



**English for Healthcare Professionals**  
Final Report (2011-2014)  
January 30, 2015



**Board of Regents**  
University System of Ohio

**John R. Kasich**, Governor  
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# 1. Introduction

*English for Healthcare Professionals* was a program to help healthcare immigrant professionals obtain sustainable employment by finding academic and career pathways commensurate with their foreign academic qualifications. This program was part of the Adult Basic and Literacy Education (ABLE) system of Ohio. The Ohio Board of Regents State ABLE Office (OBR ABLE) provided funding, management, and oversight to four ABLE programs in Ohio that were involved in implementing the program from Fiscal Year (FY) 2011 to FY 2014.

This program was first conducted as a pilot at Columbus City Schools' ABLE program in 2011. Based on the results of the pilot, OBR ABLE supported a continuation of the program at Columbus and expanding it to Polaris Joint Vocational Schools in FY 2012. Project Learn of Summit County adopted the program in FY 2013, followed by Kettering City Schools in FY 2014.

This report provides data on the implementation of the *English for Healthcare Professionals* program during the four-year funding period. It is an expansion of a previous OBR ABLE report<sup>1</sup>, which focused on the 2011 pilot conducted at Columbus City Schools. In addition to the pilot results, this report also summarizes program data and performance indicators for the four ABLE programs involved in the initiative.

## 2. Program Pilot

The *English for Healthcare Professionals* program pilot was conducted as part of the ABLE program at Columbus City Schools in FY 2011. Student participation in the pilot took place between January and May 2011.

The following measures for the pilot's success were established at the onset of the pilot:

- Improvement of English language proficiency contextualized to employment in health care
- Credential evaluation
- Entry-level employment in health care area of specialization
- Enrollment in postsecondary healthcare training

In addition, the following long-term outcome goals were also established:

- Credential recognition

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<sup>1</sup> Ohio Board of Regents. (2011). *English for Healthcare Professionals Pilot Project*. Columbus, OH.

- Attainment of a U.S. certificate or license in the health care profession that fits an individual's career path
- Promotion to higher level position after obtaining required credentials
- Replication of this project for other career paths

Modeled after the *Welcome Back Initiative*<sup>2</sup>, the design for the *English for Healthcare Professionals* pilot included five key components:

- Recruitment and retention
- Instructional design and implementation
- Career pathways
- Enrollment in postsecondary education
- Links to employers

### **Recruitment and retention**

Admission to the pilot was open to all individuals who matched the profile of the established target population – i.e., college-educated immigrants with foreign health care credentials and labor market experience who were enrolled or were eligible to enroll in the Columbus program and were interested in working in the U.S. healthcare industry.

Flyers promoting the project were sent to local immigrant/refugee organizations, educational institutions, and government agencies such as the Ohio Department of Job and Family Services. As a result, 25 individuals were enrolled into the program. The majority of these students (64%) were referred through immigrant organizations. Only a small portion of students (12%) were referred through local education agencies. The rest (24%) were referred to the program by word of mouth. Table 1 summarizes these results.

Table 1: Sources of student referrals

Immigrant/refugee organizations	Word of mouth	Educational institutions
16	6	3
64%	24%	12%

### **Instructional Design and Implementation**

Upon entry into the pilot, standardized assessments were administered to each student in order to place them into the proper levels of instruction. The Educational Functioning Levels were determined using the Basic English Skills Test Oral English Proficiency Test (BEST Plus) and the Comprehensive Adult Student Assessment System (CASAS).

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<sup>2</sup> <http://www.welcomebackinitiative.org/wb/index.html>

Content covered in the classes included an integration of both basic education (i.e., reading, writing, listening, and speaking) and technical education (i.e., healthcare). This contextualized approach to instruction was accomplished through utilization of *English Health Train*, a specialized ESOL curriculum for healthcare developed through the *Welcome Back Initiative*. This curriculum included 40 units organized by the following five modules:

- Module 1: *Exploring Career Goals in Health Care*
- Module 2: *Communicating with Patients and Families*
- Module 3: *Communicating with other Health Professionals*
- Module 4: *Exploring Critical Issues in Health Care*
- Module 5: *Intercultural Communication in Health Care*

Students also received instruction in job searching, resume writing, and interviewing techniques. In addition, students completed a 30-hour online Ed2Go Medical Terminology course.

The implementation design for the pilot included organizing students into a cohort group and convening classes on a college campus. As such, classes were held at Columbus State Community College Conference Center. The college environment was intended to enhance the presence of ABLE and English for Speakers of Other Languages (ESOL) resources on campus and to increase the number of students who successfully transitioned into postsecondary education. In addition, classes were held three times at Nationwide Children's Hospital so students could be in a healthcare environment.

### **Career Pathways**

The creation of career pathways for the pilot consisted of two main activities:

- Evaluation of students' healthcare foreign credentials and work experience
- Recognition of credentials by the appropriate Ohio licensing board

Students were encouraged to submit their transcripts to a credential evaluation agency for review. World Education Services (WES) was chosen to provide the credential review service primarily because of its community outreach services, which are provided free of charge to agencies that support the professional integration of skilled immigrants. Also, WES agreed to send staff to support the pilot and provide orientation seminars to employers, immigrant organizations, and educational partners on the benefits of integrating skilled immigrants into the U.S. economy and workforce.

In order to facilitate the recognition of credentials by Ohio licensing boards, the Northeast ABLE Resources Center developed licensing pathway charts. These provided a graphic representation of licensing requirements for obtaining credential recognition in different

healthcare sectors. The charts were intended to solidify a common understanding of the process and serve as an advising tool between students and career counselors. At the end of the pilot, OBR ABLE submitted these charts to the appropriate healthcare boards for consideration and adoption. A sample chart is included in the Appendix.

### **Enrollment in Postsecondary Education**

Based on the results of the students' credential evaluations and goals, a career counselor was designated to assist them with enrolling into postsecondary health care programs. Representatives from postsecondary institutions, such as Columbus City Adult Workforce Education and Columbus State Community College, met with students to discuss potential postsecondary healthcare program options.

### **Links to Employers**

The ultimate goal of the program was to create sustainable employment for participants in the pilot related to their healthcare specializations. Prior to beginning the pilot, human resources departments at several healthcare institutions (e.g., Mount Carmel, Ohio Health, and Nationwide Children's Hospital) expressed interest in the project since they were actively looking for multilingual and multicultural staff. Accordingly, the pilot was intended to provide students with the ability to interview with such employers for entry level healthcare positions commensurate with their skill level.

## **PILOT RESULTS**

Data collected for the *English for Healthcare Professionals* pilot included student demographics, standardized assessment performance, credential evaluations, entry-level employment, and postsecondary enrollment. The following is a summary analysis of these data.

### **Student Demographics**

Twenty-five students participated in the FY 2011 initial *English for Healthcare Professionals* pilot project. Seventeen of these students were female (68%); eight were male (32%). As illustrated in Table 2, these students collectively represented 16 countries.

*Table 2: Students' countries of origin*

Country	Frequency	Percent
1. Colombia	4	16%
2. Ethiopia	3	12%
3. Egypt	2	8%
4. Iraq	2	8%
5. Peru	2	8%
6. Uzbekistan	2	8%
7. Bolivia	1	4%
8. Burundi	1	4%
9. Ecuador	1	4%
10. Guinea	1	4%
11. Mexico	1	4%
12. Nicaragua	1	4%
13. Russia	1	4%
14. Senegal	1	4%
15. Sudan	1	4%
16. Ukraine	1	4%
Total	25	100%

The healthcare backgrounds of the students encompassed eight professions. The most commonly cited professions were doctors (32%), nurses (24%), and pharmacists (20%). These professions are organized by frequency in Table 3.

*Table 3: Student healthcare backgrounds*

Profession	Frequency	Percent
Doctor	8	32%
Nurse	6	24%
Pharmacist	5	20%
Dental Assistant	2	8%
Physical Therapist	2	8%
Dentist	1	4%
Surgical Technician	1	4%
Total	25	100%

### **Improvement of English Language Proficiency**

At the beginning of the program, students were administered pretests to assess their Educational Functioning Level (EFL) scores. Two assessment instruments were used: the BEST Plus Oral English Proficiency Test and the CASAS Reading test. These pretests were conducted on January 16, 2011.

Most assessment scores placed students between ESOL levels 2-6, with the plurality of students (40%) placed at ESOL 6. Three students (12%) were placed at ABE 5. Table 4 summarizes these results.

*Table 4: EFL pretest placement results*

EFL	Frequency	Percent
ESOL 6	10	40%
ESOL 5	6	24%
ESOL 4	4	16%
ESOL 3	1	4%
ESOL 2	1	4%
ABE 5	3	12%
Total	25	100%

Students received instruction in the pilot from January to May 2011. The number of instructional classroom hours received by each student ranged from 6 to 45 hours with the average being approximately 30 hours. In addition, students received 30 hours of online medical terminology instruction and met individually with the career counselor outside of regularly scheduled class hours.

Following the instructional period, posttests were administered to students on May 3, 2011. The test results showed that 15 (60%) of the students who participated in the project completed an EFL by the end of the pilot. The remaining 10 (40%) were assessed as progressing within a level at the end of the pilot. These results are summarized in Table 5.

*Table 5: EFL posttest results*

EFL	Completed	Progressing
ESOL 6	5	5
ESOL 5	4	2
ESOL 4	2	2
ESOL 3	1	-
ESOL 2	1	-
ABE 5	2	1
Total	15 (60%)	10 (40%)



## Credential Evaluation

Of the 25 students participating in the project pilot, 16 (64%) participated in a credential evaluation through World Education Services (WES). Doing so requires students to take the initiative in requesting their own college transcripts. By the end of the pilot, nine of these students had requested their transcripts and completed the credential evaluation while seven were still in progress. These results are summarized in Table 6.

*Table 6: Credential evaluation results*

Credential evaluation		No credential evaluation
16 64%		9 36%
<i>Completed evaluation</i>	<i>Evaluation in-progress</i>	
9 36%	7 28%	

Among the nine students who did not submit to a credential evaluation, the majority (70%) indicated they were pursuing other types of evaluation or exams. Some professions require credential evaluations through specific agencies. For example, nursing professionals who are educated outside of the United States and wish to pursue licensure or academic admission in the U.S. must have their credentials evaluated through the Commission on Graduates of Foreign Nursing Schools (CGFNS). Table 7 summarizes the reasons students decided to forgo the WES credential evaluation.

*Table 7: Reasons students opted-out of the WES credential evaluation*

Reason	Frequency	Percent
Taking credential evaluation through the Commission on Graduates of Foreign Nursing Schools (CGFNS)	3	30%
Taking the Foreign Pharmacy Graduate Equivalency Examination (FPGEE)	2	20%
Taking the United States Medical Licensing Examination (USMLE)	2	20%
May qualify for a credential evaluation that costs less than the WES	1	10%
Not interested in credential evaluation	1	10%
Total	9	100%

### **Entry-Level Employment in Healthcare Area of Specialization**

Among the 25 students enrolled in the Columbus pilot, nine indicated that they were unemployed and searching for employment when entering the program. Of these nine, one was able to find new employment related to his/her healthcare field during the pilot period. This student – a former nurse – found employment as a State Tested Nursing Assistant (STNA) in April 2011.

Following the pilot, data available in ABLELink – Ohio’s adult education data management system – show that four more of these nine students obtained employment by the end of the first quarter after exiting the program. Therefore, five out of nine (56%) of the Columbus pilot students obtained employment, as defined by Ohio’s ABLE policy<sup>3</sup>.

### **Postsecondary Enrollment**

Data available in ABLELink show that two of the Columbus pilot students enrolled into postsecondary educational or occupational skills training programs by the end of the following calendar year after exiting the program. This result conforms to Ohio’s ABLE policy definition of postsecondary enrollment<sup>4</sup>.

### **Other Student Successes**

The following are additional outcomes that students experienced as a result of this pilot. This information was collected from follow-up phone calls made by the career counselor to the students in September 2011.

- A former dentist met with an academic advisor at The Ohio State University to discuss enrolling in the university’s dentistry program.
- A former doctor is planning to take the USMLE (United States Medical Licensing Examination) after he/she receives the necessary name change documentation from his/her country of origin.
- Two former nurses are studying to take the TEAS (Test of Essential Academic Skills) in order to apply for the licensed practical nurse program at Columbus City Schools.
- A former nurse is planning to enroll in the University of Cincinnati’s registered nurse program after he/she takes the TOEFL (Test of English as a Foreign Language).
- A former pharmacist successfully passed the FPGEE (Foreign Pharmacy Graduate Equivalency Examination).
- A former pharmacist plans to take the pharmacy board test after completing additional courses.

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<sup>3</sup> Ohio Board of Regents (n.d.). *Adult Basic & Literacy Education eGuide*. Retrieved from <https://www.ohiohighered.org/sites/ohiohighered.org/files/uploads/able/reference/>

<sup>4</sup> Ohio Board of Regents (n.d.). *Adult Basic & Literacy Education eGuide*. Retrieved from <https://www.ohiohighered.org/sites/ohiohighered.org/files/uploads/able/reference/>

- A former pharmacist met with an academic advisor at The Ohio State University to discuss enrolling in the university’s pharmacy program.
- One student completed the process for becoming a U.S. citizen.

**Additional Supports Needed**

Among the 25 students participating in the *English for Healthcare Professionals* pilot, 20 (80%) noted on student surveys that they needed additional support beyond the services provided through the pilot course. The types of supports cited fell into three general categories: 1) resume help/job search support, 2) additional classes, and 3) help with admission/financial aid process. Nearly all of these students cited more than one type of support, so the frequency and percent data summarized in Table 8 are not cumulative.

Table 8: Types of additional support needed

Support Type	Frequency	Percent
Resume help/job search support	15	60%
Possible additional classes needed*	12	48%
Help with admission/financial aid process	10	40%

\*Additional classes specified:

- Conversation classes
- Citizenship classes
- ESOL classes

**STUDENT EVALUATION OF PILOT**

An evaluation was administered in May 2011 to allow students to provide feedback on the pilot. Fifteen students completed the survey, which was comprised of open-ended questions and rating items. For the purposes of this analysis, themes were drawn from similar comments made by two or more students.

**Most Helpful Aspects of Course**

The first question prompted students to identify the most helpful aspects of the pilot. Table 9 summarizes common themes from the response data according to the frequency by which they were identified.

Table 9: *What has been the most helpful part of this course?*

Common Themes	Frequency	Percent (n=15)
Learning medical terminology	4	27%
WES credential evaluation	3	20%
Learning about my medical profession in context of the U.S. healthcare system	3	20%
Resume/interview preparation	2	13%

### Rating Items

The next question prompted students to rate the extent to which they agreed with statements regarding the pilot using a Likert scale<sup>5</sup>. Table 10 shows the distribution of responses and the average score for each item. The shaded area denotes the most frequently cited rating score for each statement. Overall, most of the 15 respondents indicated that they strongly agreed with all five statements, suggesting high satisfaction with the program.

Table 10: *Student ratings on satisfaction with pilot*

	1	2	3	4	5	Mean	No Data
The class materials were appropriate for my skill level.	-	-	2 13%	2 13%	11 73%	4.60	-
The teacher knows the materials well.	-	-	-	3 20%	12 80%	4.80	-
The career counselor provided an education and employment plan for me to get back into the healthcare field.	-	-	2 13%	3 20%	10 67%	4.53	-
The foreign-healthcare credential evaluation will help advance my education and employment plan.	-	-	1 7%	2 13%	11 73%	4.71	1 7%
I would recommend this course to a friend.	-	-	1 7%	-	14 93%	4.87	-

<sup>5</sup> 1=Strongly Disagree; 2=Disagree; 3=Neutral; 4=Agree; 5=Strongly Agree

## Student Learning

The third question on the survey asked students to identify two things that they had learned from the pilot course. Table 11 summarizes common themes by frequency.

Table 11: List two things you learned in this course

Common Themes	Frequency	Percent (n=15)
Medical terminology	7	47%
Job interview skills	6	40%
Writing/preparing/improving resume	4	27%
Language/communication skills	3	20%
Searching for employment	3	20%
Utilizing employment resources	3	20%
Utilizing financial aid and related services	3	20%

## Areas for Improvement

The fourth question on the survey asked students to identify areas of the pilot course that could be improved. Table 12 summarizes common themes by frequency.

Table 12: What could be improved to make it better?

Common Themes	Frequency	Percent (n=15)
Provide more class time for the course	3	20%
Tailor instruction more closely to students' actual career fields	3	20%
Organize onsite hospital visits to allow students to experience them firsthand	2	13%

Other suggestions included:

- Provide more information about colleges and technical school options.
- Involve OSU to help with facilitating internships.
- Provide more English instruction on general terms and idioms.

## Returning to a Healthcare Career

The fifth question on the survey asked students to describe how the course helped to improve their chances to return to their respective healthcare professions. Table 13 summarizes common themes by frequency.

Table 13: How has this class helped improve your chances for returning to your healthcare career?

Common Themes	Frequency	Percent (n=15)
Better prepared to obtain certification/find employment	4	27%
Better understanding of available education/employment resources	3	20%
Better understanding of U.S. healthcare system	3	20%
Better understanding of medical terminology	2	13%

### **Next Steps for Finding Employment**

The last question asked students to describe their next steps for finding a job in their respective healthcare fields. Students' responses are summarized in Table 14.

Table 14: What is your next step in finding a job in your healthcare field?

Common Themes	Frequency	Percent (n=15)
Begin applying for jobs in healthcare field	5	33%
Enroll in postsecondary healthcare program	5	33%
Take additional courses to improve English proficiency	4	27%
Not sure	2	13%

## **LESSONS LEARNED**

The *English for Healthcare Professionals* pilot resulted in both successes to replicate as well as challenges to overcome. The following summarizes some of the lessons learned in this project with regard to the pilot's key components.

### **Recruitment and Retention**

#### ***Pilot Successes***

- The data show that the majority of the 25 students who began the class persisted until the end of the course. A number of factors may have contributed to these successes:
  - Students were enrolled as a cohort group with similar interests.
  - The course schedule and syllabus established clear expectations for the students.

- Curricula were contextualized to the students' background knowledge and interests.
- Support staffs were available to help students navigate the U.S. healthcare system, employment services, and educational processes (i.e., WES evaluation, enrollment in postsecondary education).
- Communications with immigrant organizations proved to be an effective recruiting tool. Several organizations expressed gratitude for offering the program and recognizing the need for it within the immigrant community.

### ***Area for improvement***

- The average amount of classroom instruction time was 30 hours per student. In addition, students received approximately 35 hours of instruction through an online course and through meetings with the career counselor. However, some students wrote in their evaluations that they would have liked more classroom time. Therefore, more instructional hours per student may be beneficial in future program activities.

## **Instructional Design and Implementation**

### ***Pilot Successes***

- With regard to curriculum, instruction, and class structure, notable features included organizing students as a cohort group, using contextualized curricula, and integrating basic and technical education.
- Students indicated in their evaluations that they believed they had gained knowledge about medical terminology and healthcare professions within the U.S. as a result of the pilot program's instruction.

### ***Area for improvement***

- Two areas for improvement relate to the balance and depth of course content. According to the student evaluations of the pilot project, students indicated a desire for 1) more instruction to increase their English language proficiency, and 2) more customized technical instruction specific to the students' respective career fields.

## **Career Pathways**

### ***Pilot Successes***

- Most of the students who participated in the pilot were successful in having their foreign credentials evaluated by either WES or another service.

- The pilot produced a number of licensing charts that helped develop a common understanding of the credentialing processes.

#### ***Area for improvement***

- Anecdotal evidence from students and teachers indicated that the career pathways model was a new concept for students to which they were unaccustomed. Additionally, by the end of the pilot, the majority of the licensing charts proposed to Ohio licensing boards were not yet approved. Replication of the pilot could greatly benefit from streamlining the board review process.

### **Enrollment in Postsecondary Education**

#### ***Pilot Success***

- Both student evaluation data and information collected by the Columbus ABLE/ESOL staff suggest that the career counselor was a valuable contributor in the pilot.

#### ***Areas for improvement***

- As ABLE is limited to those needing basic skills, there is often a gap between learning these basic skills and being prepared for next steps such as passing the TOEFL. Some students in this pilot may have benefited from a “TOEFL prep” type course to be better prepared to enter postsecondary education.

### **Links to Employers**

#### ***Pilot Successes***

- In the student evaluations of the pilot, a number of students wrote that the pilot had increased their preparation for obtaining certification and finding employment.
- Students also reported that they had a better understanding of the U.S. healthcare system and the employment resources that are available to them as a result of the pilot.

#### ***Areas for improvement***

- Some students reported that they wanted more instruction specific to their respective fields, as well as more hands-on experience through internships and shadowing opportunities at hospitals. Increased connections with local employers may help meet these needs and increase student employment. Moving forward, it may be helpful to have the career counselor take a more active role in developing partnerships with potential employers.



### 3. Program Implementation

At the conclusion of the pilot program in FY 2011, OBR ABLE supported the rollout and implementation of the *English for Healthcare Professionals* program at the following locations:

- Columbus City Schools
- Polaris Joint Vocational Schools
- Project Learn of Summit County
- Kettering City Schools

The program at Columbus City Schools in FY 2012 was a continuation of the original pilot. Polaris Joint Vocational Schools began its program the same year. Project Learn of Summit County adopted its program in FY 2013, followed by Kettering City Schools in FY 2014. OBR ABLE provided funding and support to these programs from their initial implementation through the end of FY 2014.

During the implementation period, most programs modified the processes and policies established for the original pilot in order to meet the unique needs of their students. This included the elimination of the credential evaluation process as a required element of the program. This policy change was consistent with the student feedback collected during the pilot, which identified the credentialing process as being a challenging component of the program. In addition, the program at Kettering City Schools expanded its enrollment policy and modified the curriculum in order to accommodate native speaking students in the program. To meet the needs of students, all programs eventually dropped the requirement of prior healthcare experience and opened the classes to anyone interested in a healthcare career.

The remainder of this report provides summary data on the implementation of the *English for Healthcare Professionals* program at the four ABLE locations from FY 2011 to FY 2014. These data were pulled from ABLELink in August and December 2014. The information includes student enrollment data as well as Federal performance indicators for educational gains, obtainment of employment, employment retention, and placement into postsecondary education or training.

Please note that these data are presented only as summaries of program activity. As such, they provide limited evidence for conclusions regarding program impact.

## Student Enrollment

Table 15 summarizes student total enrollment for the four *English for Healthcare Professionals* programs. This includes data from the initial pilot that was conducted at Columbus City Schools in FY 2011.

Table 15: Student enrollment from 2011-2014

ESOL Healthcare Programs	2011	2012	2013	2014	Total
Columbus City Schools	25	5	7	10	47
Polaris Joint Vocational Schools		23	25	12	60
Project Learn of Summit County			21	7	28
Kettering City Schools				13	13
Total	25	28	53	42	<b>148</b>

## Educational Gains

Table 16 summarizes education gains recorded for students who participated in the program. These data represent the number and percentage of students who completed or advanced by at least one Educational Functioning Level (EFL) by their completion of the program<sup>6</sup>.

Table 16: Number and percentage of students who completed an EFL level

ESOL Healthcare Programs	2011	2012	2013	2014	Total
Columbus City Schools	13/25 52%	0/5 0%	6/7 86%	5/10 50%	24/47 51%
Polaris Joint Vocational Schools		23/23 100%	15/25 60%	10/12 83%	48/60 80%
Project Learn of Summit County			15/21 71%	7/7 100%	22/28 79%
Kettering City Schools				13/13 100%	13/13 100%
Total	13/25 52%	23/28 82%	36/53 68%	35/42 83%	<b>107/148</b> <b>72%</b>

<sup>6</sup> Ohio Board of Regents (n.d.). *Adult Basic & Literacy Education eGuide*. Retrieved from <https://www.ohiohighered.org/sites/ohiohighered.org/files/uploads/able/reference/>

## Obtainment of Employment

Table 17 summarizes the number and percentage of students who obtained employment by the end of the first quarter after the program exit quarter<sup>7</sup>. These data are calculated in relation to the number of students who had indicated they were unemployed and searching for employment when entering the program. Please note that employment data for FY 2014 were not available at the time of this report.

*Table 17: Number and percentage of students who obtained employment*

<b>ESOL Healthcare Programs</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>Total</b>
Columbus City Schools	5/9 56%	0/0 0%	0/0 0%	No data	5/9 56%
Polaris Joint Vocational Schools		2/11 19%	3/6 50%	No data	5/17 29%
Project Learn of Summit County			0/9 0%	No data	0/9 0%
Kettering City Schools				No data	No data
Total	5/9 56%	2/11 19%	3/15 20%	No data	<b>10/35</b> <b>29%</b>

## Employment Retention

Table 18 summarizes the number and percentage of students who remained employed by the third quarter after exiting the program<sup>8</sup>. These data are calculated in relation to the number of students who had indicated they were fully or partially employed at the end of the program. Please note that employment data for FY 2014 were not available at the time of this report.

<sup>7</sup> Ohio Board of Regents (n.d.). *Adult Basic & Literacy Education eGuide*. Retrieved from <https://www.ohiohighered.org/sites/ohiohighered.org/files/uploads/able/reference/>

<sup>8</sup> Ohio Board of Regents (n.d.). *Adult Basic & Literacy Education eGuide*. Retrieved from <https://www.ohiohighered.org/sites/ohiohighered.org/files/uploads/able/reference/>

Table 18: *Number and percentage of students who retained employment*

ESOL Healthcare Programs	2011	2012	2013	2014	Total
Columbus City Schools	0/1 0%	2/4 50%	1/1 100%	No data	3/5 60%
Polaris Joint Vocational Schools		6/10 60%	2/5 40%	No data	8/15 53%
Project Learn of Summit County			1/2 50%	No data	1/2 50%
Kettering City Schools				No data	No data
Total	0/1 0%	8/14 57%	4/8 50%	No data	12/22 55%

### Placement into Postsecondary Education or Training

Table 19 summarizes the number and percentage of students who reported that they had enrolled in a postsecondary educational or occupational skills training program by the end of the subsequent calendar year after exiting the program<sup>9</sup>.

Table 19: *Number and percentage of student who enrolled into postsecondary*

ESOL Healthcare Programs	2011	2012	2013	2014	Total
Columbus City Schools	2	1	0	0	3
Polaris Joint Vocational Schools		2	0	0	2
Project Learn of Summit County			1	0	1
Kettering City Schools				2	2
Total	2	3	1	2	8

### Aggregate Results

Table 20 provides an overview of the aggregate results of the four ABE programs that implemented the *English for Healthcare Professionals* program. This includes the data collected from the original pilot in FY 2011.

<sup>9</sup> Ohio Board of Regents (n.d.). *Adult Basic & Literacy Education eGuide*. Retrieved from <https://www.ohiohighered.org/sites/ohiohighered.org/files/uploads/able/reference/>

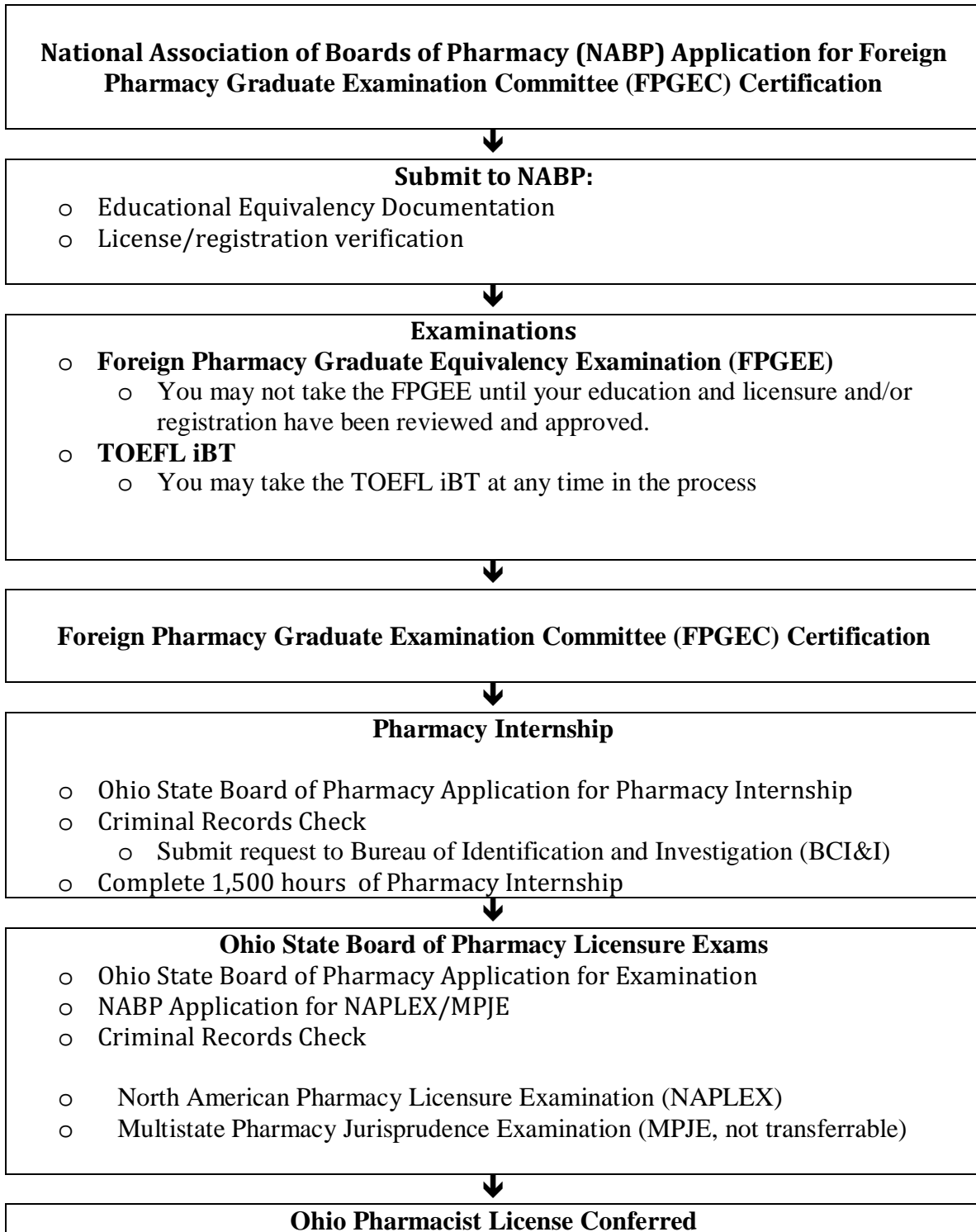
Table 20: *Aggregate results of the English for Healthcare Professionals program*

<b>Aggregate Program Data</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>Total</b>
Number of students enrolled in <i>English for Healthcare Professionals</i>	25	28	53	42	148
Number of students who completed an ESL level	13	23	36	35	107
Number of students who obtained employment	5/9	2/11	3/15	No data	10/35
Number of students who retained employment	0/1	8/14	4/8	No data	12/22
Number of students who transitioned into postsecondary	2	3	1	2	8

## 4. Appendix

Sample Licensing Pathway Chart: Foreign Pharmacy Graduate.....22

# Ohio Licensing Process for Foreign Pharmacy Graduate



*Disclaimer: This information is provided only as an overview. All programs, processes, and/or fees are subject to change. Please verify above information with appropriate agency or governing agency.*