

# Crosscutting: Education, Training Access, Capacity and Support Action Plan

Broad Strategy: Education and training access, capacity, and support					
Baseline:					
Objective	Activities	Anticipated Outcome	Timeline	Lead and Resources	Evaluation Method
Determine, preserve, and restore funding for California's public education institutions (K-12, Community Colleges, CSU, and UC) that provide workforce preparation and education programs to meet health workforce requirements.	<ol style="list-style-type: none"> <li>Educate industry partners on the specific budget and funding issues so they can engage in advocacy in support of the educational institutions.</li> <li>Develop action plan for education and advocacy of key legislators.</li> </ol>	<ol style="list-style-type: none"> <li>Industry partners implementation of advocacy plan.</li> </ol>	<ol style="list-style-type: none"> <li>Begin process summer 2012.</li> </ol>	<ol style="list-style-type: none"> <li>Industry partners with established legislative advocacy programs.</li> </ol>	
Partnerships needed to strengthen course alignment and articulation across K-12, community college, CSU, and UC educational institutions for health career pathways.	<ol style="list-style-type: none"> <li>Support and participate in the Course Identification Numbering System (C-ID) process</li> <li>Support the development of the statewide nursing curriculum model based on the C-IDs for nursing and the work of the Faculty Discipline Review Group (FDRG)</li> <li>Support the implementation of the AB 1295 nursing collaboratives for ADN to BSN and MSN pathways.</li> <li>Recommendation 1 Improving Health Professions Pathways and Best Practices – CSU – Establish a CSU-HPEI (Health Professions Education Institutions) Joint Health Sciences Committee, or</li> </ol>	<ol style="list-style-type: none"> <li>Completion of C-ID process for ADN and BSN courses.</li> <li>Completion of articulated Statewide Nursing Curriculum ADN to BSN.</li> <li>Completion of articulation pathways in other key allied health programs in collaboration with other stakeholders (ie Health Laboratory Workforce Initiative (HLWI).)</li> </ol>	<ol style="list-style-type: none"> <li>December 2012</li> <li>Spring 2013</li> <li>Collaboration with HLWI to being Summer 2012.</li> <li>ADN to BSN Collaboratives are on-going.</li> </ol>	<ol style="list-style-type: none"> <li>Academic Senates – CSU and CA Community College.</li> <li>Jane Patton – Lead with Academic Senates – CSU and CA Community College.</li> <li>CHA, HLWI, CSU, and CCCCO.</li> <li>ADN and BSN program directors.</li> </ol>	

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	<p>become a full and active participant in an existing one.</p> <p>5. Participate in alignment of curriculum, courses and activities in health careers pathways with education institutions.</p>	<p>4. Continuation of currently funded ADN to BSN Collaboratives</p> <p>5. Improved program articulation and student preparation and success in pathway programs.</p>		
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**Broad Strategy: Education and training access, capacity, and support**

**Baseline:**

Objective	Activities	Anticipated Outcome	Timeline	Lead and Resources	Evaluation Method
Strengthen academic and career counseling and advising at all educational levels.	<ol style="list-style-type: none"> <li>1. Recommendation 2.2 Student Success Task Force – Require all incoming community college students to 1) participate in diagnostic assessment and orientation and 2) develop an education plan.</li> <li>2. Recommendation 2.3 Student Success Task Force – Community colleges will</li> </ol>	<ol style="list-style-type: none"> <li>1. Legislation required to make activities 1-3 a system wide requirement for all community college students and all programs.</li> </ol>	<ol style="list-style-type: none"> <li>1. Based on legislation – EC 78211.5 and EC 78212.</li> <li>2. As budget allows, expand health professions advisors networking opportunities, knowledge, resources.</li> </ol>	<ol style="list-style-type: none"> <li>1. CCCCCO Governmental Affairs.</li> <li>2. HPEI admissions offices (lead).</li> </ol>	

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	<p>develop and use centralized and integrated technology, which can be accessed through campus or district web portals, to better guide students in their educational process.</p> <p>3. Recommendation 6.1 Student Success Task Force – Community colleges will create a continuum of strategic professional development opportunities for all faculty and staff and administrators to be better prepared to respond to the evolving needs and measures of student success.</p> <p>4. Recommendation 3 Improving Health Professions Pathways and Best Practices – CSU – Create better communications pathways among all health professions advisors so that students seeking careers in health are provided with more seamless and comprehensive advising with respect to health career options. Where possible, a health career advisor should be appointed at each CSU campus, community college and high school.</p> <p>5. CA health professional schools should assume a leadership role in improving the quality and consistency of pre-health advising (e.g., informational materials should be developed by HPEIs and provided to advisors to ensure that reliable</p>	<p>5. Pre-health advising programs will be strengthened through partnerships with HPEIs and shared best practices.</p>			
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	<p>information is available about health professional education, the admissions process, and the range of resources available to students; host annual conferences for pre-health advisors - emphasis on CCC/CSU advisors; and improved partnerships with undergraduate advisors at their own campuses).</p>				
<p>Increase training and teaching opportunities in community and primary care settings, including increasing the availability of clinical sites, community rotations, and expansion of the number of teaching health centers in California.</p>	<ol style="list-style-type: none"> <li>1. Explore central repository (regional or statewide) for primary care clinical sites, including ability to contract centrally.</li> <li>2. Community clinics should become eligible to apply for federal funding to expand or become teaching health centers or nurse-managed health centers .</li> </ol>	<ol style="list-style-type: none"> <li>1. Process and organization identified.</li> <li>2. Enhanced teaching quality and training capacity for primary care providers, particularly those that wish to work in underserved communities.</li> </ol>	<ol style="list-style-type: none"> <li>1. Fall 2012.</li> <li>2. Present-2014.</li> </ol>	<p>1 and 2. CPCA, CA nursing schools, and other non-profit health or social services agencies.</p>	