

**Quarterly Narrative Progress Report**  
**ARRA High Growth and Emerging Industries (HGEI) Grants**  
**Health Care**

**Grantees must submit their quarterly progress reports to both their Federal Project Officer and the [green.jobs@dol.gov](mailto:green.jobs@dol.gov) mailbox.**

**General Grant Information**

**SGA Type: SGA/DFA PY-09-01**

**Grantee Name: Montgomery Institute, The**

**Project Name: Building Health Care Ladder Opportunities for Unemployed and Dislocated Workers in East Central Mississippi**

**Grant Number: GJ-20039-10-60-A-28**

**Report Quarter Ending: 9/30/2011**

**Date of Submission: 10/10/2011**

**Program Contact Information: Ken Dupre, Vice President, The Montgomery Institute, P O Box 1889, Meridian, MS 601-483-2661, [tmiken@bellsouth.net](mailto:tmiken@bellsouth.net)**

For brevity, the following references are used in this report: TMI – The Montgomery Institute; DOL – U.S. Dept. of Labor; ETA – DOL Employment Training Administration; ECCC – East Central Community College; EMCC – East Central Community College; MCC – Meridian Community College; JCJC – Jones County Junior College; AHC- Alliance Health Center Acute Care Hospital; EMSH – East Mississippi State Hospital; NCGH – Neshoba County General Hospital; NMC -- Noxubee Medical Complex; RHS – Rush Health Systems; MDES – Mississippi Department of Employment Security; CNA – Certified Nurse Aide/Assistant; CRC – Career Readiness Certificate

**A. Summary of Grant Activities**

This report encompasses the sixth quarter of the grant, with six quarters of grant activity remaining - we are now at the halfway point of our grant. To date, we have served 580 active participants, most of which were entered into CNA training. For the period reported (July 1, 2011 to September 30, 2011), 142 eligible participants began CNA training classes presented by our college and health care partners.

In past quarterly submissions, it was reported that East Mississippi Community College (EMCC) has had difficulty populating their classes with eligible participants, as many potential participants do not meet the numerous eligibility requirements to enter CNA training. Earlier this quarter, a Statement of Work Modification was submitted and approved by the BRG. This modification increased the geographic area of service by three counties in the EMCC district

Building Health Care Ladder Opportunities for Unemployed  
and Dislocated Workers in East Central Mississippi  
Quarter Ending 9/30/2011

and will allow EMCC to provide CNA training at their main campus in Mayhew, Mississippi.

Additionally, the modification allows us to include a fourth health care provider, Noxubee Medical Complex, as a sub-recipient partner. NMC has a general hospital and a nursing home on its campus, and the administration expects to hire approximately 15 CNAs over the next year.

Below are some of the highlights of this quarter:

- **The Statement of Work Modification was approved effective September 15, 2011.** This modification allows for the following changes: 1) Our geographic area is expanded to eleven Mississippi counties, as we may now include residents of Clay, Lowndes, and Oktibbeha counties in our pool of potential participants. 2) Noxubee Medical Complex in Macon, MS is now eligible to become a training sub-recipient. This will bring the total number of health care provider partners to four: Rush, East MS State Hospital, Neshoba General, and Noxubee Medical. 3) The language of our grant has been slightly changed in order to clarify that we can provide in-house skills upgrade training to LPNs. 4) The language of our grant was also modified to allow us to provide financial support to participants facing unforeseen financial hardships that could prevent them from attending classes. 5) Our health care provider partners may now include in their training the incumbent workers who live in the Alabama counties of Choctaw, Sumter, and Pickens. Prior to this modification, our health care provider partners could not provide grant-funded skills upgrade training to their Alabama workers who reside in these counties.
- **Number of participants in grant-funded training classes continues to remain high, with expectations of even higher quarterly numbers in the future.** This quarter, 160 eligible participants began CNA training and/or skills upgrade training at our three provider partners. This is the third consecutive quarter with 150 or more new participants entering the training program. This number is expected to increase in future quarters, as EMCC will now institute CNA training classes at its main campus in Mayhew due to the geographic expansion outlined above. Also, the addition of Noxubee Medical Complex will mean more skills training classes for incumbent CNAs and LPNs in the future quarters.
- **RHS CNA II training continues, adds a second class.** Rush's second CNA II class of nine participants began in late August, while the initial CNA II class has completed their instruction and are at various stages of competency assessments. As explained last quarter, the CNA II training program is designed to provide a basic CNA with skills upgrades so they may provide health services nearly to the level of an LPN. The program includes 36 total hours of instruction as well as supervised mentoring in the application of the new job skills. The skills topics are: Phlebotomy (12

hours), Urinary Catheterization (4 hours), Lattice Machine [wireless coding of patient information for lab work] (4 hours), Environmental Health (8 hours), EKG (1 hour), Leadership (3 hours), and Health Records (4 hours). In addition to the training time, each participant must successfully perform, under supervision, 50 IV sticks, three EKGs, and three urinary catheterizations. As of the end of this quarter, three participants from the initial CNA II class have completed their competencies and have received a \$1.00 per hour increase in pay. The others from the first group are expected to complete their competencies and receive their pay raises by the end of October.

- **Navigators at our sub recipient partners are now Case Managers in the RAD system.** A recurring reporting issue has been the lag in our “real time” reporting shown in the quarterly narrative reports and the data in the RAD system. This lag has been due to the centralized reporting procedure initially adopted by TMI and the location/possession of the records at the partner institutions. That is, we used this centralized reporting procedure to limit access to the RAD system in order to control the quality of the data inputs. However, the data inputs we needed were located in the participant files at our partner institutions. As a result, inputs were delayed 30 days or more, which caused the RAD data to lag the real-time data in our reports. After careful consideration, we decided to train the Navigators on the RAD system and push the inputs down to the local level at all sub recipient partners except for EMSH. Once the ongoing issues at EMSH have been resolved (see section C. “Status Update on Strategic Partnership Activities” below), all sub recipients will input nearly real-time data on the RAD system. As a result, we have added eight Case Managers and two Administrators in the month of September, and all are working to update the information on all participants. To date, the feedback has been positive. Over the upcoming quarter, we will monitor this new data procedure carefully and report our findings in the next quarterly report.

## **B. Status Update on Leveraged Resources**

As previously reported, the Leveraged Resources and Match Reporting Form requires the sub-recipients to report the amount of leveraged resources expended for the quarter, a brief description of the expenditure, and the source. Sub-recipients must also note if the source is from federal funds. This form must be signed by the sub-recipient’s chief financial officer, who certifies the expenditures were grant-related and not reimbursed by the grant.

This quarter, a total of \$44,863.73 was documented as leveraged funds for this grant. \$28,900.72 came from State and Local funding sources and \$15,963.01 came from Federal funding sources. Total Leveraged Funds for the grant to date are \$252,515.13. Of this total, \$195,642.95 are from State and Local sources and

\$56,872.18 are from Federal sources. Note: EMCC, MCC, and NCGH made corrections to their “contributions to date” leveraged resources figures.

The Leveraged Funds breakdowns for this quarter are as follows:

- ECCC reported \$9,347.05 in additional navigator salaries came from local college funds and \$9,317.00 for instructor salaries came from state workforce training funds. ECCC’s leveraged funds contribution for the grant period to date is \$100,850.08.
- EMCC reported \$4,060.00 in leveraged resources for instructor salaries paid with state workforce training funds and \$838.00 for travel from local college funds. EMCC’s leveraged funds contribution for the grant period to date is \$39,749.00 (corrected figure).
- MCC reported \$1,326.25 in leveraged resources for instructor salaries, paid for from state workforce funds. MCC’s leveraged funds contribution for the grant period to date is \$48,339.16 (corrected figure).
- NCGH reported \$4,012.42 in leveraged funds for navigator salaries, supplies, and overhead paid for with local funds. NCGH’s leveraged funds contribution for the grant period to date is \$6,704.71 (corrected figure).
- MDES reported \$15,963.01 in leveraged funds for staff salaries, benefits, supplies, and overhead paid for with federal funds. MDES’ leveraged funds contribution for grant period to date is \$56,872.18.
- All other partners have reported zero (0) on their leveraged funds for this quarter.

### **C. Status Update on Strategic Partnership Activities**

The ongoing issues with health care partner EMSH continue. To review, here is what was written in the last quarterly report:

The Grant Director and the Procurement Specialist have continued to spend a great deal of time with EMSH personnel to help coordinate their participant data tracking and record-keeping. This has been an ongoing issue with this partner, and this significantly slows down the quarterly reporting process. However, EMSH provides a significant amount of grant-related training and is a valuable asset to this grant. The Grant Director will continue to press EMSH to keep their data tracking and record-keeping as current as possible.

During this last quarter, one of the Navigators at EMSH quit. We have spoken to the CEO and CFO of the hospital on the need to catch up on their record-keeping and have strongly suggested they hire a full-time person to work solely on grant-related duties. Additionally, we have strongly suggested this person work directly for the CEO to avoid some of the bureaucracy issues that have become barriers at

EMSH. We have arranged an October meeting with the hospital administrators to further discuss these issues and recommendations.

Also discussed in the previous report, EMCC is still having difficulty populating their classes with eligible participants, as many of their applicants are unable to pass the eligibility requirements set by the grant statement of work. The recent Statement of Work modification will greatly increase the number of applicants eligible for grant-related training in EMCC's geographic district and will allow EMCC to hold CNA classes on its Scooba and Mayhew campuses simultaneously.

As soon as the Statement of Work modification was granted, the Grant Director and EMCC representatives met with the administration of the Noxubee Medical Complex to discuss the specific grant work to be performed and the contractual obligations of a sub-recipient. This discussion was well-received and TMI is awaiting feedback on the draft contract.

#### **D. Timeline for Grant Activities and Deliverables**

As reported last quarter, all tasks listed in the Project Work Plan are now on schedule. For the upcoming quarter, our health care training partners will focus more on skills upgrade training and our community college partners will focus on job placement for their CNA graduates.

#### **E. Status of Deliverables**

*Total Participants Beginning CNA Education/Training Activities in Community Colleges:* Total Grant Goal – 570; Grant to Date – 359. Rate of Attainment: 63 per cent with 50 per cent of grant remaining. Commentary: CNA training at the community college partners remain strong. With the SOW change allowing additional participants and classes for EMCC, we expect to far exceed this grant goal.

*Total Participants Completing CNA Education/Training Activities at Community Colleges (85%):* Total Grant Goal – 485; Grant to Date – 244. Rate of Attainment: 50.3 per cent with 50 per cent of grant remaining. Commentary: This number is tied to number beginning training posted above. The current lagging completion rate is 68 percent -- this number does not include participants who are scheduled to complete their class and clinical work in the following quarter. Even with this lag, our total number of completers is on target with our goals. With the expected increases as stated above, we expect to far exceed this grant goal as well.

*Total Participants Beginning CNA Education/Training Activities at Partner Health Care Institutions:* Total Grant Goal – 720; Grant to Date – 229. Rate of Attainment: 31.8 per cent with 50 per cent of grant remaining. Commentary: As

mentioned in previous quarterly reports, only one health care partner (EMSH) is providing in-house training. However, EMSH has increased their training as they have adopted a policy of hiring only CNAs for their open health care worker positions. This past quarter, EMSH trained 70 eligible participants. At this current rate, we will achieve 90 per cent of this goal. When combined with the expected training through the community colleges (stated above), the overall total number of CNAs trained through this grant will exceed the overall grant goal.

*Total Participants Completing CNA Education/Training Activities at Partner Health Care Institutions (80%):* Total Grant Goal – 576; Grant to Date – 220. Rate of Attainment: 38.2 per cent with 50 per cent of grant remaining.

Commentary: EMSH continues to enjoy a very high completion rate of 96 per cent, well exceeding the target completion rate of 80 per cent. We attribute this to EMSH's policy of paying its participants a salary while they are in CNA training.

*Total Participants Completing Education/Training Activities That Receive a Degree or Certificate (90%):* Total Grant Goal – 945; Grant to Date: 301. Rate of Attainment: 32 per cent with 50 per cent of the grant remaining. Commentary: Reporting for this metric has changed from previous reports. Because our CNA classes are designed to provide participants with multiple stackable credentials (CPR Certification, NCRC), our completers will nearly always receive at least one industry-recognized certificate by the time they complete their training. For the grant to date, 100 per cent of our completers have attained at least one certificate. However, that number would not clearly reflect the targeted certification of a CNA. Our current pass rate for the CNA exam remains at less than 65 per cent, which is lower than we expected. To increase this number, all community college Navigators have: 1) scheduled class end dates within two weeks of exam dates; 2) created “refresher” sessions prior to the exam; and 3) called in re-testers to discuss where they fell short and included them in refresher classes and one-on-one sessions.

*Total Participants Completing Education/Training Activities That Are Placed Into Unsubsidized Employment (95%):* Total Grant Goal – 998; Grant to Date: 316; Rate of Attainment: 31.7 per cent with 50 per cent of the grant remaining.

Commentary: These numbers are based on required quarterly feedback from the Navigators and, to date, do not match with the RAD numbers. As stated previously in this report, the Navigators are now working to update all participant information in the RAD system and, beginning next quarter, we will require all Navigator reports to match what is in RAD. Also, we have discussed using the Mississippi Department of Employment Security data system to check on both employment and retention data for the participants. We have an unwritten agreement for our local WIN Center representative to do this on an “as time will allow” basis. However, this information will lag at least one calendar quarter in their tracking system.

*Total Participants Completing Education/Training Activities That Are Placed Into Training-Related Unsubsidized Employment (90%):* Total Grant Goal – 945; Grant to Date: 302; Rate of Attainment: 32 per cent with 50 per cent of the grant remaining. Commentary: See above.

*Total Participants Beginning the Nurse Mentor and Retention Program:* Total Grant Goal – 90; Grant to Date: 25; Rate of Attainment: 27.8 per cent with 50 percent of the grant remaining. Commentary: RHS will begin interviewing for their fourth Nurse Resident class in November and the class will begin in January, 2012.

*Total Participants Completing the Nurse Mentor and Retention Program (85%):* Total Grant Goal – 76; Grant to Date – 10; Rate of Attainment: 6.6 per cent. Commentary: The second class of Nurse Residents completed their programs and four of the five are employed at Rush. The other completer accepted a job at another hospital, citing location as her deciding factor. The third class of Nurse Residents had one nurse drop, leaving 14 participants progressing satisfactorily and scheduled to finish December 5, 2011.

#### **F. Key Issues and Technical Assistance Needs**

We have no current technical assistance needs.

#### **G. Best Practices and Success Stories**

Rush has reported early positive feedback from their Nurse Residency program. One nurse from the first group of the Nurse Residency Program has already moved into a “charge nurse” role in her nursing unit. The charge nurse has many leadership duties, and this position is usually reserved for nurses with years of experience. Another nurse from the first group of the NRP is now acting as a preceptor to the current residents. Being designated by a manager as a preceptor also indicates great job performance.

Additionally, Rush held a “Nurse Residency Group Breakfast” to give their unit managers a chance to meet each of the current nurse residents and to give the residents a chance to let the managers know where they would like to work. Toward the end of the breakfast, the managers had a chance to conduct “mini interviews” to determine which residents would be a good fit for their units. Rush was pleased with the outcomes and plans to have more of these meetings to make sure each resident is placed in a nursing unit where they will be successful.

As a result of a previous Statement of Work modification which included Winston County in the grant’s geographic area, ECCC has been able to get their Louisville Career Advancement Center as an approved CNA training facility by the MS State Department of Health. ECCC found a large pool of applicants eager to

enroll in the first ever Certified Nursing Assistant program in Louisville, which began in July. The 15 Winston County participants that completed the certified nursing assistant program are now waiting to take the MS Nurse Aide exam. They are very eager to receive their certifications and enter the workforce in the Louisville area CNAs.

**H. Additional Information**

None at this time.