

Date of Hearing: April 23, 2024

ASSEMBLY COMMITTEE ON HIGHER EDUCATION

Mike Fong, Chair

AB 2532 (Mathis) – As Introduced February 13, 2024

SUBJECT: Community colleges: registered nursing programs

SUMMARY: Adds “residing in a medically underserved area” to the criteria for consideration under the multicriteria screening process for impacted nursing programs at community colleges and extends the sunset date for the nursing program multicriteria screening process to January 1, 2030. Specifically, **this bill:**

- 1) Adds “residing in a medically underserved area”, as defined to the “life experiences or special circumstances” section of the multicriteria screening process used by impacted nursing programs at community college districts to select applicants for enrollment.
- 2) Defines medically underserved area as listed pursuant to Section 124425 of the Health and Safety Code.
- 3) Extends the availability of the multicriteria screening process to January 1, 2030.
- 4) Makes clarifying and technical amendments.

EXISTING LAW:

- 1) Requires the director of the California Department of Public Health to develop a list of underserved and urban areas and underserved population groups, after consulting multiple sources, as defined (Health and Safety Code 124425).
- 2) Establishes the California Community Colleges (CCC) under the administration of the Board of Governors 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).
- 3) 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 multicriteria screening that will apply measures of evaluation in accordance with the following:
 - i) The criteria applied in a multicriteria screening 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 multicriteria screening.

Requires a community college that uses a multicriteria screening 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 multicriteria screening 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 multicriteria screening.

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).

FISCAL EFFECT: Unknown

COMMENTS: *Purpose.* According to the Author, "the ability of California Community Colleges with a registered nursing program to use a multi-criteria screening process is a crucial mechanism to ensure educational equity and enable students, regardless of their background, to attend college and become a registered nurse."

The Author further states, "The current multi-screening criteria is designed to provide necessary consideration for those who are underrepresented in higher education, are in a vulnerable community or have faced undue hardship. By expanding the multi-screening criteria tool to include the consideration of medically underserved communities, community colleges would be able to prioritize existing residents who are more likely to remain and service their community over those from outside the medically underserved community."

Impaction at the CCC. Impaction occurs when there are more applicants than academic spots in a program. The most commonly known impacted program at the CCC is nursing. Due to a high-

volume 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 multicriteria screening 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 a nursing workforce shortage.

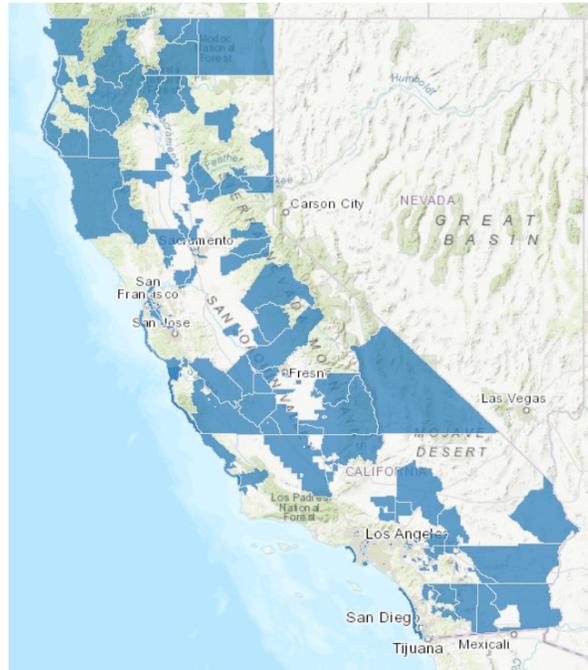
To address impaction and to reduce the dropout rates, AB 1559 (Berryhill) codified a multicriteria screening that permitted community colleges the ability to screen and admit potential candidates by taking into account the student's lived experiences and not just their academic qualifications. The goal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

In the latest report published by the Chancellor's Office, which used data from the 2021-2022 academic year, 53 colleges used multicriteria screening to select their nursing candidates. The colleges using multicriteria screening had a 91.5% completion rate, which is higher than programs who use a different admission process. Community colleges who utilize the multicriteria screening also have greater diversity among candidates when compared with colleges who elect to use a different selection process. By all data points, the multicriteria screening is having the intended effect of increasing diversity and ensuring students are successfully completing the nursing programs. AB 2532 (Mathis) would extend the by five years and would add another criteria for consideration, whether the student is from a medically underserved region of California.

Arguments in support. As explained by The California Association for Health Services at Home (CAHSAH), "This bill will add residing within a medically underserved area to the list of life experiences or special circumstances specified for consideration in a multicriteria screening process for admission to a community college nursing program. CAHSAH supports any steps that will remove barriers for nurses to become licensed in California. During the pandemic we saw many nurses retire or move out of California. Our state's nursing programs need to set priorities that will ensure access to nursing services in medically under-served areas. This bill is an important step in improving access to care in underserved areas."

Committee comments. The intention of the author as explained to Committee Staff is to provide the ability for community college districts to prioritize local students over non-local students to help address the nursing workforce shortages in their region. Current law prohibits a community college from adopting policies that would have the effect of excluding an applicant that is not a resident of the district.

The author of AB 2532 (Mathis) saw a work around by having the multicriteria screening process prioritize students from medically underserved areas. The below map of California shows the regions of the state identified by the California Health and Human Services Agency as “medically underserved areas”, specifically the blue highlighted regions.¹



Source: California State Geoportal – Medically Underserved Areas.

While the Author’s intent would work for regions highlighted in blue, it would not provide priority access to local students in non-blue regions. Furthermore, nothing would prevent a student from a southern blue region from attending school and receiving priority in a blue northern region. The goal of the Author is to have students from the region prioritized over out-of-region students and the goal stems from the desire to address local workforce needs. The goal is to have “home grown” nurses instead of having nursing students who are trained by a community college leave to return “home” to work.

In recent years, the concept of prioritizing local students has been used to address impactation at the California State University (CSU). Policies adopted by the CSU Board of Trustees has stipulated impacted CSUs shall prioritize the enrollment of local students from their region over students outside the CSU’s service area. Furthermore, this idea of restricting enrollment into CCC programs to the local service is not a new concept; as, College and Career Access Pathways partnership are limited to partnerships between the local community college district and the local high school districts in the service area of the community college district.

To address the chief concerns of the author and to align the language with requests from rural community colleges, Committee Staff has suggested and the Author has agreed to the following amendments:

¹ <https://gis.data.ca.gov/datasets/CHHSAgency::medically-underserved-areas/explore?location=38.447220%2C-117.723090%2C6.42>

1) Deletes Education Code Section 78261.3, subdivision (c), paragraph (2):

~~(2) 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.~~

2) Amends Section 78261.5 of the Education Code, subdivision (b), paragraph (1), subparagraph (D), clause viii, as follows:

~~(viii) Students is a resident of the community college district. Residing within a medically underserved area, as listed pursuant to Section 124425 of the Health and Safety Code.~~

Related Legislation. AB 1891 (Weber) of 2024, would expand 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. AB 1891 (Weber) is on Consent Calendar on the Assembly Floor awaiting third reading.

SB 1183 (Hurtado) of 2024 is identical to AB 2532 (Mathis) and is scheduled to be heard on the Consent Calendar on the Senate Floor.

REGISTERED SUPPORT / OPPOSITION:

Support

Board of Registered Nursing
California Association for Health Services At Home

Opposition

None on file.

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