

Date of Hearing: March 12, 2024

ASSEMBLY COMMITTEE ON HIGHER EDUCATION

Mike Fong, Chair

AB 1891 (Weber) – As Amended February 27, 2024

**SUBJECT:** Community colleges: allied health programs

**SUMMARY:** Expands the use of the multicriteria screening process and subsequent reporting requirements on the effectiveness of the process, to impacted allied health programs offered by California Community Colleges. Specifically, **this bill:**

- 1) Authorizes California Community Colleges (CCC) to institute a selection process for students who apply to be part of an impacted allied health program. The selection process may be either a multicriteria screening process (MCS), a random selection process, or a blend of both, to evaluate applicants for admission to the program.
- 2) Specifies if a community college allied health program elects to use either the MCS or a combination a MCS and a random selection process, to evaluate the applicants, the allied health program will apply the screening process in accordance with the following:
  - a) Criteria used during the MCS will include, but shall not be limited to the following:
    - i) Any academic degrees, academic diplomas, or relevant certificates held by the applicant;
    - ii) Grade point average in relevant coursework;
    - iii) Any relevant work or volunteer experience;
    - iv) Life experience or special circumstances of an applicant including, but not limited to any of the following or combination of the following: disabilities, low family income, first generation of family to attend college, need to work, disadvantaged social or educational environment, difficult personal and family situations or circumstances, and/or refugee or veteran status; and,
    - v) Proficiency or advanced level coursework in languages other than English. The languages shall be identified by the Chancellor of the CCC as high-frequency languages based on census data and may include, but are not limited to the following languages: American Sign Language, Arabic, Chinese (including various dialects), Farsi, Russian, Spanish, Tagalog, the various languages of the Indian subcontinent and Southeast Asia, and the various languages of the African continent;
  - b) Additional criteria may be included in the screening process if approved by the Chancellor of the CCC. The additional criteria can include a personal interview, a personal statement, letters of recommendation, or a number of times an applicant repeated prerequisite classes; and,
  - c) An approved diagnostic assessment if the diagnostic assessment is a commonly used in allied health programs and is approved by the Chancellor of the CCC.

- 3) Requires any community college allied health program that elects to use a MCS to annually report the admissions policies to the Chancellor of the CCC in writing. The report will include the weight given to any criteria used by the program and the demographic information to both those who applied for the program and those who were successfully admitted.
- 4) Encourages the Chancellor of the CCC to develop and make available a model admission process based on this measure for community college allied health programs to use by July 1, 2025.
- 5) Require the Chancellor of the CCC to submit a report on or before March 1, every year beginning in 2026 to the Legislature and the Governor. The report shall examine and include the following:
  - a) The participation, retention, and completion rates in community college allied health programs of students admitted through a MCS, disaggregated by the age, gender, ethnicity, and language spoken at home of those students; and,
  - b) Information on the annual impact the Seymour-Campbell Success Act of 2012 has on the matriculation services for students admitted through the MCS.
- 6) Requires the Chancellor of the CCC to submit the annual report in conjunction with its annual report on students in nursing programs pursuant to Section 78261 and permits the Chancellor of the CCC to incorporate the report required pursuant to this measure into the nursing report required by Section 78261.5.
- 7) Defines an array of terms, including, but not limited to the following:
  - a) “Allied health programs” means a program that offers a certificate or a degree for an allied health profession as listed in Section 295p of Title 42 of the United States Code.
  - b) “Disabilities” has the same meaning as used in Section 2626 of the Unemployment Insurance Code;
  - c) “Low family income” will be measured by a community college allied health program in terms of a student’s eligibility for financial aid, as defined; and,
  - d) “Need to work” means that the student is working at least part-time while completing academic work that is a prerequisite for admission to the allied health program.
- 8) Sunsets the measure on January 1, 2030.
- 9) Prohibits a community college district from excluding an applicant or implementing policies, procedures, or systems that would exclude an applicant or student from a program if the applicant is not a resident of that district or has not completed prerequisite courses in that district.
- 10) Permits a community college district to use any diagnostic assessment that is commonly used in allied health programs and is approved by the Chancellor of the CCC. Permits if after the diagnostic assessment tool, the applicant pool is still larger than available program slots, the community college may use a MCS.

**EXISTING LAW:** *Federal law.*

- 1) Defines “allied health professionals” as a health professional who has received a certificate, an associate’s degree, a bachelor’s degree, master’s degree, a doctoral degree, or a postbaccalaureate training in a science relating to health care. The professional shares in the responsibility for delivering health care services or related services. The professional has not received a doctoral degree in medicine, osteopathy, dentistry, veterinary medicine, pharmacy, podiatric medicine, optometry, public health, public administration, clinical psychology, or sociology (Section 295p of Title 42 of the United States Code).

*State law.*

- 1) Establishes the CCC under the administration of the BOG of the CCC, as one of the segments of public postsecondary education in California. The CCC shall be comprised of community college districts (Education Code (EDC) Section 70900).
- 2) Stipulates should a community college registered nursing program determine that the number of applicants to that program exceeds its capacity, the nursing program may admit students through the following methods:
  - a) A MCS that will apply measures of evaluation in accordance with the following:
    - i) The criteria applied in a MCS will include, but is not limited to:
      - (1) Academic degrees or diplomas, held by an applicant;
      - (2) Grade-point average in relevant coursework;
      - (3) Any relevant work or volunteer experience;
      - (4) Life experiences or special circumstances of the applicants as defined;
      - (5) Proficiency in advance level coursework in languages other than English, as defined;
    - ii) Additional criteria such as a personal interview, a personal statement, a letter of recommendation, or a number of repetitions of prerequisite classes may be included but are not required; and,
    - iii) Additional criteria may include the use of a diagnostic test.
  - b) A random selection process; and,
  - c) A blend of a random selection process or a MCS.

Requires a community college that uses a MCS to report its nursing program admission policies to the Chancellor of the CCC annually, in writing. The policy will include how each criteria is factored into the college’s decision in terms of admission.

Requires the Chancellor’s Office of the CCC to submit a report on or before March 1, 2015, and by March 1 each year thereafter that examines the following:

- a) The participation, retention, and completion rates in a community college registered nursing program of students admitted through a MCS as described, disaggregated by the age, gender, ethnicity, and language spoken at the home of the students admitted;
- b) Information on the annual impact, if any, of the Seymour-Campbell Student Success Act had on the matriculation services for students, admitted through the MCS.

Permits the above report to be submitted annually in conjunction with another report on nursing programs.

Repeals all of the above on January 1, 2025, unless another statute extends the date (EDC Section 78261.5).

- 3) Establishes the Nursing Enrollment Growth and Retention program to facilitate an expansion of associate degrees for nursing programs and to improve completion rates of students who undertake nursing programs at the CCC. To qualify for the grant funding provided annually in the budget, community colleges must reduce attrition rates by 15 percent, increase completion, and expand nursing program enrollment. Establishes a reporting requirement which mandates the Chancellor's Office of the CCC to provide specific data pertaining to nursing programs on the effectiveness of the program (EDC Section 78261).

**FISCAL EFFECT:** Unknown

**COMMENTS:** *Need for the measure.* As explained by the author, "The California's health care industry has experienced sustained worker shortages among nurses and Allied Health professionals. As the largest educator of California's healthcare workforce, California Community Colleges (CCC) play a major role in addressing healthcare workforce shortages. Though demand for CCCs' Allied Health programs remains high, capacity limitations affect the CCCs ability to grow California's healthcare workforce. Multicriteria screening is proven to grow the diversity and completion rate of CCCs' healthcare students."

*Allied health programs at the CCC.* The United States Department of Health and Human Services defines allied health professionals as persons in the medical field who deliver health or health-related services pertaining to the identification, evaluation, and prevention of diseases and disorders; dietary and nutrition services; and rehabilitation and health systems management. The National Center for Health Workforce Analysis, which projects the future supply of and demand for healthcare occupations, lists 27 professions as "allied healthcare professionals."

In January 2024, the CCC Chancellor's Office issued a report entitled "2023 Allied Health Programs," as required by EDC Section 88826.5. In compliance with the reporting requirements, the report included an analysis of clinical placement for all allied health programs that require clinical placements throughout all 116 community colleges in California. According to the report the CCC offers 44 different allied health programs that require clinical placements:

| <b>Program Name</b>                   | <b># of programs offered by community colleges</b> | <b># of students enrolled in 2023</b> | <b># of clinical placements available</b> |
|---------------------------------------|--|---------------------------------------|---|
| Alcohol and Controlled Substances     | 40   | 7,813                                 | 49  |
| Athletic Trainer                      | 14   | 3,115                                 | 0   |
| Cardiovascular Technician             | 3  | 217                                   | 158                                       |
| Certified Nurse Assistants            | 22   | 3,174                                 | 1,195                                     |
| Medical Assistant                     | 39   | 10,511                                | 0   |
| Clinical Medical Assistant            | 12   | 1,205                                 | 124                                       |
| Administrative and Clinical Assistant | 25   | 2,584                                 | 211                                       |
| Community Health Care Worker          | 14   | 640                                   | 0   |
| Dental Assistant                      | 26   | 862                                   | 179                                       |
| Dental Hygienist                      | 16   | 1,216                                 | 375                                       |
| Dental Laboratory Technician          | 2  | 94                                    | 0   |
| Diagnostic Medical Sonographer        | 5  | 188                                   | 48  |
| Dietetic Technology                   | 4  | 396                                   | 7   |
| Disabilities Services                 | 3  | 122                                   | 0   |
| Electrocardiography                   | 5  | 103                                   | 16  |
| Electro-Neurodiagnostic Technology    | 1  | 26                                    | 11  |
| Emergency Medical Technicians         | 41   | 15,621                                | 894                                       |
| Paramedic                             | 27   | 1,673                                 | 164                                       |

| <b>Program Name</b>                     | <b># of programs offered by community colleges</b> | <b># of students enrolled in 2023</b> | <b># of clinical placements available</b> |
|---|--|---------------------------------------|---|
| General Health Occupations              | 52   | 20,817                                | 0   |
| Gerontology                             | 13   | 5,316                                 | 0   |
| Hospital and Health Care Administration | 2  | 49                                    | 0   |
| Health Information Coding               | 13   | 900                                   | 0   |
| Health Information Technology           | 10   | 5,363                                 | 0   |
| Health Facility Unit Coordinator        | 1  | 0                                     | 0   |
| Home Health Aide                        | 7  | 708                                   | 8   |
| Hospital Central Service Technician     | 3  | 37                                    | 0   |
| Human Services                          | 50   | 9,855                                 | 0   |
| Licensed Vocational Nursing             | 35   | 3,571                                 | 1,457                                     |
| Massage Therapy                         | 3  | 248                                   | 0   |
| Medical Laboratory Technology           | 8  | 457                                   | 73  |
| Mortuary Science                        | 3  | 390                                   | 31  |
| Occupational Therapy Technology         | 4  | 475                                   | 233                                       |
| Orthopedic Assistant                    | 3  | 63                                    | 26  |
| Pharmacy Technology                     | 14   | 2,027                                 | 100                                       |
| Phlebotomy                              | 8  | 324                                   | 90  |
| Physical Therapy Assistant              | 8  | 899                                   | 183                                       |

| <b>Program Name</b>                     | <b># of programs offered by community colleges</b>                                   | <b># of students enrolled in 2023</b> | <b># of clinical placements available</b> |
|---|--|---------------------------------------|---|
| Polysomnography                         | 1  | 29                                    | 0   |
| Psychiatric Technician                  | 10   | 903                                   | 359                                       |
| Radiation Therapy Technician            | **according to the report there are none but there are at least 41 student enrolled. | 41                                    | 0   |
| Radiologic Technology                   | 25   | 2,394                                 | 780                                       |
| Respiratory Care/Therapy                | 19   | 2,372                                 | 450                                       |
| School Health Clerk                     | **according to the report there are none but there are at least 52 student enrolled. | 52                                    | 0   |
| Speech Language Pathology and Audiology | 8  | 899                                   | 84  |
| Surgical Technician                     | 3  | 91                                    | 0   |

*Source: California Community Colleges Chancellor's Office, Allied Health Programs 2023 Report.*

The National Center for Health Workforce Analysis projected that in 2024, allied health professional demand in California will increase to 443,310 positions. With the demand significantly outweighing the supply, questions have been raised as to what is preventing the workforce from meeting the demand of these positions.

*Impaction at the CCC.* Impaction occurs when there are more applicants than academic spots in a program. The issue of impaction, or the lack of available seats in allied health programs is a potential issue. The chart above illustrates that the number of students enrolled in allied health program significantly outpaces the number of clinical placements; therefore, it is possible that the lack of placements has led to a bottleneck within the programs due to the lack of clinical placements, leading to an underproduction of trained allied health professionals.

The most commonly known impacted program at the CCC is nursing. Due to a plethora of applicants and a lack of clinical placements, almost every nursing program at the CCC is impacted. To address impaction and to ensure candidates who enter the program have the

greatest likelihood of successfully completion, the Legislature required the CCC to introduce a MCS through the passing of AB 1559 (Berryhill), Chapter 712, Statute of 2007.

Prior to AB 1559 (Berryhill), the Board of Governors had established a prohibition on merit-based criteria in response to equity concerns. A local CCC district could only introduce merit-based criteria for applicants if the CCC district had conducted research to ensure the admission's criteria was implemented in a manner that did not disproportionately impact a particular group of students. Due to the restrictive regulations and emphases on data analyses, community college districts elected to use lotteries and wait lists for admission to the nursing programs. An unintended consequence of this action was the turning away of qualified nursing students and higher than expected drop-out rates ultimately resulting in nursing workforce shortage.

To address impaction and to reduce the dropout rates, AB 1559 (Berryhill) codified a MCS that permitted community colleges the ability to screen and admit potential candidates by taking into account the student's lived experiences and not just their academic qualifications. The goal of the MCS was to increase completion rates by admitting qualified students and to increase the diversity of nursing candidates. To determine if the MCS was having its intended effect, the Legislature mandated the Chancellor's Office produce a report that included data on which colleges were using a MCS and the success rates of candidates who were selected by the MCS.

In the latest report published by the Chancellor's Office, which used data from the 2021-2022 academic year, 53 colleges used MCS to select their nursing candidates. The colleges using MCS had a 91.5% completion rate, which is higher than programs who use a different admission process. Community colleges who utilize the MCS also have greater diversity among candidates when compared with colleges who elect to use a different selection process. By all data points, the MCS is having the intended effect of increasing diversity and successful completion of nursing programs.

The Chancellor's Office does not collect data on how many allied health programs are impacted or facing limited enrollment; therefore, it is impossible to know whether this measure is necessary to help increase enrollment in allied health programs. However, enough data has been provided through the nursing programs to demonstrate the effectiveness of the MCS to maintain equity and bolster completion rates when compared with other selection tools used by community colleges. Furthermore, AB 1891 (Weber) would create a reporting requirement for community college to report to the Chancellor's Office on whether they elected to employ the MCS thereby providing some insight into whether allied health programs are impacted.

*Arguments in support.* The Chancellor's Office of the CCC supports expanding the MCS to allied health programs because, "In 2007, the Legislature granted our nursing programs the ability to use multicriteria screening as a tool to admit diverse and academically strong applicant pools. Today, 58 community college nursing programs use multicriteria screening. AB 1891 would extend the same benefit to our Allied Health programs, many of which must solely rely on the use of lottery for admissions. Multicriteria screening is a long-proven method for improving completion rates among students who then fill high-need roles in California's healthcare system. By permitting Allied Health programs to utilize multicriteria screening, California's healthcare workforce will be better able to fill vacancies with well-qualified and diverse candidates."

*Committee comments.* AB 1891 (Weber) would extend the use of the MCS to impacted allied health programs. The measure, also, ties the reporting requirements of the effectiveness of the MCS for allied health programs to the MCS for nursing report on the same topic.

In the measure, Section 78263.1, which establishes the criteria for MCS, sunsets in January 1, 2030; however, Section 78263.2 which permits allied health programs to use a diagnostic tool and a MCS does not have sunset. Therefore it is entirely possible for the specific criteria which has demonstrated history of improving equity, diversity, and completion rates could sunset but community college could still develop and use their own version of a MCS without having to report data or outcomes to the Legislature.

*Committee Staff recommend and the author has agreed to expand the sunset provision to the entire article pertaining to the allied health MCS:*

Section 78263.1, subdivision (g) is removed from the measure and Section 78263.3 is added to read as follows:

*Section 78263.3 This article shall remain in effect only until January 1, 2030, and as of that date is repealed.*

According to the Chancellor's Office, data is not being collected to determine which CCC allied health program is impacted.

*Moving forward, the author may wish to expand the reporting requirement to include all allied health programs that use any of the screening tools listed in the measure.*

By reporting on all the screening tools used by community colleges, the Legislature will have the ability to compare the whether screening tools are increasing graduate rates and the diversity of the allied health workforce.

*Related legislation.* AB 2532 (Mathis) of 2024, would add residing in a medically underserved area to the life experience criteria under the criteria for a nursing MCS and would extend the sunset date to January 1, 2030. The measure has been referred to the Assembly Higher Education Committee and is awaiting a hearing date.

SB 1183 (Hurtado) of 2024 is identical to AB 2532 (Mathis) and has been referred to the Senate Education Committee where it awaits a hearing date.

## **REGISTERED SUPPORT / OPPOSITION:**

### **Support**

California Community Colleges Chancellor's Office  
 California Dental Association  
 Cerritos College  
 Citrus College  
 College of the Redwoods  
 Contra Costa Community College District  
 El Camino Community College District  
 Faculty Association of California Community Colleges

Foothill-de Anza Community College District  
Mt. San Antonio College  
Palo Verde Community College District  
Rio Hondo College  
Riverside Community College District  
San Bernardino Community College District  
San Diego Community College District  
South Orange County Community College District  
Southwestern Community College District  
Ventura County Community College District  
Victor Valley College

**Opposition**

None on file.

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