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February 20, 2023

The Honorable Rob Nosse, Chair House Committee on Behavioral Health & Health Care

RE: Support for HB 2408, Enhanced Nurse Licensure Compact

Delivered electronically via OLIS

Chair Nosse, Members of the Committee,

Salem Health Hospitals & Clinics is a non-profit organization with facilities that include Salem Hospital, West Valley Hospital in Dallas, and Salem Health Medical Group primary and specialty clinics spread throughout the mid-Willamette Valley. Salem Health serves patients in Marion and Polk, as well as Benton, Lincoln, and Yamhill counties with acute care, urgent care, primary, and specialty care.

These are challenging times for Oregon's health care system, in part because of a labor shortage impacting our state along with the rest of the nation. Last year Salem Health hired over 1,000 staff, yet we began 2023 with over 600 openings. Many of those jobs are for nurses. We continue to depend on travelers to protect our staff and ensure that the communities we serve have access to care, but this is not sustainable over the long term. We are laser focused on recruiting permanent nursing staff.

With passage of HB 2408, Oregon would join 39 other jurisdictions that are already part of the Enhanced Nurse Licensure Compact (eNLC). The eNLC is similar to the Driver's License Compact administered by the American Association of Motor Vehicle Administrators. Under the eNLC, a nurse who resides in a compact state can apply for a multistate license in their primary state of residence (Residents of non-compact states are not eligible for a multistate license). State boards of nursing still offer single-state licensure, even if they belong to the compact.

Oregon does not have enough nursing school capacity to meet the present or future needs of our continuum care. For years, our state has depended on importing nurses from other states. Oregon has consistently paid higher nurse salaries than other compact states (Idaho is the nearest compact state), so we are in a good position to attract nurses with multistate licenses under the eNLC.

In past years, opponents maintained that the compact would change the high standard for nursing in Oregon. It will not. All RNs must pass the same test; and the eNLC requires nurses to abide by the practice act in the state where the patient is located.



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Concerns over the potential loss of revenue to boards of nursing have been raised in other states. However, the Pennsylvania State Nurses Association said, "In 2015, the NLC was amended to include safeguards like mandatory FBI and State Police background checks and fingerprinting. Additionally, there are standard licensure requirements among NLC states, ensuring that nurses at the bedside will follow the same licensing guidelines. PSNA's Government Relations Committee surveyed 15 state affiliates of the American Nurses Association (ANA) on their nurses' experiences with the NLC. The results of the survey were overwhelmingly positive. Reservations initially expressed by some groups, such as significant lost revenue to the State Board of Nursing or public safety concerns, have not materialized."

The Wisconsin Nurses Association noted, "The current multistate licensure for nurses has served Wisconsin well, maintaining public protections at the state level while removing barriers to cross-state border practice."

The compact is not a silver bullet that will solve the nursing workforce problem in Oregon in one fell swoop. However, we agree with the nurses associations in Pennsylvania, Wisconsin and other states that have publicly supported adoption of the eNLC. We ask for your support of eNLC adoption for Oregon.

Respectfully,

Barbara Merrifield, MSN, RN, NE-BC

Director of Clinical Practice Support and Magnet