



UNIVERSITY OF SAINT JOSEPH

CONNECTICUT

**Testimony on H.B. No. 5014 (Raised) AN ACT ESTABLISHING A TAX CREDIT FOR PROVIDERS OF CLINICAL NURSING EXPERIENCES**

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To

Higher Education and Employment Advancement Committee of the  
General Assembly, State of Connecticut

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Mr. Chairman and Committee Members: Thank you for the opportunity to appear before you today. My name is Dr. Theodora Sirota and I am asking for your support for passage of H.B. No. 5014 (Raised) AN ACT ESTABLISHING A TAX CREDIT FOR PROVIDERS OF CLINICAL NURSING EXPERIENCES. I am Professor of Nursing at The University of St Joseph, where I educate graduate student nurses for practice as APRN primary care providers. Everyone in this room is aware of the critical health challenges we currently face in our State and across the Nation, in large part due to an aging population with a greater prevalence of complicated physical co-morbidities, as well as the serious surges we are seeing in acute psychiatric trauma, substance abuse, and suicidality. More people than ever need frequent primary health care attention, but at the same time we struggle to educate enough primary care providers to meet their needs. There is a looming shortage of providers to competently care for all those needing our care, and workforce data show that this trend will only worsen into the future. It is essential that we prepare enough knowledgeable and skilled nurse practitioners to stem this urgent gap in vital health care services for the people of Connecticut.

In nurse practitioner education, each student spends more than 1000 hours conducting direct patient care under the guidance of a practicing preceptor who is a licensed APRN or physician. Finding enough qualified preceptors with whom to place our students is always difficult and it is only getting more challenging for every primary care nursing program in our state. There are possible preceptor situations available that we cannot access, because most highly regarded nurse practitioner programs, including ours at USJ, simply cannot afford to pay the fees that some agencies require to take on trainees. Passing clinical costs onto students of, say, \$2000 or more per semester, is not a good solution, as this extra personal financial burden reduces many students' ability to attend and complete our programs. Also, the amount of time and energy that

we educators must expend in attempting to locate qualified preceptors willing to accept lower fees is exhausting, frustrating and often futile. I have personally spent too much time attempting to place students, even weeks after a semester has started. Had I not been successful, these students would have had to withdraw from their current clinical course and lose the ability to progress in our program. This nightmare is one that no nurse practitioner student or program should have to face. If we cannot provide the necessary clinically precepted education to all students who meet our standards for admission and who wish to serve, ultimately it is the people of Connecticut who will suffer from not having enough well-educated primary health care APRN providers to meet their needs.

I respectfully urge this body to consider passage of H.B. No. 5014 (Raised). Offering a tax credit to prospective clinical preceptors will help create valuable incentives for more of them to agree to work with our family and psychiatric-mental health nurse practitioner students. Widening these opportunities can only result in positive outcomes for our nurse practitioner programs, our students and, most especially, for the people of Connecticut whom we serve.

Thank you for giving me the opportunity to address this committee.

Testimony submitted by:

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