

CareerAdvance® Implementation Study



RMC

Ray Marshall Center
for the Study of Human Resources

Texas LBJ School

The University of Texas at Austin
Lyndon B. Johnson School of Public Affairs

Findings through FY 2020

**CareerAdvance[®] Implementation Study Findings through FY 2020:
The impact of COVID-19 on service delivery**

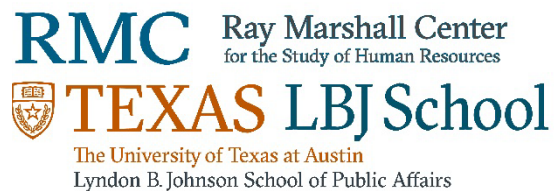
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Table of Contents

Glossary of Acronyms and Abbreviations	iii
Acknowledgements.....	iv
Introduction	1
<i>Organization of Report</i>	2
<i>Partners</i>	3
Program Components	5
<i>Career Pathways</i>	10
<i>Pandemic Impact on Training</i>	13
<i>Quality Early Childhood Education</i>	16
<i>Pandemic Impact on the Care and Education of Children</i>	17
<i>Support Services</i>	20
<i>Pandemic Impact on Support Services</i>	20
Recruitment, Assessment, and Selection.....	21
CareerAdvance® Orientation Elements	23
<i>Career Readiness Training</i>	23
<i>Boot Camp</i>	23
<i>Tulsa Tech pre-training</i>	24
Participant Demographics.....	24
Training Outcomes.....	28
<i>Pandemic Impact on Retention</i>	28
<i>Health Care Career Pathways</i>	30
<i>Nursing Career Pathway</i>	30
<i>Health Information Technology Pathway</i>	32
<i>Other Health Care Occupational Training Programs</i>	32
<i>Career Training Pathway Advancement</i>	34
Impact of Pandemic on Employment.....	34
CareerAdvance® Sustainability Planning	35
<i>Conclusion</i>	38
Bibliography	39
Appendix A: 2018 CareerAdvance® Tracks Career Lattice.....	44

List of Tables

Table 1. CareerAdvance® COVID-19 Response Timeline	7
Table 2. CareerAdvance® Course Offerings	12
Table 3. CareerAdvance® Parenting Households: FY 2020	17
Table 4. HPOG II Individuals Participating in the Selection Process: April–Aug. 2016–FY 2020.....	22
Table 5. Unduplicated CareerAdvance Participants and Families: April–Aug. 2016–FY 2020.....	25
Table 6. Number of Children per Household: FY 2020	27
Table 7. Ages of Children per Parenting Households	27
Table 8. HPOG II FY 2020 Program Completers Certification Status	29
Table 9. Program Completers Certification Status: May–Aug. 2016–FY 2020	29
Table 10. Nursing Career Pathway: May–Aug. 2016–FY 2020.....	31
Table 11. Health Information Technology Pathway: FY 2017–FY 2020.....	32
Table 12. Other Health Care Occupational Training Programs: May–Aug. 2016–FY 2020.....	33
Table 13. Career Pathway Training Advancement: May–Aug. 2016–FY 2020.....	34

Glossary of Acronyms and Abbreviations

ACF.....	Administration for Children and Families
CRT	Career Readiness Training
CAP	Community Action Project of Tulsa County
CCDF.....	Childcare Development Fund
CDC	Child Development Centers
CMA	Certified Medication Aide
CMT	Certified Medical Technician
CNA.....	Certified Nurse Assistant
ECE	Early Childhood Education
GED	General Educational Development
HHS	U.S. Department of Health and Human Services
HPOG.....	Health Profession Opportunity Grant
LPN.....	Licensed Practical Nurse
MA.....	Medical Assisting
OECP.....	Oklahoma Early Childhood Program
PCT.....	Patient Care Technician
Pharm Tech.....	Pharmacy Technician
TABE.....	Test of Adult Basic Education
TCW	Tulsa Community WorkAdvance
TCC.....	Tulsa Community College
Tulsa Tech.....	Tulsa Technology Center
UPS.....	Union Public Schools
Union	Union Adult Education Center
WIA.....	Workforce Investment Act of 1998
WIC	Women, Infants, and Children Program
WIOA	Workforce Investment Act of 2014

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The authors wish to thank our partners in Tulsa for their continuing support and involvement in this research. Interviews with staff at Community Action Project of Tulsa County (CAP), Tulsa Community WorkAdvance (TCW) and Tulsa Technology Center (Tulsa Tech) provided invaluable information regarding program strengths, changes and program responses to the COVID-19 pandemic on services and the needs of CareerAdvance® participants. In 2020, pandemic health and safety considerations required that we conduct all interviews via zoom or telephone, with follow up emails when additional clarification was needed. Further, issues regarding the documentation of participants impacted by the pandemic within the data, created a delay in RMC receiving the data for this report.

The CAP leadership team members were particularly helpful in sharing their insights into the “big picture” and the future of CareerAdvance®, including Karen Kiely, Executive Director; Michelle Boatright, Chief Program Officer; Drew France, Senior Director of Strategic Planning & Community Initiatives; Brandy Holleyman, Director of Family Advancement; Janae Bradford, Director of Project Management and Strategic Initiatives; Karissa Coltman-Burnett, Assistant Director Family Advancement; and Claudia Cruz, Manager of Programs.

The TCW Career Services team, including Angela Munoz, Career Services Director; Bailey Adkison, Career Services Coordinator; Abigale McPherson, Career Advisor; Avea Howard, Career Advisor; and Megan Street, Career Advisor, offered insights into how the CareerAdvance® program adapted to the changing demands on services and program participants in response to the COVID-19 pandemic.

Karen Pennington, Executive Director of TCW shared insights into Tulsa area workforce development and the future of TWC’s participation in CareerAdvance®. The TCW Career Services team, Chad McDermott, Business Services Director; and Amber Smith, Business Services Manager, provided us with the TCW perspective on relationships with employers and changes during the past fiscal year.

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Introduction

Career*Advance*[®] began in Tulsa in 2009 as the parent employment training portion of a two-generation strategy to end the cycle of poverty in families with a child enrolled in Community Action Project of Tulsa County (CAP) Early Childhood Education programs. Launched and administered by CAP, Career*Advance*[®] offered training for parents targeted in selected healthcare occupations that offer opportunities for career advancement into well-paying jobs with benefits. The driving theory of change behind Career*Advance*[®] is that family economic success will protect and enhance gains made through high-quality early childhood programs even after children transition into the public school system and beyond.¹

After a year as a pilot program, Career*Advance*[®] moved into regular operations in September 2010, at which time funding from the Health Professional Opportunities Grant (HPOG I) program from the Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services (HHS) enabled the program to expand and scale-up. In September 2015, CAP received a second Health Professional Opportunities Grant (HPOG II) from HHS to support and expand program operations for another five years.

Career*Advance*[®] is a healthcare sector-focused career training approach that was originally organized as a progressive, stackable series of trainings, with each step resulting in a credential valued by local employers. The program model, training offerings, participant eligibility and selection process, support services, and other program features have evolved throughout the implementation of HPOG I and HPOG II. As HPOG II partner organizations entered the fifth year of HPOG II funding, significant shifts in service provision have been implemented in response to the pandemic, and options for program sustainability continued to evolve.

During the fifth HPOG II fiscal year while CAP continued to scale down their involvement in the program shifting the majority of program operations to Tulsa Career WorkAdvance (TCW), the COVID-19 pandemic spread across the United States impacting families as well as the delivery of employment, education, training, and support services. In addition, in June 2020, CAP was awarded a sixth year of HPOG II funding. This funding extension does not require Career*Advance*[®] to serve additional

¹ For more information about Career*Advance*[®] see: <http://CAPtulsa.org/our-programs/family-advancement/careeradvance/>

participants beyond the enrollment targets established for year five, rather the extension serves to ensure the program meets the year-five goals disrupted by the pandemic.

The CareerAdvance[®] program is the subject of a longitudinal, multi-methods evaluation, the Two-Generation Child and Family Outcomes Study (a randomized control trial experiment). The evaluation includes implementation, outcomes, and impacts analysis components, and is led by researchers at the Institute for Policy Research at Northwestern University in partnership with the Ray Marshall Center at The University of Texas at Austin, Columbia University, Oklahoma State University, and New York University. Previous reports from the CareerAdvance[®] implementation evaluation are available on the Ray Marshall Center website at www.raymarshallcenter.org. A full list of Northwestern University reports on the two generation research initiative can be found on the Northwestern University Two-Generation Research Initiative websites: <https://www.ipr.northwestern.edu/who-we-are/research-groups-and-centers/the-northwestern-university-two-generation-research-initiative/publications-reports/index.html>.

Organization of Report

This report focuses specifically on and presents how CareerAdvance[®] partner organizations responded to the needs of participants and their families during the shifting impact of the COVID-19 pandemic upon service delivery; the efforts and issues salient to the sustainability of CareerAdvance[®]; and the impact participation in CareerAdvance[®] has had on the partner organizations' overall philosophy, strategic planning, and service delivery.

First, this report briefly describes the organizations partnering to implement the HPOG II version of CareerAdvance[®] followed by a discussion of how each program component responded to the COVID-19 pandemic impact upon service delivery. This discussion includes information regarding how national, state and local responses to the pandemic influenced the delivery of training, the scope of support services provided, and efforts to ameliorate the inequalities in access to technology and internet services. The report then describes the HPOG II FY 2020 (September 1, 2019–August 31, 2020) cohorts enrolled in training, as well as detailed demographic information on the participants and their families, and program completion and certification attainment of all HPOG II participants (April 2016–August 31, 2020). A final section addresses the impact that collaborating on CareerAdvance[®] has had on the partner organizations' overall philosophy, strategic planning, and service delivery. This report draws from

previous CareerAdvance® reports, information on the HPOG II program participants and their families, and interviews with leadership and staff with CAP, Tulsa Tech, Family and Children Services, Workforce Tulsa, and Tulsa Community WorkAdvance.

Partners

Community Action Project of Tulsa County (CAP)

CAP, an anti-poverty agency, works to promote the healthy development of young children to break the intergenerational cycle of poverty. Through a two-generation approach, early childhood education (ECE) acts as a gateway to providing integrated program options for the adults in low-income families, aiming to prepare not only young children for future success in

school but also their parents through programs designed to increase parenting and job skills and family financial stability. CAP’s vision for the future is that all children served reach their full developmental potential and achieve economic success so that future generations are not born into poverty. The agency works to achieve that vision by ensuring children receive high-quality education and care services, partnering with families to create a nurturing and secure environment for their children, and working collectively with other organizations to improve the broader system supporting child and family success.²

CAP Theory of Change
<i>“Combining high-quality early education for young children with supports that promote nurturing parenting and family financial stability will ensure that children reach their full developmental potential by the end of the third grade.”</i>

In 2009, when CAP first piloted CareerAdvance®, no other workforce development program or education provider was deliberately tailoring their offerings to low-income parents of young children in the Tulsa community. In 2012, Madison Strategies Group, a nonprofit workforce development organization, opened its doors in Tulsa to operate the Transportation Connections WorkAdvance program. The program evolved into the Tulsa Community WorkAdvance (TCW) program that currently partners with CAP to implement the HPOG II program. During the final two years of the HPOG II funding, CAP has coordinated with TCW in transitioning the majority of the responsibility for the implementation of CareerAdvance® to TCW.

² For more information on CAP see: <https://CAPtulsa.org>

Tulsa Community WorkAdvance

Tulsa Community WorkAdvance (TCW) is a sector-based, career advancement program in Tulsa that employs a dual-customer approach to meet the needs of job seekers and employers in key industries in the Tulsa labor market, including manufacturing, transportation, healthcare,

Tulsa Community WorkAdvance Mission
<i>“Tulsa Community WorkAdvance improves lives and strengthens families by connecting individuals with quality employment, maximizing their unique talents to achieve advancement and independence.”</i>

accounting, and information technology. TCW provides job seekers with short-term, no-cost technical training resulting in nationally recognized credentials, career readiness training, job placement, and career coaching services. Training programs designed to quickly move participants into the job market.

Workforce Tulsa, the Tulsa Area Workforce Development Board, partners with TCW to coordinate co-enrollment of eligible TCW participants (including CareerAdvance® participants) into the Workforce Innovation & Opportunity Act (WIOA) program. WIOA offers financial assistance to eligible individuals enrolled in demand sector training and supplements the HPOG II funding.³ The partnership has developed the following steps to support an efficient process of co-enrollment: 1) TCW identifies the potential WIOA participants, 2) Workforce Tulsa provides monthly TCW site visits to certify participants to access WIOA funding, and to avoid duplication of effort, and 3) WIOA accepts the TCW assessment and eligibility documentation.

Tulsa Technology Center

HPOG I provided education and training through three community partners: Union Public Schools, Tulsa Community College, and Tulsa Technology Center.⁴ Under HPOG II, all course work is provided through Tulsa Technology Center (Tulsa Tech), a public independent school district. Tulsa Tech is the largest technology center in Oklahoma’s Career Tech System. Tulsa Tech builds partnerships with businesses and industry in the Tulsa area creating

Tulsa Tech Mission
<i>Educating people for success in the workplace.</i>

³ For additional information on WIOA see: <https://www.doleta.gov/wioa/>

⁴ During HPOG I, Union Public Schools (UPS) partnered with CareerAdvance® to provide adult basic education, reading, math, and English language skills. The Oklahoma state budget crisis in the mid-2010s, an approximate 8% decrease in state funding, affected UPS and their ability to partner with CareerAdvance® to provide these services. UPS continues to provide English language skills classes to CAP families under CAP ESL, which now operates independently of the CareerAdvance® program.

opportunities for student placement and work-based experience.

Tulsa Tech provides all the classes for each CareerAdvance® course of study through its Adult Career Development (ACD) department.⁵ Students have full access to Tulsa Tech support services, including math and writing tutoring, computers and internet service, counseling, and career services.⁶

Program Components

Following is a description of CareerAdvance® program components, including how the different components adjusted to the impact of the pandemic. All partner organizations reported that the implementation of HPOG II year five was flowing as expected with no major challenges or struggles until the number of COVID-19 infections and deaths began to rise across the state of Oklahoma. Program components were influenced by evolving federal, state, and local rules and recommendations related to the mitigation of the pandemic.

The State of Oklahoma was one of six states that did not mandate a stay-at-home order in response to the pandemic. Childcare facilities were allowed to remain open with restrictions, while many states (33%), restricted childcare for essential employees only (U.S. Health and Human Services, 2020).

On March 16, 2020, while Tulsa area schools were beginning spring break, the Oklahoma State Department of Education (OSDE) announced that in response to the COVID-19 infection rate, public schools in the state were to cease operations for students and educators until April 6. On March 25, OSDE voted to close all public schools for the remainder of the school year and required districts to implement distance learning to mitigate the spread of the virus.

Tulsa Tech and CAP programs closed for spring break with little anticipation of the extent to which the pandemic would shape *business as usual* in Tulsa and across the country. Table 1 chronicles the changes in regulations by federal, state, and local organizations, and the decisions made by CareerAdvance® partners to meet these changing requirements.

In accordance with the ruling by the OSDE to close all public schools, CAP shifted to temporarily provide remote services while Tulsa Tech Adult Career Development Services suspended classes. Both

⁵ Under HPOG I, training was provided by Tulsa Tech's Business Services Division.

⁶ For more information on Tulsa Tech see: <http://tulsatech.edu>

programs anticipated reopening to provide face-to-face services in early April, however, the threat of COVID-19 transmission required programs to modify modes of instruction substantially and shift service delivery strategies to sustainable adaptations and remote approaches over a period of months,

While CAP and Tulsa Tech shifted service delivery strategies, TCW was also adjusting to the needs of program participants in this new environment. The TCW office did not close, rather rotated staff schedules to allow half of the staff to work remotely while the other half worked at the TCW office. TCW focused on maintaining relationships with participants by providing support services and distributing emergency funds while suspending new enrollments until June. TCW staff continued maintaining relationships with employers throughout this challenging period.

Table 1. CareerAdvance® COVID-19 Response Timeline

Date Effective	Source	Description
March 15	CAP	CAP Tulsa Headquarters staff were advised to work from home until further notice. The Admissions Office at Legacy Plaza was not open to families during that time. CAP Tulsa Schools were on spring break from March 16-20 and classes were scheduled to resume on Monday, March 23. Source: captulsa.org
March 17	CAP	All CAP Tulsa schools were closed after spring break beginning on Monday, March 23 through Friday, April 3. CAP Tulsa Offices at Legacy Plaza were to remain closed through Friday, April 3. Source: captulsa.org
March 20	CAP	To support families that may need food assistance, CAP worked with public school partners to make “grab and go” meals available at sites throughout the city. Meal distribution locations were shared on the CAP website on Friday, March 20. Additionally, Family Support Staff contacted families to check on them and see if any assistance was needed. CAP created a COVID-19 information page on their website. captulsa.org/covid19. Source: Interview with CAP leadership team on 9/17/2020.
March 17	Tulsa Tech	<p>Following spring break, Tulsa Tech announced it will remain closed until Monday, April 6th. All classes, activities, meetings, and events were canceled. Only employees who have been contacted by their supervisors to perform essential functions are permitted to report to work. All other employees were to remain at home. This closure influenced the following CareerAdvance training tracks:</p> <ul style="list-style-type: none"> • Medical Assistant (two tracks) <ul style="list-style-type: none"> ◦ Clinical Lab Procedures – resumed 7/2/2020 on campus ◦ Pharmacology – resumed 7/2/2020 on campus • Phlebotomy <ul style="list-style-type: none"> ◦ Resumed 7/7/2020 on campus • Certified Nurse’s Aide, Long-Term Care <ul style="list-style-type: none"> ◦ Resumed 7/8/2029 on campus including all classes, labs, and clinicals were conducted on campus. • Medical Coding <ul style="list-style-type: none"> ◦ Continued online classes on 3/23/2020 • Medication Aid <ul style="list-style-type: none"> ◦ A number of CNA graduates were interested in this training. The training was delayed due to COVID and offered on campus 8/3/2020. • Central Services Tech <ul style="list-style-type: none"> ◦ Scheduled to begin in March but delayed until 6/1/2020. This course was offered online. <p style="text-align: right;">Source: email communications with Tulsa Tech staff.</p>

Date Effective	Source	Description
March 17	OK Governor Executive Order	An amendment to Executive Order 2020-07 restricted gatherings to 10 or fewer people. Childcare provider's reconfigured space to limit overall room capacity. This order expired on April 15. Source: https://www.sos.ok.gov/documents/executive/1915.pdf
March 19	OK State Depart. Of Health	OSDH issued guidelines for childcare facilities regarding health and safety procedures. Source: https://oklahoma.gov/covid19/newsroom/2020/march/osdh-issues-new-covid-19-guidance-oklahoma-child-care-facilities.html
March 24	OK Governor Executive Order	An amendment to Executive Order 2020-7 extending the restriction of gatherings to 10 or fewer people through April 21. Source: https://www.sos.ok.gov/documents/executive/1919.pdf This order was repeatedly reinstated until 4/27/2020 when OK instituted a three-phased approach to opening the economy. See: Open Up and Recover Safely A Three-phased Approach to Open Oklahoma's Economy at https://www.okcommerce.gov/wp-content/uploads/Open-Up-and-Recover-Safely-Plan.pdf
March 30	CAP	CAP Tulsa Headquarters at Legacy Plaza and the Support Service Center announced it will remain closed at least through April 30, except for those authorized for a critical business need. Source: captulsa.org
March 31	Tulsa Tech	Tulsa Tech announced "... we do not anticipate having the ability to bring adult students on-campus until after April 30th." Source: tulsatech.edu
March	TCW	Due to the essential nature of their work, the TCW office never shut down. TCW changed office staffing patterns to having half the staff in the office every other day to serve existing customers by appointment only, with social distancing protocols in place. Orientation sessions were suspended. Source: Interview with TCW Career Services staff on 9/9/2020.
April 1	CAP	CAP Tulsa announced it will not be resuming classes for the remainder of the current school year, which ends Thursday, June 4. Source: captulsa.org
April 17	CAP	CAP Tulsa's Headquarters at Legacy Plaza and the Support Service Center buildings will remain closed through Friday, May 29. Source: captulsa.org
July	Tulsa Tech	ADULT CAREER DEVELOPMENT (ACD) announced the intention to return to a normal onsite delivery method beginning with the fall 2020 Academic term. This entails supporting full enrollment capacities onsite utilizing face-to-face instructional delivery where all students and faculty will be together in campus classrooms and labs utilizing safety protocols such as social distancing and face coverings based on CDC guidelines. Alternative modes of instruction will be determined on a class-by-class basis, as needed. In July the following classes resumed: Phlebotomy Technician, Medical Assistant and Long-Term Care Certified Nurse Aide. Source: tulsatech.org
July 6	CAP	July 6 CAP opened for a shortened SummerU at nine schools. Following CDC guidelines around class sizes and enhanced health and safety protocols, as well as staff availability, CAP did not offer Before or After Care and we will not be able to operate at full capacity with services to all age groups. Unfortunately, this means some families that indicated they would like to return for SummerU, were not be able to. Source: captulsa.org

Date Effective	Source	Description
July	CAP	During SummerU CAP reported 3 children with exposure to COVID. This resulted in 10 classroom closures in three schools, and involved the quarantine of 49 staff and 22 children. Source: Interview with CAP leadership team on 9/17/2020.
July 29	CAP	CAP announced the delay in school start date for accepted families to Monday, August 31. The program will continue to operate with a greatly reduced number of children and will not be offering before, after, or extended care at least through September and will evaluate resuming this service later in the school year. Source: captulsa.org
August 5	CAP	CAP announced the decision not to return to schools in-person on August 31. Instead, children will be served in a distance learning format to start the new school year. CAP continues family support services in the form of resources and community referrals, and individualized support as needed from the Behavioral Health, Health and Special Services teams. Enrolled families received an email or phone call notification by August 14 with more information about distance learning and what to expect with the new school year. Source: captulsa.org
Oct. 2, 2020	CAP	CAP announced a return to in-person services. Schools will re-open in two phases during November with a combination of in-person and distance learning schedules and reduced class sizes. Until then, CAP continues engaging families in distance learning, encouraging families to access grab and go meals from your school, and utilizing learning kits provided to family. Family Support Specialists, and other staff continue to be available to help families with any needs that arise during this time. Source: captulsa.org

The following discussion presents general information for each program component followed by details of the challenges and adjustments made in response to the COVID-19 pandemic, including features of service delivery that were not evaluated in previous reports, yet became central to service delivery during the pandemic.

Career Pathways

CareerAdvance® offers training in three broad areas: nursing, health information technology and other health occupations. The nursing and information technology courses of study represented a clear career pathways training approach; organized as a progressive, stackable series of trainings, with each step resulting in a credential valued by employers. The other trainings offered are for occupations within a highly regulated and certified field of employment; each training feeds into a career ladder within the medical profession (see Appendix A: CareerAdvance® Tracks Career Lattice).

In an effort to increase the number of participants served and placed in jobs during the HPOG II grant period, occupations that required lengthy education and training, such as registered nurse, were dropped from the pathways and more “one-and-done” trainings were added, including phlebotomy (13 weeks) and certified medication aide (8 weeks). Some of the short-term training options originally offered in FY 2018, particularly central services technician and EKG monitor technician (both eight weeks in duration), report relatively higher average wages (\$13.00/hour and \$16.32/hour respectively) when compared to the starting wages for other occupations requiring short-term training.⁷

During the fifth year of grant funding, CareerAdvance® scheduled primarily short-term training tracks, and course sequences that could be completed by the end of the grant funding (September 2020). The sixth year funding extension arrived in June 2020, too late in year five for the program to amend offerings to include more extended training. The funding extension does not require CareerAdvance® to serve additional participants beyond the targets established for year five, rather the extension serves to ensure the program meets the year-five goals disrupted by the pandemic. In year

⁷For wage information see: <https://www.indeed.com/jobs?q=central%20service%20technician&l=Tulsa%20OK&advn=6784594453018678&vjk=816414d86df24312>; <https://www.indeed.com/salaries/ekg-monitoring-technician-Salaries,-Tulsa-OK>. Accessed: 11/12/2020.

six, *CareerAdvance*[®] will continue to recruit students into training that can be completed by the end of the extension funding (September 2021).

Table 2 presents the *CareerAdvance*[®] course offerings from the first CNA cohort of students who entered classes in the fall of 2009, to changes made in 2019 as the program prepared for the final year of the HPOG II grant cycle. Changes in course offerings have been driven by diverse factors, including the needs of participants, policy changes by education and training providers, and labor market demands. For example, advanced CMA training opportunities include two eight-hour courses of study available to participants with a CMA to learn skills in glucose monitoring and caring for patients with feeding tubes and inhalers. Staff reported that participants who obtain the advanced CMA certifications can earn up to an additional \$1.00 to \$2.00 an hour. Furthermore, most of the trainings introduced in FY 2018 (HPOG II) do not require access to a health services lab, nor do they include clinical-based, intensely supervised training, both of which are in limited supply.⁸ Following Table 1 is a discussion of the training tracks that were suspended due to the pandemic and Tulsa Tech's response to the unique challenges of providing health care training during the pandemic.

⁸ Additional details regarding training tracks can be found in previous reports available at: <https://raymarshallcenter.org/?s=CAP+Tulsa>

Table 2. CareerAdvance® Course Offerings

Course of Study	Length of Class/Weeks	First Students Enrolled	Discontinued
Nursing Pathway			
• Certified Nurse Assistant (CNA)	6	Fall 2009	
• CNA Level 2	6	Fall 2010	2013
• CNA Level 3: Geriatric Technician	6	Spring 2011	
• Patient Care Technician (PCT)	17	Fall 2011	2019
• Certified Medication Aide (CMA)	8	Summer 2017	
• Advanced Certified Mediation Aide	8 hours	Fall 2018	
• Licensed Practical Nurse (LPN)	64	Spring 2013	2019
• Registered Nurse (RN)	64	Spring 2013	2015
Health Information Technology Pathway			
• Medical Assistant (MA)	46	Fall 2012	
• Medical Coding	64	Fall 2011	
• Patient Billing & Insurance	6	Fall 2011	2015
• Health Information Technology	64	Fall 2011	2015
Other Occupational Training Programs			
• Allied Health Associates Degree*	64	Fall 2013	2015
• Pharmacy Technician	15	Spring 2013	2017
• Dental Assisting	40	Spring 2014	2019
• Phlebotomy	13	Summer 2016	
• Monitor Technician (EKG)	8+	Summer 2018	2019
• Surgical Technician	46	Fall 2018	2019
• Central Service Technician	8+	Summer 2018	

*Allied Health included associate degrees in the following occupations: radiology, stenography, occupational therapy, physical therapy or respiratory care.

Pandemic Impact on Training

On March 25, 2020, OSDE voted to close all public schools for the remainder of the school year and required districts to implement distance learning to mitigate the spread of the virus. Most Tulsa Tech Adult Career Development services were suspended as several of the CareerAdvance® course offerings require access to a health services lab and clinical-based, intensely supervised training, neither of which were available to students. Below is the list of CareerAdvance® training tracks that were suspended in March and later resumed with modifications approved by regulatory organizations. Medical Coding, a course that is offered online, was the only course of study that continued uninterrupted. The central services tech course that was scheduled to begin in March was postponed until June.

- Medical Assistant (two tracks)
 - Clinical Lab Procedures – resumed 7/2/2020 on campus
 - Pharmacology – resumed 7/2/2020 on campus
- Phlebotomy
 - Resumed 7/7/2020 on campus
- Certified Nurse’s Aide, Long-Term Care
 - Resumed 7/8/2020 on campus including all classes, labs, and clinicals were conducted on campus.
- Medical Coding
 - Continued online classes on 3/23/2020
- Medication Aid
 - A number of CNA graduates were interested in this training. The training was delayed due to COVID and offered on campus 8/3/2020.
- Central Services Tech: Scheduled to begin in March but delayed until 6/1/2020. This course was offered online.

Training Course Modifications

Health care is a highly regulated industry that maintains independent regulatory organizations for the various health care professions. These regulatory organizations dictate the requirements for classroom instruction, clinical training hours, demonstrated competency of lab skills, and certification exams for the different training programs. Tulsa Tech worked with the regulatory organizations to pursue course modifications to meet requirements while maintaining safety protocols, responding to limitations of class size and social distancing imposed by the pandemic.

For example, to modify CNA instruction Tulsa Tech worked with the Oklahoma Nurse Aide Registry that regulates and approves nurse aide and medication aide training. To become a CNA in Oklahoma participants must receive face-to-face classroom and lab instruction, attend a clinical at a long-term care facility, maintain 100 percent attendance, and pass a certification exam. In response to the pandemic, on March 12, Oklahoma Governor Executive Order 2020- 06 restricted who could enter long-term care facilities, basically locking down, interrupting and suspending student clinicals. Tulsa Tech received permission from the Oklahoma Nurse Aide Registry to operate small-group simulated clinicals in the campus-based health services lab. The Nurse Aide Registry had to approve the curriculum and inspect the lab set-up to ensure the experience was as *real life* as possible. As expected, the training had to incorporate all appropriate CDC guidelines, including limited group size, social distancing, and enhanced sanitation procedures. On June 15, Oklahoma Governor Amended Executive Order 2020-20 reopened long-term care facilities to the general public, and some sites allowed Tulsa Tech students to return to complete clinicals.

During this period of the pandemic, Oklahoma experienced an increased demand for health care professionals. At the same time, across the state professional certification testing sites closed. In response the Governor issued Executive Order 2020-07 advising health care regulatory agencies to suspend certification and licensing requirements and renewals, while requiring employers to implement procedures to document that staff are trained and competent.

Digital Equity

In many communities across the country, the decision to deliver education, training, and support services on virtual platforms revealed inequities in access to the internet and adequate computer devices. Prior to the pandemic, students with limited access to computers and/or the internet could use computers provided on campus or the public library to connect to

Digital Equity, the conditions which all individuals and communities have the information technology needed for full participation in our society, democracy and economy.

National Digital Inclusion Alliance

Wi-Fi. With these institutions physically closed, many families struggled to stay connected to education and training. CareerAdvance® partners each played a part in securing computers and Wi-Fi access for participants and their families, while the City of Tulsa responded to the broader needs of the community to increase the number of households with internet access.

TCW and CAP quickly reached out to families to assess their need for computers and access to Wi-Fi, and began training participants on how to access zoom and other face-to-face digital meeting platforms. TCW offered participants computer cameras, microphones, headphones, laptops, and hotspots to connect to internet service. Tulsa Tech purchased hotspots and Chrome Books for students to check out and enhanced the Wi-Fi at each campus to reach the parking lots so that, in the worst case, participants could access Wi-Fi in campus parking lots. CAP also purchased 100 computers for CareerAdvance® participants.

In April 2020, the City of Tulsa worked with Tulsa area public schools and ImpactTulsa to convene an Internet Access Taskforce to identify needs and find solutions to ensure students and families have internet access.⁹ The taskforce found that:

- 15% of Tulsa County families have no Internet access at home through any means.
- 1 in 3 Tulsa households do not have “wireline” broadband needed for virtual meetings or online learning.
- An estimated 57,000 households in the city of Tulsa and 20,000 Tulsa students do not have fast, reliable internet at home.

The Internet Access Taskforce made recommendations to provide internet services to many Tulsa families and students through the distribution of \$5.6 million of the Oklahoma State CARES Act funding. CARES Act funding was awarded to the city of Tulsa as part of the state’s block grant program to municipalities and counties to provide internet access to Tulsa families.¹⁰ Three objectives identified by the Taskforce were funded with this grant:

- Fully-subsidized internet service for up to 20,000 families of public school students in Tulsa, Jenks, and Union public schools, as well as public charters, who currently lack Internet subscriptions;
- Three years of free, public Wi-Fi for all Tulsa Housing Authority residents; and

⁹ ImpactTulsa is a partnership connecting over 300 organizations to support area students to thrive. For more information see: <https://www.impacttulsa.org>

¹⁰ The City of Tulsa received a total of \$30.9 million CARES Act funding from OK state.

- An internet access navigator program via Tulsa Responds to ensure families know of these opportunities, can easily sign up for Internet subscriptions, and can quickly address any technological challenges they experience.

Quality Early Childhood Education

CareerAdvance® originally embraced an explicit two-generation strategy focused on promoting family economic security by developing the human capital of parents while their preschool children are achieving in a resource-rich learning environment. Under HPOG I, CareerAdvance® enrolled only CAP families receiving services from one of CAP’s high-quality early childhood education (ECE) centers, most of which are accredited by the National Association for the Education of Young Children (NAEYC), the gold standard in the field of early childhood education.¹¹ CAP centers are primarily funded through Early Head Start/Head Start and the Oklahoma Early Childhood Program.¹²

As CareerAdvance® evolved with HPOG II funding to serve both CAP and non-CAP families, CAP staff coordinated childcare services through a number of different efforts. Staff continue to recruit families from their ECE programs, as well as other organizations providing services to families with young children. Non-CAP families receive childcare through community-based child development centers (CDCs) that have been vetted by CAP and have the capacity to invoice CAP for the care provided.¹³ Before and after care for school-aged children is coordinated with a number of CDC sites and public school programs. Non-CAP families with young children are encouraged to apply for CAP ECE services and receive priority for selection as slots become available. Non-CAP families are also encouraged to apply for a childcare subsidy provided by the Oklahoma Department of Human Services through the Childcare and Development Fund (CCDF).

¹¹ CAP’s early childhood education programs have been the subject of rigorous longitudinal evaluations over many years that have demonstrated that participation yields near- and long-term impacts, both cognitive and non-cognitive. For example, see: Phillips, Deborah, William Gormley, and Sara Anderson (2016). “The Effects of Tulsa’s CAP Head Start Program on Middle-School Academic Outcomes and Progress.” *Developmental Psychology* 52(8): 1247-1261.

¹² The Oklahoma Early Childhood Program (OECF) was created by the Oklahoma State Legislature in 2006 to improve the quality of early education and expand capacity to serve children from birth through age three statewide.

¹³ CAP requires participating childcare programs to be licensed by DHS, and maintain specific levels of building and transportation insurance.

Pandemic Impact on the Care and Education of Children

The pandemic has created unique challenges for the education and care of children of all ages. Childcare and public schools struggled to implement new regulations and protocols while responding to the needs of staff, students and parents.

CareerAdvance® families rely on CAP and other early childcare services, public schools, and after school programs to care for children while they pursue training. Seventy-three percent of FY 2020 CareerAdvance® participants were parenting children in their households. Of these parents, 70 percent were parenting at least one child under the age of 15 (Table 3). The following section describes how Tulsa area public schools and childcare services responded to the challenges of providing education and services as the pandemic spread in the Tulsa community and COVID-19 infection rates fluctuated.

Table 3. CareerAdvance® Parenting Households: FY 2020

Children Per Household		Children Under 15 Per Household	
0	27%	0	30%
1	34%	1	35%
2	23%	2	20%
3	12%	3	11%
4	2%	4	2%
5	1%	5	1%
6	1%	6	1%

Tulsa Area Public Schools

In the spring of 2020, as Tulsa area Prek-12 schools closed and shifted to provide virtual instruction, schools struggled to quickly implement online instruction while scrambling to identify families who needed assistance with computers and Wi-Fi connectivity, finding resources to meet this need, and creating new procedures for food distribution to families. Tulsa area schools anticipated opening for regular onsite instruction in the fall with new protocols to ensure the safety of staff and students. However, in the fall, as the pandemic threat of transmission continued to concern area educators, Tulsa area school districts implemented different reopening strategies. Some schools opened later than originally anticipated, while others offered a combination of onsite instruction for a limited

number of students with online instruction for students at home. Some schools that opened for onsite instruction were required to close temporarily due to a COVID-19 outbreak. The continuing uncertainty regarding school closures and the need to supervise students at-home online instruction created a tension for parents who needed to work, whether virtually at home or outside of the home, and for parents interested in beginning or completing a training program.

Childcare Services

While the state of Oklahoma encouraged childcare services to remain open to provide care for the children of essential workers, on March 24, the Governor signed Executive Order 2020-07 restricting gatherings to 10 or fewer people. Childcare providers reconfigured their space to limit overall room occupancy to 10 or fewer children; for infants group size was limited to four. Childcare facilities also provided the necessary personal protective equipment (PPE) for staff and implemented new protocols regarding sanitizing environments.

Private childcare is a fragile industry in the best of economies, typically operating with very tight financial margins. As the pandemic infection rate increased, centers and homes saw enrollments drop. Parents stopped sending children to care for various reasons, including fear of their children contracting the virus; some parents working from home and newly unemployed parents were keeping their children at home. Decreases in enrollment combined with the additional financial burden of limited group sizes, providing staff with PPE, and implementing the new sanitization protocols stretched some programs to their limit. By April 14, the Oklahoma Department of Human Services (OKDHS) reported over 700 private childcare providers serving approximately 39,000 children had become inactive.¹⁴

By May 1, the state responded by implementing a number of supports for childcare providers receiving CCDF support and those participating in OKDHS's Reaching for the Stars Quality Rating and Improvement System program. The US Department of Health and Human Services Office of the Inspector General identified the following changes implemented by the Oklahoma CCDF program to lessen the impact of COVID-19:

- a. Allowed for more lenient absence policy,
- b. Enrolled newly eligible children,

¹⁴ Inactive status allows centers and home to remain licensed while not serving families for a designated reason.

- c. Changed the definition of working,
- d. Broadened the definition of protective services,
- e. Waived income eligibility requirements for protective services,
- f. Lengthened 12-month eligibility, and
- g. Eliminated or reduced copay requirements.

By September 15, the Oklahoma Department of Human Services distributed approximately \$9.6 million in CARES Act Funds (CRF) to more than 2,200 childcare centers participating in the State's Reaching for the Stars Quality Rating and Improvement System program. Childcare Quality and Sustainability one-time payments were made to childcare providers who had maintained active status since March 15, 2020.

CAP Early Childhood Education Services

CAP Tulsa received instruction from the National Office of Head Start (OHS) to heed guidance from local health department officials and public schools to inform decisions about closures. OHS authorized programs to continue to pay wages and provide benefits for staff who would otherwise be employed but were unable to report to their full work duties during center closures.

In response to school closures, CAP quickly pivoted to coordinate with public school partners to make "grab-and-go" meals available to families at sites throughout the city. Family Support staff began reaching out to families to offer assistance and deliver food boxes. CAP created a page on their website to keep families informed about COVID-19 updates and changes to service delivery. By April, CAP had created a new web page for families that provided access to learning activities for parents and children to do at home along with a drive through system for families to pick up packets containing two weeks lesson materials and food: including breakfast, lunch and snack. This new model of service delivery shifted CAP's primary service delivery relationship from the children to *working directly with parents in partnership to provide the educational services to their own children.*

During the summer months, staff contacted families to assess their need for computers, Wi-Fi access and technical support. CAP was able to provide some families with devices. CAP received CARES ACT funding to purchase PPE, complete alterations to physical environments needed for health and safety reasons, and other COVID-19 related expenses. In-person school reopened for a limited number

of children on July 6 (SummerU). SummerU is typically a four week program providing services to as many as 1,000 children. Based on CDC guidelines regarding class sizes and enhanced health and safety protocols, as well as staff availability, CAP was able to serve in-person only 400 children, focusing on recruiting 4-year-olds, 3-year-olds with an Individual Education Plan (IEP), and the siblings of these children. CAP had hoped to offer in-person school for a reduced number of children in the fall, while other families would continue to receive virtual services, however, in-person services were delayed due to the pandemic.

Support Services

The web of support services available to CareerAdvance® participants includes academic, career, family and mental health supports. Originally, CareerAdvance® (HPOG I) participant support services were all coordinated by CAP. As CareerAdvance® transitioned to recruit and enroll large numbers of non-CAP families, TCW staff have taken on an ever-increasing role in providing many of these supports.¹⁵ The impact of the pandemic on families' lives required support service systems for both organizations to respond quickly to a different reality of emergency needs for basic supports.

Pandemic Impact on Support Services

Both CAP and TCW teams quickly shifted their programs to respond to the emergency financial needs of families. TCW, having unrestricted funds available, was able to respond to emergency needs during the first weeks of the pandemic. By mid-March, CAP received funding from the George Kaiser Family Foundation to assist with emergency needs. Both organizations created systems to support ongoing family engagement, contacting participants through telephone, text, zoom, and FaceTime to offer support, guidance, and emergency assistance with food, diapers, sanitizing materials, rent, car payments, utilities, toiletries, and financial assistance through the distribution of gift cards. For both programs, making emergency payments on behalf of program participants to various vendors, a new area of service delivery, required staff time to create expenditure tracking methods, and new relationships and systems for payments with various vendors.

¹⁵ A detailed description of established program support services and changes in services that has occurred over time is provided in previous reports. See: <https://raymarshallcenter.org/?s=CareerAdvance>

CAP created a resource page on their website for families in English, Spanish and Zomi while TCW implemented weekly resource emails and text messages to provide participants with information on area resources and employment updates.¹⁶ TCW also assisted participants with issues related to stimulus checks and filing for unemployment benefits. Both teams provided families with technical support, creating easy-to-use instructions for using new devices, accessing zoom and group meetings. Mental health concerns continued to be addressed by Family and Children Services through telehealth services for families.

Recruitment, Assessment, and Selection

Table 4 presents the numbers of individuals who scheduled and then attended orientation, the number of CAP and non-CAP participants who completed a basic skills assessment, attended an interview, then were randomly selected to enter either the treatment or control groups (supporting the CAP NU2Gen Study), and finally entered *CareerAdvance*[®] from April, 2016–August 31, 2020. During FY 2017–FY 2019, the average number of individuals entering *CareerAdvance*[®] for each fiscal year was 138 participants; in FY 2020, only 78 individuals entered the program, a 43 percent decrease from prior years.

Due to the pandemic and resulting suspension of Tulsa Tech’s Adult Career Development program, TCW interrupted the flow of applicants through this process, halting all onboarding activities for the months of April, May, and June. As the process resumed, TCW staff created a hybrid model of virtual and in-person services. Health and safety protocols regarding group size also influenced the assessing and selecting of participants to enter *CareerAdvance*[®]. This interruption of the assessment and selection of participants was one of the factors that influenced the number of participants entering *CareerAdvance*[®] during FY 2020.¹⁷

¹⁶ The 2019 CAP Tulsa Head Start Program Information Report identified 613 (approximately 30%) families speak Spanish at home, while 50 (approximately 2.5%) families speak Zomi at home, the language of Myanmar.

¹⁷ Information specific to the program recruitment strategies, eligibility requirements, assessment tools and selection process are described in detail in previous reports at <https://raymarshallcenter.org/?s=CareerAdvance>.

Table 4. HPOG II Individuals Participating in the Selection Process: April–Aug. 2016–FY 2020

HPOG II Intake Information	April–Aug. 2016 Totals			All Quarters FY 2017			All Quarters FY 2018			All Quarters FY 2019			All Quarters FY 2020			Totals April 2016–FY 2020		
	CAP	Non- CAP	Total	CAP	Non- CAP	Total	CAP	Non- CAP	Total	CAP	Non- CAP	Total	CAP	Non- CAP	Total	CAP	Non- CAP	Total
Scheduled for Orientation	552			1,397			1,759			1,353			406			5,467		
Attended Orientation	263			586			911			624			179**			2,563		
Assessments Taken	65	176	241	124	375	499	72	419	491	51	395	446	19	226	245	331	1,591	1,922
Interviewed	37	107	144	77	179	256	58	345	403	32	251	283	10	132	142	214	1,014	1,228
Selected*	25	61	86	59	120	179	41	198	239	24	156	180	7	86	93	161	621	777
Entered CareerAdvance®	14	43	57	45	77	122	31	127	158	18	117	135	6	72	78	114	436	550

Note: The data for all years presented in this table were updated in FY 2020. *The CAP NU2Gen Study, a randomized control trial experiment, selects individuals from this group to enter either the control or the CareerAdvance® treatment groups. **This low count may be due to changes in the onboarding process of participants during the pandemic.

CareerAdvance® Orientation Elements

As recruitment, basic skills assessments, interviews, and selection efforts came to a standstill, so did the program orientation activities for CareerAdvance® participants who were in the pipeline to enter Tulsa Tech training. Typically, individuals selected to participate in CareerAdvance® attend a series of trainings and workshops to prepare to enter their chosen course of study at Tulsa Tech, including career readiness training, a half-day boot camp coordinated by TCW to introduce participants to CareerAdvance® staff and partners, and preservice training at Tulsa Tech. Following is a description of each pre-service program component and adaptations made to them during the pandemic.

Career Readiness Training

Career Readiness Training (CRT), typically a week-long, 35-hour, experiential training provided by TCW, focuses on preparing participants to compete in the job market and perform in the workplace. The curriculum includes the following modules: looking for a job; completing an application; writing a resume; finding three professional references; interviewing; workplace communication; emotional intelligence (how to manage emotions, understand and interpret the emotions of those around them and how to handle stressful situations); understanding and using an employee handbook; how to read and understand a paycheck; teamwork; conflict resolution; video interviewing; and other relevant topics. The TCW CRT curriculum was developed over time in other sectors (e.g., logistics) and has been adapted for healthcare sector training. In response to the pandemic, the experiential quality of the CRT was lost as TCW distributed soft skills training modules for new participants.

Boot Camp

Participants typically attend a four-hour *boot camp* where participants complete the required Tulsa Tech enrollment paperwork, are provide information on immunization requirements, instructors and course requirements, as well as being introduced to the various organizations and individuals involved in supporting them through their education and career progress. Prior to the pandemic, boot camp was scheduled on the Tulsa Tech campus. During the pandemic, TCW staff were not allowed on campus and boot camp components were offered at the TCW office adhering to all health and safety guidelines. Partner organization staff were introduced using zoom. Boot camp was renamed class orientation.

Tulsa Tech pre-training

In FY 2018, Tulsa Tech implemented a week-long pre-training refresher course for all participants enrolled in a course of study. The pre-training week refresher course includes six different classes, contextualized healthcare math and reading, training in computer use, orientation items specific to the participants course of study, HIPAA and CPR certification. In response to the pandemic, pieces of this training were being offered online. Tulsa Tech staff identified the challenge of training participants in how to use the computer to access course content. Tulsa Tech staff created user-friendly instructions and provided technical support to participants over the phone or through zoom.

Participant Demographics

Table 5 presents unduplicated participant demographics for each program year across the entire HPOG II service period: April 2016—FY 2020. Across time, *CareerAdvance*[®] participants represent, in many respects, a homogeneous group. Across all service years, 96 percent of participants are women, 41 percent identified as Black/African American, and 37 percent identified their race/ethnicity as White with less than 5 percent identifying as either Hispanic/Latino(a) or American Indian. The highest level of education reported for 43 percent of participants was a high school diploma or a GED; 38 percent reported having some college or advanced training. Fifty-five percent were unemployed (at program entry), and the average participant age by program year ranged from 33 to 34. On average across all program service years, of those participants who reported parenting children in their home, approximately 81 percent were parenting children younger than 15.

Table 5. Unduplicated CareerAdvance Participants and Families: April–Aug. 2016–FY 2020

Program Year	April-Aug. 2016		FY 2017		FY 2018		FY 2019		FY 2020		Total / Avg	
Number of Unduplicated Adults	50		109		156		170		92		577	
Totals and Percentages	#	%	#	%	#	%	#	%	#	%	#	%
Gender												
Female	49	98%	104	95%	150	96%	162	95%	88	96%	553	96%
Male	1	2%	5	5%	5	3%	7	4%	3	3%	21	4%
Unspecified	0	0%	0	0%	1	0%	1	0%	1	1%	3	1%
Race/Ethnicity												
White	18	36%	38	35%	65	42%	59	35%	31	34%	211	37%
Black or African American	21	42%	50	46%	62	40%	69	41%	36	39%	238	41%
Hispanic or Latino	4	8%	3	3%	6	4%	7	4%	3	3%	23	4%
American Indian	0	0%	4	4%	8	5%	11	6%	8	9%	31	5%
Other	5	10%	14	13%	11	7%	19	11%	13	14%	62	11%
Unspecified	2	4%	0	0%	4	3%	5	3%	1	1%	12	2%
Education Level												
Less than High School	3	6%	6	6%	4	3%	3	2%	2	2%	18	3%
High School Diploma/GED	18	36%	46	42%	66	42%	74	44%	44	48%	248	43%
Some College or Advanced Training	21	42%	40	37%	64	41%	63	37%	34	37%	222	38%
Associate Degree	1	0%	6	6%	5	3%	9	5%	3	3%	24	4%
Vocational School Diploma	7	14%	9	8%	12	8%	9	5%	0	0%	37	6%
Under Graduate/Graduate Degree	0	0%	1	0%	4	3%	5	3%	5	5%	15	3%
Unspecified	0	0%	1	1%	1	0%	7	4%	4	4%	13	2%
Employment Status												
Full Time	8	16%	17	16%	27	17%	29	17%	12	13%	93	16%
Part Time	13	26%	28	26%	40	26%	50	29%	24	26%	155	27%
Unemployed	29	58%	62	57%	87	56%	84	49%	56	61%	318	55%
Other	0	0%	2	2%	0	0%	1	1%	0	0%	3	1%
Unspecified	0	0%	0	0%	2	1%	6	4%	0	0%	8	1%
Income Level												
\$0 to \$1,000	0	0%	2	2%	2	0%	2	1%	0	0%	6	1%
\$1,001 to \$10,000	5	10%	20	18%	29	19%	30	18%	15	16%	99	17%
\$10,001 to \$20,000	12	24%	20	18%	31	20%	29	17%	23	25%	115	20%
\$20,001 to \$30,000	10	20%	25	23%	32	21%	30	18%	13	14%	110	19%
Over \$30,000	3	6%	11	10%	13	8%	25	15%	10	11%	62	11%
Unspecified	20	40%	31	28%	49	31%	54	32%	31	34%	185	32%
Mean Adult Age	33		34		33		33		33		33	

Table 5 continued	Program Year	April-Aug. 2016		FY 2017		FY 2018		FY 2019		FY 2020		Total / Avg	
Number of Unduplicated Adults		50		109		156		170		92		577	
Totals and Percentages		#	%	#	%	#	%	#	%	#	%	#	%
Number of Children Per Household													
0		6	12%	11	10%	30	19%	26	15%	25	27%	98	17%
1		16	32%	31	28%	36	23%	54	32%	31	34%	168	30%
2		12	24%	33	30%	45	29%	42	25%	21	23%	153	26%
3		13	26%	26	24%	25	16%	23	14%	11	12%	98	18%
4		1	2%	5	5%	16	10%	15	9%	2	2%	39	6%
5		1	4%	0	3%	4	3%	4	2%	1	1%	10	3%
6		0	0%	0	0%	0	0%	1	1%	1	1%	2	0.3%
11		0	0%	0	0%	0	0%	1	1%	0	0%	1	0.1%
Unspecified		0	0%	0	0%	0	0%	4	2%	0	0%	4	0%
Mean Number of Children		1.9		1.9		1.8		1.8		1.4		1.8	
Number of Children Under 15													
0		8	16%	13	12%	31	20%	30	18%	28	30%	110	19%
1		18	36%	33	30%	41	26%	56	33%	32	35%	180	32%
2		13	26%	33	30%	44	28%	40	24%	18	20%	148	26%
3		10	20%	22	20%	23	15%	22	13%	10	11%	87	16%
4		0	0%	5	5%	13	8%	13	8%	2	2%	33	5%
5		0	2%	0	3%	4	3%	4	2%	1	1%	9	2%
6		0	0%	0	0%	0	0%	0	0%	1	1%	1	0.2%
11		0	0%	0	0%	0	0%	1	1%	0	0%	1	0.1%
Unspecified		0	0%	0	0%	0	0%	4	2%	0	0%	4	0%
Mean Children Under 15		1.6		1.8		1.7		1.7		1.3		1.6	

FY 2020 participants varied from the previous program year cohorts in one key characteristic, the demands of parenting children, specifically children under the age of 15. Twenty-seven percent of FY 2020 participants reporting they were not parenting children in their household compared to the previous highest rate of non-parenting participants in FY 2018 of 19 percent (Table 6). In addition, among those participants who report parenting in FY 2020, 70 percent reported parenting children younger than 15, compared to the previous lowest rate of parenting children under the age of 15 in FY 2018 of 80 percent. In FY 2017, 88 percent of parents reporting parenting children younger than 15 (Table 7).

Table 6. Number of Children per Household: FY 2020

Program Year	April-Aug. 2016	FY 2017	FY 2018	FY 2019	FY 2020
Number of Children Per Household					
0	12%	10%	19%	15%	27%
1	32%	28%	23%	32%	34%
2	24%	30%	29%	25%	23%
3	26%	24%	16%	14%	12%
4	2%	5%	10%	9%	2%

Note: Columns do not equal 100% due to households with 5 or more children were not included, they represent only 3.5% of all parenting households.

Table 7. Ages of Children per Parenting Households

Program Year	April-Aug. 2016	FY 2017	FY 2018	FY 2019	FY 2020
Number of Children Under 15 & Older					
15 or Older	16%	12%	20%	18%	30%
Younger than 15	84%	88%	80%	81%	70%

As enrollment began to reopen, TCW staff report that prospective participants did not report as many barriers as previous years' participants and were not in need of as many childcare resources. Staff reported that parents interested in entering the program either had childcare or a plan in place for the care and supervision of their children. As discussed earlier in this report, from mid-March until the fall of 2020, CAP did not provide in person early childhood services (with the exception of the month long summer program) to support parents interested in training. Moreover, CAP parents represented only 8 percent of the FY 2020 participants compared with previous program years when CAP parent participation ranged from 13-37 percent.

Training Outcomes

This section of the report presents information regarding the impact of the pandemic upon participation and completion rates for FY 2020 compared to previous program years, followed by participant enrollment, course completion, and certification outcomes for nursing, health information technology, and other health care occupational training programs for all five program years.

Pandemic Impact on Retention

During the spring semester, most Tulsa Tech Adult Career Development services were suspended as several of the *CareerAdvance*[®] course offerings require access to a health services lab, and clinical-based intensely supervised training, neither of which were available to students. TCW and CAP efforts to continue participant engagement through various methods of contact and providing emergency support could not mitigate all the unique challenges families faced during the pandemic. Although many center- and home-based childcare programs remained open and CCMS put additional supports in place to encourage providers to continue providing care, *CareerAdvance*[®] participants with school-age and younger children struggled with the impact of unpredictable fluctuations in the virus infection rate on both childcare and public school services. Staff reported parents struggling with the need to continue their own training and for some, the return to work, while providing care and supervision to children at home. Many *CareerAdvance*[®] participants who did not have support within their own households, were unable to return to training when courses resumed.

Tulsa Tech staff reported combining classes and placing *CareerAdvance*[®] participants in classes open to the public rather than maintaining the *CareerAdvance*[®] cohort model. For CNA students, the 100 percent attendance requirement demands that any student missing class due to illness or suspected COVID-19 exposure will need to reenter training with a new class in the future. Table 4 reveals that of the 99 program participants entering in FY 2020, only 65 (65.6%) completed their course of study. Previous program years reported program enrollment as high as 179 participants with completion rates as high as 93 percent (Table 8).

Table 8. HPOG II FY 2020 Program Completers Certification Status

Course of Study	Advanced Nursing Assistant			Central Service Technician					Certified Medication Aide			Certified Nursing Assistant			
	Nov-19	Dec-19	Jan-20	Sep-19	Nov-19	Jan-20	Mar-20	Jun-20	Oct-19	Jan-20	Aug-20	Oct-19	Feb-20	Jul-20	Aug-20
Number of Adults	1	1	2	4	3	4	1	5	5	3	5	13	1	5	3
Completers	1	1	2	4	3	4	0	4	3	1	4	12	1	5	2
Non-Completers	0	0	0	0	0	0	1	1	2	2	1	1	0	0	1
Obtained Certification	0	0	0	0	0	0	0	4	1	1	4	11	0	4	2

Note: Non-Completers are participants who did not complete the training or completion status is unspecified in the data. Obtained Certification represents the number of completers who received a certification. Seven participants are duplicates, i.e., enrolled in more than one course of study in over time.

Table 8 cont. HPOG II FY 2020 Program Completers Certification Status

Course of Study	Medical Assistant	Phlebotomy			Surgical Technician	Total
	Oct-19	Oct-19	Jan-20	Aug-20	Oct-19	
Number of Adults	12	11	8	10	2	99
Completers	0	11	6	0	1	65
Non-Completers	12	0	2	10	1	34
Obtained Certification	0	3	6	0	0	36

Note: Non-Completers are participants who did not complete the training or completion status is unspecified in the data. Obtained Certification represents the number of completers who received a certification. Seven participants are duplicates, i.e., enrolled in more than one course of study in over time.

As presented in Table 9, overall, 577 unique individuals enrolled in 617 CareerAdvance® training courses. Across all training years, 79 percent are identified in the data as having completed a training program, and 68 percent of all completers are identified in the data as having obtained a certification.

Table 9. Program Completers Certification Status: May–Aug. 2016–FY 2020

Program Year	May-Aug. 2016		FY 2017		FY 2018		FY 2019		FY 2020		Totals	
All Participants	56		113		170		179		99		617	
	#	%	#	%	#	%	#	%	#	%	#	%
Completers	52	93%	86	76%	139	82%	145	81%	65	66%	487	79%
Non-Completers	4	7%	27	24%	31	18%	34	19%	34	34%	130	21%
Obtained Certification	46	88%	76	88%	113	81%	59	41%	36	55%	330	68%

Note: Non-Completers are participants who did not complete the training or completion status is unspecified in the data. Obtained Certificate represents the number and percentage of completers who received a certification. Thirty-nine participants are duplicates, i.e., enrolled in more than one course of study in over time. Updated in 2020.

Health Care Career Pathways

The following series of Tables present enrollment, completion, and certification rates for each course of study by career pathway for all HPOG II program years. Non-Completers are participants who did not complete the training or whose completion status is unspecified in the data. Certifications rates represent the percentage of completers who obtained certification that were specified in the data.¹⁸

Nursing Career Pathway

The Nursing Career Pathway includes CNA, CNA geriatric technician, advanced CNA, patient care technician, certified medication aide, and licensed practical nurse. CNA training, being the first step along the nursing career pathway was offered every year and enrolled the largest number of participants: 195 participants representing approximately 32 percent of all participants. Eight-four percent of CNA participants are reported in the data as completing training. Among the CNA completers, 91 percent are identified in the data as obtaining certification. CNA geriatric technicians complete all CNA training requirements with a focus on geriatric care. Advanced CNA, certified medication aide, and licensed practical nurse programs require CNA completion prior to entering the program (Table 10).

The impact of the COVID-19 pandemic is evident in the completion rate of certified medication aides. In FY 2020, thirteen CareerAdvance® participants entered three different eight-week certified medication aide (CMA) training cohorts. The last cohort of five students were originally scheduled to enter CMA training in the spring of 2020 with an anticipated completion date in mid-May, however, due to the pandemic the training was postponed until August. These five participants are identified as non-completers in the data as their course of study continued into FY 2021.

¹⁸ The data represented in all career pathway tables were updated in FY 2020.

Table 10. Nursing Career Pathway: May–Aug. 2016–FY 2020

CNA	May-Aug. 2016		FY 2017		FY 2018		FY 2019		FY 2020		Totals	
Participants	28		35		71		39		22		195	
	#	%	#	%	#	%	#	%			#	%
Completers	27	96%	26	74%	59	91%	32	82%	20	91%	164	84%
Certifications	26	96%	24	92%	59	100%	24	75%	17	85%	150	91%
CNA Geriatric Technician	FY 2019		Totals		Advanced CNA		FY 2019		FY 2020		Totals	
Participants	4		4		Participants		2		4		6	
	#	%	#	%			#	%	#	%	#	%
Completers	4	100%	4	100%	Completers	2	100%	4	100%	6	100%	
Certifications	0	–	0	–	Certifications	2	100%	0	–	2	33%	
Patient Care Technician	May-Aug. 2016		FY 2017		FY 2018		FY 2019		Totals			
Participants	9		8		8		6		31			
	#	%	#	%	#	%	#	%	#	%		
Completers	8	89%	7	88%	6	75%	3	50%	24	77%		
Certifications	3	38%	3	43%	3	50%	0	–	9	38%		
Certified Medication Aide	FY 2017		FY 2018		FY 2019		FY 2020		Totals			
Participants	8		14		13		13		48			
	#	%	#	%	#	%	#	%	#	%		
Completers	8	100%	13	93%	12	92%	8	62%	41	85%		
Certifications	8	100%	12	92%	10	83%	6	75%	36	88%		
Licensed Practical Nurse	FY 2017		FY 2018		FY 2019		Totals					
Participants	3		7		4		14					
	#	%	#	%	#	%	#	%				
Completers	3	100%	5	71%	4	100%	12	86%				
Certifications	1	33%	5	100%	0	–	6	50%				

Health Information Technology Pathway

CareerAdvance® offered two health information technology courses of study, medical assistant and medical coder. Medical assistant was the third most popular training with 90 participants enrolling, yet participants were identified in the data to have the lowest completion rate of 61 percent. Similarly to the final CMA training cohort discussed earlier in this report section, the medical assistant training, a 46-week course of study, was interrupted by the pandemic and resumed in early July with a course completion date in FY 2021 (Table 11).

Table 11. Health Information Technology Pathway: FY 2017–FY 2020

Medical Assistant	FY 2017		FY 2018		FY 2019		FY 2020		Totals	
Participants	24		22		32		12		90	
	#	%	#	%	#	%			#	%
Completers	17	71%	18	82%	20	63%	0	–	55	61%
Certifications	16	94%	18	100%	0	–	0	–	34	62%
Medical Coder	FY 2018		FY 2019		Totals					
Participants	11		15		26					
	#	%	#	%	#	%				
Completers	7	100%	13	87%	20	77%				
Certifications	7	100%	0	–	7	35%				

Other Health Care Occupational Training Programs

Other health care occupational training offered to HPOG II CareerAdvance® participants include pharmacy technician, phlebotomy, dental assistant, central services technician, EKG monitoring technician, and surgical technician. Phlebotomy, an eight-week training, enrolled the second highest number of participants: 104. Training for the final FY 2020 phlebotomy cohort of 10 participants was also interrupted by the pandemic, resumed in July resulting a lower than expected completion rates in FY 2020 (Table 12).

Table 12. Other Health Care Occupational Training Programs: May–Aug. 2016–FY 2020

Phlebotomy	May-Aug. 2016		FY 2017		FY 2018		FY 2019		FY 2020		Totals	
Participants	11		21		20		23		29		104	
	#	%	#	%	#	%	#	%			#	%
Completers	10	91%	15	71%	14	70%	20	87%	17	59%	76	73%
Certifications	10	100%	15	100%	6	43%	14	70%	9	53%	54	71%
Pharmacy Technician	May-Aug. 2016		FY 2017		Totals							
Participants	8		1		9							
	#	%	#	%	#	%						
Completers	7	100%	1	100%	8	100%						
Certifications	7	100%	1	100%	8	100%						
Dental Assistant	FY 2017		FY 2018		FY 2019		Totals					
Participants	13		8		8		29					
	#	%	#	%			#	%				
Completers	9	69%	8	100%	5	63%	22	76%				
Certifications	8	89%	0	–	0	–	8	36%				
Central Services Tech	FY 2018		FY 2019		FY 2020		Totals					
Participants	3		15		17		35					
	#	%	#	%			#	%				
Completers	3	100%	14	93%	15	88%	32	91%				
Certifications	3	100%	5	36%	4	27%	12	38%				
EKG/Monitoring Tech	FY 2018		FY 2019		Totals							
Participants	6		13		19							
	#	%	#	%	#	%						
Completers	6	100%	11	85%	17	89%						
Certifications	0	–	1	9%	1	6%						
Surgical Tech	FY 2019		FY 2020		Totals							
Participants	5		2		7							
	#	%	#	%	#	%						
Completers	4	80%	1	50%	5	71%						
Certifications	3	75%	0	–	3	60%						

Career Training Pathway Advancement

Table 13 reports on the number of CareerAdvance® participants enrolled for each program year along with counts for unique participants and duplicates, those participants enrolling in more than one course of study. Throughout the five HPOG II program years, 39 participants enrolled in more than one training course were identified in the data. Twelve CNA completers entered patient care technician training and seven entering certified medication aide training. All but one of the remaining participants who entered an additional course of study began their career pathway training as a CNA. These participants entered medical assistant, phlebotomy, and licensed practical nursing training.

Table 13. Career Pathway Training Advancement: May–Aug. 2016–FY 2020

Program Year	May-Aug. 2016	FY 2017	FY 2018	FY 2019	FY 2020	Total
Participant Course Enrollment	56	113	170	179	99	617
Unique Participants	50	109	156	170	92	577
Number of Duplicates	6	4	14	8	7	39

Note: This data has been updated in FY 2020.

Impact of Pandemic on Employment

TCW Business Services staff work with area employers to secure quality job placements for CareerAdvance® participants and to help them retain their jobs. TCW staff pursue relationships with employers offering competitive wages and benefits, including incumbent worker training opportunities that will support CareerAdvance® graduates in pursuit of their career path goals. Maintaining relationships with employers can be a challenge, in that some health care employers experience a high rate of turnover among human resources recruitment and talent acquisition staff, creating the ongoing need to establish new relationships.

The Business Services also coordinates employer site visits and employer presentations to CareerAdvance® participants. With the outbreak of COVID-19, these services were placed on hold with some employers connecting via zoom or visiting small groups of participants in the later part of the FY 2020. As area health care employers resumed hiring, TCW’s Business Services team began contacting employers and making office visits to assure employers that TCW was still open for business.

TCW staff reported that some employed program graduates experienced furloughs as a result of COVID-19, while others experienced a delay in entering employment as the three large Tulsa area

hospitals instituted hiring freezes for some positions, such as CST, and surgical centers closed in compliance with Oklahoma Governor Executive Order 2020-07 Discretionary Surgery Ban. Further, some employed participants left employment to remain at home to care for and supervise their children, while others postponed employment for this reason. TCW staff reported that as employment opportunities become available, child care is the primary hurdle for families. With the closure of CAP early childhood centers and Pre-k-12 schools, followed by varying schedules for schools opening and closing dependent upon COVID-19 infection and hospitalization rates, parents are struggling to return to work. In addition child care providers have fewer slots available due to health and safety procedures and when CAP opens for in-person services, they will not be offering the extended before- and after-care working parents need.

Overall, TCW staff report that employers are pleased with the quality of CareerAdvance® trained employees, “We let employers know that we are not only doing the technical skills needed, but intentionally also assist to develop emotional intelligence, and how to work well in a group. ... I hear employers say that our graduates are ‘better prepared’ and ‘know what it means to work’”.

CareerAdvance® Sustainability Planning

In 2009, when CAP first piloted CareerAdvance®, no other workforce development program or education provider was deliberately tailoring their offerings to low-income parents of young children in the Tulsa community. In 2012, Madison Strategies Group, a nonprofit workforce development organization, opened its doors in Tulsa to operate the Transportation Connections WorkAdvance program. The program evolved into the Tulsa Community WorkAdvance (TCW) program that currently partners with CAP to implement the HPOG II version of CareerAdvance®. Throughout the implementation of HPOG II the role of TCW has expanded to become the primary provider of services for CareerAdvance® participants. As the CareerAdvance® implementation partners move toward a sustainable community based model, CAP increasingly functions as the backbone agency acting as the fiscal agent, while TCW operates the day-to-day of service delivery.

CareerAdvance® originally embraced an explicit two-generation strategy focused on promoting family economic security by developing the human capital of parents while their preschool children are achieving in a resource-rich learning environment. Under HPOG I, CareerAdvance® enrolled only CAP families receiving services from one of CAP’s high-quality early childhood education (ECE) centers, most of which are accredited by the National Association for the Education of Young Children (NAEYC), the

gold standard in the field of early childhood education.¹⁹ CAP centers are primarily funded through Early Head Start/Head Start and the Oklahoma Early Childhood Program.²⁰

As CareerAdvance® evolved with HPOG II funding to serve both CAP and non-CAP families, CAP staff coordinated childcare services through a number of different efforts. Staff continued to recruit families from their ECE programs, as well as other organizations providing services to families with young children such as Educare, and local elementary schools that service CAP alumni families. Other non-CAP families receive childcare through community-based child development centers (CDCs) that have been vetted by CAP and have the capacity to invoice CAP for the care provided.²¹ Before and after care for school-aged children is coordinated with a number of CDC sites and public school programs. Non-CAP families with young children are encouraged to apply for CAP ECE services and receive priority for selection as slots become available. With the majority of HPOG II participants being non-CAP families receiving temporary childcare while participating in the program with no assurance of the continuity of this care, the founding CareerAdvance® theory of change that family economic success will protect and enhance gains made through high-quality early childhood programs, has weakened with the program changes made over time and may no longer be supported as the program continues to evolve.

As CareerAdvance® entered the third year of HPOG II, CAP leadership convened a series of partner meetings to address transition issues and identify possible avenues of support for sustainability. Avenues of possible funding were identified, including Workforce Tulsa's WIOA funds, training institution scholarship opportunities, federal financial aid, and other federal and state sources. Funding for child care and wrap-around services could be pursued through the DHS Childcare Subsidy Program, SNAP education and training funds, and WIOA support services funding. The team identified the lack of funding opportunities to support staff at CAP and TCW as the largest financial barrier to sustaining program services at the current level. Currently, partner organizations are continuing to consider the possibility of applying for a third round of HPOG funding.

¹⁹ CAP's early childhood education programs have been the subject of rigorous longitudinal evaluations over many years that have demonstrated that participation yields near- and long-term impacts, both cognitive and non-cognitive. For example, see: Phillips, Deborah, William Gormley, and Sara Anderson (2016). "The Effects of Tulsa's CAP Head Start Program on Middle-School Academic Outcomes and Progress." *Developmental Psychology* 52(8): 1247-1261.

²⁰ The Oklahoma Early Childhood Program (OECF) was created by the Oklahoma State Legislature in 2006 to improve the quality of early education and expand capacity to serve children from birth through age three statewide.

²¹ CAP requires participating childcare programs to be licensed by DHS, and maintain specific levels of building and transportation insurance.

Staff have also identified that working with additional partners will be key in the successful transition of CareerAdvance® to a community based model. Partnerships that can provide financial and other needed supports as well as the identification and referral of potential program participants. Staff have determined the need to develop of a solid referral process for all partner agencies to identify and refer potential program participants.

“Regardless of the agency they [prospective participants] interact with first, they will be able to access the necessary supports to be successful in obtaining post-secondary certification and ultimately a career in a high-demand sector.”

Sustaining CareerAdvance® – No Wrong Door

In FY 2020, Tulsa workforce development training institutions have begun discussing the creation of a workforce Tulsa “hub.” The hub would be established with available federal, state and local training funds targeting Tulsa residents who lost jobs during the pandemic, and would act as a *front door* to get people connected to *any* training opportunity in the community.

While the sustainability of CareerAdvance® will depend upon commitments from new partner organizations, the current partners have all expressed a commitment to sustaining the program. CAP has committed to advising the project going forward and has expressed a willingness to continue to act as the fiscal agent if a third round of HPOG funding is awarded to the Tulsa community. TCW intends to continue to support the quality health care training that has been most successful for both participants and employers while seeking additional funding sources, including the possibility of applying for a third round of HPOG funding. Tulsa Tech remains committed to working with partners to implement training programs sensitive to the needs of CareerAdvance® participants. The following quotation captures the larger scope of the CareerAdvance® program and the required shift in philosophy and priorities for community decision makers needed for sustainability.

I think sustainability will depend on the buy-in from all the partners and understanding the importance of this program and the difference it makes for people. To get people in decision making positions to see the value of the program. It’s just not about cost and expenses but about the greater good. ... Our mission is educating people for success in the workplace and this is where we are making a huge difference in fulfilling our mission.

Director of Adult Education and Certifications
Adult Career Development, Tulsa Technology Center

Conclusion

CareerAdvance[®], a two-generation strategy to end the cycle of poverty for Tulsa families, began a decade ago. Over time, the program evolved and partner relationships changed drawing on the strengths of each organization to create a well-tuned program where each partner focused on their core competency to provide a quality service. During FY 2020, the COVID-19 pandemic created unprecedented pressures on training and support services, prompting programs to focus on emergency supports and the inequities in access to technology and internet services.

CareerAdvance[®] has received a sixth and final year of HPOG II funding. Partners will continue to respond to the shifting impact of the pandemic upon employment, training and support services while pursuing opportunities to sustain the program. The original CareerAdvance[®] two-generation model of service delivery has evolved from providing quality, and continuity of care for children, to a model that simply provides childcare while parents are in training. Although the future of CareerAdvance may require some changes to the program model and commitments from new partners, the overarching philosophical approach of two-generation service delivery, viewing participants as members of a family with needs and challenges that must be addressed to support participants in achieving their academic and career goals, is well established and has been a catalyst for change within the partner organizations.

Tulsa Tech Adult Education now considers the needs of students as parents in scheduling classes during time periods that best meets the needs of parents, and has established a level of flexibility to work with partner organizations to meet the academic needs of participants. TCW adopted a dual-customer approach to meet the needs of both job seekers and employers while expanding support services available to participants. CAP had deepened their understanding of working with families through the adoption of design thinking from the client's perspective. A member of the CAP leadership team stated, "When we embraced a human-centered design, we brought that forward and learned to be less paternalistic and more focused on [asking participants], 'Help us understand what you need.' and we will design a model that best fits the needs of families."

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Appendix A: 2018 CareerAdvance® Tracks Career Lattice

