



377 Research Parkway  
Meriden, CT 06450-7160  
203-238-1297

TESTIMONY RE: APPROPRIATIONS TO FUND PRIORITIES RELATED TO THE  
SHORTAGES OF NURSING AND ALLIED HEALTH

Appropriations Committee Hearing

February 23, 2007

Good afternoon Senator Harp, Representative Merrill and members of the Appropriations Committee.

Thank-you for the opportunity to provide testimony on behalf of the Connecticut Nurses' Association (CNA), the professional organization for registered nurses in Connecticut. I am Dr. Mary Jane Williams, past-president of the Connecticut Nurses' Association, current chairperson of its Government Relations Committee and professor and chair of nursing at the University of Hartford. I have practiced nursing for over 40 years and have been educating nurses in Connecticut in both the public and private sector for over 35 years.

Connecticut Nurses' Association, as a member of the Steering Committee of the Connecticut Health Care Workforce Coalition, urges the Appropriations Committee to consider the recommendations of the Coalition to adopt a comprehensive and aggressive set of strategies that can be sustained to address our existing and impending shortages in the nursing and allied health workforce. This strategy has four components – **workforce data, increased allied health and nursing faculty, enhanced recruitment and retention, and dedicated staffing for the Allied Health Workforce Policy Board.**

The data is clear. Shortages in the nursing and allied health workforce are well documented (aging of Connecticut's population; an older population requires substantially more health care services; the projected shrinkage in the working age

population (age 20-64 years) undermines efforts to recruit nurses and allied health professionals). Advances in medical technology contribute to an ever widening gap between health care workforce supply and demand for health care services. With these affects, health care workforce shortages directly affects access to care, higher costs, and lower quality. The shortages in Connecticut are projected to be among the worst in the nation. The factors contributing to nursing and allied health care workforce shortages include a shortage of faculty, lack of awareness of allied health careers, and inadequate academic preparation for nursing and allied health training programs.

**Our recommendations** to ensure an adequate nursing and allied health workforce will require a focused and sustained effort over two or three decades. The following four recommendations are the initial components of a long-term, sustained, comprehensive strategy to address nursing and allied health shortages in Connecticut.

- Implement a **web-based licensure renewal system** at the Department of Public Health that includes the data elements necessary to track and analyze the health care workforce in Connecticut. The Governor's Budget includes \$1.17 million in the second year of the Biennial Budget for the Department of Public Health to implement an on-line web-based licensing system. These funds should be made available during the first year of the Biennial Budget, and the on-line system should be fully implemented for all health professions by July 1, 2008.
- Address the shortage of nursing and allied health faculty by (1) implementing a nursing and allied health **faculty scholarship for service program** administered by the Department of Higher Education, in consultation with the Connecticut Allied Health Workforce Policy Board (e.g., Raised Bill No. 7102 and Proposed Bill No. 6024); (2) establish a nursing faculty student loan program to provide **loans and loan forgiveness** to state residents who pursue a master's or doctoral degree from an accredited nursing program in the state and who agree to engage in nursing instruction in an approved nursing program in the state (e.g., Proposed Bills No. 799 and 7102) and (3) provide grants to institutions of higher education for additional nursing and allied health faculty positions (e.g., Proposed Bill No. 5627). Cost: \$2.5 million per year.

- Implement a **statewide recruitment and retention campaign** to promote awareness of nursing and allied health careers, train teachers and guidance counselors, inform parents and students, particularly minority students, on career opportunities and the educational requirements for allied health programs, and increase student retention in nursing and allied health programs. This campaign should be coordinated by the Allied Health Workforce Policy Board and should build on the existing programs, including AHEC, the Nursing Career Center, One Stop Career Centers, and the state's secondary and post-secondary institutions (e.g., Raised Bill No. 7102). Cost: \$1.5 million per year.
- Appropriate sufficient funds to provide **fulltime staffing for the Allied Health Workforce Policy Board**, including a director, two analysts, and administrative support. In order to fully understand the nature and causes of shortages and to develop and support the comprehensive and long-term set of initiatives that are necessary to address shortages, the Policy Board must have dedicated staff with sufficient analytic and policy expertise equal to the challenges it faces. The Policy Board should also serve to coordinate the collaborative contributions of the many stakeholders with an interest in resolving nursing and allied health workforce shortages. Cost: \$500,000 per year

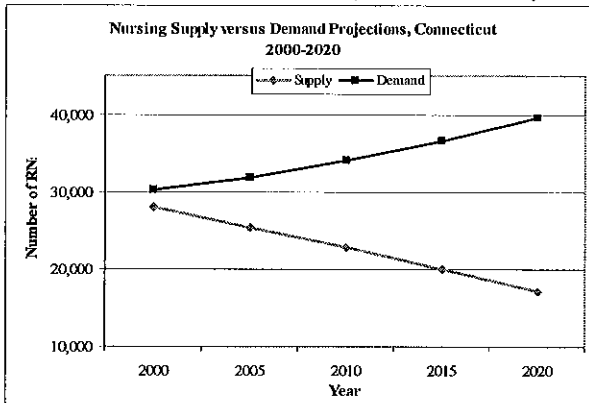
**Funding** – Partial funding for initiatives to address nursing and allied health workforce shortages should come from a \$10 per person increase in the licensing fee charged to health professionals. The increase in licensing fees should be used fully and exclusively for addressing workforce shortages. Revenue: \$1.4 million per year.

Thank you for consideration of these recommendations that represent a coalition of providers, educators, representatives of career organizations and nursing leadership. It is essential that this sustained funding be supported if we are to protect the public we all serve. We are available to assist the committee.

## Recommendations to Address Nursing and Allied Health Workforce Shortages

The Connecticut Health Care Workforce Coalition urges the members of General Assembly to adopt a comprehensive, sustained, and aggressive set of strategies to address the existing and impending shortages in the nursing and allied health workforce. The Coalition recommends that the four components of a comprehensive strategy, be funded, in part, through an increase in the health care licensing fees dedicated solely for these purposes.

**Background** – Shortages in the nursing and allied health workforce are driven by the aging of Connecticut's population; an older population requires substantially more health care services and the projected shrinkage in



the working age population (age 20-64 years) undermines efforts to recruit nurses and allied health professionals. Furthermore, advances in medical technology contribute to an ever widening gap between health care workforce supply and demand for health care services. Health care workforce shortages lead to less access, higher costs, and lower quality. The shortages in Connecticut are projected to be among the worst in the nation. The factors contributing to nursing and allied health care workforce shortages include a shortage of faculty, lack of awareness of allied health careers, and inadequate academic preparation for nursing and

allied health training programs.

**Recommendations** – Ensuring an adequate nursing and allied health workforce will require a focused and sustained effort over two or three decades. **The following four recommendations are the initial components of a long-term, sustained, comprehensive strategy to address nursing and allied health shortages in Connecticut.**

- Implement a **web-based licensure renewal system** at the Department of Public Health that includes the data elements necessary to track and analyze the health care workforce in Connecticut. The Governor's Budget includes \$1.17 million in the second year of the Biennial Budget for the Department of Public Health to implement an on-line web-based licensing system. These funds should be made available during the first year of the Biennial Budget, and the on-line system should be fully implemented for all health professions by July 1, 2008.
- Address the shortage of nursing and allied health faculty by (1) implementing a nursing and allied health **faculty scholarship for service program** administered by the Department of Higher Education, in consultation with the Connecticut Allied Health Workforce Policy Board (e.g., Raised Bill No. 7102 and Proposed Bill No. 6024); (2) establish a nursing faculty student loan program to provide **loans and loan forgiveness** to state residents who pursue a master's or doctoral degree from an accredited nursing program in the state and who agree to engage in nursing instruction in an approved nursing program in the state (e.g., Proposed Bills No. 799 and 7102) and (3) provide grants to institutions of higher education for additional nursing and allied health faculty positions (e.g., Proposed Bill No. 5627). Cost: \$2.5 million per year.
- Implement a **statewide recruitment and retention campaign** to promote awareness of nursing and allied health careers, train teachers and guidance counselors, inform parents and students, particularly minority students, on career opportunities and the educational requirements for allied health programs, and increase student retention in nursing and allied health programs. This campaign should be coordinated by the Allied Health Workforce Policy Board and should build on the existing programs, including AHEC, the Nursing Career Center, One Stop Career Centers, and the state's secondary and post-secondary institutions (e.g., Raised Bill No. 7102). Cost: \$1.5 million per year.

- Appropriate sufficient funds to provide **fulltime staffing for the Allied Health Workforce Policy Board**, including a director, two analysts, and administrative support. In order to fully understanding the nature and causes of shortages and to develop and support the comprehensive and long-term set of initiatives that are necessary to address shortages, the Policy Board must have dedicated staff with sufficient analytic and policy expertise equal to the challenges it faces. The Policy Board should also serve to coordinate the collaborative contributions of the many stakeholders with an interest in resolving nursing and allied health workforce shortages. Cost: \$500,000 per year

**Funding** – Partial funding for initiatives to address nursing and allied health workforce shortages should come from a \$10 per person increase in the licensing fee charged to health professionals. The increase in licensing fees should be used fully and exclusively for addressing workforce shortages. Revenue: \$1.4 million per year.