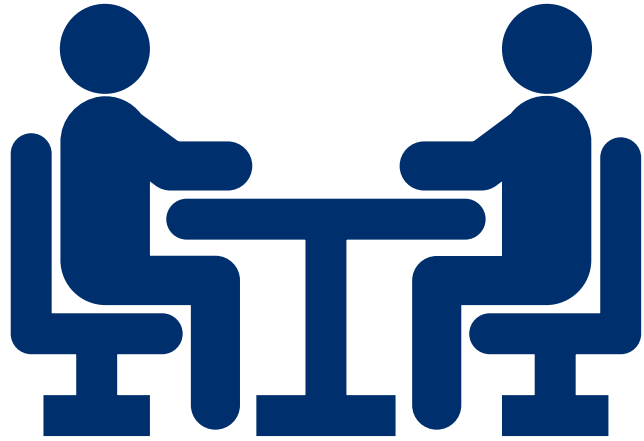# SB1348 Reporting Portal Webinar

Presenters:

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- Statewide Director, Health Workforce Initiative

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- Specialist, California Community Colleges Chancellor's Office, Workforce and Economic Development Division

California Community Colleges

Housekeeping

- Please place yourself on mute until the end
- Questions will be answered at the end of the webinar
- Please post all questions in the chat forum
- This webinar will be recorded and posted on the site for future review
- An FAQ page will be provided as will this presentation for future review

SB-1348: Postsecondary education: allied health professional clinical programs: reporting compliance

- September 2018, the California State Legislature passed SB-1348, which requires the California Community College Chancellor's Office to report additional information about clinical placements at degree and certificate programs in allied health.
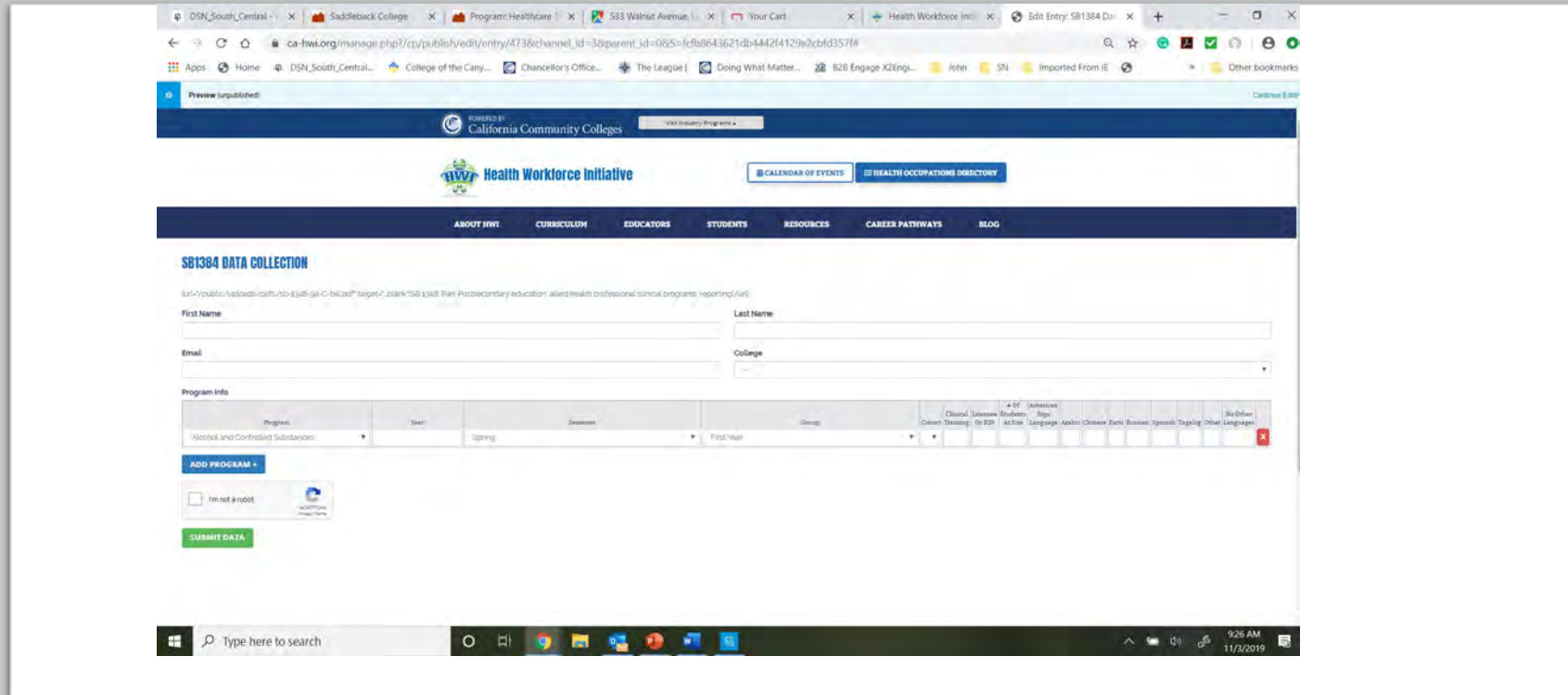
SB-1348: Postsecondary education reporting compliance

- The reporting requirements will begin with seven programs in 2019-2020, impacting 134 individual programs at 80 individual community colleges across the state

- Nine additional programs will be added to the reporting requirement in 2020-21

- All remaining allied health programs added in 2021-2022

Starting Academic Year 2019-2020	Starting Academic Year 2020-2021	Starting AY 2021-2022
(A) Licensed Vocational Nurse (B) Medical Assistant (C) Occupational Therapy Aide (D) Radiologic Technologist (E) Respiratory Care Therapist (F) Pharmacy Technician & Technologist (G) Surgical Technician & Technologist	(A) Cardiovascular Technologist (B) Certified Nurse Assistant (C) Dialysis Technician (D) Diagnostic Medical Sonographer (E) Medical Lab Technician (F) Orthopedic Assistant (G) Physical Therapy Aide & Assistant (H) Psychiatric Technologist (I) Radiologic Therapist (J) Speech-Language Pathology Aide	All Allied Health Programs (other than RN)

Website and link

https://ca-hwi.org/sb1348/

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Q & A

Frequently asked questions:

- In reference to the languages spoken by the students how is this determined and what was the foundation for those language chosen.
  - Languages were selected from previous legislation that the CCCCO is required to report. In order to sustain continuity we have chosen to align with those chose languages.
  - Language proficiency are based on the student's response and ability to communicate in the foreign language other than English

Frequently asked questions:

- What are the totals requested of languages? Please explain
  - The total at the end is the number of total languages spoken by the students in that cohort.
  - If a student speaks more than two languages, then you can count both those languages other than English.
  - The total will not equal the amount of students in the cohort.

Frequently asked questions:

- Regarding language, do we count students who speak another language or only those who use that language in their clinical placement?
  - Yes, if a student speaks more than one other language, other than English you will count.
  - E.g. student A speaks Chinese and French that student will be accounted for two languages spoken

Frequently asked questions:

- Do you know how other schools plan on collecting the information about the students' language after assigned to the specific clinical site, and yet maintain confidentiality/anonymity and not have students think they were assigned to the site based on their language?
  - Language are not tied to students in any way. There are no FERPA rules broken as anonymity is maintained.
  - Programs can solicit information by survey, application, or other means that does not identify the student directly in the data collection.
  - Language and site have no bearing on the clinical placements.

Frequently asked questions:

- What are the dates of the data collection and when do we need to report to the online system?
  - There is no "reporting" deadline.
  - We ask that you input information by the 4th week of the semester.
  - Programs that do not place in clinical until after the fourth week can place upon the first days of the clinical rotations.
  - ALL data must be entered by the end of the academic year for download to the CCCCO for reporting.

Frequently asked questions:

- Our programs does not have "required" clinical placements for students, do we still need to report the data?
  - Only if your program has any type of clinical component attached. This includes work experience courses or stand-alone clinical courses that are optional.

Frequently asked questions:

- I do not see EMT, Paramedic, or RNs on this list. Please confirm that these programs are not affected by this requirement. I understand that CNA is required in phase 2.
  - EMT and any other Allied Health program will be required to report in the third year.
  - RN programs are currently excluded from this data collection as programs are already reporting data to the CCCCO via the nursing enrollment growth grants and the Board of Nursing required data collection and reporting.
  - Any and all Allied Health programs must be reported in year three of this legislation.

Section 295p of Title 42 of the United States Code

- **(5)**The term "allied health professionals" means a health professional (other than a registered nurse or physician assistant)— **(A)**who has received a certificate, an associate's degree, a bachelor's degree, a master's degree, a doctoral degree, or postbaccalaureate training, in a science relating to health care;

- **(B)**who shares in the responsibility for the delivery of health care services or related services, including—**(i)**services relating to the identification, evaluation, and prevention of disease and disorders;

- **(ii)**dietary and nutrition services;

- **(iii)**health promotion services;

- **(iv)**rehabilitation services; or

- **(v)**health systems management services; and

- **(C)**who has not received a degree of doctor of medicine, a degree of doctor of osteopathy, a degree of doctor of dentistry or an equivalent degree, a degree of doctor of veterinary medicine or an equivalent degree, a degree of doctor of optometry or an equivalent degree, a degree of doctor of podiatric medicine or an equivalent degree, a degree of bachelor of science in pharmacy or an equivalent degree, a degree of doctor of pharmacy or an equivalent degree, a graduate degree in public health or an equivalent degree, a degree of doctor of chiropractic or an equivalent degree, a graduate degree in health administration or an equivalent degree, a doctoral degree in clinical psychology or an equivalent degree, or a degree in social work or an equivalent degree or a degree in counseling or an equivalent degree.

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Frequently asked questions:

- I oversee districtwide compliance for our clinical site agreements for both college and Continuing Education, what information should I provide the sites for data collection.
  - The SB 1348 bill language is found on the site, you can provide copies or links to the language and requirement for reporting.
  - It is recommended as you renew or develop new clinical affiliate agreements that you add a section for the site to provide the license number or the EIN number for your records and reporting.

Frequently asked questions:

- Do noncredit programs need to report information?
  - Any program that aligned with a CC and have clinical rotations affiliated with the program will need to report.

Frequently asked questions:

- Does a program have to report if the clinical is not a required part of the credential/degree program?
  - If the program has clinical attached such as work experience, preceptorship, internship, then yes you will need to report regardless if this is required for the credential or degree.

Frequently asked questions:

- Our MA program is not accredited with AAMA/CAMA and only has an elective Work Experience course for students. Generally, we have about 20/semester in the Work Experience course but well over 300-400 in the MA program between all the courses. Does MA need to report regarding their 20/semester?
  - Yes, all programs regardless if the clinical is required or not will need to report.

Frequently asked questions:

- If a student speaks more than one language, do we indicate all of the languages? If so, the numbers won't equal the number of students at a site and how many languages are spoken.
  - Yes, indicate all languages spoken by any and all students in the cohort reported.
  - That is correct the number of students in a cohort will not match the number of langugages.

Frequently asked questions:

- Do you know why what languages the students speak is included in the requirement? It would help to be able to let students know why they have to disclose what languages they speak.
  - Per the legislation, the requirement is that "the number of students participating at each clinical training site. This shall include information about proficiency in languages other than English."

Frequently asked questions:

- If a student is at more than one site in a semester, do all sites have to be included or only the primary one? It's conceivable a student could be at 5-10 different sites if community health is involved. Listing all of the sites each student is at could result in an inflated number of students.
  - Only record the primary site for the student.
  - At the time of inputting the data, all students should be included in the data with one (primary) site as contact.

Frequently asked questions:

- When and to whom do we report? Will we receive notification with a deadline and address to send the fall 2019 report ? I looked on the HWI website and do not see anything there on this.
  - The only need for the colleges (districts) is to input the data into the portal.
  - HWI will provide the data to the CCCCO for reporting purposes.
  - Reports are due at the end of each fiscal year.

Frequently asked questions:

- What is question #1 username? Would that be my name?
  - Every college should choose one person and the point of contact. This person may or may not be the one that inputs the data.
  - We just want one point of contact if the need to request further clarification of the data.

Frequently asked questions:

- Regarding the number of students placed in a facility – we rotate halfway through the semester. If I student goes to site A the first nine weeks of the semester, and then rotates to site B for the second nine weeks, do we count them at both facilities?
  - You will report the primary site of contact for the first rotation only.

Frequently asked questions:

- Do you know how to obtain the license/EIN number of, say, a hospital or jail or SNF? I imagine if students are with a specific doctor for their clinical, like MA's work experience, we could ask that person. But, do we ask the facility or is there a website or something to go to for numbers?

  - There is no public record of EINs for private companies. If the business is a sole proprietor with no employees, they can just use their Social Security number as their Tax ID number (TIN). If the company is publicly traded and registered with the Securities and Exchange Commission (SEC), you can use the SEC's EDGAR system to look up a company's EIN for free. If it is a non-profit or tax exempt entity, you can do a search at the IRS Tax Exempt Organization Search site at https://www.irs.gov/charities-non-profits/tax-exempt-organization-search. There may also be other third party companies that you can pay to subscribe to do the search.

  - One of the recommendations is that as you update your clinical affiliate agreements to include those sites EINs (or facility license number) on these agreements, and will give you the information from sites that required for collection

Frequently asked questions:

- Is it correct that only Occupational Therapy Aide programs have to report this data in 19-20 and Occupational Therapy Assistant will not report until 21-22?
  - Per the written legislation that is correct. The initial intent was to have both aide and assistant, however this is the approved legislation.
  - Be prepared for the OT Assistant to be input in 21-22

Frequently asked questions:

- Should our institutions identify the primary contact person/position for this data entry requirement to avoid duplication and confusion?
  - Yes, each institution should identify the primary contact for the data.

Frequently asked questions:

- What is "other" in the final column? For instance, the state regulation does not define Paramedic as Allied Health professional, and yet the AMA distinctly defines paramedic as Allied health professional. Will Paramedic be an "other"?
  - Please review slide 17

Audio Transcript of the webinar

- Will be posted on the HWI website at
  https://cccconfer.zoom.us/rec/share/XhJlWpVniWlOAqXsKt1V7fdQkRJa9Yjphfp2AQcSQR6FBT0v2sCrlCYZClUIw4-Y.37P3wxyYaiwwKJH-

- CA-HWI.org

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