



Support for HB 3324

March 29, 2023

To: Chair Nosse, Vice Chairs Goodwin and Nelson, and Members of the House Committee on Behavioral Health and Health Care

From: Paige Spence, Director of Government Relations, Oregon Nurses Association

Re: Support for HB 3324, Incentives for nursing school faculty and staff

Dear Chair Nosse, Vice Chairs, and committee members:

Thank you for the opportunity to provide testimony for HB 3324 on behalf of the Oregon Nurses Association (ONA). The Oregon Nurses Association is a nurses union and professional association representing over 15,000 health care workers and providers, including registered nurses, advanced practice nurses, and allied health workers. Our members work in urban and rural hospitals, clinics, school-based health centers, home health care, and county health departments across Oregon. I will note that we do not represent nurse faculty through collective bargaining, but we do represent many nurse practitioners through our professional association called the Nurse Practitioners of Oregon. Some of these folks are faculty, most of them are not but would be eligible to based on credentials and education levels.

The Oregon Health Authority shall establish the **Nurse Educator Workforce Stipend Program** to provide incentives to increase the recruitment and retention of nursing program faculty members, including nurse educators, nurse educator associates, adjunct faculty and nursing program administrators, at accredited institutions of post-secondary education in this state.

The American Association of Colleges of Nursing conducted a 2021 survey of nursing schools and found a national nurse faculty vacancy rate of 8%. Findings confirm that noncompetitive salaries was a key factor in the nurse educator shortage. Survey respondents reported that some major reasons preventing schools from hiring additional faculty include insufficient funding and an inability to compete with jobs in clinical settings.

Simply put: a nurse makes more money in practice than teaching. And as Rep Nelson noted, faculty are also aging out, so it's more important now than ever to ensure we begin to close this pay gap.

Nursing educators in academic positions earn significantly less than clinical or private-sector nurses with the same education. Nursing education requires hands-on learning, with students



training directly under current nurses in clinical experiences. This kind of training requires smaller class sizes – and hence, more faculty, so these programs are, as Rep Nelson – to ensure close supervision in real-world healthcare settings.

It is also helpful to note that we do have more nurses with the required educational training to be instructors than are currently teaching , so we do believe there is a workforce to be tapped into to by incentivizing additional funding to close this pay gap. According to the [HB 4003 report](#) – and HB 4003 was a nursing workforce bill from 2022 – that report found that as of 2020 7% of RNs hold a Masters or higher and 54% held a BSN. Most education programs require a Masters or higher, but some clinical education components only require a BSN. The latest [OSBN data](#) says we have around 81,000 RN licenses. If 7% of them hold a masters or higher, that is around 6000 masters or higher prepared nurses.

HB 3324 will help close this gap by providing additional funding for nursing faculty and staff within nursing programs to help with recruitment and retention for this important sector. Many nursing programs in Oregon currently have more applicants than they can accept, in large part due to a faculty shortage. Oregon must enroll more students in nursing school as part of the ongoing efforts to strengthen and stabilize our health care workforce.

To this end, the Oregon Nurses Association strongly supports HB 3324 and urges an aye vote.