Our Mission
• Provide the healthcare industry with a well-trained, flexible workforce,
• Create ongoing capacity to transform health science education and delivery, and
• Position Minnesota as a global leader in healthcare education, practice, research and innovation.

Core Goals
To accomplish the mission, we are focusing on two core goals to:
• Convene educators and healthcare industry stakeholders to positively impact health sciences education and practice.
• Enhance economic development through increased quality and sustainability of healthcare education, practice and innovation.
HealthForce Minnesota’s summative report spans two fiscal years – 2010 and 2011. It is themed Learning, Expanding and Sustaining, for good reason. July 2011 began a new fiscal year and marked the sixth year of the Centers of Excellence within the Minnesota State Colleges and Universities System. It is a time to reflect back on lessons learned, on the expansion of innovation that has flowed forward and on the sum total of our impact in the work we do. We have much to celebrate.

We did a “progress inventory” with our partners across the state of the 96 projects we have supported over the past six years. It was fulfilling to see that over half of the projects funded are continuing in their same form at this time. When the Center first started in 2005, President Ramaley openly invited Minnesota to engage in meaningful lessons as a way to learn how to do this essential work of partnerships and collaborations in new ways. The Cycle of Innovation Dr. Ramaley described in 2007 lured me to become directly involved in the important work of HealthForce Minnesota. The idea of making investments in innovative projects and programs encourages our system and its partners to work together differently. I hope you agree that this has been an adventure worth investing in public time, talent and resources. As Minnesota looks ahead to its future as a national leader in education and in healthcare, I believe there is a continued place for strong leadership and innovative partnerships.

I have seen, in the eyes of our partners and the people we serve, the hope and excitement that many of our projects provide. One such project – Scrubs Camp – yields many examples year after year. It is a privilege to be the “camp nurse” every year, and this summer I had a remarkable moment when a junior in high school came to me for her evening medications. I asked how her day at camp was and she shared with excitement and conviction that during the day she had decided her future path. After hearing one of the Fairview Health Services volunteers speak about the hand therapist profession, this camper was thrilled to share that she wanted to become an occupational therapist and specialize in hand therapy herself. At the end of a long day, it was exactly what I needed to hear, and it reiterates the reason we do this work.

Defining the return on investment is a reality, but no one can determine all the rippling effects or long-term return on investments from some of the work that HealthForce Minnesota does. This report provides you with a snapshot and some highlights of the investments we made on behalf of Minnesota during the past two years. Read the summaries carefully and look for ways you may be sparked to create change in your community and in your work. Innovation takes many forms and it comes from all places.

Jane Foote
Executive Director; HealthForce Minnesota
We have been working together since 2005. We have invented a model of collaboration that draws on the strengths, experiences and relationships of our education and healthcare partners across our state. We have invested in Minnesota by asking our partners to propose innovative approaches to the delivery of care in their own communities. Our work together and the results we are now beginning to see offer wonderful lessons that can be applied anywhere in the state and across all sectors of our diverse communities.

• The educational experience, whatever its goal, is changing dramatically and affecting what should be learned: when, where, how we learn, and with whom. We see this in the creative designs that have emerged through our investments in new programs and curricula, in programs for incumbent workers in healthcare throughout the state and in our approach to building a bridge for youth into healthcare careers.

• The healthcare profession is also changing in important ways. These changes have real consequences for how we prepare our students as well as how we work with professionals already in the field. Now we share the responsibility for designing and delivering the programs that prepare our students to practice in a rapidly changing healthcare environment.

• There are new players, new contexts and new rules in healthcare as well as new demands on our industry partners to demonstrate both the quality and cost of the services they provide. That is why, for example, we have adopted the concept of a Cycle of Innovation rather than the old reengineering or continuous improvement model for responding to the needs of our communities and the people who provide healthcare throughout our state.

• The growing use of technology and social networking is changing how we communicate, what we know and what we expect when we seek the advice of a healthcare provider. The ready availability of information is changing the relationship between a patient and a healthcare professional, just as those same forces are changing how educators, healthcare providers and policymakers work together to adapt healthcare to the demands of a changing Minnesota.

As you read this report, we hope you will find something that will be of value in your own work. Perhaps some questions like these will come to mind.

• What kind of people do our students become and what roles have we played in their development?

• How effectively do we embrace community issues, and how are we using this understanding to design student learning, set a research agenda to inform our efforts, and work together as members of HealthForce Minnesota?

• How can we put what we learn to the best use in further agenda setting and improvements in the experiences of our students and the further support and development of Minnesota’s healthcare community?

Let us know what questions come to mind as you read this report. What else would you like to know that might be useful in your community and in your own work?

Judith Ramaley
President, Winona State University
As we respond to the social and economic changes that are happening all around us, we have discovered that we need something more complicated than the familiar “continuous improvement” model. What we need today is the ability to read the environment in which we live and work as clearly as we might read an engaging book and then act in innovative and creative ways to respond to what we see. This way of learning in new ways and working together in new ways drives what we call a Cycle of Innovation. The cycle begins to turn as we identify the changing needs of the people who deliver healthcare and the people who seek care across the state of Minnesota. Over the past six years, we have supported a set of innovative short-term projects proposed by our partners in higher education and in healthcare. Some of these projects acquire a life of their own and develop into a series of larger scale projects and adaptations as you can see on the left-hand side of our Innovation Cycle Model. Our experiences and the lessons we learn from them set the stage for the next turn of the cycle as we continue to respond to the needs of the healthcare sector and the people of Minnesota.

Some of our projects yield very effective programs and solutions and do not require further support. Some of our projects do not accomplish what we had hoped they would and we do not continue them. New projects may emerge from our experiences, as changing needs require us to come up with fresh solutions to the challenges of delivering quality care. In those cases, a new cycle will begin as you can see on the right-hand side of our Cycle of Innovation model.
Learning:
Taking new healthcare ideas and creating projects and programs to support them. These are the exciting projects HealthForce Minnesota funded in fiscal years 2010 and 2011.

K-12 Vision for Youth

Mobile Science Lab Program
Description:
To meet the needs of high school science teachers in Minnesota, a second Mobile Science Lab trailer was developed and deployed. The Mobile Science Lab Program is used to complement and support the Mayo Clinic Educator Academics and meet a need in Southeast Services Cooperative member school districts.

Outcomes:
The second Mobile Science lab trailer has meet teachers’ demands for usage.

Sustainability:
The two trailers are in constant demand. The Mobile Science Lab Program is reaching more school districts and the familiarity of the program is becoming vast.

Served:
886 students and teachers

Deliverable:
Provided a second traveling trailer, strengthened STEM education, and strengthened the current partnerships in the southeastern Minnesota area between the area school districts and the Mayo Clinic.

High School Health Careers

Description:
The goal was to increase the number of Roosevelt High School students certified as nursing assistants to meet requirements for students entering nursing programs and to improve the ability of students in post-secondary environments.

Outcomes:
More students were enrolled in the program from Roosevelt High School – giving students the opportunity for employment in the future.

Sustainability:
Not sustainable at this time.

Served: 15

Deliverable:
Increased the number of underrepresented students earning the Minnesota Nursing Assistant Certificate.

HealthForce Minnesota funding $17,500.00
In-Kind funding $6,480.00
Total funding $23,980.00

Diversity

Working to Assure a Skilled & Diverse Healthcare Workforce

Description:
Workforce Development Inc. worked to increase retention of diverse, entry-level healthcare workers through a successful mentoring project between Northland College and the White Earth Reservation. Funding also was used to refine Workforce Development’s existing Academy model.

Outcomes:
Healthcare Academies (HCA) continues to offer schedules that coincide with the Nursing Assistant classes at Riverland and South Central Community colleges. HCA classes have become an integral part of the Workforce Development services and recruiting for the classes is “top of mind” for the job counselors meeting with students who indicate interest in healthcare. The project partners who worked together during the mentoring program have realized the success of the program with many others following suite.

Sustainability:
Counselor will continue to coach HCA graduates and advocate for them with the project facilities.

Served: 173

Deliverable:
Increased recruitment and retention of a diverse healthcare workforce.

HealthForce Minnesota funding $52,253.00
In-Kind funding $72,773.84
Total funding $125,026.84

New Curricula or Programs

Physical Therapist Assistant Degree Pathway for Military-Trained Personnel (Bridge Program)

Description:
Lake Superior College and American Physical Therapy Association are developing a pathway for military-trained personnel to attain an AAS degree in physical therapy.

Outcomes:
The project allowed the reviewing of military curriculum and the revision of many syllabi and course outcomes to meet the curriculum needs.

Sustainability:
Tuition will cover the cost of program. Student enrollment is planned for fall 2012.

Served: 0

Deliverable:
Will allow military-trained physical therapist assistants to earn an AAS degree as a physical therapist assistant via distance education.

HealthForce Minnesota funding $48,494.00
In-Kind funding $14,016.00
Total funding $62,510.00
Building a New Curriculum, STAT!  
(Simulation throughout All Terms)

Description:
Winona State University (WSU) is developing a new curriculum, STAT. The program is designed to integrate simulation experiences with the METI man adult simulator for WSU nursing students and Winona Health nurses on the Winona campus. Additionally, this team will collaborate with its partners to create a plan to make simulation experiences possible for them.

Outcomes:
This project created and implemented simulation experiences with the METI man adult simulator for WSU nursing students and Winona Health nurses on the Winona campus.

Sustainability:
Enrolling hundreds of nursing students each year with the potential to increase over time.

Served: 565

Deliverable:
Developed and implemented simulation experiences with the METI man adult simulator for WSU nursing students and Winona Health nurses on the Winona campus.

An Innovative Model Advancing Baccalaureate Nursing Education in Minnesota

Description:
The purpose of this project is to meet identified workforce needs by increasing baccalaureate prepared nurses while supporting the generic associate degree nursing program.

Outcomes:
Developed curriculum framework based on the Oregon Consortium of Nursing Education (OCNE) model.

Sustainability:
Awarded additional funding through HealthForce Minnesota for FY 2012.

Served: 0

Deliverable:
Developed new curriculum and/or programs to meet current and future healthcare workforce needs.

HealthForce Minnesota funding $25,000.00
In-Kind funding $ 5,650.00
Total funding $30,650.00

SOP – Standardizing Orientation Processes

Description:
Many K-12, higher education institutions, healthcare providers and workforce center systems are burdened with the process of duplicating clinical site orientations. The project was to standardize orientation among providers to significantly decrease duplicative orientation hours and increase the hours students spend on mastering valuable nursing skills at the bedside.

Outcomes:
A CD was created of the standardized orientation documentation that can be utilized for further exploration, improvement, or testing of the concept.

Sustainability:
Pine Technical College implemented and expanded this module throughout the state.

Served: 155

Deliverable:
Created a standardized orientation for nursing students that will be completing clinicals.

HealthForce Minnesota funding $25,000.00
In-Kind funding $ 5,650.00
Total funding $30,650.00

Continuing Education – Custom Training

Mobile SimLab L1 Training Program

Description:
Ridgewater College researched, developed and implemented a state-of-the-art labor and delivery simulation training program.

Outcomes:
OB equipment was purchased and healthcare providers participated in the labor and delivery scenarios offered by the OB Team Leadership program.

Sustainability:
Sustainable through Ridgewater College with the understanding of usefulness and feasibility.

Served: 369

Deliverable:
Created a labor and delivery program for Mobile SimLab L1.

HealthForce Minnesota funding $50,000.00
In-Kind funding $48,157.00
Total funding $98,157.00
K-12 Vision for Youth

SimLab “Code Blue” Scenarios for High Schools

Description: The SimLab project introduces youth to a variety of careers available within healthcare organizations. It will strengthen student awareness and application of STEM curriculum to health sciences.

Outcomes: The project allowed the traveling SimLab to visit multiple high schools throughout the state. More schools than the original grant list were scheduled because of marketing efforts and an awareness of the HealthForce Minnesota/Sim Lab project.

Sustainability: The SimLab is being used to provide high school students throughout the state with simulated healthcare scenarios using state-of-the-art manikins.

Served: 390 students

Deliverable: Created “Code Blue” scenarios for high school students through the traveling simulation science lab project.

HealthForce Minnesota funding $50,000.00
In-Kind funding $3,709.00
Total funding $53,709.00

Online Health Career and Math Program for Grades 1-6

Description: This project was created to develop and deploy interactive and engaging online curriculum for elementary school students in the form of mini-games called Health Careers and Math (HCM).

Outcomes: HCM was designed to accomplish four goals:
- Inform students about the important characteristics of a set of healthcare careers,
- Explain to students how workers in healthcare careers need and use mathematics,
- Keep elementary school students interested and involved long enough for them to absorb the learning content, and
- Convince adults to allow and promote the use of HCM by children.

Sustainability: The project will become sustainable when students are enrolled and efforts are furthered to reach more interested students.

Served: 0

Deliverable: Developed and deployed interactive and engaging online curriculum for elementary school students in the form of mini-games called Health Careers and Math.

HealthForce Minnesota funding $50,000.00
In-Kind funding $58,957.00
Total funding $108,957.00

Diversity

Healthcare Careers with NAR & HHA Cohorts

Description: Credit-based courses were offered to provide participants help in passing either the NAR certification or the Home Healthcare Aide certification. Funding also helped sponsor a Health Career Fair for the Minnesota school districts of Isle, Onamia and Nay Ah Shing.

Outcomes: The Health Career Fair was held at the Onamia Community Center and over 400 students from Isle, Onamia and Nay Ah Shing schools participated in the daylong event. Multiple students went through the rigorous recruiting and passed background checks so they could take a course to either receive NAR certification or Home Healthcare Aide certification.

Sustainability: Adjustments are needed to make the courses sustainable.

Served: 20 students for the courses and 400 students for the Fair.

Deliverable: Developed a redesign program to meet educational needs of the diverse and adult healthcare workforce.

HealthForce Minnesota funding $24,700.00
In-Kind funding $25,458.00
Total funding $50,158.00

START Allied Health Program

Description: Led by Itasca Community College, funding for the START Allied Health Program matched existing FastTRAC Minnesota funds secured in September 2010 for a redesign program aimed at educating a diverse, adult healthcare workforce.

Outcomes: Program started with ten students taking computer, writing, personal empowerment, and an on-line healthcare curriculum course.

Sustainability: Additional funding may be needed for the continuation and expansion of this program.

Served: 10

Deliverable: Developed a redesign program to meet educational needs of the diverse and adult healthcare workforce.

HealthForce Minnesota funding $25,000.00
In-Kind funding $3,750.00
Total funding $28,750.00
**Foundational Science Coursework Creation**

**Description:**
PPL (Project for Pride in Living) and their partners wanted to create a Foundational Science curriculum to better prepare (and build confidence of) 20 students interested in healthcare occupations. This will be done in tandem with the creation of a Pharmacy Tech curriculum that 10 Children's Hospitals and Clinics of Minnesota's employees will be recruited to attend. Upon completion, the 10 graduates will participate in a residency program at Children's.

**Outcomes:**
Implemented curriculum and enrolled PPL and Minneapolis Community and Technical College participants and Children's employees.

**Sustainability:**
Still in the first stage of the project.

**Served:**
32

**Deliverable:**
Created a Foundational Science curriculum that will better prepare students interested in healthcare occupations.

**HealthForce Minnesota funding** $50,000.00

**In-Kind funding** $40,880.00

**Total funding** $90,880.00

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**New Curricula or Programs**

**Core Competency Bridge Model in Medical Lab Scientist and Technician**

**Description:**
The project will create core competency content modules in medical laboratory technology/sciences to provide a bridge for two-year medical laboratory technicians to advance to the four-year programs. This model may also reengage professionals to update their knowledge and skills and/or reenter the workforce.

**Outcomes:**
Curriculum mapping is complete and available for use. The modules focused on 15 core clinical laboratory science competencies, and can be grouped in any combination for continuing education and review, or together comprise a course of up to three credits, depending upon the individual's needs.

**Sustainability:**
Still in the first stage of the project.

**Served:**
13

**Deliverable:**
Created core competency content modules in Medical Laboratory Technology/Sciences to provide a bridge to ease the transition for the MLT professionals seeking to advance from the two-year level to the four-year programs or to reengage and invigorate professionals seeking to update their knowledge and skills and/or reenter the workforce.

**HealthForce Minnesota funding** $36,925.00

**In-Kind funding** $27,972.75

**Total funding** $64,897.75

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**Online Completion Degree in HIM, Health Information Management**

**Description:**
An online adult completion degree in Health Information Management (HIM) is being designed and developed. It will serve graduates in two-year Health Information Technology programs in the Minnesota State College and University (MnSCU) system. The degree will be designed for adults and working learners to serve as a pathway from a two-year accredited associate degree to a four-year baccalaureate degree.

**Outcomes:**
Researched accreditation standards for associate and baccalaureate degrees and lined up design team for the development of the HIM program online.

**Sustainability:**
Sustainable by student enrollment.

**Served:**
199

**Deliverable:**
Supported the distribution of the current ACNP master’s program in preparation for the new BS to DNP program.

**HealthForce Minnesota funding** $13,400.00

**In-Kind funding** $17,750.00

**Total funding** $31,150.00

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**Acute Care Nurse Practitioner focus in Existing Master’s Program and the Proposed new Bachelor of Science to Doctor of Nursing Practice Degree Program in Southeastern Minnesota**

**Description:**
This project targets advanced practice nursing education in the southeastern Minnesota region, specifically the acute care nurse practitioner (ACNP) and the Bachelor of Science to Doctor of Nursing Practice (BS to DNP) program, to meet current and future workforce needs.

**Outcomes:**
The collaborative agreement with Mayo Clinic School of Health Sciences was prepared and is in the review stages. Curriculum was developed and approved.

**Sustainability:**
Sustainable by student enrollment.

**Served:**
199

**Deliverable:**
Supported the distribution of the current ACNP master’s program in preparation for the new BS to DNP program.

**HealthForce Minnesota funding** $50,000.00

**In-Kind funding** $16,000.00

**Total funding** $66,000.00
Fiscal Year 2010 Expenditures

**Investment Strategies**
Total Fiscal Budget for FY10: $1,357,383
Includes carry forward from FY09: $472,779

**Projects Funded**
Total State Appropriation Funding for FY10: $1,081,500

Fiscal Year 2011 Expenditures

**Investment Strategies**
Total Fiscal Budget for FY11: $1,768,586
Includes carry forward from FY10: $717,027

**Projects Funded**
Total State Appropriation Funding for FY10: $1,050,000

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**Total FY10 Expenditures**
$863,466

- Staffing: $227,037
- Innovation and Project Investments: $510,731
- Marketing and Non-Personnel: $86,289
- Support Services: $39,409

**Total FY11 Expenditures**
$1,421,562

- Staffing: $527,444*
- Innovation and Project Investments: $696,691
- Support Services: $19,002
- Marketing and Non-Personnel: $178,425

*Due to merger of HEIP and HealthForce Minnesota
HealthForce Minnesota first awarded grants to projects in fiscal year 2006, and has funded 94 projects through fiscal year 2011. To determine the status, effectiveness, and key lessons learned of the projects, 58 participants responded to a survey (62% response rate) that was conducted after the fiscal year end. The response rate may have been affected by a change in project leadership (several project leads are no longer in their positions) and the life of a project. Of those that responded to the survey, 80% of the projects are active in the original or a revised form. Project leaders also noted that 78% of the projects might not have happened or been implemented as fully without the financial support from HealthForce Minnesota.

People Served
Many people have benefited from the projects – from zero to more than 5,000. Those reporting no people served were either still in the start-up phase of development or the project never launched. The various types of people mentioned who have benefited from the projects include:

• K – 12 grade students who attended a Scrubs Camp – including ABE and ESL
• Nursing students – undergraduate, graduate and DNP
• Faculty – high school, community college, university
• Practicing healthcare professionals
• Healthcare organizations
• Businesses as partners
• General business community

Sustainability
The relevance and potential sustainability of a project are important factors used by HealthForce Minnesota to determine what projects to support. In most instances, projects must meet current needs across the state and possibly serve as a model to other states. Besides serving or involving others, projects have made an impact in the following ways:

• New or revised curricula
• Bridging opportunities
• Accreditation
• Establishment of a new standard of excellence
• Issue identification and awareness
• Sustainable development of partnerships and collaborations
• Exposure of high school students to healthcare careers
• Met needs of under-served and diverse populations
• Professional development
• Production of employable students
• Supported program attendance, and
• Recognition and project sustainability

Valuable Insights
Other important aspects that project managers learned from the projects fell mostly into these categories:

• Building relationships: Many of the projects resulted in valued and lasting relationships with partners such as other academic institutions, local businesses, community partners, and with and between diverse groups of students. Overall, respondents were grateful for the opportunity these projects provided to build relationships.
• Lasting change: Several projects have made an impact by spurring lasting change in the areas where they worked.
• Larger impact: At times a project had a larger impact than what they had expected.
• Recognition and innovation: Several projects have received state and national recognition, one received an innovation award, and one is demonstrated nationally and internationally.
• Funding: As always, funding is an issue that arises from two perspectives: most are grateful for the funding to pursue their projects while others find that they need more money to serve more people.

It’s hard to measure the lasting work of these funded projects, but project leaders and the communities at large have reported results. People’s lives are impacted through creativity, partnership, professional development, redesign and innovation. Plus the number of healthcare processes and programs are being refined and expanded, and the number of people who are seeking healthcare as a career is growing. Improved healthcare service is being delivered in Minnesota.
HealthForce Minnesota has provided grants for innovative projects through fiscal year 2011 that are impacting lives. Project names and categories and our convening partners are listed on pages 11 and 12. Together we are making a difference throughout Minnesota!

The number in each box indicates the number of project partners.
LIST OF PROJECTS SINCE INCEPTION

Creating/Expanding the Vision of Youth for Health Careers
FY 2011 Grants
• SimLab “Code Blue” Scenarios for High Schools
• Online Health Career and Math (HCM) Program for Grades 1-6
FY 2010 Grants
• Mobile Science Lab Program
• High School Health Careers
FY 2009 Grants
• High School Health Science Education
• Connecting Classrooms and Careers
• Training Teenage Parents/Pathways
FY 2008 Grants
• Medical Anatomy and Physiology
• Rochester Community College and Technical College to Winona State University – Clinical Laboratory Science
FY 2007 Grants
• K-12 Health Science Partnership
FY 2006 Grants
• A Partnership with the Rochester Boys and Girls Club
• K-12 Study Group

Increasing the Recruitment and Retention of the Diverse Healthcare Workforce
FY 2011 Grants
• Healthcare Careers with NAR & HNA Cohorts
• START Allied Health Program
• Foundational Science Coursework Creation
FY 2010 Grants
• Working to Assure a Skilled and Diverse Healthcare Workforce
FY 2009 Grants
• CNA Training for White Earth Reservation
• Jump Start Initiative
• Project for Pride in Living
• Bilingual Healthcare Program for Latinos
FY 2008 Grants
• Promoting Health at the Hawthorne Education Center Through Community Engagement and Development of Partnership
• Transitioning Healthcare Licenses
FY 2006 Grants
• Increasing Diversity in Nursing Education

Developing/Implementing Program/Projects to Provide Advancement Opportunities for the Incumbent Healthcare Workforce
FY 2010 Grants
• Mobile SimLab L1 Training Program
FY 2009 Grants
• Health Support Specialist Program
FY 2008 Grants
• Leadership Academy – Phase III
• Public Health Internship
• Addressing Critical Workforce Shortages in Allied Health
• Advanced Critical and Progressive Care Nursing – Phase III
FY 2007 Grants
• Evidence to Practice – Phase II
• Health Science Simulation Bridge
• Nurse Administrator and Nurse Educator Preparation Project
FY 2006 Grants
• Enhancing the Workforce Through Innovative CNA and First Responder/EMT Training

FY 2011 Grants
• Core Competency Bridge Model in Medical Lab Scientist and Technician
• Online Completion Degree in HIM, Health Information Management
• Acute Care Nurse Practitioner focus in Existing Master’s Program and the Proposed new Bachelor of Science to Doctor of Nursing Practice Degree Program in Southeastern Minnesota
FY 2010 Grants
• Physical Therapist Assistant Degree Pathway for Military-Trained Personnel (Bridge Program)
• Building A New Curriculum, STAT! (Simulation Throughout All Terms)
• An Innovative Model Advancing Baccalaureate Nursing Education in Minnesota
• SOP – Standardizing Orientation Processes

FY 2009 Grants
• Medical Assistant Program
• Nursing Curriculum – Simulation

FY 2008 Grants
• Biostatistical Methods, Faculty and Program Development for the Department of Nursing Program
• La Crosse Medical Health Science Consortium Online Clinical Placement
• Certified Nursing Assistant Gaming Tool (Training Solutions Company)
• Evidence to Practice: Curriculum Development to Enhance Academic Industry Connection
• Healthcare Simulation Bridge – Phase III
• Athletic Training Modules: Integration of Modules into Online Platform and Delivery as Online Course – Phase II
• Healthcare Quality Collaborative
• WSU/CLS Accreditation and Creating Online Learning Modules for CLS

FY 2006 Grants
• An Innovative Model for Integrating Technological Excellence in a Redesign of an ADN Program
• Critical Care Registered Nurse Certification Review Course
• Computerized Dental Technology in the Education Setting – Phase II
• Computerized Dental Technology in the Education Setting – Phase II
• Lean in Healthcare Program – Phase II
• Clinical Lab Science: Program Development and Accreditation
• Model Program Development for Collaborative Multi-Track Associate of Science Degree in Science/Health Science
• Athletic Training/Emergency Healthcare Computerized Teaching Modules for Distance Learning
• Certified Nursing Assistant Gaming Tool – Phase II (Training Solution Company)
• Minnesota Simulation Alliance
• Critical Care Registered Nurse Certification – Phase II

Higher Education Institutions
• Century College, White Bear Lake
• Inver Hills Community College, Inver Grove Heights
• Lake Superior College, Duluth
• Minneapolis Community and Technical College, Minneapolis
• Minnesota State College – Southeast Technical, campuses in Red Wing and Winona
• Minnesota State University Mankato, Mankato
• Normandale Community College, Bloomington
• North Hennepin Community College, Brooklyn Park
• Pine Technical College, Pine City
• Ridgewater College, campuses in Willmar and Hutchinson
• Riverland Community College, campuses in Albert Lea, Austin, and Owatonna
• Rochester Community and Technical College, Rochester
• South Central College, Mankato
• Winona State University, campuses in Winona and Rochester

Key Industry & K–12 Partners
• Aging Services of Minnesota, St. Paul
• Allina Hospitals and Clinics, Minneapolis
• Benedictine Health System, Duluth
• Care Providers of Minnesota, Inc., Bloomington
• Children’s Hospitals and Clinics of Minnesota, Minneapolis and St. Paul
• City of Minneapolis Planning & Economic Development, Minneapolis
• Fairview Health Services, Minneapolis
• HealthPartners, Minneapolis
• Hennepin County Medical Center, Minneapolis
• Minnesota Hospital Association, St. Paul
• Olmsted County Public Health, Winona
• Olmsted Medical Center, Winona
• Rice Memorial Hospital, Willmar
• Winona County Public Health, Winona
• Winona Health, Winona
• Workforce Development, Inc., centers in Albert Lea and Rochester

Additional funding that added to the HealthForce Minnesota’s portfolio of work outside of the regular RFP process includes grants such as the Regional Incentive Grants and the Moving Experience Forward Grants.
Expanding:
Building on the challenges and successful outcomes of healthcare projects and programs. These are just a few of the projects and programs HealthForce Minnesota is supporting.

**Working to Improve Clinical Capacity for Healthcare Students**

The Clinical Coordination Partnership (TCCP) is a growing initiative that targets large-scale solutions to clinical capacity barriers for both education programs and clinical sites (hospitals).

Initially, twelve hospitals and nine nursing programs partnered to identify concerns and pilot solutions for pre-licensure nursing, the largest healthcare program area. TCCP is expanding to bring similar benefits to other healthcare programs such as advanced practice nursing, laboratory and aging services.

TCCP is working to increase and improve healthcare experiential learning activity through efficiency, utilization, and capacity.

This is accomplished through:
- Committed Partnerships
- Sustained Communication
- Data and Process Standardization
- Technology
- Transparency

**In FY 2010 and FY 2011 TCCP accomplishments included:**
- Coordinating clinicals between 25 clinical partners and 32 education partners (pre-licensure nursing) that consisted of coordinating 5,600 data entries that represent approximately 2,700 students.
- Establishing special committees:
  - TCCP Advisory Committee to direct the overall strategic plan, policy and sustainability efforts of the TCCP.
  - TCCP Advanced Practice Committee to direct the development of TCCP clinical coordination data, services and strategies specific to advanced nursing programs and clinical sites.
  - TCCP Student & Faculty Orientation Committee to direct efforts to develop a standardized orientation for students and faculty who will be participating in a clinical experience at a healthcare facility.
- Securing a Center of Excellence grant to increase effectiveness of the current clinical database and expand the database to include efficiencies for student record tracking and orientation requirements.

See clinicalcoordination.org to learn more about TCCP.

**Shortage of Laboratory Scientists Means Proactive Measures Now**

The Clinical Laboratory Workgroup is leading or involved in numerous efforts to ensure that Minnesota’s clinical laboratories have the workforce needed both now and in the future. The Minnesota Department of Employment and Economic Development projects a 2006-2016 growth rate of over 17 percent for medical laboratory scientists and over 20 percent for medical laboratory technicians. This compares to an overall growth rate of 9.8 percent for all occupations. Minnesota’s healthcare providers are anticipating significant numbers of retirements at the same time that the demand for laboratory testing will increase due to the aging population and medical advancements. Given that clinical laboratory testing provides 70 percent of the information used by physicians to diagnose and treat patients, a strong and highly qualified laboratory workforce is essential to providing high-quality healthcare.

Initiatives are underway to expand awareness of the clinical laboratory as a career option. These include numerous presentations at elementary and secondary schools by laboratory leaders throughout the state as well as a video to be used by teachers and counselors. Capacity of both two-year and four-year programs has been increased significantly over the past five years with new programs.
starting and existing programs adding students. The main area of focus, however, is on the need for clinical sites for students to gain clinical experience.

This clinical site bottleneck is limiting the ability of programs to expand further and requiring significant time and energy on the part of laboratory educators to place students. To “break the bottleneck,” members of the laboratory workgroup are leading preceptor training initiatives, conducting sessions with facilities to understand the requirements of serving as a clinical site, and standardizing forms and checklists to make it easier for clinical sites.

The most innovative approach underway is the use of simulated clinical experience in microbiology and blood bank, the two areas of laboratory education that are most limited because of consolidation and limited space. The simulated laboratory experience has allowed Allina Hospitals & Clinics to expand from 20 to 30 students in internship. Preliminary outcomes are strong with student learning, student satisfaction, and faculty/preceptor satisfaction high. HealthForce Minnesota has been proud to be a partner in this Department of Labor grant-funded simulated laboratory pilot and is working to ensure its sustainability and expansion.

**Minnesota Chosen to Join National Effort in Transforming Nursing Future**

Minnesota received national recognition by the Robert Wood Johnson Foundation and AARP Foundation in becoming an Action Coalition. The Action Coalition award is a great honor for Minnesota as leaders focus on creating innovative change and synergy statewide.

Action Coalitions are developing and implementing goals within the framework of the Institute of Medicine’s (IOM) landmark report titled, Future of Nursing: Leading Change, Advancing Health.

Minnesota’s Action Coalition goals statewide include:

- Improving leadership capacity and the influence of nursing
- Creating and delivering clear messages on the IOM recommendations
- Expanding the ability of nurses to come together and create needed change by creating a sustainable fiscal model with new stakeholders, and
- Collaborating with diverse constituencies for the purpose of identifying innovative health optimizing initiatives

Co-lead partners in this initiative are the Minnesota Center for Nursing and HealthForce Minnesota.

**Nursing Accreditation Work May Become Model for the Nation**

Minnesota will require all nursing programs in the state to be nationally accredited by 2016. To get to this point, HealthForce Minnesota has implemented, and continues to work on, strategic supports for MnSCU nursing programs to meet the National League for Nursing Accreditation Commission (NLNAC) standards for practical and associate degree programs.

The need for a stronger accreditation process was seen by nursing program directors across the state in 2009. They indicated the assistance and support they desired and HealthForce Minnesota responded by awarding a total of $218,000 for:

- $5,000 grants to MnSCU campuses to offset accreditation candidacy expenses
- Consultant support for coaching individual programs
- Monthly webinars on selected accreditation topics
- Travel for faculty and directors to attend national self-study forums
- Travel support for four MnSCU nursing directors to become NLNAC site visitors

Nursing initiatives in Minnesota are strengthening national efforts.
• Development of an active website with shared resources and a blog for programs to post questions and support one another in the accreditation process
• Regular updates to celebrate and inform the nursing community as programs progress to the candidacy and accredited program status

Additionally, the National Council of State Boards of Nursing asked the Minnesota Board of Nursing and HealthForce Minnesota to coauthor an article on the Minnesota journey toward accreditation of all nursing programs in the Journal of Nursing Regulation. The separate, but parallel, processes created by HealthForce Minnesota and the Minnesota Board of Nursing are a model that other states are looking to emulate as a national movement toward mandatory accreditation.

Improving Healthcare Education and Career Awareness through Merger

In 2010, HealthForce Minnesota merged with Healthcare Education Industry Partnership to strengthen MnSCU system’s ability to respond to the needs of Minnesota’s healthcare providers. Both organizations brought strong industry and education connections, and together help Minnesota transform the educational delivery of healthcare and raise awareness of healthcare career opportunities.

The Healthcare Education Industry Partnership Council continues under HealthForce Minnesota to facilitate communication and collaboration between the healthcare industry and educational institutions.

Scrubs Camp Programs

Health Career Day Camp
Health Career Day Camp gives middle school students a better understanding of medical careers by engaging them in hands-on training in many healthcare areas. Hosted by schools in southern Minnesota, students learn it’s never too early to start thinking about the future. This two-day camp gives students the chance to do just that while having fun and exploring careers available in healthcare.

Scrubs Camp
Initially focused on first generation high school students, these healthcare camps help students explore many healthcare careers, determine what education is needed to get into the area of their choice, and experience college life for five days.

In fiscal year 2010, WSU Scrubs Camp doubled in size to 125 students and kept pace this past fiscal year when 118 students attended. Also in fiscal year 2010, the first Urban Scrubs Camp was held at Augsburg College. The initial goal was exceeded when 73 students attended camp, drawing many from the Cedar Riverside neighborhood. It, too, has continued to receive strong interest, with both camps having students ask to return for a second year.

Adult Scrubs Camp
Targeting unemployed and dislocated workers, Adult Scrubs Camp seeks to help individuals 18 years and older learn about careers within the healthcare system. Through hands-on educational sessions, participants will learn about a wide-range of healthcare careers directly from those in the field. Held in communities across Minnesota, Adult Scrubs Camps are offered throughout the year.

High school students experience age restrictions while wearing aging suits during Urban Scrubs Camp.
Executive Alliance

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Ridgewater College

Ron Anderson
Century College

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Rochester Community and Technical College

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Aging Services of Minnesota

Tim Wynes
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Center of Excellence

HealthForce Minnesota is one of four “Centers of Excellence” designated by the Minnesota State Colleges and Universities Board of Trustees. A state university with two-year colleges and partners leads each Center with Winona State University (WSU) acting in this capacity for HealthForce Minnesota. Other centers are in information security at Metropolitan State University, manufacturing and applied technology at Bemidji State University, and engineering and manufacturing at Minnesota State University, Mankato.

Winona State University is a member of the Minnesota State Colleges and Universities system that comprises 32 state universities and community and technical colleges serving the higher education needs of Minnesota. The system serves about 242,000 students per year in credit-based courses and an additional 140,000 students in non-credit courses.