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## An Evaluation of Michigan Regional Skills Alliances (MiRSAs): Final Report

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## An Evaluation of Michigan Regional Skills Alliances (MiRSAs): Final Report

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**An Evaluation of  
Michigan Regional Skills Alliances (MiRSAs)**

**Final Report**

**Prepared for the  
Charles Stewart Mott Foundation  
and the  
Michigan Department of Labor and Economic Growth**

**Funded by the  
Charles Stewart Mott Foundation**

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Of course, the usual cav eat applies. The authors are solely responsible for any error or omissions, and the views expressed do not necessarily reflect those of the Charles Stewart Mott Foundation, DLEG, or the W.E. Upjohn Institute for Employment Research.

## EXECUTIVE SUMMARY

In May 2004, Governor Granholm announced that the Michigan Department of Labor and Economic Growth (DLEG) would launch a new initiative designed to “help employers and workers in Michigan improve their competitiveness and economic security.” With the assistance of the Charles Stewart Mott Foundation, the state offered one-year startup grants totaling over \$1 million for the initial development of up to 12 Michigan Regional Skills Alliances (MiRSAs) across the state. The stated purpose of these partnerships was to bring together key local entities to address workforce issues affecting firms operating in the same industry in a distinct geographic area.

In addition to providing a portion of the operating funds for the MiRSAs, the Mott Foundation also funded the W.E. Upjohn Institute for Employment Research to evaluate the MiRSA effort. This final report provides the findings from that evaluation. The evaluation was unable to rely on rigorous administrative data, as had been originally planned, so it used instead qualitative information garnered from several sources: two surveys of MiRSA partners, a telephone interview, two on-site visits, and an analysis of the initial proposals and subsequent progress reports submitted by the MiRSAs.

The MiRSAs that were examined seem to have been unqualified successes in developing useful collaborative networks among businesses, educational institutions, and workforce development agencies. Furthermore, they all successfully engaged in employer-led strategic planning initiatives that provided blueprints for prioritized activities that were aimed at the most pressing workforce issues facing the employers in a key targeted sector. Perhaps underestimated by the MiRSAs were the investment costs in terms of resources and time required to formulate effective collaborations, which we believe resulted in limitations to the training and other activities in which the MiRSAs could engage in their operational stages.

This report benchmarks the overall MiRSA effort in Michigan to a national initiative funded by the U.S. Department of Labor at 39 sites across the country. Clearly, the processes undertaken and outcomes achieved by the MiRSAs match their counterparts across the country. The report ends with policy recommendations and hypotheses regarding the correlates of effective MiRSAs.



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# 1 INTRODUCTION

In May 2004, Governor Granholm announced that the Michigan Department of Labor and Economic Growth (DLEG) would launch a new initiative designed to “help employers and workers in Michigan improve their competitiveness and economic security.” (press release May 13, 2004). With the assistance of the Charles Stewart Mott Foundation, the state of Michigan offered one-year startup grants totaling over \$1 million for the initial development of up to 12 Michigan Regional Skills Alliances (MiRSAs) across the state. The stated purpose of these partnerships was to bring together key local entities to address workforce issues affecting firms operating in the same industry in a distinct geographic area. As stated in the initial press release, the prospective bidders for the grants “must clearly demonstrate the problem or set of problems facing their regional industry and how their alliance will focus on meeting employer needs and improve the ability of people to gain employment...” The overall goal of MiRSAs is to provide Michigan employers with a highly skilled workforce *and* to provide Michigan citizens with jobs with good wages and opportunities for career advancement.

In addition to providing a portion of the operating funds for the MiRSAs, the Mott Foundation also funded the W.E. Upjohn Institute for Employment Research to evaluate the MiRSA effort. This final report provides the findings from that evaluation. The evaluation is based upon two surveys of MiRSA partners, a telephone interview, two on-site visits, and an analysis of the initial proposals and subsequent progress reports submitted by the MiRSAs.

We begin this report by providing a brief review of the concept of regional skills alliances. Next, we discuss the MiRSA initiative in Michigan and relate it to similar initiatives elsewhere in the country. This discussion is followed by a summary of results from a survey of

staff and employers affiliated with the MiRSAs. The focus of this survey, which was conducted in January – March 2005 and then again the next year, was on the collaborative capacity of the RSAs and the formative processes that occurred locally. After discussing this survey, the report turns to a summary of findings from the series of site visits to the MiRSAs. The first wave of site visits occurred in Spring 2005 and the second wave was in Spring 2006. The report concludes by summarizing the findings, comparing these findings to those of a similar initiative, and offering lessons learned and recommendations for a model initiative.

## **2 THE CONCEPT OF REGIONAL SKILLS ALLIANCES**

While not patterned after any one prior initiative, the MiRSA concept follows several prior activities that established workforce intermediaries, referred to as sectoral, skill, or employment initiatives, to help bring together businesses and workforce development and educational systems. To help localities develop their proposals for MiRSAs, DLEG distributed material describing several examples of workforce intermediaries and also offered links to websites of networks of such organizations. The specific organizations included in the background material included:

- The Wisconsin Regional Training Partnership, Milwaukee, Wisconsin;
- Industrial Retention and Expansion Network (WIRE-NET), Cleveland, Ohio;
- Primavera WORKS, Tucson, Arizona;
- Cooperative Home Care Associates, New York City, New York;
- Project QUEST (Quality Employment through Skills Training), San Antonio, Texas.

The website links included in the informational packet were for the:

- National Network of Sector Partners
- U.S. Department of Labor's Sectoral Employment Initiative
- Aspen Institute
- Public/Private Ventures.

### **General Background**

Workforce intermediaries, by their very nature, are not easy to characterize because they take different approaches and include various partners to serve the needs of people and businesses in their locales. The working premise of all these initiatives is that alliances that engage employers and workforce and educational entities in a cooperative and collaborative way will generate benefits for both workers and employers. The goal of sectoral programs is to provide value to employers and to strengthen the target sector while creating pathways to

employment and advancement for low-income individuals.<sup>1</sup> The premise upon which many of these programs is established is that partnerships can enhance the limited government resources that are available for training. By creating links with the target industry and focusing on the expressed needs of businesses within those industries, proponents of the sectoral approach contend that the synergies that result from forging successful partnerships can tap into additional resources from the private sector and make the training more effective. These additional resources include cash and in-kind contributions from businesses, oftentimes as fees-for-service, and from foundations. By obtaining funds beyond what is provided by government programs, workforce intermediaries are able to provide more services and to support an administrative infrastructure to engage the partners more fully.<sup>2</sup>

The National Network of Sector Partners (NNSP), a national support center for sectoral workforce development initiatives, conducted a survey to try to ascertain the number and characteristics of workforce intermediaries. This survey provides a useful perspective on the general nature of workforce intermediaries. NNSP used four criteria to identify organizations to survey: 1) operate programs with a focus on two primary customers—those workers whose skills are being built and the employers/industries in which the workers do or will work; 2) emphasize work with low-income individuals and low-wage workers; 3) provide a menu of services; and 4) invest in longer term career advancement.<sup>3</sup>

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<sup>1</sup> This is the stated goal of a major initiative of the Aspen Institute's Sectoral Employment Development Learning Project, which was funded by major foundations to provide businesses with a qualified workforce and to assist low-income people in finding and retaining jobs (Zandniapour and Conway, 2002).

<sup>2</sup> Excerpted from R. Eberts, "Sectoral Initiatives to Train Low-qualified incumbent Workers in the United States, in *Skills Upgrading*, OECD, 2006.

<sup>3</sup> Marano, C. and K. Tarr (2004). "The Workplace Intermediary: Profiling the Field of Practice and Its Challenges" in R. Giloth (ed.), *Workforce Intermediaries for the 21<sup>st</sup> Century*, Temple University Press, Philadelphia, pp. 93-123.

The NNSP survey, administered in 2002, found 243 organizations across the United States that met the criteria listed above. The largest concentration was in the West and the Midwest, with 56 and 52 respectively. Though the types of institutions that house workforce intermediaries are quite diverse, nearly three-quarters were located in not-for-profit organizations, with 22 percent in community-based organizations, and 10 percent in economic development organizations. On the other hand, 23 percent were found in workforce investment boards (WIBs), although this percentage may be an underestimate since some WIBs had established nonprofit structures to house their initiatives. An additional 15 percent were attached to educational institutions, most of which were publicly supported organizations. Only four percent were found in business organizations or associations.<sup>4</sup>

The workforce intermediaries surveyed reported that they provided multiple services. Identifying employer workforce development needs was the most prevalent service, with 82 percent of the organizations reporting that they provided such service. Job readiness services, occupational skills training, and career counseling, and job placement were close behind, with percentages ranging from 81 percent to 79 percent. Sixty-eight percent of the organizations reported providing incumbent worker training. Seventy-five percent of the respondents reported providing services directly to employers, such as technical assistance, supervisor training, and human resource services. Over half of the intermediaries responded that they target specific industries for their services.<sup>5</sup>

Workforce intermediaries vary in staff size, budgets, and number of customers served. Whereas 40 percent of the respondents reported staffs of more than 21 individuals, 29 percent

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<sup>4</sup> See footnote 3 reference.

<sup>5</sup> See footnote 3 reference.

employed five individuals or fewer. Similarly, half the organizations had budgets of less than \$750,000 a year, whereas the budgets of more than one-third exceeded \$2 million. Two-thirds of the intermediaries served more than 500 customers, whereas 11 percent served fewer than 100 customers each year. Funding came from a variety of sources. The majority of financial support came from government programs, with WIA and welfare funds at the top of the list. Two-thirds of the organizations received WIA funds and nearly half received welfare funds. Next on the list were grants from foundations and fees-for-service, with 43 percent and 29 percent, respectively. However, workforce intermediaries reported that support for incumbent worker training and supportive services needed by the customers were difficult to obtain.<sup>6</sup>

### **Examples of Best Practice**

The individual initiatives described in the materials provided by DLEG to bidders as examples of successful regional skill alliances have focused their efforts on providing training to upgrade the skills of incumbent low-skilled workers. These partnerships view the need to upgrade the quality of the workforce of key industries in their regions as paramount to promoting a competitive and viable regional economy. For example, Project QUEST was established in 1992 to help prepare Latino residents of the San Antonio area for jobs. This initiative actually targets three industry sectors: health services, business systems/information technology, and maintenance, repair, and overhaul. Occupations within these sectors are targeted based on demand by local firms, and selection criteria include wage rate, availability of benefits, and career-mobility potential. Project QUEST supports training only for career tracks that can lead

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<sup>6</sup> See footnote 3 reference.

to economic self-sufficiency, and the initiative provides financial and social support so that the working poor can participate in the occupational training.

Project QUEST has also sought to create stronger linkages between area employers and community colleges. It has changed the way the community college system approaches remedial skill development and has facilitated easier access to degree-granting programs for those who need basic skills education. In some instances, Project QUEST's occupational analysis has helped employers restructure positions to make them more attractive to local workers. Project QUEST's multi-sector strategy is different from most sectoral initiatives. Instead of focusing on improving job opportunities within a single industry, the multiple-industry strategy offers a broader range of occupational choices to low-income participants, which enables Project QUEST to assist a larger and more diverse pool of individuals.

Another example of an initiative is the Wisconsin Regional Training Partnership (WRTP). This program also focuses on low-wage workers, but takes a broader approach to solving workforce problems by intervening to help management and labor unions find collaborative solutions to their differences. WRTP, a not-for-profit organization, was established in 1992 in response to the dramatic shift away from manufacturing in the Milwaukee economy during the 1980s. During that time, the Milwaukee economy lost a third of its traditional industrial base. The Wisconsin AFL-CIO realized that its displaced worker program offered only a limited response to the broader issues facing their members and the Milwaukee workforce. Seeking broader solutions, the union partnered with employers and with the Center on Wisconsin Strategy at the University of Wisconsin. Since then the WRTP has partnered with an array of agencies and institutions to create programs that develop family-supporting jobs,

improve the skills of current employees, and recruit unemployed and low-income workers and youth into the manufacturing sector. The partnership now has 63 member firms, 42 local unions and 14 international unions accounting for 60,000 industrial jobs in the area—more than one-fourth of the total. Its initial focus on incumbent workers has created opportunities for the organization to expand to school-to-work programming for youths, welfare-to-work help for unemployed workers, and modernization of firms.

An example of a statewide initiative, similar to Michigan's, is Washington's Skill Panels. Initiated by the governor and state legislature, Skill panels are public-private partnerships of business, labor, and education working together through regional alliances to improve the skills of workers in industries vital to Washington. Industries see the skill panels approach as a way of providing leadership and innovations to grow and keep a competitive workforce. The state workforce investment board provides funding to each skill panel, which leverages additional financial support from other public and private sources. Since 2001, more than 49 industry skill panels are advising 20 key industries in the state. The greatest number serve the health care industry and are operating in every Washington county.

The industry skill panels are convened by workforce development councils, chambers of commerce, community and technical colleges, business and trade associations, and economic development councils. They continuously examine the workforce needs of the industries they serve. Panels make sure that the workforce needs of employers are being addressed. Examples of panel initiatives include:

- Developed skill standards for the energy and electronics industries
- Developed modular curricula for the manufacturing and biotechnology industries
- Expanded apprenticeship in health care and construction industries
- Developed articulation agreements with multiple levels of the education system

- Coordinated industry support to expand capacity of health care programs.<sup>7</sup>

According to the website of the Washington State Workforce Training and Education Coordinating Board, they gauge the success of the skill panels by the numbers of businesses continuing to participate in panels, and most importantly, the numbers, types and quality of training-related products, projects and services created through these alliances.

The federal government has also encouraged the creation of regional skill alliances. In summer 2001, the Employment and Training Administration (ETA) of the U.S. Department of Labor funded 39 local Workforce Investment Boards to participate in the Sectoral Employment Demonstration (SED). In this demonstration, sectoral initiatives primarily identify workforce needs and opportunities within a local or regional industry or cross-industry occupational group while also focusing on economic performance and competitiveness. These efforts target a specific population within a specific region. Target groups may include low-income workers, displaced workers, or new entrants to the job market. The convening organization is expected to have deep knowledge of the targeted industry and its companies. The grantees are expected to provide or coordinate training, supportive services, and other types of assistance to improve career opportunities for a target population. They are also expected to achieve benefits for both workers and businesses through collaborative efforts.<sup>8</sup> Participating WIBs received funding from \$50,000 to \$75,000 for planning and up to \$150,000 for implementing sectoral efforts over one year. Of the 32 grantees that provided information six months into the demonstration, about half were focused on the health care sector, three on manufacturing, two on bioscience, two on

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<sup>7</sup> Presentation by Mike Brennan, Washington State Workforce Training and Education Coordinating Board, January 17, 2006.

<sup>8</sup> Pindus, Nancy, Carolyn O'Brien, Maureen Conway, Conaway Haskins, and Ida Rademacher, "Evaluation of the Sectoral Employment Demonstration Program, Executive Summary, March 2004, submitted to the ETA, U.S. Department of Labor.

the entertainment industry, two on the information technology industry, and the rest were in various service industries.

An evaluation was conducted during the second and third years of the SED demonstration. The methodology is similar to what we followed to evaluate the MiRSAs, in that they reviewed grant files, interviewed grantees by telephone, and conducted site visits. We will use the results of that evaluation to provide a benchmark for the MiRSA evaluation.

To date, no rigorous evaluation has been conducted to assess the net impact of non-government workforce intermediaries.<sup>9</sup> Studies have been conducted of several workforce intermediaries, but these studies did not include comparison groups that would establish the necessary counterfactual to judge the net impact of the programs and their interventions. The findings from studies that have been conducted seem to show that the most successful initiatives commit to outcomes not program inputs, benchmark their activities, and track outcomes throughout the duration of the program.<sup>10</sup>

With this brief review of studies of workplace intermediaries as background, the next section of the report documents the development of the regional skills alliance initiative in Michigan.

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<sup>9</sup> The Aspen Institute has conducted an evaluation of several sectoral initiatives, but to date they have not conducted a net impact analysis with appropriate comparison groups.

<sup>10</sup> Giloth, R. (2004), "Introduction: The Case for Workforce Intermediaries" in R. Giloth (ed.), *Workforce Intermediaries for the 21<sup>st</sup> Century*, Temple University Press, Philadelphia, pp. 3-30.

### **3 THE DEVELOPMENT OF THE MICHIGAN REGIONAL SKILLS ALLIANCE INITIATIVE**

The goal of the MiRSA initiative is to increase the skills and labor market success of individuals in a region and to provide a collaborative mechanism from which local employers would reap significant benefits in terms of availability of a more skilled workforce. For workers, the potential benefits of a MiRSA include outcomes such as an increase in skill levels, increased employment entry rate and job retention, progression along a career ladder, higher earnings levels and benefits, and earnings growth. For employers, the expected benefits are lower labor turnover, greater productivity and profitability, and fewer job vacancies.

#### **Purposes and Intent**

MiRSAs, as described in DLEG's Request for Proposals (RFP), were intended to be locally-managed partnerships formed to address workforce issues that affected firms operating in the same industry in a distinct geographic area. The partnerships were intended to resolve challenges facing businesses such as worker shortages, skill shortages, training mismatches, employee recruitment, and retention and organizational design. The description in the RFP also emphasized the benefits that would accrue to businesses by continually upgrading the skills of their employees—promoting increased productivity and competitiveness. These benefits would also spillover to other businesses within a local labor market, through a healthier business climate and a more highly skilled local workforce. The description further targets efforts to improve conditions and opportunities for lower-wage workers or potential workers.

DLEG stated that MiRSAs would pursue the following objectives:

- Focus on the needs of a single industry within a region (encompassing at least a county) and multiple employers in that industry;
- Target low-wage workers to improve their job opportunities;
- Engage all appropriate public and private stakeholders in collaborative problem solving;
- Select conveners who are key players in the community and have a role in solving the workforce needs in the industry and a role in addressing the need for good jobs;
- Seek to resolve systemic and structural problems by working at the multi-firm and industry-based levels.

To achieve these objectives, MiRSAs were to undertake activities such as examining, designing, and implementing improvements to the sector's human resource practices. These practices may include employee recruitment, development of career ladders, training, and mentoring. Other activities that MiRSAs could pursue were revisions and coordination of training curricula, attention to non-workplace issues such as transportation and other supportive services, and the improvement of supplier relationships.

DLEG required that MiRSA partners include businesses within the targeted industry, educational institutions, and workforce system and economic development agencies. Industry and trade associations, organized labor, chambers of commerce, and community-based organizations were also possible partners. The convener of the MiRSA was intended to be an entity with expertise on the issues being addressed that could also act as an organizer of the alliance. Conveners were to be key players in the region with the clout to bring together the appropriate partners.

As specified in the RFP, the MiRSA did not have to be a new entity, however. It could build upon existing networks and consortia. According to the DLEG guidelines, any of the potential partners could initiate the effort to form a MiRSA. A local workforce board, a community college, local economic development organizations, a labor union, or a community-

based organization could take the initiative to bring key stakeholders together to identify and address workforce challenges.

### **Application Process and Criteria for Selection**

The Request for Proposals was released on May 10, 2004, with a formal announcement by the Governor on May 13. Applications were due July 9, 2004. Questions from prospective bidders were due by June 17, and the final posting of answers was on June 25. Selection of the MiRSAs was scheduled to be announced by August 24. In the period of time between the release of the RFP and the date the proposals were due, DLEG staff held six information sessions around the state, all in May. In addition to providing an overview of the concept of regional skills alliances, they also provided resources for pulling together the labor market information necessary for identifying appropriate industries that are faced with labor shortages and other workforce-related challenges. DLEG also created a MiRSA website that housed additional technical assistance for filling out the application.

Applicants were required to submit a proposal, no longer than 25 pages, that addressed a series of 10 questions. These included:

1. Demonstrate how leading a MiRSA is a core element of the applicant's current mission and provide a narrative on how the principal stakeholders actively participated in the development of the project plan prior to the submission of the application. Also include letters from all partners signed by their president agreeing to the role of the applicant as grantee and identifying in-kind and cash resources provide.
2. Identify the industry focus and document how this industry contributes significantly to the local economy and workforce.

3. Define the universe of employers in the region, describe the process of obtaining employer input, the portion of local employers in the industry involved in the application development, and how employers will be involved in the MiRSA.
4. Describe the key partners in the application.
5. Provide a clearly articulated statement of the problem or sets of problems affecting the regional industry which the MiRSA will address.
6. Demonstrate that the targeted industry has a human resources/workforce need that can be addressed by the MiRSA.
7. Provide measurable outcomes for the impact on businesses and workers and system changes that would improve the ability of people to gain employment. Outcomes were to support the state's goals and objectives of
  - i) increasing the use of and participation in the public workforce development system,
  - ii) having employers see the MiRSA as an integral part of the community and the success of their businesses and the industry,
  - iii) providing solutions for entry level through senior level workforce needs, and
  - iv) self-sufficiency of the MiRSA from local public and private funds.
8. Describe how the objectives in the RFP will be addressed.
9. Provide a description of the applicant's ability to meet the terms of the RFP.
10. Provide a three-year line item budget that includes all sources and uses of funds.

DLEG received 26 applications. An interagency review committee evaluated the applications according to the criteria listed above and recommended 13 applications for funding, one more than originally intended. Throughout the review process, the intent was to fund 12 MiRSAs in the first phase of the initiative. A thirteenth initiative, the Lake Michigan College Emerging Technologies RSA, was designated as an MiRSA but was not funded from MiRSA funds.

During the entire process, DLEG staff provided technical assistance to prospective bidders and then to selected grantees. Staff conducted information sessions, answered questions regarding the concept of a MiRSA and the application process, and provided custom assessments of local labor markets (compiled by the Labor Market Information division of DLEG). Technical assistance was also provided for selected applicants during the grant negotiation process by introducing the selected applicants to a peer networking group and scheduling the first set of meetings of the group. During the first 12 months of the grant period, DLEG staff convened a mandatory meeting of grantees to provide a forum for networking and to offer grantees feedback on their progress in convening their stakeholders. Dissemination of information to MiRSAs was aided by the establishment of a dedicated website, which was available at the time of the initial announcement.



## 4 BRIEF SKETCHES OF THE 13 MiRSAs

This section includes short descriptions of the 13 MiRSAs that were funded during the first wave of Michigan's initiative and that are included in this evaluation. It is worth noting that, consistent with the U.S. DOL's sector employment demonstration, the majority of MiRSAs (9 of the 13) chose to target the health care industry.<sup>11</sup> Only one (and a half) focuses on manufacturing, while the rest address issues facing construction, nanotechnology, and public utilities. Many of the MiRSAs pursue activities related to training, but only one or two actually became involved in training efforts. However, most address issues regarding curriculum or in acquainting students with occupations in their industries, particularly within the health care industry.

Across the nation, one generally observes sectoral approaches in fairly narrowly defined geographic areas; usually single labor market areas.<sup>12</sup> Some of the MiRSAs follow this model; but many of them don't. In particular six of the health care RSAs cover very large, multi-county areas. Five of the other RSAs operate in a single labor market area (county or urban area), and the other two are essentially specific occupational training programs (nanotechnology and line technology) at a postsecondary institution.

The origins and backgrounds of the MiRSAs vary to some extent, as well. The entire initiative was new to the state, so none of the entities existed as a regional skill alliance per se. However, some of the entities had been in existence and collaborations had been established

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<sup>11</sup> One of the MiRSAs is a multi-sector approach with health care and manufacturing. So it would be most accurate to say that eight and a half of the 13 target health care and one and a half target manufacturing.

<sup>12</sup> The six projects in the Aspen Institute's Sectoral Employment Development Learning Project (SEDLP) were Asian Neighborhood Design, San Francisco; Paraprofessional Health Care Institute, South Bronx, NY; Garment Industry Development Corporation, New York; Focus: HOPE, Detroit; Jane Addams Resource Corporation, Chicago; and Project Quest, San Antonio.

prior to the MiRSA funding. In these cases, the MiRSA was more or less established as a new project or new activity for that entity. Seven of the MiRSAs fit the description of being an existing collaboration/partnership prior to the grant award, whereas the other six involved forming new collaborations.

The MiRSAs were not limited to existing workforce boards or their Michigan Works! Agency administrators. However MWAs are the convener for nine of the 13 RSAs. The other four include a labor organization, two postsecondary training programs, and a CBO.

#### **MID-MICHIGAN CONSTRUCTION ALLIANCE**

**Industry: Construction**

The convener for this MiRSA is the Mid-Michigan Construction Alliance, an association of construction trades unions and unionized contractors in central Michigan (Lansing area). The MiRSA has provided training in computer technology to contractors, and has facilitated several initiatives to improve the process and content of information about construction careers that gets distributed to high school students. In the past, the provision of career information to students was “hit and miss” because various Joint Apprenticeship councils independently provided information to schools. By consolidating the career information that is distributed to schools and by attempting to reach a wider array of districts than has previously been achieved, the MiRSA is attempting to attract a much higher “quality” student into its occupations and jobs. An initiative that wasn’t in this MiRSA’s original application may be its main contribution. In partnership with the Lansing Public Schools, the MiRSA has designed and is implementing a set of classes called CRAFT (Career Readiness and Fitness Training). CRAFT 1 is a one semester offering that provides an introduction to construction careers, has field trips to construction sites, and

guest lectures from individuals involved in the field. It covers electricity, plumbing, general contracting, bricklaying/masonry, ethics, labor law, estimation, and MIOSHA safety and regulation. CRAFT 2 is also one semester, but it is more of a hands-on, applied course that builds onto the career exploration/readiness focus of the first course and gets into specific skills. It is project-based and results in a culminating activity.

### **LAKE MICHIGAN COLLEGE EMERGING TECHNOLOGIES**

**Industry:     Nanotechnology and Microtechnology**

The underlying idea for this MiRSA is to facilitate the State of Michigan’s workforce preparation for emerging technologies including microtechnology and nanotechnology. Many leading academics and research organizations throughout the United States are conducting the theoretical and applied research to develop these technologies. Lake Michigan College is developing materials for training technicians and other workers for full-scale implementation of these emerging technologies in the workplace. The Lake Michigan College initiative is a “statewide” MiRSA, but receives no MiRSA funding. It is funded in part with an EDJT grant from MEDC to the Whirlpool Corporation. The main goals of the initiative are to develop a (credit-bearing) curriculum that can be used in an Associate Degree program in Emerging Technologies. Furthermore, Lake Michigan College would provide that curriculum to any other Michigan postsecondary or secondary career and technical education institution without charge. The convening organization is Lake Michigan College.

## **SOUTHWEST MICHIGAN HEALTH CARE ALLIANCE**

**Industry: Health Care**

This MiRSA is “jointly convened.” The fiscal agent is the Calhoun Intermediate School District, which is the Michigan Works! Agency for Barry/Branch/Calhoun Counties. However, the Kalamazoo/St. Joseph Michigan Works! Agency and the Berrien/Cass/Van Buren Michigan Works! Agency are co-conveners of the grant. A major goal of the RSA is to make sure that a substantial number of adults get health-related occupational skills training through the one-stop system. To that end, all three MWAs have invested part of their incumbent worker training (IWT) funds in health care organizations.

This MiRSA has demonstrated well how the RSAs can leverage additional funds. Among its major accomplishments was the receipt of a grant from the Council for Adult and Experiential Learning (CAEL) to develop a career lattice program in nursing. Aimed at ameliorating the nursing shortage, this program will work with employers to develop Certified Nurse Assistant (CNA) career lattices incorporating apprenticeships, non-traditional training programs for Licensed Practical Nurses (LPNs), and online training for LPNs to become Registered Nurses (RNs). The MiRSA also facilitated a Disproportionate Share Hospital (DSH) grant in collaboration with a local community college. The grant funded the expansion of the respiratory therapy program and the continuation of the EMT program at the community college. Local hospitals had reported that finding respiratory therapists had been nearly impossible and more of a concern than the shortage of RNs.

Another accomplishment of the RSA has been the planning and execution of a regional summit for industry leaders. A final activity for which there has been substantial progress is in

the ongoing networking among long term care facilities in Calhoun County, and the development and marketing of a soft skills training program for long-term health care workers.

#### **UPPER PENINSULA HEALTH CARE ROUNDTABLE**

**Industry: Health Care**

This MiRSA builds on an existing collaboration that had, prior to the MiRSA grant, initiated several activities. In 2002, the workforce investment board/Michigan Works! Agency facilitated the formation of a collaboration of health care providers (mainly acute care), named the Upper Peninsula Health Care Roundtable. This collaboration worked with an organization called the UP Health Care Network, Inc. (formed about 10 years ago) to facilitate joint purchasing. The MiRSA grant has helped extend the efforts of the roundtable. Major focuses of the MiRSA are to extend the collaboration to facilities in the western UP and in the eastern UP<sup>13</sup> and to look more broadly at health care occupations and industry (beyond just nursing and acute care.) In terms of workforce development, the MiRSA undertook a media campaign to recruit nurses who had left the profession and future nurses to go into the profession. Furthermore, there has been considerable effort invested in career laddering, and long term care facilities have joined the collaboration. The convener is the Job Force Board, which is the Michigan Works! Agency for the central region of the UP.

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<sup>13</sup> The initial collaboration was facilitated by the Job Force Board, which is the MWA for the central section of the Upper Peninsula. Part of the objective of the MiRSA is to extend the collaboration into the area served by, and to involve the other two MWAs in the UP. Unlike the Southwest Michigan RSA, the structure here is one in which a single MWA receives the grant funds, and actively invites the participation of the other MWAs.

## **WEST CENTRAL MICHIGAN HEALTH CARE REGIONAL SKILLS ALLIANCE**

**Industry: Health Care**

Like the Southwest Michigan MiRSA, this MiRSA has multiple conveners. Five MWAs are partners in the MiRSA with the Muskegon/Oceana MWA acting as the fiduciary agent and chairing the board. All five MWAs and an organization named Alliance for Health are co-conveners. The MiRSA has identified four goals and are pursuing activities to meet these goals.

The first goal is to increase skilled workers in key occupations. The objectives in fulfilling this goal include identifying a half dozen or so priority occupations, developing a strategy for each, implementing the strategy, and identifying and training selected incumbent workers. The second goal is to establish a uniform assessment process with a tool such as WorkKeys.

The third goal is to strengthen the capacity of MWAs to serve the health care industry through the development of an informational resource and health system database. This database will include uniform health care information that MWA staff members can use as they pursue their role as labor market intermediaries in the region. Note that the RSA is also convening employer meetings on a subregional basis, which are another means for bringing health care providers, MWAs, and educators together to develop working relationships. The fourth goal is to establish and maintain collaborative relationships among the region's health care employers, MWAs, and educational institutions.

## **NORTHWEST MICHIGAN REGIONAL HEALTH CARE INDUSTRY SKILLS ALLIANCE**

**Industry: Health Care**

This MiRSA covers a large geographic area that includes counties that are very sparsely populated and counties with more significant population bases. In a very strategic approach, this MiRSA focuses its resources on virtually every entry point of a health care career ladder. In both 2005 and 2006, it offered career exploratory summer camping experiences for middle school and high school students (the high school camping experience at Ferris was not supported in 2006, however). It offers a basic health care training experience for individuals who might consider entering the industry. It facilitated several community-based nurse aide/CNA training courses to supplement the college and career center-based programs in the region. Finally, it facilitated advanced professional development training for incumbent workers. In short, it offers experiences for youth, general training for young adults considering health care careers, specific skill training for entry-level aide or CNA positions, and professional development for individuals already gainfully employed throughout the span of occupations in health care.

## **EAST CENTRAL HEALTH CARE REGIONAL SKILLS ALLIANCE**

**Industry: Health Care**

The predecessor entity for this MiRSA was the Hospital Council of East Central Michigan, which had identified workforce development as a priority issue that affected their profitability. Independent of the Hospital Council, the WIB and MWA staff had, as part of their strategic planning, identified health care as a strategic sector. Finally, Saginaw Business Education Partnership, a group initiated by the Chamber of Commerce, and the MWA undertook a project in 2003 to create and promote career ladders for 15 health careers. The MiRSA

coalesced these three initiatives and has expanded geographically by including two other MWAs. Furthermore, it has reached out to the long-term care facilities in the area.

The focus of the MiRSA is on career preparation/recruitment into the industry by removing bottlenecks that keep students out of health care occupations, facilitating better-trained entrants to the labor force, and recruiting health care professionals not currently working in the field. The MiRSA convened a very successful summit in Spring 2006 where presenters provided a wide variety of data and information ranging from career preparation to occupations in businesses that manufacture medical equipment. Another substantial accomplishment was the launching of Internet-based clinical calendar software that students, health care educators, and health care organizations could use to ease a substantial bottleneck in the preparation of health care workers. The MiRSA successfully ran a major media campaign as well as refresher classes offered at local hospitals aimed at individuals who had left their jobs (e.g., for early retirement or family reasons) but still could potentially re-enter the labor force. A final accomplishment of the RSA was the development of career information (including career ladders) on several health care occupations that could be used for students. Several on-line video products were developed that were targeted at young people.

#### **NORTHEAST MICHIGAN HEALTH CARE WORKFORCE ALLIANCE**

**Industry: Health Care**

The purpose of the Northeast Michigan Health Care Workforce Alliance is to expose more K-12 students to careers in health care, to get more students into health programs offered by colleges and universities in the northern Lower Peninsula, and to attract trained health care professionals into north central Michigan hospitals. The MiRSA is a partnership of the North

Central Council of the Michigan Health and Hospital Association, a health care provider association, and the Northeast Michigan Consortium, administrative entity of the Workforce Investment Board, who have both identified for some time the health care sector as a major employer in the region and a key provider of employment opportunities for a broad range of skill levels. The convener of the 12-county consortium is the North Central Council of Hospitals.

The partners in the MiRSA have put together a directory of community college and university program offerings in northern Michigan for the health care professions. This brochure is organized by 28 health care occupations and lists the educational institutions offering courses related to those occupations, a contact person at the institution, number of seats available, length of program, pre-requisites, full or part time, whether or not it is available online, and the starting and ending dates. As with other RSAs, the Northeast Michigan Health Care Workforce Alliance has facilitated the use of WIA incumbent worker training (IWT) funds in the health care sector. These funds have helped to continue and expand a tuition reimbursement program for incumbent health care workers. An important strategy that was pursued by this MiRSA in its first year was summer camps to acquaint middle school and high school students with health care occupations. They were quite successful in 2005, but met with mixed results in summer 2006.

**CAREER ALLIANCE, INC. AND GREATER FLINT HEALTH COALITION**

**Industry: Health Care**

The MiRSA is administered collaboratively by two entities – Career Alliance, Inc., which is the Genesee & Shiawassee Counties MWA, and the Greater Flint Health Coalition. The collaboration naturally arose when the MiRSA proposal was being developed because the planned training activities could be based on the Flint Health Care Employment Opportunities

(FHEO) Project, which is a workforce development project that was being undertaken by the Greater Flint Health Coalition at the time and which continues to operate today.<sup>14</sup> The FHEO Project operates primarily in the Renewal Community of Flint and is intended for lower-skilled, entry-level positions such as food service, housekeeping, and nursing assistant positions; whereas the MiRSA covers all of Genesee County and is focusing on preparation for mid-skilled occupations, such as LPNs and RNs.<sup>15</sup>

The main focus of the MiRSA is facilitating and supporting the formal training of mid-skilled health care workers. In so doing, the MiRSA is addressing the shortage of health care workers, which is one of the most significant workforce development issues in this sector of the economy.

Among the unanticipated benefits of the MiRSA has been enhanced collaboration among agencies in the county. Staff members generally acknowledge a slow start to the collaboration between CAI and the Greater Flint Health Coalition, but that partnership seems to be working well at this point. There is the belief that the success of the MiRSA partnership contributed to the area's successful application to the U.S. Department of Labor's WIRED grant.

#### **DETROIT LONG-TERM CARE RSA**

**Industry: Health Care (Long-term care)**

The convener for this MiRSA is the Detroit Workforce Development Department, but in collaboration with other MWAs in the metro area. Among the primary accomplishments of the

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<sup>14</sup> It should be noted that the Aspen Institute's Workforce Strategies Initiative produced a profile of this project. Linda Dworak-Munoz and Amy Blair, "Flint Health Care Opportunities (FHEO), Sector Initiative Profile," Washington, DC: Aspen Institute, 2005.

<sup>15</sup> The MiRSA has students in the following fields other than LPN or RN: Medical Assistant, Radiology Technologist, Surgical Technician, Respiratory Therapist, Physical Therapy Assistant, and Medical Biller/Coder.

Detroit Long Term Care RSA has been opening the communications channel between providers and the MWAs. Prior to the RSA, there had been very little awareness on both sides of the strengths and resources of the other. The MWAs had traditionally not placed much emphasis on health care occupations, and the health care sector had operated within its own networks of contacts for workforce development. By collaborating, the workforce agencies expanded into a whole new spectrum of employers with which it could work for training and placing its participants. Furthermore, the health care sector is growing. For long term care providers, participation in the RSA with its involvement with the MWAs opened up some opportunities for grants, networking, and access to the other resources that the job training agency could provide. Respondents believed that the RSA was instrumental in achieving about 250 placements in long-term care since the program(s) began and in initiating two new LPN programs to expand the training capacity of area institutions.

Another accomplishment for which the respondents were proud was the prioritization that the RSA had done. Through their planning processes the RSA partners have set their main focus on education issues, especially standardizing CNA and LPN training. That is, the employers felt that there is too much variation in the training programs that have been offered in the area. So they are working on establishing standards for time and subject coverage.

**CAPITAL AREA MANUFACTURING COUNCIL/RSA**

**Industry:     Manufacturing**

This MiRSA is a trade association for manufacturers (and related businesses) in the Lansing area. Its convener is the Capital Area Michigan Works! agency. The Council is a new entity—it began in 2004 just before it received a MiRSA grant—but there had been at least two

similar organizations in the area prior to its formation. The model for the MiRSA was the Jackson (MI) Area Manufacturing Association (JAMA). The basic mission of the Council is to be a trade association for manufacturing. The group meets formally on a periodic basis and tries to arrange speakers and programs that will be of interest to the whole group. But in addition, the Council has a website and an electronic directory that is disseminated to members so that networking among employers can easily take place. Finally, the Council staff conducted and wrote up the results from an area wage and compensation survey.

Among the primary accomplishments of the RSA has been its growth and vitality in just a short period of time. It has established a governing council, has well-attended meetings, and, most importantly, has achieved virtual funding self-sufficiency. Its membership has not burgeoned, but it has grown steadily and through its dues structure, the council has raised the revenues to cover 85 percent of its second year budget. Another accomplishment of the Council has been its facilitative role in e-business transactions between members.

**GRAND RAPIDS COMMUNITY COLLEGE: THE SOURCE AND GOODWILL INDUSTRIES**  
**Industry: Manufacturing and Health Care**

The convener for this MiRSA is the Delta Strategy, a community outreach department of Grand Rapids Community College. It applied for and is using the MiRSA grant to extend an employment retention model in both manufacturing and health care. The larger share of the activity is in manufacturing, and is being delivered through the SOURCE. The SOURCE, an acronym for Southwest Organizations Unifying Resources for our Community & Employees, is a community-based organization that provides training and employment supports for incumbent workers.

Delta Strategy is investing the remainder of the grant resources in health care in an attempt to replicate the activities carried out by the SOURCE. This part of the grant is being undertaken by Goodwill Industries, which is providing services to members of an industry association called The Health Group. The basic intervention is to have a retention specialist assigned to individuals who are placed in a company. The retention specialist cuts through red tape and does whatever it takes to help workers retain their jobs.

**LAKE SUPERIOR COMMUNITY PARTNERSHIP ELECTRICAL LINE TECHNICIAN PROGRAM**  
**Industry: Public Utilities**

The electrical line technician program operates at the Midwest Skills Center, which is a renovated building on the grounds of the abandoned Sawyer Air Force Base. It is located approximated 20 miles from Marquette and is being developed into an industrial park/airport. The line technician program is currently in its third year. It was started by the Lake Superior Community Partnership Foundation, which is a 501(c)3 organization that was originated to foster economic development. The line technician program is a one-year pre-apprenticeship program that results in a certificate. Students in the line tech program are NMU students and pay tuition for their attendance. Northern Michigan University has an active sub-baccalaureate occupational education mission and programs, and it has brought the line tech program under its fold. The MiRSA grant has been folded into the revenue for the line tech program and is being used for several support activities—purchasing training equipment and materials, and developing recruitment materials.



## 5 EVALUATION METHODOLOGY

### Approach

The planned methodological framework for the study comprised both a process evaluation to assess the formative activities of each MiRSA and an outcomes evaluation to gauge the impact on participants within each MiRSA and on the economic vitality of its industry and region. Because of the nature of the activities of most of the MiRSAs and the fact that the evaluation examines only the first two years of operation, this evaluation ended up being primarily a qualitative study that addresses the effectiveness of the MiRSAs in developing partners, identifying workforce challenges facing the targeted industries, devising solutions, and executing the planned activities. Program activities or inputs—such as the ability of the MiRSA to convene key entities, use appropriate data sources to assess the importance of the targeted industries, or to engage partners into collaborative problem-solving—are important building blocks to achieve the outcomes specified by these local groups. However it may be argued that the effectiveness of each MiRSA should ultimately be measured by employment and business outcomes; the networking and collaborations that have occurred to date are hopefully a means to these ends. A fuller and longer-term evaluation would be necessary to supply administrators and policy makers with a quantitative analysis of the net impact or value added that the initiative brings to participating workers and firms.

In our study, to assess the value added of the MiRSAs, we asked key partners their impressions of the impact on their businesses and on their region. The methodology to assess the net impact of the MiRSAs originally proposed for the evaluation included a much more rigorous approach based upon tracking the outcomes of employee and employer partners over several

years and comparing their outcomes to those of an appropriate comparison group. This approach is appropriate for estimating the effect of training and other well-defined and significant interventions on participant outcomes. However, in the early phase of the creation of the MiRSAs, it became clear that few MiRSA were directly providing training for the employees of the employers involved in the MiRSA, although some directed training funds from other sources towards training for employees in their targeted industries. It was also clear that the necessary information about participants was not available. Consequently, we revised the net impact approach so that it was based on interviews instead of the actual recorded outcomes. Obviously, this offers a much less definitive assessment of the net impacts on the local economies of the MiRSAs.

Although we weren't able to access quantitative data, we did attempt to collect qualitative data on both the processes being pursued by the MiRSAs and on their accomplishments or outcomes. These two foci—process and outcomes—complement one another in assessing the benefits of the MiRSAs. The process evaluation verifies what the program is, how it operates, and whether or not it is delivered as intended to the targeted recipients and at which level of intensity. As a consequence, “process evaluation forces clear thinking and planning during the development—about what the program is, why it is expected to produce the intended results, for what types of people or organizations it may be effective and in what circumstances.”<sup>16</sup>

Examining outcomes takes the program as defined and articulated in the process evaluation and asks, “Did the program make a difference? Did it achieve its goals?” These are causal questions, investigating whether the program actually brought about observed outcomes.

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<sup>16</sup> See Mary Ann Scheirer, “Designing and Using Process Evaluation,” in Joseph Wholey, Harry Hatry, and Kathryn Newcomer, (eds.) *Handbook of Practical Program Evaluation*, San Francisco: Jossey-Bass Publishers, 1994, p. 40.

Obviously, many factors affect the outcomes of workers and the performance of companies. Being able to isolate the effects of a specified intervention, such as the activities of a MiRSA, is the task of the outcomes evaluation. Determining whether or not a program has made a difference in the careers of individuals, the performance of businesses, and even the vitality of a region is critical for setting and pursuing sound and meaningful public policy. In the end, we feel like we gained a sense of the outcomes and accomplishments of each MiRSA, but since the appropriate quantitative data were not available for a rigorous net impact analysis, it is not possible to separate the effects of the MiRSAs' activities from other factors affecting local economic outcomes nor is it possible to verify the impressions conveyed by those interviewed.

### **Framework: Three Stages of Program Development**

For purposes of the evaluation, we suggest that each MiRSA evolved through three stages of program development: formation, implementation, and operation. A general description of these stages follows:

#### *1) Formation stage*

The formation stage comprises the activities that are undertaken to organize the MiRSA's governance and decision making structure, to recruit and convene local participants for strategic planning purposes, to assess the needs of businesses and workers, to make decisions about potentially effective activities for participants, and to set in motion the strategies and actions necessary to offer the client activities. The length of time that a MiRSA might be in the formation stage varies depending on the level of collaboration and relationships prior to the

MiRSA initiative. For newly formed MiRSAs, the formation stage may have lasted several months; for established entities, the formation stage may have been briefer. But even for established entities, there was a formation stage because the MiRSA needed to make decisions about how it would accomplish the goals that it set for itself within the financial constraints of the MiRSA grant and leveraged funds.

### 2) *Implementation stage*

The implementation stage occurs when the MiRSA begins to offer services to its members and other participants. Implementation effectively has a supply and a demand side. On the supply side is the activity itself—its content; facility, equipment, and materials, if any; and the input and talents of the leaders/facilitators. All of these factors contribute to the success of the activity, and any one of them may constrain that success. On the demand side are the individuals who participate in the activity. These individuals must be identified, marketed to, recruited, and have successful experiences. Presumably during the implementation stage, appropriate feedback mechanisms and adjustments can be made to improve continuously the activities. Depending on the length of the formation stage, we assumed that MiRSAs formed from pre-existing entities would enter the implementation stage within the first year, and that new MiRSAs would be ready to implement by the end of the first year.

### 3) *Operation stage*

The operation stage consists of ongoing activities that have been implemented. The administrative oversight in this stage becomes one of continuous performance monitoring to

ensure that activities are appropriate and of high quality, and to ensure that the resources needed to operate are in place.

### **Sources of Data**

The evaluation that was undertaken relied on four sources of information to gather information about the effectiveness of each MiRSA in these three stages. The four sources were as follows:

- Background data provided in each grant proposal;
- Primary data collected through surveys (telephone, mail, or internet);
- Primary data collected during the course of on site visits/observations;
- Progress reports submitted by each MiRSA.

An important caveat to our evaluation is that the sources of information were all from the “inside.” It was beyond our scope to systematically collect data from entities that were not involved in the MiRSAs that might validate or contradict the information we were collecting and analyzing. We attempted to ask for evidence whenever possible; however, the bottom line is that our picture was framed by staff members and employer or educational partners who had received funding.



## **6 FORMATION AND IMPLEMENTATION STAGES**

The formation and implementation stages of creating and operating an MiRSA will be considered together. As mentioned in the previous section, the formation stage encompasses the creation of the governance structure, the recruitment of partners, collaboration activities, and the strategic planning process. There was no prescribed timeframe for accomplishing these tasks. MiRSAs that grew from existing organizations were more likely to accomplish these tasks more quickly than those that were newly created. Also, the strategic planning process may or may not have quickly blended into implementation depending upon the decision making style of the partners within a specific MiRSA and depending upon how much they have relied on the agenda of previously existing organizations. Therefore, it made sense to consider these two together.

Two sources of information are used for the assessment of these two stages. The first is a survey that was administered in January 2005, about six months after the MiRSAs were selected. The second survey was administered a year later. Most of the survey questions relate to the formation and implementation stages, with one set of questions (the client activities dimension) relating directly to operations. The other major source of information consists of interviews and observations obtained during on-site visits. The first set of on-site visits was conducted in the first few months of 2005, during and after the administration of the survey. The second set of on-site interviews took place a year later.

### **Collaborative Capacity Survey**

The *raison d'être* for a sectoral approach is for the key entities involved in workforce development—training agencies, educational partners, and employers—to collaborate

synergistically to improve the caliber of the workforce in the sector and to provide well-paying careers for workers. Effective collaboration requires structure, which is established during the formative stage of the development of the MiRSAs. In a (mail) survey administered to staff and partners, we collected data covering nine major dimensions that are critical for successful collaboration. Each dimension includes a set of factors that together comprise that particular dimension. Each respondent was asked to provide a rating from one to five according to their impressions of how well the MiRSA has met that criterion. The nine dimensions are the following:

1. Governance/decision making structure;
2. Employer engagement;
3. Alignment with existing workforce development organizations;
4. Use of data;
5. Communication;
6. Planning;
7. Client activities;
8. Resource adequacy; and
9. RSA staff intervention.<sup>17</sup>

A brief description of these evaluation dimensions are given in the following paragraphs. The survey of the MiRSAs' capabilities along each of these dimensions is included as an Appendix C at the end of the report.

#### 1) *Governance/decision making structure*

The governance/decision making structure of a MiRSA comprises the agency(ies) that house the MiRSA, the location within the agency(ies), the staffing structure and staff experience,

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<sup>17</sup> Note that these dimensions align closely with the dimensions used to construct the Skills Partnership Self-Assessment Rating Sheet developed by Public Policy Associates. The dimensions in that document are External environment; Use of information; Employer engagement; Organization and structure; Training program alignment; and Performance measurement.

and the mechanisms that are established for flexible, but sound, decision making. An element of the governance/decision making structure is the project management mechanisms that are in place to track and report progress.

### *2) Employer engagement*

Employer engagement is a vital element for MiRSA success. It is gauged by characteristics such as the percentage of the employers in the industry in the labor market area(s) that are involved (by number of firms and by employment), the extent to which key decision makers in the employer organizations are knowledgeable and involved, and the nature of the employer involvement. That involvement might range from having the MiRSA be employer-driven to having employers in an advisory role to infrequent employer contacts.

### *3) Alignment with existing workforce development organizations*

MiRSAs are intended to supplement and make more effective the state's public workforce development system. Thus the third dimension in the survey instrument is alignment with existing workforce development structures. This dimension encompasses aspects such as the extent to which local workforce investment boards (WIBs) and their service providers are involved in and knowledgeable about the RSA, and the extent to which other local training and education institutions are involved.

#### 4) *Use of data*

The fourth dimension assesses the extent to which data are used to identify skill shortages, to identify potential participants, and to monitor the performance of the collaboration as it matures. To be most useful, data have to be current, and they have to be presented in a succinct manner. The evaluation attempts to determine whether data are used to drive decisions or are just “window dressing,” that is not seriously considered.

#### 5) *Communication*

Communication is a key factor in determining the success of the MiRSA. Each MiRSA needs to create awareness among the employer community and to recruit employer participation. Each MiRSA needs to communicate ongoing business items such as meeting times, agendas, and background materials for consideration by staff and decision makers. Finally, the MiRSAs need to report their plans and accomplishments to the public, to state administrators, and to all other stakeholders. Obviously effective communications are clear, timely, and appropriately disseminated.

#### 6) *Planning*

The sixth dimension of effective collaboration is planning. The outcomes of planning activities that MiRSAs undertake are goals and strategies. The processes that are used to arrive at those outcomes vary by who is involved in the planning, the extent to which data are used to drive the planning process, the length of time, and the degree to which outcomes are measurable.

An effective planning process will identify strategies that are used to meet goals and assigns responsibilities to individuals or agencies for spearheading the strategies.

7) *Client activities*

In the operation stage, most of the MiRSAs offered one or more types of client activities such as training that would attract and prepare workers to enter firms within the targeted industry(ies) or upgrade the skills of incumbent workers. Depending on the local situation, the MiRSA's activities may have involved skill assessments, curriculum development, outreach and recruitment, training delivery, and/or placement.

8) *Resource adequacy*

Resource adequacy is an important determinant of the effectiveness of the MiRSAs and their continued impact. The grant funds will be a key catalyst, but they must be supplemented by in-kind and cash resources from other sources in order to be most effective. Sustainability beyond the initial grant will depend on finding adequate resources from partners or other funders.

9) *RSA staff intervention*

The final dimension is the extent and effectiveness of the assistance provided to local partnerships by the state RSA staff. This staff will help to resolve issues that might arise with contracts or state funding so that local staff does not get mired down in administrivia. They will share ideas and innovations and will be advocates for success.

## Survey Analysis

The evaluation framework for assessing collaboration posits that each MiRSA's performance in these nine dimensions will explain their level of success in achieving the goals that the State has put forth as well as their own goals. Two surveys were sent to the same sample of partners and convener staff for each MiRSA. The first survey was sent in January 2005, roughly six months after the MiRSAs were selected. This survey serves as a baseline for assessing the progress of the initial stages of implementation and operations. The second survey, which includes the same questions, was sent a year later and measures the change in perceptions about the nine dimensions during the next year of operation. The surveys were mailed to 106 individuals, from which 58 responses were received from the first survey.<sup>18</sup> This response rate of 55% is quite high for a mail survey. The second survey had only 38 respondents, of which 29 had responded to both surveys.

The survey asked respondents to self-assess their MiRSA along the nine dimensions. Within each of the nine dimensions, the survey asked for assessments of several factors. For example, the dimension of governance/decision making included four factors: Organizational prominence; Project staffing; Project management system; and Decision making structure. A rubric for a 1 to 5 scale was provided for each of the factors, where 5 represented "the RSA is operating at its highest level;" 3 represented "the RSA is operating at an adequate level;" and 1

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<sup>18</sup> The sample of 106 individuals was selected as follows: Four lists of individuals were enumerated from the text and support letters for each MiRSA proposal. The lists were staff members of the convener(s) or conveners' agency, Employer partners, Educational partners, and others—economic development agency staff members or staff members from a partnering MWA that is not a joint convener. We called the project director to confirm addresses and to confirm whether the individual was familiar with the formation stage activities. We then selected **randomly** 2–3 staff members, 2–4 employers, 1–2 educational partners, and 1–2 others.

represented “the RSA has addressed this factor in only a limited way, or it had inadequately addressed the factor.” If respondents were unaware of a particular factor, they were instructed to leave the rating blank or to use a 0.

### *Survey 2005*

The survey responses provide useful information about the perceptions of partners during the first several months of operation. The sample is representative of the various types of partners and the sample size of the first survey is sufficient for assessing the overall perceptions regarding the various dimensions. However, one should be aware that the composition of the respondents varied across dimensions and across MiRSAs and the sample is quite small for many responses by specific dimensions within a MiRSA. Therefore, one should be cautious not to read too much into the differences in magnitude between different dimensions across MiRSAs (as shown in Table 1) or across the role of the respondents (as shown in Table 2).

Table 1 compiles the responses from the first survey and displays the nine dimensions by those who responded from each MiRSA.<sup>19</sup> The bottom row of the table provides the average rating for each of the nine dimensions across all of the respondents. The highest ratings are for dimension 3: connections to existing workforce development agencies and training institutions.

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<sup>19</sup> The averages displayed in the tables reflect the average response of each respondent for each of the nine dimensions. As mentioned in the main text, respondents were instructed to leave a question blank or insert a zero if they were unaware of that particular factor. We consequently did not count missing or zero responses in calculating the averages. Therefore, some respondents will have provided a rating of 1–5 on more questions than other respondents. The overall average for each dimension (column averages) includes all nonzero and non-missing responses. Yet, the total number of nonzero and non-missing responses may vary by dimension. The row averages are based on the responses of each person averaged across all dimensions. Since the total number of responses for each dimension differs from the total responses averaged across all nine dimensions for each person, the overall average computed from the column averages will not necessarily equal the overall average computed from the row averages. For the overall average in the lower right-hand corner of the table (both 1 and 2), we used the average of the row averages computed by taking the total the responses for each row and dividing by the number of respondents who had a nonzero or non-missing response for at least one of the dimensions.

**Table 1. Self-Assessed RSA Dimensions, by RSA**

RSA	DIMENSION									Overall
	Governance/ Decision Making	Employer Engagement	Connections to Existing Workforce Development Agencies	Use of Data	Communica- tion and Marketing	Planning	Client Activities	Resource Adequacy	Technical Assistance from RSA Staff	
01: Mid-Michigan Construction	2.75	3.00	2.50	2.67	3.33	3.33	3.50	4.00	4.00	3.31
02: LMC Emerging Technologies	2.38	3.63	2.83	3.00	na	2.92	na	na	na	2.58
03: Southwest	2.85	2.48	3.88	3.71	2.83	3.33	1.72	2.78	3.25	2.99
04: UP Health	3.98	4.35	4.50	4.47	4.40	4.47	4.60	4.13	4.60	4.36
05: West Central	3.57	3.05	4.40	3.47	3.47	3.53	3.40	2.73	4.25	3.46
06: Northwest	4.00	3.08	3.90	3.60	3.20	3.67	3.63	3.13	2.50	3.52
07: East Central	3.20	3.32	4.40	4.23	3.75	4.00	3.58	3.63	4.00	3.68
08: Northeast	4.10	4.25	4.80	4.42	3.93	4.40	3.92	3.89	3.00	4.11
09: Flint	4.35	3.15	4.13	3.75	3.63	2.90	3.27	3.56	3.00	3.66
10: Detroit	4.05	3.92	4.67	4.50	3.73	4.48	4.06	3.88	4.00	4.03
11: Lansing Manufacturing	3.58	2.92	3.83	3.89	3.78	3.78	4.22	3.61	3.67	3.58
12: Grand Rapids	4.75	4.00	3.75	4.00	4.08	4.67	4.83	4.33	4.00	4.46
13: UP Line Tech	3.59	4.40	3.90	4.28	3.20	4.23	4.23	4.43	4.50	3.97
TOTAL	3.77	3.57	4.14	4.00	3.63	3.90	3.81	3.67	3.79	3.75

**Table 2. Self-Assessed RSA Dimensions, by Role of Respondent**

Role	DIMENSION									Overall
	Governance/ Decision Making	Employer Engagement	Connections to Existing Workforce Development Agencies	Use of Data	Communication and Marketing	Planning	Client Activities	Resource Adequacy	Technical Assistance from RSA Staff	
1: RSA Project Director/ Convener and 2: RSA Agency Staff Member	3.86	3.37	4.19	3.76	3.42	3.79	3.34	3.57	3.86	3.69
3: Employer Partner	3.56	3.55	4.31	4.00	3.44	3.80	3.50	3.33	3.50	3.52
4: Workforce Agency Staff Member	3.23	3.78	4.06	4.31	3.50	3.67	3.89	3.42	3.75	3.70
4.5 5: Education or Training Partner	3.89	3.64	4.15	4.10	3.88	4.08	4.08	4.21	3.80	3.89
6: Other	4.25	3.70	3.75	4.08	3.87	4.23	4.79	4.21	3.80	4.03
TOTAL	3.77	3.57	4.14	4.00	3.63	3.90	3.81	3.67	3.79	3.75

The differences between the ratings for this dimension and all the other dimensions are statistically significant. This dimension is a composite of two questions, one related to connections with workforce agencies and the other with training and educational institutions. Closer examination (not shown in the table) indicates that there is no statistically significant difference between the responses to each composite of this dimension. The respondents indicate that the connections are high with both types of organizations.

It is also interesting to note from Table 2 that employer partners gave connections with these other organizations the highest marks among the different types of partners. Employers gave the same high marks to both workforce agencies and education and training institutions. The high marks from employer partners on connections are supported by the comments during the on-site interviews in which employers were impressed by the support from the workforce agencies and the services they offered.

While the sample size is too small to infer much from the differences across MiRSAs within each sample, it is instructive to note that dimension 3 (connections) was rated as the top first or second dimension by respondents in 8 out of the 13 MiRSAs. This ranking is consistent with it receiving the highest average marks. Nevertheless, respondents from two MiRSAs gave connections the lowest marks. These two MiRSAs, in fact, were not convened by an MWA agency, and in our visits, appeared to have little interaction with the MWA or WIB in their localities.

The dimension addressing the use of data received the second highest marks. As shown in Table 2, all partner groups marked it above a “4” rating, except for the RSA directors and conveners. This dimension is comprised of three parts: using data to identify skill shortages,

using data to engage stakeholders, and performance monitoring. The lowest marks were given to the third component: performance monitoring. The differences in ratings between performance monitoring and the other two components were statistically significant. About half of the respondents, however, did not answer the question on performance monitoring, which indicated that it may have been too early to tell since monitoring requires having the activities operational. However, a year later the response to the same question yielded even lower marks, a 3.18 in 2006 instead of a 3.44 in 2005, which indicates that even after the activities were in place performance monitoring was not regarded any higher. Previous research has shown that the most successful initiatives commit to outcomes rather than program inputs, benchmark their activities, and track outcomes throughout the duration of the program (Gilothe, 2004).

The use of data to identify skill shortages was highly regarded among the respondents, receiving an average mark of 4.19. Part of the application process was to use customized information prepared by the State's Labor Market Information agency to identify areas of skill shortages and use this information to justify the industries targeted in the proposal. It appears that partners were satisfied with the use of this information to perform this task and others identified by the MiRSA.

Closely related to the use of data is planning (as captured in dimension 6). Planning received the third highest rating, close behind the use of data. Also, the two were the most highly correlated among all the pairwise combinations of dimensions (not shown in the tables but available upon request). This dimension is comprised of three components: alignment with state goals and priorities, partner involvement in the process, and specificity of strategies and partner

responsibilities. The alignment with state goals and priorities received the highest marks but the other two were not rated much lower.

The dimension receiving the lowest rating was employer involvement. Employer partners were among the least satisfied with their roles, while workforce agency staff partners were the most satisfied, although they still ranked it fourth among the nine dimensions. Of the four components comprising this dimension—full representation, recruiting appropriate decision makers, employer role, and employer investment—the first and fourth components received the lower ratings. The differences between these two components and the other two were statistically significant. Therefore, it appears from the responses that many of the MiRSAs were challenged with finding a wide representation of employers within the targeted sectors to become involved and with eliciting financial support of the MiRSA by employer partners. Critical to the sustainability of MiRSAs is the willingness of businesses to contribute financially and in kind to the MiRSA. Each employer partner was asked to sign a letter of financial commitment as part of the application for selection as a MiRSA. It is interesting that the employer partners were the least satisfied with employer investment, while the MiRSA director/convener and staff were the most satisfied.

Respondents gave the issue of resource adequacy a slightly less than average rating (3.67 versus an overall average of 3.75). Although the set of three questions did not ask directly whether the respondents believed that resources were adequate for the goals and objectives they had set for their MiRSA, it did ask whether resources were being used effectively, whether they were leveraged adequately, and whether they were pleased with a sustainability plan. Respondents gave higher marks to the sustainability plan than to the effective use of resources,

which may reflect the fact that the organizations were just starting up and there had not been enough time to evaluate the overall effectiveness of the use of resources. Optimism over the sustainability plan may also reflect an early assessment of the issue, before the realities of operating such an organization were fully realized.

Governance and decision making by the MiRSA was seen as an important foundation for its future success. The ratings were in the high “3s” for this dimension. No one component stood out, except perhaps for project management system, in which some MiRSAs relied on staff from a pre-existing organization or used some of their resources to hire a staff person to administer the program.

Client activities received relatively high ratings, considering that much of the early stages of operation for the MiRSAs were spent in identifying the needs and then devising ways to address them. Respondents were most satisfied with the issue of addressing skill shortages (an average rating of 4.2 for this component) and least satisfied with appropriate assessments and outcome measurements (an average rating of 3.47). The difference is statistically significant.

### *Survey 2006*

A follow-up survey was administered a year after the first survey. Unfortunately, the response rate was only half that of the first survey, so it provides less of a gauge of the progress of the MiRSAs than had been anticipated. However, it does offer some insight into the progress made by comparing the responses of the same people who filled out both surveys. This group numbered 29. As shown in Table 3, there was improvement in all dimensions, except technical assistance from RSA staff. However, the only dimension in which the difference in responses

**Table 3. Self-Assessed RSA Dimensions: Difference between 2005 and 2006 Responses**

		DIMENSION								
		Governance/ Decision Making	Employer Engagement	Connections to Existing Workforce Development Agencies	Use of Data	Communication and Marketing	Planning	Client Activities	Resource Adequacy	Technical Assistance from RSA Staff
2005 Response	Mean	3.839	3.652	4.321	4.021	3.740	3.960	3.74	3.820	4.000
	Std dev	(0.794)	(0.800)	(0.597)	(0.694)	(0.755)	(0.885)	(0.987)	(0.671)	(0.795)
2006 Response	Mean	3.989	3.670	4.330	4.021	3.897	4.132	4.17	3.940	3.900
	Std dev	(0.758)	(0.813)	(0.624)	(0.595)	(0.803)	(0.747)	(0.702)	(0.744)	(0.788)
Difference (06-05)		0.150	0.017	0.009	0	0.160	0.172	0.424	0.119	-0.100
t-statistic (H: 05=06)		0.859	0.101	0.061	0	0.709	0.957	1.84	0.695	0.438
Number		28	29	28	24	26	24	24	21	20

was statistically significant was client activities. The response increased from 3.74 to 4.17, nearly a half-point increase. This increase is understandable considering that MiRSAs at best were only beginning to launch their client activities during the first six months of operations and by the time of the second survey most, if not all, were fully implemented. It is interesting that the components of the client activities dimension that improved the most had to do with appropriate curriculum and other training materials and appropriate assessments and outcome measures. The component that addressed skill shortages received the same rating in both years.

Other components that one might expect to improve over time did not. Perceptions about employer engagement did not change. Resource adequacy remained the same, although opinions about the effective use of resources increased somewhat. Perceptions of the project management system also improved, which raised the overall rating of the governance and decision dimension, but not enough to make the difference statistically significant. Therefore, taken at face value, one can conclude that most of the dimensions related to the formation of the MiRSAs were established in the first six months of the operation and remained roughly the same, at least in the perception of the partners, from then on. Again, one should be reminded that these results are based on a small sample of respondents, so the conclusions drawn from these comparisons are at best suggestive.

### **Site Visits**

The site visits were conducted by an evaluation staff person who visited the site for a day. The visit typically involved attending a regularly held meeting of the MiRSA followed by interview sessions with key partners who were asked to stay after the meeting for the discussion.

Attendance at the meetings allowed the evaluator to gain an understanding of the dynamics of the group interaction, observe the structure and content of a meeting, and to hear reports on the activities of the MiRSA. During the interviews, each partner was asked the same set of questions, although the interviewee was free to offer insights beyond the initial scope of the question. This approach complements the information gleaned from the survey responses by offering more in-depth explanations than possible with survey questions and by expanding upon certain topics into areas unanticipated by the evaluator.

The interviews covered the following issues:

- Governance
- Accomplishments
- Partners
- Sustainability
- Value Added.

The “Accomplishments” and “Value Added” categories will be discussed in the operations section, whereas the other categories pertain to the formation and implementation stages.

### ***Governance***

This set of questions were concerned primarily with the governance structure of the organization. The convener was asked questions about the organization of the MiRSA, such as the number of conveners, the committee structure, and association with other organizations. The responses are basically informational; opinions about the effectiveness of the organization were reserved for the section on issues and barriers. Three of the MiRSAs could be considered new collaborative entities (Lake Michigan College Emerging Technologies, Capital Area

Manufacturing Council, and Upper Peninsula Line Tech program), whereas the other 10 were created from or associated with pre-existing collaborations.

Nine of the MiRSAs targeted the health care industry, and all of these were based on pre-existing organizations, which is not surprising because of the existence of hospital industry associations, area councils on aging, and so forth. The new MiRSAs targeted manufacturing and electrical utilities. Many of the health care MiRSAs expanded the reach of the pre-existing organizations by including additional partners such as educational institutions, MWAs, or additional employers, or by expanding geographically.

MWAs convened nine of the MiRSAs, with as many as five MWAs serving as co-conveners for one RSA. The other four MiRSAs were convened by a labor-management consortium, an arm of a community college (2), and a nonprofit community foundation. Those that were associated with a pre-existing organization tended to organize quickly and effectively, but that was not always the case. Interviewees from one MiRSA, which had been built on a pre-existing organization, reported that it was difficult at first to blend the decision-making process of the parent group, but that was eventually resolved.

Many of the MiRSAs adopted a formal structure. They created committees to pursue the several tasks that they had identified as important in addressing the workforce issues facing employers in their regions. The number of committees typically varied. A few took a more informal approach and relied on the efforts of loaned staff from another organization or staff they hired through their funding to do much of the work. However, most of the MiRSAs that had paid staff also pursued a structured approach, and the combination proved to be the most successful, as reported by the interviewees.

### *Partners*

The second topic that was investigated during the on-site visits was the involvement of partners in the MiRSA. In general, partners included employers (profit-making or nonprofit; or associations of employers), educational institutions, and economic development agencies. The conveners were asked how they went about engaging partners; and employer or educational partners were asked about their reasons for becoming involved and what they expected. For the most part, the conveners were well-satisfied with the engagement of their partners. The most successful engagement of partners brought together the MWAs, employers, and educational institutions. In many instances, this trio of partners had not been brought together before. Not surprisingly, the MiRSAs that seemed most successful in bringing together employers and MWAs were those where the convener was an MWA or included an MWA, which, of course, occurred in the vast majority of cases. The engagement of educational institutions was somewhat less common, although we heard of many instances where solid collaborations had formed, even though it might have been the first time that the educational institutions had been engaged in regional collaboration efforts with employers. The most common type of educational partner was at the postsecondary level, primarily community colleges and occasionally a private college or public university. K-12 institutions were less likely to be involved. Even for those MiRSAs that organized summer camps for middle schoolers and high schoolers, it did not appear that the K-12 school districts were as involved as the others.

One measure of engagement is attendance at meetings. Satisfaction with attendance ranged from poor to excellent. Several factors affecting attendance were offered. One of the

issues for some of the more rural MiRSAs was the distance that the partners had to travel to attend meetings. While email was used extensively and websites established, most agreed that in-person contact was necessary to form the bonds for successful interaction. While it was necessary for some of the MiRSAs to encompass a large geographical area in order to achieve the critical mass of participants, some had expressed a desire to reduce the size of the area to make attendance more manageable. A useful strategy used in a couple of the MiRSAs was to convene subgroup meetings that involved participants from smaller geographic regions. For example, the Northwest Michigan RSA held subregional meetings. The UP Health Forum met formally three times a year, and in the fourth quarter of the year, meetings were held at various sites around the region.

Another important facet of engaging partners was the manner in which meetings were conducted. Many partners expected the meetings to be run “crisply” with a set agenda. This request was expressed most often by employers. Also, partners appreciated meeting regularly, instead of on an as-needed basis.

Many of the partners mentioned that one of the reasons for their involvement was the opportunity to get to know their counterparts in similar organizations and to have the time to share mutual concerns and issues. Participation in the MiRSA gave them that excuse to travel the distance and take the time to get together, something they would not do without that opportunity. Partners, particularly business partners, also said their involvement in the MiRSA allowed them to become better acquainted with MWAs and educational institutions, often for the first time. Several employer partners expressed surprise in learning about the services that MWAs could provide them and admitted that they had not known that the MWAs could meet so

many of their needs as employers. The same was said about getting to know educational institutions. The ability to bring the mix of these partners to the table was highly valued by most partners.

Engagement is measured by more than attendance at meetings and interaction with partners. Another dimension is their involvement in the decision making. This involvement is particularly critical for employers, since the fundamental motivation of regional skill alliances is to bring together the relevant regional stakeholders to address the workforce needs of business. Nearly everyone interviewed was satisfied that employers had taken the lead in determining their needs and how to address them. When the evaluation team questioned interviewees about specific activities that a MiRSA had identified as a primary workforce need of employers, the response was a resounding affirmation that it indeed was what the employers had identified and supported.

Another dimension of involvement is support from the partners in the form of cash or in-kind contributions. One of the requirements in the application to be selected as a MiRSA was the commitment from business for such support. It was anticipated that the employers would value the benefits of participating in the MiRSA to the extent that they would be willing to pay for services after the MiRSA funding had ceased. By the end of the second year, several employers had made such a commitment. One MiRSA set up a system of membership dues for all those who participate. Funds from the dues are expected to sustain the MiRSA into the future.

Several interviewees were concerned that the key decision makers, particularly from business but also from the educational institutions, were not always present. In some cases, the

appropriate person attended and participated in the initial meetings and then delegated responsibility to a subordinate, most often from the human resource function of the organization. This was particularly true of the hospitals, although senior-level people were at some of the meetings that the evaluators attended. Yet, most expressed satisfaction with the representation of the appropriate decision makers throughout the process, ranging from strategic planning to implementation.

### *Sustainability*

Partners and conveners were asked about sustainability of the MiRSA. As inferred in the previous section, sustainability is tied to partner engagement. The thought is that the more partners are involved in the MiRSA and the more value they receive from their participation the more likely they will be willing to contribute to the future operation of the MiRSA. We found a relatively high correlation in the survey responses between employer engagement and resource adequacy. However, from the interviews, engagement does not necessarily lead to sustainability. Several MiRSAs that reported high satisfaction with employer involvement were not confident that employers would be willing to contribute financially to sustain the operation after the MiRSA grant funds were depleted. Furthermore, employers who expressed high satisfaction with the benefits received from their involvement in the MiRSA did not necessarily support or commit to support the MiRSA with cash contributions. One MiRSA instituted and another is considering implementing a system of membership dues for participants. The one that had successfully established such a funding system is set up as an association that strives to put together programs and services of interest to the group of manufacturers. They report that it

covers 85 percent of the second year's budget. A third MiRSA reports that they will use the dues structure of their parent organization to sustain them into the future.

MiRSAs are considering other means to address sustainability. Several are considering applying for grants from outside sources, and two have already tied into a sizable, community-wide grant from the federal government for the next several years. A few others are counting on the "parent" organization to provide future funding. In this case, it is not clear whether the MiRSA simply resorts back to the pre-existing organization to provide the same services and networking or whether it remains in existence and receives financial support. Another MiRSA is relying on the MWA for additional funding, most likely through selling services to the MWA as a contractor, but nothing definite has been worked out. Therefore, it appears that only a few of the MiRSAs have a solid commitment for future funding at the time of the last interview in the spring of 2006.

### *Technical Assistance*

Staff from the Department of Labor and Economic Growth offered technical assistance to the MiRSAs. During the grant application process, staff conducted several information forums around the state, which attracted a large number of participants. After the grantees were selected, staff worked closely with each MiRSA to make sure that they had access to information such as labor market information and examples of other regional skill alliances. The State also provided customized labor market information analyses upon request. Staff also attended meetings of the MiRSAs on a regular basis.

Those interviewed found the technical assistance to be helpful and appreciated the attention given to their needs. They recognized that due to the quick ramp up of the program that staff knowledge and expertise was evolving along with that of the MiRSA staff and participants. One issue of concern that was raised was the seemingly unrealistic expectations on the part of some State staff regarding the pace of progress and the significance of their accomplishments. Some respondents believed that much of what was expected before the grants were submitted in terms of forming partnerships and gaining commitments should have been considered part of the formation process after the grantee was selected. In one or two instances, MiRSAs expressed concern about the appropriate balance between local control and State involvement in the MiRSA planning process, which was triggered by the state questioning the priorities set by local employers. Several interviewees praised the State's effort to convene the health care-related MiRSAs so that they could share best practices and common concerns.



## **7 OPERATIONS STAGE**

The operations stage consists of managing and sustaining activities that serve participants through the first two years of the MiRSA. By the nature of a demand-driven organization, each MiRSA has identified strategies that are tailored to meet the specific needs identified by the employers within their targeted industries. While many of the MiRSAs have identified the health care industry as the one that faces critical workforce shortages, their approach to addressing these needs differed. Some have focused on acquainting the future workforce (middle school and high school students) with health care occupations through organizing summer camps. Others have pursued more immediate solutions, such as directing incumbent worker training funds administered by the local MWA to health care workers. Still others have taken an intermediate route by coordinating the standardization and modularization of health care curriculums in local training organizations.

### **Activities**

From examining the monthly progress reports submitted by the MiRSAs and our interviews with partners, it appears that most of the activities that were planned have been implemented. As mentioned in describing the methodology, it is not possible to assess independently the net impact of these activities on the employees and employers within the targeted industries, for several reasons. First, many of the activities have long-term consequences, such as the summer camps, so that the effects will not be observed for many years. Furthermore, some of those interviewed identified systemic change as their main goal, and this is difficult to identify and quantify. Second, most of the activities that could have more

immediate effects, such as short-term training, are funded by other workforce programs such as IWT training. Attributing the success of these programs to a MiRSA is not appropriate. Third, activities related to curriculum changes are intertwined with the benefits of educational programs, the benefits of which would be difficult to apportion to the MiRSA, to the educational institution, or to the students attending.

Therefore, our approach was to rely on the responses of those interviewed to questions regarding accomplishments and value added to assess the success of the activities. As previously mentioned, this does not provide a definitive assessment but conveys the satisfaction of those involved in the strategic planning and implementation of the activities and, from the employers' perspective, of one of the consumers of the activities. Furthermore, because of the variety in activities, we provide a general assessment of the value placed on these activities. In addition, we were not able to interview all employer partners, nor were all employers in the targeted industry participating in the MiRSA, so the impressions may not represent the opinion of all possible partners.<sup>20</sup>

Before discussing the responses of the interviewees, it is important to repeat the findings from the survey related to client activities. Those who responded to both the 2005 and the 2006 survey revealed a significantly higher level of satisfaction in the activities in the second year of operation compared with the first. While the responses were related primarily to curriculum

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<sup>20</sup> During the site visits to many of the MiRSAs, we asked about the approximate percentage of sectoral involvement that had been obtained. The answers were generally gross approximations that we enumerate here to give the reader a general idea of the extent to which the MiRSAs had penetrated the industry. It seemed clear that the MiRSAs had contacted virtually all of the employers in that sector in the region. However, actual involvement in the RSA activities seemed to be dependent on employment size. For the health care MiRSAs, generally a very large share—80 to 100 percent—of the hospitals or nursing home chains participated. Among the smaller health care providers, roughly 10 to 25 percent of the employers participated in activities.

development and assessments, they still offer a reading of the progress in implementing client services among the MiRSAs.

Those interviewed generally confirmed the satisfaction in the progress of activities. They cited accomplishments such as committing IWT funds to train 87 workers in long-term care facilities, placing 250 in long-term care facilities, taking responsibility for reducing vacancy rates to below 5 percent, providing scholarships from WIA money for incumbent hospital workers, obtaining a grant to develop career ladder programming in nursing, holding a regional summit on health care, organizing summer camps, and developing and implementing an internet-based clinical calendar software to reduce wait time for clinical opportunities. These and other accomplishments reported by those interviewed are documented in the site visit write-ups located in the first two appendices at the end of this report. While each accomplishment is specific to the needs of the employers of the targeted industries, the accomplishment that was mentioned most often was collaboration and networking—the ability to bring together partners that had not interacted before.

### **Value Added**

When asked about the value added they have received from the MiRSA, the employer partners first mentioned the collaboration and networking. Many stated that these organizations would not have come together without the MiRSA. Establishing the MiRSA provided the opportunity and the convening organizations supplied the clout to bring the appropriate stakeholders to the table. Some persons who were interviewed also talked about transforming a competitive environment in which employers, and in some cases educational institutions, would

not cooperate into a collaborative environment in which these same organizations were willing to share information, standardize curriculums, and work for solutions to the workforce development issues that they had in common. While many of the pre-existing organizations had established the foundation for these networks, it appears from the comments that in many instances it was the MiRSAs that brought the MWAs, educational institutions, and employers together for the first time.

Many employer partners also stated that the establishment of such a network and the creation of a collaborative relationship with other partners were important for the economic viability of their organizations. The health care organizations, particularly in rural areas, viewed the economic future of their regions as tied to the economic health of their organizations. In many rural labor markets, the decline of manufacturing has placed the health care industry as the number one employer in the region. Unless they have access to an ample pool of qualified workers, according to those interviewed, they face higher costs, higher vacancy rates, the inability to staff positions, and consequently the inability to generate the revenues needed to yield the operating margins required for an economically viable organization.

## 8 SUMMARY OF FINDINGS

### Background

Throughout the state, conveners of MiRSAs are engaged in activities targeted on specific industry sectors. It may be most appropriate to think of each of the MiRSAs as a process and a set of activities. The process involves having a convener entity bring together the key employer and educational actors in a particular sector to “brainstorm” about the problems they face in developing a competitive, productive workforce in the sector, and to prioritize activities to address those problems. The activities are the manifestation of the planning and prioritizing process.

The MiRSA model has several unique characteristics. First, local entities identified the targeted sector. Neither the state nor federal government proscribed the industry sector. Second, the partners in the local region identified the activities that they believed would be most beneficial. Again the state assumes that the local parties know what will work best in their area. Third, the model assumed that the state funding will catalyze other resources that will sustain and enhance the activities of the MiRSA. It is essentially a market test. If employers or other potential funders see value in the MiRSA activities, they will invest in sustaining those activities. If not, then the MiRSA will not survive as an entity.

To determine the value added of the MiRSA initiative, it is necessary to speculate about the appropriate comparison scenario. What is different about workforce development in these regions because of the MiRSA grants? In other words, if the MiRSA program had not come along, what would be happening in these regions? As mentioned, in virtually all cases, the MiRSAs brought together groups or entities that were already addressing “a piece of the puzzle.”

So, in theory, the value added will be the payoffs to the process of networking or forming collaborations between organizations and entities that had been generally operating in parallel prior to the MiRSA initiative. These payoffs will take the form of specific activities and information sharing that will solve workforce development issues or problems and lead to improved competitiveness and regional economic growth.

Finally, it should be noted that it is difficult to evaluate the MiRSA effort because of its decentralized structure. Usually in evaluating a state or federal program, there will be a mission or set of objectives against which to which outcomes. In the case of the MiRSAs, the state has allowed local regions to identify the sector, to identify the workforce development problems or issues within that sector, and to prioritize activities that address those problems or issues. The State has set forth criteria that MiRSAs must follow, but the specific goals and objectives differ by MiRSA. Nonetheless, the MiRSA efforts can be assessed by examining their ability to convene and engage partners, identify and address key workforce shortage issues, implement the plan, and execute the operations.

## **Findings**

Given these considerations, the following represents the major observations that we have made about the MiRSAs.

1. Partners appear satisfied that they have identified the appropriate industries to target within their respective regions. They also believe that these industries are critical to their region and that the consortia are addressing issues that can help relieve their labor shortage problems.
2. The MiRSAs have recruited participation widely. For the most part, all employers in the various sectors had been informed of the RSA and invited to meetings. Clearly not all employers participated, but in almost all cases, at least one or two “key”

- employer(s) were active partners. Generally, the employers tended to be from human resources departments rather than CEOs, but it appears that most consortia are satisfied that they have the appropriate people involved.
3. Generally, the involvement of the MiRSAs with education partners was typically with postsecondary institutions. In fact, any representation from the K-12 system was the exception, not the rule. At the postsecondary level, there was usually a representative of a particular department (e.g., nursing or CNA training). A few MiRSAs had broad representation from all levels of the regional educational system.
  4. Most of the MiRSAs had conducted structured planning processes that were based on labor market and other data. They had typically been able to strategically identify priorities from these exercises.
  5. The preponderance of MiRSAs focused on health care. An advantage of this focus was that it allowed the state to convene special sessions that addressed health care issues; i.e., it allowed some specialization at the state level. A further advantage was that health care has tremendous hiring needs, and is the most rapidly growing sector of Michigan's economy. A disadvantage of this focus is that it is not an export-based sector, so the state will reap limited economic development benefits from this concentration.
  6. It was not clear how committed the MiRSAs were to identifying measures of activities and success and following through with a systematic monitoring and tracking system. It appeared that many relied on the requirements of the funding sources that provided training dollars and other education-related funding to do the tracking. Previous research has shown the value of using data and monitoring to keep the partnerships together and working toward a common goal.
  7. As might be expected, the amount of leveraging of resources was fairly minimal through the first year of operation and increased only slightly in the second year. The largest source of leveraged funds was the dedication of some share of incumbent working training funds by MWAs to the sector comprising the MiRSA. Outside of the incumbent worker training funds, we observed that one of the MiRSAs was planning to continue a system of employer dues that it had established, and another MiRSA had established a system of employer dues that it intended to implement. A couple of the RSAs had implemented special "appeals" to establishments in the health care sector to fund a special activity. Others were seeking foundation grants and federal funding.
  8. Employer partners stated that the most significant value added contributed by their MiRSA was establishing the network and opportunities for collaboration. Many believed that the partners convened by the MiRSAs would not have come together without these consortia. The MiRSAs were also credited with transforming a

competitive environment in which employers, and in some cases educational institutions, would not cooperate into a collaborative environment in which these same organizations were willing to share information, standardize curricula, and work for a common solutions to their workforce needs.

## 9 A USEFUL BENCHMARK FOR THE FINDINGS

It is helpful to place our findings for the MiRSAs within a broader context of regional skill alliances. As mentioned in the review of literature, the U.S. Department of Labor (USDOL) initiated a sectoral employment demonstration program that gave funding to 39 local Workforce Investment Boards to convene key stakeholders in their regions. The purpose of the alliances was similar to the purpose of the MiRSAs—to identify target industries that are critical to the growth of their region and then to have employers within these consortia identify ways to address their workforce needs. The amount and duration of funding was similar to that provided to MiRSAs.<sup>21</sup> None of the participants in the national demonstration were from Michigan.

USDOL contracted with the Urban Institute and the Aspen Institute to conduct a process evaluation of 38 of the 39 grantees, which included 26 grantees that received funds to form the alliances and 12 that received funds to implement their strategic plans.<sup>22</sup> The evaluation took place toward the end of the grant period—roughly a year and a half to two years after the initial startup. The evaluation was based on site visits and the review of grant files. The evaluation offered the following key findings that are pertinent to our evaluation of MiRSAs.

### Formation Accomplishments in Benchmark Programs

1. Most of the grantees indicated they built on prior efforts undertaken in the selected sector.

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<sup>21</sup> The grant amount ranged from \$50,000 to \$150,000 for a year to 15-month period. Twenty-six of the grants were to form the groups and identify needs; twelve were to implement their strategies.

<sup>22</sup> Pindus, Nancy, Carolyn O'Brien, Maureen Conway, Conaway Haskins, and Ida Rademacher, "Evaluation of the Sectoral Employment Demonstration Program," Executive Summary, Revised Draft, USDOL, ETA contract number AF-12536-02-30, Task 1, March 2004.

2. Grantees used labor market information, employer surveys, and focus groups, and worked with industry associations to gain an understanding of employer needs.
3. Nine of the 38 grantees were able to attract direct employer financial contributions, while thirteen received in-kind contributions from employers.
4. By the end of the second year, a little less than a third of the grantees obtained additional WIA funding for their sector initiatives, and about a fifth had received additional grants from state agencies, foundations, or USDOL to continue their sector initiatives.
5. Employers expressed mistrust or negative impressions about government workforce development initiatives, and employers were reticent to share information with other employers.

The MiRSA experiences appear to be in line with the first three statements regarding the national experience. All but three of the MiRSAs were built on prior efforts; labor market information and surveys were used extensively to gain an understanding of employer needs; direct and in-kind contributions are an issue but the level of support appears to be higher for MiRSAs. MiRSAs, on the other hand, did not appear to be as successful as the national grantees in obtaining additional funding through grants from foundations, states, or the federal government. As a reminder, a major foundation (the Charles Stewart Mott Foundation) partnered with the State of Michigan to fund the MiRSA initiative, so foundation support has been present since the beginning. A handful of MiRSAs did obtain additional outside funding from various sources. MiRSAs also parted somewhat with their national counterparts on the last item enumerated. Most of the employer partners of the MiRSAs that were interviewed spoke favorably of the WMAs and praised the services and assistance they received. There appeared to be some reluctance of employers to share information, but this seemed to be resolved to a large extent, leading several interviewees to cite the ability to turn a competitive environment into a collaborative environment as one of the major accomplishments of the MiRSAs.

### **Business Needs in Benchmark Programs**

1. Over 80 percent of the grantees chose a target industry that was experiencing a labor shortage
2. Over half of the grantees stated that encouraging growth in the targeted sector was one of the reasons for their choice of industry.
3. Goals associated with improving the competitiveness of the targeted industry were reported by a third of the grantees. Specific issues addressed including improving the image of the industry in attracting workers and facilitating relationships between employers and public training providers, such as community colleges.

Based on the findings of the national demonstration program, it appears that the MiRSAs in Michigan did equally well, and in some instances markedly better, in identifying and addressing the needs of business. Nearly all the MiRSAs had sound documentation of the shortages faced by employers in their targeted industries, and all attested to the fact that the employers were instrumental in identifying their needs. MiRSAs shared similar goals with the grantees in the national program, focusing on attracting future workforce in key professions and building relationships between employers and educational institutions, especially at community colleges.

### **Labor Force Needs in Benchmark Programs**

1. Most grantees defined their population broadly and included more than one target group, such as incumbent workers and displaced/unemployed workers.
2. Recruiting participants was a challenge for more than half of the grantees and a number of grantees changed or expanded their target population over the course of the projects.

3. Many grantee organizations focused primarily on employer needs and then defaulted to working with a target population that could most easily be prepared to meet their needs, and thus were less likely to serve economically disadvantaged populations.

The MiRSAs appeared to have had less difficulty in recruiting participants and eliciting their participation than the grantees in the national demonstration program. Those interviewed did not mention any significant problems. They did cite several successes, such as placing 250 workers in long-term care facilities at one site; 87 in incumbent training programs at another site; and 300 participants attending a health care summit at a third site, to name only a few. There were many other examples of accomplishments specific to the needs of particular employers. As with the national demonstration grantees, most of the training programs initiated by MiRSAs involved incumbent workers. Training was funded through existing programs, primarily IWT programs through WIA, which subsidize training of workers already employed. There was some attempt to establish programs that focused on career ladders for low-wage workers, but the programs appear to be primarily in the planning stage. There were disappointments, as well. One MiRSA was having difficulty attracting students to the second year of summer camps, forcing the cancellation of one camp. It appears that emerging technologies have not yet advanced to the point to create any significant demand for technicians, so the emerging technologies training initiative made little progress in enrolling students.

### **Overall Accomplishments in Benchmark Programs**

1. Ten of the 12 implementation grantees increased training options in their community/region.<sup>23</sup>

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<sup>23</sup> The national demonstration differed from the MiRSA in that only about a third of the grantees received funding to implement programs. The others received funding for planning and convening.

2. Seven of the 12 implementation grantees facilitated career ladders/advancement opportunities, and the same number established new pipelines for workers in an industry, most often targeted at youth.
3. All but one of the implementation grantees undertook projects that enrolled students in training, serving from 24 to 350 individuals. While it was too early to measure job placement rates or wage gains for many participants, several implementation grantees reported that they had exceeded their job placement goals.

Many of the MiRSAs also focused on increasing training options in their region by directing existing WIA incumbent worker training grants to employees in the targeted industry. The MiRSA accomplishments related to these activities appear to be comparable with those of national grantees. One MiRSA reported that it had exceeded a numerical goal that it had set for reducing vacancy rates in the health care sector in its region.

## **Summary**

Therefore, for most dimensions it appears that the MiRSAs did as well as, if not better than grantees from a similar type initiative. MiRSAs have been successful in forming viable groups of engaged partners that have identified the needs of employers within their targeted industries. Most of the MiRSAs have been successful in implementing most of the items included in their strategic plans, and their employer partners seem satisfied with the results. As with the national program, most of the MiRSAs were built upon prior efforts undertaken in the specified sectors. Training dollars directed toward the targeted sectors came from existing sources, primarily WIA funds, which may have been used in other sectors if not for the efforts of the MiRSAs to direct monies toward their sectors. Many of the MiRSAs are in the same sustainability situation as their national counterparts in that they are uncertain of their future

funding once the MiRSA funding runs out. A few have secured funding through membership fees and outside grants, but others are still exploring possibilities.

## **10 CONCLUSIONS**

At the time this report was written, thirteen MiRSAs from the first phase of the Department of Labor and Economic Growth's initiative have been in operation for nearly two years. Most of these MiRSAs have formed strong partnerships with key stakeholders including employers in the targeted industry, educational institutions and Michigan Works! Agencies and Workforce Investment Boards. The MiRSAs identified key industries that faced labor shortages. Health care industries were predominant, with nine MiRSAs targeting that sector. The other sectors included manufacturing, construction, and utilities. In most MiRSAs, employers within the targeted industries seem to have taken the lead in identifying strategies to address their workforce issues. Educational and workforce development partners were instrumental in helping to carry out those strategies. Accomplishments varied depending upon the scope and type of activities, but in all cases, employer partners were satisfied with the results.

### **Low-Wage Workers**

One of the goals of the MiRSA initiative is to focus on low-wage workers. Without specific information about the employees who were impacted by MiRSA activities, it is impossible to make a firm assessment about the success of the initiative in achieving this goal. It may be said that many, if not most, of the sites emphasized entry-level positions, such as home health aides or certified nurse assistants. Furthermore most MiRSAs facilitated the development of career ladders that described the many pathways that low-wage workers could follow in order to succeed in sustainable careers. In short, the MiRSAs generally supported the overall goal of focusing on low-wage workers, but it is difficult to gauge their success at attaining that goal.

## **Value Added**

When asked about the added value that the MiRSAs had contributed to their sectors and regions, employer partners responded primarily with an appreciation of the MiRSAs bringing together organizations that may not have come together without this initiative. They also noted that the availability of funds from the MiRSA initiative to convene the groups and the redirecting of funds, primarily training dollars, from other sources, was beneficial in helping to address their workforce needs. Nearly all employer partners were committed to remaining engaged with their MiRSAs.

The networking and collaboration that occurred through the MiRSA activities seemed to be an unqualified benefit of the MiRSA initiative. As we have argued, it was impossible to estimate the economic value of the MiRSAs within the short timeframe of our evaluation study and with a paucity of rigorous data. After visiting the sites twice, reviewing several months of progress reports, and analyzing survey responses, we have formulated hypotheses about processes or factors that seemed to be correlated with effectiveness and have identified some policy or funding changes that DLEG may wish to consider in future collaborative efforts.

- Several of the MiRSAs had a paid director/convenor, usually a consultant, who could devote attention to convening the key stakeholders and administering the initiatives; others didn't. The presence of a director seemed to be an asset for the MiRSA and is probably the model to emulate.
- A general lesson that can be learned from the MiRSAs is that business-education-workforce development collaboration is not costless. It is an investment with risk. Larger geographic areas, especially those that involve multiple labor markets, contribute substantially to the cost of collaboration. We would recommend that MiRSAs should be funded within a single, well-defined labor market of a manageable size so that partners can focus on and identify with specific initiatives and so that all can meet regularly without traveling great distances.

- Some of the MiRSAs felt that their initiatives had been blunted by CEOs or CFOs who were not familiar with the goals or programs that partners wanted to implement. The lesson seems to be that these regional skill alliances should make sure that there are communication conduits to the highest executives in partnering firms. Perhaps the best approach is to make sure the key stakeholders/partners, particularly from the businesses, are at the table initially so that they can lend their leadership and clout to convening the appropriate stakeholders. Once the CEOs/CFOs have been involved, then responsibilities can be delegated to others in the organization such as human resource staff.
- The MiRSAs all seemed to have engaged successfully in strategic planning. The lesson seems to be that the formation stage is crucial. Critical workforce issues should be identified through the use of accurate, recent data. Alliances should engage employers, educational entities, and MWAs first and work together on identifying issues and constructing a strategic plan to address them.
- A substantial cost that is incurred in the formation of effective collaborative efforts is the time that employers and educational partners invest in meetings and other activities. To maintain their involvement, time use must be effective and efficient. Criteria that should be applied in the choice of activities are that the alliances should focus on initiatives that require and can benefit from the collaboration of all partners, and initiatives should be unique from other similar efforts and add value to the efforts of the MiRSA.
- As the entities move into the implementation and operation stages, they need to continue to engage partners so that all participants feel like they are contributing and therefore will remain committed to the initiative and can benefit from the collaborative efforts of each partner.
- With intense competition for funds and given the importance of accountability, it is vital that alliances establish performance measures and commit to tracking those measures and using the outcomes as a means to engage the partners and focus on mission and purpose.
- Many respondents, especially those from the MiRSAs that were newly formed, felt that a single year's funding was problematic. They felt that funding streams should be structured so that there is additional money available from the initiative to fund activities identified by the MiRSA that are critical in addressing the workforce shortage issues. Such funding would likely be graduated, so that in the initial, formation stage, the funding level would be the highest. Then assuming that the collaboration gets off the ground, additional years of funding at smaller and smaller levels would be available to allow the MiRSAs to find sustaining sources of funds.



**APPENDIX A**

**FIRST SITE VISIT REPORTS**



## **Site Visit Report**

**RSA: MID-MICHIGAN CONSTRUCTION ALLIANCE**

**Date of Visit: February 28, 2005**

### **Activities/Interviewees:**

I attended a meeting of the project team for the Mid-Michigan Construction Alliance (MMCA). The attendees were Jeff Cole, President of the MMCA and chair of the project meeting; Jen Schulz, Program Administrator; Mark Phillips, MMCA Research Coordinator; and Emerson Ohl, MMCA Outreach Administrator. Mike Crawford, Vice President of MMCA sat in on the meeting for a few minutes, but left because of another appointment. I interviewed all of these individuals (except Crawford) during the course of the meeting. Also present was Sue Schaible, from DLEG.

### **History and Governance Structure**

The convener for this MiRSA is MMCA, which is a labor-management collaborative organization in the Ingham County/mid-Michigan area. The MMCA was started in 2002, and its main purposes are to foster labor-management cooperation in the construction trades, to facilitate customers searching for reputable contractors, and to develop a skilled workforce in the construction trades.

The MiRSA grant is seen as a way to address the third of these purposes. A small portion of the MiRSA grant is being used to offer e-commerce seminars for contractors at Lansing Community College, but the primary focus of the grant is to work with K-12 school systems to disseminate career information about construction trades, and to promote apprenticeships as viable conduits to well-paying careers.

The governance structure of the MiRSA seems to be quite informal. The project team meets on a weekly (or less often) basis to discuss progress and plans. Jen and Mark are responsible to Jeff and Mike, who are responsible to the Board and membership of the Alliance.

### **Accomplishments**

The MiRSA seems to be making progress. The computer and internet training seminars have been scheduled, and by the time of this report, the first workshops will have been held.

The project staff – Jen and Mark – have been in contact with several school districts' counselors, have attended at least one career fair, and have scheduled attendance at least one other. The staff's goal is to reach all of the school districts in the three-county area.

While it is not funded by the MiRSA, staff have interacted with the students in a 12-week construction class offered by Lansing Public Schools. This curriculum, which is in its infancy, seems to be promoting considerable career interest in construction trades.

### **Barriers/Issues**

The project team did not dwell on any particular barriers/problematic issues. They felt that the expectations of the state regarding the MiRSAs were fairly clear, although they had gone through several iterations trying to get their actual grant in place. Conversely, the staff felt that their goals and activities were also clear – offering the e-commerce training and getting career awareness and exploration information to as many school districts as possible.

In the course of my discussions with the MiRSA staff, they did mention an attitudinal barrier on the part of many counselors. The staff felt that many of the counselors were not aware of the many advantageous opportunities in construction, and were not particularly open to directing students that way.

### **How to Engage Partners**

Engaging owner and union partners in this MiRSA did not seem to be an issue because the entire enterprise is a function of the alliance, which is a membership organization. The project staff indicated that the full membership had been apprised of the MiRSA, although it seemed to me that members of the Alliance were not engaged in the efforts to contact local school districts or to participate in career fairs.

The strategy for engaging education partners was to rely on Mark, who was formerly a teacher, and thus had good contacts within some of the school districts and who “spoke their language.”

### **Interaction with State/Programmatic Suggestions**

The MiRSA staff felt that state personnel had been very supportive and helpful. Their RSA portfolio manager was in constant contact, and was very helpful. The MMCA staff felt strongly, however, that apprenticeships had been left out of the governor’s postsecondary education initiatives, which was unfortunate because apprenticeships can lead to stable, well-paying careers. The MiRSA staff did indicate, however, that they agreed with the general gist of the initiative toward getting more individuals with college credentials because many construction occupations now require them.

Another issue, although not seen as a major problem, was learning how to navigate the state’s bureaucracy. The MiRSA grants are in the Department of Labor and Economic Growth (DLEG) as is the administrators of career and technical education. However, the state’s administrative apparatus for counselors is in the Department of Education.

## **Value Added**

The value added of this MiRSA grant is going to take a few years to surface. It will be manifested in the quality of the workers that enter into the industry. By consolidating the career information that is distributed to schools by the various Joint Apprenticeship councils and by attempting to reach a wider array of districts than has previously been done, the MiRSA has ambitious plans to attract a much higher “quality” student into its occupations and jobs. The benefits to employers will be higher productivity and reduced turnover. The benefits to workers will be more stable, and higher paying, careers.

The MiRSA staff indicated that the MMCA had been pursuing many of the same activities prior to receiving the grant, but at a much slower pace. Thus the value added of the grant is to accelerate the pace of disseminating career information, which may have quite positive outcomes, not the least of which would be to get higher quality entry-level workers into construction occupations sooner.

## **Conclusions and Problems/Issues**

This MiRSA seems to have gotten off to a slow start and has gone through several iterations with the State to get its contract straight. However, it seems as though the project team is now “together” and beginning to make progress. The goals and intent of the MiRSA seem to focus on information provision, rather than training per se. The e-commerce training is intended to upgrade the skills of contractors by providing them with computer skills and (construction) business software. The main activity being undertaken is a concerted effort to provide career exploration information to students in local school districts.

Thus it would seem that employment and labor market outcomes are not to be expected in the short run. Rather, the MiRSA hopes to influence, in a positive manner, the quality of the construction work force over time.

The strategies being followed by the project team seem solid, well-meaning, and traditional in their approach. Staff are relying on getting into schools and “wowing” young people with well-produced DVDs. We suspect that there will be some payoff in the form of influencing a small number of individuals. However, we wonder whether there might be more substantial payoffs to strategies that are more innovative (“outside of the box”) in terms of target population or services. Is career exploration for high school students really the highest priority need for the industry? Might there be a need to provide upgrade training to existing workers to improve skills or knowledge? Are there dislocated workers from manufacturing who could be targeted and trained to take well-paying careers in construction? Is there some way to collaborate or get involved with postsecondary institutions, e.g. trying to reach individuals who might not complete a bachelor’s degree?

In terms of program delivery, we wonder whether the MiRSA is using effectively one of the primary strengths of the MMCA: its membership. Is it actively working on strategies to get

individuals into pre-apprenticeship activities such as internships? Are members helping to get the career information into the hands of school personnel? Might there be mentor-student relationships that could be formed?

Finally, an issue that should be resolved is getting the MiRSA plugged into the existing workforce development system. There is reportedly very little contact between the MiRSA and the three-county MWA.

## **Site Visit Report**

### **RSA: LAKE MICHIGAN COLLEGE EMERGING TECHNOLOGIES**

**Date of Visit: March 14, 2005**

#### **Activities/Interviewees:**

I drove to the Benton Harbor M-TEC facility and interviewed Robert Harrison, Dean of Occupational Studies and Business Services for Lake Michigan College; Robert Walck, Director of Business and Industry Training, M-TEC; Dr. Chuck Philip, Vice President for Academic & Student Services, Lake Michigan College; and Viki Gudas, Director of Business Services for Michigan Works! Berrien-Cass-VanBuren Counties. After the interviews, Mr. Walck gave me a tour of the M-TEC facility.

#### **History and Governance Structure**

The underlying idea for this MiRSA is to facilitate the State of Michigan's workforce preparation for emerging technologies including microtechnology and nanotechnology. These technologies are projected to become important in many sectors of the economy, especially manufacturing. Many leading academics and research organizations throughout the United States are conducting the theoretical and applied research to develop these technologies. Lake Michigan College wants to be on the forefront of training technicians and other workers for full-scale implementation in the workplace.

The State has recognized that the LMC initiative is an important strategy to support in the State's economic and workforce development efforts. It has attempted to be bureaucratically flexible in that support. Unfortunately that flexibility has led the MiRSA to be caught between agencies and between funding streams with different, sometimes conflicting, rules and regulations.

As I understand it, the Lake Michigan College initiative is a "statewide" MiRSA, but receives no MiRSA funding. It is funded as part of an EDJT grant from MEDC to the Whirlpool Corporation. The main goals of the initiative are to develop a curriculum that can be used in an Associate Degree program in Emerging Technologies and to install a "clean room" at the Benton Harbor M-TEC that can serve as a laboratory for this curriculum. The intent is to develop a rigorous curriculum that would be credit-bearing. Furthermore, Lake Michigan College would provide that curriculum to any other Michigan postsecondary institution without charge, and staff feel that some of the curriculum may be appropriate for career and technical education programs at the secondary level. They are pursuing an NSF grant to support the latter.

However, the terms of the EDJT grant require that any training that gets provided would be non-credit bearing and would be given only to Whirlpool incumbent workers. The path that

the MiRSA is on will balance these competing aims and requirements by using all or a portion of the curriculum that gets developed to train Whirlpool employees without academic credit.

The project structure is informal. Bob Harrison is directing the effort. Dr. Paige Oxley is developing the curriculum and Bob Walck is handling the architectural design and installation of the clean room. LMC has established an advisory council, which had its initial meeting on February 4, 2005. The purpose of the advisory council is to establish two-way communication with the business community and to assist in the planning and development of the project.

The plan is for quarterly meetings of the Advisory Board. At its initial meeting, the Board did not form committees; however the project staff serve as an Executive Committee.

### **Accomplishments**

The Lake Michigan College staff who were interviewed are strong believers in their program. They felt that the flexibility that the State has attempted to use to fund their initiative and to name it as the 13<sup>th</sup> MiRSA affirmed their positive beliefs. Tangible accomplishments to date are the progress that has been made on the curriculum by Dr. Oxley, and the imminent arrival and implementation of the clean room.

An interesting collaboration that had arisen is a partnership with the local MWA to begin to develop pre-training/job readiness training so that the local workforce could benefit from the emerging technologies training.

### **Barriers**

The staff who were interviewed did not readily identify barriers to progress. They felt that progress was going well. However, it was clear that the apparent conflicts between the MiRSA and EDJT grants is an issue that will require time and effort to resolve. Staff seemed to be concerned about the likelihood of getting into a “lose-lose” situation where the grant requirements would require opposite actions.

The respondents suggested that it would be extremely problematic to get data about the Whirlpool incumbent workers who might get trained into the WIA system. For example, they thought that it was likely that high level executives would be involved.

The staff also thought that a one-year time line was unrealistic for what they were trying to accomplish – develop a curriculum and training materials, install a clean room laboratory, offer training to Whirlpool employees, and disseminate materials throughout the state.

### **How to engage partners**

The college staff indicated that they were quite experienced in conducting meetings that engaged employer or other educational entity partners because their applied training programs all

had advisory committees. The staff felt that the key was to have a well-structured agenda that was “crisp.” They identified for the partners the value added that they would add to the program, and the value added that the program might have for them. They tried to make sure that all participants had a task.

### **Interaction with State/Programmatic Suggestions**

Because of the dual grants, the project staff indicated that they were in frequent contact with State staff. They indicated that they were in weekly contact with Karen Hinkle, of MEDC. They indicated less frequent contact with their MiRSA portfolio manager, Olivia Butler-Robbins.

Staff suggested that there was interaction with state personnel at a higher, more executive level as well, between the College President, Dr. Pappas, and state officials.

### **Value Added**

The value added of the MiRSA grant will be getting the emerging technologies curriculum developed sooner than it otherwise would have been. Furthermore, the MiRSA emphasis on collaboration and partnerships is facilitating earlier realization about the vast potential of emerging technologies by local employers and economic developers. The respondents believed that ultimately, there will be value added to workers in the form of well-paying job opportunities and careers.

### **Conclusions and Problems/Issues**

While walking a tightrope between the requirements of an EDJT grant and a MiRSA grant, the Lake Michigan College Emerging Technologies project is making tangible progress on developing a curriculum for technical training and installing a “clean room” laboratory at the Benton Harbor M-TEC facility. Once the curriculum is developed, the program will face the market-tests of whether other Michigan postsecondary or secondary educational institutions show interest in obtaining the curriculum and whether students will react to occupational demands for the emerging technologies training.

Given the likelihood that these technologies are the cutting edge of the future economy, it would seem advisable for the MiRSA project and state personnel to stay in frequent contact to resolve quickly any grant-related problems that may arise.



## **Early Status Report**

**RSA: SOUTHWEST MICHIGAN HEALTH CARE ALLIANCE**

**Date: December, 2004**

### **Activities/Interviewees:**

This report is based on a telephone interview that took place in December 2004 and on the RSA's quarterly progress report for October to December, 2004. The purpose of the interview was to gauge the early progress on the goals and objectives established by the MiRSA, and to determine the priorities that the MiRSA has set. The MiRSA is "jointly convened." The fiscal agent is the Calhoun Intermediate School District, which is the Michigan Works! Agency for Barry/Branch/Calhoun Counties. However, the Kalamazoo/St. Joseph Michigan Works! Agency and the Berrien/Cass/Van Buren Michigan Works! Agency are also administering the grant.

A "full plate" of activities have been proposed. They are as follows:

- Hold health care summits in year 1 and in year 2
- Increase enrollment in allied health career education from public workforce programs in years 1, 2, and 3
- Use Incumbent Worker Training (IWT) money for skills upgrading in years 1 and 2
- Pilot soft skills training in Barry/Branch/Calhoun in year 1
- Develop skills inventories in Berrien/Cass/Van Buren in year 1
- Increase awareness of one-stop staff about health care careers
- Increase awareness of youth in grades 9 – 12
- Establish registered apprenticeships in health care in year 2

Clearly, this is a full agenda. The health care summits are intended to repeat (institutionalize) a highly successful summit of employers and the general public that was held in Kalamazoo County earlier in 2004. The purposes of these summits are to increase public awareness and recruiting in this sector. The allied health care enrollments are targeted on adult (postsecondary) training at institutions such as Kellogg Community College in Battle Creek. In addition to activities that might attract persons into the industry, the MWAs have also pledged up to one-third of their incumbent worker training funds for health care purposes.

The soft skills training is intended to focus on patient care training, especially for long term health care aides. The skills inventories are a first step in developing career ladders, as well as being a practical planning tool for the Berrien/Cass/Van Buren agency. This MiRSA also sees increasing the knowledge and awareness of one-stop staff about health care careers as an important way to facilitate employment in this sector. Recognizing that an important inflow into health careers comes from young adults making career choices, the MiRSA wants to increase the

awareness of high school youth about health care careers. Finally, the MiRSA intends to establish and promote registered apprenticeships in health care occupations.

## **History and Governance Structure**

The MiRSA is a fairly straightforward collaborative effort of three MWAs. The fiscal agent is the Calhoun Intermediate School District, but the governance of the MiRSA activities seems to be spread evenly across the three agencies. It is a new endeavor, but it builds on prior training and collaborative efforts in the counties served. The soft skills training in Calhoun County had been in the development stage prior to the formation of the MiRSA. A sectoral economic development activity in Kalamazoo County that preceded the MiRSA was called the Regional Edge had included a health care affinity group.

As of this date, the governance structure of the MiRSA seems to be very informal. The individuals leading the efforts at the three MWAs communicate with each other often, and different tasks seem to be allocated across the agencies. Through December, 2004, there is no record of a committee structure.

## **Accomplishments**

It appears as though the individuals from the three convener organizations are quite organized and structured. A preliminary needs assessment survey that will be used to organize the health care summit has been drafted and will go out to employers shortly. Results should be available in the February/March 2005 time frame, and the summit is planned for Spring 2005.

All three conveners included activities for the health care sector in their formal Incumbent Worker Training (IWT) plans for PY 2004. By the end of (calendar) 2004, the Kalamazoo/St. Joseph MWA had already committed funds to a long-term care employer for training 87 workers via two classes offered at M-TEC at Kalamazoo Valley Community College. The other two MWAs had been engaged in marketing IWT training as of the last quarter of 2004. The Barry/Branch/Calhoun MWA was actively marketing with staff from the Kellogg Community College Customized Training Division.

One of the goals of the RSA is to make sure that a substantial number of adults get health-related occupational skills training through the one-stop system. The first quarterly report notes that 35 individuals are being trained through funding from the Trade Adjustment Assistance Act, Workforce Investment Act, and Work First in the Barry/Branch/Calhoun MWA. The Kalamazoo/St. Joseph MWA reports that 83 individuals are receiving health-related training through WIA and Work First funds. The preponderance (85/118) are in certified nursing assistant (CNA) training.

The final activity for which there had been substantial progress was in the development and marketing of the soft skills training program for long-term health care workers. One of the

staff members of the Barry/Branch/Calhoun MWA met with members of that MWA's Long Term Care Initiative to demonstrate portions of a Soft Skills Training Program.

### **Barriers/Issues**

Although it wasn't mentioned in the phone interview or progress report, it seems like a significant issue for this RSA is its geographic expanse. It covers eight counties that span more than 100 miles. Furthermore, the governance structure has the potential to be too decentralized. This RSA appears to be three separate mini-RSAs operating in parallel. There is no doubt that the three agencies communicate with each other, but there appears to be little collaborative effort.

### **How to Engage Partners**

Not addressed.

### **Interactions with State/Programmatic Suggestions**

Not addressed.

### **Value Added**

This RSA is making an effort to facilitate, and inform individuals and employers in Southwest Michigan about, career opportunities in the health care sector. At this point, the RSA has not limited its emphasis to either acute care or long-term care, but rather is pursuing efforts in each. The RSA is undertaking a number of activities, and if it is successful, it will have brought together and formed a network of health care employers, MWA agencies, and educational institutions. (Actually, given its parallel structure, it will probably create three parallel networks.) It will further bring value to the health care sector by allotting incumbent training resources to health care employers, and it will effectively disseminate information to one-stop agency staff, to students, and to the general public about the demand for employment in this sector.

The MiRSA intends to hold health care summits in its first two years. It intends to direct at least 90 individuals into publicly-funded health care occupational training programs. It intends to develop and pilot a soft skills training program for long-term care workers. It intends to serve as a clearinghouse of information about health care careers and career ladders. Finally, the RSA intends to establish registered apprenticeships in health care.

### **Evaluation**

The Southwest Michigan RSA has initiated a number of activities. It seems highly likely that it will achieve the goals that it has set out for itself. The three co-convening MWAs have operated successfully in the geographic area for many years, and many of the planned activities

build on past initiatives or are modeled after activities that have been successfully conducted in the past.

While there is little doubt that the activities that it proposed will get completed, the decentralization of the RSA across three co-conveners and the expanse of the region and population being covered would seem to be anathema to a concentrated, sectoral approach. Nevertheless, the convening organizations submitted a proposal that indicated that three MWAs would essentially work independently on a number of health care related activities. The State awarded the grant, and the RSA is off to a good start toward accomplishing what they proposed.

## **Site Visit Report**

**RSA: MICHIGAN WORKS! THE JOB FORCE BOARD (UPPER PENINSULA HEALTH CARE ROUNDTABLE)**

**Date of Visit: February 3, 2005**

### **Activities/Interviewees:**

The day was spent interviewing various individuals; there were no formal meetings scheduled. The convener agency is the MWA for the central counties of the UP. My site visit was hosted by Joe Esbrook, who is the main administrator of this MWA for its satellite office in Marquette. I started the day by interviewing Joe and then interviewing sequentially two employer partners by telephone, from Joe's office. These individuals were Jan Holt, from War Memorial Hospital in Sault Ste. Marie and Michelle Sands, from Iron City Community Hospital.

We drove to the main office of the MWA in Escanaba, where I interviewed three employer partners and an education partner in a group interview setting. The employers were Peter Jennings from OSF St. Francis Hospital, Jim Husing from Dickinson County Health Care System (by conference telephone), and Mark Bomberg from the area aging council representing in home care for seniors. The education partner was Alan Yeck, from M-TEC at Bay College. After the group interview, I interviewed another key convener staff person, Deb Doyle.

We drove back to Marquette and I interviewed two more employer partners – Gerald Messina, Upper Peninsula Health Care Network, Inc., and Al Hendra, from Marquette General Health System.

Note that two key individuals of the convener's staff were out of town and not interviewed: Gwen Wood and Don Mourand. I was told that Don, a former school superintendent, is the facilitator for the effort.

### **History and Governance Structure**

Several years ago, the WIB had identified a sectoral approach as a potentially feasible strategy for workforce, and consequently economic, development in the area. Apart from the WIB's initiative, health care providers (mainly acute care) in the area had formed a collaborative roundtable in 2002. This collaboration, named the Upper Peninsula Health Care Roundtable, worked with an organization called the UP Health Care Network, Inc. (formed about 10 years ago) to facilitate joint purchasing.

The main workforce issue of concern for the Roundtable was the nursing shortage. It undertook a media campaign to recruit nurses who had left the profession and future nurses to go into the profession. This campaign was funded privately; each hospital contributed \$2500 each.

Along came the MiRSA, which has helped pull the efforts of the roundtable along. Major focuses of the MiRSA are to extend the collaboration to facilities in the western UP and in the eastern UP and to look more broadly at health care occupations and industry (beyond just nursing and acute care.) Thus there has been considerable effort invested in career laddering, and long term care facilities have joined the collaboration.

The MiRSA has set up several committees/task forces as follows:

- The Career Progression group is focusing its efforts on the development of career ladders/lattices for the health care sector; articulation agreements between the educational institutions in the UP (presumably articulating secondary education courses with postsecondary); and recruitment brochures that are uniquely tailored to each employer. I got the impression that this committee was in existence prior to the MiRSA grant because it was formally associated with the WIB's EAG (called Career Connections).
- The Education subcommittee/ task force is working on the development of nursing refresher course with Bay College.
- The Incumbent Worker subcommittee/task force is going to work on how to identify appropriate training to be used for incumbent worker training dollars. When this MiRSA submitted the proposal, there was interest in using incumbent worker training money for medical coding, but the employer partners have placed a much lower priority on this.
- The Economic Development subcommittee/task force will be addressing interfaces with the chambers of commerce and other economic development entities in the UP to see how the MiRSA can support their efforts and vice versa.
- The Website task force will be responsible for developing a website proposed for the MiRSA. This work has been deferred for the time being.
- The Resource Sharing task force will be investigating strategies such as shared staffing across partners as a way to meet some of the workforce demands in the region.

### **Accomplishments**

The staff from the convening agency and the employer and education partners seemed to exhibit some excitement about the MiRSA effort. The group held a strategic planning session on January 17<sup>th</sup> that seemed to help to manageably delimit the goals and planned activities and to foster improved communication and collaboration among the partners despite the fact that poor weather limited attendance.

One of the objectives of the MiRSA was to reach out and facilitate the collaboration with employers at the eastern and western ends of the UP, and that seems to be happening. Individuals from both ends of the peninsula attended the strategic planning session despite the weather.

At this (early) stage in the MiRSA project, there seems to have been positive developments in process and communication, but limited tangible products or accomplishments.

## **Barriers**

Physical distances seem to be somewhat of a barrier in this MiRSA. As its proposal pointed out, the Upper Peninsula covers more area than several entire states, and yet only has a population of about 300,000. The area involved in this MiRSA comprises 15 counties. The distances will impede communication and face-to-face meetings. Several of the individuals who were interviewed spoke about the desirability or necessity of tele- or video-conferencing.

Another potential barrier or issue for this MiRSA is that not all of the partners are on the same “wavelength” in terms of goals. One respondent focused on long-term career recruitment and indicated that the goal of the effort should be on high school programs. As with other MiRSAs, there seemed to be some discrepancies between the interests of long term care facilities from acute care/hospital facilities. Some of the employer partners were confused about whether there were two entities—the UP Health Roundtable and/or the MiRSA.

## **How to engage partners**

The staff indicated that communication was key in getting employer and education partners engaged, and they relied heavily on email. They thought that it was important to have face-to-face meetings occur in all three regions of the UP, and they were considering regional meetings (eastern, central, and western UP).

Staff suggested that meals and setting meeting times for the middle of the day facilitated good attendance since some of their partners had to travel substantial distances.

## **Interaction with State/Programmatic Suggestions**

Staff members indicated that they were contact with state staff on average, perhaps twice per month. They were very pleased with the quick turnaround time that they received.

Several individuals had recently attended the Health Care Meeting at the Henry Center in East Lansing, which they generally thought was valuable, especially the morning session. They did suggest that they would be interested in more time or opportunities for informal networking with other health care MiRSAs.

One of the employer respondents opined that he thought that the State should base continuation funding on a performance basis. “Fund the RSA’s that perform the best.” He obviously felt that this MiRSA was one of the best in the State.

## **Sustainability**

It did not appear like much attention had been paid yet to the issue of sustainability after the grant year. One employer felt like the employer partners were getting value from the MiRSA and would support its continuation with fees or dues. Another employer thought that the answer would be in “fee for services.”

## **Value Added**

Almost all respondents were optimistic about the effect that the MiRSA would have on measurable labor market outcomes. Many respondents felt that the key outcome would be reduced vacancy rates in health occupations, and they felt that getting them down to 5 percent was feasible.

The value added of this MiRSA seemed to be the acceleration of the work of the UP Health Care Roundtable. The grant is allowing the Roundtable to set achievable goals and is allowing the roundtable to reach out to organizations that had not been included in the existing entity due to distances.

## **Conclusions and Problems/Issues**

This MiRSA seems to be on a trajectory that will achieve effective outcomes. I observed clear evidence of enhanced communication and collaboration among members of the health care sector in the UP. Virtually all of the respondents were upbeat and optimistic about the organization.

Nevertheless, the partners have not yet coalesced into an organization with everyone on same wavelength. There is not a consensus on whether the key strategy should be training and recruitment of youth, recruitment of former workers, retention of incumbent workers, or nonstandard practices such as worksharing or cooperative education and training.<sup>24</sup>

Finally, geographic distances are an issue that may impede the effectiveness of the RSA. Employer partners are joining from the eastern and western sections of the Upper Peninsula. The main convening agency is in Escanaba, but the Chair of the group, who represents a major employer, is based in Marquette.

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<sup>24</sup> Note that one of the individuals from this MiRSA who reviewed this report felt that the lack of consensus at this point was advantageous. This individual noted, “I don’t consider the diversity of strategies as a problem issue. The structure of our health care roundtable supports a multi-issue focus to address the complex workforce issues facing the health care industry. The committee structure allows the Roundtable to address multi-strategies to support achieving the ultimate goal of creating a system that meets the U.P. Health Care Industry needs.”

## **Site Visit Report**

**RSA: WEST CENTRAL MICHIGAN HEALTH CARE REGIONAL SKILLS ALLIANCE**

**Date of Visit: March 21, 2005 and April 8, 2005**

### **Activities/Interviewees:**

I attended a meeting of the West Central Michigan Regional Skills Alliance at Irwin Seating Company in Grand Rapids on March 21<sup>st</sup> and followed up that meeting with a telephone interview with Craig Nobbelin, who is the primary staffperson for the MiRSA, on April 8<sup>th</sup>. The meeting was attended by about 10 to 12 individuals representing MWAs, postsecondary education, the Alliance for Health, and employers. It was a tightly run, densely-packed business meeting that comprised discussion of and updates on the five initiatives that are underway: formation of an employer advisory committee, a health occupations summit, an employer survey, an MWA “resource package,” and a health care occupations training and education chart. I did not get an opportunity to interview any of the participants during or after the meeting. So I followed up the meeting with the phone interview with Mr. Nobbelin.

### **History and Governance Structure**

This MiRSA seems to have gotten off to a slow start, but at the time of this meeting, it seems to be starting to make good progress. The Alliance covers 12 counties and is a partnership of five MWAs and an organization called the Alliance for Health. (These six entities are co-conveners; with one of the MWAs—the Muskegon /Oceana Consortium—serving as the applicant organization.)

The West Central Michigan Alliance was formed to respond to the RFP for MiRSAs; however, it was relayed to me that the workforce boards in the region had been focusing on health care for some time prior to the issuance of the RFP. Given the distress that had been occurring in manufacturing, the MWAs looked toward health care as a potential source of well-paying jobs for dislocated workers. It was natural for the five MWAs to team up with the Alliance for Health, which was the Regional Health Planning Agency for the 12 county area.

### **Accomplishments**

The major accomplishment of the MiRSA to date has been putting together the structure and agreeing upon directions to pursue. A strategic planning session was held in January that resulted in the adoption of four general goal areas:

- Increase skilled workers in key occupations
- Establish uniform assessment processes
- Establish and maintain collaborative relationships
- Offer appropriate training

Action items were enumerated for each of the goals.

The participants at the MiRSA meeting seem to agree that an important entity for the MiRSA would be an employer advisory committee, and Mr. Nobbelin indicated that as of the time of our interview, about half of the committee's members had agreed to serve on the committee, and that most of the other potential members had been contacted.

### **Barriers**

The MiRSA seemed to be enjoying a spurt of progress. The only things that were mentioned as possible barriers to that progress were the fact that the coordinator only works half-time and a concern about maintaining employer interest. Up until this point, employers have willingly participated and cooperated; but there was a concern that activities have to remain very focused and "real" or employers would not maintain their interests.

This MiRSA covers a huge area and population, so I asked whether that was a barrier or obstacle. The response that I got was that it was a consideration, but not an obstacle because the area is coincident with the planning region for the Alliance for Health, which has been around since the 1940s, and so staff is accustomed to the geographic spread.

### **How to engage partners**

Up until this point, the MiRSA has had monthly meetings mainly attended by the co-conveners and some of the educational partners. Keeping staff from these entities engaged has not been an issue. Nevertheless there seems to be a commitment to keeping meetings sharply focused and to follow-up with individuals who have not been able to attend to make sure that they get the information and their opinions are heard. The "rubber will hit the road" for this MiRSA with the meetings of the Employer Advisory Committee, which are imminent. The Summit activity will also be a mechanism for engaging employers.

### **Interaction with State/Programmatic Suggestions**

The coordinator, Mr. Nobbelin, indicated that he has had very little interaction with this RSA's portfolio manager, Ms. Mary Dismuke. He feels that the requirements of the initiative are minimal, and well understood by the convener agencies. His only suggestion was that it might be helpful to promote more exchange of information among the health care MiRSAs. For example, he felt that a listserv or email exchange system would be helpful.

### **Value Added**

The value added of this MiRSA will emanate from the collaboration of the MWAs and the health care sector; a collaboration that has not been strong in the past. The MWAs have considerable capacity in dealing with training and placement and have access to the pool of

employable workers; however they have not been very active in the health care sector. It was suggested that this might be because of the complexity of the licensing and training requirements of most occupations in health care and because there has been historically an emphasis on manufacturing, which has been and continues to be the largest employment sector in the area. On the other hand, the other partner in the collaboration—the health care sector—was characterized to me as being somewhat insular. Health care employers and the health care programs at educational institutions communicated with each other and worked together, but did not participate actively in workforce development/training initiatives. So there appears to be considerable value added in bolstering the relationship between the two entities.

## **Conclusions and Problems/Issues**

This MiRSA appears to be making progress on its mission after having a slow “take-off.” Materials that were distributed at the meeting that I attended were not just rough drafts – they showed that a lot of time and effort had gone into them. The next couple of months are key. Getting the Employer Advisory Committee up and running and conducting a well-attended summit will demonstrate the MiRSA’s viability.

Some issues that this MiRSA faces, in my opinion, include sustainability, reaching out to the K-12 educational system, and focusing more tightly on specific occupations within health care. Having gotten a late start on progress, it is not at all surprising that this MiRSA has not focused much on sustainability after the first year of funding. However the year is more than half over, and continuation of effort after the funding period will become an issue in the coming months.

My observation was that the co-conveners have met with and collaborated with the postsecondary institutions in the region, but had not focused much on the K-12 system, although at the meeting, the suggestion was made to include ISDs and Tech Centers to the inventory of training programs. It seems to me that the inventory of training programs as well as other career information should be disseminated to high school students. Furthermore, many of the districts or intermediate school districts in the region operate career and technical education programs in health care fields. Finally, with limited resources, it may make sense for the MiRSA to hone in on the specific occupations within health care that it determines to be highest priority. In rough terms, the MiRSA needs to decide on whether initiatives should address entry-level, lower skilled occupations such as aides or on more mid-level occupations such as LPNs or RNs. Furthermore, it needs to prioritize its emphasis on specialties within occupations: long-term care fields, i.e., geriatrics, versus acute care needs.<sup>25</sup>

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<sup>25</sup> Individuals from the MiRSA reviewed this report, and addressed each point in this concluding paragraph. These individuals indicated that the partners were well aware of the ISD Career Development Education and Tech Centers, but that they initially focused on post-secondary training because it offered a quicker potential return for the significant number of displaced workers in the area. Second, they indicated that their plans for disseminating the inventory of training programs included all schools, including the ISDs, once the data have been verified and reviewed. Third, they indicated that the prioritization is underway and will be completed via the Employer Advisory Committee, employer survey, and summit activity.



## **Site Visit Report**

**RSA: NORTHWEST MICHIGAN REGIONAL HEALTH CARE INDUSTRY SKILLS ALLIANCE**

**Date of Visit: March 8, 2005**

### **Activities/Interviewees:**

I attended a full committee meeting of the MiRSA held at the Traverse City Michigan Works Center in Traverse City. Approximately 22 members of the committee were present. Committee members in attendance represented area health care employers, local community colleges, and universities, career tech centers, the regional Council of Governments, the intermediate school district, and the Michigan Works Agency. The State RSA technical team member and a consultant were also present. The meeting was well organized, informative, and well attended considering the snow conditions. Several committees reported on their progress and the consultant who designed and administered the health care survey gave an overview of the results. The presentations were supplemented with handouts.

After the meeting, I interviewed three employer partners—Jim Wood of Memorial Medical Center of West Michigan, Dawn Ewald of Mercy Hospital Cadillac, and Bill Brundege of Munson Medical Center—four educational partners—Mike Hill of TBAISD, Marguerite Cotto of Northwest Michigan College, Maria Somsel of Baker College, Jennifer Gaffke of WEX/MISS Area Career Tech Center—and Carol Elliott of Michigan Works. I also interviewed three members of the convener's organization—Alton Shipstead, Jan Warren and Elaine Wood of the Northwest Michigan Council of Governments.

### **History and Governance Structure**

The MiRSA is based upon several regional initiatives that were underway before the Northwest Michigan Council of Governments (NWMCOG) convened key industry and educational partners to compile and submit a proposal to establish the current MiRSA. According to the MiRSA proposal and conversations with the conveners and partners, five initiatives were particularly important in the creation of the MiRSA. The first is the development of the Health Education Institute, which is a collaborative partnership of Northwestern Michigan College and the Munson Health Care Network. This network includes six hospitals plus educational and workforce agencies. The second important element in the creation of the MiRSA has been the work of the Community Services Network, which represents a collaborative network of agencies providing services to older adults in the region. A third is the North Central Council of the Michigan Health and Hospital Association. This organization, through its members and association with educators and workforce agencies, undertook a study of workforce needs in the health care industry and established recommendations and priorities for action. Fourth, the Northwest Michigan Workforce Development Board included the study's recommendations as one of three major goals in the regional strategic planning process. Fifth, after participating in the Day of Dialogue, convened by the Michigan Department of Career

Development in 2001, NWMCOG brought together most of the partners involved in the current MiRSA, to create an entry-level training program called Basic Health Care Training. The purpose of the MiRSA was to continue to pursue these issues facing the health care industry in the region and to strengthen the collaboration among the various partners.

One of the first initiatives of the newly created MiRSA was to contract with an independent consultant to survey regional health care providers as a way to assess their needs and perceptions regarding training, recruitment, and retention of direct care staff in the region. Nearly 300 surveys were sent to health care organizations in 11 counties, and 70 useable surveys were returned. The results were reported to the full committee at the meeting I attended on March 8. The results focused attention on the need for more resources to train health care workers, for prospective workers to understand the demands and rewards of the profession, and for students to have a greater awareness of opportunities in the health care industry.

The MiRSA has established a work plan with four main goals:

1. Provide systematic, high quality training at all levels for health care providers within their region,
2. Improve retention of health care workers,
3. Increase the number of people entering health care occupations,
4. Create systemic and cultural change.

The proposed activities to achieve these goals include a complete system of regularly scheduled training that is uniform across the region and the state, career development services and better understanding of the nature of direct care work, summer camps for students to increase their aware of health care professions, and the creation of a solid recruiting and marketing plan.

The MiRSA has created several committees to help carry out the priorities resulting from the survey and previous work. These committees include:

- Curriculum Committee
- Recruitment Committee
- Website Committee
- Steering Committee.

A major goal of the Curriculum Committee is to work toward establishing a standard training format that meets the needs of all types of health care organizations, gains Continuing Education Units while meeting state standards. Toward this end, the committee has engaged a consultant to compile and decipher commonalities across job descriptions from the partner organizations. Concurrently, the committee will work with the Direct Care Workforce of Michigan to develop a standard, comprehensive CENA training program that includes dementia, cultural dynamics, life skills and both in-home and institutional care settings. They believe that by standardizing curriculum workers will not have to travel downstate for training but can obtain it locally. This would significantly reduce the cost of training, which now is prohibitive for many workers. The committee is also looking into mentoring and apprenticeship programs.

Another avenue of pursuit is to set up summer camps for youth to acquaint them with health care occupations. They are partnering with organizations that have experience with running summer camps. Tech prep money and youth funds from WIA for disadvantaged students are available to help students defray the cost of the program.

The MiRSA is administered so that the bulk of the funds are put into training. Funds are also used to develop a website, provide technical assistance for curriculum, and for recruitment and marketing. No MiRSA staff are funded from the MiRSA grant; only the consultant receives MiRSA funds. The NWMCOG Board exercises oversight and the Workforce Board lets contracts.

### **Accomplishments**

The staff from the convening organization suggested several accomplishments of the MiRSA to date. One is the ability to bring the various partners together to discuss common issues affecting their business and to act upon them. Another accomplishment is the completion of the survey, which they felt had a good response rate and offered valuable insight into the needs and perceptions of health care organizations in their region. Staff also pointed to the commitment from health care organizations to employ those who go through the training as another accomplishment.

The employer partners suggested that collaboration with other employers and with educational institutions to bring about training and run summer camps as major accomplishments. They offered that without this collaboration, they could not have provided these services on their own.

The education partners also cited the completion of the survey as a major accomplishment of the MiRSA. They felt that the survey questions responded to their needs and offered useful information, and that the MiRSA agenda is aligned with their interests. The education partners also appreciated the opportunity to collaborate and network with employers, workforce agencies, and other educational institutions. They gave high marks to NWMCOG for their ability to facilitate the setting of priorities for the MiRSA and then effectively and expeditiously accomplishing their tasks.

### **Barriers**

The partners in the MiRSA were positive about the ability of the alliance to convene the relevant partners, identify the employers' needs, keep them engaged, and to accomplish the agreed-upon goals and objectives. They did point to insufficient funding and the need for more collaboration among the health care MiRSAs in the state as barriers to progress. In addition to the low level of funding for actual employer training and recruitment, they also found some of the requirements of the MiRSAs imposed by the state, such as monthly reporting and the state request to accelerate training, as unfunded mandates. Several partners mentioned the missed opportunity to collaborate more fully with other health care-related MiRSAs to learn from each

other and to develop standard curricula across the state for training health care workers. They emphasized their existing collaboration with the Northeast Michigan RSA.

### **Engaging Partners**

Partners and the conveners seemed satisfied with the engagement of MiRSA partners. The major hospitals in the region and several extended health care facilities and home health care organizations are active partners. Representatives of these organizations appear to attend meetings regularly and participate in the committees. The conveners believe that these organizations will stay engaged as long as they see tangible benefits and get results. Representatives of educational institutions are also actively involved. Because of the large geographical area, the MiRSA conveners place heavy emphasis on communication and in holding committee meetings concurrently in order to minimize travel time.

### **Interaction with State/Programmatic Suggestions**

The MiRSA partners supported in general the focused, targeted approach of pulling together educational institutions and workforce agencies to help meet the critical needs of an industry. They thought that such an approach helped to boost the morale of staff. They believed that state staff have been sincere in getting the MiRSAs up and running. However, some questioned the appropriate balance between local control and state involvement.

Most of the other issues raised by partners had less to do with the MiRSAs themselves than with other state programs that they see as barriers to their efforts. These include the fragmented training approach across the state and the barriers to sharing curriculum, which they submit increases the cost of training.

### **Value Added**

As previously described, this MiRSA builds upon several initiatives targeted at the health care industry in the region, which were started before the MiRSA was established. The partners and conveners were asked what they thought the value added of their initiative would be, if successful. They responded by listing several outcomes. One value-added outcome was the fact that the MiRSA has brought together many key organizations in the health care industry and has fostered collaboration with educational institutions and the workforce system. Another potential value-added outcome is the possible move to standardize training curriculum across the state and integrate many fragmented problems. If accomplished, they believe that this could reduce the cost of training significantly and allow employees of smaller providers access to training, which these organizations could not do on their own. A third potential outcome is the ability through training and recruitment to raise the level of expertise and professionalism among health care workers which in turn raises the quality of health care in the region.

## **Conclusions and Problems/Issues**

The MiRSA has made considerable progress in convening a group of key partners in the health care industry in the Northwest Michigan region. Most partners agree that the right partners are at the table, except perhaps for the small number of extended care providers. Nonetheless, the employers believe that the MiRSA has identified its needs and has set forth an agenda to address these issues. To date, the MiRSA has completed a survey to better understand the needs and perceptions of employers and is using this survey and other data gathering efforts to improve curricula and recruitment. In addition, camps are planned for this summer and progress is being made in developing a more integrated curriculum and in recruiting employees. So far, no one has received training through the MiRSA initiative. As several partners commented, “the process takes time and it won’t happen within a year.”



## **Site Visit Report**

**RSA: EAST CENTRAL HEALTH CARE REGIONAL SKILLS ALLIANCE**

**Date of Visit: March 8, 2005**

### **Activities/Interviewees:**

I attended a meeting of the MiRSA Steering Committee held at Saginaw Valley State University. There were approximately 30 individuals in attendance. After the meeting, I interviewed two employer partners—Jim Marshall, of Covenant Health Care (large hospital system) and Amy Reiher, of Alterra Health Care (Assisted Living facility)—and then I interviewed three members of the convener’s organization—Dennis Brieske, Leslie Roth, and Sharon Reed.

The Steering Committee meeting was well-organized and very informative. As described below, the MiRSA has established several committees that are active, and representatives from the committees made presentations to the entire steering committee.

### **History and Governance Structure**

This MiRSA seems to be well-established and on its way. It clearly is benefiting from several initiatives that had been underway prior to the formation of the MiRSA, and now the MiRSA appears to be doing an excellent job of coalescing those initiatives. The hospitals in this area had organized themselves into the Hospital Council of East Central Michigan, and in 2002, this council identified workforce development as a priority issue that affected their profitability.

Independent of the Hospital Council, the WIB and MWA staff had, as part of their strategic planning, reviewed a Public Policy Associates document concerning the workforce needs of the health care sector and had reviewed placement data for that sector. (They were surprised to observe that over 1300 of their WtW or WIA placements had been in health care over the previous 30 months.) The WIB concluded that health care was a strategic sector for its region.

Finally, Saginaw has an effective Chamber of Commerce-initiated group called the Saginaw Business Education Partnership. In 2003, this group and the MWA undertook a project to create and promote career ladders for 15 health careers.

Along came the MiRSA, which was based to some extent on these initiatives. However, the MiRSA expanded geographically with the inclusion of two other MWAs, and it has reached out to the long-term care facilities in the area. The focus of the MiRSA seems to be on career preparation/recruitment into the industry. Its goals include:

- removing bottlenecks keeping students out of health care occupations

- facilitating better-trained entrants to the labor force
- retrieving health care professional not currently working in the field

The MiRSA has set up several committees/task forces.

The Grow Our Own Committee is focusing on developing and disseminating career information to students. The Business Education Partnership has developed career ladders and videos for 15 health care careers. The Grow Our Own group is hoping to expand that initiative to other careers, although these are expensive and require additional funding. The Hospital Council Workforce Committee has developed an extensive matrix of information on basic entry level skills and academic preparation needed for several dozen occupations, which also will be widely distributed to students.

The Re-Career Committee is waging a campaign to retrieve back into the workforce RNs and LPNs who were no longer working. The committee has a goal of persuading 50 individuals to return to the field. Interestingly, this committee received a lot of information from a similar campaign done by the Upper Peninsula health care RSA. Of course, it is tailoring these materials for its own media campaign.

The Barrier Committee is focusing its efforts on the difficulty in having enough clinical sites for the areas' nursing programs. As reported to the Steering Committee, this Committee has become aware of a software program that will facilitate the matching of trainees in need of clinicals with health care organizations in the area that might have clinical opportunities, and the committee has scheduled a presentation of this product in April. Committee members became aware of this software via a conversation with from an individual at Grand Valley State University. The Committee members are exploring projects in other states as well.

The Data Committee provides and researches labor market information for the MiRSA.

## **Accomplishments**

The staff from the convening agency suggested that a significant accomplishment of the MiRSA effort to date is getting a significant level of time and financial investments from employers. The employer partners indicated that in the health care sector, January through March is the busiest time of the year, and yet attendance and interest in the activities of the MiRSA were substantial. The Re-Career Committee is soliciting funds for its campaign and reported that some employers had contributed.

The employer partners indicated that they thought that the committee structure of the MiRSA was being successful. Members of the committees were attending meetings and the committees were accomplishing their goals.

All in all, at this (early) stage in the MiRSA project, there seems to be a sense of momentum. The partners suggest that they are on a path toward achieving significant accomplishments.

## **Barriers**

The partners in this MiRSA were fairly upbeat, so they did not readily talk about barriers affecting the accomplishment of their goals. Staff noted that some issues that they were dealing with included the time consuming nature of the committee structure and collaboration in general. They felt that progress was slower than they had projected in their proposal because of this. Staff also felt that they needed to get more employers involved, especially long-term care facilities. They plan to establish a long-term care committee, and its focus will be on CNAs.

The geographic spread of the area covered is a barrier according to one of the respondents. The MiRSA region officially covers ten counties, and activities in fact include partners from 15 counties.

Resource adequacy was mentioned as somewhat of a barrier. Respondents felt that they had immediate needs for more resources – more career ladders, the re-entrant campaign, the nursing program clinical software.

## **How to engage partners**

Getting partners to attend meetings and to engage in the MiRSA activities is an important issue for both the convening staff and employers. Especially in such a busy time of the year, the employers want to make sure that their time is well-used. Some strategies that are being used successfully in this MiRSA are getting individuals involved on committees, having individuals give presentations/progress reports on the agendas of meetings, scheduling meetings on a regular basis, and having a central site for the meetings. The conveners also felt that it was important to “brainstorm” with the employer and education partners in order to identify their interests and needs, rather than to have the attitude that “we’re from the government, and we’re here to help.”

## **Interaction with State/Programmatic Suggestions**

Staff members indicated that their contact with state staff was not frequent. They included their portfolio manager, Mary Dismuke, on the distribution list for all materials and communication, and Mary was at the Steering Committee meeting. The sense that I got was that progress was good, and that the staff felt that they had very little need for technical assistance.

The staff felt that it would be beneficial to continue the convenings of the states’ health care RSAs. They would especially like to have sessions on “best practices” and “ideas to generate additional funding.” They also mentioned that it might be appropriate to have a separate session for long-term care health providers.

## **Value Added**

As discussed, this MiRSA is building on several initiatives that had been started in the health care sector in the region. Its value added seems to be in coalescing these initiatives into a single entity, accelerating or redirecting to some extent the initiatives, and tightening the linkage between the health care sector and the MWAs in the region.

The MiRSA can “take credit” for some specific activities: the Re-Career initiative and the impending product demonstration for the clinical scheduling software. The information that I gathered suggested that they would not have happened absent the MiRSA. On the other hand, the health career ladders and videos and the Hospital Council’s matrix were developed apart from the MiRSA. However, the MiRSA may result in additional career ladders and/or in wider, more effective dissemination into school systems.

Expansions to training programs, particularly in nursing, also probably would have proceeded in the absence of the MiRSA. But it appears as though these expansions will be facilitated by the employer awareness and publicity that is resulting from the MiRSA.

In short, even though there were existing initiatives in the health care sector in this region, there seems to be little question about the extent of added value that is being brought to the economy by the MiRSA.

## **Conclusions and Problems/Issues**

This MiRSA seems to be on a trajectory that will achieve effective outcomes. Partners seem productively engaged. The career ladders and videos that the Business Education Partnership have made available are first-rate. The Re-Career campaign is well on its way, and is a great example of how material from one MiRSA can be synergistically employed in another MiRSA.

The main issues that the MiRSA needs to confront are to increase employer involvement, especially long-term care facilities, and to overcome the obstacle of geographic distances. With tight resources, broad expansions geographically and into long term care may be difficult.

## **Site Visit Report**

### **RSA: NORTHEAST MICHIGAN HEALTH CARE WORKFORCE ALLIANCE**

**Date of Visit: March 2, 2005**

#### **Activities/Interviewees:**

I attended a full committee meeting of the Northeast Michigan Health Care Workforce Alliance held at the University Center/M-Tec Center in Gaylord. Approximately 16 members of the committee were in attendance on a snowy day. Committee members present that day represented local hospitals, elementary and secondary schools, community colleges and universities, the career tech center, and the Michigan Works Agency. An RSA technical team member and a consultant were also present. The committee consists of 56 alliance partners. The meeting was well organized and informative. Committee members were engaged in the activities of the meeting and participated fully. Several subcommittees reported on their progress. Two participants shared information about the activities of the Northwest RSA, which has a similar focus and overlapping activities and membership.

After the meeting, I interviewed three employer partners—Kersten Korth-White, Director of Human Resources, Mercy Hospital-Grayling; Diane Shields, Chief Human Resource Officer, Alpena Regional Medical Center; and Terra Deming, Director of Human Resources, Otsego Memorial Hospital. I also interviewed Elizabeth Gertz, who is the Executive Director of North Central Council of the MHA and is the convener of this MiRSA.

#### **History and Governance Structure**

The purpose of the Northeast Michigan Health Care Workforce Alliance is to foster new or strengthen existing partnerships that expose more K-12 students to careers in health care, get more students into health programs offered by colleges and universities in the northern Lower Peninsula, and attract more graduates into north central Michigan hospitals. According to conversations with participants and statements in the application document, key organizations in the region, principally the North Central Council of the Michigan Health and Hospital Association and the Northeast Michigan Consortium, have identified for some time the health care sector as a major employer in the region and a key provider of employment opportunities for a broad range of skill levels. However, they have recognized that health care facilities, including hospitals and long-term care facilities, face labor shortages in key specialties that impede their ability to provide high quality, cost-effective service. Wishing to avoid duplication of efforts, it was determined that the Northeast Michigan Consortium, the administrative entity of the Workforce Development Board and the North Central Council, a health care provider association, would partner to address these issues. As a result, the Northeast Michigan Consortium became the applicant and the North Central Council the convener of the Northwest Michigan Regional Health Care Industry Skills Alliance.

The partnering organizations “loan” staff to work on activities of the NE RSA. Elizabeth Gertz, as convener, is the only staff that receives money directly from NE RSA funds, and it covers only a small portion of her salary.

## **Work Plan**

The MiRSA was established on a solid, pre-existing foundation, which allowed them to ramp up operations quickly and to start with full buy-in and support from partners, particularly employers. Its partners had prior understanding of the issues facing the sector they chose to target, they were already pursuing some initiatives to address health care workforce needs, and they had strong industry input and participation in identifying measures that could help mitigate the problems that they face in recruiting qualified workers into their organizations. It was clear in talking with the employer partners that the recommendations proposed by the MiRSA came directly from them, as employers.

The MiRSA has established a work plan with two priorities to help address the identified health care workforce shortages:

1. For colleges, universities, and hospitals to partner to provide training programs in health care fields that are not currently offered in the area, such as radiology technicians, nuclear medicine technicians, etc., in which the first step might be to offer tuition reimbursements to current hospital employees to help defray the costs of these programs and to pool resources to provide local training.
2. For the region’s high schools, higher education institutions, and hospitals to work together to develop a model summer camp for the region that acquaints middle school students with various health care careers.

The MiRSA has created several subcommittees to help carry out the priorities set forth by the partners:

- Summer Health Career Camps
- Health Program Partnerships
- Incumbent Worker Training
- Marketing.

The subcommittees meet on a regular basis to further the priorities established by the MiRSA. The Summer Health Career Camp subcommittee is charged with organizing the summer camps, including working with partners to come up with the appropriate curricula, resolving logistical issues, and creating and circulating publicity regarding the camps. The Health Program Partnerships subcommittee has the responsibility of identifying health care occupational specialties for which appropriate training is not available in the region and then work with partners to institute such training programs. They also have the responsibility to publicize the training programs.

## **Accomplishments**

Presentations from the subcommittees during the meeting and conversations with the staff and partners afterward suggested several accomplishments of the MiRSA to date. First, it appears that the MiRSA has been successful in engaging the partners to work on the priorities of the alliance. Subcommittee members came prepared to give detailed reports of their deliberations and progress and other committee members offered useful comments and suggestions which helped to ensure that the programs were meeting their needs, particularly from the perspective of employers.

Second, the subcommittees appeared to be making considerable progress in implementing their respective responsibilities. Planning for the summer camps was on schedule with several venues already established and publicity in draft form. Much of the discussion during the meeting was about the desire to expand the summer camps from three days to as many as five days to give campers greater opportunities to learn about health care occupations. The subcommittee has worked closely with the Northwest RSA in this area, which offers further evidence of their ability and willingness to collaborate not only within their own partnership but also with neighboring alliances that share similar interests and goals.

Third, the subcommittee has identified many health program partnerships and is developing a brochure to identify the top needs in the area and then to list the educational institutions that offer courses to meet those needs. The subcommittee had already surveyed health care facilities to assess their needs before the MiRSA was formed, so they were able to skip over this first, somewhat time-consuming task and move closer to implementation. Among the several partnerships formed, the phlebotomy certificate is particularly promising for displaced workers because its skill-related prerequisites are fairly basic. Discussion at the meeting centered upon the need for degrees or certificates and opinions varied depending upon the perspective of the hospital or health care organization or the employee.

Fourth, the incumbent worker training program appears to be on track. The WIA Board has approved funding for training that the regional hospitals requested, although the roughly \$40,000 of funds available met only two-thirds of the needs identified. The funds will train 262 employees for a cost of \$150 per person. Fifth, the NE RSA earmarked \$20,000 for scholarships for hospital employees to use toward continuing education, and these funds are now available.

Finally, partners expressed satisfaction in the high degree of networking that the MiRSA has fostered, both within the alliance and with other regions. Health care employers cited the opportunity to network and partner with educational institutions as particularly beneficial as they try to offer appropriate training to local residents in order to fill vacancies with qualified workers.

## **Barriers**

The partners in the NE RSA were positive about the ability of the alliance to convene the relevant partners, identify the employers' needs, keep them engaged, and to accomplish the agreed-upon goals and objectives. They did point to several barriers that they believe have impeded their progress. They identified insufficient funding as a barrier that has prevented them from achieving the scale of activities that they need, such as expanding the number and enlarging the size of the summer camps and providing adequate training to incumbent workers. Another barrier is the perception that the window for planning and implementation is too short. A few offered that they see training, in particular, as a long-term endeavor and felt somewhat pressured into coming up with programs too quickly and not having enough time to coordinate training. It was also stated that working through state and WIA regulations attached to funding has become a challenge.

## **Engaging Partners**

Partners and the conveners expressed satisfaction with the extent to which the NE RSA partners are engaged in the alliance. The major hospitals and educational institutions in the region are active partners, participating at meetings and within subcommittees. Comments were offered that the NE RSA is aligned with hospital needs and that partners shared a common vision as to the purpose of the alliance. Partners agreed that the NE RSA has provided the opportunity to discuss issues and differences that occasionally arise and to find common ground that would not have been possible without the alliance. The ability of hospital and educational institutions to network at these meetings keeps the partners engaged. Partners attend meetings regularly and participate in the committees to work toward their common goals. Distance to meetings is a problem for some because of the large geographical area covered by this alliance, but communication among partners through the internet and other means helps to reduce that barrier and keeps partners informed.

## **Interaction with State/Programmatic Suggestions**

Comments regarding the interaction with state technical staff indicated that partners believed the staff to be sincere in their efforts to help MiRSAs get started. Some concern was expressed that the state staff may not have had the time to become adequately prepared to provide technical assistance and felt that they were not receiving consistent direction at times. Partners appreciated that the state recognized problems facing rural economies and were directing resources and attention their way. However, a few issues came up with regard to the appropriate balance between local control and state involvement in the MiRSA. The state questioning the relevance of summer camps as a priority for the alliance when this priority was established directly by employers triggered concerns in this area.

Most of the other issues raised by partners had less to do with the MiRSAs themselves than with other state programs that they see as barriers to their efforts. These include the

fragmented training approach across the state and the barriers to sharing curriculum, which they submit increases the cost of training.

### **Value Added**

The NE RSA builds upon several initiatives targeted at the regional health care industry, which were started before the MiRSA was established. When asked what they thought the value added of their initiative would be, they offered several benefits. The first was the ability to convene a network of health care organizations and educational institutions. They believed that this would not have happened without the alliance. Partners also pointed to the pooling of resources to provide training locally instead of the need to travel downstate to attend classes. Establishing summer camps and scholarship programs was also cited as two outcomes that they thought could be achieved only through the alliance. They consider these activities as essential in reducing the cost of training, increasing the availability of training in occupations and areas that experience acute worker shortages areas, and in providing high-paying jobs to local residents.

### **Conclusions and Problems/Issues**

The NE RSA has made considerable progress in convening a group of key partners in the health care industry in the Northeast region of Michigan. It has built upon previous work and activities of the North Central Council, which has given the alliance a firm footing and a jump start in its own endeavors. From observations and the committee and conversations with partners, it appears that the appropriate stakeholders are included in the alliance and engaged in the activities. The priorities set forth by the alliance are employer-driven, and key educational and workforce organizations have coalesced their efforts around these needs. To date, the NE RSA has made considerable progress on establishing summer camps for middle schoolers, initiating scholarships for health care workers to pursue their training, and funding local training programs for incumbent health care workers. The alliance is working through barriers related to state and federal regulations, tailoring training programs to meet employer needs, and communication problems associated with the large geographical area covered by the alliance.



## **Site Visit Report**

### **RSA: CAREER ALLIANCE, INC. AND GREATER FLINT HEALTH COALITION**

**Date of Visit: March 18, 2005**

#### **Activities/Interviewees:**

I attended a meeting of the Michigan Regional Skill Alliance at the Career Alliance, Inc. headquarters in Flint. The following individuals were in attendance:

1. Nichole Taylor, Career Alliance Inc.
2. Peggy Kendrick, Career Alliance Inc.
3. William Hetchler, Career Alliance Inc.
4. Eunita Mixon, Career Alliance Inc.
5. QB Pittman, Career Alliance Inc.
6. Karen Easterling, Baker College of Flint
7. Eddie Smith, Human Resources, McLaren Health Systems
8. Helen Brown, Administrative Assistant, Career Alliance Inc.

Unfortunately several partners, including staff from The Greater Flint Health Coalition, were not able to attend the meeting. Much of the meeting was focused on trying to prepare for the Governor's initiative to accelerate training.

After the meeting, I interviewed three of the staff members from Career Alliance – Ms. Taylor, Ms. Kendrick, and Mr. Hetchler.

#### **History and Governance Structure**

This MiRSA got off to a slow start, but at the time of this meeting, it seemed to be making progress. The MiRSA is administered collaboratively by two entities – Career Alliance, Inc., which is the Genesee County MWA, and the Greater Flint Health Coalition. A reason for the collaboration was that the MiRSA could be modeled after a workforce development project of the Greater Flint Health Coalition titled the Flint Health Care Employment Opportunities (FHEO) project, which was operating at the time of the MiRSA solicitation. (Note that this project was just one of the activities of the Greater Flint Health Coalition.)

It was relayed to me that part of the reason for the slow start to the MiRSA initiative was the time involved for the two administrative collaborators to learn about how the other organization operated. Mainly responsible for administering federally-funded job training, the Career Alliance, Inc. was used to abiding by strict governmental rules and regulations. Furthermore, Career Alliance, Inc. serves the entire county. The Greater Flint Health Coalition also serves the county, but the FHEO project operated in the Renewal Community of Flint and was foundation-funded, and thus had somewhat less restrictive processes and procedures. The

Coalition, by its nature, has focused on health care issues since its inception, whereas workforce development within health care is a relatively new initiative for Career Alliance. Thus the perspectives, experiences, and geographic coverage of the two organizations were different, and it took time to get accustomed.

While no one from the Coalition was at the meeting I attended, I got the impression that communication between the two agencies occurs often and is now much smoother than it had been. The MiRSA itself meets on a weekly basis.

As mentioned, the MiRSA is modeling its program on the earlier, FHEO Project, but it differs from that initiative in a couple of dimensions. It is covering all of the county (the program is referred to as the FHEO Project of Genesee County), and it is focusing on mid-skilled occupations, such as LPNs and RNs. The FHEO Project had been aimed at lower-skilled, entry-level positions such as food service, housekeeping, and nursing assistant positions.

### **Accomplishments**

Getting the partners in synch took up the first few months of the grant. The MiRSA now appears to be coordinated, and it has developed a flowchart of services and a draft of a marketing brochure. The flowchart indicates the steps that individuals would go through from recruitment to enrollment in college. The steps include some aptitude testing (Discovery and Work Keys), and Life Skills Training.

The brochure describes eleven (11) health care career opportunities: allied health technician, LPN, medical assistant, medical billers & coders, occupational therapy aide, pharmacy technician, physical therapy assistant, radiology technologist, RN, respiratory therapist, and surgical technician.

It was relayed to me that to date, the employers who had participated in the MiRSA were mostly from the large hospital systems in the county. The meeting that I attended was the first time that an individual from McLaren Health Systems had attended, so a substantial portion of the meeting was spent in asking him about occupations in demand in his facilities and in trying to ascertain how the MiRSA could best meet that organization's needs. It was relayed to me that even though employer involvement had mainly come from hospitals up until now, the MiRSA intends to partner with long term/extended care facilities, community health clinics, and doctor's offices.

### **Barriers**

The MiRSA has delimited for itself a reasonable set of activities—recruitment into and training in mid-skilled nursing occupations. The main barriers that it faces are training capacity and finding enough individuals with adequate skills and interest to go into these occupations. Individuals at the MiRSA meeting hoped in particular to attract males. The representative from Baker College at the meeting indicated that the number of individuals who could be trained in

nursing is greatly limited by the availability of clinicals. A number of individuals are classified as “in process,” which means they are waiting for clinical opportunities to open up. These individuals often get discouraged, and leave the area.

### **How to engage partners**

The MiRSA has weekly meetings, and seems to attract a reasonable number of individuals, although attendance was very sparse when I was there. I didn’t ask the respondents about successful strategies for attracting and engaging partners.

### **Interaction with State/Programmatic Suggestions**

Staff indicated that they have occasional conversations with their RSA portfolio manager, Ms. Mary Dismuke, who had attended a meeting in Flint in mid-February.

### **Value Added**

This MiRSA builds upon an existing health care employment initiative that had been operated by one of the partners—the FHEO Project of the Greater Flint Health Coalition. That initiative had focused on lower-skilled, entry-level positions, and had focused on recruiting disadvantaged adults from a particular area within the city of Flint. The MiRSA is expanding upon that effort geographically, by recruiting throughout all of Genesee County, and is focusing on higher-skilled nursing positions—such as LPNs and RNs. The ultimate value added of this MiRSA will depend on the extent to which it is successful in increasing the number of qualified nurses.

### **Conclusions and Problems/Issues**

This MiRSA has made progress on its mission after having a slow “take-off.” It has made decisions and has certain characteristics that will help it focus on achieving success: (1) the MiRSA is mainly focusing on acute care (hospital) facilities, which limits the number of employer partners it needs to engage, although it does intend in the future to engage long term/extended care facilities to some extent and (2) the MiRSA is operating in a single county, so that it does not have an extensive service area.

An outsider’s observation is that the MiRSA has worked so hard on its “process” and collaboration situation that it hasn’t had time yet to brainstorm and bring innovative ideas to bear on how it can *change* the health care labor market to increase the number of well-prepared workers. If the problem is a constrained training system for nurses that is at capacity, then recruiting more individuals to go into the pipeline will not be productive. The issue is how can the MiRSA alter the system to increase its capacity, which may involve overcoming the rules and regulations imposed by the State Board of Nursing. Resolving the capacity issue may require significant input from employers and training providers.



## **Site Visit Report**

### **RSA: DETROIT LONG-TERM CARE RSA**

**Date of Visit: January 20, 2005**

#### **Activities/Interviewees:**

I attended a formal meeting of the RSA at M-TEC Henry Ford Community College, Dearborn. Approximately 50 – 75 individuals were in attendance. The meeting was chaired by Jim Flanegin, who is chair of the MiRSA. Jim is an employer partner, representing St. John Health, where he is Corporate Director of Recruitment. Various reports and presentations were given during the course of the well-run two-hour meeting.

After the meeting, I conducted a group interview with John King, who is a consultant with the Detroit Workforce Development Department, a Michigan Works Agency; David Shevrin, a principal with New Perspectives Group; Jim Flanegin; and Charles Dunn, an owner of several nursing homes. John is the Project Manager for the RSA, and David is a facilitator.

#### **History and Governance Structure**

The convener for this MiRSA is the Detroit Workforce Development Department, but in collaboration with other MWAs in the metro area. Two prior groups had been in existence in Detroit that were dealing with health care training. One group that was mainly spearheaded by Detroit Public Schools and area universities was focusing on LPN training. This group has been superseded by the MiRSA, which also has changed the focus slightly. The second group that has been led by the Detroit Regional Chamber of Commerce is still in existence and is working on acute care employment needs, especially RNs.

The meetings of the MiRSA seemed fairly relaxed and informal, although the group had set up a governance structure that include an Executive Committee that meets in between meetings to plan the full meetings. The Executive Committee has 7 members including a patient advocate.

#### **Accomplishments**

This was one of the first site visits that we conducted, but this MiRSA was already quite organized. They had convened a meeting in December, 2004, and “elected” Jim Flanegin as chair of the group. Most of that meeting was spent in breakout groups to assess needs of the major stakeholder groups: Employees, Health Care Employers, Training Providers, MWAs, and patients. The needs assessment results were as follows:

## Health Care Employers

- Staffing: LPNs, RNs, Direct Care Workers
- Training: Training newly hired employees (clinical, patient care)  
Supervisory and management training (people skills)  
Training on how to provide training  
Affordable/subsidized training
- Retention: Career Ladders  
Improved work environments  
Employee Assistance and supports  
Appropriate salary structure for high priority jobs

## Employees

- Information: Awareness of LTC job opportunities  
Knowledge about field before they enter it
- Training: Basic training (interviewing, appearance)  
Job training once hired (clinical and patient care)
- Supports: financial support for training  
Tuition loan programs/scholarships  
Student loan forgiveness

## Trainers

- Curricula: career ladder  
Nursing supervision  
Flexible scheduling (e.g., night/weekend programs)  
Specialized training (feeding assistance, gerontological)  
Externships
- Capacity: funding  
Multiple training sites  
More clinical sites  
Trainers who can provide good instruction to different types of learners  
Trainers in some areas (RNs)

## MWAs

- Information/communication:  
Improve link between “One-Stops” and employers  
Inform training providers and employers of funding  
Determine what training is needed and prioritize

Develop baseline requirements for Home Health Care training  
Better marketing of job opportunities (e.g., job fairs, K-12)  
Create standardized career ladders

Training & support: standardize pre-screening and assessments  
Provide reliable transportation  
Ensure potential employees fulfill licensing and certification requirements  
Better career counseling and job seeker career preview  
Create CNA Career ladder

The January meeting followed up on the needs assessment by “brainstorming” about “bottlenecks and root causes.” In addition, there was a presentation from a representative of the Red Cross who described a new CAN training program and a presentation from the Chief Nurse Executive of the State of Michigan, Ms. Jeanette Klemczak.

### **Barriers/Issues**

The employers who were interviewed were reasonably satisfied with the progress that the MiRSA had made to date. Their major concern was getting more employers involved. They indicated that about 10 percent of the employers in the area were involved, mostly from the larger corporations. The respondents wanted to see much more involvement from smaller home operators.

During the interview, it became apparent that a major obstacle for this RSA will be its geographic expanse. It is attempting to include seven counties, and coordinate five MWAs.

### **How to Engage Partners**

Attendance at the meeting was quite large, so up to this date, the MiRSA did not have much trouble attracting individuals to attend. The employers who were interviewed indicated that they appreciated crisp, well-run meetings that had lots of information. One of the employers opined that the employers in the area can easily see the need for the MiRSA and are willing to participate, but they need to have specific requests.

The members of the executive committee and the convener staff had lots of ideas and goals for the group, so it would appear that there would be little problem in identifying needed activities/resources from employer partners. They indicated that employers can add clinical sites and experiences, and employers could offer tuition reimbursement benefits. Furthermore, one of the MiRSA goals is to standardize the training curriculum/requirements for CNAs and for PCAs. So employers can help to define these requirements. Finally, the MWA is investing incumbent worker training funds into the LTC field, so employers can identify productive training opportunities.

## **Interactions with State/Programmatic Suggestions**

The interviewees were pleased with the RSA program. They felt that the responsibility for goals and activities lay at the local level. They saw the role of the state to be one of advocating for statewide issues such as standards for Patient Care Assistants (PCAs), and such as increasing the capacity for nurse training. They appreciated the state office's help in getting the Chief Nurse to today's meeting.

## **Value Added**

This MiRSA is organized around the long-term care industry. Given the aging of the population, this is a growing industry. Furthermore, there are a large number of employers and considerable heterogeneity in the industry's structure, from large corporations with franchises to single home operators. The potential value added of the MiRSA is to empower the employers in this sector through information sharing, training standardization, and increased incidence and effectiveness of training.

The MiRSA intends to survey and widely disseminate a training and employment needs assessment in the area. It intends to standardize the curricula for CNA and PCA training. That is, it wants employers to identify those skills and knowledge that are "necessary" and those for which "it is nice to develop." The MiRSA intends to place 110 individuals in the industry; use incumbent working training dollars effectively; and be responsible for the start-up of at least one LPN program. The bottom line is that this MiRSA has some ambitious, but clearly articulated, goals, which if met, will add significant value to the region's economy.

## **Evaluation**

Detroit's Long Term Care RSA is off to a good start. The convener and executive committee have organized several formal meetings that have been well attended and that have accomplished much. The emphasis of the RSA seems to be on entry positions such as CNA or PCA. This seems to be a win-win situation. Employers have a growing need for these individuals, as long as they're well-trained in clinical and patient care areas, and the MWA has a clientele that can be channeled into these jobs.

The RSA is data-driven. It has numerical goals for placements and it has conducted a formal survey of the industry to assess hiring and training needs. Furthermore, the survey collected wage and salary information, so it can be used to develop a career ladder in the long term care industry.

In our opinion, a potential problem for the RSA is that it is attempting to cover too wide an area. This may be a drag on the effectiveness of the group if the convener staff "burn" too many resources in outreach and attempts to attract employers from the entire metro area. Certainly, if employers recruit other employers from a wide area, the referrals should be included

in the MiRSA. But we believe that the level of resources would be best targeted on a more narrow area.

Another concern is the MiRSA's efforts at sustainability. While it was still a long time until the initial grant ended, the MiRSA seemed to be banking on foundation support for sustainability. Given that it had attracted a substantial number of employer partners already, and given the potential for many more, this MiRSA might consider using a dues structure for future funding.

Nevertheless, in spite of these two concerns, it appears to us that this MiRSA has had good initial success in terms of attracting employer partners, and making progress on its mission and goals.



## **Site Visit Report**

### **RSA: CAPITAL AREA MANUFACTURING COUNCIL/RSA**

**Date of Visit: January 18, 2005**

#### **Activities/Interviewees:**

I attended a formal meeting of the RSA at the M-TEC at Lansing Community College – West Campus. Approximately 30 – 40 individuals were in attendance at this luncheon meeting. The program for the meeting was a presentation about the WorkKeys System and, in particular, how it can be used by business firm. The meeting was chaired by Tim Daiss, who is chair of the MiRSA. Tim is an employer partner, representing Magnesium Products of America, where he is the Human Resources Director.

None of the employer partners were able to stay after the meeting, so this report is based on what I observed at the meeting and on a telephone conversation with Bob Sherer, who is staffing the council/RSA.

#### **History and Governance Structure**

This MiRSA is a totally new entity, for which the Capital Area Michigan Works! agency is the convener. (The Council had begun to come together in Spring 2004 after exploratory planning meetings in 2003.) The model for the MiRSA was the Jackson (MI) Area Manufacturing Association (JAMA). The basic idea is to form an association-like group that focuses on manufacturing. The group will meet formally on a periodic basis, and the intent is to have speakers and programs that will be of interest to the whole group. But in addition, the Council will develop a directory so that networking among employers can take place. A tangible product that the MiRSA will produce is an area wage and compensation survey. In addition, the convener has plans to increase the use of a pre-employment training program (M-STEP). This program will provide basic training on issues such as quality, safety, and lean manufacturing for entry-level employees.

The local chamber had started a similar effort prior to this MiRSA being formed, but that attempt did not succeed.

The Council has a loose organization, but it does have an executive committee and officers. The officers are Tim Daiss, President; Owen Johnston, Vice President—Treasurer of Bekum America Corp., Vice President; and Donna Graham, HR Manager for SSAB Hardtech, Inc., Secretary. One of the items of business at the luncheon meeting was to recruit individuals to serve on an Executive Committee. Other committees that were planned or were in existence were the Fund-Raising Committee, Compensation Survey Advisory Committee, Communications/Networking Committee, Education and Training Directory Committee, and M-STEP Committee.

## **Accomplishments**

This was one of the first site visits that we conducted, but this MiRSA was already quite organized. Thanks in large part to the staff person from the convener's organization, Bob Sherer, the MiRSA had identified specific goals and was already focused on sustainability efforts. As alluded to above, the goals were (1) to sustain the manufacturing council by providing information and services of value to the membership and (2) to develop the manufacturing workforce in the area. Sustainability was going to be achieved by a system of membership dues.

The WorkKeys presentation at the meeting served two purposes. First, it was of general interest to the members. But second, it furthered one of the MiRSA's objectives, which is to "Increase basic skills of new hires/incumbent workers through WorkKeys System and training." The presentation not only included formal remarks from an individual who works for the WorkKeys vendor, ACT, but also had some effective testimonials from local employers who use WorkKeys.

## **Barriers/Issues**

The Capital Area Manufacturing Council has been launched and seems to be heading toward a successful journey. Like any new venture, it is on a learning curve. We sense that the major barriers or issues that it faces are analogous to the entrepreneurial risk of many start-ups. It has to provide value added to its customers in order to succeed. In this situation, this means that the MiRSA has to continue to provide useful informational meetings and networking opportunities for local employers. It has to conduct and disseminate the results from a high quality, useful wage and compensation survey, for example. But because it is a new organization, it also has to invest considerable effort in marketing/outreach in order to attract membership.

At this point, we have no reason to believe that the Council will not succeed at these efforts. We simply feel that the daunting nature of starting up an association will be difficult.

## **How to Engage Partners**

Attendance at the meeting was good. The Council believes that short, information-filled meetings at lunchtime will succeed in engaging partners. Outreach to corporations who are not already involved will require personal contact from the MiRSA staff, and also, testimonial help from area employers who are members of the Council.

## **Interactions with State/Programmatic Suggestions**

We did not delve into this topic very much. It seemed clear that the Council members were pleased to have the State's financial support for a year. However, it was also very clear that the Council was taking seriously the imposition of a single year of support and the necessity of

finding a means for sustainability. In this case, the MiRSA was intending to impose a dues structure on its members.

### **Value Added**

Michigan's manufacturing sector is declining significantly, and yet as an export-based sector, it is vital to the State's economic performance. Clearly, the State needs to provide as much assistance as possible to this critical sector. If the Capital Area Manufacturing Council reaches its goals and becomes a viable organization, it would bring significant value added to the Lansing area and buttress the notion that manufacturing is an important economic base.

The potential value added of the Council has several dimensions. First, the networking among employers may help them to quickly solve issues or get information that will aid their competitiveness through informal contact with each other. The information provided to members during meetings and from products such as the wage and compensation survey and directory of education and training will also be of value. Finally, if the Council can facilitate significant use of the pre-employment training program, i.e., M-STEP, then manufacturers will have an improved pool of entry-level workers, who can be productive sooner and with less training costs.

### **Evaluation**

The Capital Area Manufacturing Council is off to a good start. The convener and executive committee have organized formal luncheon meetings that have been well attended. The meeting that I was at had very interesting and useful information about WorkKeys, and the audience seemed to be well-engaged. This MiRSA has established a "do-able" set of goals and objectives. It has a nascent, but committed, governance structure and has established a committee system for accomplishing its work.

Our sense is that this MiRSA faces two major risks. First of all, it needs to continually provide useful information to its members, especially since it intends to set up a dues structure. Most of the members of the council seemed to be corporate staff (particularly HR staff), and when they attempt to sell the notion of paying dues to corporate executives, they're going to have to justify them by showing the value of the information and contacts that they have garnered. The second risk is that the MiRSA needs to make contacts and market its services aggressively in order to gain a critical number of participants.

Nevertheless, in spite of these two concerns, it appears to us that this MiRSA has had good initial success in terms of attracting employer partners, and making progress on its mission and goals.



## **Site Visit Report**

**RSA: GRAND RAPIDS COMMUNITY COLLEGE: THE SOURCE AND GOODWILL INDUSTRIES**

**Date of Visit: February 23, 2005**

### **Activities/Interviewees:**

I attended a luncheon meeting of the Board of Directors for the SOURCE. After the meeting, I interviewed four employer representatives – Kim Kooy (the Decc Company), Tina Collins (Butterball Farms), Julia Byers (Spectrum Industries), and Reyna Derks (Pridgeon and Clay). After interviewing the employer partners, I interviewed Connie Bellows from GRCC Delta Strategy, Andrew Brower, Executive Director of the SOURCE, Nichole Knights, from Goodwill, and Ana Fumando, also from Goodwill.

### **History and Governance Structure**

The convener for this MiRSA is a community outreach department of Grand Rapids Community College that refers to itself as the Delta Strategy. It applied for and is using the MiRSA grant to extend an employment retention model in both manufacturing and in health care. The larger share of the activity is in manufacturing, and is being delivered through the SOURCE. Delta Strategy is investing a smaller share of the grant in health care trying to replicate the activities that are being done by the SOURCE. This part of the grant is being undertaken by Goodwill Industries.

The SOURCE, an acronym for Southwest Organizations Unifying Resources for our Community & Employees, is a community-based organization that provides training and employment supports for individuals. It is modeled after another local company's (Cascade Engineering) welfare-to-career effort. It has an FIA staff member on site. The basic intervention is to have a retention specialist assigned to individuals who are placed in a company. The retention specialist cuts through red tape and does whatever it takes to help the individual retain their job. The SOURCE started in March 2002, and was funded through foundations and through EDJT grants prior to receiving the MiRSA grant funds. A group of about 8 employers in southwest Grand Rapids, where the individuals have been placed, also contribute operational funds.

An innovation in this MiRSA is the attempt to broaden the model that has been successfully used by the SOURCE into the health care sector. They have had some success here, and have received some incumbent worker training funds from the local MWA (grant funds that are in addition to the MiRSA funds.)

The governance structure of the MiRSA is quite informal. Connie, Andrew, and Nichole meet monthly, or more often as necessary, to discuss progress and plans. Connie and Nichole have supervisors and financial operations staff that are aware of the grant, and monitor, to some

extent, its progress. The Board of The SOURCE meets on a monthly basis and is aware of the MiRSA grant, but their purview is the entire SOURCE operation, not just the MiRSA.

### **Accomplishments**

In the manufacturing area, the SOURCE has enrolled 15 individuals in GED preparation training and has enrolled 44 individuals in computer application training (Word, Excel, etc.). These trainings are being offered with MiRSA grant funds. In addition, staff indicated that during the short time that they have had MiRSA funding, three employees have been assisted in advancement in their workplace or to another company.

Most of the employees served by the SOURCE or the Goodwill Health Care portion of the MiRSA are low-income, and the lead staff indicated that they felt that events such as moving some folks off of the public assistance rolls and having some individuals continue with their basic literacy training despite being laid off were great successes.

Getting competitive firms to cooperate with each other, and to even help each other, was seen as a major contribution. Connie Bellows, the convener, summarized this spirit of cooperation in a positive manner as “business as unusual.”

### **Barriers/Issues**

A year ago, the SOURCE had received over \$100,000 in EDJT training grants, which it had used for incumbent workers in the firms that support the SOURCE. The agency had again applied for those funds, and had planned on receiving them. However, the grant funds have not come through for this year, and the organization is fearful that it won't get those funds, which may severely crimp the amount of training that it provides.

Another major barrier is the continuing economic slide (or very slow recovery). The manufacturing sector has been hit extremely hard, of course, and the partners had been optimistic that the recovery would be more robust by now. During the course of the meeting I attended, one of the employer partners indicated that they were about to layoff more than 25 individuals, I learned of a major employer in the area that has a reputation for hiring disadvantaged workers had a indefinite hiring freeze, and I learned of a major partner in the SOURCE having laid off over 120 workers recently.

Finally, we discussed the issue of whether the workers enrolled in training through MiRSA funds (GED preparation and computer application training) had their data entered into the WIA system. It appears as if they do not, and one of the conveners was concerned that some of the individuals being trained may not want to provide that information, which would be a barrier to participation.

## **How to engage partners**

One of the goals of this MiRSA is to get commitments from additional employers to join/support the SOURCE or the geographic extension of the SOURCE through Goodwill or Delta Strategy. All of the interviewees were quite emphatic about the importance of having CEOs do peer-to-peer recruitment. Note that the Right Place, an economic development agency with a strong employer base, is assisting in this recruitment; at least opening doors.

In terms of the board meetings and project meetings, the conveners felt that meeting consistency (same time and day of the month) was important, and that it was important to often “check in” with the employers (or employer staff) to make sure that they felt that their time was being used efficiently.

The respondents felt that another key was getting to know folks, and building trust.

## **Interaction with State/Programmatic Suggestions**

A few suggestions were offered. First, Andrew Brower noted the important role in his operation that had been played by the EDJT grants, and emphasized the potential disruption if these grants do not materialize. Second, the respondents made an interesting comment about how important the transportation issue is for workers, especially for job retention. In their opinion, public transportation as currently offered will not get individuals to good jobs. So, in their opinion, it is vital that state policymakers improve public transportation options, or as a second best alternative, offer incentives or policies that allow or promote private means of transportation (cars).

Finally, the conveners felt that having the MiRSA grant and getting to know the state staff is having a spinoff benefit of interest from the Department of Corrections and FIA.

## **Value Added**

The MiRSA grant is attempting to reach more employers to get commitments to this particular employment retention model (i.e., providing workers with a retention specialist). According to the project staff, this model is extremely important because the jobs that their clients hold are attendance-based. Unlike higher-level jobs where workers have more autonomy to deal with emergencies, these workers face stringent attendance rules, so it is vital that they have a retention specialist who can help them deal with emergency situations.

One of the characteristics of the MiRSA grant that is clearly value added is the expansion to health care.

The consensus seemed to be that a measure of success would be a substantial increase (doubling?) of the number of employers that support the work of the MiRSA agencies with contributions in order to sustain it into future years.

## **Conclusions and Problems/Issues**

It didn't take me long into my visit to note the excitement and commitment about the work of the SOURCE of the staff and board members. This organization is clearly providing a valued service to many workers in terms of training and "general support" (including help with tax returns). Furthermore, the board members were clearly working together and coordinating. The program appears to be providing its community great value.

Much harder to get my hands around is the schizophrenic welding together of manufacturing and health care into one MiRSA. About three-quarters of this grant seems to be a "typical" RSA in manufacturing, where individuals are networking and sharing resources in a single sector. Furthermore, this part of the MiRSA is further along than the "typical" MiRSA because it is actually providing considerable amounts of training to clients. The other one-fourth of the grant seems to be more experimental—trying to see if the retention model can get replicated in health care. I fully understand, and even support, the experiment. I just wonder whether it is diluting the manufacturing MiRSA and whether it will have enough resources to attain the benefits of the sectoral approach.

The issue of capturing trainees' data in the WIA system needs to be resolved. Obviously it makes little sense to capture the data if it causes fewer individuals to volunteer. On the other hand, without this data, there will be no way to determine the net impacts of the MiRSA on workers and employment.

## **Site Visit Report**

### **RSA: LAKE SUPERIOR COMMUNITY PARTNERSHIP ELECTRICAL LINE TECHNICIAN PROGRAM**

**Date of Visit: February 3-4, 2005**

#### **Activities/Interviewees:**

On Thursday morning, February 3, I interviewed Joe Esbrook, director of the Marquette Office of the MWA, who is involved with both the Lake Superior Community Partnership and the Upper Peninsula Health Care Roundtable MiRSAs. Joe serves on the Line Tech Advisory Committee. On Thursday evening, I interviewed Sandy Spoelstra, who had written the grant for this MiRSA and who was actively involved in a project to extend the program with another employer. Then on Friday morning, I attended a board meeting of the Lake Superior Community Partnership Foundation in Marquette. After that meeting, I drove to the Midwest Skills Development Center and attended a meeting of the Line Tech Advisory Board. Following the advisory board meeting, I had a group interview with instructor for the program, Mr. Jerry LePage, three employer representatives – Derek Weide, North Electric, Inc., Erik Stenvig, M.J. Electric, Inc., and another individual (wasn't able to get name or company); and Dr. William Rigby, Dean of Technology and Applied Sciences, Northern Michigan University.

#### **History and Governance Structure**

The electrical line technician program operates at the Midwest Skills Center, which is a renovated building on the grounds of Sawyer Air Force Base, which was abandoned by the Air Force several years ago. It is located approximated 20 miles from Marquette and is being developed into an industrial park/airport. The line technician program is currently in its second year. It was started by the Lake Superior Community Partnership Foundation, which is a 501c3 organization that was originated to foster economic development. It is a foundation affiliated with the Lake Superior Community Partnership, a 501c6 organization, formed by merging three chambers of commerce in the Marquette area.

The line technician program is a one-year pre-apprenticeship program that results in a certificate. Northern Michigan University has an active sub-baccalaureate occupational education mission and programs, and it has brought the line tech program under its fold. Students in the line tech program are NMU students in good standing, and of course, they pay tuition for their attendance.

The MiRSA grant has been folded into the revenue for the line tech program, and is being used for several support activities – purchasing training equipment and materials, and developing recruitment materials for next year's class. The first class had graduated about 25 members, and all but 1 or 2 had been placed. Many of the placements are out of state. The

current class has 28. The class members are all male, although they are trying hard to recruit females.

The program has an active, engaged advisory committee that is chaired by Gary Erickson, CEO of the UP Power Company, the major utility in the area. (Note: Gary also chairs the Board of the Lake Superior Community Foundation.) The advisory committee members are all aware of the MiRSA grant, but do not consider themselves as a governance body for that grant. The grant simply goes into the revenue of the program and has certain “strings” or requirements that must be met as any governmental grant has.

There seemed to be relatively little interaction with the MWA in the area, although I think that I was told that student information was being entered into the WIA client data base. The MWA does screen and test applicants for the program. The testing includes the Accuplacer academic pretest. Joe Esbrook, from the MWA, is on the Foundation Board and the Advisory Board.

The Advisory Board meets monthly, and has three committees: Finance/ Marketing, Personnel/Curriculum; and Facilities.

### **Accomplishments**

The advisory board is very proud of this program, which is preparing young individuals for a well-paying stable occupation in demand. The program has such a good reputation that a large company in the Lower Peninsula is quite interested in using the facility and instructor for training their employees, which would double the capacity of the program.

A related accomplishment is a pending project to establish a similar program for aircraft mechanics. The Community Partnership has obtained agreement from American Eagle Airlines to house an Aviation Maintenance Academy at the Midwest Skills Center, at which all of this airline’s initial mechanic training operations would be done.

### **Barriers**

Almost no barriers or issues arose during my interviews. Placement, recruitment, and major expansions of the program were all going well. A minor downside to the program that was mentioned was that the occupation often required significant amounts of travel, so sometimes it has been difficult to recruit individuals because they want to work close to home.

### **How to engage partners**

Employer and educational partner engagement was not an issue here. The members of the advisory committee had obviously committed and bought into the program. They were almost anxious to help out in any way that they could, including equipment donation and placement.

### **Interaction with State/Programmatic Suggestions**

The only concern voiced about the role of the state was that the individuals responsible for the program wished that there was a steady, reliable funding source so that the program had a firm basis for operating. Interestingly, several individuals named Diana Carpenter as their state liaison.

### **Value Added**

The value added of the MiRSA grant seems to be that it facilitated a successful second year of the line tech program, and seems to be helping in the marketing of the third year. Some equipment and materials have been funded by the grant.

### **Conclusions and Problems/Issues**

The line technician program is clearly a high quality, pre-apprenticeship program. The students who graduate and get a certificate are highly likely to find well-paying employment in the industry. A major issue for this MiRSA is sustainability; i.e., replacing the revenue that the DLEG grant represents. The expansion to another employer and the aviation maintenance project may resolve this issue.



**APPENDIX B**  
**SECOND SITE VISIT REPORTS**



## **Site Visit Report**

### **RSA: Mid-Michigan Construction Alliance**

**Date of Visit: June 8, 2006**

#### **Activities/Interviewees:**

Project staff visited the headquarters of the Mid-Michigan Construction Alliance (MMCA) in Lansing and interviewed two individuals associated with its RSA on June 8, 2006. Interviewed were Mike Crawford, Executive Director of the Michigan Chapter of the National Electrical Contractors Association (NECA) and President of MMCA, and Mark Phillips, MMCA Research Coordinator.

#### **Background**

The convener for this MiRSA is MMCA, which is a labor-management collaborative organization in the Ingham County/mid-Michigan area. The MMCA was started in 2002 with a mission of fostering labor-management cooperation in the construction trades, facilitating customers searching for reputable contractors, and developing a skilled workforce in the construction trades.

The MiRSA grant was seen as a way to address the third of these purposes. A relatively small portion of the MiRSA grant was to be used for e-commerce seminars for contractors at Lansing Community College (LCC), and the primary focus of the grant was to work with K-12 school systems to disseminate career information about construction trades and to promote apprenticeships as viable conduits to well-paying careers.

#### **Accomplishments**

The MiRSA is making progress, but its major accomplishment has been in an area that was not in the original proposal. That accomplishment has been the RSA's collaboration with the Lansing Public School district on the CRAFT classes that is discussed below. However, before discussing those classes, the next couple of paragraphs document the progress that the MMCA made on the tasks that it had proposed.

The computer and internet training seminars that had been proposed took place at LCC and the individuals who were interviewed noted that perhaps 45 – 60 individuals enrolled in them. In addition to the computer "basics" that were taught in these seminars, MMCA contracted with an MSU staff person, Mr. Andy Seidel, to develop an Internet simulation for construction trades. These simulations were developed and users found them to be a very useful instructional tool, but unfortunately Mr. Seidel has moved out of state, and MMCA is trying to find someone to support the site.

Buttressing the importance of the e-commerce and IT training, the RSA staff provided project staff with strategic planning documents that indicated that a major structural change in the industry involves the ever-increasing reliance on technology. Advanced software such as 3-D design or Building Information Management (BIM) software is no longer considered “leading edge,” but has rather become standard operation procedure. The message must go out that contractors need to move in this direction or face ominous consequences.

The RSA invested considerable time and effort in its other proposed thrust—wide dissemination to the K-12 system of high quality career exploration material. Accomplishments included meeting with counselors in several mid-Michigan school districts, developing video materials, and putting together a Career Expo at LCC’s West Campus. Unfortunately, the MiRSA ran into some unexpected road blocks. Production of high quality DVDs costs far more than the resources of the RSA. The MiRSA’s strategy now is to team up with other organizations to help defray the cost. In particular, it has invested \$3,000 toward a video that is being produced at a cost of \$48,000 by another construction group. The Career Expo was scheduled during Summer, and district personnel wanted to be compensated for their time in attending, which ended up causing the Expo to be canceled (and re-scheduled). Having encountered these barriers, the RSA moved in a different direction, which was to work collaboratively with Lansing Public Schools on a hands-on instructional experience. Here the RSA has had considerable success.

What the staff touted as the major accomplishment of the RSA has been its role in developing and supporting a construction trades course in high school. In collaboration with Lansing Public Schools, the RSA has created the Career Readiness and Fitness Training (CRAFT) courses. CRAFT 1 is a one semester offering that provides an introduction to construction careers, has field trips to construction sites, and guest lectures from individuals involved in the field. The individuals who were interviewed indicated that subjects that were covered in CRAFT 1 included electricity, plumbing, general contracting, bricklaying/masonry, ethics, labor law, estimation, and MIOSHA safety and regulation. This course was offered on a pilot basis in the winter and spring of 2005 at Lansing Everett and Lansing Sexton High Schools. It expanded to Lansing’s other high school this past year and experienced an enrollment of between 10 to 20 sophomores or juniors in each semester.

CRAFT 2 is also one semester, but it is more of a hands-on, applied course that builds onto the career exploration/readiness focus of the first course and gets into specific skills. It is project-based and results in a culminating activity. For example, students at Eastern High School constructed an outdoor sign and electric billboard. A major focus of CRAFT 2 is on safety and safe use of tools. CRAFT 2 was offered at a single high school and had an enrollment of 15 – 18.

The RSA collaborated with Lansing Public Schools on these courses and split the cost 50/50 with that district. The RSA staff persons who were interviewed were very complimentary about the teacher for the CRAFT 2 class, Ms. Kathleen Rypkema, who developed much of the curriculum.

The CRAFT classes are already paying off for students. One of the students from the pilot class, and five of the students from this year's class are becoming apprentices, which is quite an accomplishment for high school graduates who must compete for the apprenticeships with experienced workers.

In addition to the direct accomplishments of the RSA—e-commerce classes, limited success at disseminating career information, and the CRAFT classes—it has had unanticipated successes as well. First, the MiRSA effort has enhanced the relationships between labor and management. It is an activity that both sides of the table can, and do, work on together. Second, the MiRSA has helped to change the attitude of the construction industry toward diversity in the workplace. CRAFT tends to draw minority students, whose successes are impressive to the contractors, many of whom may harbor traditional biases from the past. Third, the MiRSA activities are enhancing the community. Better communication and co-operation among contractors and labor groups is helping to facilitate community service projects such as Angel House and Habitat housing projects. Clearly the community gains from such projects.

### **Issues/Concerns**

The individuals who were interviewed mentioned a number of lessons learned along their journey to this point in the life cycle of the RSA. They didn't want to label these as barriers or concerns, but rather they were simply unavoidable lessons learned. First of all, they underestimated how difficult it would be to sell construction careers to the general population. Describing it as the industry's own ego or arrogance, they thought that it would be fairly easy to attract young people's attention to the high-paying careers in their industry. However they have run into traditional biases against construction careers.

Second, they felt that they had underestimated the time and effort required to change practices and information dissemination in school districts. In one unfortunate incident, they were paired at a student assembly with a culinary arts career presentation in which the speaker for that occupation simply was not a good match for high school students. The students' reaction to that presentation was difficult to overcome. The RSA now realizes that it must stand on its own, and must always be cognizant of the group dynamics of its audiences.

These first two issues were said to be the most difficult challenge faced by the MiRSA; that is, the effort required to overcome the ignorance, prejudicial overemphasis on college preparatory programs, and lack of time or interest displayed by a high number of students, parents, teachers, school counselors, and other school officials. The strategy that the MiRSA intends to follow in the coming year is to fund, train, and make available experienced representatives who can meet with school counselors, or preferably students, on a one-to-one or small group basis to convey the industry's message.

Third, the RSA has had some difficulty gaining buy-in from some of the trades that are used to hiring entry-level workers that are older—usually in the 25 to 35 years old range. They

are proud that they have turned around some of the unions and contractors, but it has been a struggle, and they have not been successful with all trades.

### **Sustainability**

The RSA has been a positive experience for the MMCA, so it will continue to support activities like the CRAFT classes after the RSA grant. The MMCA is a dues paying organization that came into existence before the RSA grant, and will last beyond the grant. Furthermore, the issue of developing a high quality workforce for the industry to replace an aging workforce is an urgent one. So it is likely that industry associations will continue to collaborate. The ongoing “best and brightest” campaign exemplifies such initiatives.

### **Involvement of the MWA and Workforce Investment Board**

The RSA has had very little interaction with the MWA and Workforce Investment Board. Staff did recently attend a planning meeting that was held by the Capital Area Michigan Works! agency regarding a construction RSA.

### **Employer Involvement and MiRSA Partners**

The MMCA is an organization comprised of employers and union organizations. The employers on its governing council are well aware of the RSA activities, as are most of the employers in the organization. In general, contractors tend to be small firms, so the key decision makers for the employers are precisely the owners who are involved on the in the alliance.

In addition to the Alliance members, the individuals who were interviewed indicated that the MiRSA Partners network has spread beyond entities usually labeled as “traditional construction industry stakeholders.” Cash donations and in-kind contributions have increased substantially and, in many instances, the contributing parties ask to be added to the list of MiRSA Partners—often without solicitation. Apparently helpful in attracting partners has been the positive image that has been portrayed in numerous published articles and photographs in a host of trades’ newsletters and non-trades publications including the Lansing State Journal, school district newsletters, and other local papers.

A substantial number of employers are involved in the CRAFT classes. For example, Mr. Crawford had to arrange for speakers for 36 sessions across the schools and sections of CRAFT this last semester. Furthermore, employers host site visits for the classes.

Finally, the 45 – 60 individuals who attended the e-commerce training were employers.

## **Education Partners**

At the postsecondary level, Lansing Community College is the main institution involved with the RSA as the site for the e-commerce classes. MSU had some involvement in the development of the Internet simulation software.

The major educational partner of the RSA is the Lansing Public Schools. This district and the MMCA have formed an effective collaboration that has resulted in CRAFT. Clearly this has been a win-win situation as the district has offered an opportunity for its students, and the MMCA is developing a qualified entry-level workforce.

## **Value Added**

The activities that have been offered by this RSA have had a short-run payoff, but the RSA's primary value added is going to take a few years to surface. The e-commerce training and business simulation software have helped business owners become more savvy to today's technology and thus become more competitive. The training has likely helped contractors to control costs and operate jobs more efficiently. These are not insignificant short-run payoffs.

However, in the longer run, the benefits of the RSA's collaboration and support of CRAFT will be manifested in the quality of the workers that enter into the industry. The high quality, career readiness training is providing high school-aged individuals with a head start into apprenticeship career paths. A particular value of the program is that many of the students would not have chosen to pursue construction careers or would not have had the chance to pursue such careers because of the traditional biases in apprenticeships that have been hard to overcome. These workers and society will benefit from more stable, and higher paying, careers.



## **Site Visit Report**

### **RSA: Lake Michigan College Emerging Technologies**

**Date of Visit: April 24, 2006**

#### **Activities/Interviewees:**

On April 24, Kevin Hollenbeck visited the Lake Michigan College M-TEC in Benton Harbor and interviewed three individuals associated with the Lake Michigan College (LMC) Emerging Technologies project. The individuals who were interviewed included the following: Robert Harrison, Dean of Occupational Studies and Business Services for Lake Michigan College; Robert Walck, Director of Business and Industry Training for LMC; and Dr. Paige Oxley, Associate Professor.

#### **Background**

The underlying idea for this MiRSA is to facilitate the State of Michigan's workforce preparation for emerging technologies including microtechnology and nanotechnology. These technologies are projected to become important in many sectors of the economy, especially manufacturing. Many leading academics and research organizations throughout the United States are conducting the theoretical and applied research to develop these technologies. Lake Michigan College wants to be on the forefront of training technicians and other workers for full-scale implementation in the workplace.

The Lake Michigan College initiative is a "statewide" MiRSA, but receives no MiRSA funding. It is funded as part of an EDJT grant from MEDC to the Whirlpool Corporation. The main goal of the initiative is to develop a curriculum that can be used in an Associate Degree program in Emerging Technologies.<sup>26</sup> The intent is to develop a rigorous curriculum that would be credit-bearing. Furthermore, Lake Michigan College would provide that curriculum to any other Michigan postsecondary institution without charge, and RSA staffpersons feel that some of the curriculum may be appropriate for career and technical education programs at the secondary level.

However, the terms of the EDJT grant require that any training that gets provided would be non-credit bearing and would be given only to Whirlpool incumbent workers. So, the curriculum and information that get developed will be used to train Whirlpool employees without academic credit.

During the past year, Dr. Oxley has made considerable progress in developing the emerging technologies curriculum, but she has also been involved in a major college-wide

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<sup>26</sup> When we visited this RSA in 2005, staff indicated that another major goal was to install a "clean room" at the M-TEC that can serve as a laboratory for the curriculum. Completion of this goal has been considerably delayed, if not postponed indefinitely, as described in this report.

review and updating of the science curriculum and facilities. The college has realized that its students have a substantial skills gap in the area of science, and has begun work on a major initiative to enroll students into developmental coursework in science. The review has discovered that as many as one-third of the college's students do not pass introductory science courses, and they believe that as many as 55 percent of entrants need a developmental course.

So, basically rather than pushing forward into the emerging technology curriculum, the RSA staff has decided to take a couple of steps backward and work on the basic science skills and knowledge of students, so that they will be able to benefit from the curriculum being developed.

### **Accomplishments**

According to respondents, among the primary accomplishments of the RSA has been the progress that has been made on the curriculum design. LMC hosted a successful conference in October 2005, which kicked off the Michigan Community College Emerging Technology Institute. This is a collaboration among the state's community colleges to get themselves positioned to provide students and industry with trained workers in this field. At this point, the Institute is beginning to establish a structure with steering committees and is developing a website. Besides leading the Institute initiative, LMC is offering short courses in April through June primarily to research and engineering staff at Whirlpool on an introduction to nanotechnology and applications.

Another major accomplishment has been the involvement in the LMC science curriculum and facilities review. Partly because of their involvement, the RSA staff believes that both the science education and facilities will be significantly improved for both academic and occupational students.

Finally, staff cited increased community awareness of the RSA as an accomplishment during the past year.

### **Issues/Concerns**

The task of developing and rolling out a new occupational program, especially one involving new and complex technology, has been a learning process. A paperwork or bureaucratic issue for the RSA has been trying to balance its operational position as a MiRSA that operates under the rules and regulations of an EDJT grant. It took some time to find this balance because of different, and sometimes, conflicting rules. But staff now feels like all parties involved are acting together.

Perhaps a more substantive issue for this RSA is determining if and when a demand for the curriculum will arise. That is, when will students enroll? When will employers be interested in formal training for their workers? The belief is that emerging technologies will be a national phenomenon, but the RSA (as a unit of the college) will depend more on the local economy to

generate student demand. As the RSA was being developed, with Whirlpool as a base, manufacturing was seen as a viable sector of growth in the area. But more recently, the interviewees felt that economic development attention in the area has turned to casino gaming and residential development. Furthermore, the theory of nanotechnology (and microtechnology) seems to far outreach practical applications at this point.

Because of the slow pace of development of emerging technologies (at least in the manufacturing sector in Southwest Michigan), the RSA has ratcheted down considerably two initiatives that seemed to be high priority at the time of our initial site visit. At that time, considerable time and effort had been invested in siting a clean room facility at the M-TEC. Now the equipment is sitting in trailers in the parking lot and staff indicated that decisions need to be made about whether a fully operational clean room will ever be established, or whether a simulation laboratory will suffice. At any rate, the need for a clean room facility seems to be far off. Secondly, at the time of the first site visit, project staff indicated that they intended to have quarterly employer meetings. However, they have only had a single meeting, and feel as though it doesn't make sense to bring together a council until the program is up and running.

### **Sustainability**

The issue of sustainability is somewhat different for this RSA as compared to all of the other ones because it did not receive DLEG grant funding. So the issue of sustainability is a question of whether the activities and organization of the project will last. The three principal staffpersons are engaged in other endeavors within the college, so there seems little doubt that they could remain at the college if it decides to "pull the plug" on the emerging technologies curriculum. However, respondents reported that Lake Michigan College is committed to the emerging technologies curriculum. They felt that there was a very high probability that the course will be in the college's book of studies in the next 3 – 5 years.

The college-wide realization of the lagging science skills of the students and of the need for considerable facilities upgrading also is a factor affecting the sustainability of the RSA program. Without basic science skills, students will not be able to benefit from the emerging technologies curriculum. The efforts at the college now seem to be targeted on finding matching funds so that capital outlays for the upgrading of science facilities at the college can be funded through grants.

### **Involvement of the MWA and Workforce Investment Board**

The Business and Industry Training division of the college has considerable interaction with the local Michigan Works! agency, but not in relation to the RSA. Rather, the division provides training for MWA clientele through other grants and means of support.

## **Employer Involvement**

Obviously, Whirlpool is the major employer involved in the RSA. As noted above, the RSA staff has put together a series of seminars for Whirlpool staff that initiates the formal training that will be provided to the company through the EDJT grant. At the time of my visit, the RSA staff could at best conjecture about what the Whirlpool acquisition of Maytag would mean for the emerging skills project. That acquisition was likely to have little effect on it, or may increase the demand for formal training. The staff felt like there was no downside risk.

The RSA developed an employer council to oversee the project, but it has met only once because the entire initiative is still in the development stages. The staff saw little value in convening the council without real decisions to be made or action items to consider.

## **Education Partners**

The RSA convener is an educational institution, and most of the curriculum development and facilities investments are occurring at this institution: Lake Michigan College. However, LMC is not in any way attempting to monopolize its work. Quite the contrary, it is attempting to share its curriculum with other postsecondary institutions in the state, and it plans to “market” the curriculum to the K-12 system. Most other Michigan community colleges attended the Emerging Technologies Institute in October and are getting involved in the structure of that Institute, for example.

## **Value Added**

The value added of the MiRSA grant will be the emerging technologies curriculum and the potential stimulation of emerging technologies in local business and industry. The respondents believe that ultimately there will be value added to workers in the form of well-paying job opportunities and careers.

While walking a tightrope between the requirements of an EDJT grant and a MiRSA grant, the Lake Michigan College Emerging Technologies project has made considerable progress in developing a curriculum for technical training and in collaborating with other Michigan colleges. The interest shown by other community colleges in the state through the formation of an Institute as well as the seminars that are being delivered to Whirlpool staff shows that the program is meeting the market test.

## **Site Visit Report**

### **RSA: Southwest Michigan Regional Health Care Skills Alliance**

**Date of Visit: May 11, 2006**

#### **Activities/Interviewees:**

Project staff interviewed a number of RSA staff and employer or educational partners at the W.E. Upjohn Institute on May 11, 2006. Included in the interview were Ms. Elaine Furu-Baker and Ms. M.J. Bruns, of Calhoun Intermediate School District (ISD) Michigan Works!; Dr. Lynne Haley, Chair, Barry/Branch/Calhoun Workforce Development Board; Ms. Dayna Kozminski and Ms. Sue Riemland, of Michigan Works! Berrien-Cass-Van Buren; Ms. Jan Smith, of Kalamazoo-St. Joseph Michigan Works!; Ms. Nancy Woods, of Kalamazoo Valley Community College (KVCC); and Ms. Jules Isenberg-Wedel of Residential Opportunities, Inc. (ROI).

#### **Background**

The Southwest Michigan Health Care Alliance is a collaborative effort of three MWAs. The convener is the Calhoun ISD Michigan Works! agency. The Kalamazoo-St. Joseph Michigan Works! Agency and Michigan Works! Berrien-Cass-Van Buren are co-conveners of the grant. This particular collaboration is a new endeavor, but it builds on prior training and collaborative efforts in one or more of the eight counties served. For example, the soft skills training in Calhoun County for long-term care employees had been in the development stage prior to the formation of the MiRSA. A sectoral economic development activity in Kalamazoo County that preceded the MiRSA, called the Regional Edge, had included a health care affinity group.

All three MWAs were represented at the interview, and during the initial year of the RSA, progress was reported for all of the MWAs. However budget documents that were shared with project staff indicated that virtually all of the activity in years two and three would be funded by the Kalamazoo-St. Joseph and Calhoun ISD MWAs.

#### **Accomplishments**

Among the major accomplishments of the RSA was the receipt of a grant from the Council for Adult and Experiential Learning (CAEL) to develop a career lattice program in nursing. Aimed at ameliorating the nursing shortage, this program will work with employers to develop Certified Nurse Assistant (CNA) career lattices incorporating apprenticeships, non-traditional training programs for Licensed Practical Nurses (LPNs), and online training for LPNs to become Registered Nurses (RNs). As of the date of the interview, the project had adopted a peer mentor training curriculum that was close to being instituted at a long-term care institution.

A major goal of the RSA is to make sure that a substantial number of adults get health-related occupational skills training through the one-stop system. To that end, all three MWAs have invested part of their incumbent worker training (IWT) funds in health care organizations. The Kalamazoo-St. Joseph Michigan Works! convener has two health care employers that will receive IWT funds during 2006 for 55 employees who will participate in Supervisory/Leadership training or instruction in critical thinking and problem solving. Michigan Works! Berrien-Cass-Van Buren has awarded IWT grants to a hospital system that has or will be providing over 90 employees accelerated LPN to RN training or literacy training for entry-level employees. Finally, the Barry/Branch/ Calhoun MWA has provided IWT grants to two employers that are providing training to 16 employees in Critical Care Paramedic Certification training or frontline supervisory training.

Another accomplishment of the RSA has been the planning and execution of a regional summit for industry leaders to be held at the Upjohn Institute approximately one week after the interview.

Respondents mentioned receiving a Disproportionate Share Hospital (DSH) grant in collaboration with KVCC. The grant funded the expansion of the respiratory therapy program and the continuation of the EMT program at KVCC. Local hospitals had reported that finding respiratory therapists had been nearly impossible and more of a concern than the shortage of RNs. Ms. Woods also mentioned another DSH grant that KVCC received, although this grant was not affiliated with the Southwest Michigan RSA. KVCC received the grant in collaboration with ACSET, the Kent and Allegan Counties MWA, and Allegan General Hospital. A unique feature of this grant was the collaboration with a public K-12 district with the use of Allegan High School labs for part of the LPN to RN training.

The final activity for which there has been substantial progress is in the ongoing networking among long term care facilities in Calhoun County, and the development and marketing of a soft skills training program for long-term health care workers.

When asked whether the RSA had experienced any unanticipated benefits, the respondents indicated that they had noticed a genuine engagement on the part of employers. The activities of the RSA seem to truly knit together the community of health care employers and the public workforce development agencies. For example, the RSA conducted a health care summit in Calhoun County in September 2005 and found that it was far easier to plan than earlier summits had been because of employer involvement.

### **Issues/Concerns**

The individuals who were interviewed were quite satisfied with the progress that the MiRSA had made to date. However, they were not shy about raising issues or concerns. Mentioned first was a strong opinion that an RSA would probably operate far more effectively with an individual in charge who was dedicated solely to the RSA. All three lead persons from

the co-convening organizations had other job responsibilities, and they found it difficult to put in the time and effort that is required to “move” the RSA initiatives.

Another issue that was raised was the geographic expanse of the region. It covers eight counties that span more than 100 miles. The travel and time costs tended to dampen the number of meetings that were held. The staff persons thought that they had been quite efficient and effective in their use of conference calls, but noted that such calls could not totally obviate the need for face-to-face meetings.

Finally, there was a concern expressed that the RSA was not getting the involvement of the CEOs of the organizations that were involved. The employer representatives tended to be from human resource departments, and they were not usually the individuals who could make corporate commitments.

### **Sustainability**

Sustainability of the RSA seemed to be an issue of concern to the respondents. The RSA’s budget for the next two years showed sizeable contributions from the Kalamazoo-St. Joseph and Calhoun ISD Michigan Works! agencies. The staff persons were frank about the longer-term prospects. They had not done a lot of planning or had a lot of discussion, but had occasionally mentioned that either the employer community or foundations might serve as sources of funds for the longer-term. But in fact, the interviewed individuals thought that there was a low likelihood that the Regional Skill Alliance *per se* would continue to exist. However, they were certain that the MWAs and WIBs would continue to keep health care as a priority.

### **Involvement of the MWAs and Workforce Investment Boards**

The RSA is convened by three MWAs. The Chair of one of the WIBs was interviewed, and she indicated that her Board was very supportive of the work of the RSA. She reported that the various MWAs were not at all competitive about the work of the RSA. Her WIB held the RSA accountable through reports at each of the meetings and through the WIB’s monitoring committee. The staff persons from the other two MWAs stated that their boards were also very supportive of the work of the RSA.

### **Employer Involvement**

On the one hand, the RSA representatives characterized the RSA as being quite successful in connecting the health care sector with the “one-stop” workforce development agencies. But on the other hand, the respondents felt like the number of employers who participated in the RSA activities was relatively small and needed to grow. Furthermore, the interviewees noted that the RSA has not succeeded in attracting the key decision makers within firms.

The discussion during the interview focused on one sector of health care; mainly, long-term care providers. In Calhoun County, a group of these providers meet on a quarterly basis through the organizational efforts of Ms. Bruns. She estimated that perhaps fifteen percent of the county's home health care and nursing home establishments participated. In Kalamazoo-St. Joseph, the RSA has partnered with the area's Aging Council, which represents the long-term care sector. This seemed to limit the involvement of long-term care providers with the RSA. Finally, the Berrien-Cass-Van Buren Michigan Works! agency was concerned that it had focused mainly on acute care facilities, and the long-term care enterprises were not seeing value in attending meetings.

### **Education Partners**

The eight county area served by the Southwest Michigan Health Care Alliance has several postsecondary institutions as well as traditional local and intermediate school districts. There are at least three center-based career and technical education institutions run by ISDs as well. Not surprisingly, not all of these entities had become affiliated with the RSA. Some had, but most hadn't.

At the university/college level, the RSA had worked with Western Michigan University on its DSH proposal. Among the community colleges in the eight county area, Kellogg Community College, KVCC, and Lake Michigan College had been providers of health care training that was funded by IWTs. An adult rehabilitation facility, MCTI, offered a CNA training program. Little interaction had occurred with the K-12 system. In general, the respondents suggested that health care training is limited by the lack of qualified instructors and facilities to undertake the clinical portions of training.

### **Value Added**

This RSA is making an effort to facilitate and inform individuals and employers in Southwest Michigan about career opportunities in the health care sector. The upgrading of skills through training contracts that are funded by IWT monies are tangible, easily identified benefits of the sectoral emphasis on health care. Furthermore, the apprenticeship initiative funded by CAEL and the DSH grant are aimed squarely at the addressing the nursing shortage.

These training initiatives were facilitated by the RSA, which felt that they were important activities that directly address some of the workforce development issues in the region. However, the interview respondents also pointed out that a additional value was being added from the information sharing activities that have been undertaken. The RSA staff pointed out that they share with their employer and educational partners a lot of resources that they happen to receive or to find through research. This sharing is done mainly through email, but also they noted the Jeanne Konrad, the person directly responsible for the CAEL grant activities, has developed a small library of curriculum materials related to CNA apprenticeships. They also pointed out the information exchange that occurs at the meetings of the long-term care providers in Calhoun County. Finally, the interviewees noted that considerable information exchange was

anticipated at the Health Care Leadership Summit and other summit meetings across the region such as the one in Calhoun County last September.



## **Site Visit Report**

### **RSA: Upper Peninsula Health Care Regional Skills Alliance**

**Date of Visit: April 11, 2006**

#### **Activities/Interviewees:**

On Tuesday, April 11, project staff attended a quarterly meeting of the UP Health Care Regional Skills Alliance and then interviewed Karen Cheeseman, of the Straits Hospital in St. Ignace; Roger Berg, of Newberry; Alan Yeck, Executive Director for Business and Workforce Development of M-TEC at Bay College; Gwen Worley, Executive Director, Eastern UP Michigan Works! Agency; Gwen Timmons, Workforce Development Specialist with the Department of Labor and Economic Growth (DLEG); and Deb Doyle, Director of Operations of Michigan Works! The Job Force Board.

#### **Background**

Three Michigan Works! agencies operate in the Upper Peninsula (UP) essentially covering the east, central, and west counties. The Convener for this RSA is the Job Force Board, which is the central UP agency. Several years ago, the workforce investment board (WIB) for this agency had identified a sectoral approach as a potentially feasible strategy for workforce, and consequently economic, development in the area. Apart from the WIB's initiative, health care providers (mainly acute care) in the area had formed a collaborative roundtable in 2002 that they named the Upper Peninsula Health Care Roundtable.

The main workforce issue of concern for the Roundtable was the nursing shortage. The Roundtable participants undertook a media campaign to recruit nurses who had left the profession and future nurses to go into the profession. This campaign was funded privately; each hospital contributed \$2500 each.

The MiRSA grant, initiated in fall 2004, expands upon the base of the Roundtable's activities. Major focuses of the MiRSA are to extend the collaboration to facilities in the western UP and in the eastern UP and to look more broadly at health care occupations and types of establishment (beyond just nursing and acute care.)

#### **Accomplishments**

According to respondents, among the primary accomplishments of the UP Health Care RSA has been its expansion in terms of number of and geographic location of employers. It has brought more organizations to the table, which has resulted in greater credibility for and attention to the Roundtable. Another major accomplishment has been the provision of funding to increase the number of nurses trained. The RSA has supported about half of the cost of implementing an Associate Degree in Nursing (ADN) program at Bay College.

Another accomplishment is that the RSA has helped to reduce the employment vacancy rates among employer partners to below five percent. The initial formation of the RSA was prompted by a desire to reduce the health care employment vacancy rate from 6.8% to 5%. Through aggressive recruitment and advertising, that goal has been achieved with a reported rate of 4.8%.

Finally, the RSA is also engaged in efforts to provide career exploration information to K\_12 students concerning health care professions. Staff has been active at several high school career fairs, and ISD representatives often participate in sub-regional meetings of the RSA. Each of the WIBs that are involved with the RSA have an educational advisory committee that connects educators with workforce development staff and employers.

### **Issues/Concerns**

The geographic expanse of this RSA may be an issue. Given the low population density in the UP, travel distances are considerable and the skyrocketing price of gasoline exacerbates the situation. Representatives from Sault Ste. Marie and St. Ignace need 6 hours of round trip driving time to attend meetings in Marquette. They often share rides to reduce travel costs, but these employer partners must spend an entire day to attend a meeting. Many other participants must spend at least six hours of travel and meeting time each time the RSA convenes. This is quite a substantial resource commitment from the partners. While this resource commitment may constrain partners in the future, for now, it had really been the partners who wanted to meet face to face. Members of the RSA wanted to meet on a quarterly basis and were willing to commit to the distance for three quarterly meetings per year. The fourth quarterly meeting is done on a subregional basis, whereby the convener staff members travel to various locations in the U.P. to meet.

Another issue or concern with which this RSA is grappling is the involvement of long term care employers. Partially because of history and partially because of scale, hospitals are the primary partners involved in the RSA and it seems to reflect their interests more than the interests of long-term care facilities. The history simply stems from the fact that the RSA is an outgrowth of the UP Health Care Roundtable, which was formed by hospitals. Scale may be an issue because long-term care institutions may be smaller organization that cannot afford to release employees to attend meetings. Of course, as respondents pointed out, long-term care concerns overlap considerably with hospitals. Many hospitals have long-term care units, and all hospitals deal with geriatric patients.

### **Sustainability**

Sustainability of the RSA seems assured. Partners at the meeting were universally supportive of the value of the RSA in bringing them together to address issues of mutual concern. Because those issues are central, not peripheral, to the economic vitality of the partners, they have been more than willing to devote considerable staff time to the Roundtable, and to the success of the RSA programs. It is unlikely that this cooperation would disappear

with the end of RSA funding. The RSA clearly has been an important catalyst to help the region's health care employers to coalesce, to identify common needs, and to begin to work on those needs.

Some ideas that respondents had about future activities included the following:

1. Regional conferences, workshops, and classes.
2. Supervisory training.
3. More and better career education to help high school students plan earlier and make better decisions about health care professions.

### **Involvement of the MWAs and Workforce Investment Boards**

All of the respondents and our observation of the quarterly meeting indicated that the RSA is clearly employer-led. However, respondents gave the RSA convener staff favorable reviews. They state that the MWA does excellent and efficient work as convener. Meeting agendas are well-prepared, email communication is frequent, and the infrastructure is in place. The Roundtable meeting attendees receive a substantial packet that includes a thorough agenda, a summary of actions taken by the RSA, printouts from MDCH and other web sites, newsletters, reports, and other informational materials.

### **Employer Involvement**

Employers are fully involved in and truly lead the RSA. They provide substantial in-kind and cash contributions. The in-kind contributions include a substantial amount of meeting time and travel time. The "hard cash" contributions include support for an advertising campaign to attract nurses back into the profession. The health care organizations that are involved in the RSA believe they are receiving substantial benefits from their involvement. They are benefiting from having more nursing staff available because of increased training opportunities in the form of refresher training at Bay College and in the form of additional training slots. Furthermore, the re-career media campaign brought some individuals back into the field.

The health care employers are benefiting from improved professional development opportunities. Several hospitals are using an online learning grant to provide required in-service training activities. Finally, they are benefiting from enhanced communication with other health care facilities and from information provided on the web site.

### **Education Partners**

As noted above, the ISDs and K-12 local districts are somewhat involved with the RSA by providing career information to students. However, strengthening this tie to improve the flow of career information is a priority for the RSA.

At the postsecondary level, Bay College seems to be the main education partner. It offers the nurse refresher training, and it is increasing its capacity for nurse training. Respondents indicated that Northern Michigan University is also increasing its nurse training capacity. RSA staff touted their facilitation of a successful grant award of \$1.7 million to NMU and Marquette General Hospital in Medicaid disproportionate share funds to provide more training slots for nurses. We were further told that Gogebic Community College, Finlandia University, and Lake Superior State University have been somewhat involved in discussions about nurse training capacity, as well. Staff from Gogebic have participated in local and quarterly meetings of the RSA and were instrumental in developing a medical coding curriculum for the region.

### **Value Added**

The value added of the RSA, in the view of employers, is the enhanced networking/communication among entities in the health sector and grant opportunities that partners can benefit from. Respondents used the term “cooperation” to reflect the positive effects of system building and cooperation on all of the partners’ efficiency and ability to contain costs. Prior to the RSA, many employees and employers had to travel to Petoskey to get services. There is less of that now, an indirect result of the RSA activities. Hospitals are also reducing costs by not having to outsource so many services thanks to some RSA initiatives.

RSA support for programs like nursing training and web in-service training have helped keep incumbent workers in the area and have increased employment opportunities for nurses. The hospitals in the UP feel they operate on very thin margins, so any process that shares resources is helpful. The nursing shortages increase costs through higher wages and overtime payments. Through its efforts at easing the shortages, the RSA has likely helped some institutions operating at the margin to remain viable.

This RSA has been successful in a very measurable way. When they started up, they clearly established a goal of reducing vacancy rates to five percent, and they are justifiably proud of recent statistics that put this rate at 4.8 percent.

## **Site Visit Report**

### **RSA: West Central Michigan Regional Skills Alliance**

**Date of Visit: May 24, 2006**

#### **Activities/Interviewees**

On May 24, Randy Eberts met with members of the West Central Michigan Regional Skills Alliance at Saint Mary's Health Care in Grand Rapids for the sole purpose of receiving their comments and insights into the benefits and challenges of the MiRSA. Those interviewed included Craig Nobbelin, coordinator; Lois Horstman, Heartland Home Care; Wendy Ohst, Muskegon/Oceana Consortium WDB; Tom Karel, Trinity Health; Linda Erickson-Joel, Spectrum Health Care; Lody Zwarensteyn, Alliance for Health; and Barbara White, Mary Free Bed Hospital.

#### **Background**

The West Central Michigan Health Care Regional Skill Alliance was formed to address the workforce development needs of health care entities in the twelve-county area, as stated in the application. Membership encompasses a broad group of stakeholders, including five Michigan Works! Agencies (MWA), more than 200 health care entities represented by the Alliance for Health, Muskegon Community College, Baker College of Muskegon, Grand Rapids Community College, Montcalm Community College, Ferris State University, West Shore Community College, and the respective economic development entities.

The goals of the MiRSA are related to attaining, training, and retaining a skilled workforce. Recognizing that every community is experiencing a need for skilled workers in every health care discipline, the MiRSA seeks to recruit a skilled workforce, train the workforce to upgrade skills, and retain a skilled workforce. The MiRSA has identified four goals and are pursuing activities to meet these goals.

The first goal is to increase skilled workers in key occupations. The objectives in fulfilling this goal include identifying a half dozen or so priority occupations, develop a strategy for each, implement the strategy and finally identify and train selected incumbent workers. The progress report as of April 30, 2006 (received May 18, 2006) reports that limited progress has been made on these activities. However, RSA staff pointed out their involvement in an important initiative that will result in expanded numbers of health care workers in the area. First, the RSA was instrumental in organizing the responses to the Accelerated Grant Request for Proposals (RFP) from the State of Michigan in 2005. This resulted in six grants for over \$4.4 million being awarded to programs in the region to expand and accelerate training programs. Through these Accelerated programs, 34 clinical instructors will be trained, thereby increasing the capacity of nursing programs to train future students and addressing a major bottleneck in

clinical placements for nursing students. In addition, 170 nursing students and over 48 allied health students will be trained under the funded projects.

The second goal is to establish a uniform assessment process by first gathering information and input to develop a proposal for and pilot test a uniform assessment system and implement the system. The anticipated completion dates for these activities are toward the end of 2006 and into 2007.

The third goal is to strengthen the capacity of MWAs to serve the health care industry. Identified objectives include developing uniform health care information for MWAs in the region, provide MWA staff with educational opportunities on health care, and establish and maintain a regular schedule for assisting health care employers with worker needs and issues. The MiRSA has a planned completion date scheduled for this goal in 2007. The crux of this goal is the development of an informational resource and health system database. An outline of this system was adopted in fall 2006. To be included in the resource database will be a needs survey for the region (completed), identification of career pathway categories, a postsecondary educational program inventory (in progress), a survey of intermediate school district programs (in progress), and a compiled list of employers in the region. Linkages with a variety of websites dealing with health care and health care workforce issues have been identified. The MiRSA expects to be sufficiently far along to use it at orientation sessions for MWAs in fall 2006.

Note that the RSA is also convening employer meetings on a subregional basis, which are another means for bringing health care providers, MWAs, and educators together to develop working relationships.

The fourth goal is to establish and maintain collaborative relationships. This is an on-going set of activities centered on strengthening relationships with health care employers, MWAs, and regional educational institutions. Recently, the RSA has explored the possibility of applying for a Robert Wood Johnson grant and has been included in the WIRED initiative in the Grand Rapids area.

## **Accomplishments**

According to the MiRSA members interviewed on May 24, among the primary accomplishments of the RSA to date has been the collaboration and networking among the partners. The interviewees emphasized the importance of the MiRSA in bringing together employers, agencies, and institutions that had not worked together in any meaningful way before the RSA had convened the group. It was their sincere belief that the strong ties that have developed between the key stakeholders would not have happened without the facilitative efforts of the MiRSA. A primary reason for the tight bonds has been the ability to bring key players to the table and have the administrative structure and common purpose to sustain on-going dialogue. The ensuing coordination has reduced the amount of duplication in efforts among the various entities. More importantly, however, has been its focus on long-term, systemic change within the region's health care community. Those interviewed stressed the importance of

establishing a core group that can identify and address the longer-term problems and which is not distracted by a myriad of short-term fixes. They stressed the fact that employers appreciated the focus on more systemic than on “quick” fixes.

Another accomplishment has been the modularization of curricula among the various educational institutions. Educational institutions will now accept more readily the credits received by students from other institutions for first-year classes, which according to the interviewees they did not do before the MiRSA. The MiRSA also brought employers and educational institutions together to agree on curriculum that would meet the employers’ needs. They also believed that the MiRSA was instrumental in securing state funding for accelerated health care training programs.

Employers interviewed also mentioned that they have become better acquainted with the services provided by the MWAs through their participation in the MiRSA. While they knew of Michigan Works! by name before becoming involved with them through the MiRSA, they did not fully appreciate the “excellent” services they provided and the scope of programs offered until they started working together through the MiRSA. MWA staff stated that the MiRSA provided them with an entrée to employers, with whom they had not had a relationship with before.

### **Issues/Concerns**

The primary concern among the interviewees was the high expectations placed on the MiRSA by the state staff. The interviewees believed that the state was short-sighted in expecting to see results within a year and self-funding after two years. It takes more time to effect systemic change, which is the emphasis of this MiRSA.

It appears that this MiRSA has focused more on establishing the infrastructure to pursue longer-term goals than to pursue short-term activities. The interviewees did not mention many completed tasks when asked about their accomplishments. Progress reports document several tasks, of which at least two are expected to result in specific products. One is the Health Occupations Needs Survey; the other is the Health Care Sector Resource Manual. It does not appear that a final report has been completed for either of these tasks. Results from the Needs survey has been compiled and shared with the MiRSA partners and others, but concern was expressed about the low response rate. In addition, the MiRSA has worked on compiling a flow chart of parallel systems entitled a “Model for an Assisted Career/Job Track System for Health Care Occupations.” The MiRSA has embarked on another survey that assesses the status of educational health care programs. A draft report on uniform assessment tools was also prepared and shared.

Those interviewed also expressed concern about the possibility of another MiRSA being established in their region. They believed that two health care MiRSAs could cause confusion among employers and educational institutions and diminish the efforts that have already been achieved.

## **Sustainability**

The MiRSA has pursued three routes toward sustainability. The first is through employer participation and contributions. Those interviewed strongly believed that joint training and recruiting efforts through MiRSA-sponsored initiatives will bring significant savings to employers, and those employers will be willing to give back some of the savings as contributions to the MiRSA. They indicated that employers have already pledged \$10,000 to the MiRSA. The second avenue is through applying for outside grants. The MiRSA discussed applying to the Robert Wood Johnson Foundation to fund various aspects of the activities that the MiRSA has initiated. The third route is by linking up with WIRED, an initiative funded by the U.S. Department of Labor. WIRED is a multi-year program that stresses the linkage between workforce development and economic development. The MiRSA is included in this initiative and will receive some funding through this source. Interestingly, the receipt of the WIRED grant funds precluded the immediate need for employer contributions, and so the pledges were not requested.

## **MWA Involvement**

Five MWAs are partners in the MiRSA with the Muskegon/Oceana MWA acting as the fiduciary agent and chairing the board. All five MWAs and the Alliance for Health are co-conveners. The MWAs appear to be active partners in this consortium, as evidenced by their attendance at meetings, their leadership in several initiatives, and in the desire on the part of the MiRSA to use the resources they have available to meet the needs of developing the health care workforce.

## **Employer Involvement**

Several employers are heavily involved with the MiRSA. Five large health care employers met in Grand Rapids for this interview, and others have been involved throughout the life of the MiRSA. The Alliance for Health is an established consortium of more than 200 health care providers in the area, and they play a large role in representing the health care community. In addition, the MiRSA established an employer advisory committee, which has been effective in engaging employers in the activities of the MiRSA. Manufacturers and other employers were brought in to act as referees to cut through the issues regarding health care and focus on the critical ones.

## **Educational Institution Involvement**

An accomplishment cited by several interviewees was the ability of the MiRSA to bring educational institutions to the table. While none were present for this interview, the employers who were present cited the willingness of the educational institutions to listen to the needs of business and partner with the MWA to provide training as a hallmark of the MiRSA. Many of

the initiatives center on the involvement of educational institutions in curricular development, assessment, and training.

### **Value Added**

The interviewees were emphatic that the accomplishments that they cited (as listed in the accomplishment section) would not have been possible without the MiRSA. They stressed that the MiRSA was instrumental in bringing together employers, educational institutions, and MWAs. Without the MiRSA, they believe that these efforts would have become fragmented and localized and would not have had the buy-in of the broader health care community.



## **Site Visit Report**

### **RSA: Health Care Regional Skills Alliance of Northwest Michigan**

**Date of Interview: July 13, 2006**

#### **Activities/Interviewees**

On July 13, Kevin Hollenbeck conducted a telephone interview with four members of the staff of the Northwest Michigan Council of Governments (NWMCOG), which is the convener of this RSA. The NWMCOG facilitates or manages several workforce and economic development programs for the 10 counties comprising the northwest portion of the lower peninsula. Among its activities is serving as the Michigan Works! agency. The four individuals who were interviewed were Elaine Wood, Deputy Director of NWMCOG; Jan Warren, Northwest Michigan Works! Program Director; Susan Auer, Program Development Coordinator; and Jean Peters, RSA Coordinator. In addition to information obtained during the phone interview, this report is based on the RSA's Annual Report, which NWMCOG sent to project staff and on the RSA's monthly progress reports submitted to DLEG.

#### **Background**

This MiRSA covers a large geographic area that includes counties that are very sparsely populated and a couple of counties with more significant population bases. In its first year of existence, the MiRSA built a substantial partnership that includes, according to its annual report, eight hospitals, many long term and home health organizations, five postsecondary institutions, four intermediate school districts and two career tech centers, the Community Services Network of Michigan, a health and hospital association council, four chambers of commerce, four economic development agencies, the area Agency on Aging, and two state workforce development agencies: Michigan Rehabilitation Services and Michigan Works! Of course, considerable effort went into building this partnership, but as we documented in the first year's report, the MiRSA did have the advantage of building on several regional initiatives that were underway before the original RSA grant.

An impressive aspect of the Health Care RSA effort is its strategic approach. It focuses its resources on virtually every entry point of a health care career ladder. In both 2005 and 2006, it offered career exploratory summer camping experiences for middle school and high school students (the high school camping experience at Ferris was not supported in 2006, however). It offers a basic health care training experience for individuals who might consider entering the industry. It facilitated several community-based nurse aide/CNA training courses to supplement the college and career center-based programs in the region. Finally, it facilitated advanced professional development training for incumbent workers. In short, it offers experiences for youth, general training for young adults considering health care careers, specific skill training for entry-level aide or CNA positions, and professional development for individuals already gainfully employed throughout the span of occupations in health care.

## **Accomplishments**

According to the NWMCOG staff members interviewed, among the primary accomplishments of the RSA have been the development of the CNA training, the strategic focus on health care career ladders, and the basic health skills training. The development of the CNA training filled a gaping hole in the region. Prior to the RSA effort, several counties in the region had formal training programs at community colleges or career technical centers, but the Traverse City area, in particular, lacked programs. Developing a high quality program to fill that need was an accomplishment.

The respondents were also proud of their focus on career ladders. They clearly feel that their efforts have facilitated the career development of individuals in the region starting with entry-level workers and progressing through CNA training and on to more formal RN or medical technician training. Finally, the basic health skills training was seen as resulting from an excellent collaborative effort between the Michigan Works! agency, other educational and governmental agencies, and health care providers.

During the discussion of accomplishments, the NWMCOG staff members also added that the on site training seminars for incumbent workers now provides smaller providers with the opportunity to access standardized professional development for their employees. Prior to the RSA, these sorts of opportunities were prohibitively costly or simply unavailable.

The interviewees also mentioned a couple of unanticipated benefits that have arisen from their activities. In the category of “making lemonade out of lemons,” the RSA found that with the geographic size of the region, it was difficult to convene meetings for the whole area. So they instituted subregional meetings instead. The unanticipated benefit was that these meetings facilitated real dialog and candor between educators and health care providers. The subregional meetings were reported to be excellent venues for relationship building and subsequent coordination.

The second unanticipated benefit of the RSA’s activities was the realization that the educational institutions in the region were not focusing on pre-nursing training. The RSA has turned this around to some extent with its basic health care training initiatives.

## **Issues/Concerns**

As mentioned, the RSA staff alluded to the size of the region as making it difficult to convene full meetings. The strategy being used to address this issue was subregional meetings. A second issue that was mentioned was adjustments made to the delivery of and publicity for the continuing education workshops. In addition to difficulties in disseminating publicity about the workshops, staff mentioned the paperwork burden of incumbent worker training grants as being somewhat burdensome. These workshops are now being run by Community Services Network

of Michigan, and seem to be operating smoothly and effectively. The final issue that was mentioned was an oversubscription to the Summer camp opportunities.

## **Sustainability**

Sustainability of the RSA initiatives was a concern, but not an overriding one. The NWMCOG has been in existence for many years, and will continue to be in existence well into the future. If the RSA were to no longer exist per se, some of the existing programs would simply become activities of the MWA. This is true of the continuing education workshops that are being funded with incumbent worker training funds and the basic health care training, which is a WIA activity. The MWA has even partially funded the summer camps. The adult education department of Traverse City schools will perpetuate the CNA training in Traverse City.

A strategy that the RSA is following is migrating toward a fee for service model, especially for the continuing education workshops. By charging employers fees for this training, the RSA has reduced its subsidization already this year.

The respondents did say that there will be an impact on the administration of the activities if and when RSA funds decrease. The coordination and marketing of activities would have to be done by individuals with other duties and responsibilities. Without dedicated funding, staff persons will get pulled in many directions. These functions will get done; but they won't be done as intensively, and will be interruptible by other priorities. The interview respondents did express a particular concern about a decline in the RSA's resources because they felt that the RSA was at the "peak of recognition." Health care providers know that the RSA is engaged in the basic health care training and the continuing education workshops.

The RSA staff members did mention a potential source of future funding. Representatives from three tribal organizations, the Grand Traverse Band of Ottawa and Chippewa Indians, the Little River Band in Manistee, and the Little Traverse Bay Tribe in Petoskey have approached the NWMCOG/RSA staff about potentially investing in health care training. While no formal arrangements had been made as of the date of the interview, the respondents indicated that the tribes were interested in the basic health care training and the community-based formal CNA training.

## **MWA Involvement**

The Michigan Works! agency and workforce investment board (WIB) were said to be very active supporters of the RSA. The WIB sees itself as the leader of the initiative. When funding for the summer camps in 2006 was an issue, the MWA partnered with the community college and some hospitals to provide the funds. In short, the MWA is heavily invested in the RSA effort.

## **Employer Involvement**

Staff members felt as though the RSA activities were completely driven by employers. In particular, providers were heavily involved in the development of the basic health care training and in identifying topics for the continuing education workshops. The RSA has reached out to the over 300 health care providers in the region, and a substantial share of them participate. In particular, all of the hospitals in the region are involved in the RSA. All of the medical agencies in all of the counties participate, and 30 to 40 long-term care facilities (adult foster care/home health/assisted living/nursing home facilities) participate as well.

## **Educational Institution Involvement**

Educational institutions have been heavily involved with the MiRSA. In particular three community and one private college have been engaged in the RSA activities. Furthermore, all four intermediate school districts in the region are active. These educational partners contribute substantial in-kind resources, but do not generally have the ability to provide hard dollar contributions.

## **Value Added**

The Northwest Michigan Council of Governments, as convener, seems to have leveraged its RSA funds into a well-recognized collaboration. It has identified and implemented four educational/training initiatives that reach individuals at different entry points in a health care career ladder. Summer camps for youth focus on longer-term career exploration. The Basic Health Care Training provides a serious orientation to the sector for adults who may have an interest in pursuing health-related careers. The Certified Nurse Aid training activities expand the region's capacity for this occupation. Finally, the Staff Development Training is delivering professional development to incumbent workers in areas that they have identified as highly useful.

There seems to be little doubt of the value added brought to the region by the RSA. Of doubt is the future sustainability of its initiatives. Staff members are concerned that just at the time when the RSA has reached a high level of recognition and credibility, it may be losing the resources it needs for administrative functions. The future of the organization will depend on the success of its strategy of fee for service training and, potentially, providing training services to tribal organizations.

However cloudy the future may be, the success of the RSA in convening providers and agencies seems clear. Beyond the convening of stakeholders, however, has been the strategic implementation of training. Those interviewed believe that the recognition by and involvement of providers demonstrate the value that the MiRSA has brought to the region.

## **Site Visit Report**

### **RSA: East Central Michigan Health Care RSA**

**Date of Visit: May 4, 2006**

#### **Activities/Interviewees:**

Project staff attended a Health Care Community Summit meeting at the Horizon Center in Saginaw on May 4. Attendance at this summit was huge! It probably exceeded 300 individuals. Prior to the Summit, project staff interviewed Bruce Grant, the chair of the Workforce Development Board for the Saginaw Midland Bay Michigan Works! agency and Ed Oberski, the director of that agency. In addition to Oberski, three other staff persons from Michigan Works! participated in the interview: Pat Washburn, Ken Kurecka, and Sharon Reed. After the Summit, staff interviewed four employer partners: Gay Schowalter from Bay Regional Medical Center, Jon Reardon from Hoyt Nursing & Rehab Centre, Mark Nichols from the Spicer Group, and Sandie Haley from Covenant Health Care. Leslie Roth and Dennis Brieske, consultants to the Michigan Works! agency who are directing the efforts of the RSA, sat in on parts of the interviews.

#### **Background**

This MiRSA has clearly established itself in this region where it has become a recognized actor in the area's health care workforce development system. It arose from several initiatives that had been underway prior to the formation of the MiRSA, and now the MiRSA appears to be doing an excellent job of coalescing those initiatives. One of the initiatives was the Hospital Council of East Central Michigan, an association of the hospitals in this area. Interestingly, in 2002, this council identified workforce development as a priority issue that affected their profitability.

A second initiative in the area comprised planning and analyses done by the Workforce Investment Board (WIB) and MWA staff. Independent of the Hospital Council, the WIB and MWA staff had, as part of their strategic planning, concluded that health care was a strategic sector for its region. Finally, the Saginaw Business Education Partnership, an affiliate of the Chamber of Commerce, had undertaken a project to create and promote career ladders for 15 health careers in 2003.

Along came the MiRSA, which expanded on these initiatives. The MiRSA expanded geographically with the inclusion of two other MWAs: the Thumb Area Michigan Works! and Region 7B Michigan Works! agencies, and it has reached out to the long-term care facilities in the area. The focus of the MiRSA is on career preparation/recruitment into the industry.

## **Accomplishments**

The Health Care Summit obviously required considerable effort, and its success is a major accomplishment of the RSA. The formal presenters provided a wide variety of data and information. One presenter discussed the potential ramifications on the health care system of a major restructuring of Delphi. Another presenter discussed the challenges of finding and retaining staff in a small, rural hospital. Future technological changes and their impacts on the skills and knowledge needed by workers in the health care industry was the subject of another presentation. An interesting presentation was given concerning the employment growth and opportunities in the medical equipment manufacturing sector. It was refreshing to see some attention being paid to spinoff (or multiplier) opportunities. James Epolito, CEO of Michigan Economic Development Corporation (MEDC) gave the keynote address for the conference.

Another substantial accomplishment of the RSA that was just coming to fruition at the time of the summit was the launching of Internet-based clinical calendar software that students, health care educators, and health care organizations could use. In the interview with the WIB chair, he identified the wait list for clinical opportunities as the biggest problem in the preparation of health care workers in the area. That problem led him to be a major supporter of the RSA initiative. The RSA had organized a committee to study the issue of clinical shortages, and after much study and deliberation, this committee recommended that the RSA contract with a software firm to develop customized software that could be used within the area to increase the number of opportunities by automating the scheduling process. This firm, the Spicer Group, had finished much of the development and was poised to launch their product soon. (Note that the RSA committee also recommended enhanced usage of virtual clinicals, i.e., simulated clinical experiences.)

Several months ago, the RSA successfully accomplished another initiative aimed at recruitment. In this case, the target audience was individuals who had left their jobs but still could potentially re-enter the labor force. A re-career effort was aimed at the individuals who had left health care jobs (e.g. for early retirement or family reasons). This effort included a major media campaign as well as refresher classes offered at local hospitals.

A final accomplishment of the RSA was the development of career information (including career ladders) on several health care occupations that could be used for students. Several on-line video products were developed that were targeted at young people.

## **Issues/Concerns**

The individuals who were interviewed were quite satisfied with the progress that the MiRSA had made to date. No one would venture a criticism of past decisions that had been made or actions that had been initiated. However, respondents did bring up two concerns about the future. First, they were concerned that not enough attention had been paid to the issue of sustainability. There seemed to be an implicit assumption that the MWAs would be able to continue funding the RSA through federal job training initiatives such as WIA or TANF.

Second, like the entire Saginaw community, the respondents were concerned about the effect of a major restructuring of Delphi.

### **Sustainability**

As noted above, some of the individuals who were interviewed were concerned about whether enough attention has been paid to the issue of sustainability of the RSA. It is probably fair to say that all of the individuals involved with the RSA would be happy if they had made more progress on future funding and sustainability. However, we got the impression that the RSA and convener staff were not overly concerned. First of all, they had considered some options such as an associate membership that would pay dues. (A prime example of an organization that charges due for such a membership is the Hospital Association.) Second, they felt like they were facing a lot of economic uncertainty (i.e., Delphi), and they were waiting to see if their first year's accomplishments such as the clinical scheduling software warranted the continuation of the RSA initiative.

### **Involvement of the MWAs and Workforce Investment Boards**

The RSA is convened by the Saginaw Midland Bay Michigan Works! agency and it is well-integrated into and supported by that agency. The chair of the WIB clearly knew of the activities of the RSA and was fully supportive. He opined that most of the Board members would be aware of the RSA. The other two MWAs that are collaborating on the RSA were said to be quite supportive. Individuals from those agencies were at the Summit, and we were told that they attend most of the full RSA and committee meetings.

### **Employer Involvement**

Several employers are actively involved in the RSA activities. The employers who were interviewed characterized the business community, i.e. health care institutions, as "co-leaders" of the RSA. Neither employers nor MWA staff are driving the agenda, but rather the projects are developed through consensus, usually by committees. The employers especially liked the project-by-project approach that has been followed because specific accomplishments could easily be identified. Furthermore, they very much liked have Dennis and Leslie as "staff," because they could investigate ideas and options in between the committee meetings, whereas employer partners usually couldn't afford to invest the time and effort.

### **Education Partners**

We did not observe or learn much about how actively education partners have been in the RSA. The Dean of the College of Nursing and Health Sciences of Saginaw Valley State was one of the speakers at the Summit, and I was told that individuals from Saginaw Valley State and from Davenport served on the committee that was responsible for the clinical software development. Also, from a previous visit, we were aware of the RSA's intention to work with the area's ISDs and K-12 systems to disseminate career development materials.

## **Value Added**

As discussed, this MiRSA is building on several initiatives that had been started in the health care sector in the region. Its value added seems to be in coalescing these initiatives into a single entity, accelerating or redirecting to some extent the initiatives, and tightening the linkage between the health care sector and the MWAs in the region.

The MiRSA has accomplished a number of specific activities: the Re-Career initiative, the clinical scheduling software, and the Health Care Summit. These projects would not have happened absent the MiRSA. The RSA has also been involved in the development of health career ladders, career development videos, and expansions to training programs that may have proceeded in its absence. But it appears as though these expansions will be facilitated by the employer awareness and publicity that is resulting from the MiRSA, and furthermore, the MiRSA may support the development of additional career ladders and/or wider dissemination into school systems.

In short, even though there were existing initiatives in the health care sector in this region, there seems to be little question about the extent of added value that is being brought to the economy by the MiRSA. The major issue that it needs to resolve is its future sustainability, which may be adversely affected if the worst scenarios for Delphi actually get played out. However, all of its activities to date have been first-rate, so we suspect that its future prospects are reasonably bright.

## **Site Visit Report**

### **RSA: Northeast Michigan Health Care Workforce Alliance**

**Date of Visit: June 7, 2006**

#### **Activities/Interviewees**

On June 7, Randy Eberts attended a regularly scheduled meeting of the MiRSA and met with several partners afterward. The partners interviewed after the meeting were Georgette Alexander, St. Joseph Health Care System, Christine Meister, Northern Michigan Hospital; Terry Basel, Michigan Works! Northeast Michigan Consortium; Janet Norton, West Branch Regional Medical Center; Diane Shields, Alpena Regional Medical Center, and Elizabeth Gertz, executive director of North Central Council of the MHA and is the convener of this MiRSA.

#### **Background**

The Northeast Michigan Health Care Workforce Alliance was formed to address the workforce development needs of health care entities in the northeast region of Michigan. Health care is a major employer in the region and a key provider of employment opportunities for a broad range of skill levels. However, health care facilities face labor shortages in key specialties that impede their ability to provide high quality, cost-effective care. Moreover, the shortages jeopardize the viability of these employers and their ability to provide a strong employment base for the region. To address these issues, the MiRSA has set out to foster new or strengthen existing partnerships to acquaint more K-12 students to careers in health care, encourage more students to enroll in health programs offered by colleges and universities in the region, and attract more graduates from health care programs into north central Michigan hospitals and other health care facilities. Following the preferences of employers, the MiRSA established a work plan with two priorities: 1) for colleges, universities, and hospitals to partner to provide training programs in health care fields, and 2) for the partners to develop and host summer camps in the region to acquaint middle schoolers with various health care careers.

#### **Accomplishments**

According to the RSA members interviewed on June 7, among the primary accomplishments of the RSA to date has been the collaboration and networking among the partners. The interviewees emphasized the value in having the opportunity to talk with human resource counterparts in other hospitals and in sharing and understanding the issues and challenges they face. This networking has created a healthy environment of cooperation rather than competition among the health care facilities. The employer partners also stressed the importance of having a facilitated networking structure through which they can discuss issues regarding training needs with the educational institutions in the region.

Those interviewed cited the advances they have made with the educational institutions as a major accomplishment of the MiRSA. The partners have put together a directory of community college and university program offerings in northern Michigan for the health care professions. This brochure is organized by 28 health care occupations and lists the educational institutions offering courses related to those occupations, a contact person at the institution, number of seats available, length of program, pre-requisites, full or part time, whether or not it is available online, and the starting and ending dates. According to the interviewees, this document has proven to be very helpful in directing prospective students to the appropriate institutions. The brochure is a joint product of the MiRSA and the North Central Council of the Michigan Health and Hospital Association.

Communication between employers and educational institutions, through the MiRSA, has also led to better coordination among educational institutions in offering accredited health care programs. One of the concerns expressed early on among health care employers was the lack of accredited programs in northern Michigan, forcing many students and incumbent workers to travel to larger educational institutions in southern Michigan in order to take the courses. According to the interviewees, the community colleges are meeting the nursing needs, but there are still shortages in some specialties.

As with other RSAs, the Northeast Michigan Health Care Workforce Alliance has facilitated the use of WIA incumbent worker training (IWT) funds in the health care sector. These funds have helped to continue and expand the tuition reimbursement program for incumbent health care workers. With the State relaxing some of the reporting requirements for IWT grants, it is even easier to administer this program, which has proven beneficial in upgrading the skills of current health care staff. In addition, the hospitals have also found the leadership training program to be very valuable in developing future supervisory personnel.

An important strategy that was pursued by this MiRSA in its first year was summer camps to acquaint middle school and high school students with health care occupations. They were quite successful in 2005, but have met with mixed results this second summer. The RSA members felt that their support for *high school* students in late June of 2006 was a significant accomplishment. The RSA sponsored 10 students to attend the Ferris State University Allied Health Sciences camp at a cost of \$495 per student. As for the local middle school camps, it was reported that employers still find the idea of reaching students at an early age to introduce them to health care professions appealing, but camp organizers have expressed concern with the inability to attract enough participants to the camps. They conveyed frustration in the lack of response to the publicity and even personal contacts they have made. The low attendance has caused logistic and cost problems. Many of the camps had scheduled health care professionals to come and work with the participants, and one camp arranged for an "airvac" helicopter to arrive and demonstrate evacuation procedures.

The interviewees also found their involvement with the MWAs to be very beneficial. They admitted that before participating in the MiRSA they had little knowledge of the Michigan Works! agencies and the services they provide. Now that they understand the extent to which

the MWAs can serve their needs, they are using them to post jobs openings and they are referring job seekers to them for services.

### **Issues/Concerns**

The primary concern expressed at the regular meeting of the MiRSA was the attendance at the summer camps. One camp filled up quickly, but as mentioned in a previous section, attendance at most of the camps this summer was below last year's participation levels. As a result, one camp was cancelled, and several reduced the length of the camp. The lower attendance was not for lack of trying. Hundreds of fliers were sent out, and camp organizers personally visited schools and met with teachers. At one camp, arrangements were made with Alpena Community College for their Educational Talent Search students to attend. Several students participated in the camp, but being older than the other campers it was reported that they did not mix well with the middle schoolers.

Another concern was the low participation of WIA students. One problem was that WIA students at one camp could only participate from 10 a.m. to 2 p.m., whereas the camp program started at 9 a.m. and ended at 3 p.m. Also, the large geographical area from which these camps draw participants and the distances students must travel make it difficult for many students to attend day camps. Nevertheless, the hospitals and other health care facilities are dedicated to finding ways to introduce students with health care professions and consider the camps to be a good way to do this. Camp organizers are planning for next summer. All agreed that the activities at the camps seem to be of interest to those who choose to attend. Much of the discussion centered on how to reach more students with information about the camps.

Another issue raised at the meeting was the staffing survey. Participants expressed a need for a more detailed analysis of the supply and demand of nurses and a better understanding of the credentials needed.

### **Sustainability**

The MiRSA is closely aligned with the North Central Council of the Michigan Health and Hospital Association. That organization existed before the establishment of the MiRSA and will continue into the future. The convener for the MiRSA is employed by the North Central Council, which allows funds to be used mostly for training and camps instead of for administration and staff functions. It appears that the Council will continue to support the MiRSA in ways it has in the past, but I am not aware of any formal commitment at this time. Individual employers have also expressed support for the MiRSA going forward, but given their relatively small size, it is unclear whether or not they have the ability to support an effort at the same level it was supported from the beginning through state funding.

## **MWA Involvement**

Obviously directing IWT funds to support training in the health care sector demonstrates a strong commitment to the MiRSA. The Northeast Michigan Consortium has been an active partner in the MiRSA, as evidenced by their attendance at the regular meetings and their involvement in the various initiatives conducted by the MiRSA. The employer and educational institution partners speak highly of the services offered by the Michigan Works! agencies and are appreciative of the opportunity to work more closely with them.

## **Employer Involvement**

Several of the major hospitals in the region are heavily involved with the MiRSA. Others are represented well by the North Central Council of Michigan Health and Hospital Association. The hospitals have been strong supporters of the summer camps, which were initiated at their suggestion and in response to their needs. The hospitals have supplied material and staff for the activities of the camps. They have also been heavily involved in the training programs, tuition reimbursement, and the leadership training.

## **Educational Institution Involvement**

Educational institutions, including four-year and community colleges, have been heavily involved with the MiRSA. Through their participation, greater cooperation and coordination has occurred between hospitals and educational institutions, according to those interviewed. This cooperation has led to a directory of educational programs for health care professions and the opening of new programs to meet specialty needs. K-12 schools have also been involved, particularly with respect to the camps.

## **Value Added**

The interviewees stressed that many of the accomplishments that they cited (as listed in the accomplishment section) would not have been possible without the RSA. Without the MiRSA, they believed that the partners would not have come together to discuss their common challenges and needs. The MiRSA, according to those interviewed, gave them a reason to meet and kept them at the table. They also insisted that the camps would not have been organized if not for the coordination facilitated by the MiRSA and the resources provided. They underscored the importance of MiRSA by observing that the economy is sluggish in northern Michigan and as manufacturing declines the health care organizations are the largest employers in many parts of the region. The economy of many of these regions, therefore, depends upon the economic viability of the hospitals. Those interviewed believe that the MiRSA, through its assistance in developing a skilled workforce focused on health care occupations, is beneficial to these employers and thus to the region.

## Site Visit Report

### RSA: Flint Health Care Employment Opportunities (FHEO) of Genesee County

Date of Visit: May 25, 2006

#### Activities/Interviewees:

Project staff interviewed a number of RSA staff and employer or educational partners at the Career Alliance, Inc. (CAI) headquarters on May 25, 2006. Included in the interview were Ms. Pamela Loving, Ms. Nichole Taylor, and Ms. Michelle Buckner of CAI; Mr. Michael Zelle, Chair, Genesee & Shiawassee Counties Workforce Development Board; Mr. Paul Edwards of the Greater Flint Health Coalition; Ms. Sherry Baker of Genesys Regional Medical Center; Ms. Anne Marie Lesniak of Hamilton Community Health Network; Ms. Markeda Yarbrough and Mr. John Manning of Flint Area STRIVE; Ms. Karla Turner of Faith Access to Community Economic Development (F.A.C.E.D); Ms. Karen Easterling of Baker College of Flint; and Mr. Adrian Jones of Mott Community College.

The individuals who were interviewed represented most of the stakeholder groups for the RSA. Ms. Loving is the President and CEO of Career Alliance, Inc., the Michigan Works! agency for Genesee & Shiawassee Counties, which is the fiscal agent for the RSA. Ms. Taylor is project director for the Regional Skills Alliance for CAI. She works jointly with Mr. Edwards, who directs the RSA activities for CAI's collaborator, the Greater Flint Health Coalition. Genesys and Hamilton Community Health are employer partners in the RSA; and STRIVE, F.A.C.E.D, Baker College, and Mott Community College are contractors or educational partners that deliver training services to the MiRSA participants.

#### Background

The MiRSA is administered collaboratively by two entities – Career Alliance, Inc., which is the Genesee & Shiawassee Counties MWA, and the Greater Flint Health Coalition. The collaboration naturally arose when the MiRSA proposal was being developed because the planned training activities could be based on the Flint Health Care Employment Opportunities (FHEO) Project, which is a workforce development project that was being undertaken by the Greater Flint Health Coalition at the time and which continues to operate today.<sup>27</sup> The FHEO Project operates primarily in the Renewal Community of Flint and is intended for lower-skilled, entry-level positions such as food service, housekeeping, and nursing assistant positions; whereas the MiRSA covers all of Genesee County and is focusing on preparation for mid-skilled occupations, such as LPNs and RNs.<sup>28</sup>

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<sup>27</sup> It should be noted that the Aspen Institute's Workforce Strategies Initiative produced a profile of this project. Linda Dworak-Munoz and Amy Blair, "Flint Health Care Opportunities (FHEO), Sector Initiative Profile," Washington, DC: Aspen Institute, 2005.

<sup>28</sup> The MiRSA has students in the following fields other than LPN or RN: Medical Assistant, Radiology Technologist, Surgical Technician, Respiratory Therapist, Physical Therapy Assistant, and Medical Biller/Coder.

## **Accomplishments**

The main focus of the MiRSA is facilitating and supporting the formal training of mid-skilled health care workers. In so doing, the MiRSA is addressing the shortage of health care workers, which is one of the most significant workforce development issues in this sector of the economy. After a slow start, the project is now fully operational and supporting approximately three dozen students. The interview respondents felt that getting these individuals enrolled and successful in their course work, which has entailed considerable effort, has been a significant accomplishment. These respondents pointed out that there were multiple steps involved and multiple barriers to overcome when getting individuals into training, and they felt that implementing successfully these steps were also major accomplishments of the MiRSA. The RSA staff members were pleased to report that in a culture and climate where employers find it hard to recruit and retain employees who are drug free, that all of the training participants were tested and passed the drug screen.

Recruitment of individuals occurs at Career Alliance, Inc. or through the faith-based non-governmental organization, F.A.C.E.D. One function of the MiRSA has been to inform and train the CAI in-take workers about career opportunities in health care and about its training opportunities. The individuals who participate in the program are monitored by individuals from F.A.C.E.D., who track attendance and grades, but also who provide support services to help the students overcome barriers such as child care, transportation problems, employment, health care benefits, etc. An important part of the MiRSA program is the Spirit of Success (SOS) sessions that are led by STRIVE. These sessions involve an intensive one-week experience dealing with critical issues that students must address to succeed followed by bi-weekly classes on other important (life skill) topics. The SOS sessions are supplemented by an emotional healthiness session that is provided by CAI. The emotional healthiness class addresses not only the life skills topics covered by STRIVE, but also includes spirituality.

One of the individuals who was interviewed mentioned student externships as a key component of the training. Five agencies in the county agreed to provide externships that comprise five days (2-4 hours per day) spread out over a 12 month period to the MiRSA participants. These externships serve a dual purpose. They allow the students to see first-hand the working environments in health care settings, but also they allow potential employers to evaluate the students, who may become future employees.

Finally, the MiRSA staff is very proud of the fact that virtually all of the students are maintaining good grades in their courses.

Among the unanticipated benefits of the MiRSA has been enhanced collaboration among agencies in the county. The interviewees recounted a slow start to the collaboration between CAI and the Greater Flint Health Coalition, but that partnership seems to be working well at this point. There is the belief that the success of the MiRSA partnership contributed to the area's successful application to the U.S. Department of Labor's WIRED grant.

## Issues/Concerns

The MiRSA has focused on recruitment into and training in mid-skilled health care occupations as its main activity. An issue or problem that the MiRSA faced in its earliest days was determining exactly what its mission should be and how it could best fit into the workforce development of health care workers. The respondents felt that the State could have provided a stronger “basis” for the MiRSA grants. However, given that such a basis was missing, the MiRSA struggled in its early months through planning and program implementation to arrive at the program design that it has now successfully implemented.

Ongoing issues for the MiRSA are a belief that resources are inadequate. The MWA (Career Alliance, Inc.) has supplemented the budget by approximately \$55,000, which includes staff time and funding for participants’ training. Respondents felt that maybe some of the individuals who have been dislocated from manufacturing jobs could transition into health care through the MiRSA training, however the grant rules associated with the payment process limited the potential participants in a way that they would be unlikely to participate in the MiRSA project.

An issue that RSA staff members raised was that the reporting and tracking system used by DLEG for the MiRSA projects are general and don’t record specific information regarding project results, such as number of persons in training, placed in jobs, or in externships. The reporting also fails to capture specific demographic information about the participants. For example, the individuals interviewed thought that it would be good to have data to compare and contrast the ethnic and socio-economic composition of the RSA trainees, who are preparing for mid-skilled jobs to those in the FHEO Project, which is aimed at lower-skilled occupations.

## Sustainability

The partners in the RSA agreed that the sustainability and prospect for future funding should be contingent on proving its viability and usefulness to health care providers, educational institutions, and participants. That is, they wanted to make sure that what they were doing was effective before they started to worry about sustainability. Many changes have taken place since the start of the project and the individuals interviewed expected to embrace several more in the future. One change will be its name identity. The RSA will soon be recognized as the ***Health Care Professionals for Michigan’s Future***. This name symbolizes the goal of the project and the goal for the students’ future success in high demand occupations.

The MiRSA staff now felt like their project had successfully taken off and they were just beginning to plan and strategize about future funding. When asked during the interview, they rejected the notion of soliciting dues or “hard dollar” support from their private sector partners. Their strategy seemed to be continued reliance on public or foundation grant support. The two lead agencies have committed to seek out additional grant funding. They also continue to work

with participants to ensure that they apply for any government-sponsored financial aid opportunities, such as Pell Grants or scholarships.

The staff had a strong resolve not to “let students hang out to dry.” That is, all of the students being supported are pursuing educational programs that are not scheduled to end until December 2007 at the earliest. Many have end dates that are two years beyond that. Everyone around the table seemed committed to finding the support that would allow these students to complete, if such support became an issue.

### **Involvement of the MWAs and Workforce Investment Boards**

The RSA is convened (in collaboration with Greater Flint Health Coalition) by Career Alliance, Inc., which is the MWA for Genesee & Shiawassee Counties. The respondents felt that it was well-integrated into and supported by that agency. Indeed, Ms. Loving, the CEO of the agency graciously took the time to participate in the evaluation interview. The WIB is very supportive of the MiRSA, and in fact, feels ownership of that initiative. The Board approved its funding enthusiastically and receives reports on its progress periodically.

### **Employer Involvement**

It seems clear that a significant level of employer involvement has been achieved in this RSA. Respondents indicated that health care employers are well aware of the FHEO Project, and so they are quite familiar with the related training activities of this MiRSA. One of the key implementers of the FHEO Project was the CEO of Genesys, a major health care provider in the county. The interview respondents noted that the employers’ participation in the externships was a signal of their strong support for the MiRSA activities.

### **Education Partners**

At the postsecondary level, Baker College and Mott Community College are the training institutions for the MiRSA students. Baker provides their students with WorkKeys testing, counseling services, and institutional scholarships. Mott has Operation Fastbreak, which is a basic skills development course, and offers considerable help with financial aid. UM-Flint is not involved in the MiRSA, but will be working with Career Alliance staff this summer on an accelerated health care training project.

At the K-12 level, the Director of the Health Platform at the Genesee Area Skill Center has been an active member of the MiRSA.

### **Value Added**

This MiRSA builds upon an existing health care employment initiative that is operated by one of the partners—the FHEO Project of the Greater Flint Health Coalition. That initiative is focused on lower-skilled, entry-level positions, and recruits disadvantaged adults from a

particular area within the city of Flint. The MiRSA is expanding upon that effort geographically, by recruiting throughout all of Genesee County, and is focusing on mid-skilled positions.

Getting the partners in synch took up the first few months of the grant. However, the effort now seems to be “off the ground” and has successfully recruited and enrolled about three dozen participants. These individuals are receiving support services from a monitor and are receiving important life skills training. Furthermore, they have been afforded high quality externships at some of the major health care institutions in the county.

The RSA has done an excellent job at prioritizing its mission—facilitating training—and is clearly adding value to the regional health care sector. Perhaps the most serious threat to its potential effectiveness is the constraint on resources and relatively minor effort to date at building sustainability. The MiRSA seems to be banking on support from its convener, Career Alliance, for the near term. Nevertheless, in spite of this concern, it appears that this MiRSA has had good success in terms of getting participants into high quality training with substantial supports in place. It seems clear that the MiRSA and its partners are making substantial progress on its mission and goals.



## **Site Visit Report**

### **RSA: Detroit Long-Term Care RSA**

**Date of Visit: April 27, 2006**

#### **Activities/Interviewees:**

Project staff attended a formal meeting of the RSA at the Henry Ford Community College, Dearborn M-TEC on Thursday, April 27. Approximately 50 individuals were in attendance. The meeting was chaired by John King, who is a consultant with the Detroit Workforce Development Department, a Michigan Works! Agency with assistance from David Shevrin, a principal with New Perspectives Group. Various reports and presentations were given during the course of the well-run two-hour meeting. The main presentation of the morning was by Margaret Jones, from the Michigan Department of Community Health Bureau of Health Professionals. Her talk concerned the application and approval processes for LPN training.

After the meeting, staff conducted a group interview with King, Chevrin, Susan Corey, Amy Davis, Jim Flanegin, Tom Purky, Fran Vian, and Reginald Witherspoon. Mr. Flanegin from St. John Health Systems and Ms. Vian from Tendercare, Inc. are employer partners; Ms. Davis and Mr. Witherspoon are educational partners; and Ms. Corey and Mr. Purky are from collaborative Michigan Works! agencies in the RSA.

#### **Background**

The convener for this MiRSA is the Detroit Workforce Development Department, but in collaboration with other MWAs in the metro area. Two prior groups had been in existence in Detroit that were dealing with health care training. One group that was mainly spearheaded by Detroit Public Schools and area universities was focusing on LPN training. This group has been superseded by the MiRSA, which also has changed the focus slightly. The second group that has been led by the Detroit Regional Chamber of Commerce is still in existence and is working on acute care employment needs, especially RNs.

#### **Accomplishments**

According to respondents, among the primary accomplishments of the Detroit Long Term Care RSA has been opening the communications channel between providers and the MWAs. Prior to the RSA, there had been very little awareness on both sides of the strengths and resources of the other. The MWAs had traditionally not placed much emphasis on health care occupations, and the health care sector had operated within its own networks of contacts for workforce development. By collaborating, the workforce agencies expanded into a whole new spectrum of employers with which it could work for training and placing its participants. Furthermore, the health care sector is growing. For long term care providers, participation in the RSA with its involvement with the MWAs opened up some opportunities for grants, networking,

and access to the other resources that the job training agency could provide. Respondents believed that the RSA was instrumental in achieving about 250 placements in long-term care since the program(s) began and in initiating two new LPN programs to expand the training capacity of area institutions.

One of the respondents suggested that successfully launching the RSA was a major accomplishment. It was no small task to market the RSA to the hundreds of long term employers in the Detroit metro area and create enough value added to have dozens of employers invest their time and energy. Furthermore, the collaboration with other MWAs and with the many educational institutions in the region takes time and effort.

Another accomplishment for which the respondents were proud was the prioritization that the RSA had done. Through their planning processes the RSA partners have set their main focus on education issues, especially standardizing CNA and LPN training. That is, the employers felt that there is too much variation in the training programs that have been offered in the area. So they are working on establishing standards for time and subject coverage.

### **Issues/Concerns**

The individuals who were interviewed were quite satisfied with the progress that the MiRSA had made to date. However, they were not shy about raising issues or concerns about constraints they have faced or the decisions they have made along the way. Mentioned first was a question about whether they had taken too narrow a course in targeting nursing homes. The emphasis on nursing homes had made it difficult to get or keep the interest of entities such as group homes, assisted living facilities, and home health employers. One of the respondents indicated that the sporadic involvement of hospitals had been an issue. This individual thought that topics covered in meetings was not of sufficient interest or value to hospital employers for them to invest the time to come to meetings.

The subject of sustainability is covered in a section below, but respondents mentioned that it was concerning that the RSA had not gotten monetary commitments from the partners. (It is the respondents' understanding that the state now requires such commitments in the more recent applications to become an RSA.)

There was concern that the RSA was not getting the involvement of the CEOs of the organizations that were involved. Broad agreement about an initiative might be garnered across the participating members of the RSA, who are mostly HR managers, but it takes the knowledge and attention of CEOs to make things happen. Similarly, one of the respondents thought that the RSA needed more involvement of the ".gov's," by which he meant the state's regulatory agencies. A suggestion that was offered by one of the respondents was to target associations in which the CEOs or other top executives of the health care facilities were members.

Finally, there was wide agreement among the respondents that the transportation issues within the Detroit metro area were huge constraints on what the RSA could accomplish. Without

good transportation options available, students cannot easily attend educational programs. And without good transportation options, potential workers cannot get to jobs.

## **Sustainability**

Sustainability of the RSA seemed to be an issue of concern to the respondents. In the immediate future, the respondents indicated that they would probably have to count on the MWA partners for continuation funding. They felt that this funding may come in the form of an operational subsidy, but they also thought that it might be possible to sell services to the MWAs, i.e., to become a contractor. In particular, they could screen and place individuals in the long term health care sector.

The members of the RSA have also considered, but not made significant progress on, a fundraising campaign. Also, they might sell “advertising” in RSA or other documents.

## **Involvement of the MWAs and Workforce Investment Boards**

The RSA is convened by the Detroit Workforce Development Department, and the respondents felt that it was well-integrated into and supported by that agency. The respondents from SEMCA and Oakland County felt that their MWAs were also highly supportive of the RSA. In all three cases, the staff members of these agencies thought that the WIBs were aware of the RSA, and in particular, the board chairs were aware of and supportive of the RSA. The respondents offered their opinions that the situation was quite similar for the other MWAs in the partnership, although no representative from those agencies happened to attend the meeting.

The MWA staff members indicated that their agencies had made significant investments in the health care field with their incumbent worker training funds, although they reported that new rules and regulations from the state made it more difficult to target those funds. Furthermore, they reported that the “competition” for potential targets for those funds has become keener because of the expansion in the number of RSAs and potential RSAs in the area.

## **Employer Involvement**

It seems clear that a significant level of employer involvement has been achieved in this RSA. The meetings have a number of employers in attendance, and the executive committee of the RSA is led by employers. To date, however, the private sector has not provided substantial in-kind or cash contributions to the RSA. As alluded to above, this may be because of limited involvement by top-level executives.

## **Education Partners**

The RSA seems to have gotten some participation from community colleges—Mr. Witherspoon, who was one of the interview respondents, is from Wayne County Community College—but far more participation from private educational organizations that offer CNA or

LPN training. The respondents suggested that fiscal difficulties may be choking the involvement of public postsecondary institutions. They noted, for example, that a loan forgiveness program in Macomb County that had been approved by hospital executives was not approved by the colleges because of loss of revenue. Furthermore, they pointed out that the cost of training health care professionals was far higher than average, so that educational institutions lose money on nursing programs.

### **Value Added**

This MiRSA is organized around the long-term care industry which, given the aging of the population, is a growing industry. The Alliance seems to have attracted a substantial number of businesses and other partners. Its meetings are informative and well-attended. The RSA seems to have honed in on goals of information sharing, training standardization, and facilitating placements in the industry.

While the RSA has done a good job at narrowing its purview, we still think that resources may be a serious constraint on its efficacy. It is attempting to cover a huge geographic and population base. This may be a drag on the effectiveness of the RSA if too many resources are invested in outreach in attempting to attract employer partners from the entire metro area.

Another concern is the MiRSA's relatively minor effort to date at building sustainability. The MiRSA seems to be banking on support from its convener or other MWA agencies for the near term. However, like virtually all public agencies, the MWAs are fiscally challenged, and so the RSA may find itself without the support it anticipates. Given that it has attracted a substantial number of employer partners already, and given the potential for many more, this MiRSA might consider using a dues structure for future funding.

Nevertheless, in spite of these two concerns, it appears to us that this MiRSA has had good success in terms of attracting employer partners, and making progress on its mission and goals. It does appear to be adding value. It has been the vehicle for forging a good relationship between the long term health care sector and public workforce development agencies, and it has helped to facilitate the placement of 250 individuals in the field. Furthermore, new LPN programs have been approved in the region.

## **Site Visit Report**

### **RSA: Capital Area Manufacturing Council/RSA**

**Date of Visit:** May 16, 2006

**Telephone Interviews:** May 9, 2006, June 20, 2006, and June 23, 2006

#### **Activities/Interviewees:**

Project staff attended a formal meeting of the RSA at the M-TEC at Lansing Community College – West Campus. Approximately 30 – 40 individuals were in attendance at this luncheon meeting. The program for the meeting was a presentation by John “Mac” MacIlroy, President and CEO, Michigan Manufacturers Association. Prior to the meeting, project staff interviewed Doug Stites, CEO of the Capital Area Michigan Works! agency and Bob Sherer, Executive Director of the Capital Area Manufacturing Council.

A week before the RSA meeting, project staff interviewed by phone Bob Thelen, of the Capital Area Michigan Works! staff about the incumbent worker training funds that were being invested in manufacturing in the area. A few weeks after the meeting, project staff interviewed by telephone two active manufacturing partners: Mr. Tim Daiss, Director of Human Resources, Magnesium Products of America, and Ms. Donna Graham, Human Resources Manager, Gestamp U.S. HardTech, Inc. These two individuals are officers of the Council: Mr. Daiss is the President of the Council and Ms. Graham is the Secretary.

#### **Background**

This MiRSA is a trade association for manufacturers (and related businesses) in the Lansing area. Its convener is the Capital Area Michigan Works! agency. The Council is a new entity—it began in 2004 just before it received a MiRSA grant—but there had been at least two similar organizations in the area prior to its formation. The Chamber of Commerce had operated a council (free of charge to participating companies) that was reported to be an effective group until its facilitator left the area to take another position. The Michigan Manufacturers Association (MMA) took over the facilitation of the earlier group, but eventually bowed out.

The model for the MiRSA was the Jackson (MI) Area Manufacturing Association (JAMA). The basic mission of the Council is to be a trade association for manufacturing. The group meets formally on a periodic basis, and tries to arrange speakers and programs that will be of interest to the whole group. But in addition, the Council has a website and an electronic directory that is disseminated to members so that networking among employers can easily take place. Finally, the Council staff conducted and wrote up the results from an area wage and compensation survey.

In its proposal for RSA funding, the convener noted plans to offer a pre-employment training program (M-STEP) as part of MiRSA. This program would provide basic training on issues such as quality, safety, and lean manufacturing for entry-level employees. To date, this program has not gotten implemented.

## **Accomplishments**

According to respondents, among the primary accomplishments of the RSA has been its growth and vitality in just a short period of time. It has established a governing council, has well-attended meetings, and, most importantly, has achieved virtual funding self-sufficiency. Its membership has not burgeoned, but it has grown steadily and through its dues structure, the council has raised the revenues to cover 85 percent of its second year budget.

Another accomplishment of the Council has been its facilitative role in electronic transactions between members. Like an electronic bulletin board, members post their needs (staff, raw materials, assistance with a particular technical problem, etc.) Other members of the group will conduct a transaction or provide a suggestion. The frequency of this business-to-business e-commerce has been a major unanticipated benefit to the MiRSA.

Respondents reported that the Council's wage and compensation survey was another significant accomplishment. Many members of the group use the data for benchmarking purposes to make sure that their wages are competitive.

Respondents noted two other significant accomplishments of the Council. First its website is seen as a resource. It is kept up to date and is informative. Second, the Council has facilitated familiarity with and use of Lansing Community College/M-TEC facilities and training courses.

## **Issues/Concerns**

All of the individuals who were interviewed were quite positive about the Council and its accomplishments. Almost no one had any issues or concerns. One individual mentioned that they would like to get a little more heterogeneity in the membership in terms of position and interest. This individual thought that maybe the Council was overly dominated by human resource managers.

Another individual offered the opinion that while the group was very appreciative of the MiRSA grant and what they were able to accomplish with it, this individual was concerned that maybe the terms and "strings" attached to the grant moved the Council in a direction that it might not have chosen to go. This individual saw the autonomy of the Council from any substantial grant as a good opportunity.

As described in the ensuing section of this report, the Council has addressed the issue of sustainability very aggressively. However, the individuals who were interviewed felt that

perhaps the funders of the MiRSAs underestimated the difficulty of getting an organization to be financially independent. The grant that they received essentially provided funds for a year, after which the organization was supposed to achieve self-sufficiency. Some suggested that a more realistic funding structure would be one that was multi-year with amounts that decreased from year to year as the organizations became more and more successful.

## **Sustainability**

This RSA differs from virtually all of the other RSAs in the state by its early and consistent focus on sustainability. The Council has been clear from the first that the goal was to become independent and self-sustaining. It has established a dues system that has brought in enough revenue to cover 85 percent of the Council's budget for the second of operation. The Capital Area Michigan Works! agency is providing the remainder of the support that it needs.

Some of the individuals who were interviewed felt that this second year was extremely pivotal. The Council would either deliver services of value that would attract enough members and dues to be self-sustaining, or it would sew its own demise by failing the market test.

## **Involvement of the MWA and Workforce Investment Board**

The convener of the MiRSA is the Michigan Works! agency, which is totally supportive of the Council. In fact, the agency is a keen supporter of the RSA concept and has established a health care RSA and is investigating a construction RSA. The MWA has contributed substantial funds to the Council, and has provided in-kind resources as well. For example, it provides an office for the Council's Executive Director and it provides services such as accounting, Internet access, and public relations/marketing.

In addition to the direct support of the Council, the MWA supports the manufacturing sector with incumbent worker training grants. The agency has an informal target of approximately half of their training funds going to manufacturing, and in this year, five of the eight existing contracts are with such concerns. These contracts generally support fairly short-term training (20 to 35 hours) at the firm's site or at Lansing Community College. The training content is driven by the employers' needs, and typically comprise subjects such as soft skills, problem solving, or lean manufacturing.

Respondents indicated that not only does the staff of the MWA fully support the Council, but also the workforce development board is highly supportive as well. In general, they thought that most of the members of the Board would be quite familiar with the workings of the Council.

While the positive tone of the comments about the MWA's relationship with the Council seemed to only reflect one-way support of the Council, it should be pointed out that one of the respondents noted a significant benefit to the MWA that had occurred because of its involvement with the Council. Through networking that was done at the Council, the MWA garnered access

to over 1100 job openings at the facilities of GM's suppliers. These openings will enhance the outcomes for the MWA's clients.

### **Employer Involvement**

The membership list for the Council is online. At the time of the meeting, there were 55 dues-paying members on the roster. Of these, 33 were manufacturers. The remaining organizations were not in manufacturing, but rather supply services to manufacturing firms such as accounting services or employee benefits or were public agencies. Nevertheless, the individuals who were interviewed were all in agreement that the activities of the Council were significantly driven by the manufacturing employers. The RSA staff work diligently in a support role to the needs of these employers.

### **Education Partners**

The main education partner in the Council is Lansing Community College, which contributes substantially to the budget. As noted above, one of the accomplishments of the Council has been its facilitation of relationships between the area's manufacturing firms and LCC. In addition to the community college, the area intermediate school districts are members of the Council.

### **Value Added**

Michigan's manufacturing sector is declining significantly, and yet as an export-based sector, it is vital to the State's economic performance. Clearly, the State needs to provide as much assistance as possible to this critical sector. The Capital Area Manufacturing Council has become a viable organization that provides information to its members and supports business-to-business e-commerce.

Another added value of the Council is the networking among employers that may help them to quickly solve issues or get information that will aid their competitiveness through informal contact with each other. The wage and compensation survey provides useful information to members so that they remain competitive in attracting workers.

The Council has not made its planned progress in operationalizing a pre-employment training program, i.e., M-STEP, but that may be the only goal that has not been achieved in the MiRSA's successful launch. The Council seems to have established itself as an important contributor in workforce development for the manufacturing sector in the Capital area.

## **Site Visit Report**

### **RSA: Grand Rapids Community College: The SOURCE and Goodwill Industries**

**Dates of Visits:**       **March 29, 2006; May 11, 2006**

#### **Activities/Interviewees:**

The convener for this MiRSA is the community outreach department of Grand Rapids Community College, the Delta Strategy. It is using the MiRSA grant to bolster an employment retention model that has been applied successfully in the manufacturing sector and to replicate that model in the health care sector. The largest share of resources is going into manufacturing and is being delivered by the SOURCE, Southwest Organizations Unifying Resources for our Community & Employees, a community-based organization that provides training and employment supports for incumbent workers. Delta Strategy is investing the remaining share of the grant in the replication effort in health care. This part of the grant is called the Health Field Group.

Project staff attended the monthly Board Meeting of the SOURCE held at Cascade Engineering's Center for Innovation on March 29, 2006. Attending the meeting were both CEOs and HR directors representing most of the businesses participating in the SOURCE. After the meeting, project staff interviewed Andrew Brower, Executive Director of the SOURCE. On a later date, project staff attended the monthly board meeting of the Health Field Group held at the Leslie M. Tassell M-TEC on May 11, 2006. Prior to that meeting, staff interviewed Connie Bellows, of the Delta Strategy.

#### **Accomplishments**

SOURCE. To date, the major accomplishments of the SOURCE, as a partner in the MiRSA, were to add two new participants, to fund computer training, to facilitate participation in a homeownership assistance program, and to provide resources to maintain viability while it restructured. The new participants were Vi-Chem Corporation, a plastics supplier to the auto industry, and Richwood Industries, a maker of laminated wood panels. Vi-Chem employs between 75 and 85 workers, while Richwood employs 51 workers. Mr. Brower could not state for a fact that these two companies joined the SOURCE because of the MiRSA grant; however, the availability of training was a key selling point.

And indeed, the SOURCE has used funding provided by the MiRSA for training. In particular, the SOURCE paid for computer training offered by GRCC that ranged from WORD and EXCEL to highly specialized training.

A recent initiative undertaken by the SOURCE has been its homeownership assistance program that is being managed by ICCF (Inter-City Christian Federation). The companies that participate in the SOURCE referred 91 employees to the program, which offers assistance in

household financing and homeownership classes. While no MiRSA funds were used for the program, the program freed up resources for SOURCE to offer it. Finally, Mr. Brower said that the MiRSA grant bought the SOURCE needed time to restructure; moving from a “fixed fee” program to a “pay for usage” program for its participants.

An unanticipated benefit to the companies in the SOURCE has been the networking that takes place between the companies. All of the companies benefit from the opportunity to share information and discuss common problems.

Health Field Group. The Health Field Group, modeled after the SOURCE, had begun in 2002 prior to the RSA grant, but got a substantial thrust with the RSA support. It facilitated the recruitment of three additional companies. So a substantial accomplishment of the RSA grant was to strengthen and stabilize the fledgling group. At the time of our site visit, it had eight active member organizations – 3 hospitals and 5 long-term care facilities. Ms. Bellows pointed out that a substantial benefit to the member organizations has been the networking of the human resources staffs.

The major accomplishment of the Health Field Group was to “pilot” successfully the retention specialist model in health care over the past year. In particular, the firms in the group contributed the funding to support an individual who served as the retention specialist. The job of the specialist was to help individuals address and resolve difficulties or issues that threatened their job performance. The goal that the group established for the pilot was to retain at least 50 percent of the workforce that was referred to the specialist. In fact, retention was about 83 percent! As stated, employer donations supported the specialist, and MiRSA funds were used for worker supports and training.

The success of the retention pilot and the successful collaboration of the group have allowed the Health Field Group to receive grant funding from the WIB through Goodwill.

An unanticipated benefit that seems to have been achieved by the Health Field Group has been the development of good relationships among the participating organizations, even though they are competitors. They have achieved a single vision of “sustaining employment in health care,” even though some members are in acute care and others are in long-term care.

### **Issues/Concerns**

The SOURCE had been up and successfully running prior to the MiRSA grant. That grant came at an opportune time for the SOURCE, so Mr. Brower had no issues or concerns. Ms. Bellows was more introspective about the Health Field Group. Whereas that group had successfully gotten off the ground, she wondered whether an even more successful launch could have occurred if (1) GRCC had relinquished its leadership of the initiative earlier or (2) the group had connected up with the Department of Human Services sooner. Furthermore, she was concerned that the group had experienced a transition in terms of roles of the individuals who attended meetings within their organizations. At earlier meetings, the individuals who attended

the meetings were key decision makers, and more recently, the attendance has been by support staff, typically human resource department staff.

## **Sustainability**

SOURCE. Historically, the SOURCE was set up to be financed by its business participants. (Note that some of the financing took the form of EDJT grants to the companies from the state.) During its first year, the SOURCE received a fixed amount from each participating company (\$6,000). Now, the financing structure is on a usage basis with one company paying as much as \$36,000 while another contributes only \$1,500.

The MiRSA grant was extremely timely to insure the continuation of the SOURCE, it seems. As was mentioned in the previous site visit report, the SOURCE did not receive training dollars from EDJT grants. The MiRSA monies served as a bridge between the SOURCE's previous and current funding structures.

Health Field Group. Much optimism pervades the Health Field Group regarding its sustainability. The group is currently working on formal bylaws and officer election procedures in anticipation of being around for many years. It is working hard on recruitment of other employers. It feels as though it can fund the retention specialist through "usage fees," wherein the firms pay on the basis of the number of their employees served, and grant dollars will be used to fund any expenses above and beyond the retention specialist.

## **Involvement of the MWA and Workforce Investment Board**

The Michigan Works! agency and Workforce Investment Board are aware of and supportive of the RSA effort, although they chose not to be the convener. They have supported the RSA with office space for the Health Field Group retention specialist, and they have supported it with incumbent worker training funds. However, individuals who were interviewed felt that the MWA and WIB were somewhat skeptical of the retention model; they felt that it was too expensive.

## **Employer Involvement**

It seems clear that a significant level of employer involvement has been achieved in this RSA. Both the SOURCE and the Health Field Group have a substantial number (approximately ten) of business firms that are making sizeable cash contributions to sustain the organizations. Both groups have active boards comprised of staff from the employing organizations. Furthermore the SOURCE meets with CEOs of the participating companies on a quarterly basis. Although the SOURCE is staffed with an Executive Director, the Health Field Group is progressing virtually completely through the efforts of the employer participants. Furthermore, our observations suggested that the SOURCE's board members were fully engaged in the operation of the organization.

During the Board meeting, one of the board members for the SOURCE stated, “The SOURCE was effective because it is run by business for business, and the companies got together first and then ‘wanted’ to have the program, which is very different from trying to pull companies together for assistance.”

### **Education Partners**

Grand Rapids Community College, which convenes the RSA, is the primary educational entity involved in the project. GRCC provides a number of non-credit bearing classes for both the SOURCE and Health Field Group participants. Ms. Bellows noted that Kent Intermediate School District was aware of the RSA activities.

### **Value Added**

The site visit report that we drafted last year referred to the “schizophrenic welding together” of manufacturing and health care into one MiRSA, and questioned whether investing about one-quarter of the funding to experiment with a replication of the retention model in health care was a good idea. The report posed the question of whether this replication would dilute the progress that could be made by the SOURCE and would be enough resources for health care.

It seems clear that, although the schizophrenia survives, both sectoral organizations are thriving and adding value to the community. The SOURCE has added partners and facilitated a substantial amount of technical training to the employees of its companies. The Health Field Group is experiencing the vitality and excitement of a new, young organization getting off the ground. Both organizations provide ample evidence of the effectiveness of a retention strategy.

## **Site Visit Report**

### **RSA: Lake Superior Community Partnership Electrical Line Technician Program**

**Date of Visit: April 11, 2006**

#### **Activities/Interviewees:**

On Tuesday morning, April 11, project staff interviewed Amy Clickner, of the Lake Superior Community Partnership Foundation; Deb Doyle, of Michigan Works! The Job Force Board; William Rigby, Associate Dean of the School of Technology & Applied Science at Northern Michigan University; and Gwen Timmons, Workforce Development Specialist with the Department of Labor and Economic Growth (DLEG).

#### **Background**

The electrical line technician program operates at the Midwest Skills Center, which is a renovated building on the grounds of Sawyer Air Force Base, which was abandoned by the Air Force several years ago. It is located approximated 20 miles from Marquette and is being developed into an industrial park/airport. The line technician program has just completed its third year, and has recruited a class for next year.

The line technician program is a one-year pre-apprenticeship program that results in a vocational certificate. Northern Michigan University has an active sub-baccalaureate occupational education mission and programs, and it has brought the line tech program under its fold. Students in the line tech program are tuition-paying NMU students, and thus are eligible to use NMU facilities: they have access to residential facilities, health care programs, and placement services. The closest sites that offer a similar program are in Green Bay and Alpena.

State funding through the MiRSA grant has taken the program to a higher level, giving it a more professional look. With that support, the program added Red Cross training, CDL licensing, and Cast-testing. In 2005-06, they added design certification for five students. They also acquired equipment that can be used for a number of years beyond the duration of the grant, including audio-visual materials, a Kelly doll for pole-top rescue, and a variety of other teaching materials.

#### **Accomplishments**

According to respondents, the primary accomplishment of the line tech RSA has been its high placement rate, which is approximately 85 percent. NMU helps with the placement process through the development of a resume book and distribution of resumes to contractors throughout the Midwest. NMU also arranges an employer's showcase, during which employers interview students and watch students' pole climbing skills. The employer advisory board commits to the showcase and to conducting interviews. NMU also monitors graduates and has established a

network for identifying additional positions. The majority of placements are out of state, but often with UP firms that have out-of-state contracts and operations. The program averages 6 placements into UP jobs annually.

Other accomplishments noted by respondents were the enhanced sustainability of the program and employer support. Staff and employers felt that the prospects of the program were a bit tentative when it first started, but it is now firmly established thanks, in part, to the support provided by the MiRSA. Besides participating in the program's showcase, employers serve on the program's advisory committee and donate equipment and services.

### **Issues/Concerns**

Respondents identified very few problems or concerns. The progress of the program has been smooth. The only issue that was raised was the weaknesses of some students in terms of academic background and interest. However, the program screens applicants to identify students with appropriate skills and interest. In rough terms, the program receives about 60 – 80 applicants per year, and it typically accepts about half of those. The MWA administers a placement test and prospective students are interviewed by advisory board members, who attempt to determine if the student likes being outdoors and can deal with heights. Applicants are tested in April, interviewed in May, and notified of their acceptance by the end of May. They go through a student orientation in the Summer. Program experience has found that about 10 percent of an incoming class drops the program during the first two weeks, at which time they can get reimbursement of their tuition.

Respondents "guesstimated" that perhaps as high as 90 percent of the line tech students would not otherwise attend any postsecondary institution. The primary academic weakness found in new students is in algebra. Students with problems in math understanding are placed into a two week refresher course at NMU to bring them up to speed.

During 2004/05, the program doubled its enrollment to accommodate the large number of applicants and in partial response to a statewide interest in getting more students into college. The RSA relaxed its selection process, but respondents felt strongly that this had been undesirable because the program's dropout rate increased and overall quality suffered. This experience helped reaffirm for them that they need to stay true to the processes that made the program successful. In particular, they require that students climb every day in order to develop a strong comfort level with the nature of the work.

### **Sustainability**

The line tech class appears to be quite sustainable. It has strong commitments from employers and from NMU. Furthermore, high placement rates will continue to attract students. The program is looking into several expansion opportunities:

1. They have added a design component structured around several students with particular aptitude in that area.
2. There is a possibility of making connections with the gas workforce. It might be possible to teach a core program in the first semester, and then have students specialize in gas, electric, or design in the second semester.
3. They have studying the Energy Education program at the University of North Dakota-Bismarck to see if it could be replicated a NMU.
4. There have been discussions with Consumers Energy about taking on students from southeastern Michigan. Although Consumers apparently believed the location of the program to be problematic, there is still the possibility of establishing a satellite program.
5. American Eagle established an airline maintenance facility at the Marquette airport last year. When this facility was in the planning stages, there were discussions about sharing a facility with the line tech program. That did not happen, but staff believe that there is a good potential for facility sharing, which would provide the program with more space and better facilities.

### **Involvement of the MWA and Workforce Investment Board**

In our initial site visit to this program, one of the founders of the Line Tech program indicated that Michigan Works! had expressed concerns about submitting the initial grant application for the line tech RSA, but apparently the agency has been supportive since. They donated office equipment when the MWA upgraded its own equipment, and they do the Accuplacer testing at their office (note that the program reimburses the MWA for this service.) Joe Esbrook, from the MWA is on the Advisory Board of the Line Tech program, and apparently some other individuals on the Line Tech Advisory Board serve on the Workforce Investment Board.

### **Employer Involvement**

Employers are fully involved in the program. They have made financial commitments to the program as well as substantial commitments of time and energy to attend meetings and to help with mock interviews. Employers have donated trucks, buckets, diggers, poles, and mechanical tune-ups. The employers' involvement has linked the program closely to real world employment conditions. The payoff to the employers is the knowledge that program completers will make knowledgeable, productive employees who they know can do the job.

Employers are quite engaged in the program, so that decision making may be characterized as highly collaborative and consensus-based.

## **Education Partners**

NMU is the only educational partner in this MiRSA. One respondent characterized the partnership as “seamless.” It appears as though the RSA and NMU work well together. The university is totally committed to the program from the President’s Office and the Dean on down. Northern hires the program faculty and structures the instructional components of the program. Furthermore, NMU has established a separate, early graduation ceremony for this program. All students receive laptops, like other NMU students. NMU did the wiring work at the Line Tech facility to accommodate computing needs, and it covers liability insurance. Vehicles used by the program are titled to NMU for insurance and licensing purposes.

## **Value Added**

The Line Tech program was established prior to the development of the RSA. However, RSA support enabled it to substantially improve and professionalize the curriculum, instructional materials, student recruitment, and placement services. Upper Peninsula employers have especially benefited because graduates of the program are ready to provide direct benefits right from the beginning of their employment.

This niche program has benefited the students who completed it. Many of these students graduated from high school with limited direction and relatively few career opportunities. After completing the program, they are hired as second year apprentices; jobs that pay, on average, \$32,000 per year with good benefits, and that lead to journeyman status. In a few cases, students have continued on at NMU beyond the Line Tech program.

The line technician program is clearly a high quality program. The students who graduate and get a certificate are highly likely to find well-paying employment in the industry. The integration of the program into Northern Michigan University, the committed support of most employers in the industry in the UP, and the high placement rates of program completers all suggest that the program will be sustainable well beyond the initial RSA support.

**APPENDIX C**  
**SAMPLE QUESTIONNAIRE**



# MiRSA<sup>SM</sup> Progress Self-Assessment

## SCALE

0	1	2	3	4	5
Not enough information	Limited development		Adequate		Highest Level

### Characteristics of Respondent

Regional Skill Alliance (RSA) \_\_\_\_\_

Sector: \_\_\_\_\_

- Role in Partnership: \_\_\_\_\_ RSA Project Director/Convener  
 (Mark one) \_\_\_\_\_ RSA Agency Staff member  
 \_\_\_\_\_ Employer Partner  
 \_\_\_\_\_ Workforce Agency staff member  
 \_\_\_\_\_ Education or training partner  
 \_\_\_\_\_ Other \_\_\_\_\_

### Instructions

This self-assessment\* was developed to examine how well each Regional Skill Alliance is progressing toward the goals that it has set for itself. It gives the respondent an opportunity to "score" the RSA along nine dimensions, which are thought to be important factors for success. It is important to be as accurate as possible because the data will be used to identify the factors or conditions that help an RSA to succeed or the obstacles that are not easily overcome.

We collected this information from you last year and now we would like to gauge progress since then.

For each dimension below, we have identified several factors that may contribute to the progress that the RSA is making toward its goals. We would like you to assign a score of 1 to 5 to indicate the progress that you feel the RSA has made in its efforts. To assist you in this task, we have described what would be observed if the RSA was operating at its highest level for each factor. If this closely represents your perception of the RSA, then you should circle the 5 and write it on the "Score" line.

We have also described how the RSA might be perceived if it were at an adequate level of progress. If this would closely represent your perception, then you should circle the 3 and write it on the "Score" line. (Use the score of 4 if you perceive the RSA to be somewhere in between the highest level of progress and the adequate level.) Finally, we have also described how the RSA might be perceived if it had addressed this factor in only a limited manner, or if it had inadequately addressed the factor. If this closely represents your perception, then you should circle the 1 and write it on the "Score" line. (Use the score of 2 if you perceive the RSA to be somewhere in between adequate and not yet addressing this factor.)

If you are unaware of the progress of any of the factors, then you should use a score of 0.

We understand that it might be difficult to determine a rating, but we would ask you to do your best. Usually, your first impression will be the most appropriate one.

Note that we will maintain confidentiality with these progress self-assessments. The only information that will be disseminated publicly will be averages or other general descriptive statistics for each RSA.

\*Adopted from a similar form developed by Public Policy Associates, Inc. Lansing, MI

### Dimension 1: Governance/Decision Making

Factor 1.1: Organizational Prominence Score: \_\_\_\_\_

- 5 MiRSA is a prominent department or program in its organization; CEO and Board President are actively involved; staff members are aware of and support mission/activities.  
 4  
 3 MiRSA is "line" organization in agency; CEO and Board aware of, but not actively involved in RSA activities; some agency staff not aware of mission/activities.  
 2  
 1 MiRSA is an activity that has been added to responsibilities of existing department; CEO somewhat knowledgeable, but many Board members may not be; most agency staff members are unaware of mission/activities.  
 0 Not enough information

Factor 1.2: Project Staffing Score: \_\_\_\_\_

- 5 Project staff has relevant experience and training that includes knowledge of the industry, facilitation skills, administrative skills, data analytical skills, and experience with specialized training.  
 4  
 3 Project staff has some relevant experience or training, but need further development in one or more key areas.  
 2  
 1 Project staff has little training or experience and need considerable professional development or outside help to administer the MiRSA.  
 0 Not enough information

Factor 1.3: Project Management System Score: \_\_\_\_\_

- 5 MiRSA project staff has established a rigorous, but flexible system for tracking progress and resources (e.g. MS Project); partners have "bought into" system.  
 4  
 3 Project staff is planning to implement, or is in process of implementing, formal project management system; MiRSA partners have identified need for system.  
 2  
 1 Project staff has not formulated plans to implement a project management system; MiRSA is working from broad timelines in proposal.  
 0 Not enough information

Factor 1.4: Decision Making Structure Score: \_\_\_\_\_

- 5 MiRSA's lines of authority and accountability are clear; decisions based on knowledge/experience; decisions can be made quickly and flexibly; MiRSA director/convener has appropriate level of decision making authority.  
 4  
 3 MiRSA decision making seems reasonable, but sometimes decisions held up by bureaucracy or otherwise not made in timely fashion.  
 2  
 1 MiRSA's lines of authority and accountability not clear; instances of inadequate decision making have occurred.  
 0 Not enough information

0 Not enough information	1 Limited development	2	3 Adequate	4	5 Highest Level
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### Dimension 2: Employer Engagement

Factor 2.1: Full Representation Score: \_\_\_\_\_

- 5 MiRSA has engaged virtually the entire industry in the region; all firms participate – not just an industry association.
- 4
- 3 MiRSA has engaged many of the key firms in the industry, but one or more firms are not participating; some participation is minimal.
- 2
- 1 MiRSA has limited participation of firms in the industry; effectiveness seems to be impaired because of the limited participation.
- 0 Not enough information

Factor 2.2: Recruiting Appropriate Decision Makers Score: \_\_\_\_\_

- 5 The employer partners' executives are engaged in strategic decision making to ensure commitment; managerial/supervisory staff are engaged in design and implementation of MiRSA.
- 4
- 3 Some or all key employer partners are represented at a single—executive or managerial—level.
- 2
- 1 Employer representatives are not key decision makers in their firms (e.g., government or public relations staff members); executives or managers not active.
- 0 Not enough information

Factor 2.3: Employer Role Score: \_\_\_\_\_

- 5 Employers take ownership of the activities and make key decisions; employers define need, articulate outcomes, and work together.
- 4
- 3 Employers have moderate role in the functioning of the program; they mainly provide advice and consultation.
- 2
- 1 Employers not involved on an ongoing basis; MiRSA may consult with employers and invite feedback; however, no substantive role.
- 0 Not enough information

Factor 2.4: Employer Investment Score: \_\_\_\_\_

- 5 Participating employers have paid or will pay for training or have made other substantial financial investment in the MiRSA.
- 4
- 3 Employers have donated time or use of facilities; representing a limited opportunity cost.
- 2
- 1 Participating employers have not made any substantive investments in MiRSA.
- 0 Not enough information

### Dimension 3: Connections to Existing Workforce Development Agencies

Factor 3.1: Connections to WIB(s)/MWAs Score: \_\_\_\_\_

- 5 WIB/MWA staff and service providers thoroughly knowledgeable about and involved in all aspects of MiRSA; involved in facilitating connections to One-Stop.
- 4
- 3 WIB/MWA staff has moderate involvement; may attend meetings and provide information, but not active partner.
- 2
- 1 WIB/MWA staff not involved and not very knowledgeable about MiRSA activities.
- 0 Not enough information

Factor 3.2: Connections to Education and Training Institutions Score: \_\_\_\_\_

- 5 Most of the education and training institutions in region are full partners; E&T staff members are thoroughly knowledgeable about and involved in all aspects of MiRSA; involved in setting priorities; involved in facilitating connections to training within their institutions.
- 4
- 3 E&T staff or board members moderately involved; may attend meetings and provide information, but not active partners.
- 2
- 1 E&T staff not involved and not very knowledgeable about MiRSA activities.
- 0 Not enough information

### Dimension 4: Use of Data

Factor 4.1: Using Data to Identify Skill Shortages Score: \_\_\_\_\_

- 5 MiRSA collects primary data—surveys, focus groups, or personal interviews—about skill needs and gaps to supplement secondary data sources—information collected by other entities such as DLEG, BLS, Census Bureau—that may possess useful information.
- 4
- 3 MiRSA relies solely on secondary data sources, and does not try to validate or supplement with primary data.
- 2
- 1 MiRSA does not use systematically collected data on labor market to plan or build consensus around priorities.
- 0 Not enough information

Factor 4.2: Using Data to Engage Stakeholders Score: \_\_\_\_\_

- 5 MiRSA staff actively solicit review and comments on primary and/or secondary data by participating partners in meetings or other group settings.
- 4
- 3 MiRSA staff provide partners with information and offer opportunities to review or comment on a limited or informal basis without explicit expectations for feedback.
- 2
- 1 MiRSA staff do not share data/information at meetings, but only use data for purposes such as submitting grant proposals.
- 0 Not enough information

0 Not enough information	1 Limited development	2	3 Adequate	4	5 Highest Level
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**Factor 4.3: Performance Monitoring** Score: \_\_\_\_\_

- 5 MiRSA has a program improvement system in place to track and monitor progress toward goals and to measure impact on businesses; progress measures may include characteristics and outcomes of clients; impact measures may include employee retention, hiring, productivity enhancement, and other measureable goals.
- 4
- 3 MiRSA uses anecdotes to document activities and impact.
- 2
- 1 MiRSA staff does not systemically collect data on performance or impact.
- 0 Not enough information

**Dimension 5: Communication and Marketing**

**Factor 5.1: Organized Commitment** Score: \_\_\_\_\_

- 5 MiRSA has recognized the importance of its communications and marketing efforts and has devoted enough resources and staff to keep all partners and stakeholders informed; website or other Internet functionality is used effectively.
- 4
- 3 MiRSA has recognized the importance of communications and marketing, but some communications efforts have not occurred smoothly.
- 2
- 1 MiRSA does not recognize communication issues; communications seem to be undertaken on an ad hoc basis; some partners not fully informed.
- 0 Not enough information

**Factor 5.2: Consistent Quality** Score: \_\_\_\_\_

- 5 The communications efforts are well planned and well executed; they're timely and thorough; complete information is disseminated to all partners in the MiRSA; communications seems to be a strength.
- 4
- 3 Communications efforts seem to be adequate; may be occasionally late; or may have inadvertent erroneous information or dissemination problems.
- 2
- 1 Communications have credibility problems; some partners feel uninformed.
- 0 Not enough information

**Factor 5.3: Marketing Effectiveness** Score: \_\_\_\_\_

- 5 MiRSA staff have developed a marketing campaign and materials that are effective in informing public and creating positive perceptions about MiRSA.
- 4
- 3 Project staff planning to implement, or are in process of implementing, marketing plan and developing materials; MiRSA recognizes importance of marketing and is investing staff time or other resources in effort.
- 2
- 1 MiRSA staff has not addressed nor invested time or resources in marketing activities.
- 0 Not enough information

**Dimension 6: Planning**

**Factor 6.1: Alignment with State and Regional Priorities** Score: \_\_\_\_\_

- 5 MiRSA plans targeted on regional priorities; development of plans considered alignment as a priority; and plans consistent with broad State goals.
- 4
- 3 MiRSA plans generally consistent with regional priorities; some aspects of effort may not be directly aligned; plans may not be totally consistent with broad State goals.
- 2
- 1 MiRSA planned activities not particularly targeted on issues specified in grant proposal; partners or staff have directed resources into other non-RSA initiatives.
- 0 Not enough information

**Factor 6.2: Partner Involvement in Process** Score: \_\_\_\_\_

- 5 MiRSA partners, especially employers, fully engaged in planning process—i.e., making decisions, setting priorities; all partners have opportunity to help shape the plans and strategies.
- 4
- 3 Some or all key MiRSA partners had limited involvement in planning and goal setting processes; staff primarily drove the planning process with partners providing input.
- 2
- 1 Partners not involved in planning; MiRSA staff developed plans with little input from partners.
- 0 Not enough information

**Factor 6.3: Specificity of Strategies and Partner Responsibilities** Score: \_\_\_\_\_

- 5 Written plan has enumerated specific goals and strategies to achieve the goals; attention has been paid to measurability of the outcomes; plan indicates who will be responsible for each strategy.
- 4
- 3 Informal plan that the MiRSA has developed is fairly general; one or more of the goals are not measurable; plan does not assign responsibilities.
- 2
- 1 Plans are still evolving; or goal statements are extremely general; no attention to assigning responsibilities.
- 0 Not enough information

0 Not enough information	1 Limited development	2	3 Adequate	4	5 Highest Level
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**Dimension 7: Client Activities**

Factor 7.1: Addresses Skill Shortages Score: \_\_\_\_\_

- 5 MiRSA staff used reliable, recent data to identify skill(s) shortages; investigated full range of activities that might be used to address shortage(s); used systematic process with input from partners to choose appropriate activities that will address problem.
- 4
- 3 MiRSA staff used some data, but also relied on anecdotes to identify activities; may not have considered full range of alternatives; decision making may have not included all partners.
- 2
- 1 MiRSA staff paid relatively little attention to data or full range of alternatives; activities selected for convenience or cost reasons.
- 0 Not enough information

Factor 7.2: Appropriate Curriculum and/or Materials Score: \_\_\_\_\_

- 5 MiRSA staff put considerable planning and effort into choice or development of curriculum or materials; facilities are first-rate; appropriate coordination with local providers.
- 4
- 3 MiRSA staff invested some time and effort into choice of curriculum or materials; reliance on existing materials or activities that may or may not be appropriate; little or no coordination with local education and training institutions.
- 2
- 1 MiRSA staff has not addressed client activities yet; ideas being researched; many suggestions being followed (no consensus).
- 0 Not enough information

Factor 7.3: Appropriate Assessments and Outcome Measurement Score: \_\_\_\_\_

- 5 Client activities include appropriate, rigorous assessment of client needs; assessment tool is valid and reliable; outcomes of activities have been identified and will be measured appropriately.
- 4
- 3 Client activities to be "loosely" assessed; assessment tool has been identified; validity and reliability properties unknown; little attention has been placed on measurement of outcomes.
- 2
- 1 Client activities being identified; no or ad hoc assessment of client needs is planned; outcomes not yet identified.
- 0 Not enough information

**Dimension 8: Resource Adequacy**

Factor 8.1: Resource Effectiveness Score: \_\_\_\_\_

- 5 MiRSA's expenditures and budget seem to be aligned with goals and resource utilization is approximately in proportion to progress. For example, when 25 percent of the resources have been spent, about 25 percent of the progress toward goals has been made.
- 4
- 3 MiRSA budget developed in a way so as to support goals, but resource utilization may not align with progress.
- 2
- 1 MiRSA budget and expenditures not under control, or reported; resource utilization may significantly exceed progress on goals.
- 0 Not enough information

Factor 8.2: Resources Being Leveraged Effectively Score: \_\_\_\_\_

- 5 MiRSA staff have access to substantial additional in-kind or financial resources; additional resources are being used effectively to achieve goals.
- 4
- 3 MiRSA staff actively soliciting additional sources of funding but additional resources may not yet be available, or outside resources not directed effectively toward progress on MiRSA goals.
- 2
- 1 MiRSA staff have not put priority on additional resources, so limited in-kind or financial resources are available.
- 0 Not enough information

Factor 8.3: Sustainability Plan Score: \_\_\_\_\_

- 5 MiRSA and partners maintain a consistent and persistent focus on sustainability in setting priorities and design of client activities; sustainability is a criterion used to prioritize activities; substantial effort is placed in achieving sustainability; partners have developed an overall strategic plan for continuation.
- 4
- 3 Partners occasionally attend to sustainability as an issue, but it is not a central concern; belief that sustainability will occur in later stages of implementation.
- 2
- 1 MiRSA collaborators not concerned about sustainability.
- 0 Not enough information

**Dimension 9: Technical Assistance from RSA Staff**

Factor 9.1: Utilization Effectiveness Score: \_\_\_\_\_

- 5 Local MiRSA staff have good working relationship with state RSA staff; State RSA staff members have an open line of communication and have helped resolve problems or have suggested innovative ideas for implementation.
- 4
- 3 Local MiRSA staff share information with State RSA staff as required; little evidence that exchange of information has assisted in progress toward goals.
- 2
- 1 Local MiRSA staff has little interaction with State RSA staff; opportunities for benefit may have been foregone.
- 0 Not enough information