

February 5, 2024

Kim Paker-Llerenas, Executive Director, Willamette Workforce Partnership, and Chair, Oregon Workforce Partnership

Greetings Co-Chair Frederick, Co-Chair McLain and Members of the Joint Committee on Ways and Means Subcommittee on Education

Please find my written testimony, presented to the committee on February 5, 2024 during the Future Ready Oregon update.

Prosperity 10,000 is a section of Future Ready Oregon that has distributed funds to the nine local workforce development boards through a formula.

Local Boards invested their first allocation of \$15 million General Funds in May of 2022; distribution of these funds was completed in June of 2023. The final allocation of \$20 million dollars (ARPA dollars) is being disbursed currently and will run through June of 2026.

These funds have made a significant impact in our local communities. The flexibility of Prosperity 10,000 has allowed local boards to offer services and training to individuals and organizations in ways we haven't done before. The infusion of these dollars in our local communities have made a positive impact.

Prosperity 10,000 investments are working to ensure services and resources available through the workforce system are provided to individuals from priority populations through increased access and focused support. This means building meaningful relationships and removing barriers to education, employment, and training while providing the wrap-around services individuals need to succeed. Prosperity 10,000 investments also served to reinforce the local workforce board as a strategic convener, advocate, coach, mentor, and collaborative partner in supporting local nonprofit and community-based organizations.

These funds have allowed local boards to make impacts like never before. Our federal Workforce Innovation and Opportunity funds, while appreciated and valuable, come with restrictions. The Prosperity 10,000 funds have allowed boards to be creative, innovative, and targeted in reaching out to priority populations and serving the entire person.

For example:

- At the end of June 2023, every participant who enrolled in a Prosperity 10,000 program identified with at least one of the priority populations.
- 67% of the Willamette Workforce Partnership Future Ready Oregon participants had not engaged with the workforce system prior to accessing the services offered and paid for by Prosperity 10,000.
- Statewide, 88% of participants enrolled in Prosperity 10,000 are earning more than \$17 an hour. This far exceeds the goal of 75% of participants earn \$17 an hour.
- In Coos/Curry/Douglas Counties, the general fund investment was used very successfully. 80 individuals that were homeless or had received notice of eviction were provided with support funds to stabilize housing.
- A total of \$280,918 was spent on housing stabilization for these individuals, for an average cost of \$3511 per person (some received less, some received more).

- The results of this support exceeded expectations, while there is recognition that the struggle to obtain or retain employment while facing housing instability is real, the success achieved through this program could not have been anticipated.
 - 88% (64 people) who exited the program were earning an average hourly wage of \$18.77/hr.
 - 8 individuals remain engaged in training services (10% of total)
 - 8 individuals left the program without completing (10% of total)
- In the Willamette Workforce Partnership region, we have just entered into contract with four community-based organizations or training providers for our next round of Prosperity 10,000 funding. One of the most exciting programs is supporting the Micronesian Islander Community in training 40 individuals in Certified Drug and Alcohol Counselor (CADC) training. Another project that would not be funded without this investment is welding training for 30 formerly incarcerated individuals in Marion County. We are also funding training for Certified Nursing assistants, and Commercial Truck Drivers – in-demand jobs in targeted sectors.
- Finally, the Oregon Workforce Partnership received a Future Ready Oregon Workforce Readiness Grant that will leverage a recent Department of Labor Grant we received to offer WorkSource services to Adults in Custody who are nearing release. These investments will ensure these returning citizens will be met with supportive, informed staff in WorkSource offices around the state who will help them get a job and become a successful member of society, reducing recidivism.

These are all examples of how these funds have created a transformational impact for Oregonians. Thank you for the opportunity to share these inspiring and impactful stories with you. Please let me know if you have any questions.



February 6, 2024

Dear Co-Chair Frederick, Co-Chair McLain and Members of the Joint Ways and Means Subcommittee on Education:

Thank you for the opportunity to provide additional testimony, as time was cut short during the in-person meeting at the February 25, 2024 Informational Meeting – Future Ready Oregon Update. For the record, my name is David Koehler, and I serve as Dean of Instruction, Health & Public Service for Rogue Community College (RCC), which serves Jackson and Josephine counties.

I was asked to provide testimony regarding some of the work that I have been involved in at RCC under the banner of Future Ready Oregon: Workforce Ready, Career Pathways, and HECC's Healthcare Industry Consortium.

Recently, RCC was awarded a competitive grant from Workforce Ready Round 2 for just under \$1M over three years; this award aims to expand the two-year Associate of Applied Science (AAS) Nursing program at RCC by increasing the annual number of students accepted from 32 to 56. The increase will advance equitable education opportunities by improving access to this competitive program and providing tuition funding for priority populations.

In this project, RCC is partnering with the two largest hospital systems in the two-county region, Asante and Providence Medford. Asante operates Ashland Community Hospital in Ashland, Rogue Regional Medical Center in Medford, and Three Rivers Medical Center in Grants Pass; Providence operates Providence Medford Medical Center. These two organizations combined employ more than 7,500 local residents.

RCC developed the project plan in response to the research published on March 14th, 2023 by the Oregon Longitudinal Data Collaborative (OLDC), Addressing the nursing shortage in Oregon: removing barriers in nursing education. The study demonstrates there is significant unmet demand for RNs across the state. The OLDC study suggests that existing training programs are unable to produce enough graduates to meet demand, with only 23% of qualified applicants admitted to RN programs. As such, the OLDC report recommends expanding RN programs to help address the nursing shortage statewide.

The shortage of RNs is also prevalent in RCC's two-county district. At the time of the proposal submission, Providence Medford had 70 open RN positions, while Asante had 347 vacant RN positions across their system in Jackson and Josephine counties. Data indicated that between January 2021 and December 2022, there was an average of 160 open RN positions monthly in the region, but only 52 monthly hires.

Specific barriers from the OLDC study, also prominent in the Southern Oregon region, are addressed through RCC's project plan using three strategies. First, the study pointed to difficulties hiring and retaining faculty in nursing education programs. To address this barrier, Together, RCC, Asante, and Providence Medford (PMMC) have collaborated to expand the capacity of RCC's RN program through an innovative cost-sharing initiative that enables practicing RNs at these hospitals to serve as instructors.

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Under this partnership, full-time RNs are working as clinical adjunct faculty in RCC's program, in lieu of one of their hospital floor shifts. These agreements allow the RNs to maintain full-time employment status with their respective hospital system, while also mitigating the bottleneck of insufficient clinical instructors in RCC's program. The grant provides funding to support this strategy by paying the "wage gap" – the difference between what RCC normally pays for clinical adjunct time, and the wages the RN would have made on the hospital floor for this time.

Second, the study pointed to challenges in securing clinical placements for nursing students, a requirement for all nursing programs as directed by the Oregon State Board of Nursing (OSBN). RCC's project includes a strategy to mitigate the challenge of securing enough clinical spots for students: obtaining program accreditation from the Accreditation Commission for Education in Nursing (ACEN). RCC has not necessarily needed program accreditation, as RCC's nursing program enjoys its partnership with the Oregon Collaborative for Nursing Education (OCNE) through Oregon Health Sciences University (which does have ACEN accreditation). As an OCNE member, RCC's students are considered concurrently-enrolled in RCC's and Oregon Health Sciences University's (OHSU) nursing programs. Because the OCNE curriculum is shared among partner institutions, after an RCC nursing student completes their Associates Degree in Nursing at RCC, they can continue at OHSU for one more year to earn their Bachelors of Science in Nursing (BSN). However, some federal agencies – specifically the Veteran's Administration (VA) – do not recognize this concurrent enrollment under the OCNE agreement. Because the VA considers RCC's program as non-accredited, they do not allow RCC students in their facilities for clinical training, nor will they hire RCC graduates (unless they obtain their BSN from a program-accredited program such as OHSU's). Therefore, seeking and obtaining program accreditation for RCC – as a standalone program, without being under OHSU's banner of OCNE – will open clinical placements at VA facilities (and job opportunities for our graduates), easing this second bottleneck.

Third, the study calls out limited lab facilities, and the resources to at nursing programs to upgrade or expand these facilities. RCC's strategy to address this finding focuses on enhancing simulation education by adding a faculty member dedicated to simulation training. Currently, simulation hours account for 10-15% of RCC students' clinical training, while OSBN regulations permit up to 49% of clinical hours via simulation. By increasing the percentage of simulation training, RCC will optimize efficiency, reducing clinical site and faculty resources required for program expansion. At the same time, the faculty member will explore new technologies for simulation, such as virtual reality, which are significantly lower in cost than high-fidelity manikins and associated infrastructure that RCC currently utilizes. Another innovation embedded in this strategy is that this personnel resource will be shared with our partner hospitals, providing continuing education to hospital nurses, clinical faculty, and preceptors. While the position has not yet been filled, RCC and its industry partners plan to pilot this model, to determine whether such a shared resource makes sense after the period of performance.

Finally, to further increase access to trainings that lead to high-wage careers, such as RNs, RCC has overlaid the fabric of Career Pathways onto this project. RCC historically has operated three nursing programs: the RN program, described above; a Practical Nursing program (leading to an LPN licensure); and an LPN-to-RN Bridge program. Each program has different costs, admission requirements, program lengths, curricula, and outcomes (obviously). Currently, a student can complete the PN program, obtain an LPN license, and go to work as an LPN. Then, after working for at least a year, this PN graduate is able to apply and return to RCC in the LPN-to-RN Bridge program, which will take at least 1.67 years –

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as the one-year PN curriculum is different than the two-year RN curriculum. RCC is determined to reimagine these curriculums, so that the PN curriculum is completely encapsulated within the first year of the RN program. This shortens the path for LPNs who come back to RCC to obtain their RN credential, from 1.67 years to only 9 months. This is the spirit of Career Pathways – truly stackable credentials, multiple entry and exit training points along the career arc!

Due to my involvement in Workforce Ready (both Rounds 1 and 2) as well as Career Pathways, I was invited to participate in the HECC's Healthcare Industry Consortium. I have participated in the convenings to help set the priorities of the third round of funding for Workforce Ready in the healthcare sector, voicing what has worked well, and what has not, from the first two rounds. HECC has done an amazing job gathering voices such as mine, throughout this process, and should be commended for the opportunities to solicit diverse perspectives in this regard.

My hope in providing this testimony is that you will see the value and return on your investments. I strongly encourage you to share the stories you have heard through my – and others' - testimonies, so that the looming gap when APRA funds are gone, has a plan to continue (and fund!) the best investments from Future Ready. Projects such as the one occurring at RCC – and there are many innovative projects – have the potential to provide social justice for priority populations, and at the same time, strengthen the resilience of our healthcare system for all Oregonians. And, in doing this work, RCC increases the economic output of our region. Think of those dollars (from the increased average annual salaries of the additional 24 RN graduates; the median annual wage in our region for RNs is \$102K) – otherwise unrealized dollars – turning multiple times in our regional economy! How is that for a return on your investment!

Please do reach out if you have any questions or concerns. Thank you again for this opportunity.

Sincerely,

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Date: February 5, 2024

Marin Arreola, President of Advanced Economic Solutions

Member of Governor's Racial Justice Council

Co-Chair of Healthcare Industry Consortium

Dear Co-Chair Frederick, Co-Chair McLain and Members of the Joint

Committee on Ways and Means Subcommittee on Education

Re: February 5, 2024 Informational Meeting – Future Ready Oregon

Future Ready Oregon is a new innovative and comprehensive investment package that supports the education and training Oregonians need for living wage jobs and career paths. It is reaching the most vulnerable, underrepresented and underserved populations that have historically had limited success engaging with Oregon's workforce development system. Here in our region, of the people assisted through Future Ready Oregon funds, 67% have never used workforce development services previously.

Future Ready Oregon is succeeding because:

1. It's focused on relationship-based engagement that connects and builds trust between workforce programs and clients. It is not transactional. It is making educational institutions rethink how they deliver instruction; it is making employers engage and be part of the solution, but most importantly, it is providing the support and navigation tools to create a better environment for learning for the most vulnerable workers.
2. Future Ready Oregon is transformational. The framework promotes innovative learning practices that develop the skills needed for the rapidly evolving workforce. A local EMT program funded by Future Ready Oregon funds has taken a former dishwasher and trained her to become an EMT who was hired by Metro West Ambulance. Future Ready Oregon has transformed her life economically. She is now earning a professional wage with great benefits, but most importantly, it has transformed her emotionally and intellectually with expanded skills, new learning opportunities, and the opportunity to earn a living wage.
3. BIPOC, rural and other vulnerable workers are being uplifted because Future Ready Oregon is providing culturally/linguistically competent engagement/outreach, workforce system navigation, wraparound support, mentoring/coaching, training, and other support services that allow low-income Oregonians to effectively learn and engage in workforce training.

4. The Future Ready Oregon workforce model allows for strong collaboration among CBOs, businesses, educational institutions, employers, and workforce organizations. The collaboration is real and intentional by creating an innovative scope of work where each partner is an expert in their subject matter or service, is adequately funded, and the seamless collaboration creates a best practice program that benefits teachers, participants, and local employers.
5. Current Future Ready Oregon-funded workforce programs and services are embedded with a sustained commitment to equity. Every process, policy, program design, service delivery, etc., has been developed and implemented with an equity lens to make sure there are no or as few barriers to accessing services.

I highly recommend that the Future Ready Oregon model of workforce development be used throughout Oregon's current workforce system. I strongly believe Future Ready Oregon is the future of how workforce development services and programs should be delivered because it is centered on equity and the individual. The investments made by Future Ready Oregon funds will be transformative, innovative, impactful, and sustainable that will create an equitable economy that works for every Oregonian.