

I am a practicing RN and hold licenses in both Oregon and Washington. Throughout my nursing career I've practiced in a variety of roles, including but not limited to Retired COL in the USAR; Former Chief Nursing Officer, nurse educator, and a variety of clinical specialty roles. My broad nursing experience, particularly the years as a Nurse Manager, Supervisor and CNO exposed me to OSBN licensure, practice requirements, staffing challenges, workforce data (OCN), etc. During my years in administration, I was familiar with the efforts of the NLC to have Oregon join the compact and based on the information I received I was in opposition.

Given the introduction of HB 2408 I reviewed recent information from several sources, including, but not limited to the NLC website, Oregon Center for Nursing, position statement of ONA, and the letter written to the NLC signed by Nurse Leaders of non-compact states posted in the Fall 2020 issue of The Washington Nurse. Many of the concerns with the NLC at the time I was actively working in administration appear to remain.

Several areas that remain a concern include: difficulty in obtaining accurate registration and workforce data information. As listed on the Oregon Center for Nursing (OCN) website, OCN conducts, analyzes, and distributes accurate, unbiased, and relevant information on Oregon's nursing landscape. OCN has access to historical data sets and a deep understanding of nursing workforce data and collection methods. Capturing this data is possible in large part as a result of our state licensing. Workforce data is critical to understanding the current and future nursing workforce requirements for Oregon. Will this robust data and workforce data be possible with the NLC?

According to information reviewed, standards for entry into practice and renewal of licensure are similar between compact and non-compact states. However, it appears that the compact removes the right of a state to improve them (standards of practice) in the future. In addition, a RN practicing on a multistate license is exempt from complying with the selected "state practice laws", e.g., practice hours to hold a license and/or relicensing requirements of the state they are working in (unless it is considered their Primary State of Residence).

Staffing issues, travelers, ease of obtaining a license, emergency declarations, etc. are beyond the scope of my testimony.

I ask that you reject this proposal.