

**BASELINE EVALUATION REPORT**  
**Building Essential Skills through Training**  
**(BEST) Initiative**

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**BEST Initiative  
Baseline Evaluation Report**

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## Report Overview

In June of 2002, FutureWorks was awarded a contract by Commonwealth Corporation to evaluate the Building Essential Skills through Training (BEST) Initiative. BEST is a two-year, \$3.5 million, multi-agency partnership designed to integrate adult basic education and job training for Massachusetts' front-line workers.

The BEST Initiative aims to:

1. Support industry-driven partnerships that help address the workforce development needs of Massachusetts firm and industries by building workers' skills through education and training;
2. Reform the workforce development system by improving the collaboration and leadership capacity of workforce development organizations and agencies at the state, regional, and local level.

Six Regional Industry Teams (RIT's) were selected and funded through a competitive RFP process in February 2002. Grants ranged in size from approximately \$340,000 - \$700,000. The six BEST RIT's are:

- Boston Financial Services
- South East Massachusetts Manufacturing
- Metro Southwest Hospital Initiative
- Boston Health Care and Research Institute
- North East Hospital Partnership Initiative
- Blueprint for Biomanufacturing

### Scope of Evaluation

FutureWorks' evaluation of BEST runs through the course of the grant. Data collection began in September of 2002 and will continue through December of 2003. The evaluation includes the following:

- Qualitative and quantitative analysis across the six BEST RIT's
- Systems reform analysis at both the regional and state levels
- Impact of participation in BEST on workers and employers
- In-depth case studies of 3 RIT's (biomanufacturing, metro south west hospitals, Boston financial services).

This baseline report is the first of 3 reports FutureWorks will deliver to Commonwealth Corporation. The goal of the Baseline Report is to introduce the BEST Initiative and to provide an accurate description of each RIT now that the start-up phase of the initiative has come to a close. This report does not delve into system reform issues at either the state or regional level nor does it consider program impact on employees or employers. These aspects of the program will be addressed in subsequent reports. The Baseline Report is essentially an attempt to 'get a handle' on each RIT – to understand how each

partnership has formed, the program design changes that have occurred, and initial project implementation issues. Establishing this baseline will enable FutureWorks to assess RIT progress through 2 additional reports – a mid-point report to be submitted in June/July and final report to be submitted after the completion of the grant period (April/May 2004).

The Baseline Report proceeds as follows: section one provides a brief overview of the BEST Initiative including recent history and program goals; section two provides profiles of each RIT including industry challenges, program history, partnership structure, and program design; section three presents preliminary comparative data on the six RIT's including data on training, career support and related services, and career pathways; section four provides preliminary observations of the initiative to date.

- **Background on the BEST Initiative**

The BEST Initiative was launched in the fall of 2001 to support and increase integration of job training and basic education for front-line workers in Massachusetts. The initiative is a direct outgrowth of former Governor Jane Swift’s Task Force to Reform Adult Education and Worker Training. Governor Swift formed the Task Force in April 2001 in response to a MassINC report which reported that 1.1 million adults in Massachusetts were ‘at risk’ in the workforce due to deficiencies in basic math, reading, writing, language and analytic skills.<sup>1</sup> A major recommendation of the MassINC report was better statewide integration of adult basic education and job training programs.

The Governor’s Task Force drew its membership from across Massachusetts’ economic development, workforce, education and social service agencies.<sup>2</sup> Task Force members and staff—which met intensively between April and June □ were charged with the following:<sup>3</sup>

- assessing existing adult education and training services;
- analyzing funding streams to identify and leverage existing resources;
- reviewing performance measures to ensure accountability and effective service delivery;
- evaluating the overall structure of the workforce development system.

In addition to these overarching goals of the full Task Force, members divided into three working groups to carry out research and develop recommendations. The working groups investigated three topics:

1. **Incumbent Workers**

This group was charged with developing an integrated strategy for expanding and improving partnerships with employers in order to make education and training services more accessible and effective for employed workers.

- **Performance Measures**

This group was to identify a common set of core performance standards and metrics that apply to all agencies, and to propose a system for collecting, aggregating, analyzing and reporting on these data.

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<sup>1</sup> ‘New Skills for a New Economy: Adult Education’s Key Role in Sustaining Economic Growth and Expanding Opportunity,’ MassINC (2000).

<sup>2</sup> Agencies represented on the Governor’s Task Force included: Department of Economic Development; Department of Labor & Workforce Development; Administration and Finance; Department of Education; Board of Higher Education; Executive Office of Elder Affairs; Department of Employment and Training; Department of Transitional Assistance; Executive Office of Health and Human Services; Commonwealth Corporation; and State Workforce Investment Board.

<sup>3</sup> The following description of the Governor’s Task Force is drawn directly from ‘Climbing the Ladder: Expanding Opportunity Through Training: Recommendations of the Governor’s Task Force,’ July 19, 2001.

- **Resource Management**

This group was responsible for reviewing existing and potential resources and for recommending alternative approaches to flexibly and productively allocating funds to strengthen overall system capacity.

On July 19, 2001 the Governor's Task Force issued its recommendations for reform. Entitled 'Climbing the Ladder: Expanding Opportunity Through Training,' the report of the Task Force contained six key recommendations for improving and integrating the state's fragmented workforce development system. Chief among the recommendations was that of the work group on incumbent workers to launch a new, industry-focused workforce development effort. BEST was recommended by the Task Force to:

help meet the demand for more highly skilled workers through a model of integrated job training and adult education services. By pulling together \$3.5 to \$7.0 million from a variety of existing programs, BEST will support regional proposals that give front-line workers a foundation of skills to achieve wage and career advancement, while reducing persistent jobs vacancies in key sectors (Climbing the Ladder, pg. 2)

The basic design tenets of the BEST Initiative were mapped out in the Task Force report. The report stated that the BEST Initiative supports the following objectives:

- **An Integrative Approach** – by creating partnerships among agencies, companies, WIB's, elected public officials, education and public and private providers;
- **Career Advancement** – by seeking applications from partnerships that support career pathways within industries or occupations;
- **Capacity Building** - through the provision of technical assistance, dissemination of best practices, and the strategic investment of resources;
- **Sustained Investment** – through a local match requirement to ensure joint ownership and sustainability. The goal of this co-investment is to strengthen local partnership and to ensure that training continues after the initial two-year investment.

Supporting partners pooled \$3.5 million for the Initiative. These partners included the Division of Employment and Training, Department of Education, Department of Transitional Assistance, and Department of Labor and Workforce Development. The Commonwealth Corporation was charged with the task of helping to build the partnership and operate the program.

Staff of the partnering agencies met throughout the months of July, August and September to further design the initiative and develop selection criteria for funding. On October 15, 2001 a Request for Proposal (RFP) was issued. The RFP required that proposals be submitted by Regional Industry Teams (RITs) consisting of representatives

from the following four groups: employers, education and training providers, local workforce investment boards, and workers from firms or organized labor.

According to the RFP, the RIT's should work collaboratively to:

develop and implement an industry-driven education and training program. The partners will identify the area vacancies and skills shortages, target population and participant needs, employment and career development opportunities, and will define the education/training focus and plan.

Partners will work collaboratively so that each can fully offer their expertise and strengths to this workforce development effort. The partners will identify service gaps and create incentives to remove barriers to improved collaboration. Team members will also pay attention to the generation of best practices and share them for dissemination across the state (BEST RFP, pg. 7)

The funding partners established the following criteria for considering proposals:

- Industry Driven
- Develops integrated regional partnership
- Emphasis on basic and foundational skills
- Promotes long-term employment or career mobility
- Includes internships, job placement, and post-employment supports
- Expands access to education and training
- Strengthen the skills of workplace educators
- Data driven
- Focus on project outcomes
- Provides evidence of sustained improvement or change (for workers and employers)
- Promotes co-investment of partners

On January 15<sup>th</sup>, 2002 Commonwealth Corporation received 26 proposals. The following six proposals were selected for funding in mid-February:

- Boston Financial Services (\$490,745)
- South East Massachusetts Manufacturing (\$574,622)
- Metro South/West Hospital Initiative (\$691,580)
- Boston Health Care and Research Institute (\$534,252)
- North East Hospital Initiative (\$342,110)
- Blueprint for Biomanufacturing (\$499,997)

All BEST RIT's initiated their projects in spring 2002. Training for participants has commenced at varying rates across the RIT's. Training began as early as May 2002 in one RIT and as late as January 2003 in others. The individual RIT profiles that follow detail the development and progress of each BEST RIT.

## II. Regional Industry Team Profiles

The following section of the baseline report provides descriptive profiles of the six BEST Regional Industry Teams and their projects. The profiles are intended to provide an accurate ‘snapshot’ of each initiative now that the start-up phase of the initiative has come to an end. In the four RIT’s that began training in fall 2002 or earlier, the profiles provide a picture of the partnership and project activities through December 31, 2002. In the two RIT’s that began training in January, 2003, we expanded the profile cut-off date by one month in order to present their recent training activity.<sup>4</sup>

There are several issues to keep in mind while reading the RIT profiles:

1. The profiles are not evaluative; rather, they attempt to provide an accurate snapshot of each initiative at the end of the start-up phase. Accurate and updated description of each program was necessary at this point in the evaluation because several programs have undertaken basic design changes since their original proposals were submitted to Commonwealth Corporation.
2. The design changes undertaken by several of the RIT’s in the start-up phase may require some revision of performance outcome goals. The performance outcome goals contained in the RIT profiles are based on the original program design of each RIT. Commonwealth Corporation may want to negotiate with each RIT to revise performance outcome goals to integrate the realities of the changing job market, but that reflects the spirit of the original goals and measures.
3. Each RIT is starting from a different point in terms of experience, capacity and funding. Some RIT’s are building off of previous experience, relationships and grants while other RIT’s are essentially starting from scratch. It is important to recognize variation in start points when contrasting RIT accomplishments to date. In the ‘history’ section of each RIT profile we specify if and how the BEST Initiative builds from prior experience and practice.
4. Each RIT is striking a different balance regarding emphasis placed on partnership building, training, and career path development. As a result, program outcomes look very different. At one end of the spectrum is South East Manufacturing which has already provided one-time computer training (4 or 8 hour courses) to 621 people; at the other end of the spectrum is Northeast Regional Hospital Partnership with 19 people enrolled in an intensive 400 hour transitional skills course. The considerable disparity among RIT’s in terms of breadth and depth of program design makes comparisons across sites difficult and not especially useful.

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<sup>4</sup> Boston Health Care, Boston Financial Services, Biomanufacturing and South East Manufacturing all began training in or before fall 2002. Metro South/West Hospitals and North East Hospitals both began training in January 2003.

The RIT profiles that follow are based on several sources including the original proposal submitted by the RIT to Commonwealth Corporation; RIT grant contracts with CommCorp., monthly reports submitted by each RIT to CommCorp., an expanded report required by each RIT one month after training began, interviews with project managers and other RIT members, and in some cases, participation in RIT partnership meetings.

Each 6-8 page RIT profile is organized as follows:

- Industry Challenges
- History of the Partnership
- Organizational Structure of the Partnership
- BEST Program Description

## **Massachusetts Biotechnology Council BEST Blueprint for Biomanufacturing (BBB)**

Industry:	Biotechnology
Region:	Metro Boston, Metro North, and Merrimack Valley
Lead Institution:	Mass Biotechnology Council
Lead Local Workforce Investment Board:	Metro North
Additional LWIB Partners:	Lower Merrimack, Boston PIC
Amount Awarded:	\$499,997

### **Industry Challenges and how BEST addresses**

The Boston metropolitan region is a global leader in biotechnology with the single largest concentration of biotech companies in the world. Many biotechnology companies formed in the late 1980s and early 1990s now have products that are nearing completion of clinical trials and/or in commercial manufacturing. Some of the largest companies are expanding their product base, and therefore, their manufacturing capacity. The BEST Initiative for Biomanufacturing is an industry-driven workforce development partnership that seeks to help Massachusetts biotechnology firms meet their manufacturing workforce needs.<sup>5</sup> A key goal of the project is to develop a standard for a state-wide, industry-driven biomanufacturing curriculum that enables entry-level workers to gain critical skills and fill demand for biomanufacturing technicians at biotech companies. Another key goal of the program is to help minorities and the urban poor learn about the potential of biomanufacturing careers so they can fill these positions.

### **History**

In September 2001, The Massachusetts Biotechnology Council and its educational foundation MassBioEd undertook a survey of Massachusetts biotechnology companies regarding workforce education needs. The survey revealed that many biotechnology companies had plans to hire entry-level manufacturing technicians in the next 1-3 years but that few training programs existed across the state to respond to this need. Graduates of the existing programs were not learning the skills necessary for career-ladder success in biomanufacturing companies. In addition, the MassBioEd survey reconfirmed that a lack of updated school facilities combined with faculty unversed in cutting-edge bioprocessing also posed workforce challenges for the industry.

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<sup>5</sup> The biotechnology industry is characterized by considerable fluctuation in terms of labor demand. In upward 'spike' periods, the industry experiences chronic labor shortages. During these spikes, labor shortages have been particularly acute at the front line of manufacturing as more and more companies move into the production phase. In downward spikes, however, demand for labor can diminish rapidly. Since MBC submitted the BBB proposal to CommCorp, for example, the biotechnology environment has changed dramatically. Many companies have placed a freeze on hiring while others have laid off employees. Thus, the BBB is grappling with the challenge of putting training mechanisms in place at a time when many companies no longer have the acute workforce needs they had just 1.5 years ago.

The BEST Initiative provided MBC and MassBioEd with a vehicle for addressing these issues in a pilot project that strengthened a new partnership of biotech companies, community colleges, career centers, and community-based organizations. MBC had previously worked with Commonwealth Corporation to encourage Roxbury Community College to develop a biomanufacturing program. In addition, MBC had worked with Middlesex Community College and Minuteman Tech on the development of biotechnology manufacturing programs. In partnership with the Metro North LWIB and others, MBC and MassBioEd crafted the proposal for the BEST Initiative for Biomanufacturing.

### **Organizational Structure of Partnership**

The BEST Initiative for Biomanufacturing is led by the Massachusetts Biotechnology Council (MBC) and its educational foundation, MassBioEd. MBC is a not-for-profit advocacy organization for the biotechnology industry with over 350 members statewide. In addition to MBC, the BBB involves 4 MBC member companies, 2 Workforce Investment Boards (MetroNorth and Lower Merrimack Valley), 2 Community Colleges (Roxbury and Middlesex), two Career Centers (Cambridge Career Source and ValleyWorks) and a coalition of community-based organizations. The LWIB, career centers and community colleges have contractual obligations under the BBB to deliver agreed-upon services. The industry partners contribute their labor through ongoing participation in committee work and make donations of specialized equipment for the training laboratories at the colleges.

The BBB is organized into one oversight committee and five working subcommittees. The oversight committee includes all the BBB partners. This group convenes at MBC on a monthly basis for an ‘All Partners’ meeting. The oversight committee is responsible for the overall success of the initiative including tracking progress of the subcommittees, sharing information between committees, creating mechanisms for long-term workforce development in biomanufacturing, securing buy-in from additional employers to ensure sustainability, and program evaluation.

The five subcommittees of the BBB are: Basic Skills, Recruitment & Screening, Curriculum Development, Success Factors (Business Etiquette) and Implementation & Evaluation. During development phases, the subcommittees meet on a regular basis (approximately bi-weekly). Subcommittees are composed of partners with expertise in each subject area. For example, business and community college partners have led the curriculum development subcommittee. For several months prior to the first training, human resource representatives from the participating companies met on a regular basis with community college liaisons to provide a regular flow of information regarding required skills, state-of-the art practices, and industry standards into the curriculum development process.

MassBioEd acts as grant administrator and fiscal intermediary of the BBB. A full-time project manager was hired to oversee the BBB. The project manager has day-to-day responsibility for all aspects of the program including scheduling, planning, facilitating

and attending all subcommittee and oversight committee meetings, working with employers and community college liaisons to develop and refine the training curriculum, working with LWIBs to identify training providers, and working with Career Centers and CBOs to ensure that appropriate candidates are recruited for training. The project manager coordinates industry participation in BBB and works with the project co-directors to broaden industry participation through outreach to MBC member companies and institutions.

### **Employer Partners**

To date there are four employer partners involved in the BBB: Genzyme, Biogen, Immunogen and Wyeth BioPharma. Genzyme and Wyeth were original partners; Biogen and Immunogen were recruited to the initiative subsequent to the initial formation of the partnership.<sup>6</sup>

- Genzyme (located in Cambridge with production facilities in Allston and Framingham) develops innovative products for unmet medical needs. The company employs close to 5,000 and is helping to discover and produce cures for cancer, Parkinson's and other debilitating diseases;
- Biogen (headquartered in Cambridge) is the world's oldest independent biotechnology company. Biogen is a global operating biotechnology company with capabilities to do research, develop, manufacture, and market its own products. A pioneer in leading edge research in immunology, neurobiology and oncology.
- Immunogen (Norwood and Cambridge) develops innovative biopharmaceuticals for the treatment of cancer. Immunogen is using its expertise to build a product pipeline and establish partnerships to achieve its goal of becoming a leader in the application of monoclonal antibodies for the treatment of cancer.
- WYETH BioPharma (The Genetics Institute Campus, based in Andover) is one of world's foremost research-based pharmaceutical companies and a global leader in the biotechnology industry. The parent company to WYETH is American Home Products (AHP), a \$13 billion company in global healthcare market place. The Genetics Institute in Andover employs approximately 1400 people at its 500,000 square foot campus. A quarter of these employees are biomanufacturing technicians. The Andover site is one of the largest biopharmaceutical operations in the U.S. and the largest in Massachusetts.

Overall, the four employer partners have been extremely active in the BBB, contributing significant amounts of staff time to: attend subcommittee and oversight meetings;

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<sup>6</sup> MBC's original proposal to Commonwealth Corporation included Abbott Bioresearch Center and Quinsigamond Community College as partners. However, the final project included two instead of three locations. As a result, Abbott Bioresearch withdrew from the initiative. The Center may become involved at a later date.

develop employee screening tools and teaching materials; provide specific and overall input into the design of the curriculum; and teach portions of the 4-week training module.

### **BEST Initiative for Biomanufacturing Partner Roles and Responsibilities**

<b>Partner</b>	<b>Role and Responsibility</b>
Mass Biotechnology Council (subcontracted by the MassBioEd Foundation)	Project manager, fiscal agent, trouble-shooter, evaluation, industry recruitment, sustainability strategy
MBC member companies  Genzyme Biogen Immunogen Wyeth BioPharma	Contribute expertise and time to curriculum development, develop teaching materials, screen resumes, interview potential employees, hire new employees, actively participate in training delivery, provide feedback on curriculum and delivery of training
LWIBS (MetroNorth and Lower Merrimack)	MetroNorth LWIB coordinates among the local LWIBS and workforce partners and participates in overall design/planning of BBB
Community Colleges (Roxbury and Middlesex)	Solicit input from industry, develop teaching materials, lesson plans and training schedule. Deliver 4-week training module
Career Centers (Career Source in Cambridge and ValleyWorks in Lawrence)	Recruit, develop screening tools and process, custom screen and test prospective employees using industry-designed model
CBO Coalition	Conduct outreach to minorities and urban poor, introduce these populations to the biotechnology sector; provide skills training specific to biotech career opportunities

#### **Program Description**

The BBB has three overarching goals: 1) to develop a sustainable training model that enables entry-level biomanufacturing technicians to become highly productive workforce members with the ability to climb the biotechnology ladder; 2) to reduce shortages of frontline manufacturing workers and increase the retention of entry-level workers in the industry; 3) to improve the skills and performance of incumbent biomanufacturing workers.

To achieve these goals, the BBB targets two populations for training. The primary target population is new hires for the entry-level biomanufacturing technician position. For this position, companies are interested in recruiting high school graduates with some math and science background who can read and speak English. Reliability, honesty and an ability to work rotating shifts are essential for success in this position. The secondary target of the BBB is incumbent biomanufacturing technicians.

#### **Career Pathways**

A key goal of the BBB is to provide entry-level manufacturing technicians with the foundation they need to climb the biomanufacturing career ladder. The biotechnology industry is characterized by an articulated career pathway and well-defined opportunities for advancement. Individual companies adhere to an industry standard for the

manufacturing technician career path. Entry-level biomanufacturing technicians hired through BEST begin at Level I and may have opportunities to advance up the biomanufacturing career ladder through further education and training. Ongoing education and training is an integral part of biotechnology culture due to the high degree of accuracy required by the work and the continuous change in the regulatory environment. Further education is encouraged across the industry and in most companies employees have access to tuition reimbursement plans.

**Wage Structure**

Assistant manufacturing technicians hired through the BEST initiative are expected to earn approximately \$15 an hour or an annual salary ranging \$30,000 – 33,000. According to MBC, the salary range for manufacturing technicians is \$26,000 - \$44,000.

**BioManufacturing Technician, Levels I–IV**

**Salary Range: \$26,000 - \$44,000 plus benefits**

<b>Level</b>	<b>Job Description</b>	<b>Entry Requirements</b>
Level I	Trainee or assistant manufacturing technician	HS diploma/GED plus 0-2 years experience
Level II	Manufacturing technician	HS diploma/GED plus 2-4 years experience of AA degree and 0-2 years experience
Level III	Senior manufacturing technician I or Technician training I	HS diploma/GED plus 4-6 years lab experience of AA degree and 2-4 years experience
Level IV	Senior manufacturing technician II or Technician trainer II	HS diploma/GED plus 6 years lab experience of AA degree and 4 to 6 years experience (bachelor’s degree preferred)

**Recruitment and Assessment**

*New hires*

With direction from the recruitment and screening subcommittees of the BBB, the career centers have taken the lead on recruitment and assessment of potential new hires for the Level I biomanufacturing position. Industry partners provided Career Source with details regarding the biotechnology industry and the biomanufacturing technician position. Career Source then developed informational materials and held recruitment sessions with potential candidates. Career Source advertised the recruitment sessions by sending flyers to individuals who recently visited the center and to local CBOs.

The recruitment and screening committees determined that potential new hires had to test at an 8<sup>th</sup> grade math level and 10<sup>th</sup> grade English level to be considered for the Level I technician position. Potential candidates were required to take a math and English placement test (TABE) as well as a customized supplemental screening test developed by the recruitment subcommittee of BBB. This screening test was designed to measure

problem solving ability, attention to detail, ability to follow directions and logic. The resumes of individuals who passed the TABE and supplemental test were forwarded to participating employers. Companies identified individuals they were interested in and conducted ‘screening’ interviews over the phone. Final candidates were selected for on-site interviews with human resource representatives and manufacturing supervisors. Offers of employment were made via telephone and mail.

### ***Incumbent, entry-level manufacturing technicians***

Each company is responsible for determining which of their incumbent, entry-level biomanufacturing technicians can benefit from participation in BBB training.

## **Description of Training**

### ***Biomanufacturing Technical Skills***

To date, training offered through BBB has taken the form of a full-time, 4-week training module. All training is on company time (new hires receive a reduced training wage for the 4-week period). The training runs 8 hours a day, 5 days a week. Trainees spend 4 days at the participating community college and 1 day a week on-site at their company.

Curriculum for the 4-week module was developed by the Curriculum Subcommittee of the BBB. With detailed information and feedback from industry partners, college liaisons developed lectures, case studies, daily lesson plans, hands-on exercises, teaching materials and videos for the module. Homework is assigned daily as part of the training and 3 quizzes are administered. The goal of the curriculum is to simulate the manufacturing work environment to the greatest extent possible. In addition to the core curriculum, a ‘Success Factors’ curriculum was developed and incorporated into the 4-week module to introduce trainees to biotechnology industry norms including professional accountability, collaboration and quality, credibility and integrity. The curriculum is being developed and improved on an ongoing basis in response to industry feedback and needs.

### ***ESL***

The original BBB proposal called for a Basic Biotech Skills program to be delivered at the participating community colleges. The goal of this program was to ‘increase the pool of qualified candidates’ for the biomanufacturing technician position by providing a basic skills course to individuals who did not pass the assessment and screening tests for new hires. With the downturn in the economy, however, more eligible candidates for the trainee position surfaced than anticipated (i.e. 83 candidates passed the screening test for a total of 9 openings at participating companies). As a result, the Basic Skills aspect of BBB was modified. One goal is to work with CBOs to create the necessary structure for delivery of this training to be in place when the economy revives. In addition, BBB is developing a “Biotech- ESL” program to be delivered on-site at participating companies with identified ESL needs. BBB is currently soliciting proposals from education providers to conduct workplace needs assessments.

**Other Training.** Supervisor training and ongoing, on-site training for entry-level manufacturing technicians has not been formalized. Training offerings are developing in response to industry need in the context of a changed economic environment.

**Number of participants**

BBB’s original target range for new hire and incumbent training was 72 or more. The ability of the program to meet these targets is being challenged by the economic downturn. Participating employers have reduced the number of new hires they anticipate over the course of the grant and one company has placed a freeze on hiring new manufacturing technicians.

The training chart below provides an overview of the BBB’s training as of 12-02 and the projected number of trainees for certain training components.

<b>BIO-MANUFACTURING</b>				
<i>Training Type</i>	<i>Courses (Hours)</i>	<i>Participants to Date (12-02)</i>	<i>Completions to Date (12-02)</i>	<i>Projected Participation Date (12-02)</i>
ESOL	ESOL (TBD)	0	0	TBD
SUPERVISORY	Workshop for Industry Supervisors & College Instructors (TBD)	0	0	TBD
INDUSTRY SPECIFIC	Bio-manufacturing Technical Skills (160-hours)	11	10	TBD
	Introductory Training On-Site (TBD)	0	0	30
	On-Site: Follow-up Training (160-hours)	0	0	TBD
	On-Site: Ongoing Training (160-hours)	0	0	TBD
OTHER	Faculty Internships & Faculty Externships (TBD)	0	0	2

**Performance Outcomes**

The BBB has established the following outcome goals for the initiative:

Company Outcomes

- reduction in severe shortage of frontline workers with reductions of 10% or more in participating companies;
- higher employee retention rates, with improvement of 10% or more as a ratio of those serviced.

Employee Outcomes

- Average of 70% of participating employees satisfy requirements of the education and training component in which they enrolled
- 10% of participating incumbent workers demonstrate position or pay advances/increases

## **Boston Financial Services Training Initiative Profile**

Industry:	Financial Services
Region:	Metro Boston and Metro North
Lead Local Workforce Investment Board:	Boston Private Industry Council
Additional LWIB partners:	Metro North
Amount Awarded:	\$490,745

### **Industry Challenges and how BEST addresses**

The Boston Financial Services Training Initiative targets incumbent workers in the financial services industry for training and career pathway development. Two significant workforce challenges affect this industry. First, from 1995 to 2002, Boston and the Metro North areas experienced significant growth in the Banking/Financial Services sector. However, because Boston's overall regional labor force continues to shrink, job growth in this industry must be met with internal promotions.

Second, the current entry-level workforce is under-skilled for their current jobs and requires training in foundational and industry-specific skills to perform in their current jobs; additional training is necessary for them to advance in their careers. This training is especially important due to the constant economic fluctuations in the financial services industry, especially recent downsizing and institutional mergers. In addition, automation of several backroom operations threatens many employees' job positions. These employees will need to learn new skills in order to retain employment in the industry. Employees who lack basic and industry-specific skills are more at risk during these times. The Financial Services Training Initiative is designed to assist these employees in retaining their current jobs and advancing in their careers.

### **History**

This initiative is built from three previous experiences with partnerships and career ladders in the financial services industry. First, the Boston PIC has developed over the last 10 years well-established relationships with several of the BEST employer partners through its school to career and Classroom at the Workplace initiatives. Employers' positive experiences with the PIC have laid a foundation of experience and trust that has smoothed the way for the training and career pathway work under this initiative.

Second, the PIC has a long history with career advancement partnerships in the health care sector. It was one of the pioneering organizations in the Boston area to develop and implement career ladder initiatives. In 1998, it received funding from the U.S. Department of Labor to develop a curriculum and fund ten model training projects in local nursing homes to promote career ladder advancement for Certified Nursing Assistants.

Third, two of the partners in this initiative were grantees of one of the FleetBoston Foundation's projects on career ladder development: Citizen's Bank and Crittenton

Hastings House. This team implemented a three-year career pathway project and developed a general career ladder map of the retail business line.

Building from this foundation, the Boston PIC led the development of the BEST RIT. Starting in October 2001, with the three largest employers - FleetBoston Financial, Citizens Bank, and Mellon Financial - the Boston PIC expanded the partnership to include another local workforce investment board - Metro North - and other community-based organizations. Additionally, the Metro North Regional Employment Board (REB) issued a similar invitation to employers in the financial industry with whom it had working relationships.

Interestingly, community based organizations were invited to participate as part of the team if they brought an employer partner to the team. This method helped to ensure that the involvement of multiple community-based organizations would be strategic and would leverage other established employer partnerships. It is through this method that Crittenton Hastings House - building off its work with Citizens around career ladder development - recruited Citizen's Bank to join. Employer partners were asked to identify community-based organizations and/or colleges that should be invited to join the team. Ultimately, the employer partners decided to identify education and training partners through a competitive process.

### **Organizational Structure of the Partnership**

The financial services Regional Industry Team (RIT) consists of two local workforce investment boards: the Boston Private Industry Council (PIC) and the Metro North REB. Originally, this RIT included six industry partners; however, one of the smaller institutions participating in this initiative merged with one of the larger banks, leaving five employer partners. Additionally, several community-based organizations, training providers, and Boston's One-Stop Career Centers are participating in the initiative. Other partners include Crittenton Hastings House; The Center for Labor Market Studies at Northeastern University; Tri-City Technology Education Collaborative (TRITEC); and several One-Stop Career Centers (The Workplace, Boston Career Link, JobNet, Career Source, and Career Place).

Original employer partners included Cambridgeport Bank, Citizens Bank, Eagle Bank, FleetBoston Financial, Medford Bank, and Mellon Financial. In the summer of 2002, Citizens Bank acquired Medford Bank, leaving five employer partners. Main roles for employer partners include:

- Participate in identifying/refining internal and industry-relevant career pathways (Mellon Financial has agreed to be the pilot employer partner site for this component of the initiative);
- Provide work release time for participating employees (all employer partners are providing a minimum of 50% paid work release time)
- Participate in vendor selection and curriculum design; and
- Identify members of the targeted workforce to participate in design and implementation activities.

Other original partners and their roles include:

<b>Partner</b>	<b>Role</b>
Crittenton Hastings House	<ul style="list-style-type: none"> <li>• Provide career coaching curriculum and services for the project.</li> <li>• Contribute historical experience with career ladders in the financial industry</li> </ul>
The Center for Labor Market Studies at Northeastern University	<ul style="list-style-type: none"> <li>• Assist the RIT to design and implement process and impact evaluation methodologies and assist with analysis of evaluation data (focus of evaluation = ROI).</li> </ul>
Tri-City Technology Education Collaborative (TRITEC)	<ul style="list-style-type: none"> <li>• Link the BEST project and training with the integration of financial services employers into TeleCom City in the cities of Everett, Malden, and Medford</li> </ul>
One-Stop Career Centers: The Workplace, Boston Career Link, JobNet, Career Source, and Career Place	<ul style="list-style-type: none"> <li>• Assist in developing strategies for using career maps with Career Center customers</li> </ul>

Since the inception of the initiative, the Boston PIC has contracted with additional training provider partners, as outlined in the table below.

<b>Training Partner</b>	<b>Training</b>
Jewish Vocational Service	<ul style="list-style-type: none"> <li>• English for Speakers of Other Languages</li> <li>• Verbal Communication</li> </ul>
Organization Renewal Associates (Jeff Davis)	<ul style="list-style-type: none"> <li>• Customer Service</li> <li>• Conflict Management</li> </ul>
Crittenton Hastings House	<ul style="list-style-type: none"> <li>• Career Coaching for Supervisors</li> <li>• Career Planning for Employees</li> </ul>
McGill Enterprises (Ann McGill)	<ul style="list-style-type: none"> <li>• Business Writing</li> </ul>
Operation ABLE	<ul style="list-style-type: none"> <li>• Math</li> <li>• Computers</li> </ul>

As the financial services industry is not unionized, there is no union partner in this project.

### **Employer Partners**

FleetBoston Financial and Citizens Bank are the two largest employers in the Boston/Metro North region in the financial services sector, which encompasses commercial banks, small brokerage firms, savings institutions, and credit unions. The two largest employers in the Metro North area are Mellon Financial's operations facility in Everett and FleetBoston's operations facility in Malden.

Most of the banks in the BEST Initiative have had experience with other foundation- or government-funded training projects. Citizens and Fleet have received Massachusetts Workforce Training Fund grants. Citizens also participated in the FleetBoston Foundation's career ladder grant. Citizens, Fleet, and Mellon have all participated in the Boston PIC's summer jobs program; Fleet and Mellon are participants in the PIC's Classroom at the Workplace program. Cambridgeport Bank is very active in the city of Cambridge, as well. However, only one bank - Citizens - has been involved in a career ladder initiative.

The three largest industry partners - Citizen's Bank, FleetBoston Financial, and Mellon Financial - have identified more than 800 entry-level workers who require additional foundational skill training to be effective in their current positions and to take advantage of additional training that would be needed for further career development. The PIC has projected that it will train at least 400 entry-level employees in total. At each institution, individual employees will participate in more than one training activity. FleetBoston has requested approximately 500 training slots, Citizens has requested over 300, Mellon 100, Cambridgeport over 40, and Eagle 40.

Employer partners identified several reasons for participating in this project. In general, many employees lack basic literacy skills in written and verbal English and math as well as basic skills in computers, customer service and conflict management. Also, in both the retail and backroom operations business lines, many workers are non-native English speakers who have difficulty communicating with supervisors, co-workers, and customers. These skill deficits lead to challenges with retaining and advancing incumbent workers because they often lack the skills to retain their current job in the event of mergers or restructuring. In addition, the lack of these skills limits their ability to advance to higher level positions.

The Boston PIC's main role in this initiative is to convene the RIT and to facilitate the design and decision-making process. The PIC also serves as the project, fiscal, and contract manager for the initiative. The project manager works nearly full-time on this project (although grant-funding only supports a 50% FTE for the position) coordinating RIT meetings, working with training vendors, managing data and participant information, working with RIT partners on scheduling and curriculum development, and other program-related issues.

Additionally, the industry partners have been very active in project development and implementation. All employer partners were involved in screening and selecting the training vendors and designing the curricula. RIT partners met monthly during the initial design and start up phases of the grant. The RIT met on a bi-weekly basis from the inception of the grant in May of 2002, until the fall of 2002, when it began to meet on a bi-monthly basis. Additionally, the project manager meets individually or in small groups with partners as needed for specific tasks. This RIT does not operate under a formal committee structure.

### **Project Description**

The overall goal of this RIT is to increase worker retention, decrease recruitment costs at the employer partner institutions, and promote career advancement.

The financial services RIT has identified two basic career paths for employees participating in this initiative: retail and backroom operations. The retail path is a fairly linear career track, with employees moving from entry-level tellers (hourly wage of \$7.22 to \$10.81) to senior tellers (\$8.75 to \$13.12) to teller managers (\$10.58 to \$15.86) or bankers (or customer service representatives), and then to assistant branch (\$12.79 to

\$19.18) or branch manager (annual salary of \$32,500 to \$83,700). This basic career ladder was mapped at Citizens Bank with Crittenton Hastings House in the FleetBoston career ladder initiative. Back room operations is more complex than the retail path and career advancement will not necessarily follow a linear progression. In the branch operations support business line, there are several different jobs that could be categorized as tier 1 positions. There may be corresponding second tier positions for some of these positions; elsewhere employees may have to make a lateral move to a tier two position in another department within the same business line in order to ultimately move up to a third tier position.<sup>7</sup>

The PIC has carefully targeted one business line at one institution— Global Securities Services at Mellon— to pilot the career pathway mapping component of the BEST Initiative. The project manager plans to work with staff at this bank to interview human resources representatives, supervisors, and employees about basic job data, day-to-day activities, and their experiences with career progression. The PIC hopes to use this process to identify potential moves within a career pathway, opportunities to transfer skills, areas with anticipated job growth, as well as specific tasks performed under each type of job. The PIC will coordinate their career pathway mapping activities with Mellon's Career Development Working Group, which is doing similar work. The PIC is using a career ladder profile model designed by the NOVA PIC in Santa Clara County, California as a template for presenting career ladder information in this project.

### **Target population**

The target population for this initiative is entry-level incumbent workers in retail and backroom operations within financial services institutions. Many of these workers are female and are generally between the ages of 20 and 35. Many are non-native English speakers, who are likely to be Asian or Eastern European.

### **Recruitment and assessment**

The PIC's goal is to serve a minimum of 400 workers through training and/or career advising with this grant. The selection procedure to choose training participants varies by financial institution and by supervisor. For example, FleetBoston is targeting workers in the Branch Operations Support business line. Eagle and Cambridgeport banks are targeting their tellers (retail) for training. Citizens is aiming to train one supervisor and two employees from each branch bank. All training is voluntary, and, generally, supervisors nominate employees for training. Except for ESOL courses, all employees who applied for BEST training were accepted. For ESOL training, over 100 students have been assessed for placement in the appropriate level of training using standard assessment tests approved by the Massachusetts Department of Education. Most of those assessed were placed in courses. The project manager plans to work with those not placed to place them in the second cycle of training, and priority will be on those with lower levels of English skills.

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<sup>7</sup> In general, the hourly wage range for tier one jobs is \$7.50 to \$10.00; for tier two, \$8.50 to \$13.00; for tier three, \$10.50 to \$20.00.

## Training

The Financial Services Training Initiative includes a set of 10 training courses - two for supervisors and eight for employees. The chart below provides an overview of these programs, the number of enrollees and completions as of December 31, 2002 and the projected number of completions over the course of the training project.

<b>BOSTON FINANCIAL SERVICES</b>				
<i>Training Type</i>	<i>Courses (Hours)</i>	<i>Participants to Date (12-02)</i>	<i>Completions to Date (12-02)</i>	<i>Total Projected Completions</i>
ESOL	ESOL (84-hours)	84	0	120
BASIC SKILLS	Math Skills (25-hours)	0	0	30
INDUSTRY SPECIFIC	Business Writing (8-hours)	55	55	130
	Customer Service (8-hours)	74	74	44
COMPUTER	Computers Literacy (20-hours)	0	0	20
OTHER	Verbal Communication (28-hours)	0	0	35
	Conflict Management (8-hours)	12	12	126
	Career Planning (14-hours)	35	34	300
SUPERVISORY	Coaching Skills for Supervisors (14-hours)	76	68	90
	Other Supervisory Skills (4-hours)	0	0	84

The primary focus of the 14-hour Coaching Skills for Supervisors course is to help supervisors understand career coaching, career planning, and how to use career tools to assist employees. This program began at Cambridgeport Bank in August 2002. Every institution will offer at least one cycle of this course, and all cycles should be completed in spring 2003. Also in the spring, the PIC will work with training providers to develop modules for other supervisory skills. Potential topics for this training include creating a collaborative workplace, handling emotions under pressure, expressing yourself, moving from conflict to collaboration, respect, an managing change.

Through an audit of the employer partners, the RIT determined that training for employees should focus on the topics listed in the table above. A cycle of Customer Service training started at FleetBoston in September 2002. By October, three banks had either started or continued at least one type of training.

Most training has been tailored for each bank, and each institution offers training for its own employees. The program is designed so that the large banks (Citizens, FleetBoston Financial, and Mellon) establish their training schedules, and then the small banks

(Cambridgeport and Eagle) send their employees to training as slots are available. As most banks have hosted their own training so far, this cross-training has not happened often. One exception is Medford and Citizen banks. When Medford was acquired by Citizens, five employees from Medford traveled to Citizens' Medford facility for training. Because the RIT is focused on vocationally relevant ESOL, the ESOL curriculum incorporates employer-specific materials. The Boston PIC worked with JVS, the training provider, to contextualize these classes to the needs of each employer.

Most training is classroom-based. All employers originally agreed to provide at least 50 percent of the training during paid, scheduled work hours; however, four of the five employer partners provide 100 percent paid release time for their employees to attend BEST classes.

### **Career Supports**

One important component of the Financial Services Training Initiative is one-on-one career coaching provided by Crittenton Hastings House. Employees who have completed the 14-hour Career Planning workshop can receive up to five hours of one-on-one career planning with a career advisor from CHH. The career advisor will be available to meet with employees in a convenient location to discuss their career plans developed in the workshop. Crittenton will provide up to 100 employees with this advising component.

### **Performance Outcomes**

The financial services RIT has established the following process and impact goals for the BEST Initiative:

#### *Process outcome goals*

- 400 entry-level and front-line supervisory employees will participate in foundational skills training over a two-year period
- 300 entry-level employees will participate in 14 hours of career planning activities; 100 in up to 5 hours of individual career coaching and planning services. Supervisor training goals: 90 supervisors will participate in a 14-hour career coaching training; 84 in "other supervisory skills" training.
- 70% of participants will complete the foundational skills program/s in which they enroll
- 85% of participants will express satisfaction with training programs
- RIT will organize at least 2 meetings with higher education providers within the 2 year period

#### *Impact outcome goals*

- 75% of participants who complete program activities will retain employment
- 70% of participants who complete program activities will increase their wages as a result of improved performance or move into a better paying position

In addition to developing the RIT partnership and these outcomes goals, the project aims to meet three "system" goals that are focused on longer-term, systemic impact on career ladder development in this industry. These include:

- Develop and publish user-friendly career pathway profiles;
- Increase knowledge base of public and educational stakeholders of financial services employers' workforce needs
- Document and share best practices with MA WIBs.

## **Southeast Massachusetts Manufacturing Consortium (SEMMC) Profile**

Industry:	Manufacturing
Region:	Southeastern Massachusetts
Local Workforce Investment Board:	Bristol
Additional LWIB partners:	Brockton and New Bedford
Amount Awarded:	\$547,622

### **Industry Challenges and how BEST addresses**

Manufacturing has been a significant industry in southeastern Massachusetts for years, accounting for a significantly higher percentage of local employment than in the state as a whole. However, worker skill shortages, high vacancy rates, and low rates of worker retention are threatening the competitiveness of the industry in this region. The low basic education and English skills of the area's workforce make it difficult for employers to fill vacancies for entry- and mid-level jobs and to retain skilled workers.<sup>8</sup>

Beyond the normal operational challenges faced by an industry relying on under-educated workers, this situation threatens the very existence of this sector in southeastern Massachusetts. The University of Massachusetts at Dartmouth indicates that, "the area's business firms are finally positioned to make productivity gains through the implementation of new technology that will help negate the wage and cost advantages of national and global competitors."<sup>9</sup> However, the area's workforce is not skilled enough to run these new technologies that are key to the viability of the manufacturing industry.

These economic and workforce realities prompted government and business leaders in the region to form a consortium to take a close look at worker skill shortages, company training needs, and potential solutions. The proposal submitted by the Southeast Massachusetts Manufacturing Consortium (SEMMC) outlines these needs in detail and describes specific training, education, and career services designed to meet the needs.

### **History**

The SEMMC was created to better address the training needs of incumbent workers in the manufacturing sector in southeastern Massachusetts, specifically the Fall River - New Bedford - Brockton area. The impetus for the consortium was a discussion between the Executive Director of the Bristol Workforce Investment Board and the Manager of Employee Development and Training at Quaker Fabric in Fall River (one of the larger employers in the consortium), about the need for a more highly skilled manufacturing workforce. From this discussion, the manager at Quaker Fabric contacted numerous

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<sup>8</sup> The percentage of residents who lack a high school diploma is over 50 percent higher in Fall River and New Bedford than for the state of Massachusetts. Similarly, there are lower percentages of residents with bachelor's degrees or higher in the region than in the state. Additionally, the percentage of non-native English speakers is higher than for the state as a whole.

<sup>9</sup> See the BEST Proposal submitted by the Bristol County Local Workforce Investment Board to the Commonwealth Corporation on January 14, 2002.

other manufacturing companies in the region to form what would eventually become SEMMC. When the BEST Initiative opportunity was offered, this consortium was able to apply for the chance to receive state government funding to support its activities and goals.

### **Organizational Structure of the Partnership**

SEMMC is one of the largest Regional Industry Teams (RITs) in the BEST Initiative. Numerous partners span a broad spectrum of government agencies, industry employers, community organizations and training providers.

The three local Workforce Investment Boards include:

- Bristol (the lead LWIB)
- Brockton
- New Bedford

The ten employer partners and their select characteristics include:

<b>Company</b>	<b>Location</b>	<b>Main product</b>	<b>Current MA employees<sup>10</sup></b>	<b>Gross annual sales</b>	<b>Union</b>
Acushnet Co.	New Bedford	Titlist: makes and attaches logos and FootJoy: footwear	2500	\$950.0 million	
CHF Industries	Fall River	textiles and distribution	320	\$60.0 million	UNITE
Duro Industries	Fall River	textiles, with a focus on finishing work	600	\$175.0 million	UNITE
Engineered Yarn	Fall River	yarns and ropes	40	\$6.0 million	
Gold Metal Bakery	Fall River	bread and bread products	452	Not available	
Julius Koch	New Bedford	CORDS for window blinds	154	\$16.0 million	
Lightolier	Fall River	lighting fixtures	600	\$316.8 million	IBEW
New England Ropes	Fall River	ropes	134	\$20.0 million	
Quaker Fabric	Fall River	textiles, yarn and fabric	2600	\$300.0 million	
Riverside Manufacturing	New Bedford	men's suits	464	\$20.0 million	UNITE

Other partners include:

- Higher education institutions: Bristol Community College; Massasoit Community College; University of Massachusetts at Dartmouth (Workers Education Program)
- Other training providers or organizations: SABES; Mass MEP,
- Career Centers: Career Centers of Bristol County (BCTC, Lead Partner) and Greater New Bedford
- Chambers of Commerce: Fall River; New Bedford
- Community-based organizations: SER/Jobs for Progress, MassJobs
- Fiscal Agent: Bristol County Training Consortium

<sup>10</sup> As of January 14, 2002, when the BEST proposal was submitted to the Commonwealth Corporation.

As the table above indicates, two unions and one union council are involved in this partnership:

- UNITE (CHF, DURO, Riverside)
- IBEW (Lightolier)
- United Labor Council of Greater Fall River

Some of the employer partners have been involved in other government-funded workforce development initiatives prior to BEST. For example, Quaker Fabric has received a Massachusetts Workforce Training Fund Grant, and Acushnet is in the process of applying for one. Additionally, New England Ropes and Julius Koch have been involved in partnerships for basic skills training at Bristol Community College funded through the Workforce Development Fund. However, prior to this initiative the employer partners have only been involved in career pathway work on a small scale.

Additionally, working with the local workforce investment boards is a new experience for most of the employer partners. The Bristol LWIB and Quaker Fabric are building from a prior relationship; however, the other employer partners have limited experience working with the local workforce investment boards.

As with most of the RITs in this initiative, the SEMMC is involved in the BEST project in order to address workforce challenges in basic and industry-specific skills, as well as vacancies and low retention. The Consortium identified literally thousands of workers with deficits in basic education (ABE, GED, and ESOL), general skills (critical thinking, teamwork, and communication), supervisory, computer applications, and industry-specific skills. In general, vacancies at each employer firm range from between 3 to 10 at the smaller firms to between 150 to 250 at the larger ones, as of January 2002. The RIT evaluation committee is collecting specific and updated information on turnover, retention, and vacancy rates for each employer partner in order to understand the depths of these challenges consistently across participating firms and to provide a baseline to chart any improvements in these areas under the BEST Initiative.

Each employer partner has made a significant commitment to this project. In addition to consistent high attendance and involvement in the RIT meetings and committee meetings, each has agreed to make a financial commitment to future training above and beyond the 2:1 ratio of in-kind and cash match agreed to in their contract. For each employee that receives training under the BEST project, each employer contributes a 10% cash match into a special training fund. This fund will be used to pay for additional training after the BEST grant funding is exhausted. This additional co-investment will help to sustain the BEST project after grant funding ends.

In May 2002, the consortium hired a full-time grant coordinator. Additional staff includes a Co-op student to assist with administrative tasks, record keeping, and data entry, on a part-time basis. This RIT operates as a highly structured consortium. This may be due to the size of the team, with ten employer partners and several other team partners. The Manager of Employment Development and Training at Quaker Fabric is the consortium chair. She also chairs the consortium's Executive Steering committee

with the Executive Director of the Bristol County Workforce Investment Board serving as advisor to the committee. This committee's tasks include providing vision and strategic direction, leadership, and approving contract awards. In addition to this committee, the consortium has established several working subcommittees, including Finance, Hiring, five Curriculum Development committees (for courses ranging from supervisory skills to personal development), Professional Development, Career Development, Marketing, and Evaluation.

Committee members volunteered to serve on the committees, and chairs were chosen from these members. Most of the members represent industry partners, with a few members from community colleges and other partner organizations, as appropriate. The Executive Steering committee includes one WIB/Labor representative. The consortium chair runs the monthly meetings on a strict schedule, presumably due to the large number of partners involved in the consortia and attending the meetings. At these meetings the project manager/coordinator updates the partners on such things as training statistics, training satisfaction reports, etc. Standard meeting protocols are utilized.

### **Project Description**

As described in the SEMMC BEST proposal and contract with the Commonwealth Corporation, the overall industry goals set for this initiative include:

- Define a set of manufacturing career pathways and the specific related skill requirements;
- Provide the skills and support that workers need to advance in those career pathways;
- Fill vacancies at employer consortium partners;
- Enable non-native English speaking immigrants to apply their existing manufacturing-related skills and experiences to an English-speaking workplace;
- Retain workers in manufacturing sector;
- Ensure the viability of manufacturing as a key component in the region;
- Support workers to be successful in an increasingly computerized manufacturing workplace; and
- Promote cross-company and cross-industry career pathways.

The main system goal for the region is to institutionalize and sustain active and productive collaboration among local manufacturers.

This RIT has identified three basic career pathways within and across its manufacturing industry partners:

- Supervisory pathways: entry level production/machine operator → team coordinators → team leaders → supervisors
- Technical pathways: entry-level production/operator → more technical/higher level production

→ Customer service pathways: clerical/receptionist/production → higher level customer service roles

The consortium plans to develop as clear a description as possible under current funding for the specific career steps within each of these pathways across companies, and has decided to use a non-traditional approach. The career ladders will be based on skills/competencies, as determined by industry standards. Although this particular set of partners has not engaged in career ladder mapping previously, project staff will use manufacturing career ladder models developed in other parts of the nation and national skills standards for manufacturing to begin to develop a general manufacturing career ladder for the region. The RIT will use these models and skill standards to establish minimum competency levels at each career ladder "rung." Additionally, the Career Development committee is working with the local Career Centers to develop a manufacturing job bank, which will provide workers with access to jobs and job information in the local manufacturing industry.

### **Target population**

The target population for this initiative is incumbent workers in the manufacturing sector (specifically the above-listed employers) in need of basic skills (including ABE, GED, and ESOL); critical thinking, teamwork, and communication skills; computer application skills; technical and machine process skills; and quality assurance, lean manufacturing, and continuous improvement training. The RIT identified thousands of incumbent workers in need of skills training in these areas. For the employers who provided demographic data, between 50 and 80 percent of their workers are non-native English speakers (mostly Portuguese and Spanish). Additionally, this RIT identified several hundred supervisors in need of supervisory training.

Current workers have been recruited to participate in BEST training through a variety of methods, depending on the type of training. These range from posting posters in the workplace to inserting flyers into paycheck envelopes to the project manager meeting with employee groups. Most of the training is voluntary, but a few courses are required, i.e., some employers may require supervisors to take supervisory training, administrative personnel to learn certain software, etc. All training has been built into the annual evaluation process for purposes of career counseling.

Although the main population targeted for service under this initiative is current workers, the RIT anticipated recruiting some newly hired workers to be included in the training. With the latest round of layoffs in the manufacturing sector in this region, recently dislocated workers will be the first to be offered this training. Additionally, this RIT is developing a school-to-work component in its "Careers in Manufacturing" curriculum. The goal is for high school students to learn about manufacturing as a viable career option. Through brochure distribution and appearances at local high school career fairs, RIT staff hopes to recruit future manufacturing employees.

SEMMC has projected to serve a total of 544 training participants in this project. This projected total is divided into the following sub-categories:

- 144 in supervisory training
- 100 in basic skills (55 in ABE or GED and 45 in ESOL)
- 588 in personal development for manufacturing careers
- 230 in computer training (courses include introductory computer courses, Word, Excel, PowerPoint, Access, Outlook, and the Internet).
- 600 in computerized machine processes

The table below outlines the types of training offered by this RIT and the number of enrollment, completions, and projected enrollments as of December 31, 2002.

<b>SOUTH EAST MANUFACTURING</b>				
<i>Training Type</i>	<i>Courses (Hours)</i>	<i>Participants to Date (12-02)</i>	<i>Completions to Date (12-02)</i>	<i>Total Projected Completions</i>
ESOL	ESOL: Level I (36-hours)	132	126	100
	ESOL; Level II (36-hours)			
BASIC SKILLS	ABE/GED: Level I (36-hours)			
	ABE/GED: Level II (36-hours)			
	ABE/GED: Level III (36-hours)			
SUPERVISORY	Supervisor Training: Level I (40-hours)			
	Supervisor Training: Level II (40-hours)			
INDUSTRY SPECIFIC	Personal Development for Manufacturing Careers (40-hours)	65	44	558
	Computerized Machine Process (TBD)	0	0	600
COMPUTER	Computer Training (4 or 8-hours) <sup>11</sup>	621	612	230

The first training course (first round of computer training) started on July 30, 2002. Supervisory training began in August, Adult Basic Education training began in September, and Personal Development for Manufacturing Careers began in October. Computerized Machine Processes training will begin in 2003. All training courses are projected to end by the end of December 2003. This RIT plans to offer at least 35 different training courses over this 17-month timeframe, and most of the courses will be offered multiple times through several "cycles." For example, the RIT will run four cycles of the 13-week supervisory training between August 2002 and December 2003.

Additionally, the RIT has made an outstanding effort to offer almost all training on all shifts (1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup>). Most training has occurred during the employee's regular shift. If training is outside this schedule, employers are required to pay overtime or to give

<sup>11</sup> Introductory computer training courses are four-hour sessions while sessions for more advanced computer training are eight hours

employees compensatory time. One company has committed to suspending operations for four hours of the evening shift twice a week for ten weeks in order to train all workers in the Personal Development training course. The training locations generally are at the Bristol Community College (BCC) campus or at one or more of the employer partner firms. Seven of the ten have hosted at least one training course at their locations, with Quaker and Riverside hosting much of the training. All ten companies have sponsored employees for training. In general, employees remain at their firms for training; however, some firms do send their employees to other companies to take part in training courses.

Due to the large number of training offerings, this RIT must devote considerable resources to enroll and track all of the courses, enrollees, and graduates. At the beginning of the fall cycle, the Bristol LWIB Director of Planning and the SEMC BEST Project Manager/coordinator designed an on-line registration program, which reduced the enrollment workload and developed a more consistent enrollment process.

The sole training provider for the first cycle (summer-fall 2002) of BEST training for the SEMMC is BCC. The SEMMC used a competitive process to select this training provider. Because the method used for the first cycle was primarily based on cost, BCC won every contract. For the second cycle of training in early 2003, the SEMMC will use a "sealed bid" process (under the Section 30 procurement policies for the city of Fall River). This two-stage process requires reviewers to first review the submitted applications for training merit. Once a group of finalists has been selected, the second stage involves reviewing each application for cost. The appropriate committees will select training providers for the second round of training by the end of January 2003.

This RIT has conducted employee focus groups in order to learn more about the effectiveness of the trainers, impact of the training, and how to market the training to other workers. Data from these focus groups will help to improve training and to relay to employers the importance and impact of training for their employees. Additionally, this RIT has surveyed managers and supervisors to understand how training is impacting companies and departments.

### **Career Supports**

Although the original SEMMC proposal indicated that the Career Centers would provide career advising and other supports as necessary, most of the career advising for this project is handled through the human resources representatives at each company. The economic downturn has resulted in layoffs at several of the manufacturing and other employers in the region. The Career Centers have been working closely with these dislocated workers, especially those from employer partners in the BEST Initiative. Providing career counseling through the human resources representatives at each company has worked well, and every company is enrolling supervisors and HR representatives in supervisory training courses to help them build their coaching skills. The project has provided workshops for human resources representatives and managers to assist them with employee assessments, training participant recruiting, conducting needs analysis, and other aspects of the BEST training.

## **Performance Outcomes**

This RIT has established several performance outcomes for its training component.

These include:

- 70% attendance level for those participants enrolled in training
- average of 70% of participating employees satisfy requirements of the training component in which they are enrolled
- 70% of individual learning plan training benchmarks will be met
- 2% reduction in vacancy and turnover rates
- 70% successful completion rate in Computerized Machine process training and computer training
- 10% of training participants will demonstrate position or pay advances/increases

## **Boston Health Care and Research Training Institute**

Industry:	Health Care
Region:	Metro Boston
Lead Institution:	Jamaica Plain Neighborhood Development Corporation
Lead Local Workforce Investment Board:	Boston PIC
Amount Awarded:	\$534,252

### **Industry Challenges and how BEST addresses**

Despite the recent economic downturn, the health care and health research sectors of the economy are experiencing severe skill and labor shortages. Boston health care employers report particularly acute shortages in technologist and nursing positions. There are not enough nurses in the current workforce to cover the demand. Additionally, these shortages are expected to intensify over the next decade due to the aging population.

The Boston Health Care and Research Training Institute addresses health care skill and staffing shortages in the city of Boston through a program that provides education, training and career coaching to entry-level incumbent hospital workers. The goal of the initiative is to advance these workers to skilled, unfilled positions that pay family sustaining wages.

### **History**

The Boston Health Care and Research Training Institute partnership was launched in April 2002. It is a partnership between 8 Boston-based health care employers, one labor union, 2 community-based organizations, a private workforce staffing organization, 3 education and training providers, the Boston PIC, the Office of Jobs and Community Services, and two industry associations.

The Institute is the outgrowth of several existing projects at the partnering sites including two Career Ladder initiatives funded by Fleet Boston. These projects each received three years of funding to explore and develop innovative career pathway models for entry-level hospital workers in 2000. The two Fleet Boston initiatives that laid the foundation for BEST are:

- ‘Bridges to the Future’ -- a program developed by Jamaica Plain Development Corporation (JPNDC) and Fenway Community Development Corporation (FCDC) in partnership with Beth Israel Deaconess Medical Center, Children’s Hospital Boston, Harvard Medical School and School of Dental Medicine, and New England Baptist Hospital. Beginning in 2000, Bridges conducted extensive research into retention and advancement opportunities and related issues at each site. In addition, the initiative launched an initial set of training and non-training strategies in 2001.

- ‘Partners in Care’ -- Brigham and Women’s Hospital, WorkSource Staffing Partnership, and Bunker Hill Community College developed this career ladder program on one floor of the hospital which focuses on creating a ladder for Patient Care Assistants and nursing.

In addition to the Fleet funded initiatives, each employer participating in the Training Institute had also developed various smaller incumbent worker training initiatives, some in conjunction with the Boston Private Industry Council.

**Organizational Structure of Partnership**

As the BEST program was launched and the opportunity for state funding presented itself, existing partnerships of employers, CBO’s and training providers recognized the benefit of launching a sector-wide Training Institute that would provide a wider range of training and education offerings to more employees. JPNDC spearheaded a series of conversations between existing partners which led to the design of the Institute and to the recruitment of several additional industry partners. The Institute design built from and honored existing relationship between partners. Thus, through the Institute, JPNDC and Fenway CDC continue to work closely with the ‘Bridges’ sites while WorkSource Staffing Partnership continues to work with Brigham and Women’s as well as with additional Partners Health Care sites (e.g. Spaulding and Faulkner).

CBO/Employment Agency	Employer Partners
JPNDC	Beth Israel Deaconess Medical Center New England Baptist Dana-Farber Cancer Institute
Fenway CDC	Children’s Hospital Boston Harvard Medical School and School of Dental Medicine
WorkSource Staffing Partnership	Brigham and Women’s Hospital Spaulding Rehabilitation Hospital Faulkner Hospital

The Training Institute is governed by an oversight committee that meets quarterly to discuss the overall design and progress of the Institute. This ‘Regional Industry Team’ is composed of designated representatives from each participating institution. In addition to the Regional Industry Team, several smaller subcommittees meet on a regular basis to discuss and improve program design and implementation. These include:

- Coaching and Management Staff committee -- this group meets bi-weekly and consists of the coaching and management staff from the 2 participating CBO’s and the private employment agency;
- Curriculum/operations committee – this group meets every six weeks and is comprised of coaching staff, CBO management and human resource staff from participating employers;

- Supervisor committee – this group provides quarterly feedback to the Institute from the supervisor perspective and serves on the Regional Industry Team
- Employee committee – this group provides quarterly feedback to the Institute from the employee perspective and serves on the Regional Industry Team

The Jamaica Plain Neighborhood Development Corporation is the lead agency in the Training Institute partnership. JPNDC employs a part-time Project Director and a full-time Project Manager to oversee the Training Institute. JPNDC is responsible for coordinating all meetings, logistics, and communication within the project and among project partners. JPNDC assumes primary responsibility for the development of curricula, hiring of contractors, and works with all members via a curriculum committee to determine and monitor applicable course offerings to staff across all member sites. In addition, JPNDC is responsible for billing, tracking of participants, entering data into MOSES and providing reports to funders.

Fenway CDC and WorkSource Staffing Partnership support JPNDC in managing the overall Institute. Like JPNDC, these two organizations employ management staff that oversee their respective employer partnerships and ‘career coaches’ who conduct intake, basic assessment, career planning and career coaching for all participants.

Given the multitude of partners involved in the Training Institute, the structure of the partnership and communication between partners is constantly being refined in order to increase efficiency and impact. For example, supervisor and employee representatives to the Institute were originally assigned to participate in the quarterly RIT meetings. After some consideration, the RIT determined that separate supervisor and employee subcommittees would elicit better information and feedback from these groups. Accordingly, supervisor and employee committees were established in December, 2002. To facilitate project progress JPNDC has developed various communication and roles and responsibilities charts.

### **Employer Partners**

Employer partners perform a number of different roles in the Training Institute. Within each participating organization, employees at various levels perform specific tasks in conjunction with the overall RIT and/or subcommittees.

No employer partners have been added or dropped since the original program design was established. However, there has been less participation than expected from Brigham and Women’s which has altered the Institute’s enrollment expectations over the course of the grant.

**Boston Health Care and Research Institute  
Employer Partners: Roles and Responsibilities**

<b>Role</b>	<b>Top Management</b>	<b>Human Resources</b>	<b>Supervisors</b>	<b>Employees</b>
Provide input on curriculum		•	•	•
Assist with roll-out and marketing of courses	•	•	•	•
Provide feedback/evaluate courses		•	•	•
Arrange department logistics to release employees for training			•	
Attend committee meetings		•	•	•
Provide release time for employees		•	•	
Discuss and work toward sustainability of Institute	•	•	•	

**Boston Health Care and Research Institute  
Other Partners: Roles and Responsibilities**

<b>Partner</b>	<b>Role</b>
Harvard Union of Clerical and Technical Workers	Assist with recruitment of workers, oversee curriculum and attend relevant RIT and committee meetings
JPNDC, Fenway CDC and WorkSource Staffing Partnership	Serve as liaison to supervisors at each employment site, provide career coaching, conduct outreach and recruitment for classes in conjunction with Human Resources
Roxbury Community College, Bunker Hill Community College, Jewish Vocational Service	Provide contract instruction for targeted courses
Office of Jobs and Community Services (a division of BRA)	Coordinates the Institute with pre-employment efforts, including those of DTA,
Boston PIC	Provide training assistance and support, serve on the RIT, provide database to assist with tracking of participants, coordinate incumbent worker training programs with RIT
Workplace Career Center	Serves on the RIT
Medical Academic and Scientific Community Organization, Inc.	Provides general support and technical assistance
The Massachusetts Healthcare Human Resources Association	Serve on RIT, support Institute through networking activities, support expanded collaboration among health care employers.

## **Program Description**

The Boston Health Care and Research Training Institute is an incumbent worker program designed to assist eight major healthcare and research employers in developing staff from within. In response to the shortage of nursing and technological staff across the country, the Institute's goal is to provide educational and developmental access to 435 employees over a two-year period.

There are two target populations for training: the first target population is Tier I entry-level hospital workers (food servers, janitors, lab aides etc.) with limited English language skills and/or education preventing them from retaining jobs and/or moving into next level jobs within the industry; the second population is Tier 2 entry-level hospital workers (patient care aides, administrative support, central sterile supply) with a GED who need developmental or college courses to move to next level jobs within the industry (Tier 3 jobs). Tier 3 jobs compose 30% of all hospital jobs and typically require a certificate or college credential. Tier 3 jobs include medical assistant, surgical technician, LPN, RN, higher level administrative positions and radiology technicians.

## **Career Pathway Development**

Because the Health Care Training Institute builds from existing career pathway efforts, it has already mapped and developed three career pathways from Tier 1 jobs to Tier 2 and 3 jobs within the health care sector. To date, the RIT has identified and developed 3 common pathways among the participating employers: Patient Care; Medical/Staff Administration; and Technical. In the Institute's career pathways model, Tier 1 employees in a variety of occupations can pursue careers through one of the three pathways. Each pathway offers a variety of positions at Tiers 2 and 3 representing different levels of responsibility and pay. The RIT has mapped both the lateral and vertical moves that employees can make based on skill and education requirements of the position.

## **Wage Structure**

Individuals employed in Tier 1 jobs earn from \$8.50-12 per hour. Tier 1 jobs are entry-level positions with few skill requirements. Tier 2 jobs pay between \$9-14 per hour. These jobs require some additional training and may require a certified nursing assistant certificate. Tier 3 jobs provide the most significant salary gains for employees. Tier 3 contains three salary levels: positions that require a GED and targeted skills training pay an average of \$12-18 per hour; positions requiring an associates degree or certificate pay an average of \$13-20 per hour; positions that require a bachelors degree pay between \$15-30 an hour.

## **Recruitment and Assessment**

JPNDC, Fenway CDC and WorkSource manage the recruitment and assessment process. Working with their respective employer partners, the 2 CBO's and Worksource engage managers and supervisors in the Institute by demonstrating the benefits of enrolling their employees in education and training courses. Each organization has also introduced career coaches to the managers and staff at each site via information tables and/or direct meetings. In addition, each advertises the Institute's offerings through distribution of

course brochures tailored to each employer site, through e-mails to supervisors and employees, and at scheduled staff meetings, when invited. This is shortly followed by active employee recruitment.

To partake in Institute course offerings, employees must meet the following criteria :

- Six months or more of employment with current employer
- Demonstrated interest in building a career in health care and research
- Good employee standing
- Permission of their supervisor.

All participation is voluntary with the stipulation that participants attend at least 80% of the course. The curriculum committee established the attendance standard. Pre-course assessments are provided for ESOL, to assure a reasonably common level among participants. GED assessments are done at the beginning of the class. College placement testing is provided at the end of targeted skills trainings and is required for pre-college and college courses.

### **Description of Training**

There are three training providers associated with the Institute: Jewish Vocational Service, Roxbury Community College and Bunker Hill Community College. An important goal of the Institute is to develop a continuum of offerings between JVS, RCC and BHCC that enables workers to move along an efficient and streamlined education path. JVS has assumed responsibility for the provision of ESOL, GED and the Targeted Administrative Skills Course. RCC and BHCC divide the delivery of all other Training Institute courses. The strategy is to provide pre-college services to incumbent workers that move them toward college course that will lead to certification and advancement to Tier 3 jobs within the health care sector.

Through the Institute the 3 training providers deliver the following courses on a bi-annual basis:

- ESOL
- GED (over 3 quarters)
- Targeted Skills Training (3 tracks)
  1. Administrative Skills
  2. Patient Care
  3. Introduction to Careers in Health Care and Research Related Technology
- Pre-college Developmental Courses in Math and English
- College Instruction
- Supervisory Skills

Institute Training began in June, 2002. Most of the Institute offerings were well subscribed. However, there was little interest in college course offerings. Both pre-college English and College English were cancelled due to low enrollment.

As of 12/31/02, the Institute has delivered two 16-week cycles of ESOL (two hours, twice a week); three 10-week, 80 hour targeted skills courses (one in each career path area); one 13-week pre college math course; and one twenty-hour Supervisory Skills Course (divided into five, four-hour segments). In addition, two ongoing 38-week GED courses are currently underway. The GED courses meet two hours, twice a week.

The chart below provides a summary of enrollments to date, anticipated training cycles, and projected completion dates. The Training Institute plans to provide training to 435 individuals with BEST funds.

<b>BOSTON HEALTHCARE</b>				
<i>Training Type</i>	<i>Courses (Hours)</i>	<i>Participants to Date (12-02)</i>	<i>Completions to Date (12-02)</i>	<i>Projected Participation Date (12-02)</i>
ESOL	ESOL (64-hours)	27	20	75
BASIC SKILLS	GED (144-hours)	27	0	30
SUPERVISORY	Supervisor Training (20-hours)	7	7	90
INDUSTRY SPECIFIC	Targeted Skills Training (300 to 500-hours)	38	38	70
	Pre-College (45-hours)	7	0	90
	College (45-hours)	0	0	75

Institute Training is delivered at various locations in the Longwood Medical Academic area where 6 of the 8 employers are located. Some satellite offerings are being offered at Spaulding hospital. Half of the courses offered by the Training Institute are covered by 100% release time for employees. The other half is offered at the cusp of shifts to reduce scheduling conflicts. Courses offered on partial release time require no more than 2 additional hours per week and no more than 1 hour after the end of a shift.

### **Support Services**

As noted above, all Training Institute participants have access to individual career coaching through the 2 participating CBO's and WorkSource. Coaches from each organization work with individuals at their corresponding employment sites. Coaches provide intake, basic assessment, career planning and career coaching for all participants. All participants have access to individual, confidential coaching as often as they want and for as long as it is deemed beneficial. Coaches also provide referrals to supportive services when personal matters interfere with work performance.

The Institute is planning to offer mentoring and job shadowing for the 'Bridges' sites (i.e Beth Israel/Deaconess, New England Baptist, Children's Hospital, and Harvard Medical School and School of Dental Medicine). Mentoring will be provided to employees in new positions and job shadowing will be provided to employees interested in learning about higher level positions.

## **Performance Outcomes**

The Training Institute has established the following outcome goals:

- Workers that participate in training will achieve employment retention rates 50% higher than those not in training;
- 25% of ESOL and GED participants will advance to higher educational level programs and 75% of the GED participants will receive their high school equivalency diploma;
- 75% of ESOL students will increase their proficiency by 2 SPL levels;
- 60% of targeted skills training participants will advance to a new position within the hospital;
- 30% taking college courses will matriculate into a certificate or bachelor's program and will take multiple courses toward that goal;
- 60% of participants will experience earning increases through promotions, merit increases, bonuses etc. within one year of receiving training or education.

## **Metro South/West Hospital Sector Initiative HealthcareWorks**

Industry:	Healthcare
Region:	South West/Central Region
Lead Local Workforce Investment Board:	Metro South/West REB
Amount Awarded:	\$691,580

### **Industry Challenges and how BEST addresses**

Chronic shortages in nursing and technical occupations in the Metro South/West region of metropolitan Boston led the Metro South/West Regional Employment Board (MSWREB) to initiate a long-term workforce development initiative focussed on the hospital sector.

The three major goals of the health sector initiative over the next decade are to:

- Provide solutions to staffing shortages in key occupations in health care;
- Improve the ability of low-income workers and unemployed residents to support their families by enabling them to enter well-paying health care occupations;
- Institutionalize strong, working relationships between hospitals, education and training institutions, unions, and community-based organizations through the REB to achieve goals.

### **History**

HealthcareWorks is the outgrowth of a long-term commitment on the part of the MSW REB to develop programs that move people into jobs that pay self-sufficiency wages. The MSW REB began to lay the foundation for the HealthcareWorks Initiative in 1998. At that time it adopted as a high priority the development of a model to move people out of poverty by providing pre-employment training and by placing people in firms that provide education and training and advancement to jobs that lead to the incremental attainment of family economic self-sufficiency.<sup>12</sup>

Within this context, MSW REB selected the hospital sector as the focus of a major, multi-year workforce development initiative in the fall of 2001. The selection of the health sector was the result of an extensive analysis of the Metro South/West labor market conducted by the Center for Labor Market Studies, Northeastern University at the request of the REB. In Spring of 2000, the REB appointed a Labor Shortages Policy Group (LSPG) to review the findings from the analysis and make recommendations to the REB. The LSPG reviewed analysis of six major industries--including job vacancy

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<sup>12</sup> The Metro SouthWest REB adheres to regional economic self-sufficiency standards established by the Women's Educational and Industrial Union in *The Self-Sufficiency Standard for Massachusetts: Selected Family Types* released in 1998.

surveys and interviews in each--and selected the hospital sector as an appropriate target for a comprehensive, long-term workforce development initiative.<sup>13</sup>

A health sector initiative was initiated by the REB and designed in partnership with regional hospitals, CBO's, and education providers participating in the Workplace Education Collaborative (WEC). The process of establishing the partnership began in the fall of 2001 and included the following key steps. First, the REB Director met with the CEO and/or senior executives of each hospital to introduce the initiative. Following these initial meetings, each CEO convened a meeting of key department heads to gauge interest and secure long-term commitment to the initiative. Once a commitment to the initiative was secured, each hospital formed a team to identify target groups for training, define opportunities for advancement, and specify occupational areas with high demand. The hospital teams, CBO's and workplace education providers participated in the design of the BEST application.

### **Organizational Structure of Partnership**

The health sector partnership established HealthcareWorks which presently consists of the Metro South/West REB, 4 hospitals, 3 Community-based organizations and two training vendors. HealthcareWorks is unique among the BEST sites in that it is not organized as a single RIT. Rather, the initiative is organized into site-specific hospital teams and cross-site teams that work at a regional level. In addition, HealthCareWorks is unique in that its target population includes unemployed individuals in addition to entry-level hospital workers.

The MetroSouth/West Regional Employment Board is the project initiator, organizer and coordinator of the HealthcareWorks project. A full-time project manager employed by the REB has overall responsibility for the program. The project manager is responsible for all aspects of the RIT including coordinating meetings among the various partners, providing staff support to the hospital teams in program design, development and implementation, selecting and working with training vendors, helping the CBO's with recruitment strategies, and managing participant information.

### **Site-Specific Hospital Teams**

There are three site-specific hospital teams that meet monthly to plan and review the progress of HealthcareWorks. Hospital teams consist of the Vice President of Human Resources and Director of Education from the participating hospital, the Executive Director of the corresponding CBO, the selected education/training provider and the REB Project Manager. Site-specific hospital teams began meeting on a regular basis in June, 2002.

The three original employer partners in the HealthcareWorks Initiative were Caritas Norwood Hospital, Marlborough Hospital and Metro West Medical Center. One

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<sup>13</sup> Hospitals were selected for the following reasons: the existence of a large number of entry-level jobs with few prerequisites, the variety of well-paying technical and professional opportunities for advancement within hospitals and within the health industry as a whole, the projection of continued demand for workers due to the health care needs of an aging population, and the severity of shortages revealed by the job vacancy data.

employer partner - MetroWest Medical Center - has postponed implementation of the Core Knowledge and Skills (CKS) curriculum, but will continue to play a policy and planning role by participating on the Healthcare Works Steering Committee. The hospital is exploring the possibility of implementing the CKS curriculum in early summer 2003.

The REB has contracted with the Newton/Wellesley Hospital as the sixth BEST site. The Newton Wellesley Hospital Team held its first team meeting in February, 2003. In addition to Newton-Wellesley, the REB has recruited additional health care employers in the Marlborough/Hopkinton area including two nursing homes and an extended care facility.

Hospital participation in HealthcareWorks is motivated by high vacancy rates that characterize the participating hospitals. Among the 3 original employer partners there was a job vacancy rate of 8.4 percent in November 2000 as one out of every 12 positions went unfilled. For health technicians and technologists the vacancy rate was 9.6 percent.

### HealthcareWorks Hospital Teams

Team	Hospital	CBO Partner	Training Provider
Hospital Team 1	Caritas Norwood Hospital	WATCH -- Waltham	Jewish Vocational Service
Hospital Team 2	Newton Wellesley Hospital	WATCH -- Waltham	Jewish Vocational Service
Hospital Team 3	Marlborough Hospital	Employment Options -- Marlborough	Jewish Vocational Service
Hospital Team 4	MetroWest Medical Center	Southern Middlesex Opportunity Council -- Framingham	Workplace Education Program/SEIU

### Cross-site Teams

At the cross-site, regional level, HealthcareWorks is organized through a Steering Committee, Regional Work Groups, and a CBO Team.

- The *Steering Committee* meets quarterly and consists of CEO's (or their designees) from all of the participating organizations – i.e. hospital CEO's, Executive Directors of each Community Based Organization, Executive Director of the REB, and Executive Directors from each education/training vendor/provider. The committee is in the process of developing a broad policy agenda; will provide overall direction to the initiative; and will distill lessons from the initiative to further develop regional workforce development capacity in the health sector. The first meeting of the Steering Committee was January 13, 2003.
- *Regional Work Groups* are ad-hoc teams that form around specific programmatic elements of HealthcareWorks. Work Groups are composed of representatives from

the participating hospitals, education providers, CBO Directors and the REB Project Manager. The first work group focussed on the development of the CKS (described in next section). Over the fall, members of the CKS work group met on a regular basis to determine what the curriculum should contain and to identify and select appropriate training providers. This work group has now disbanded and a new Technical Training Team work group is forming that will focus on technical skills training.

- The *CBO Team* consists of Executive Directors from the three participating Community Based Organizations and the REB Project Manager. This group meets monthly to discuss planning and program development including recruitment, assessment, and case management.

### **Program Description**

Within the long-term HealthcareWorks Initiative, BEST funds are being used to design and deliver language, literacy and occupational skills to unemployed individuals and entry-level hospital workers. The goal of BEST is twofold: 1) to enable unemployed and low-income workers to seize promotional opportunities within the health care sector; 2) to reduce the costs of hiring and recruitment for employers by increasing opportunities for advancement within hospitals. At an institutional level, BEST funds are being used to support the development of enduring working relationships between the REB, hospitals, unions, community-based organizations and education providers.

BEST training targets two specific populations: entry-level hospital workers employed in housekeeping, food service, patient transport, maintenance and environmental services; and unemployed and/or low-income residents from Framingham, Natick, Marlborough, Waltham and Norwood. Training for entry-level, incumbent hospital workers is provided on-site at each participating hospital; training for unemployed and low-income residents is provided on-site at each participating community-based organization. Individuals who complete training at participating CBO's are given hiring preference at participating hospitals for entry-level positions. Within the 18 months of the BEST Initiative, the goal is to provide training to a minimum of 156 individuals (78 hospital employees and 78 community residents – approximately 26 each from each hospital and each CBO).

### **Wage Structure**

Wages for entry-level hospital workers employed in housekeeping, food services and environmental services range from a low of \$7.00 per hour to a high of \$13.00 per hour. The MetroSouthWest REB researched opportunities for advancement for entry-level hospital workers in patient care and administration. Hourly wages for various positions within these two areas are reported below:

- **Patient Care**
  - Clerical positions \$9.70 - 10
  - Surgical Services positions \$10.46 – 15
  - Nursing positions \$9.52 – 18.87
  - Pharmacy technician \$10.52

Radiologic technologist \$16.90  
Respiratory Therapist \$16.73

- **Administration**

Medical Records positions \$8.92 – 14.48  
Scheduling and Admitting positions \$10.38-10.48  
Billing Representative \$11.41

### **Core Knowledge and Skills Training**

The first stage of the initiative has been focused on the development and delivery of the CKS curriculum. CKS provides the foundation for working in hospitals and for further advancement through a focus on ESL and occupational skills. At most of the sites the CKS curriculum is being offered through two classes: one which combines ESOL, basic skills and occupational skills; the other combines basic skills and occupational skills. CKS classes began in January, 2003 and will run continuously at participating hospitals and CBO's through October, 2003. Individuals can test-out of CKS at any time if they have mastered the required skills. CKS participants will maintain portfolios and receive certificates recognized by participating hospitals upon program completion.

The REB contracted with two providers to design and deliver the CKS curriculum. Jewish Vocational Service designed and delivers the curriculum at four sites – Caritas Norwood Hospital, Marlborough Hospital, WATCH and Employment Options. The Worker Education Program of SEIU designed and delivers the curriculum at South Middlesex Opportunity Council (SMOC). CKS meets twice a week for 2 hours. There are currently 10 CKS classes running.

### **Technical Training**

The second stage of the initiative will focus on the development of career paths and corresponding technical training. Each hospital team has begun to address the following tasks with respect to career advancement/pathways:

- project the need for staff in each job with vacancies
- narrow the number of targeted jobs to those most difficult to fill
- review the skills, knowledge and requirements for each position
- establish clear lines of progression in each area
- define opportunities for advancement within and among departments

Between January and June of 2003, a cross-site Regional Work Group will define the technical skills training needs for the identified career pathways. The Technical Training Team will also identify qualified technical trainers and work to develop relationships between the trainers, the healthcare employers, and the CBO's. Individuals will have the opportunity to:

- Acquire skills to support their promotion to more complex administrative and technical positions through non-certified technical training.

- develop career plans and take additional technical training courses (certification/associates degree required) to move to nursing and management positions

### **Recruitment and Assessment**

Each participating hospital and community-based organization is responsible for recruiting appropriate, eligible participants for training and for assessing the supports individuals and workers require to pursue hospital careers. Of the participating CBO's, WATCH in Waltham engaged in the most extensive assessment and recruitment process. This CBO held two informational meetings, interviewed 58 prospective candidates for training and selected 40 people for a 6-week health care exploration course. Out of the 40 who attended the course, 26 enrolled in CKS.

The education providers are responsible for assessing the English and academic competencies and educational attainment of the participants.

### ***Support Services***

Each participating community-based organization employs a case manager to work with individuals enrolled in CKS. Case Managers play a mentoring role, helping unemployed and low-income individuals develop self confidence and a vision of a career in health care. Case Managers track enrollment and completion of all CBO trainees.<sup>14</sup>

The REB is working with the hospital teams on strategies for providing this function to hospital employees participating in the project.

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<sup>14</sup> Case managers are funded through a combination of funds through BEST and a grant from the Boston Foundation.

The table below provides an overview of the HealthCareWorks training schedule to date.

<b>METRO SOUTH/WEST HOSPITALS</b>				
<i>Training Type</i>	<i>Courses (Hours)</i>	<i>Participants to Date (01-03)</i>	<i>Completions to Date (01-03)</i>	<i>Projected Participation Date (01-03)</i>
BASIC SKILLS	Core Knowledge & Skills: Track I** (160- hours)	22	0	TBD
	Core Knowledge & Skills: Track II** (160- hours)	28	0	TBD
INDUSTRY SPECIFIC	Medical Terminology (48-hours)	18	0	TBD
	Technical Training: No Certificate (234-hours)	0	0	48
	Technical Training: Certificate (234-hours)	0	0	20
	Technical Training: Associate Degree (234-hours)	0	0	10

**\*\* Training is scheduled to take place over the course of 10 months (January – October 2003); however, students may test out of the course at any time if they think they are ready to move on to technical training.**

### **Performance Outcomes**

HealthcareWorks has established the following outcome goals for individuals trained under the BEST grant:

- 80 percent of enrollees in the Core Knowledge and Skills module will improve their ability to read, write and communicate in English;
- 80 percent of enrollees in CKS will master basic elements of science, medical terminology, safety, and customer service;
- 80 percent of enrollees in CKS will be able to communicate at a basic level with patients and other health care professionals
- 50 people will enroll in technical training programs and ten will complete their training by the 24<sup>th</sup> month of the project;
- 80 people will be promoted to jobs within the participating hospitals, other hospitals and health care sectors with a wage increase of 20%.

## **Northeast Regional Hospital Partnership**

Industry:	Health Care
Region:	Northeast
Lead Local Workforce Investment Board:	Lower Merrimack Valley
Additional LWIB Partners:	Southern Essex, Lowell
Amount Awarded:	\$342,110

### **Industry Challenges and how BEST addresses**

Decreasing enrollment in nursing programs and aging of the current nursing workforce has led to a nursing shortage in the Northeast region of Massachusetts. In 2001, the Massachusetts' Hospital Association reported a 9.9% vacancy rate for Registered Nurses in the northeast region compared to a 7.8% vacancy rate statewide. For radiology technicians the vacancy rate stood even higher at 12.6%. In surveys conducted by Local Workforce Investment Boards in August 2001, area hospitals reported considerable difficulty recruiting people for nursing and technical positions with vacancy rates ranging from 3 months to 2 years.

The Northeast Regional Hospital Partnership addresses these shortages through the development of a clinical and administrative career ladder initiative aimed at incumbent, entry-level hospital workers. The Partnership will prepare unskilled hospital workers (e.g. housekeepers) and paraprofessionals (e.g. nurses aides) to advance to professional level occupations such as registered nurse and radiology technician.

### **History**

The Northeast Regional Hospital Partnership represents a subset of two organizations that have worked together since late 2000 to identify needs and develop strategies to meet the varied workforce development needs of the region's healthcare industry. In November of 2000, the Merrimack Valley Economic Development Council convened the Merrimack Valley Health Career Development Partnership which includes employers, educators, and community organizations in the Lower Merrimack Valley and Greater Lowell Workforce Areas. Similarly, the Health Care Careers Consortium was established among similar partners based primarily in the Southern Essex Workforce Area along Massachusetts' North Shore. Health care employers in both groups expressed a desire for the creation of a 'pipeline' of workers and career ladders leading to professional occupations where current and projected labor shortages exist.

Recognizing the mutual needs and interests of the two partnerships, the three Local Workforce Investment Boards representing Northeast Massachusetts proposed joining forces to form a stronger and more far-reaching collaborative that would serve the entire

region.<sup>15</sup> Since 2001, the three LWIB's have assisted the region's health care employers with workforce development needs in the following ways: 1) by identifying local, state and federal funding opportunities and leading fundraising and grant writing efforts; 2) by quantifying healthcare workforce through surveys of regional employers regarding vacancy rates, recruitment issues, and skill and training needs; 3) by conducting surveys with front line health care workers to determine their career needs and interests. When the BEST RFP was issued in , the Lower Merrimack Valley WIB took the lead in submitting a proposal on behalf of the Northeast Regional Hospital Partnership.

## **Organizational Structure of the Partnership**

The BEST Initiative operates at two levels within the Northeast Regional Hospital Partnership: at the Regional Partnership level; and at the level of a Pilot Project.

### **Regional Partnership**

The Regional Partnership consists of six hospitals, three LWIB's, three Career Centers, two Community Colleges (Northern Essex and Middlesex), Northeast System for Adult Basic Education Support (SABES), and two Community Action Agencies. This group meets on a quarterly basis and serves as strategic adviser to the Pilot Project -- providing ongoing guidance, support and information to the Pilot Project team. With support from the Project Director (see below), the Regional Partnership oversees the BEST Initiative.

### **Pilot Project**

The Pilot Project is being spearheaded by the Lower Merrimack Valley WIB in collaboration with three hospitals that agreed to pilot the training program on site. The three pilot hospitals are: Lawrence General Hospital, Holy Family Hospital (Methuen), and Merrimack Valley Hospital (Haverhill). The Pilot Project is run on a day-to-day basis by a Project Director hired by the Lower Merrimack Valley WIB. The Project Director is responsible for all aspects of the Pilot Project including coordinating meetings among the Pilot Project team members, identifying and contracting with education providers, working with hospitals to hire counselor/educators, developing assessment processes for training candidates, coordinating training among the 3 hospitals and managing participant information.

In addition to the Project Director, key members of the Pilot Project include the Human Resource Directors from each participating hospital and 3 counselor/educators employed by each hospital to run the on-site training program. The counselor/educator positions are half-time (20 hours) and are covered by the BEST grant. The counselor/educator at each hospital site is responsible both for case management (e.g. career coaching and counseling) and instruction.

Employer participation in the Pilot Project (and broader Regional Partnership) is motivated by critical shortages and/or difficulty in recruiting paraprofessional level employees (i.e. nurse aides and phlebotomists), licensed nurses and radiology

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<sup>15</sup> The three LWIBS are: Lower Merrimack Valley, Greater Lowell Workforce Investment Board, and Southern Essex Workforce Investment Board.

technicians. In order to create a regional pipeline of workers to fill these positions, employers are contributing their time and resources to the Partnership. Pilot hospitals are contributing significant time commitments from the H.R. Directors of each hospital. In addition, pilot hospitals agreed to provide 50 percent release time for employees to attend training.<sup>16</sup> Regional employer partners are contributing to the program through their time at quarterly partnership meetings.

The Pilot Project has not established a formal committee structure. Rather, the Project Director is in constant communication with team members via e-mail and face-to-face meetings. The Project Director and the HR Directors communicate on an ‘as needed’ basis. The Project Director and counselor/educators are in contact daily and hold a weekly planning meeting to review the curriculum and student progress. The Project Director reports on the Pilot’s progress and challenges at the quarterly meetings of the Regional Partnership. These quarterly meetings provide an opportunity to reflect on key design aspects of the initiative and make mid-course corrections. In addition, the Project Director provides updates on key developments to the Regional Partnership via e-mail.

### **Pilot Project: Roles and Responsibilities**

Hospitals (Lawrence, Merrimack Valley, Holy Family)	Provide release time to employees, employ counselor/educators, provide input to curriculum development, participate in partnership meetings
Counselor/Educators	Recruit and assess prospective students, provide career coaching and counseling, provide instruction, manage student data
SABES (education provider)	Develop curriculum, help to identify appropriate counselor/educators to work in hospitals, provide training to counselor/educators
Project Director (Merrimack Valley LWIB)	Coordinate all aspects of Pilot Project, identify best practices across region, identify and link existing education providers with employers to meet stated workforce needs
Regional Partnership	Oversee Pilot Project, provide feedback, input, information, identify additional strategies to meet regional hospital workforce needs, identify additional funding opportunities

### **Project Description**

The BEST Pilot Project of the Northeast Regional Hospital Partnership is a capacity building effort focused on systems change. The initiative seeks to transform the current ‘non-system’ (in which individual workers must identify job opportunities and requirements, determine their own career goals, and navigate an educational system separated from the work environment) into an integrated, easily accessible system in

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<sup>16</sup> While the three original pilot hospitals have been constant, turnover of key H.R. personnel at two of the pilot sites has weakened commitment and buy-in to the Pilot Project. In particular, H.R. Directors have expressed concerns regarding their ability to cover shifts when employees attend training.

which employers and educators work collaboratively to support frontline workers in advancing their health care careers.

Rather than focus on large numbers of trainees, this project seeks to bring resources together to develop, pilot and refine interventions to accomplish the following three goals:

- 1) Support basic and transitional skill development for frontline workers in the hospital industry to enable career and wage advancement for employees;
- 2) Reduce turnover and vacancy rates for key clinical positions in the hospital sector (i.e. nurse aides, phlebotomist, registered nurses, radiology technicians);
- 3) Better integrate adult basic education with occupational health care training to create a repository of high quality integrated and tested materials and interventions that will endure as the program evolves and expands.

### **Target Population**

There are two target populations for the Pilot Project. The first population is unskilled, entry-level hospital workers (e.g. housekeepers and laundry aides); the second population is paraprofessional hospital employees (e.g. nursing assistants and phlebotomists). The original proposal design called for two intensive training tracks: 300-500 hours of Basic Skills Training for entry-level workers and 300-500 hours of Transitional Skills Training for paraprofessional workers. The Pilot Project established a goal of training a total of 36 individuals over the course of the grant (6 individuals on each training track at the 3 participating hospitals).

### **Wage Structure**

This initiative is designed to prepare individuals for paraprofessional and technician level positions within the participating hospitals. Wages for occupations within these two categories are provided below:

- **Paraprofessional**  
Certified Nursing Assistant \$9.13-14.49 per hour  
Phlebotomist \$9.41-15.13 per hour
- **Technical Level**  
Radiology Technologist \$13.95-22.49  
Registered Nurse \$13.95-28.64

### **Recruitment and Assessment**

The recruitment process began in the fall of 2002 with a meeting between the Project Director and the H.R. representatives from each hospital to determine eligibility. The hospitals determined that full and part-time employees with a minimum of six months on the job would be eligible for the training program. The next step in the process was presenting the program to supervisors at each hospital to get their feedback and secure their buy-in to the effort. The training program was then publicized to employees through hospital newsletters and employee mailings attached to paychecks. The publicity

was followed up with an information session for employees at each hospital. At each information session the training program was described and attendees had an opportunity to learn about the training program and ask questions.

The recruitment yielded 55 prospective trainees. In November, counselor/educators conducted on-site academic assessments and eligibility counseling for all 55 candidates. This process revealed that many interested candidates were overqualified for the proposed training (i.e. already taking college courses) and that few unskilled, entry-level workers were interested in a lateral move to patient care. The vast majority of eligible candidates were individuals with high school diplomas or GEDs employed in paraprofessional level jobs for many years (e.g. CNA and Operating Room Aide). This population expressed enthusiasm in transitional training leading to college courses and career advancement. Out of the 55 individuals who were assessed, 40 applied for training spots.

Each employee applying for training was required to state their current position and department, the last grade of school completed, and their future career goal. In addition, each individual was required to submit a recommendation from their supervisor as well as a work release agreement. Each applicant was then interviewed by the educator/counselor on site and required to take a TABE and writing test.

### **Training**

The results of the recruitment and assessment process led to a rethinking of the Pilot Project design. Since very few entry-level individuals expressed interest in a patient care career path, the Basic Skills track was postponed. In its place, the Pilot Project is developing two alternate courses based on the needs assessment. First, each hospital will offer ESOL combined with broad career exploration beginning in July. This course is being developed in response to entry-level workers' stated need for ESOL and their interest in a broad range of hospital careers. Second, the program will offer a CNA certification training course in the late spring. This course is being offered in response to recent regulatory changes that require all CNA's to be certified at Lawrence and Holy Family hospitals.

While the Basic Skills Track has changed significantly, the Transitional Training track has moved forward as planned. All 19 trainees enrolled in the Pilot Project are currently enrolled in the Transitional Training Course. Classes meet on-site at each hospital for three hours on Mondays, Tuesdays and Thursdays. Every other Friday the three classes meet for group workshops at one of the participating hospitals. Courses are offered between shifts and half of the 3-hour course is paid release time. Courses began on January 27, 2003. The first module of the training □ Foundation Skills I □ will run through April 17. Foundation Skills I is composed of the following four modules: Math, Critical Reading and Writing, Principles of Biology, and Career Pathways. Foundation Skills II will begin at the end of April and continue through the end of June. By summer, modules will shift to applied and occupational content.

Transitional training is designed as a refresher course for individuals who have been out of school for an extended period. The goal is to prepare individuals for enrollment in college courses that will qualify them for careers as either registered nurses or radiology technicians. In the Friday workshops, career paths are discussed and individuals learn about the educational requirements for their chosen path. SABES has taken the lead on curriculum development and a series of meetings have been held with nurse supervisors at the hospitals to develop/verify career ladders and pathways. SABES, the Project Director and the counselor/educators work together closely on course pacing, content, and coordinating Friday workshops with class content.

Given the rotating location of Friday workshops, the Project Manager generates a calendar each month for employees and supervisors to clarify when and where employees will be participating in training.

The chart below provides an overview of the pilot project’s proposed training schedule. Given the shift away from the Basic Skills track, specific aspects of the training are still in a developmental phase.

<b>NORTH EAST HOSPITALS</b>				
<i>Training Type</i>	<i>Courses (Hours)</i>	<i>Participants to Date (1-03)</i>	<i>Completions to Date (1-03)</i>	<i>Projected Participation</i>
ESOL	ESOL + broad career exploration	0	0	TBD
INDUSTRY SPECIFIC	Transitional Skills Training (300 to 500-hours)	19	0	19
	CNA Certification	0	0	TBD
OTHER	Mentor Training (24-hours)	0	0	TBD
	Counseling Assessment (32-hours)	19	0	45

### **Support Services**

A unique feature of the Pilot Project is that counseling and instruction are combined in a single individual—the counselor/educator. The counselor/educators on-site at each hospital simultaneously play the role of career coach, counselor and instructor. Counseling specific to career development and career pathways takes place in alternate 2-hour Friday workshops; counseling and assessment is ongoing.

Because classes in this initiative are small and meet frequently, employee/students and counselor/educators are developing close relationships. The intimate nature of the program facilitates folding much of the counseling function into instruction. Counselors also meet with employee/students one-on-one periodically to insure that career goals and program expectations are clearly articulated.

**Performance outcome goals**

The Pilot Project has established the following outcome goals for program participants:

- At least 30 front-line workers will enroll in career ladder and advancement program
- 80% will complete at least one foundation or transitional area course during initiative
- 50% will enroll in and begin licensed or technician level training during the initiative
- 75% of participants will attain a higher paying position during the course of the grant
- 10 unskilled workers will move to nurse aide or phlebotomist positions with salary increases of 15%
- 8 nurse aides in the career ladder program will advance to nurse aide II with an average increase of 7%
- 6 nurse aides will be promoted to senior aide mentors with corresponding increases
- All participants will create a Career Training Portfolio for use.

### **Section III: RIT Project Design Characteristics**

One of the most striking features already emerging in this evaluation is the diversity of the six project sites. Each Regional Industry Team (RIT) is responding to similar economic and workforce challenges -- i.e. worker and skill shortages and low retention for employers and poor career development resources and opportunities for workers. However, each RIT initiative is unique due to the industrial sector in which it operates and the experience base from which it grows.

In this section, we compare and contrast some of the most significant differences in program design along three dimensions: partnership, training and career supports, and career pathways. Our objective here is to provide a preliminary overview along each dimension. In depth assessment and impact along the different dimensions will be addressed in subsequent evaluation reports.

#### ***Partnership***

Overall, the six BEST RITs have established trustworthy relationships among partners, have routinized roles and responsibilities and are functioning smoothly. Facilitating the partnership process at several sites is the fact that many of the partners have worked together before. Some sites include partners with well-established relationships from previous work. For example, the community development corporations in the Boston Healthcare initiative have worked with their employer partners for several years. In other instances, RIT's involve partners that have worked together on training before but with different target populations. In the Boston Financial project, for example, the PIC has worked with most of the employer partners previously on other workforce initiatives. Thus, the PIC is able to draw upon existing relationships with employers in order to expand training and career advancement for a new set of workers. Other sites include partners who have very new relationships. For example, the South East Massachusetts Manufacturing Consortium was a relatively new partnership prior to the BEST grant. Similarly, partnership building in the Northeast Hospital initiative is relatively new.

The number of employer partners varies across RIT's from a low of four to a high of ten. Several of the initiatives have experienced changes with their employer partners due to economic factors. For example, in the Boston Financial initiative, one of the original bank partners merged with another partner, reducing the number of employer partners to five. In Metro South West Hospital Initiative, labor disputes caused one hospital to withdraw from the program temporarily. In the Biomanufacturing initiative employers have reduced the number of trainees originally agreed to due to the economic slowdown.

While local workforce investment boards (LWIBs) are the lead institution in the majority of BEST RIT's, other institutions play the lead in two cases. The lead institution in the Biomanufacturing initiative is the Mass Biotech Council – an industry association representing 350 biotechnology employers statewide. In the Boston Healthcare initiative, Jamaica Plain Neighborhood Development Corporation is the lead institution. As the

evaluation develops we will focus greater attention on if/how variation in the lead institution impacts program implementation.

Community-based organization (CBOs) are playing an important role in several partnerships. In Boston Health Care and Research Institute a CBO is the lead institution in the RIT. In Metro Southwest, three CBOs have partnered with participating hospitals and the LWIB to prepare clients for entry-level hospital jobs. And the biomanufacturing RIT has explored a partnership with a consortium of several Boston-based CBOs that are providing orientation courses on the biotechnology industry to their clients.

The six RIT's have utilized multiple partners to develop curricula and deliver training to participants. Some of the RIT's have developed new, customized curricula in partnership with community colleges and non-profit training agencies; others have utilized existing 'off-the-shelf' curricula. In either case, each RIT is forging new or expanded relationships with training providers through the BEST Initiative. Community colleges and non-profit training agencies are the most commonly used training partners among the six RIT's.

### ***Training and Career Support Courses and Services***

Like the structure and development of the partnerships across sites, the structure and content of training also varies. Each site's unique design entails differences in the numbers of courses offered, length and breadth of training, and projected participation. In terms of the types of training offered, however, there are several similarities across RIT's. The tables below provide an overview of the types of training across projects, the number of participants and completions as of December 31, 2002, and the number of projected completions by the end of the grant.

The most common category of training offered by all sites is 'industry specific,' which we define as courses developed to either address skill deficiencies or improve existing skills related to the occupation and industry in which the participant is employed. The goals of these courses necessarily vary by industry and range from the greater comprehension of industry terminology and processes to improved customer service.

Many sites have recognized a need to provide other types of training either prior to industry-specific or concurrently. Four sites have designed basic skills training, which include courses developed to address skill and certification deficiency of employees in firms participating in the BEST Initiative. Training goals range from improving mathematical skills to the completion of General Education (GED) or Adult Basic Education (ABE) training.

Five sites found English language deficits and have or will deliver training in English for Speakers of Other Languages. Training goals include fluency in conversational and written English, as well as additional soft-skills and vocabulary necessary for business communication. Two sites determined that workers needed additional computer training either to perform in their current jobs or as a prerequisite to advance to other jobs. The goal of this training is to improve the skills of participants in the use of programs such as

Microsoft Word, Excel, and Access in order to make them functional in the use of these programs in their respective industries.

A majority of sites (5/6) have designed some sort of training or service to specifically support the career development and advancement of employees. These sites have developed individual career coaching, counseling or case management to assist employees on an individual basis in developing and implementing career plans. Two sites offer career planning workshops as part of the training, and at Boston Financial, employees who successfully complete the career planning workshop have access to individual career counseling in order to assist them in implementing their career plans. Two sites are planning some sort of mentoring component, and one is planning a job-shadowing component.

Four of the six sites have integrated supervisory training courses into their initiatives. Goals include improved provision of support for employees, improved ability to address and diffuse difficult situations, improvement of motivational skills, and the fostering of buy-in for training on the part of non-supervisory employees. These courses vary in their focus on training supervisors in career coaching and support for employees in moving along career pathways.

**Table 1: RIT Training Matrix: Employee Training**

<b>RIT TRAINING MATRIX<sup>17</sup></b>					
<b>Employee Training</b>					
<i>Training Type</i>	<i>RIT</i>	<i>Courses (Hours)</i>	<i>Enrollments to Date</i>	<i>Completions to Date</i>	<i>Projected Completions<sup>18</sup></i>
<b>BASIC SKILLS</b>	Boston Financial	Math Skills (25-hours)	0	0	30
	Boston Healthcare	GED (144-hours)	27	0	30
	Metro Southwest	Core Knowledge & Skills: Track I (160- hours) <sup>19</sup>	22	0	TBD
		Core Knowledge & Skills: Track II (160- hours)	28	0	TBD
	South East Manufacturing <sup>20</sup>	ABE/GED: Level I (36-hours)	132	126	100
		ABE/GED: Level II (36 hours)			
		ABE/GED: Level III (36-hours)			

<sup>17</sup> Data as of December 31, 2002.

<sup>18</sup> Projected enrollments set forth in each project's statement of work contract with the Commonwealth Corporation.

<sup>19</sup> The Core Knowledge and Skills curriculum is scheduled to be delivered over a 10-month period (Jan.-Oct. 2003). However, individuals can test-out of the course at any point during the 10 months if they are ready to advance to technical training.

<sup>20</sup> South East Manufacturing reports on enrollments and completions for Basic Skills and ESOL training in combination; therefore, the numbers in this section overlap with the numbers in the ESOL training section below.

<b>RIT TRAINING MATRIX</b>					
Employee Training					
<i>Training Type</i>	<i>RIT</i>	<i>Courses (Hours)</i>	<i>Enrollments to Date</i>	<i>Completions to Date</i>	<i>Projected Completions</i>
<b>ESOL</b>	Bio-Manufacturing	ESOL (TBD)	0	0	TBD
	Boston Financial	ESOL (84-hours)	84	0	120
	North East Hospitals <sup>21</sup>	ESOL (TBD)	0	0	TBD
	Boston Healthcare	ESOL (64-hours)	27	7	75
	South East Manufacturing <sup>22</sup>	ESOL: Level I (36-hours)	132	126	100
ESOL: Level II (36-hours)					
<b>COMPUTER</b>	Boston Financial	Computer Literacy (20-hours)	0	0	20
	South East Manufacturing Bio-Manufacturing	Computer Training (4 or 8-hours) <sup>23</sup>	621	612	230
<b>INDUSTRY SPECIFIC</b>	Bio-manufacturing	Technical Skills (160-hours)	11	10	TBD
		Introductory Training On-Site (TBD)	0	0	30
		On-Site: Follow-up Training (160-hours)	0	0	TBD
		On-Site: Ongoing Training (160-hours)	0	0	TBD
	Boston Financial	Business Writing (8-hours)	55	55	130
		Customer Service (8-hours)	74	74	44
	Boston Healthcare	Targeted Skills Training (300 to 500-hours)	38	13	70
		Pre-College (45-hours)	7	0	90
		College (45-hours)	0	0	75

<sup>21</sup> North East Hospitals plans to develop a course that integrates ESOL and Career Exploration.

<sup>22</sup> See footnote 7 above.

<sup>23</sup> Introductory computer training courses are four-hour sessions while sessions for more advanced computer training are eight hours.

<b>RIT TRAINING MATRIX</b>					
Employee Training					
<i>Training Type</i>	<i>RIT</i>	<i>Courses (Hours)</i>	<i>Enrollments to Date</i>	<i>Completions to Date</i>	<i>Projected Completions</i>
<b>INDUSTRY SPECIFIC (continued)</b>	Metro Southwest	Medical Terminology (48-hours)	18	0	TBD
		Technical Training: No Certificate (234-hours)	0	0	48
		Technical Training: Certificate (234-hours) <sup>□</sup>	0	0	20
		Technical Training: Associate Degree (234-hours) <sup>□</sup>	0	0	10
	Northeast Hospitals South East Manufacturing	Transitional Skills Training (300 to 500-hours)	0	0	18
	South East Manufacturing	Personal Development for Manufacturing Careers (40-hours)	65	44	558
		Computerized Machine Process (TBD)	0	0	600
	<b>OTHER</b>	Bio-Manufacturing	Faculty Internships & Faculty Externships (TBD)	0	0
Boston Financial		Career Planning (14-hours)	35	34	300
		Verbal Communication (28-hours)	0	0	35
		Conflict Management (8-hours)	12	12	126
Northeast Hospitals		Mentor Training (24-hours)	0	0	9
		Counseling Assessment (32-hours)	19	0	45
		Career Exploration <sup>24</sup> (TBD)	TBD	TBD	TBD

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<sup>24</sup> This Career Exploration course will be integrated with ESOL training.

**Table 2: RIT Training Matrix: Supervisor Training**

<b>Supervisor Training<sup>25</sup></b>					
<i>Training Type</i>	<i>RIT</i>	<i>Courses (Hours)</i>	<i>Enrollments to Date</i>	<i>Completions to Date</i>	<i>Projected Completions<sup>26</sup></i>
SUPERVISOR	Bio-Manufacturing	Workshop for industry Supervisors & College Instructors (TBD)	0	0	TBD
	Boston Financial	Coaching Skills for Supervisors (14-hours)	76	68	90
		Other Supervisory Skills (4-hours)	0	0	84
	Boston Healthcare	Supervisor Training (20-hours)	7	7	90
	South East Manufacturing	Supervisor Training: Level I (40-hours)	89	89	144
		Supervisor Training: Level II (40-hours)			

**Table 3: RIT Career Supports Matrix**

<b>RIT Career Support Services<sup>27</sup></b>					
<i>Career Supports</i>	<i>RIT</i>	<i>Career counseling</i>	<i>Career planning workshops</i>	<i>Mentoring</i>	<i>Job shadowing</i>
	Boston Financial	One-on-one, on-site career coaching	Career planning course for all BEST participants		
	Boston Healthcare	One-on-one, on-site career coaching (intake, assessment, career planning, career coaching, referrals to support services)		Plans to implement mentoring for 'Bridges' sites	Plans to implement job shadowing for 'Bridges' sites
	Metro Southwest	Case management for all CBO trainees			

<sup>25</sup> Data as of 12/31/02

<sup>26</sup> Projected enrollments set forth in each project's statement of work contract with the Commonwealth Corporation.

<sup>27</sup> Data as of 12/31/02

	North East Hospitals	On-site career counseling with counselor/educator	Friday workshops on career development and pathways	Plans to develop mentor training program for supervisors	
	South East Manufacturing	Career advising through HR			

**Career Ladders**

A primary goal of the BEST Initiative is to develop transparent and structured career pathways within each sector that enable workers to clearly understand and embark upon career opportunities and advancement. The six BEST sites exhibit considerable variation along this dimension of program design.

Two of the sites— BioManufacturing and Boston Healthcare— have well-developed career mapping and pathway activities. The BioManufacturing project is using an articulated four-level career pathway which is derived from a national biotechnology technician career path model. The partners in this RIT worked closely to develop a four-week training module that would provide entry-level technicians with no biotech experience the foundation skills they need to enter and climb the biomanufacturing career ladder.

The Boston Healthcare project is an outgrowth of several existing partnerships with extensive experience in career ladders. Two of the four FleetBoston Foundation's Career Ladder Initiative grantees are involved in this BEST partnership: Bridges to the Future and Partners in Care<sup>28</sup>. The BEST Boston Healthcare project has benefited from extensive research into retention and advancement opportunities through career ladders in the health care sector by the Bridges to the Future program and experience with a pilot career ladders project on one floor of the cardiac unit at Brigham and Women's Hospital. The basic structure of the career ladder is in place, and the initiative can now focus on refining it and taking it to scale.

<b>RIT Career Ladder Development</b>			
<i>RIT</i>	<i>Fully-developed career ladder/pathway</i>	<i>Significant experience with career ladders/pathways, but new to sector</i>	<i>At beginning stages of career ladder/pathway development</i>
BioManufacturing			
Boston Financial			
Boston Healthcare			
Metro Southwest			
North East Hospitals			

<sup>28</sup> For more information on the history of career ladder development in the Boston area, see "Career Ladders in Boston: A Summary of Recent Progress," by Laurie Sheridan of the Boston Workforce Development Coalition (August 2002).

South East Manufacturing			
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The other four BEST projects are at various levels of development with respect to career pathways. The Boston financial services project is at an early stage in the development of a career pathway for workers in backroom operations. However, two of the partners in this RIT have significant career pathway experience: the Boston PIC has developed and implemented career ladder programs for Certified Nurses Assistants since 1998; and Crittenton Hastings House and Citizens Bank have developed career ladders on the retail side of financial services through the FleetBoston Career Ladder Initiative. The experience and expertise of the various partners is now being applied to career pathways for workers in backroom operations in the financial services industry.

The remaining three sites - Metro Southwest, North East Hospitals, and South East Manufacturing - appear to be at an very early stage in researching and developing career pathways. Metro Southwest is focusing its research on identifying and developing career pathways in the most in-demand technical occupations in the hospital sector. A technical training work group has just begun meeting to identify these occupations. North East Hospitals is targeting its efforts on preparing unskilled entry-level hospital workers and paraprofessionals to advance to professional level occupations including registered nurse and radiology technician. Career pathways are being identified/developed to support this goal. South East Manufacturing has identified three function areas to focus its research and career pathway mapping around: supervisory, technical, and customer service.

## Section IV: Preliminary Observations

As noted throughout this report, we are at an early stage in the evaluation of the BEST Initiative. The primary goal of the Baseline Report is to present an accurate snapshot of each RIT now that the BEST Initiative is moving into full implementation. Despite the early stage of the evaluation, we are able to offer some preliminary observations about the overall initiative, the RIT partnership process, and training and career pathway development across sites. It is important to recognize that these observations are neither assessments nor conclusions about the BEST project overall or about any of the six sites. More in-depth analysis and assessment of the BEST Initiative will be provided in subsequent evaluation reports.

### Overall Observations

***Funders should establish different outcomes for start-up sites than for expansion sites.*** BEST sites varied in their depth of partnership and breadth of experience with career ladder mapping and training. It is especially important for those sites with little career pathway experience and/or new partnership relationships to fund some planning time to build partnerships, assess needs, design training, and research career pathways and to establish outcomes for these activities. In this evaluation, it is clear that these sites are struggling to design and implement their projects at the same time.

Several RIT's have made mid-course changes to program design as they discover that original program goals were unrealistic and/or unattainable. This may have been due to a variety of factors, including longer than anticipated lead times, changes in the economic environment, insufficient employee demand, and/or delays in hiring key project personnel. The state partnership could have eased this struggle by providing one-year planning grants followed by implementation grants to those sites that laid a solid foundation for their projects.

On the other hand, some of the BEST sites are building from previously established partnerships, training development, and career ladder mapping. These sites naturally are more developed than those that are closer to the start-up stage and should be held to performance measures and outcomes appropriate to their level of development. To meet this need for site-specific performance measurement, CommCorp has negotiated site-specific goals; however, given our current understanding of the levels of site development in this initiative, we see a need for even more explicit focus on goals around partnership and site development.

***Flexible state agencies required.*** To enable RIT's to achieve the goals of the BEST Initiative, flexibility on the part of sponsoring state agencies is key at both the programmatic level and in the funding arena.

- Although there has been one stumbling block resulting from combining multiple sets of rules and regulations from a multiple-agency partnership; overall, this process has worked remarkably well. A few of the sites offering ESOL training have struggled to balance short and streamlined training courses to meet workers' and employers' needs with the Massachusetts' Department of Education's ESOL testing requirements. The partners have reached a solution, in which the testing requirement was waived for the first round of trainees, while BEST site staff were trained on implementing the Department of Education approved tests. This example demonstrates both the potential challenge of multiple agencies partnering in one state-wide initiative and how partners can work together to overcome these challenges.
  
- Given the economic downturn and mid-course corrections to several RIT program designs, sponsoring agencies may need to provide RIT's flexibility in terms of meeting training stated goals (i.e. either extend the grant period or modify performance outcomes).

***Limited time and resources to design and implement ambitious projects.*** RIT's are juggling three fundamental components of the BEST Initiative: partnership building; training design and implementation; and career pathway mapping and development. Each of these components requires a tremendous amount of energy and time from RIT partners. Although each RIT seems to have sufficient time and resources to achieve the site-specific goals established under this initiative, it appears that the time and resources afforded through the BEST grant are insufficient to fully develop each component in its broadest vision. For example, sites focusing on mapping career ladders that are just starting this research under the BEST grant will not have developed a full industry-wide career ladder by the end of the initiative. These sites are not expected to do this under the current contract; however, for the career ladder to be useful, it needs to be extensive. Therefore, more funding will be required to fully develop it. As a result, RIT's are prioritizing among project components and focusing on areas that are most relevant to participating partners.

***Different starting points and various levels of capacity inhibit cross-RIT comparisons.*** Some RIT's are building from previous partnerships and experience while other RIT's are forging new relationships through BEST. In addition, for some RIT's, BEST is one funding source in a longer-term strategy of career path development for low-income workers. Because of this variation, it is not especially useful to compare outcomes across RIT's. Instead, each RIT must be evaluated based on progress it has made toward its own goals. An important aspect of this baseline report has been to understand the experience level of each RIT with respect to partnership development, training, and career pathways in order to determine proper expectations for assessing each site.

***Data reporting has been a challenge for sites and for the evaluation.*** All sites are struggling to find time and resources to enter project data into the statewide MOSES database. The MOSES database is not sufficiently tailored to meet that data reporting needs of the BEST project; as a result, each site has created its own data collection and reporting system parallel to MOSES. This process is inefficient and costly. Further,

evaluation of the BEST Initiative may be sub-optimal if appropriate, comprehensive, and timely data are not produced.

## **Observations Related to Partnership Development**

*Through the BEST Initiative, the Regional Industry Teams are forging new and mutually beneficial relationships between local workforce investment boards, education and training providers, and employer and industry groups.* Overall, the RIT's have established positive, working relationships among these partners. To date, the RIT's have been less successful at incorporating organized labor and/or workers into the partnership model. Across the RIT's, few mechanisms have been established to include the voice of workers; however, this inclusion may increase as projects institutionalize training. The evaluation will carefully track the involvement of all stakeholders in the BEST projects, especially in the three case study sites.

*Many employer partners have contributed significant co-investment to the project.* In addition to the contribution of matching funds required under the initiative, many employers have donated significant amounts of staff time for curriculum development, partnership meetings, and other activities. This significant co-investment represents a good early success for the project and may bode well for sustainability.

*CBO's and Career Centers have been key RIT partners.* In several RIT's, CBO's and Career Centers have played key roles by managing the screening and recruitment of qualified candidates for BEST training. Employers at several sites have noted that this is a cost-effective, efficient, and valuable service of which they were previously unaware.

*RITs are facilitating strong relationships between between employers and community colleges.* Community colleges are important training providers in three sites: Biomanufacturing, Southeast Manufacturing, and Boston Healthcare. Each RIT indicates that the BEST Initiative has strengthened the relationship between employers in their sector and the community college system. This development is particularly promising for employee career advancement because research has shown that credentialed post-secondary education is an important strategy for workers to realize real wage increases.

*Changes in the economy have impacted employer participation and training demand.* Employer participation in education and training programs is easier to secure in tight labor markets; the economic downturn has resulted in some employers re-evaluating their original commitment to BEST. Additionally, the rapidly changing economic demand for workers in certain industries has forced RITs to re-evaluate their program designs.

*Employers have invested significant time and resources in the start-up phase of BEST.* Employer partners have committed significant resources to their RITs, both through work release time for human resources representatives and other upper-level staff involved in program design and through work release time for lower-level employees to attend

training. Some RITs have found that despite an initial expectation that direct employer involvement might subside after initial training programs were designed, mid-point design changes and career pathway mapping continue to require extensive and on-going direct employer involvement. Some employers have expressed concern about the amount of time the initiative is taking – particularly as many employers are currently understaffed. Any industry-driven initiative must grapple with the balance of involving employers enough to know what they need, but not so much as to over-burden them. The BEST sites are no exception, and RIT project managers are already experiencing the difficulty in striking such a balance.

## **Observations Related to Training and Career Supports**

*Breadth and depth of training curricula varies significantly and will produce different outcomes.* Some RITs have designed training programs that are comprehensive, long-term, and intensive. Others have designed an "ala cart" package of short training modules that can be pieced together in a career plan. Each RIT appears to be developing training programs compatible with current employer needs. While this variation is logical given the sectoral focus of the BEST RIT's, it also inhibits cross-RIT comparison with respect to training outcomes.<sup>29</sup> Additionally, the variation in training intensity may vary by differences in which agencies lead each RIT.

*Importance of supervisor influence and involvement in worker career development.* Employees seeking to advance their employment status through BEST training typically require the support of their direct supervisors. Some sites have addressed this issue directly by providing training to supervisors in how to help their workers advance. The extent to which supervisors support their workers' career advancement will be important.

*Supervisors have difficulty covering shifts when employees are in work release training.* Supervisors often struggle to cover shifts when employees attend BEST courses. This has the potential to undermine supervisor support for employee training. The tension around work release is especially acute in the health care RIT's where extra personnel to cover shifts is scarce. The issues of work release and shift coverage need to be dealt with up-front in the design stage of any incumbent worker training initiative so that supervisor-employee relations are not strained.

## **Observations Related to Career Ladders and Advancement**

*Emphasis on career ladder/pathway development varies considerably by RIT.* Overall, the RIT's are industry-driven and responsive to employers' workforce needs. However, not all employers are committed to and/or interested in career ladder development. As a result, the emphasis on and creation of career ladders varies considerably across the six

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<sup>29</sup> Comparing the impacts of various training designs in BEST is not possible because the training designs vary across industries and the BEST initiative does not include an experimental design evaluation. Additionally, we believe that a rigorous outcomes evaluation of the BEST programs at this stage would be pre-mature because many of the sites are very early in the partnership building and program design stages. Few if any have been implemented long enough to merit a rigorous outcomes evaluation.

RIT's. Some of the RIT's are deeply committed to career path development while other RIT's appear to prioritize short-term training over long-term career oriented pathways. Varied strategies for delivering training and researching career pathways may be entirely appropriate depending on the RITs overall goals and objectives.

***Career pathway mapping takes time and requires employer trust and involvement.***

RITs beginning career pathway mapping are realizing that it is a time consuming process that employer involvement and buy-in. Sites delivering extensive short-term training may be attempting to build trust and buy-in from the employers prior to engaging them in career mapping.

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<sup>i</sup> TBD (To Be Determined) refers to aspects training programs that are not yet fully formulated.