SB 895: Frequently Asked Questions

Nursing Shortage

1. Is California facing a nursing shortage?
   Yes. While this is a national problem, it is particularly acute in California, where there are 995 RNs per 100,000 people — ranking 40th out of 50 states in patient-to-nurse ratios. Nursing experts argue that California’s patient-to-nurse ratio should be closer to the 25th percentile (1,030 RNs per 100,000) or even the national average (1,179 RNs per 100,000).

   The effects of the nursing shortage are drastic. In hospitals with high patient-to-nurse ratios, nurses experience burnout and dissatisfaction that leads to resignation or retirement, further increasing the nursing shortage. Patients experience higher mortality rates and failure-to-rescue rates. The current nursing shortage exacerbates regional healthcare equity gaps, as hospitals across California are closing due to a lack of nurses and resources.

2. Is there a current need for nurses with BSN degrees in California?
   Yes, hospitals and healthcare facilities prefer to hire BSN graduates. Nationally, in 2023, the American Association of Colleges of Nursing surveyed 810 nursing schools and found that 25% of hospitals and other healthcare facilities are now requiring new hires to have a BSN, with 69.8% of healthcare employers expressing a strong preference for BSN graduates.

   In California, a 2021 Health Impact report found that 18% of California hospitals surveyed stated that a BSN was required for employment – twice the percentage noted in 2017 – and 54.3% reported a preference for hiring BSN’s. 31.5% of the AND-holding RNs surveyed stated that the lack of a BSN degree was given as the reason for their failure to be hired.

3. Are there any current targets for BSN degree attainment?
   Yes. In 2011, the Institute of Medicine recommended an 80% baccalaureate degree target for nurses by 2020. In April 2023, results from the 2022 National Nursing Workforce Survey showed that the percentage of Registered Nurses (RNs) who were licensed with an ADN was 35.6% (a 2.1% decrease from 2018). The percentage of RNs licensed with a BSN degree was 47.2% (a 5.4% increase from 2020). These national trends show that increasingly more employers are hiring nurses with BSN degrees, rather than ADNs.

   The California Board of Registered Nursing 2020 Survey of Registered Nurses (2023) demonstrated that 46% of RNs residing in California entered the profession with an associate degree, and 45.2% entered the profession with a bachelor’s degree. Of the 31.4% of ADNs that continued through the pipeline to complete a bachelor’s degree, it took, on average, 8 years to receive a BSN. In 2010, 40.9% of RNs residing in California had earned a BSN as their highest degree; in 2020, 53.6% of RNs
residing in California had earned a BSN as their highest degree, an increase of only 12.7% in 10 years.

4. **What is the current demand for BSN degrees among students?**
   Nursing is an extremely high-demand degree in California. According to the 2021-2022 Annual Report released by the California Board of Registered Nursing (BRN), 74% of qualified applicants were not accepted into BSN programs.

**Quality of Programs**

1. **What metrics will be in place to ensure that programs are of the highest quality?**
   To qualify for the pilot program, the nursing program must have national accreditation. The national accreditation process, in addition to the California Board of Registered Nursing (BRN) review process, thoroughly ensures that programs are high quality.

2. **Will community college BSN programs compete with CSU BSN programs?**
   No. SB 895 aims to work in tandem with the CSU and the UC to educate the next generation of nurses. CSU nursing programs are impacted and have a very high student demand. When students are not admitted into a CSU nursing program, they turn to for-profit and private institutions. While this is a good solution for many students, it is an unnecessarily expensive option when the local community college could offer the program at a lower cost. Many capable students are also priced out of the option to attend a private university or are forced to incur tremendous amounts of debt. Those are the students that this bill intends to serve—students who may otherwise not seek baccalaureate degrees, including working adults, economically disadvantaged students, people of color, and place-bound students. SB 895 offers the opportunity to educate a more diverse healthcare workforce.

3. **Will this bill eliminate ADN programs or CCC-CSU partnerships?**
   No. This bill will not eliminate ADN programs or ADN/RN to BSN programs. ADN programs and ADN/RN to BSN programs play an essential role in the multi-pronged approach to addressing the nursing shortage.

4. **Will CCC BSN-holders be less prepared for the workforce, compared to other BSN holders?**
   No. Both ADN and BSN-prepared nurses take the same National Council Licensure Examination (NCLEX) to become licensed RNs. This exam tests the knowledge and skills necessary to practice safely and effectively as an entry-level nurse.

**Curriculum**

1. **Does this bill mandate a nursing curriculum?**
   No. There is currently no “standardized” nursing curriculum across higher education systems.

   Each college/university has the authority to structure its nursing programs and create campus-specific and major-specific graduation requirements. To receive approval from the Board of Registered Nursing (BRN), the curriculum must be consistent with certain nursing regulations for
prelicensure programs. It is up to the local colleges or universities to establish the best BSN curriculum that meets the demands of their communities. Currently, the UC, CSU, and private institutions all have different nursing curriculums. Community colleges will have the authority to craft their own curriculum.

2. **How many units of coursework will community college students be required to take to receive a BSN?**
The difference between an ADN and a BSN is around 30 units of major, upper-division courses. Community college students are still required to meet the 120-unit standard for the general baccalaureate degree.

3. **Will there be clinical placements?**
Community college nursing students conduct pre-licensure clinical work within the first two years of their nursing program. Students entering the last two years of the community college BSN would’ve already completed most of the required clinical work in their ADN program. Students would only be required to conduct post-licensure clinical work in Leadership and Community Health, which are structured as independent projects (perhaps in their workplace and in community settings) approved and monitored by the faculty.

4. **Are community colleges ready to offer the upper-division coursework required for the BSN?**
Yes. Community colleges are already offering upper-division coursework for existing baccalaureate degree programs. Colleges have experience in developing baccalaureate degree programs and will be well-equipped with the resources and support to begin developing BSN programs.

**Pilot Program Criteria**

1. **What criteria must districts meet to be eligible for this program?**
   1) Priority is given to districts in an underserved nursing area.
   2) The district must have a nationally accredited nursing program.
   3) The district must be chosen by the Chancellor, who must prioritize equitable access between the northern, central, and southern parts of the state.

2. **Why is the program limited to 15 districts?**
This bill is a pilot program and is only the first step towards addressing the state’s nursing shortage. Pilot programs offer a pragmatic, small-scale approach to new, system-wide changes. The original legislation which authorized community colleges to offer Baccalaureate Degrees (*Senate Bill 850, 2014*) was a pilot program for 15 districts, which was later evaluated and expanded into a full authorization.

3. **Why are cohort sizes limited?**
This bill limits the total number of participants in the program to 25% of a district’s Associate Degree in Nursing (ADN) class size, or 35 students, whichever is greater. Most community college ADN class sizes have around 25-35 students, which allows for the best quality of education and follows the current standard.
4. **How many students would be impacted through this program?**
   If all 35 seats were filled in each district, we expect around 500 students per year to be admitted into these BSN programs.

5. **This bill does not create many nurses if only 500 will be admitted.**
   The nursing pipeline needs as many people as they can get, even if it is 500. It may not seem like a large number statewide, but the addition of 35 new nurses for a local hospital would have significant impacts.

6. **How much is this program going to cost?**
   The limited number of districts and small student population makes this bill cost neutral. This bill also keeps costs down by using the existing ADN infrastructure. Given the state’s budget deficit, it is extremely vital for all new legislation to have a low-to-no cost impact on the state.

7. **Are there statutory limitations to the student fees charged for this program?**
   No. Education Code 78042(g) provides for a differentiated fee structure for community college baccalaureate degrees, limited to no higher than the fees charged for baccalaureate degree programs at CSU. **Education Code 78042 does not impact SB 895.** Even if it did, the statutory requirement creates a ceiling, not a floor, so CCC programs would be more affordable, or at maximum equal cost of CSU programs.

**Funding**

1. **What funding is available to support SB 895?**
   The Governor’s 2023-2024 Budget allocated $60 million per year for five years, starting in 2024-25, to grow, educate, and maintain the next generation of registered nurses through the community college system.

2. **Will financial aid be available to students in this program?**
   Community college students enrolled in baccalaureate degree programs are eligible for the Middle Class Scholarship (MCS) program. Each student’s award reflects their costs and available resources.

**Accreditation**

1. **How many community college ADN programs are currently nationally accredited?**
   There are currently 28 nationally accredited CCC ADN programs and 9 colleges with Candidate status.

2. **How long does it take to nationally accredit an ADN program?**
   Based on programs that were granted accreditation, the overall process can be completed in as little as 9 months or can take as long as 4 years. The nursing program leaders determine the timing of the Candidacy process as well as the required site visit.

3. **What is the current process ADN programs must go through to receive national accreditation?**
Community College ADN programs can be nationally accredited through the Accreditation Commission for Education in Nursing (ACEN). The process can be divided into three main portions: Eligibility, Candidacy, and Accreditation.

**Eligibility:** Eligibility is a process that affirms that a nursing program and its governing organization meet all ACEN requirements to be granted initial accreditation.

**Step 1. ACEN Consultation:** Nursing programs currently not accredited with the ACEN should contact an ACEN Director to begin the eligibility process.

**Step 2. Self-Examination and Evaluation:** The program should complete an in-depth self-study of the program in relation to the ACEN Standards and Criteria, ACEN policies, and required ACEN processes and timelines.

**Step 3. Application and Eligibility:** To initiate the eligibility process, the program should submit a Candidacy Eligibility Application (CEA). Once an applicant program and its governing organization are deemed eligible, the program will have up to one calendar year to begin the actual Candidacy process.

**Candidacy:** All programs seeking accreditation must first apply and be approved as a Candidate for ACEN accreditation.

**Step 1. Candidacy Presentation**
The Candidacy Presentation is written and submitted after the program receives written notification that it is eligible for ACEN accreditation.

**Step 2. Site Visit**
A program that has achieved Candidate status must schedule an initial accreditation visit within two calendar years from the date of becoming a Candidate program. Peer evaluators document their assessment and accreditation recommendation regarding the program’s compliance with the ACEN Standards and Criteria in the Site Visit Report.

**Step 3. Evaluation Review Panel**
A program-specific Evaluation Review Panel examines the reports written by and about the program (Self-Study Report and Site Visit Report), reaching their own judgment and accreditation recommendation regarding the program’s compliance with the ACEN Standards and Criteria.

**Accreditation**

**Step 1. ACEN Board of Commissioners**
The final step is a review of the candidacy process by the ACEN Board of Commissioners.

**Step 2. Continuing Accreditation**
A program is reviewed five years after initial accreditation is granted. Once continuing accreditation has been granted, the program is reviewed every eight years. In addition, a program is surveyed every year through an annual reporting process and could be reviewed periodically through the substantive change process.

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