

Testimony on Creation of a ND Accelerated Degree for In-Demand Occupations
Senate Workforce Development Committee
January 20, 2025
House Bill 1220

Chairman Wobbema and Honorable Members of the Senate,

Good morning, my name is Dr. Billie Madler. I am the Associate Dean of Nursing at the University of Mary and a constituent of District 30. I stand before you today to oppose House Bill 1220. I have 30 years of experience in the field of nursing as a critical care nurse, a flight nurse, a family nurse practitioner, and a nursing professor.

While the intent behind HB 1220 to address workforce shortages in North Dakota is commendable, implementing blanket legislation that drastically alters educational requirements across a wide range of professions is risky and will have unintended consequences that impact the public. The option to implement sweeping changes to credit and curriculum requirements will undermine the quality and standards established among many professions, and reduce the competence of individuals we are trusting to do things like manage our finances, design our infrastructure, educate our children, provide healthcare for our loved ones.

My testimony will be limited to what I know, that is nursing and preparing new nurses to enter the field of nursing. Nurses, numbering nearly 5 million in our nation, truly are the backbone of the healthcare system. Their responsibilities extend far beyond the clinical tasks they perform. Nurses must be critical thinkers, effective communicators, and compassionate caregivers to highly diverse populations. A broad-based general education provides nurses with the knowledge and skills necessary to adequately perform in these areas, ensuring they are prepared to meet the multifaceted challenges of modern healthcare and the diversity of patient populations they encounter. General education courses—such as those in the humanities, social sciences, mathematics, and communications—help equip nurses with essential skills in clinical reasoning, research, leadership, communication, problem-solving, cultural competency, and ethical decision-making. Removing or diminishing these requirements would deprive future nurses of a comprehensive education that supports their professional development and would threaten quality of care, risk patient safety, and because of value-based purchasing models of reimbursement, could truly jeopardize the financial bottom lines of healthcare organizations.

National thought leaders in nursing and nursing programmatic accreditors, such as the Commission on Collegiate Nursing Education (CCNE), who best understand the demands of the role and the necessary educational preparation to safely and effectively function in the role, have consistently emphasized that nursing education must be built on a solid liberal arts foundation. In fact, the CCNE Criterion and Standard for Accreditation [attached], in Standard III Key Element III-F states;

- The curriculum is logically structured and sequenced to achieve expected student outcomes.
- Baccalaureate curricula **build on a foundation of the arts, sciences, and humanities**. [Pg. 19]
- Elaboration: **Baccalaureate degree programs demonstrate that knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice.**

A Bachelor's of Science in Nursing, grounded on a strong foundation of general education and aligned with national accreditation standards, is essential for preparing nurses to handle the demanding and complex roles involved in patient care. For the remainder of my testimony, I will present several research-based facts. As I share these points, I encourage you to consider the critical importance of a quality education in nursing, particularly in light of the current Bachelor's degree requirements and the ripple effect of unintended consequences that would result by diminishing these requirements. Think about how this legislation, when applied to nursing programs, could compromise quality of patient care. Reflect on what you would want from the professional nursing team caring for you or a loved one, and if that level of nursing care was not available to you in-state what options you might take.

The Importance of General Education in Nursing

Research from the National League for Nursing and the Robert Wood Johnson Foundation shows that the current academic-practice gap harms care quality and patient outcomes. Reducing educational requirements by eliminating key general education courses would only widen this gap, leaving new nurses underprepared for the complexities of clinical practice.

Nurse executives, federal agencies, the military, leading nursing organizations, healthcare foundations, Magnet hospitals, and minority nurse advocacy groups all recognize and support the distinctive value that baccalaureate-prepared nurses (as the degree requirements are currently structured) bring to health care. For example:

- The American Organization of Nurse Leaders (AONL) has called for all registered nurses to be educated in baccalaureate programs to better prepare them for complex roles, emphasizing the need for a more educated nursing workforce to improve patient safety and care.
- The Institute of Medicine has called for increasing the number of baccalaureate-prepared nurses in the workforce to 80% and,
- Dr. Patricia Benner and her team at the Carnegie Foundation released a study recommending preparing all entry-level registered nurses at the baccalaureate level and requiring all RNs to earn a master's degree within 10 years of initial licensure.

The Impact of a BSN on Patient Outcomes

Nurses with a Bachelor of Science in Nursing (BSN) are better equipped to positively influence patient outcomes. Reduced educational requirements have proven to have significant and detrimental outcomes for patients and healthcare organizations. I have pulled out only a few examples of why a highly educated nursing workforce is critical to patient safety and patient outcomes. This information is taken from the American Association of Colleges of Nursing Impact of BSN Education and provided for you with my testimony. I encourage you to review the many additional research-based findings highlighted in that document.

- Nursing care from a BSN prepared nurse is associated with lower readmission rates, shorter lengths of stay, lower mortality rates, fewer medication errors, and better overall patient outcomes.
- Hospitals with a higher proportion of BSN-prepared nurses see a **10-30% reduction in patient mortality and a 7% decrease in adverse patient events.**
 - Lower rates of surgical mortality

- Greater odds of surviving to discharge with good cerebral performance after in-hospital cardiac arrest
- Lower odds of failure to rescue
- Fewer patient falls, fewer pressure ulcers, fewer infections
- The journal, *Health Affairs*, reported that a 10-point increase in the percentage of nurses holding a BSN was associated with an average reduction of 2.12 deaths for every 1000 patients, and for a subset of patients with complications, an average reduction of 7.47 deaths per 1000 patients.
- There is a “substantial survival advantage” if treated in hospitals with higher proportions of nurses educated at the baccalaureate or higher degree level.
- **Increasing the number of BSN nurses by 20% could prevent over 40,000 deaths annually in our country.**

The comprehensive education afforded by a BSN is essential for addressing the increasingly complex healthcare environment. Removing general education requirements would diminish these critical competencies and ultimately compromise patient safety and care quality, which could also negatively impact third-party reimbursement. Rigorous BSN educational preparation is critical to the outcomes of our patients and the health of citizens in North Dakota and across our nation. The nursing profession must continue to prioritize the academic preparation of its workforce to ensure high-quality healthcare for all.

Conclusion

In conclusion, I strongly oppose House Bill 1220 as it ultimately puts patients at risk. The importance of general education cannot be overstated, and reducing these requirements would be detrimental. Research clearly demonstrates that a rigorous BSN education contributes to better patient outcomes. We must continue to support the highest standard of education for nurses, ensuring they are fully equipped to meet the challenges of modern healthcare.

I urge you to reconsider this bill and instead advocate for policies that support a more robust and comprehensive education for future nurses.

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