



I'm writing today with my support of the continuance of previous parameters outlined in H.B. 673, now found in H.B. 6. I am commenting specifically on the language therein relating to nursing licensure and modifications made in response to the COVID-19 pandemic. I think it may be important to consider Aultman College's perspective and context as I proceed. We are a small, healthcare focused institution and due to multiple factors on our campus, we happened to have a limited number of nursing graduates in 2020 and are concerned about the timely entry of our Spring 2021 graduates into the nursing workforce. We do not control the ability for our students to take their NCLEX licensure examination in a timely fashion after completing all program requirements (that is, we anticipate quite a potential delay in the timely release of information and availability of NCLEX testing centers with the typical large number of Spring graduates, pandemic notwithstanding). Former H.B. 673's provision allowing graduates to continue forward into the workforce regardless of testing availability was important and I continue to support this notion in the new legislation. It is of note that a key reason we support this particular provision also lies with the idea that our NCLEX pass rates historically exceed state and national average pass rate levels. Our most recent pass rate was 98.4% in 2019. We have deep confidence in the quality of our graduates proceeding even without the immediate assessment of the NCLEX examination. Without that confidence, we may be less likely to support the provision.

In another point of support, I believe that extending the effective date of the legislation to July 1, 2021 represents smart thinking from an educational perspective. With this change, the legislation covers nursing graduates for an entire academic year versus only a portion of that academic year. For multiple reasons, we prefer to have consistent standards for our students and graduates throughout a full academic year versus having to change standards in between the fall and the spring semesters.

Finally, our academic nursing leadership team appreciates having an emergency option for completion of clinical hours for nursing students as outlined in this legislation. During this pandemic, our campus has continually dealt with interrupted access to clinical sites in our northeast Ohio region from full closure to intermittent student exclusion. Our faculty made the choice to utilize alternate educational methods to still complete all of our student requirements (e.g., using clinical simulation modules, cancelling academic breaks, altering our academic calendar to allow for clinical make-ups, etc.); however, these have been short-term solution and we deeply value the practice and experience students gain in the clinical setting. We are continually adjusting to changes in clinical site access for students and having a back-up plan with pandemic licensure clinical hours is an option we would be thankful to continue to have as a tool in our toolkit, though our campus continues to plan in the hopes of not utilizing this provision.

I appreciate being given the opportunity to share how this legislation affects our campus community.

With best regards,

Jean R. Paddock, Ph.D.

Teanh Padilock

President

Aultman College

Canton, OH