

February 28, 2023

Chairman Dembrow, Vice Chair Weber, and Committee Members

My name is Sandi Kellogg and I am the Dean of Health Sciences at Chemeketa Community College.

I am here today to provide testimony in support of SB 523. This subject has been researched and debated in Oregon since 2009. Most recently Senator Peter Courtney brought forward SB 3, in 2019. During his presentations, he described the need to reshape and remodel our current educational system. He reported to this committee that he was (quote) “stunned by how many states already allow this, yet Oregon has been working on this since 2009”. The goal of the bill in 2019 was to create a seamless educational system that would support adult learners who were place-bound in their community college servicing district... who, for whatever reason, did not feel they could attend the university options that the State of Oregon provides.

This committee also heard from the Higher Education Coordinating Commission that 24 other states allow community colleges to offer applied baccalaureate degrees with clear limits and controls regarding degrees offered. Today there are 68 Community College programs in the U.S. offering the BS or BSN. In 2019, the overriding concern was that graduates must be able to continue their education to achieve a master’s degree and beyond in the discipline. However, the result of SB 3 was the creation of the BAS, which does not work for the nurse. This degree is not recognized by employers, nursing accrediting bodies, or 4-year universities and graduate schools in order to create a pathway to the MSN or beyond. Therefore, a student who earns their BAS in Nursing may not be able to find a job or continue their education.

You will hear from our opponents that allowing Community Colleges to confer the BSN will not fix the current healthcare crisis, and they are correct! We are not proposing that we are going to solve the nursing shortage by allowing this bill to move forward. However, this bill provides another viable option for those students who do not feel comfortable anywhere else but at their local community college. This bill supports those students who are the most vulnerable and for whom higher education will make the biggest difference. Who are these students? They are students in rural areas, who have modest means, who are racially and ethnically marginalized, and who are more inclined to feel that they don’t authentically belong in a traditional university classroom. These are the students that community colleges serve.

You will also hear that there is a shortage of clinical sites. Although this is true, the RN-to-BSN curriculum has a different clinical or capstone focus from the Associate degree focus of the

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bedside nurse. The RN to BSN curriculum focuses on the Leadership and Manager role with the patient population located in our communities and public health arenas. This also provides the BSN-prepared nurse the ability to become certified as a QMHP, which is a specialization in mental health nursing.

You will also hear that Oregon Center for Nursing, (OCN)

<https://www.oregon.gov/oha/HPA/HP-HCW/Documents/HB4003-Nursing-Workforce-Study.pdf> conducted a study after the passing of HB 4003 to study the nursing workforce. As stated in the report, the purpose of this study was to identify and describe challenges in addressing staffing shortages in nursing. The efforts were to address critical concerns about the nursing workforce shortage considering all levels of care, including hospitals, long-term care, community health, home health, public health, and school nursing. Although addressed, the focus was not on nursing education. One of the many findings in this report related to nursing education was that there are five schools that offer the RN to BSN option, only five! I invite you to read this report through the lens of nursing education. The recommendation from this study, among others, was to increase the education pipeline. The report addresses the fact that the nursing workforce begins at college and depends on the success of the nursing student in their education programs. Also, there needs to be a commitment to increase the diversity of the nursing workforce. The report also states the need to increase educational capacity, especially in rural areas. SB 523 helps to recognize and answer some of the recommendations provided in the OCN report.

In the past five years, Chemeketa graduated 175 associate degree nurses of which 75 of them went on to gain their BSN. In order to do this, they had to transfer to a 4-year institution. One hundred of them did not go on to obtain their BSN, even though Chemeketa has a seamless dual-enrollment agreement with Linfield College and seamless articulation agreements with all of the other universities in the state that offer the RN to BSN degree, yet our students are not matriculating.

If Chemeketa and other community colleges were able to offer the RN to BSN, it would provide a valuable local option to RN graduates who may not pursue a BSN otherwise. This would allow them to continue to work with known faculty, to continue in a familiar learning environment, to continue with their student support resources, and – critically – be offered a more affordable career pathway than what currently exists.

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