

TESTIMONY FOR THE HOUSE EDUCATION COMMITTEE

Opposition to House Bills 5556 and 5557
Tuesday, November 30, 2021

Good morning. My name is Judy Didion, PhD, RN, and I am the Dean of the School of Nursing at Oakland University. I also previously served as the President of the Michigan Association of Colleges of Nursing (MACN), which is an organization that represents 28 of the state's four-year public and private nursing programs.

I would like to begin by thanking Chair Hornberger and members of the House Education committee for allowing me the opportunity to testify and express Oakland University's concerns related to House Bills 5556 and 5557.

As a nurse for 45 years and 32 years as a nurse educator – I am qualified to address you on the topic of baccalaureate nursing education. I was a Dean at a private college for 9 years and have just completed 5 years as the Dean of the School of Nursing at Oakland University. Let me share some information about our School of Nursing. Oakland University is located in Rochester Michigan. We educate traditional college students seeking a Bachelor's of Science in Nursing (BSN) degree on our main campus in Rochester and teach an accelerated, second degree BSN program at the Anton/ Frankel Center in Mount Clemons, MI. We also offer an RN-BSN completion sequence program for registered nurses who have an associate's degree and are seeking to attain a BSN degree. This program is flexible, fully on-line, offered at a reduced program rate and has the capacity to admit additional students. We changed the modality of how we offered our RN-BSN completion sequence when we experienced a 47% lower enrollment between 2014 -2016 with our face-to-face program. We also observed an uptake in the number of RNs choosing online programs for their BSN, many of which were offered by programs outside of the State of Michigan. Once we converted our program to be offered online, we experienced a 230% increase in enrollment between 2017 and 2021. And we have room for additional enrollment.

In 2020, Oakland University conferred 458 BSN degrees. Of these 314 were new BSN nurses and 144 were RNs with an associate's already who completed their BSN at Oakland. 70% of all of our nursing students have completed some coursework at a Michigan community college and over 95% of the RNs attending our BSN completion sequence took courses at a Michigan community college with 87% having graduated from a Michigan community college with their Associate Degree in Nursing. Oakland prides itself with our collegial relationship with local community colleges and the work that has been completed to become a transfer friendly school. Oakland University currently has formal agreements with 11 community colleges and another in process allowing RN students to articulate seamlessly into our BSN program. Also, based on our RN-BSN policies any student is allowed to participate in the program without a formal articulation agreement.

Proponents of the legislation we are discussing today argue that student access from associate degree nursing programs into bachelor degree nursing programs is non-existent. This is simply untrue. There are currently 68 nursing programs in Michigan that offer either a bachelor's of science in nursing (BSN) or an associate's degree in nursing (ADN), an increase of two new programs since last year alone. There are 37 locations across the state that offer a BSN program and all of the state's community colleges have a nursing program. In addition, 19 of our state's nursing programs have an RN to BSN completion program and they are all under enrolled. In fact, RN to BSN completion programs had over 600-plus unfilled seats for fall 2021. Eighteen of these are offered fully on-line meaning there is ample flexibility and access for students. You could be an associate degree prepared registered nurse (RN) living and working in South Haven, St. Clair, Livonia, Jackson, Dearborn, Manistee, Traverse City or anywhere else in the state and enroll into one of these multiple online RN to BSN completion programs. Evidence shows we are meeting the demand in the market for BSN prepared nurses. In fact, our partnerships with community colleges continue to grow through increased articulation and transfer agreements.

While the status of nursing education in Michigan is strong, it is not without its challenges. We believe that if this bill were to pass, it would only exacerbate the problems that face our state's existing associate and baccalaureate nursing programs by creating unnecessary duplication, worsen existing faculty shortages, further limit the lack of clinical placement availability, and ultimately increase educational costs for taxpayers and students without adding additional RNs to the workforce. RN to BSN programs do not create new nurses. New BSN programs that replace ADN programs will not create new nurses. House bills 5556 and 5557 would allow community colleges offering a bachelor's degree in nursing the authority for their boards of trustees to close their associate degree in nursing program for lack of demand. What does lack of demand mean? Data indicates that in 2020, Michigan's community colleges awarded 2,197 associate's degrees in nursing, their largest healthcare-related program. I can hardly call that lack of demand. We are concerned that allowing community colleges the ability to replace associate degree nursing programs with bachelor degree nursing programs would decrease access to nursing education for many, eliminate a pathway for students to achieve academic progression within the practice of nursing, and it would extend the time for new nurses to begin working in the field. Closing associate degree nursing programs would harm local communities by delaying much needed pipeline of entry into the nursing profession throughout the state.

House bills 5556 and 5557 would NOT improve accessibility to nursing education. In fact, passing these bills further limit clinical training opportunities for students and what we consider the most significant barrier in nursing education, which is a continued shortage of qualified nursing faculty. Faculty shortages directly limit the ability for all of nursing programs in Michigan to expand. Just as our population is aging, our nursing faculty is aging as well. Undergraduate nursing programs require faculty to have advanced degrees to teach, and hold either a Master's in Science in Nursing or a doctoral degree in Nursing. Michigan has a current 7% faculty vacancy rate. There are challenges with recruitment of nurse educators, especially in rural areas, because of the shortage and because of the disparity between nurse faculty salaries and nursing salaries in the clinical service setting. Many cannot afford to leave practice to become full-time educators.

BSN programs require Master's and PhD prepared faculty, yet our nursing workforce consists of less than 12% holding a Master's degree in Nursing and 1% holding a PhD or clinical doctorate. Furthermore, a recent report from the state shows that only 4.8% of the current nursing workforce actually work in an education setting which includes academia, simulation, clinical, administration and adjunct faculty, of which 14% work at community colleges and 25% work at colleges and universities. Of this total, nearly 30% plan to STOP working in nursing education in the next 5 years.

Nursing education has faced clinical education challenges for years and these bills would make worse what has already been worsened by the pandemic in specialties such as OB, Pediatrics, and Psych-Mental Health. Nursing schools in Michigan and across the nation are competing for limited clinical educational sites, and clinical preceptors. The Michigan Board of Nursing mandates a maximum 8 to 1 student to faculty ratio. However, many of the clinical sites limit us to even 6:1 because of the size of their units or because other students are also on these units. We not only compete for clinical sites within nursing but also with other health professional programs that require similar educational requirements for program completion and health professional licensure.

Past state fiscal analysis of similar legislation that would have allowed community colleges to offer BSN programs highlighted the financial impact of this, we know that this legislation would increase operating costs of community colleges that offer bachelor's degree programs. These additional costs include salaries and benefits for additional master's and doctoral-level faculty, staff and administration, information technology, acquiring national professional nursing accreditation, adding 300 and 400 level courses to their curriculum and requiring other additional student support services.

According to previous reports published by the Michigan Community College Association (MCCA), all of Michigan's community colleges have a nursing program. It was noted that in every case, that program was either the costliest or nearly costliest program and must be subsidized by other instructional programs. The MCCA report actually cited that the larger the nursing program, the greater the financial loss to the community college. Much of this is due to the low faculty to student ratio of 1:8 maximum required by state regulation for the clinical courses that take place in area hospitals, community agencies, and long-term care facilities.

In closing, taxpayers and students are best served by supporting the programming that currently exists. All of our state's nursing programs are committed to educating highly educated nurses to provide quality and safe patient care. We are hopeful the legislature will continue to support community colleges and 4-year colleges and universities alike through collaboration and partnership strategies rather than duplicate competing program offerings, so we can continue to meet the critical need for additional nurses and nurse faculty in Michigan.

Thank you for this opportunity and I am happy to answer any questions.

