

February 8, 2021

RE: Testimony in Support of LD 119

Dear Members of the Committee on Innovation, Development, Economic Advancement and Business,

I welcome the opportunity to provide testimony in support of LD 119, An Act To Increase Faculty in Nursing Education Programs by Amending the Nursing Education Loan Repayment Program. As president of Maine College of Health Professions in Lewiston, Maine, I have an intense interest in this subject.

MCHP has been providing nurse education for 130 years, and, as such, the college has played a significant role in sustaining Maine's health professions workforce for a very long time. Currently, MCHP graduates approximately 75 associate's-qualified healthcare professionals each year, and about 50 of these are nurses. We also provide much-needed licensed practical nursing education and graduate between 10 and 15 of these individuals annually.

In short, we are a major nurse education entity in the state.

While our numbers are healthy, there is dire need for even more nursing graduates. As you well know, Maine is in the midst of a critical nursing shortage, and we are doing our best to help mitigate that shortage by graduating as many individuals as we can from our nursing programs.

Factors are at play, though, that threaten our ability to increase our output. Indeed, there is rising concern that we will even be able to sustain current levels.

Nursing faculty are in very high demand right now. Educational entities, too, are facing a critical shortage. We suffer a compounded effect. Rates of pay for clinical nurses are higher than they've ever been. While colleges and hospitals are different industries, and the work done by nurses within our respective environments varies greatly, we have to pay our nursing faculty salaries that are reasonably comparable.

Therefore, nurses whom we want in the classroom – those who have mastery and depth of knowledge that we so desperately need in order to optimally educate the next generation of healthcare workers – are desperately needed in two industries.

I must note here that, in order to teach at the college level, however, nurses are required to be, at a minimum, master's prepared. This is not the case with staff nursing. One can enjoy a very successful and lucrative career in hospital or practice nursing by virtue of completing a 2-year associate's degree program. In order to become a nursing faculty, though, one must have completed at least 6 – and preferably 10 - years of post-secondary education. As you most certainly know, this education is

expensive. Couple this added expense to the delta between staff nurse compensation and teaching, and the result is clear. **It costs, not pays, to be a nursing faculty.**

By virtue of passing the proposed amendment, the state would be doing itself a great service. We do not have the luxury of waiting for our aspirant nurse faculty to **complete** graduate education; therefore, the amendment to expand eligibility to nurses who are in the process of earning master's and doctoral degrees is wise. It will serve to eliminate some of the stress and burden that is always part of graduate education, and it will most certainly motivate some individuals to enroll in programs.

The same logic holds true regarding the benefit increase. Raising the amount will be compelling – especially in light of the opportunity cost of not working as a staff nurse. Further, the increase would mitigate some of the stress of pursuing graduate study.

We need more of these professionals to feel confident about devoting their time and talents to ensuring that we have a robust supply of educators for now and for the future.

If we as a state fail to act in addressing this persistent crisis, MCHP and colleges like us will have to reduce, as opposed to increase, our educational capacity. We would do this reluctantly, but, in order to meet accreditation standards and ensure that we are providing an optimal learning experience, we would have no choice.

Thank you very much for the opportunity to provide this testimony.



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