

Date of Hearing: January 14, 2014

ASSEMBLY COMMITTEE ON HIGHER EDUCATION

Das Williams, Chair

AB 548 (Salas) – As Amended: January 7, 2014

**SUBJECT:** Public postsecondary education: community college registered nursing programs.

**SUMMARY:** Removes the sunset on the California Community College (CCC) districts' associate degree nursing (ADN) programs admissions process.

**EXISTING LAW:**

- 1) Allows CCC districts to use any diagnostic assessment tools that are commonly used in registered nursing programs and approved by the CCC Chancellor and, if, after using an approved diagnostic tool, the CCC registered nursing program determines that the number of applicants to the program exceeds its capacity, the program is authorized to use additional multicriteria screening measures. Current law also allows a CCC district to a) exclude an applicant to a registered nursing program if the applicant is not a resident of that district or has not completed prerequisite courses in that district; and, b) implement policies, procedures, and systems, including, but not limited to, priority registration systems, that have the effect of excluding an applicant or student who is not a resident of that district from a registered nursing program of that district (Education Code § 78261.3).
- 2) Requires CCC districts to adopt and implement merit-based admissions policies for nursing programs if, for any academic term, there are more applicants seeking enrollment in that program than may reasonably be accommodated (EC § 78261.5).

**FISCAL EFFECT:** Unknown

**COMMENTS:** Need for the bill. According to the author, California continues to suffer from a serious nursing shortage. The author states, "There are many individuals seeking admission to our [CCC] nursing programs and yet, approximately 12,000 applicants are turned away every year due to a lack of space."

Background. CCC ADN program admissions. In the early 1990s, a controversy arose over merit-based or competitive admissions to ADN programs. The Mexican-American Legal Defense and Education Fund (MALDEF) threatened a lawsuit because students of color were being disproportionately denied admission to impacted programs. In the negotiations that ensued, MALDEF agreed not to bring suit, and the CCC Board of Governors (BOG) agreed to develop program admissions criteria that would be validated as relevant to future performance. BOG regulations in the mid-1990s prohibited ADN programs from using evaluative mechanisms---usually grade point average (GPA)---unless the district could validate its practices in a complex research initiative, a requirement that proved too difficult for colleges without sufficient research staff. CCC districts were told to undertake the research or rely on lottery or other non-evaluative mechanisms. Lotteries and wait lists were instituted; completion rates fell.

The CCC Chancellor's Office (CCCO) then began a project (as a district grant) to research a full range of variables, seeking those that would be statistically correlated with nursing program

student success in the hopes of finding six colleges for which validation could be achieved. In 2002, the CCCCO announced results, finding that four factors best predict student success in completing nursing programs: Overall college GPA, English GPA, Core Biology GPA (Anatomy, Physiology, Microbiology), and Core Biology course repetitions. (Students with fewer repetitions have a higher probability of success.) CCC districts were then advised in an October 2002 memo that they could begin using these criteria, but in order to do so, local research must first be performed, "If the decision is made to adopt the measures as a prerequisite, and to set cut scores that will result in defined program completion rates, then districts must analyze and monitor the possibility of disproportionate impact on particular groups of students defined in terms of race, ethnicity, gender, age, or disability."

The districts were also warned, "It is appropriate to consider potential risks of implementing this research. The adoption of the prerequisite measures and the implementation of the composite formula could result in rationing access. Unless the implementation of these measures is done carefully according to the guidelines discussed later in this memo, it could conflict with the requirement for open access."

At that time, the CCCCO acknowledged the severity of the nursing shortage and asserted to its ADN program directors, "The biggest part of the solution is in increasing the number of spaces; the lesser part of the solution is in improving success rates."

**AB 1559 (Berryhill).** Assembly Member Berryhill introduced AB 1559 (Chapter 712, Statutes of 2007), 15 years after the controversy first erupted. AB 1559 sought to address the fact that some CCC districts had been left with "non-evaluative" mechanisms, that is, a lottery or a waiting list because they simply had not found the resources to comply with the resource-intensive rules promulgated by the CCCCO (as described above).

The provisions implemented by AB 1559 contain a sunset clause that EC § 78261.5 (as described above in the current law section of this analysis) shall remain in effect only until January 1, 2016, and as of that date will be repealed, unless a later enacted statute, that is enacted before January 1, 2016, deletes or extends that date.

To note, AB 548 seeks to delete the sunset date of January 1, 2016, because, according to the CCCCO, of the CCC campuses implementing AB 1559, there has been an average decrease in attrition rates of 13.25 percent and depending on the campus, either an increase in student diversity or no known changes to student diversity.

**Nursing shortage.** The U. S. Department of Health and Human Services has projected that by 2015, 400,000 new nurses will be needed just to fill the vacancies left by retirees. Additionally, by 2020, the U. S. Bureau of Labor Statistics predicts that it will be short between 800,000 and one million new and replacement nurses, including being short close to 117,000 in California alone.

According to a recent study by the University of California, San Francisco, the supply and demand for nurses in California varies by region. The report found that the Inland Empire region is experiencing the hardest difficulties in their ability to hire trained nurses. However, the San Francisco Bay region is expected to have the largest regional decrease in overall hiring of trained nurses. Additionally, the report found that many new nurses in California are finding it more and more challenging to find hospital nursing jobs.

Based on a 2011 presentation to the Legislature by the Legislative Analyst's Office (LAO), it was recommended that the Legislature should implement additional measures to reduce CCC attrition rates. During this same presentation, the LAO also opined that despite recent efforts to expand access to nursing programs, the number of applicants to CCC nursing programs far exceeds available slots. To note, the LAO found that the CCC is able to accommodate less than 30 percent of their applications.

Prior and related legislation:

- 1) AB 1559 (Berryhill), see above for description.
- 2) SB 1309 (Scott), Chapter 837, Statutes of 2006, enacted a wide range of responses to the nursing shortage, including authorizing grants to CCC districts to expand enrollment, provide diagnostic assessments, developing and offering pre-entry coursework to prospective nursing students, and requiring colleges with attrition rates above 15% to use nationally validated assessment tools that determine the likelihood of success in order to qualify for funds.
- 3) AB 2177 (Jackson) of 2004, which required CCC-ADN programs to implement merit-based admissions and incorporated the four validated factors in the CCCCO study, stalled on the Assembly Floor.

REGISTERED SUPPORT / OPPOSITION:

Support

California Hospital Association  
Los Rios Community College District  
Rio Hondo Community College District

Opposition

None on file.

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