

January 28, 2025

Oregon State Legislature
House Committee on Behavioral Health and Health Care

Re: HB 3220

Dear House Committee Members,

I am writing to express my concerns regarding HB 3220. My name is Sue Roders, and I am a nursing instructor at a Oregon Community College Nursing Program, where I have been teaching for 24 years. I have been a registered nurse for 46 years and have witnessed several periods of nursing shortages during my career. I have also experienced times, most recently in 2012, when new RN graduates struggled to find employment due to a lack of job openings. While the current nursing shortage was anticipated due to the increased Baby Boomer retirements that began around 2015, I believe HB 3220 represents a knee-jerk reaction to this crisis.

Increasing the student-to-faculty ratio from 8:1 to 10:1 in the clinical component of nursing education would be detrimental to both students and faculty. As a nursing educator, my goal is to ensure that students receive the best possible education, develop critical thinking skills, and provide safe and effective care to their patients. They must also be well-prepared to pass the NCLEX examination and secure employment as registered nurses. An increased ratio would dilute the quality of education by forcing faculty to divide their attention among more students, leading to missed learning opportunities. This issue is further compounded by the increasing complexity of patient care, with patients often presenting with multiple co-morbidities and requiring advanced medical treatments, procedures, and medications. Faculty must spend significant time observing and guiding students during these critical experiences, which becomes more challenging with larger student groups.

Faculty workloads are already stretched to the maximum. In addition to working with students in clinical settings, we grade care plans, evaluate projects, write weekly progress reports, and teach nursing courses. Adding more students to clinical groups would exacerbate this burden, potentially compromising the quality of education and the well-being of faculty.

Placement of students at clinical facilities is another significant challenge. In the Eugene/Springfield area, we rely on two main medical centers for clinical placements. Despite being asked to increase enrollment to address the nursing shortage, we cannot place all students in these facilities. We are already exploring creative solutions for clinical experiences to accommodate our current cohorts and further increases in enrollment would strain these efforts even more.

I urge you to reconsider increasing the student-to-faculty ratio in the clinical component of nursing programs. Faculty are committed to providing students with excellent learning experiences, but an increased ratio would undermine this mission. Our graduates must be fully prepared to enter the workforce as competent and confident registered nurses, not inadequately trained due to insufficient guidance and support.

Thank you for your consideration of this critical issue.
Sincerely,

Sue Roders, MS, RN