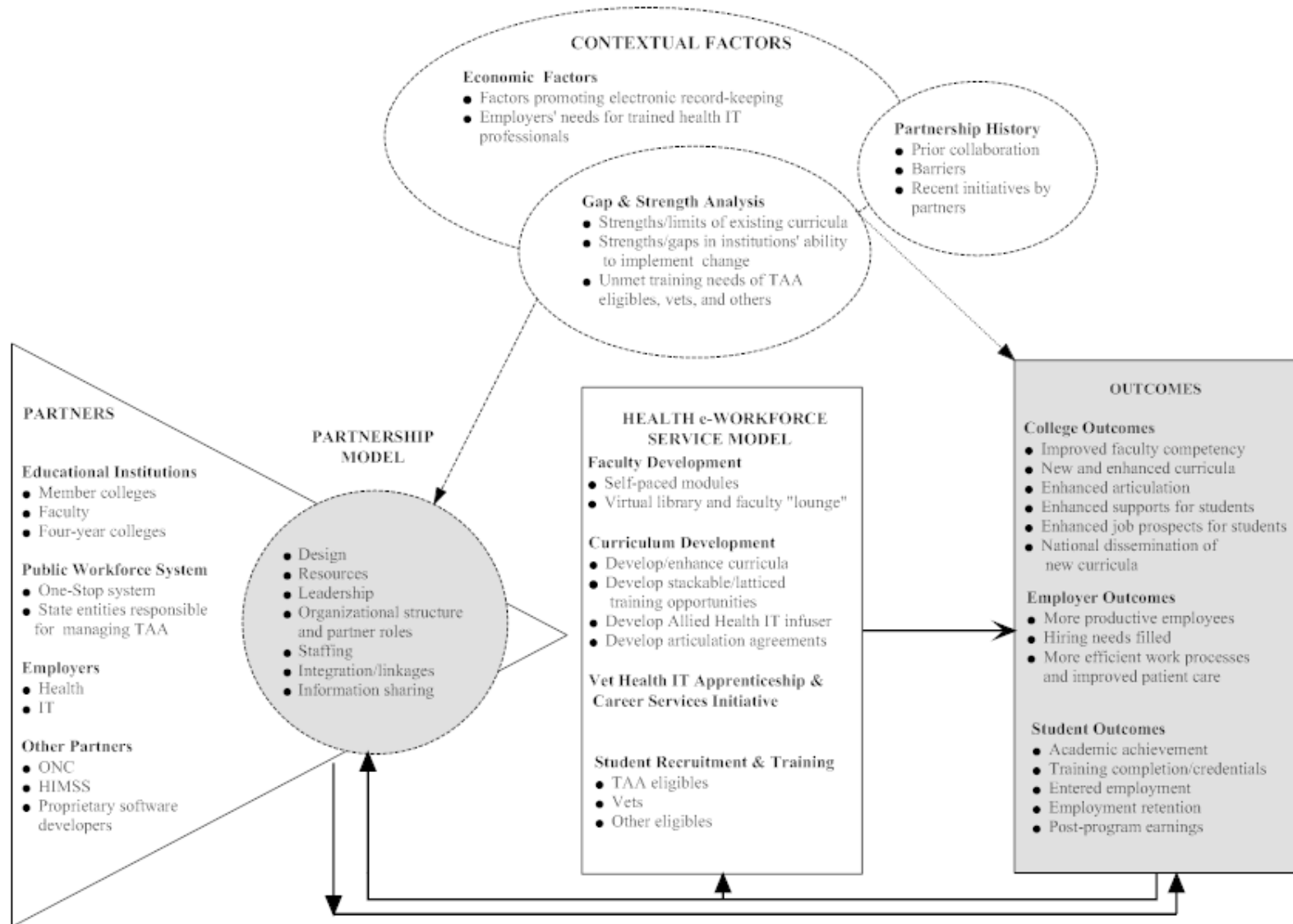
Evaluation Plan

Logic Model and Key Questions for the Evaluation

As a way of guiding the evaluation, we have developed a logic model (Exhibit E-1). This theory of change acknowledges the initiative will be developed in the context of an existing economic and educational environment that includes national needs for health IT infrastructure, and workforce demand for health IT professionals. Also relevant, the consortium institutions have some strengths (e.g., experiences from Bellevue College's National Science Foundation grant to develop an entry-level curriculum for health IT technicians and the colleges' pre-existing relationships with employers and credentialing bodies) but also some gaps that will need to be remedied by the implementation of this planned initiative. Also relevant as context, the exhibit points to the pressing unmet training needs of TAA eligible workers, veterans, and others.

A wide range of partners are part of the proposed undertaking; their participation will be key to the initiative's success. Partners include member colleges, the public workforce investment system, employers, and credentialing and advisory bodies (such as ONC and HIMSS). The middle panel of the following exhibit shows the key components of the initiative, which will be the focus of the partners' efforts. Components include system changes and curriculum redesign, and the recruitment and assessment of TAA eligibles, veterans, and others students for the new training opportunities to be developed. Outcomes to be impacted through these efforts include college-level outcomes, employer outcomes, and student outcomes. At the college level, we draw attention to enhanced faculty competency, new and enhanced curricula, new credential programs, and a new veterans apprenticeship program. Employers benefit by having access to more productive employees, yielding improved work processes and enhanced patient care. Students will obtain relevant credentials and excellent job prospects upon completion.

EXHIBIT E-1: LOGIC MODEL



Outcomes to be impacted through these efforts include college-level outcomes, employer outcomes, and student outcomes. At the college level, we draw attention to enhanced faculty competency, new and enhanced curricula, new credential programs, and a new veterans apprenticeship program. Employers will benefit through having access to more productive employees, which should yield benefits in the form of improved work processes and enhanced patient care. Finally, students who undertake the new training opportunities will obtain relevant credentials and are anticipated to have excellent job prospects upon completion.

The conceptual framework just described gives rise to key questions for the evaluation:

Key Evaluation Questions	
➔	How do contextual factors shape the unfolding of the initiative?
➔	How does the growing need for trained IT health professionals shape the initiative?
➔	What existing strengths can the partners leverage in building the new initiative, including the partners' prior initiatives? What gaps need to be addressed?
➔	What services were chosen for development in this initiative and how were they enhanced?
➔	How is each of the initiative's major components launched? How does each develop over the years of the grant? How were grant funds used in these efforts?
➔	What delivery methods are offered?
➔	What administrative and partnership structures are established to guide the initiative?
➔	What leadership structures are established? How are staff recruited and trained?
➔	What roles do the public workforce system, employers, and other partners play (e.g., in design, in curriculum development, in recruiting and training students, in program management, etc.)? How do partners communicate and coordinate their activities?
➔	What factors contributed to partners' involvement? What contributions were most and least important?
➔	What is the nature of outreach to and assessment of TAA eligibles, veterans, and others?
➔	How were applicants assessed and results used to determine appropriate services?
➔	What career guidance was provided? What supportive services were available?
➔	What are the initiative's outputs, outcomes, and impacts?
➔	How many faculty take advantage of the new professional development opportunities made available? What is their assessment of the training they received?
➔	How many training courses or programs of study were developed and how many enhanced by the initiative? Can they be sustained when the grant period ends?
➔	What are employers' assessments of the skills of the matriculating students they have hired? Do employers perceive that the skills of the students are leading to more efficient office processes and improved patient care?
➔	How many students take part in courses of study touched by this initiative? How many credit hours have been earned? How many students have completed coursework and earned a credential? What employment outcomes do participating students record? How do these outcomes compare to those of students in allied health fields?

Program Evaluation Plan

To address the questions identified above, the third-party evaluator will conduct an outcomes and impact study, an implementation study, and a survey of faculty and employers. Each is described in turn and Exhibit E-2 provides a summary of the timing of data collection and the relationship between data collection to the key research questions.

Exhibit E-2: Summary of Components and Timing of Data Collection

Components	Short List of Key Research Issues	Year of Data Collection			
		1	2	3	4
Implementation Study	• Context for implementation • Partner contributions • Administration and planning • Service design and delivery • Faculty/student recruitment & assessment	X	X	X	X
Faculty Survey	• Expectations/needs for prof development • Use of materials (frequency, duration) • Assessment of usefulness for teaching	X	X	X	X
Employer Survey	• IT skills needed of new hires • Work proficiency of hired students • Influences on office procedures				X
Outcome Analysis	• College-level outcomes • Student-level outcomes		X	X	X
Impact Analysis	• Impact of TAACCCT initiative on students' academic and employment outcomes				X

Outputs, Outcomes, and Impact Analysis - It will be critical to document the outputs and outcomes of the initiative, and estimate impacts on participating students. Beyond merely measuring the number of participants (both faculty and students) who were served and what services they received, we shall measure outcomes relating to the academic and employment objectives attained by students upon program completion or in a follow-up period.

Among the outcomes we will examine are those defined by the Common Measures used by the Workforce Investment Act (WIA) Adult and Youth Programs, including entered employment rates, retention rates, earnings, and attainment of a degree or credential. In keeping with the Common Measures, employment outcomes are to be measured in the first, second, and third quarters after the quarter of program exit. Other outcomes include whether students completed a

TAACCCT field of study, credits hours earned, program completion, credentials attained, and advancement in further education after TAACCCT completion. Some of these outcomes can be measured through the colleges' administrative data (e.g., credits earned, credentials), but employment outcomes will be captured through matching with the states' Unemployment Insurance (UI) wage systems. Consortium members already have close relations with the states' UI agencies, so arranging for such matching should not be difficult and can be arranged at no cost to the colleges. Outcomes for students in target groups (e.g., TAA eligibles and veterans) will be especially important to document.

However, we plan to go beyond merely noting the outcomes that students achieve; instead, we plan to estimate how participation in the program *changed* the outcomes from what might have been expected otherwise (that is, if the individuals had not participated in services provided by this initiative). As a first step, we plan on conducting a pre-post evaluation design, where the outcomes for treatment group members will be benchmarked against those of a comparison group made up of health IT students who undertook training in a certificate program at Bellevue College developed as part of an ONC grant in spring 2012. However, we recognize this approach's limitations: changing economic conditions could give rise to changing employment opportunities over time, making it difficult to disentangle the impact of the initiative from unrelated temporal changes. Therefore, we propose to use quasi-experimental, difference-in-difference methods to generate more rigorous impact estimates. In this approach, students will be drawn *both* from programs of study that are intended to be affected by TAACCCT activities *and* from comparison courses that not expected to be affected, and each will be measured *during both* a pre-initiative and post-initiative period. Impacts will be assessed by estimating whether enrollment in the program affected by the initiative led to better outcomes than could have been

expected given the changes over time experienced by cohorts of students not affected by the initiative. Depending on the outcome, multivariate regression, logit analysis, or hazards models will be used. All variables used in the analysis will be measured from the same sources for both treatment and comparison group members: the colleges' administrative data (e.g., for measuring student characteristics, credit hours, and credentials earned) and UI wage record systems (for measuring employment and earnings). All data containing personally identifiable information (such as students' names or Social Security Numbers) will be transmitted to the evaluation contractor using secure file transfer protocols, and all files will be encrypted using 256-bit encryption.

Implementation Study - Thoroughly documenting the implementation of the initiative and providing ongoing feedback to promote continuous improvement will be critical components of the evaluation. Therefore, we intend that the evaluator will track the evolution of the initiative through its start-up, early implementation, and mature phases, and provide timely reports. Key foci for the implementation study will include project planning, administration and management, and the development of each of the project's key components. For example, it will be critically important to document how existing curricula were enhanced and what new curricula were developed, what faculty training opportunities were made available, and so on. Each facet of grant implementation will be assessed against pre-established benchmarks, such as whether new curricula have been vetted with industry groups and employers and whether continuous improvement processes are built into the development of course materials.

Throughout, we are interested in documenting the challenges to implementation that occurred—whether they relate to service development, alliance building, or administration and management—and what strategies to overcome these challenges were developed. Further, we

want to document promising practices and lessons learned, so that consortium members, and other colleges, might reap full benefit from the experiences of our initiative in promoting continuous improvement.

To carry out these objectives, and examine the evolution of the initiative as it unfolds, we envision that the evaluation contractor will conduct site visits to Bellevue College (the project lead) at least twice per year and to two additional member colleges (and their affiliated partners) each quarter during a four-year period. Using this schedule, each participating college will be visited at least once per year, except that Bellevue College will be visited more frequently.

Site visits to each college are expected to last one to two days each. Field activities during the site visits will be contingent on where the college is in the grant implementation process (e.g., start-up, planning, phase-in, etc.), and the focus of the visits will similarly vary. For example, early visits will focus most especially on planning and design issues, mid-period visits on the development of new curriculum and other training tools, and later visits on rollout and plans for sustainability. Similarly, depending on the timing of the visit relative to grant implementation, field researchers will conduct interviews with: the college's grant manager or program coordinator, instructional designers, faculty, and students; employers who participate in the initiative; representatives of the public workforce investment system (e.g., WorkSource Career Center managers, administrators or staff serving TAA participants, representatives of veterans' employment and training programs); and other partners as appropriate. Field researchers will conduct their interviews guided by Field Protocols, which will be developed by the senior evaluation leadership team, and will detail their observations in site write-ups that will follow an established template developed by the evaluation's leadership team. These write-ups then constitute the raw materials for a planned interim and final report (described below).

Surveys of Faculty and Employers - Consistent with the logic model previously presented, faculty and employers are important constituents and partners of this initiative, and their feedback on the project's accomplishments must be captured in a comprehensive way. Therefore, we propose to conduct surveys of them. To promote high response rates, the surveys will be kept very short and will be available online.

Faculty surveys will be administered annually. The focus will be on the faculty's professional development needs and opportunities made available to them: for example, frequency and duration of use of new materials, assessments of the materials' usefulness, ways in which these materials have changed the respondent's classroom instructional practices, etc.

The employer survey will be administered a single time, at the beginning of the last year of the grant period. The timing of this survey assumes that, by the end of the third year, at least one cohort of students will have been affected by the initiative and have obtained employment, and employers targeted will be those who have hired students who have taken the health IT program of study (employers who assist with the design of the curriculum will be interviewed in person as part of the implementation study, described above). The focus of the questionnaire will be on how well the hired students are performing, whether they have the expected skills relating to health IT competencies, and whether the skills of these former students have changed office procedures or (if applicable) improved the efficiency or quality of patient care. At the conclusion of each round of surveys, the evaluation team will clean the data, conduct the analysis, and prepare reports and briefings (described below).

Reports and Deliverables

An Interim Report, due at the project's midpoint, will detail project progress, with a particular focus on challenges to implementation and obstacles that need to be overcome for the project to achieve its objectives by the end of the grant period. The Final Report will provide a

comprehensive accounting of the project's evolution and accomplishments, will highlight lessons learned and innovative strategies, and will document outcomes and impacts. The evaluation team will also prepare briefing papers, associated with the annual surveys and outcomes data collection, and will conduct at least twice yearly project briefings, so that grant managers can gain the benefit of the evaluation team's insights on something close to a real-time basis.

Criteria for Selecting an Evaluator

The Health e-Workforce Consortium Evaluation Plan, designed by Social Policy Research Associates (SPR), details a rigorous ongoing assessment, well aligned with the magnitude of the proposed undertaking. Selection and procurement of a third party evaluator for the Health e-Workforce Consortium project will be initiated within two weeks of notice of funding. The Bellevue College Procurement Office will oversee the procedure, adhering to guidelines and procedures for sole source contracting, in accordance with the Washington State Office of Financial Management, to facilitate SPR's evaluation contract. Social Policy Research Associates (SPR) has conducted scores of evaluations for the U.S. DoL and other clients, including implementation, outcomes and impact studies, as well as carrying out the proposed project. SPR recently concluded a seven-year, *Evaluation of the Trade Adjustment Assistance Program* for DoL. Based partly on SPR's recommendations, provisions of the TAA program were significantly amended with the passage of the Trade Adjustment Assistance Extension Act.