

Date of Hearing: April 21, 2026

ASSEMBLY COMMITTEE ON HIGHER EDUCATION

Mike Fong, Chair

AB 2391 (Ahrens) – As Amended April 9, 2026

SUBJECT: Health care: workforce training programs

SUMMARY: Requires, upon appropriation by the Legislature, the Department of Health Care Access and Information (HCAI) to maintain a New Nursing Graduate Support and Placement (NNSP) Program to award program grants to community college associate degree of nursing (ADN) programs, through which support grants would be awarded to recent graduates for loan repayment assistance, relocation, transportation, housing assistance, childcare, and other financial support. Specifies grant eligibility criteria for community colleges and recent graduates, requires the department to consider labor standards of hospital sites that employ support grant applicants when determining grant distribution. Specifically, **this bill:**

- 1) Requires HCAI to maintain an NNSP Program to provide funding to community college associate degree of nursing programs to do all of the following:
 - a) Improve employment outcomes and provide support for recent graduates;
 - b) Ensure equitable access to the nursing profession and remove employment barriers for associate degree of nursing program graduates;
 - c) Increase the number of registered nurses (RN) to provide direct care to the people of California, especially in underserved areas and populations;
 - d) Facilitate post-licensure job placements in underserved areas for recent graduates in coordination with labor organizations that represent direct care RNs; and,
 - e) Provide support grants to recent graduates for loan repayment assistance, relocation, transportation, housing assistance, childcare, and other financial support as determined by HCAI to incentivize employment of recent graduates in underserved areas.
- 2) Authorizes HCAI to award NNSP Program grants to community college districts with associate degree of nursing programs pursuant to this section. Requires the grants to be used only for purposes of 1) above.
- 3) Requires, to qualify for program grants, a community college associate degree of nursing program to commit to implement a comprehensive program of post-licensure job placements and administration of support grants to recent graduates.
- 4) Requires HCAI, before awarding a grant, to develop both of the following:
 - a) Criteria for determining if hospital sites meet the RN workforce needs of the state's rural and underserved areas, in collaboration with community college associate degree of nursing programs; and,

- b) Structure for a program to provide support grants for recent graduates, including application criteria, prescribing the form and regulating the submission of applications, determining the eligibility of applicants, and awarding the support grants.
- 5) Requires, as a condition of receiving a NNSP Program grant, a community college district, in collaboration with community college associate degree of nursing programs, to, at a minimum, do all of the following:
- a) Partner with labor organizations representing direct care RNs to develop an outreach plan to prospective hospital sites based on labor standards described in 6) below;
 - b) Select hospital sites that best demonstrate the ability to provide workplaces with labor standards and to meet the needs of rural and underserved areas based on criteria developed pursuant to 4) above;
 - c) Enter into agreements with selected hospital sites for placing recent graduates;
 - d) Incentivize post-licensure employment in underserved areas by providing a renewable support grant to recent graduates;
 - e) Facilitate post-licensure employment by holding at least two on-campus events per academic year at which selected hospital sites may conduct interviews of recent graduates; and,
 - f) Report to the Chancellor's Office on a date determined by the office of the Chancellor of the California Community Colleges (CCC) all of the following data for each academic year:
 - i) The number of recent graduates who secured post-licensure employment through their clinical placements;
 - ii) The number of recent graduates who secured post-licensure employment through the job placement program and not through their clinical placements; and,
 - iii) The number of recent graduates who did not secure employment post-licensure through either their clinical placements or the job placement program.
- 6) Requires HCAI, for the purposes of determining grant distribution pursuant to this bill, to consider all of the following labor standards of hospital sites that employ support grant applicants:
- a) If the hospital site's RNs are represented by a labor organization;
 - b) If the hospital site provides fair compensation to RNs, which may be measured by using wage estimates for RNs as produced by the Occupational Employment and Wage Statistics program under the Employment Development Department;
 - c) If the hospital site provides strong retention practices; and,
 - d) If the hospital site does not use restrictive employment terms, including sign-on bonuses that require repayment if employment ends before the contract term.

- 7) Requires an applicant, to qualify for a support grant pursuant to this bill, to be either be currently enrolled and in the last semester of a community college associate degree of nursing program or have graduated from a community college associate degree of nursing program within the past three years.
- 8) Authorizes a support grant recipient to use the grant for purposes that include housing assistance, childcare, transportation, or relocation.
- 9) Requires HCAI, if the number of qualified applicants in a year exceeds the number of support grants to be awarded, in consultation with community college district with associate degree of nursing programs, to consider the following factors in granting priority when awarding support grants:
 - a) Financial need, as shown on a standardized financial needs assessment used by community college associate degree of nursing programs;
 - b) Life experiences or special circumstances, including, but not limited to low family income, the need to work, and difficult personal and family situations or circumstances; and,
 - c) Living in an underserved area.
- 10) States that it is the intent of the Legislature to support and strengthen existing programs that train registered nurses under this article, and to ensure that these programs are appropriately supported to meet the state's nursing workforce needs, including in rural and medically underserved communities.
- 11) Defines the following for purposes of this bill:
 - a) "Program" means the NNSP Program.
 - b) "Program development" to include activities related to collaborations between the office of the Chancellor of the CCC and HCAI.
 - c) "Recent graduate" to mean an individual who is either of the following:
 - i) Currently enrolled and in the last semester of a community college associate degree of nursing program; or,
 - ii) Graduated from a community college associate degree of nursing program within the past three years.
 - d) "Support grant" to mean a grant that is direct gift aid to recent graduates.
 - e) "Underserved area" to mean an area with high need for RNs and allows the definition to include medically underserved areas as designated by the federal Health Resources and Services Administration, rural areas, areas with high number of Medi-Cal patients, or an underserved area as designated by HCAI.

EXISTING LAW:

- 1) Establishes HCAI to, among other functions, collect, analyze, and publish data about healthcare workforce and health professional training, identify areas of health workforce shortages, and provide scholarships, loan repayments, and grants to students, graduates, and institutions providing direct patient care in areas of unmet need. (Health and Safety Code (HSC) Section 127000 and Section 127825, *et seq.*)
- 2) Establishes the Song-Brown Health Care Workforce Training Act to increase the supply of family physicians, primary care physician's assistants, and primary care nurse practitioners and nurses to provide needed medical services to the people of California. (HSC Section 128200)
- 3) Defines the following for purposes of 2) above:
 - a) "Family physician" to mean a primary care physician and surgeon who is prepared to and renders continued comprehensive and preventative health care services to individuals and families and who has received specialized training in an approved family medicine residency for three years after graduation from an accredited medical school;
 - b) "Primary care physician" to mean a physician who is prepared to and renders continued comprehensive and preventative health care services, and has received specialized training in the areas of internal medicine, obstetrics and gynecology, or pediatrics;
 - c) "Graduate medical education" to mean residency programs for education or training in one or more specialties or subspecialties following graduation from medical school;
 - d) "Health professions education and training" to mean any formal organized education or training undertaken for the purpose of gaining knowledge and skills necessary to practice a specific health profession or to provide a role in a health care setting. Health professions education and training includes any type of health professions training program, including shadowing programs, participating in rotations, affiliation agreements, and accredited or accreditation-eligible programs, at any educational level, including certificate, undergraduate, graduate, professional, or postgraduate, and in any clinical discipline, excluding graduate medical education;
 - e) "Programs that train postgraduate primary care physician's assistants" to mean a program that provides postgraduate fellowships for clinical training in primary care. Programs shall be affiliated with a community-based ambulatory patient care center within underserved communities;
 - f) "Programs that train primary care physician's assistants" to mean a program that has been approved for the training of primary care physician assistants;
 - g) "Programs that train postgraduate primary care nurse practitioners" to mean a program that provides postgraduate fellowships for clinical training in primary care. Requires programs to be affiliated with a community-based ambulatory patient care center within underserved communities;

- h) “Programs that train primary care nurse practitioners” to mean a program that is operated by a California school of medicine or nursing, or that is authorized by the Regents of the University of California (UC) or by the Trustees of the California State University (CSU), or that is approved by the Board of Registered Nursing;
 - i) “Programs that train registered nurses” to means a program that is operated by a California school of nursing and approved by the Board of Registered Nursing, or that is authorized by the Regents of the UC, the Trustees of the CSU, or the Board of Governors of the California Community Colleges (CCC), and that is approved by the Board of Registered Nursing;
 - j) “Programs that train midwives” to mean program that train certified nurse-midwives and programs that train licensed midwives;
 - k) “Teaching health center” to mean a community-based ambulatory patient care center that operates a primary care residency program. Community-based ambulatory patient care settings include, but are not limited to, federally qualified health centers, community mental health centers, rural health clinics, health centers operated by the Indian Health Service, an Indian tribe or tribal organization, or an urban Indian organization, and entities receiving funds under Title X of the federal Public Health Service Act, (Public Law 91-572). (HSC Section 128205)
- 4) Authorizes the Board of Governors of the CCC to award grants to community college districts with associate degree nursing programs to expand enrollment, reduce program attrition, or both. Requires funds to be used only for purposes of expanding enrollment, providing diagnostic assessments, and offering pre-entry coursework to prospective nursing students and diagnostic assessments and supportive services to enrolled nursing students. Defines supportive services to include, but not be limited to, tutoring, case management, mentoring, and counseling services. Authorizes funds to also be used to develop alternative delivery models such as part-time, evening, weekend, and summer program offerings. Requires, to qualify for these funds, a community college associate degree nursing program to do either of the following:
- a) Have a program attrition rate, as determined by the Board of Registered Nursing’s Annual School Report or the Information Program Data System of the chancellor’s office, of 15% or less for the year before application for funding; or,
 - b) Commit to implement a comprehensive program of diagnostic assessment, pre-nursing enrollment preparation, and program-based support to enrolled students. (Education Code Section 78261, *et seq.*)

FISCAL EFFECT: Unknown.

COMMENTS: *Double referral.* This measure was heard by the Assembly Committee on Health on April 8, 2026, and passed with a 16-0 vote.

Purpose. According to the author, “AB 2391 strengthens California’s nursing workforce by addressing a critical gap between education and employment and helping ensure that newly licensed nurses can serve the communities that need them most. As a community college graduate and former Trustee on the Foothill-De Anza Community College District Board, I have

seen firsthand how California Community Colleges create accessible pathways to stable, well-paying careers. For many economically disadvantaged individuals, community college can be the only feasible option for attaining a degree.”

The author continues that “Community college nursing programs train nearly half of California’s new nurses each year. Yet many of these graduates face barriers to securing employment, even as hospitals in rural and medically underserved communities struggle to recruit and retain nurses. This is not a shortage of nurses. It is a challenge of workforce transition and distribution. AB 2391 addresses this gap by supporting job placement and providing financial support to overcome barriers such as relocation, housing, and childcare, helping connect new nurses to available positions in rural and medically underserved regions. By strengthening the pathway from community college nursing education to community care, this bill expands economic opportunity, supports a diverse workforce, and helps ensure communities across California have the nurses needed to provide safe patient care.”

Background. RNs play a crucial role in healthcare by providing patient care, education, and support across various medical settings. RNs assess patient health, monitor vital signs, and provide direct care to patients who are ill, injured, or recovering. They administer medications, perform medical procedures, and assist with daily living activities. RNs collaborate with physicians and other healthcare professionals to develop and implement patient care plans. They ensure that all aspects of a patient's care are coordinated effectively. RNs educate patients and their families about health conditions, treatment options, and preventive care. They help patients understand their diagnoses and manage their health effectively. RNs maintain detailed records of patients' medical histories, treatment plans, and progress. RNs act as advocates for their patients, ensuring that their needs and preferences are respected in the healthcare process. They help patients navigate the healthcare system and provide support during often difficult times.

Nursing Degrees. An Associate Degree in Nursing (ADN) is a two-year undergraduate program offered at community colleges and vocational schools. It provides foundational nursing knowledge and hands-on clinical experience, focusing on patient care, communication, critical thinking, and decision-making skills. Graduates of an ADN program are eligible to take the NCLEX-RN exam to become licensed as an RN and begin working in healthcare settings. ADN programs are generally more affordable and allow quicker entry into the workforce compared to a Bachelor of Science in Nursing (BSN). An RN is a licensed healthcare professional who has completed an approved nursing program (ADN, BSN, or RN diploma) and passed the NCLEX-RN exam. The RN designation refers to the professional status, not the degree itself. RNs provide direct patient care, administer medications, educate patients and families, and collaborate with other healthcare professionals.

History of the Song-Brown Program. The Song-Brown Program, housed in HCAI, funds institutions that train primary care health professionals to provide healthcare in California’s Medically Underserved Areas. Competitive proposals demonstrate a commitment to Song-Brown goals and demonstrated success in meeting the three statutory priorities: i) attracting and admitting underrepresented groups in medicine and those from underserved communities; ii) training students in underserved areas; and, iii) placing graduates in underserved areas. Currently accredited family practice residency programs, physician assistant/family nurse practitioner programs, and registered nurse programs can apply for funding.

According to a 2019 California Health Care Foundation brief, the Song-Brown Program was established in 1973 with the passage of the Song-Brown Family Physician Training Act (sponsored by Senator Alfred Song and Assemblymember Willie L. Brown Jr.) in the wake of the creation of the new board-certified specialty of family practice, designed to train physicians to provide high-quality primary care. In 2014, the range of physician primary care residency programs eligible to apply for Song-Brown funding was permanently expanded to include family medicine, internal medicine, obstetrics/gynecology, and pediatrics. Physician assistant (PA) programs have also been eligible to apply for Song-Brown funds since its inception, while family nurse practitioner (FNP) programs were added in 1977 and RN programs were added in 2005. As of 2019, roughly 87% of the funding went toward primary care residency programs, while the remaining 13% of funds were split between the FNP/PA and RN programs.

Song-Brown RN specific funding. The Song-Brown program also provides funding to support RN education in California. Eligible programs may receive \$15,000 per filled first-year student slot, up to \$900,000 for existing slots; up to \$30,000 per filled first-year student slot, up to \$600,000 for expansion slots; and, grants up to \$1,000,000 for establishing new RN programs. In total, the program has awarded a total of \$16.9 million to expand nursing education across California. These funds are aimed at addressing healthcare disparities and increasing access to quality nursing education in underserved areas.

RN workforce. According to the 2021-2022 California Board of Registered Nursing Annual School Report, ADN programs produce a large share of newly licensed RNs each year, however, California has a large number of licensed nurses relative to those actively working. California licenses more than 560,000 registered nurses with only about 326,000 actively working in nursing roles. The 2025 HCAI data visualization, “Supply and Demand Modeling for California’s Nursing Workforce” notes that in 2025, 50 counties are projected to face a shortage of one or more nursing role groups, with the highest shortages in the Northern & Sierra, Central Coast, and Los Angeles County regions, as defined by the California Health Interview Survey (CHIS). The projected statewide shortage of Registered Nurses for 2025 is low at just over -6%, with an estimated need for 18,793 additional providers to meet forecasted demand. Certain CHIS regions, like Northern & Sierra, face a projected shortage of more than 25%, while the Sacramento Area faces a projected surplus of nearly 11%, indicating a maldistribution of providers within the state. By 2033, it is projected that 50 counties will face a -5% shortage or more of Registered Nurses. The overall statewide shortage will increase to just under -17%, resulting in a need for 61,141 additional providers to meet future demand. As noted by the author, one of the stated goals of this bill is to address this challenge of workforce distribution by supporting job placement and providing financial support to overcome barriers such as relocation, housing, and childcare, helping connect new nurses to available positions in rural and medically underserved regions.

Arguments in support. According to the California Nurses Association (CNA), “California currently lacks a coordinated workforce strategy to support newly licensed RNs as they enter the profession and to address persistent staffing challenges in rural and underserved regions. While the state has made significant investments in nursing education and training, these efforts are largely concentrated on pre-licensure programs and do not address the barriers new nurses face when transitioning into the workforce. As a result, many newly licensed nurses struggle to secure employment, even as hospitals in rural and medically underserved communities face ongoing challenges recruiting and retaining sufficient staff to provide safe patient care.”

CNA continues, noting that “California’s community colleges operate 77 ADN programs that train nearly half of all newly licensed RNs each year and provide an accessible and affordable pathway into the profession, particularly for students from low-income, rural, and underrepresented communities. The state has invested significantly in expanding this pipeline through programs such as the California Community Colleges Nursing Enrollment Growth and Retention Program, which has produced strong outcomes, including high student retention, program completion, and first-time licensure pass rates. These investments demonstrate that California can successfully prepare a qualified nursing workforce. However, the state’s investments are largely concentrated on education and training and do not address the transition from graduation to employment.”

Prior legislation. AB 2529 (Davies) of 2022 would have added programs that train certified nurse-midwives (CNMs) and licensed midwives (LMs) to the list of programs eligible to contract with the state under Song-Brown. AB 2529 was not heard in the Senate Appropriations Committee.

AB 921 (Bonta) of 2023 would have required HCAI to establish a mentorship program to connect eligible students enrolled in a relevant undergraduate program or in an HCAI-approved behavioral health certification program with concrete resources and mentorship that will convert the educational experience to sustained employment. AB 921 was held in the Assembly Appropriations Committee.

REGISTERED SUPPORT / OPPOSITION:

Support

California Nurses Association

Opposition

None on file.

Analysis Prepared by: Kevin J. Powers / HIGHER ED. / (916) 319-3960