

# *Colorado SECTORS Initiative: Eastern Colorado Healthcare Workforce Partnership*

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# COLORADO'S SECTORS INITIATIVE

In May 2009, The Colorado Department of Labor and Employment (CDLE) and the Colorado Workforce Development Council (CWDC) jointly awarded funding to super-regions throughout the state. Funding was provided to regional workforce partnerships to plan a sector strategy, and many of these grantees received additional funding for the implementation of these activities. Since 2009, ten grants have been awarded to target industries including aerospace, healthcare, manufacturing, renewable energy, and water/wastewater management. Sector initiatives are developed through local public-private partnerships, are industry focused, and include workforce development, economic development, education and other stakeholders to address high priority workforce challenges within an industry.

## BACKGROUND

The Eastern Colorado Healthcare Workforce Partnership brought together representatives from the education, employment, economic, and community sectors of the sixteen counties along Colorado's rural eastern border. This partnership convened in an effort to address the present and future needs for skilled healthcare workers. The purpose of the Partnership was to develop training, education, and community outreach programs to enhance the ability to provide services to seniors throughout sixteen counties in eastern Colorado—now and in the future. The basic components of the project included (1) enhancing community college healthcare training programs, (2) engaging the healthcare industry—public and private—in working collaboratively to develop and support employee recruitment and retention efforts, and (3) inviting the community as a whole to learn more about intergenerational communications in order to expand and embrace the capacity to serve seniors at home, in the community, and in healthcare facilities.

The Partnership grew out of an identified need for training and retention of skilled healthcare workers to address the regions' healthcare needs, specifically those of seniors. Of the sixteen counties in this region, all but two have a higher percentage of persons 65 and older than the state average (9.8%). Three counties have percentages over twice as high – Baca 24.2%, Kiowa 20.1%, and Sedgwick 23.1%. The percentage of persons 85 and older is higher than the state average (1.15) in all but one county – Elbert (.7%), and is more than twice as high in nine of the counties in the region.<sup>1</sup> Given the rural nature of the region, the challenges of addressing the needs of an aging population are compounded by difficulties in recruiting and retaining healthcare workers.

Nationally, rural areas historically suffer greater challenges in recruiting healthcare providers, and Colorado is no exception. In addition, the general economic and population decline in

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<sup>1</sup> US Census - [www.census.gov](http://www.census.gov)

several northeastern Colorado communities has resulted in young people leaving for employment, which contributes to the challenge of finding new workers and caregivers. Rural facilities often have to rely on 'pool nurses' –nurses hired temporarily through placement firms, who are not 'connected' to the community, the facility, or the patients. This can be a factor in quality of care, patient satisfaction, and staff turnover.<sup>2</sup>

This region in Colorado also has a need for training and retraining workers with second language and interpretation skills. The presence and rapid growth of Hispanic populations in Eastern Colorado has created the need to design programs with these linguistic and cultural realities in mind. A majority of the eastern counties have a Hispanic population far surpassing the state average of 20.2%. Morgan County, for instance, has one of Colorado's fastest growing Hispanic populations; it is currently 34.5% Hispanic. In Southeast Colorado, several counties have historically had a higher than average percentage of Hispanic populations – Bent County – 32.8%, Otero County – 39.4%, Prowers County – 28.1%<sup>3</sup>. The rural nature and population demographics of eastern Colorado create a necessity for the development of partnerships such as this to address the healthcare needs of the region.

## GOALS AND OBJECTIVES

The Partnership was developed to address the insufficient capacity in the healthcare industry in eastern Colorado to meet the current and projected healthcare workforce needs for senior care services in the public and private sectors. This insufficiency was addressed by the Partnership through six individual goals:

- To create capacity within Eastern and Southeastern Workforce Regions to understand and help address the workforce needs of employers and community-based organizations working with seniors.
- To expand the capacity of local community colleges to attract, educate, and train students to work in healthcare careers and in particular those serving seniors.
- To create community awareness of generational differences and to educate the community regarding the current and growing need for employees and volunteers.
- To enhance the capacity of healthcare facilities and providers to offer high quality healthcare services to Spanish speaking clients, and create jobs and job enhancement opportunities for healthcare workers.
- To explore the feasibility of developing stand-alone gerontology training and/or certification course for healthcare workers and lay caregivers to meet industry needs.

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<sup>2</sup> "Long Term Care Facilities in Rural Colorado," *The Colorado Rural Health Center*, December 2003.

<sup>3</sup> US census - [www.census.gov](http://www.census.gov), See also: State Health Facts - [www.statehealthfacts.org](http://www.statehealthfacts.org)

# PARTNERSHIPS

The Partnership combines a broad array of Workforce Regions, Community-Based Organizations, Community Colleges, Area Health Education Centers (AHECs), Economic Development Councils, and Industry Representatives.

Workforce Regions involved in the Partnership include the Eastern Colorado Workforce Region and the Southeast Workforce Center.

Community-Based Organizations involved in the project include the following Area Agencies on Aging (AAA): East Central Council of Local Governments, Stratton; Northern Colorado Area Agency on Aging, Sterling; and Lower Arkansas Valley Area Agency on Aging, La Junta. The Rural Communities Resource Center is also a Community-Based Organization involved in the Partnership, contributing Spanish Interpretation training and support.

Community college partners include Lamar Community College, Lamar; Morgan Community College, Fort Morgan; Otero Junior College, La Junta; and Northeastern Community College, Sterling. In addition to the colleges there were Area Health Education Center (AHEC) partners including Centennial and Southeastern Colorado.

Economic Development Councils including Lincoln County Economic Development, Morgan County Economic Development, and Colorado Office of Economic Development & International Trade were also involved.

Industry Representatives include both public and private facilities: Cheyenne County Public Health, Cheyenne Wells (public health department); Heritage Healthcare Management Services, Rocky Ford (3 assisted living centers in southeast Colorado); Devonshire Acres, Sterling (nursing and rehabilitation center and Independent & assisted living community); Eben Ezer Lutheran Care Centers, Brush (multi-level care facility providing fully independent living to intensive nursing care, federally subsidized low rent senior housing, Lifeline, in-home services, and adult day-care); and Valley View Villa, Fort Morgan (120 bed, skilled long term care center).

Due to the large network of partners and the broad nature of workforce areas they represent, the Partnership developed a Leadership Team whose purpose was to organize and support the partners and to convene regular meetings to track progress and disseminate information. The Leadership team included representatives from Morgan Community College, Northeastern Junior College, Southeast Workforce Region, Eastern Workforce Region, Salud Family Health, Centennial Area Health Education Center, East Morgan County Hospital, and Rural Communities Resource Center.

# IMPLEMENTATION ACTIVITIES

The Partnership's mission was to address regional-specific senior care workforce needs by combining community education as well as new and incumbent workforce training throughout the sixteen eastern counties. Given the broad scope and rural nature of the area, a Project Manager position was developed and filled for the Eastern Colorado Workforce Region. This position enhanced the ability of the project to inform and recruit clients into healthcare professions. Activities were completed to address needs along three categorical lines: (1) community awareness to assist lay caregivers and to recruit new healthcare workers, (2) training and education for new healthcare workers in community colleges, and (3) incumbent worker training to retain skilled healthcare workers.

At the community/local level, workshops on Intergenerational Communication were designed and implemented to create community awareness of generational differences and the need for healthcare workers. To address needs at the college level, community college education was enhanced by developing senior care simulation labs for healthcare professionals, developing gerontology courses to add Certified Nurse Assistants (CAN) curriculum, and enhancing the current gerontology curriculum in Licensed Practical Nursing (LPN) courses to better respond to industry needs. Spanish Interpretation courses were given in Eastern and Southeastern Regions to better equip incumbent workers in assisting Spanish-speaking clients. The participants were of various ethnicities and backgrounds.

The Partnership also solicited the needs and interests in training and certification from workers in the industry and lay caregivers in order to assess the feasibility of developing stand-alone gerontology training and/or certification course for healthcare workers and lay caregivers to meet industry needs. A curriculum was developed for the Gerontology class. The curriculum was approved by the Community College system and recognized as a statewide course.

# ACHIEVEMENTS

In total the project trained 40 incumbent workers, with 38 earning certificates. In addition to new and incumbent worker trainings, "Aging Gracefully" workshops intended for older community members and caretakers were held. These workshops had a high attendance rate and were widely praised by attendees. Participants provided positive feedback and felt that they gained useable training and information on how to deal with the aging process. Additionally, five "Multi-Generation in the Workplace" workshops were held. A majority of attendees were incumbent healthcare workers; other attendees included business owners and representatives from academia. Overwhelmingly, attendees noted that they benefited from attending the workshop, and would recommend it to other employers and fellow employees. Specifically, the Director of Nursing at the Salud Clinic in Fort Morgan stated that she was glad to have a better understanding as to how "Generation X" thinks. Additionally, she will use the

things she learned to get more results from the younger generation of employees by communicating with them more effectively.

A Nurse Faculty Coordinator Position was developed and filled at Northeastern Junior College to teach a CNA course two to three times per year and to assist with development and administration of a CNA gerontology course. The position was held for one semester, which helped to develop the curriculum for a Gerontology course. Informal survey results provided positive feedback for the quality and value of this course.

Two Spanish Interpretation Training courses were given; one in northeast Colorado and one in southeast Colorado. When surveyed, participants indicated that they were very satisfied with the content of the training and reported that the material would be useful in their workplaces.

Scholarships were awarded to final-semester students enrolled in healthcare occupation programs. Otero Junior College (OJC) awarded ten scholarships and Lamar Community College (LCC) awarded seven scholarships to students enrolled in healthcare occupations. Students received \$500 each, with the exception of one scholarship at OJC, which was divided up among three students to use for book fees. LCC has reported that all seven students who received a scholarship are currently employed in the field, with two students continuing toward a BSN. The students were grateful for the financial assistance provided toward completing their degrees.

Surveys were given to ascertain what caregivers need in order to improve and enhance recruitment and retention of senior care employees. Survey results indicated that caregivers would like to have additional training in helping clients to deal with (1) chronic pain management, (2) proper lifting techniques, and (3) dementia and what to expect. Those who took the survey indicated that barriers to attending educational classes are lack of finances and the need for an adult daycare service to fill in while they are in training. Half of respondents said they would also like to receive classes on managing “caregiver stress.”

A professional development course titled “Essential Skills for Success in Health Care” was prepared and delivered at three work sites between June and August of 2011. The goal of this training was to improve retention. Survey results from the incumbent workers were positive, and most could cite specific examples of training components that were helping them in their day-to-day jobs as CNAs and other entry-level health occupations.

Another grant activity was an “Older Adult Resource Fair” which occurred in Fort Morgan at Morgan Community College, and was widely attended by community members and healthcare workers. As a result of the fair, healthcare representatives engaged in a roundtable discussion hosted by the Fort Morgan Workforce Center’s Business Development Representative. This was attended by 7 employers and addressed workforce and training needs in their facilities.

The grant not only provided resources for training and outreach, but also provided important teaching tools. Two geriatric mannequins were purchased with grant money (one male and one

female). Lifts, supplies, and bathroom and bedroom adaptive pieces to simulate home modifications for the elderly were added to fully equip a simulation lab for senior care students.

Throughout the duration of the Partnership grant period, the number of people entering and completing training remained far above the anticipated numbers. These results indicate success in attracting interest in the trainings and involvement in the senior care health industry to both incumbent workers and to community or family caregivers. An extension to the grant was also awarded in May 2012 in the amount of \$40,608.

A benchmark of success for any training program is whether or not employers are hiring those completing the training. Healthcare employers in the region have indicated that they will hire CNAs from the partner college programs. While the number of new hires is unavailable, it should be noted that a partnership was established between Morgan Community College and Lincoln Community Hospital to offer a nurse aid course.

## **IMPACT / RETURN ON INVESTMENT (ROI)**

Although difficult to measure, soft skills training such as stress relief, overall workplace morale, cohesion and teamwork, and intergenerational skills tend to boost morale and in turn lead to higher worker retention. No method for measuring soft skills training and its correlation to retention were used by the Partnership, however, post-training surveys were administered to gauge benefits as perceived by the employee. Overall, those attending trainings found an increase in job satisfaction post-training and a boost in morale on the job. Managers also reported a shift in morale and workers' attitudes from those who attended the trainings.

One recent study placed the cost of recruiting and training at \$4,000 per new CNA. With a national CNA turnover rate of 93%, this creates a major financial burden on the industry as a whole.<sup>4</sup> With turnover rates this great, the ROI of incumbent worker trainings to retain CNAs and other current employees has the potential to be high. (See Appendix B)

## **CHALLENGES**

Delays in employment processes under the Colorado Department of Labor and Employment regulations resulted in a three week hiring delay and subsequent lag in employment of the Project Manager position. This had an effect on the project as a whole and impacted the ability of the Manager to implement trainings and build relationships in a timely manner. Having a management position established at the outset of the project would alleviate many of these challenges.

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<sup>4</sup> Richard Hoffman, "Lessons Learned in Creating a Successful CNA Retention Program: Guidelines Drawn From Integrated Health Systems' New Career Ladder Program."

There were also challenges in implementing college courses at the community college level because some curriculum was seen as too similar to current LPN coursework to stand as its own course. The course went through the appeal process, and after many delays was finally approved in May 2012. The class was given a standard community college course code and was titled “Gerontology for Care Providers.”

A coding issue was encountered by the Eastern Region while enrolling participants in the “Connecting Colorado” system. Participants were inadvertently being double-enrolled in WIA and the grant. This was resolved by using an SE07 co-enrollment code along with WIA coding. Unfortunately not all participants in this program were co-enrolled in the WIA programs, and therefore it was not possible to accurately track all participants.

When the grant was originally written, partners in the Southeast section of the Region were not budgeted project monies by the Eastern Region; therefore they felt “left out.” They became active in the partnership after the grant was approved. As a result, it proved challenging to get this area to be as engaged as other parts of the Region.

A lack of employer awareness of the partnership has also been a challenge throughout this project. When employers are not aware of the grant or do not associate the trainings with the grant it is then difficult to track employers that are using the trainings.

In addition, conducting post-training interviews is difficult because individual respondents’ contact information may no longer be valid, or they simply do not respond to requests, making follow-up information difficult to retrieve. Furthermore, there was confusion on how to set up a tracking system among case managers. This process was not established at the beginning of the grant and was therefore challenging to systematically set up and enforce across all areas at a later date.

Another challenge has been getting co-enrollments with WIA funds. The strict eligibility criterion for WIA programs is a challenge when trying to serve a large number of clients and not all clients could be co-enrolled as a result.

## **LESSONS LEARNED**

Relationship building with employers was found to be an extremely important component of this project. Because there were delays in creating the regional management position, relationships were not built as early in the project as desired. Especially because of the large geographic area of this region, employer relationships were difficult to build in a quick manner and therefore there were delays in getting appropriate trainings out to employment facilities and communities. For future projects, having those relationships established in a timely manner would eliminate delays in program implementation.

Increasing the numbers of senior care healthcare workers in rural areas can be achieved by targeting training towards CNAs who wish to advance in their careers. CNA training was

highly attended throughout the project and those participants expressed the desire to progress into other areas of healthcare and to receive higher wages. CNAs are an excellent pool of employees to target for long-term retention in the healthcare pipeline.

Community education seemed to be widely embraced and well-attended. These rural communities appear to be open to increasing senior care education. By addressing the needs of lay caregivers in addition to employed healthcare workers, gaps in rural community needs can potentially be filled by educating volunteers. These volunteers and lay caregivers are also a potential recruitment pool for the senior healthcare industry.

There appears to be value in having mixed groups at retention workshops, as the site that included staff from a variety of occupations indicated an increased mutual understanding of one another's roles due to experiencing the course together.

A need for better marketing was voiced throughout the project, especially for the trainings and workshops geared for incumbent workers. Better marketing could potentially increase the numbers of enrolled trainees.

Post-training momentum is not well maintained after incumbent worker trainings. Surveys and follow-up calls to workers who attended the trainings revealed that incumbents retained only a small amount of information from the trainings due to managers not reinforcing and reiterating information. In addition, many workers did not utilize staff meeting time with co-workers to discuss what was learned at the trainings. This is something many said they would have or could have done if they had thought about it or had been told by management they should do so.

## **BEST PRACTICES**

Collaboration and cooperation across counties and regions creates a network of involved organizations and communities and increases education and awareness that fosters growth and positive change.

The need to understand shortcomings in the health industry and work to fill these needs by recruitment and retention of senior caregivers results in a better quality healthcare industry and healthier community.

The implementation of incumbent worker training boosts morale and allows workers to better poise themselves for career advancement and more rewarding work environments.

## **FINANCIAL AND LEVERAGED RESOURCES**

Funds were solicited from Centennial Area Health Education Center and the Springs Institute for the Spanish Interpreter Training that would have cost \$3,000 per participant if held in the

metro areas. Rural Communities Resources assisted funding for some of the workshops. Each community partner donated meeting rooms and other amenities for the workshops and discussions. Doctors and nurses, dentists, physical therapists and a wide variety of healthcare professionals donated time to conduct the Aging Gracefully and Aging With Grace workshops. Workforce Centers, Community Colleges, and other agencies also donated time and resources. Further, the ECHO grant partnered with the Sectors grant to serve the I-70 corridor with several projects providing funds and staff to cover some of the gaps in that area.

## SUSTAINABILITY

This project was designed with sustainability in mind. The issue of a rapidly expanding need in senior service programs is not an easy problem to address, and one that will take decades to resolve. The sustainability strategies incorporated into the project were designed to take advantage of resources and opportunities in the public and private sectors and from local, state, and federal sources. Funding to support sustainability was built into the project in multiple ways:

- **Student Fees** – As with all programs offered by the community colleges, they must ultimately be attractive enough to students and employers to be self-supporting. The programs initiated and expanded through this project were designed with long-term sustainability in mind. The design took into account the need to make fees affordable for students and offer financial support for disadvantaged students.
- **Registration Fees** – There were modest registration fees charged for the community-wide Intergenerational Communication workshop. Industry sponsorship was solicited to keep registration costs low and scholarships were offered to disadvantaged participants.
- **Grant Funding** – The interest in healthcare and health reform has generated a rapid expansion of private foundation funding available to health-related projects statewide. Several members of the Leadership Team were well-connected with Colorado's private foundation sector and thus monitored and shared future grant opportunities. Additional grants helped fund the project and a system was set up to monitor and apply for future grants.
- **Industry and Employers** – Healthcare sector employers and industry representatives were involved in the project from the beginning. By being able to demonstrate to them the effectiveness of the efforts on their ability to attract and retain well-educated, better-trained, and more satisfied employees, the thought was that they would be amenable to providing future financial support and contribution. Several employers have since sent current and future employees to the new CNA and gerontology classes that were developed using grant funds. Also, as a result of this new curriculum, other colleges across the state of Colorado will be able to offer these classes in their schools.

- **Public Funding** – This project included efforts to educate the community—youth and seniors, employers and employees, students and educators—regarding the rapidly expanding need for healthcare workers as the baby boomer generation starts requiring more care and services. This effort was meant to result in local advocacy to develop expanded public funding options, including reimbursement to lay caregivers, which will decrease the pressure on health facilities.

The Partnership originally received \$184,392 in grant money. An additional sum of \$40,608 extended the grant through December 31, 2012 (with an additional 30-day extension to complete the fifth Multi-Generational training), and \$7,000 of these additional monies supported healthcare occupations scholarships at Otero Junior College and Lamar Community College in Southeast Colorado.

## RECOMMENDATIONS

- **Evaluation:** The introduction of a consistent evaluation framework across counties and partners would facilitate the collection of needed data and documentation. It would also allow projects to use ongoing feedback to revise or refine project activities and thereby develop better projects and be more successful in achievement of project goals.
- **Pipeline for new generation of workers:** This project focused on the community college level for education and recruitment of senior care workers. This could be expanded to the high school level to (1) encourage students to go into college-level programs, (2) educate students about healthcare opportunities in their own communities, and (3) to develop programs and career fairs that educate students to the full range of healthcare opportunities, including those specializing in senior care.
- **Reimbursement of lay caregivers:** Local advocacy programs to use public funding for the reimbursement of lay caregivers would take the pressure off the already understaffed healthcare facilities in these rural communities. If local programs can organize and coalesce around this concept to offer programs and certifications for lay caregivers such as those that were part of this project, public funds could help offset this need.
- **CNA retention and advancement:** Since the high turnover rates of CNAs is a national problem, information exists that suggests CNAs are a primary source for recruitment into other areas of healthcare, including senior care. CNAs are paid less than other healthcare positions, and often seek further education to move into different areas such as nursing. A large number of the incumbent workers involved in trainings during this program were CNAs. This willing pool of candidates should continue to be targeted for retention and promotion purposes.

- **Further collaboration:** This project encompassed a broad collaborative effort across organizations, counties and regions. The mechanisms put in place for the purposes of this project should be used and expanded. This is a problem in which the solution must come from the community, education facilities, and both public and private sectors of the healthcare industry simultaneously in a collaborative effort. Working together requires motivation, a willingness to share information, and an organized method for collecting and sharing data. This partnership set some of those mechanisms in motion, and has laid the groundwork for further collaboration.

# ABOUT

Rutgers University's School of Management and Labor Relations (SMLR) is the leading source of expertise on the world of work, building effective and sustainable organizations, and the changing employment relationship. The school is comprised of two departments—one focused on all aspects of strategic human resource management and the other dedicated to the social science specialties related to labor studies and employment relations. In addition, SMLR provides many continuing education and certificate programs taught by world-class researchers and expert practitioners. For more information, visit [www.smlr.rutgers.edu](http://www.smlr.rutgers.edu)

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# APPENDIX A

## List of Partners in the Eastern Region Healthcare Partnership:

### **Yuma County**

Yuma District Hospital  
Hillcrest Care Center and The Towers  
Wray Community Hospital  
Parrish Care Center III  
Area Agency on Aging  
Yuma Life Care  
Hospice of the Plains  
Wray Clinic  
Yuma Clinic  
Northeastern Colorado Health Department  
Cedardale Health Care Center Inc.

### **Washington County**

Akron Clinic  
Washington County Clinic  
Washington County Nursing Home  
Area Agency on Aging

### **Lincoln County**

Lincoln Community Hospital & Nursing Home  
The Bee Hive  
Plains Medical Center  
Gordon Clinic  
Carla's Cluster Care  
Bee Hive House  
Limon Tender Care Village

### **Logan County**

Eastern Colorado Home Care  
Hospice of the Plains  
Northeast Plains Home Health Care  
Sterling Medicare Homehealth  
Banner Health  
Heritage Center  
Family Care Clinic  
The Beehive Assisted Living  
Colorado Assisted Living  
Devonshire Acres  
Sterling Living Center  
The Legacy  
The Bee Hive I Sterling  
The Bee Hive II Sterling

### **Sedgwick County**

Senior Citizens Center  
Sedgwick County Health Center  
Jacob J & Anne B Walters Memorial Living Center

### **Phillips County**

Melissa Memorial Hospital

Regent Park and Carriage House  
Heritage Heights Senior Housing  
Haxtun Hospital  
Haxtun Family Medical Center

### **Kit Carson County**

Kit Carson Memorial Health  
Parke Health Center  
The Legacy at Burlington  
Grace Manor Care  
Burlington Care Center

Medical Clinic

Flagler Tender Care Village

Plains Medical Center

The Bee Hive – Stratton

### **Cheyenne County**

Cheyenne Manor  
Keefe Memorial Hospital

### **Elbert County**

Good Samaritan Society-Simla  
Plains Medical Center  
Elizabeth Family Healthcare  
Goodwin Manor Assisted Living  
Pearl Assisted Living  
Alicia's Home Care  
Elbert County Health & Environment

### **Morgan County**

Valley View Villa  
Bee Hive I  
Bee Hive II  
Colorado Plains Medical Center  
Fort Morgan Senior Citizens Center  
Fort Morgan Medical Group / Family Practice Clinic  
High Plains Rural Health Network  
Fort Morgan Pediatric Clinic  
Colorado Urology Center PC  
Morgan Anesthesia Association  
Northeastern Colorado Health Department  
Salud Family Health Center  
Brush Family Medicine  
Eben Ezer Lutheran Care Center  
Sunset Manor  
The Aladdin at Brush  
Eben Ezer II  
East Morgan County Hospital (Banner Health)  
High Plains Rural Health Network

## APPENDIX B

<b>ACTIVITY</b>	<b>TOTAL PLANNED</b>	<b>TOTAL ACTUAL</b>	<b>% OF GOAL</b>
<b>Entered training</b>	60	56	93%
<b>Completed training</b>	52	40	77%
<b>Earned certificate or industry credential</b>	50	38	76%