

Updates from the Evaluation of the Tribal Health Profession Opportunity Grants (HPOG) 2.0 Program

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Disclaimer

The views expressed in this presentation do not necessarily reflect the views or policies of the Office of Planning, Research, and Evaluation, the Administration for Children and Families, or the U.S. Department of Health and Human Services.

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- Grantee Program Updates
- Updates on the Tribal HPOG 2.0 Evaluation
- PAGES Data
- Preliminary findings and outcomes
- Knowledge sharing and dissemination



Grantee Program Updates



Grantee Updates













Tribal HPOG 2.0 Evaluation Updates



Tribal HPOG 2.0 Evaluation

Purpose

 To assess program implementation and participant outcomes of the five Tribal HPOG 2.0 Grantees

Benefit

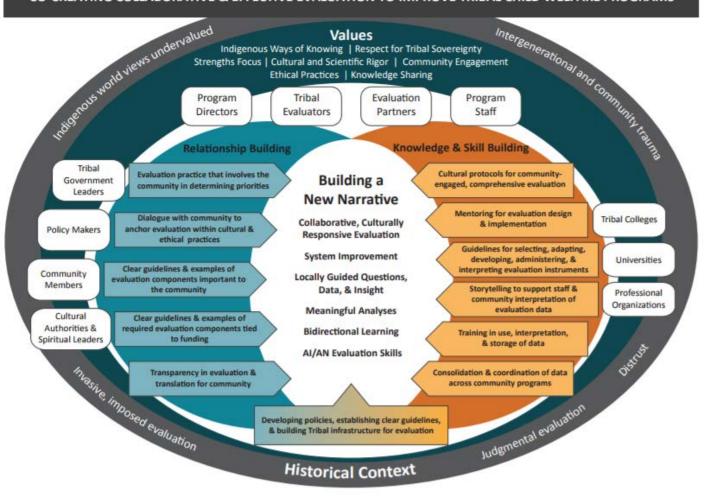
- Identify promising practices and inform knowledge base of culturally- and evidenceinformed models implemented in Tribal communities
- Build/enhance tribal evaluation capacities





Roadmap for Collaborative and Effective Evaluation in Tribal Communities

CO-CREATING COLLABORATIVE & EFFECTIVE EVALUATION TO IMPROVE TRIBAL CHILD WELFARE PROGRAMS





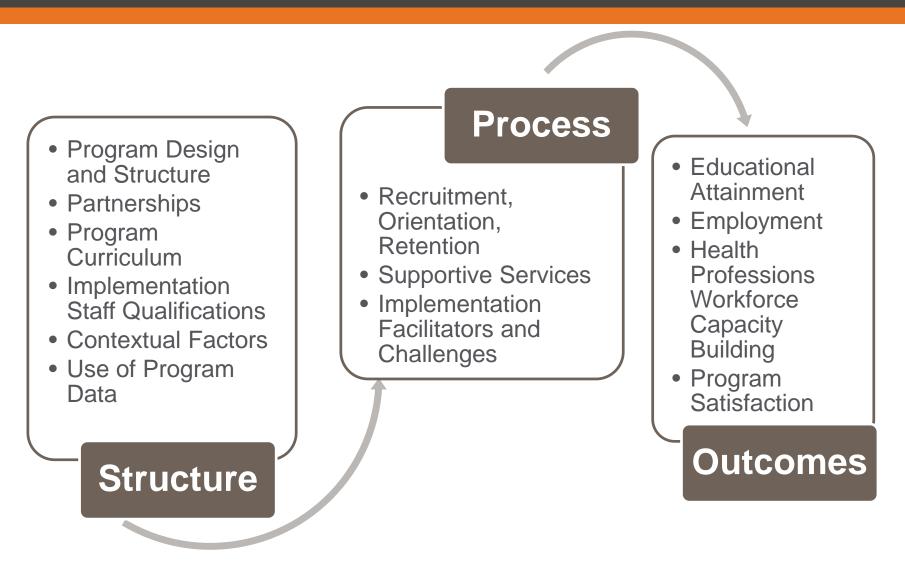
Seven values

- 1. Indigenous Ways of Knowing
- 2. Respect for Tribal Sovereignty
- 3. Strengths Focus
- 4. Cultural and Scientific Rigor
- 5. Community Engagement
- 6. Ethical Practices
- 7. Knowledge Sharing





Evaluation Design





Status of the Evaluation



• Site visits will continue to move back each year so that in the final year of the grant they will occur in the spring



Second Annual Site Visits

- Similar structure to first site visits
 - Interviews with program staff, employers and other stakeholders
 - Student focus groups
 - Completer/Non-Completer interviews
 - Evaluation Technical Assistance
- Second site visits will also include dissemination discussions



Key Questions: Structure

- Structure:
 - Changes to the program structure or partnerships
 - Differences in how the program is administered at different implementation sites
 - Changes to the partnerships that have been formed to deliver training or program services
 - Changes to the program curriculum
 - Adaptations or modifications made to the training program(s) based on local conditions or preferences or partner input
 - Staff turnover and its effect on the program



Key Questions: Process

• Process:

- Changes to the types of supportive services being provided to participants
- How participant needs are assessed and how often they are reassessed
- Is the program being implemented as intended
- Implementation facilitators and challenges



Key Questions: Outcomes

• Outcomes:

- Whether participants complete the program and reasons why participants drop out
- If participants who complete a training obtain a professional or industry recognized certificate or licensure
- If participants gain employment in health profession or other industries and what types of jobs they obtain
- Program satisfaction
- Key benefits for participants both students, grantee organizations, partners, and employers







NORC's Use of PAGES Data

PPRs

• Assess grantees' progress toward meeting their goals

De-identified PAGES Data

 Conduct descriptive analyses to document program successes and challenges. Only data from participants who consented to participate in the evaluation are included in these analyses.

National Directory of New Hires (NDNH)

 When possible, link PAGES data to the National Directory of New Hires to provide longer-term data on participant earnings and employment.



Tracking Outcomes

- PAGES provides the following data:
 - Total enrollment in Tribal HPOG
 - Characteristics of participants (e.g., TANF recipients)
 - Educational attainment
 - Number of participants who enrolled in one or more training and whether they complete that training
 - Total number of trainings participants have enrolled in and completion rate
 - Number of participants who have advanced in a career pathway
 - Number and type of supportive services provided
 - Employment status



Preliminary Findings and Outcomes

Fall 2017 Site Visits



Structure

- Grantees partner with a variety of institutions, including colleges and universities, non-profit adult education centers, and training academies, to provide participants with opportunities to enroll a wide range of academic programs in healthcare.
- Grantees also partner with institutions through distance education or by hosting the course at the grantee site to make trainings more accessible for participants.
- Between 7 and 13 academic programs are offered by each grantee.
- Other key partners include workforce development centers, TANF, and regional employers.



- All five tribal grantees offer the following supportive services:
 - Tuition/books and tutoring
 - Transportation assistance (e.g., gas cards)
 - Childcare assistance
 - Employment-related services (e.g., resume development, assistance in identifying employment opportunities)



Implementation Facilitators and Challenges

Facilitators

- Establishment of formal policies and procedures
- Strong communication with partners
- Frequent communication between HPOG staff and participants
- For returning grantees, continuity between HPOG
 1.0 and HPOG 2.0

Challenges

- Identifying training partners that offer advanced healthcare training courses
- Staff turnover
- Difficulty hiring instructors
- Background checks required for employment in healthcare can be a barrier for potential participants



Outcomes

As of March 31, 2018:

- 1,311 participants have enrolled in Tribal HPOG 2.0;
 - 753 of those participants provided consent to participate in the evaluation*
 - 16% of participants are TANF recipients
 - 630 participants have enrolled in a healthcare training;
 - 391 have completed a training
 - In total, participants have enrolled in 873 trainings with a completion rate of 57%
 - 141 participants have obtained employment in healthcare
- Across grantees, the most common healthcare training that participants enroll in is Certified Nursing Assistant.

*Data only includes participants who provided consent to participate in the evaluation



Participant Voices

Current participants, as well as those that have completed their training(s), have expressed interest in returning to their communities to serve their communities, or have done so already.

> "In my nursing home, there are Native American elderly that feel comfortable with me because we grew up the same way. So they feel comfortable when they see another Native American."





Participant Voices

Participants have expressed satisfaction with the HPOG program.

- "None of us would be doing this without HPOG. [Being in a] small town, we have to be at work consistently and can't get ahead. There aren't a lot of jobs that let us get ahead, [but the] medical field is where you can get ahead here."
- "They go above and beyond any scholarship I have ever received."
- "This program, along with a few other resources, grounded me in not only education, but life skills. Just the people, everyone I came in contact with, they were exceptional. I can't express how thankful I am for the few people, they do a lot.



Photo Source: CITC Facebook



Knowledge Sharing



Dissemination Plan

- Dissemination plan outlines activities and audiences for sharing project findings.
- Dissemination of project findings will provide documentation and lessons learned around programmatic approaches to career pathways programs serving tribal populations.
- Audiences for Tribal HPOG 2.0 products include:
 - HPOG 2.0 Grantees and Implementation Partners
 - Tribal Entities and Tribal Consortiums/Associations
 - Federal and State Government Partners
 - Community members



Published Dissemination Products

- Tribal HPOG 2.0 Evaluation Plan
- Findings from the literature review
- Practice briefs
 - An Introduction to the Tribal Health Profession Opportunity Grants (HPOG) 2.0 Program and Evaluation
 - Principles to Guide Research with Tribal Communities: The Tribal HPOG 2.0 Evaluation in Action

Evaluation of the Tribal HPOG 2.0 Program Practice Brief



Principles to Guide Research with Tribal Communities: The Tribal HPOG 2.0 Evaluation in Action

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This practice brief is the second in a series of practice briefs being developed by the Tribal Health Profession Opportunity Grants (HPGG) 2.0 evaluation team. The briefs will be used to disseminate important tessons beamed and findings from the Evaluation of the Tribal HPGG 2.0 Program, which is being funded by the Office of Planning. Research and Evaluation team the Administration for Chaitren and Pamilies. The Tribal HPGG 2.0 program supports demonstration projects that provide eligible individuals with the opportunity to obtain education and rearing for occupations in the healthcare field that pay well and are expected to either experience labor shortages or be in high demand. The purpose of this practice brief is to summarize how the findings from the iterature review and the values of the Roadmap for Collaborative and Effective Evaluation in Tribal Communities were applied to inform the Tribal HPGG 2.0 evaluation approach.

The Health Profession Opportunity Grants (HPOG) Program is administered by Administration for Children and Families (ACF), U.S. Department of Health and Human Services.¹ In 2010, ACF awarded the first round of HPOG grants (referred to hereafter as HPOG 1.0) to 32 organizations, including five tribal organizations. In September 2015, ACF awarded a second round of HPOG grants (referred to hereafter as HPOG 2.0) to 32 organizations, again including five tribal organizations. The HPOG Program supports demonstration projects that provide eligible individuals with the opportunity to obtain education and training for occupations in the healthcare field that pay well and are expected to either experience labor shortages or be in high demand. HPOG was authorized as a demonstration program. Accordingly, for both HPOG 1.0 and HPOG 2.0, ACF's Office of Planning, Research and Evaluation (OPRE) is using a multi-pronged evaluation strategy to assess the success of the HPOG Program, including a comprehensive implementation and outcome evaluation of the five Tribal HPOG 2.0 grantees. NORC at University of Chicago (NORC) led the Tribal HPOG 1.0 evaluation and is conducting the Tribal HPOG 2.0 evaluation in partnership with AbI Associates. Information about the Tribal HPOG 2.0 Program and the Tribal HPOG 2.0 evaluation design can be found in a separate Tribal HPOG 2.0 practice bief, An introduction to the Tribal HPOG 2.0 practice bief, An introduction to the Tribal HPOG 2.0 program and the Tribal HPOG 3.0 Program and Evaluation⁷, and the Tribal HPOG 3.0 program and

² An Introduction to the Tribal Health Profession Opportunity Grants (HPOG) 2.0 Program and Evaluation. (2017, Forthcoming). Administration for Children and Families.

Tribal HPOG 2.0 Evaluation Plan. (2017, Forthcoming)

Administration for Children and Families.

¹ HPOG was established by the Affordable Care Act in 2010 and extended by the Protecting Access to Medicare Act in 2014.

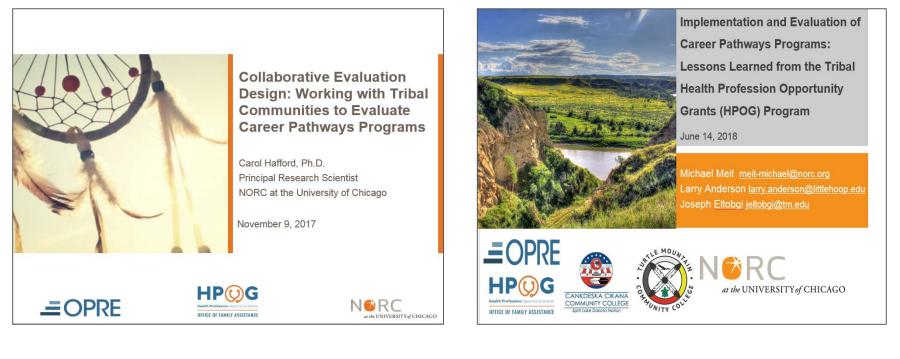


At the UNIVERSITY of CHICAGO

Recent Dissemination Efforts

American Evaluation Association Annual Meeting, November 2017

Dakota Conference on Rural and Public Health (co-presentation with TMCC and CCCC), June 2018





Upcoming Dissemination Efforts

- Update to the Technical Work Group
- Practice Brief 3: Opportunities and Challenges to Implementing Healthcare Career Pathways training programs in a Rural Context
- Future Practice Briefs Potential topics include:
 - Interim Outcomes from first three years of program implementation
 - Importance of Data Quality and Fidelity for Tribal Grantees
 - Implementation Partnerships
 - Other?
- Dissemination discussions during site visits



Dissemination Discussions During Site Visits

- Discussions will take place during each site visit
 - Discussions will surround generating grantee-informed topics and products for audiences the grantee and leadership find important
- Topics for discussion include:
 - Who are your audiences?
 - What would you want to achieve with dissemination efforts?
 - What are effective methods for dissemination in your community?
 - What types of products would be effective?
 - What are possible timelines for dissemination (annually, periodically, etc.)?
- The evaluation team will suggest formats and templates for these products and work with grantees to further develop them based on their needs



Questions and Discussion



- What has worked well for your program?
- What are some ways that you are following-up with participants? What challenges have you experienced in following up with them? Do you have any tips to share?
- Have you experienced any challenges in reaching out to and coordinating with community or employer partners? Can you share what has worked well when forming partnerships?



Thank You!





