

# SENATE BILL REPORT

## SB 5582

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As Reported by Senate Committee On:  
Higher Education & Workforce Development, February 8, 2023

**Title:** An act relating to reducing barriers and expanding educational opportunities to increase the supply of nurses in Washington.

**Brief Description:** Reducing barriers and expanding educational opportunities to increase the supply of nurses in Washington.

**Sponsors:** Senators Holy, Randall, Rivers, Robinson, Dozier, King, Conway, Shewmake, Padden, Lovick, Gildon, Muzzall, Lovelett, Mullet, Nobles, Saldaña, Valdez, Van De Wege, Wellman, Wilson, C. and Wilson, L..

**Brief History:**

**Committee Activity:** Higher Education & Workforce Development: 2/01/23, 2/08/23 [DPS-WM].

### Brief Summary of First Substitute Bill

- Requires the state board for community and technical colleges to develop a plan to increase credential opportunities in nursing.
- Creates nursing education opportunities at community and technical colleges and within the Department of Veterans Affairs.
- Modifies program approval and training requirements under the Nursing Care Quality Assurance Commission.
- Creates the High School Student Certified Nursing Assistant Pilot Program.
- Modifies the basic education funding formula to reduce class sizes in skills centers.

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SENATE COMMITTEE ON HIGHER EDUCATION & WORKFORCE

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.*

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## DEVELOPMENT

**Majority Report:** That Substitute Senate Bill No. 5582 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Randall, Chair; Nobles, Vice Chair; Holy, Ranking Member; Hawkins and Liias.

**Staff:** Alicia Kinne-Clawson (786-7407)

**Background:** Workforce Demands. Registered nurses (RN), licensed practical nurses (LPN), and certified nursing assistants (CNA) continuously rank among the most in-demand careers in Washington State with exceptionally long vacancies. Over the last five years, the state has averaged 3200 qualified applicants to nursing programs turned away annually due to not enough capacity in RN programs. The community and technical colleges are graduating between 1600 and 1800 nursing students annually.

The Nursing Care Quality Assurance Commission (NCQAC) regulates the nursing profession in Washington and establishes, monitors, and enforces licensing, standards of practice, and discipline. NCQAC has responsibility for approving and regulating all nursing education programs in the state.

NCQAC is currently operating the following programs to address the nursing workforce demands:

- LPN apprenticeship program—n 2021, the legislature provided a planning grant to NCQAC to fund a 3-year implementation of the LPN apprenticeship program; and
- Washington State Student Nurse Preceptor Grant Program—the grant program is currently funded at \$3 million annually and funds nurses who precept nursing students in healthcare settings including advanced registered nurse practitioner, RN, and LPN programs.

Skill Centers. Skill centers are regional career and technical education (CTE) instructional venues established and operated by a host school district to provide access to comprehensive, industry-defined CTE programs that prepare high school students for careers, employment, apprenticeships, and postsecondary education. There are 14 skill centers in Washington. In the 2019-20 school year, approximately 5600 full-time equivalent students were enrolled in skill centers.

**Summary of Bill (First Substitute):** Expanding Nursing Credential Opportunities. *State Board for Community and Technical Colleges.* \$100,000 is appropriated to the State Board for Community and Technical Colleges (SBCTC) to develop a plan to train more nurses over the next four years. The plan must include CNAs, LPNs, and RNs. The plan must prioritize programs which create new capacity, expand training opportunities for rural and underserved students, demonstrate long-term sustainability, and expand partnerships between employers and exclusive bargaining units. A report with the plan is due by

December 1, 2024.

SBCTC must develop an online LPN curriculum. The curriculum may include use of a mobile skills lab or other innovative approaches to serve rural students.

*Licensed Practical Nurse Apprenticeship Pathway Program.* The Home Care Aid to LPN Apprenticeship Pathway Program is created with three pilot locations in geographically disparate sites. A report is due to the Legislature on barriers faced by current and prospective students, the status of the pilot and opportunities to scale-up by December 1, 2025.

*Marketing Program.* The Workforce Board is required to contract with marketing firms to advertise available nurse training opportunities and jobs in Washington.

*Certified Nursing Assistants Training Program.* The Department of Veteran's Affairs is directed to either design a CNA program or utilize an existing CNA program, and conduct outreach to address the CNA shortage in state veterans' homes.

Eliminate Bottlenecks in Nurse Training. *Nursing Care Quality Assurance Commissions.* NCQAC is permitted to grant approval to bachelors degrees in nursing programs where the nurse administrator holds a graduate degree with a major in nursing and sufficient experience.

NCQAC must count one hour of simulation lab experience in place of two hours of clinical placement learning, up to a maximum of 50 percent of the required clinical hours for nurse licensure.

The state appropriation for the Student Nurse Preceptor Grant Program is increased to \$6 million. NCQAC must expand the program with a focus on serving acute shortage areas including rural and underserved communities and long-term care facilities. In addition, increased clinical opportunities must be achieved through reducing the required number of qualifying hours for grant eligibility from 100 to 80.

Grow K-12 Pathways into Healthcare Careers. *Career and Technical Education Grant Program.* Establishes a grant program for CTE health sciences to allow districts to create or expand health science program offerings.

*High School Student CNAs Pilot Program.* The Nursing Commission, in collaboration with rural hospitals, CNA certified training programs, and the Department of Labor and Industries, must create at least two pilot projects for rural hospitals to help address workforce shortages and promote nursing careers in rural hospitals. The pilot project must have at least one participating rural hospital on the east and west side of the Cascade mountains.

*Skills Centers.* The basic education funding formula is modified to reduce the class size in skills centers from 19 students per instructor to 16 students.

**EFFECT OF CHANGES MADE BY HIGHER EDUCATION & WORKFORCE DEVELOPMENT COMMITTEE (First Substitute):**

- Requires the state board to prioritize employer and exclusive bargaining unit partnerships in development of the plan to train additional nurses.
- Adds employer and exclusive bargaining unit partnerships as entities to be consulted in multiple program areas.
- Eliminates the priority enrollment given to students in the LPN apprenticeship pathway program to nursing programs and directs the workforce board to student barriers faced by apprenticeship pathway students.
- Adds personal care aids to the entities including in a statewide marketing plan.
- Requires OFM to benchmark the 50th and 75th percentiles for nurse educator compensation in the nurse educator salary survey.
- Allows the WA Department of Veterans Affairs to develop own CNA program or adopt an existing model.
- Modifies the requirement that one hour of simulated learning account for two hours of clinical learning to apply to a maximum of 50 percent of clinical hours and specifies that this competency applies to nursing licensure.
- Directs that the expansion of the nurse preceptor grant program includes reducing the number of hours required to be eligible for the grant.
- Makes technical corrections throughout.

**Appropriation:** The bill contains appropriations totaling \$6,100,000 from various accounts.

**Fiscal Note:** Available.

**Creates Committee/Commission/Task Force that includes Legislative members:** No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony on Original Bill:** *The committee recommended a different version of the bill than what was heard.* PRO: Healthcare has been an issue since the day I walked in the Legislature. We have two problems, we have an attrition rate with many nurses retiring, and we don't have a pipeline available to replace nurses. There are many factors causing the staffing shortage. Doing more with less is a healthcare problem. It's a patient safety problem. Institutions don't have the ability to staff adequately as the workforce shifts to better paying traveling nurse roles. When you have inadequate nursing workforce then all these things exacerbate the crisis faced by healthcare facilities. This bill attempts to address the pipeline problem. It provides funding an incentive to be flexible in

addressing the problem. The state employment security division says that nursing is currently the most in-demand occupation in the state. There are thousands of qualified applicants to nursing school turned away each year. We appreciate the bills focus on rural communities. The healthcare needs are becoming more complex. By targeting efforts to grow the pipeline we can help address this shortage. The focus on more CNAs into the veterans homes is crucial for veteran care and safety. We appreciate your work to address hospital staffing by increasing opportunities to become nurses. The additional investments in the nursing preceptor grant program will be a huge help. The nursing shortage has been particularly hard on long-term care. There have been barriers in career paths for our nurses and this bill gets to the heart of these issues. It moves away from programs that use a perfect GPA as the prerequisite and to programs that use workforce experience. Eliminating the doctorate requirement for nursing administrators removes a significant barrier for rural programs. We are concerned with guaranteed admission for LPN pathways programs may disadvantage students choosing the traditional route over the other modality. This would increase the equity gap without any benefit to the workforce. We are in strong support of the 1:2 simulation training. We believe the salary survey of nurse educators is essential. This bill looks at innovative ways to grow the number of nurses and does a good job exploring new ways to grow the pipeline.

OTHER: During the COVID pandemic the ability for students to complete their clinical experience was jeopardized. Nursing looked to simulation to replace those experiences. We have to make sure that students still need practice to translate those simulation skills to patient care. Students who participated in two hours of high quality nursing simulation performed as well or better than students in traditional clinical settings. We have one study where we are beginning to see that this can be successful. The shortage of CNAs nationwide coupled with growing demand is creating substantial capacity constraints for the states veterans homes. Because of this shortage we are holding beds vacant and unable to provide skilled nursing care. We used to be at 96 percent of beds filled and now we are closer to 75. This bill will allow us to recruit and train CNA candidates. We will assist people from marginalized communities and those that may not have the ability to pay for education to access good jobs. We know that nursing needs many more safe, competent nurses. Currently deans and directors of baccalaureate programs are required to be doctorally prepared. It is this doctorate that trains them to teach research methods and safe practices. Guaranteed admission to the home care aid apprenticeship program is concerning because these students may need additional academic support to be successful. We strongly support the change to the simulation experience. We appreciate the funding to the preceptor program and encourage further expansion of eligibility under this program. We recommend benchmarking the salary survey to the 75th percentile as its closer to market. And we encourage you to consider including the public baccalaureates as part of the solution to expanding programs. We appreciate the inclusion of the LPN pathways into statute. Many of the recommendation in this bill are in progress or are in discussion as potential solutions to help the healthcare workforce. We are encouraged by the focus to address some longstanding problems for the long term care workforce.

**Persons Testifying:** PRO: Senator Jeff Holy, Prime Sponsor; Katharine Weiss, Washington State Nurses Association; Carma Matti-Jackson, Washington Health Care Association; Dane Austreng, SEIU Healthcare 1199NW; Anna Nikolaeva Olson, State Board for Community and Technical Colleges; Marriya Wright, South Puget Sound Community College; Ashlen Strong, Washington State Hospital Association; Dustin Lambro, UFCW 3000.

OTHER: Paula Meyer, Nursing Care Quality Assurance Commission; Terry Westhoff, Washington State Department of Veterans Affairs; Sharon Fought, WA State Nursing Care Quality Assurance Commission; Chris Mulick, Washington State University; Mary Koithan, Dean, WSU College of Nursing; Donald Smith, Workforce Board.

**Persons Signed In To Testify But Not Testifying:** No one.