

We received responses from 10 instructors.

Q1: What are your strategies for helping your students complete their training?

Responses:

In order to help the help my students complete their training, I send every student/adult family home manager an email on how to go through the training. I also call and make sure every student is on the right track and is aware of future skills training classes.

1. Share clear expectations from the beginning so students know what they need to do and when they need to do it. 2. Good two-way communication including listening to students and being available for questions. 3. Ongoing reminders by email of upcoming deadlines that need to be met. 4. Offering two attempts to pass final. If the student still does not pass the final they can retake the class once at no additional cost.

I try to eliminate test anxiety as much as possible by repetition, practicing skills, and sharing stories.

1) Support 2) Educate 3) Kindness and Compassion

I know what these students need to know to give good care and I do a lot of hands-on teaching and demonstrating. I also teach the importance of their good quality care.

Psychological preparation before joining class by calls and email highlight what we shall be covering and training goals as well as ensuring they get all the study materials before the training starts. Flexibility on the days the students can attend.

Communication—I personally speak with, and email students so that they know they are supported and have access to their instructor and available to answer their questions, address their concerns.

I offer flexibility in scheduling. Most of my students are international students who can legally work outside campus. So, I schedule them on the day they have no classes.

Assisting students with examination process and online license application. Giving students access to HCA skills videos free of cost (to help prepare them for state exams). Sending out constant emails and reminders of class schedules, homework, classwork.

Provide comprehensive training with real world examples. I use a lot of videos to supplement the courses, particularly Dementia and Mental Health.

Q2: What is your most effective way to communicate with your students': emails, phone calls?

The most effective way to communicate with students it through email, text and calls.

We utilize both emails and phone calls. We find that sometimes students are not really good at checking their email and we have to follow up with phone calls.

Emails (4)

I tell my students that I do not have a cell phone, nor I know how to text. I am here every day to explain and answer all their questions and most that there is no stupid question. I also go over HIPAA, integrity, confidentiality, and respect.

Phone, email, and text messages .

I have personally found that phone calls are effective.

Phone calls. My students are mostly young and are always on their phones, so it is hard for them to miss a communication.

Q3: What are your students' challenges in completing their training?

Most students do not have any trouble completing the training, but sometimes due to the fact that our training is self-paced, it might take students longer time to complete the training if life circumstances change.

1. Some students do not meet their deadlines and cannot get clinical done on time. Examples: 1. Students do not get their TB test or background check on time. 2. ESL students may have more difficulty due to language challenges. We do, however, use a textbook that is manageable for ESL students, and if they do not initially pass, they can retake class at no additional charge.

Fitting a long class into their work/home/school schedule

I think the students sometimes get nervous about time, but we walk through everything together

My program is part computer modules and hands-on skills training—1:1, then I have them practice on each other and I watch. Skills training is on Mondays, and if they don't have a computer he or she can come to the school and use my laptop. I want the girls to pass their state exam, and they all do! To see the level of pride and growth/accomplishment they feel is so rewarding. I would say the most difficult challenge is day care, especially if the child has symptoms that prevent going to day care. I do allow children in the school as long as they are not disruptive or have a contagious illness. Doing skills once a week is easier on the employer.

Working and study at the same time. I have been able to overcome this by having them attend class on their days off.

It appears to me that busy, full lives compete for their time.

Funds. Since most are young and in school, they lack the funds to pay for the training.

Not receiving emails. No laptops. Language barrier.

English as a second language mostly, as well as some students with learning disorders. I work with them separately as needed after class to make sure that they understand the concepts.

Q4: On average how long is it taking your students to finish their training?

It takes on average 2-4 weeks to complete the training.

The classroom/didactic takes 4 weeks part-time. Clinical is scheduled afterward for a period of 40 hours. This is done in five days that are 8 hours long.

Not sure which class you are referring to. It depends. In-person training is much better as far as having the connection and getting them to complete training vs. online training can be more challenging to get them completed.

The HCA training is taking 3 weeks to a month on average and Dementia and Mental Health are typically within a week. Nurse Delegation Certificates are approximately 2 weeks.

Depending on their work schedule and home life, the time varies. On average, 2 months, then we ask for a test date.

Average period is 4 weeks.

Re HCA Training: Our training is five in-classroom trainings, one per week. Although I 'strongly encourage' students to complete their additional 43-hours of online training by the last day of class, it usually takes an additional 2 to 3 weeks.

7 days to comfortably have finished all the hours.

Our students complete training on time with exception if they have to miss class for emergency reasons or have failed an exam.

Depends on the course. It is generally 8 hours for most courses, and 3 hours for the Adult Education course.

Q5: What percentage of your students drop out before completing their training? What are their reasons?

10% of students drop out of the training. Majority of my students complete the training. However, some students might quit the job or move to another city or state.

Roughly about 10%. Reasons are same as answer to question #3. Also, students state personal scheduling conflicts, babysitting issues, the job seems different than what they expected, etc.

No students have dropped out at this point.

20% would be a good estimate. They drop because of family issues, finances, day care, moving, employment (got a high-paying job other than nursing). The state does have a time line to follow which at this time has been set aside due to the virus,

I have not encountered dropouts. I usually discuss with the students what the training entails.

1%. Mostly they drop out due to lack of funds

There are times where 1 out of 14 students would miss class due to emergency reasons. They would need to retake missed classes to receive full training credit.

5%-- family issues, scheduling work issues, etc.

Q6: What percentage of your students prefer online training? In-person training?

100% of my students appreciate our online portion of our training.

Our class is a combination of 9 Zoom classes and 4 in-person skills and CPR classes. This seems like a great mix. My guess is that probably 80% prefer online/in person mix, and 20% prefer total in person learning

I would say probably 50/50.

95% prefer online training, 5% in-person training

None of them like online training. They want/like hands-on, the interaction with each other.

Online training 85%, in-person 15%.

At this time, we have a blended class--5 are in classroom (32 hours) and currently not offered via Zoom + 43 hours on-line.

75% prefer online, mostly because they are accustomed to it since Covid started. Older students prefer face-to-face.

95% of the students prefer online training.

99%.

Q7: How do you help students prepare for the skills test?

Hands-on skills training is taught at our facility in Kent, WA. Students are taught all of the skills and must be able to demonstrate every skill. Instructor will provide feedback and detailed explanations on every skill. The goal is for all students to leave training confident and competent on all skills by the end of training.

We have good skills classes and an open independent practice session before they take their skills competency exam.

We practice the skills and watch videos and me doing skills

Review Sessions

PRACTICE, PRACTICE, PRACTICE!!! PRAISE!! As many days, times needed before their exam Telling them how proud I am. Mock testing so they can feel what it is like to be timed and evaluated.

Class discussion, videos.

We perform each skill 'for real'—no pretending. We really wash another student's foot and, then hand, fill a basin to provide peri-care on the mannequin. Each skill is completed from beginning to end. Always knocking on the door. Finishing with removing gloves and wash hands. We most often work with teams of three, which results in performing each skill four times. Instructor demonstrates the skill; one student role-plays the client; one student role-plays the caregiver; one student observes and reads the steps for the skill and coaches. Then we change roles and do each skill again x 3. Each caregiver has performed the skill, had the skill performed on them (helps with muscle memory), and observed. We also allow our students to use the training room (which is also a Prometric Test Site) on their own to practice their skills while they are waiting for their state test

I usually take two days for skills. During the training, I teach them the same way the proctor at the state test will test them, so I emphasize doing the skills the same way they will demonstrate them to the proctor during the test

Students come in for in-person skills training. Students learn the skills and instructor evaluates the students' ability to perform the skills. We also give students access to skills videos free of cost to assist students in preparation for the state exams.

I don't teach the skills test, just the didactic classes online.

Q8: Do you help your students prepare for testing and certification? What are the challenges?

One of the last modules on our core basic training provides links and explanations to students on how to apply for the state exam. Also, after completing their 75-hour HCA training students will be emailed links and information on how to apply for the state Prometric examination with links for the paper and online application. The only challenge noted is some students report

that the secure access portal online application is hard to access/understand and tricky to navigate.

See question #7. There are lots of opportunities to take practice tests in the classroom and at home.

Yes, as best I can. Everyone learns differently at different paces.

Yes, I answer the questions they ask. The challenges typically are about being nervous to take the test, but I encourage them to take a deep breath and move forward because they know the information

Practice and practice multiple choice test questions,

Yes, I do prepare them. Challenges are the usual exam fever. I help them overcome this fear by asking them to use any interaction with a client as a skills test. If they can do it right, then the test will be easy for them.

Yes. I ensure they either have the link to the RFOC manual on the DSHS website, or they can purchase a copy from us so that they can review the manual while waiting for their state test. On the last day of training, I pull up the WA Prometric website and show them all the helpful material they offer and how to access the practice test, commonly missed checkpoints, candidate bulletin. We also complete the HCA application together to ensure that nothing is missing and what is required to complete the application process such as emails from WADOH and ATT letter from Prometric. Students often stop by or call/email if they have any questions about the process or if they have not been contacted by WADOH.

Yes I do. I have put together some sample questions which we go through in class. I teach them how to spot the correct answer. This gives them the confidence to go forward and book the exam

Yes. We assist with filling out their online or paper license application.

English as a second language and learning disorders require more time. I have a separate session with them after class to review content and make sure that the test wording doesn't trip them up. With learning disorders, it requires 1:1 sometimes.

Q9: Have you considered becoming a test site?

I have considered it, but due to workload and time, I cannot do it at this particular time.

We are a testing site for our students.

I only teach the HCAC to one company I work with, so no

Yes (3)

No (3)

Our Tacoma Facility already is.

Q10: Are you promoting our Pilot Program? How?

Absolutely! I have signed up quite a few adult family homes up who were interested in signing up their caregivers and spreading the word to former managers who are unaware of the program.

I do not know much about it.

I honestly did not know about the pilot program

Yes, I do fit testing in the community and talk to all the providers I do fit testing for to spread the word about the benefits of the program. Multiple providers I have spoken with have or are currently in the process of utilizing your services.

Telling the owners of AFHs I know.

Yes, reading it through and seeing if I can make any input.

If we have a student that is working at, or considering working at an AFH, I refer them to the AFH Pilot Program.

I believe I am. I have now trained two students who are sponsored by the Adult Family Home Council.

Yes. We promote the pilot program by sharing your information to every student inquiring about training. We also share the pilot program details to adult family home providers.

Yes, word of mouth to AFH's that use my services and assisted living. With being online, I can serve people all over the state and not just Vancouver area.

Q11: What has been your experience working with Pilot Program students?

I have had nothing but great experience with the pilot program. Both Sheriece and Zenaida are amazing at communicating and assisting us as well as the adult family home managers to ensure we have all the necessary information needed from caregivers, etc.. It's been a pleasure and hope to help it expand so we can assist more homes in the future.

We have enjoyed working with the students from the Long-Term Care Foundation.

The students have been great!

Positive experience.

Excellent.

It has been successful. Students have completed the training.

I have had a positive experience with the two students, and so I am open to taking in some more.

It has been great! We have been sending constant reminders and emails to students which has increased class attendance.

The majority are great. Only a few didn't really want to be there, but usually warmed up as the day progresses with interactive activities.

Q12: How can we improve the Pilot Program experience for you and your students?

I think everyone is doing an amazing job!

Things have been working well. I cannot think of suggestions at this time.

I do not have any recommendations at this time. Zenaida does an amazing job coordinating and answering questions.

let me work with them first.

So far, so good.

At this time I have no suggestions. Thank you.

I think so far it is working for me.

The pilot program and all the staff have been amazing and responsive to our needs.

It has worked really well so far. I just haven't gotten many referrals.