



July 14, 2025

Oregon State Board of Nursing

In Support of the Proposed Division 70 Rules—Re-engagement with the HPSP Program

Members of the Oregon State Board of Nursing,

Thank you for the opportunity to provide comments on the proposed rules for Division 70 of the Oregon Nurse Practice Act. My name is Christy Simila, and I am the Director of Professional Practice for the Oregon Nurses Association (ONA). ONA represents more than 21,000 nurses and healthcare professionals throughout Oregon, and together we use our collective voice to advocate for the health of our communities and the health of our profession.

These proposed rules represent a critical step forward in ensuring that nurses who experience substance use or mental health challenges are given fair, evidence-based opportunities to recover and return to safe practice. I appreciate the inclusion of all license and certificate holders in these rules and the elimination of stigmatizing language. Working in healthcare is challenging; and the daily stressors that are prevalent in the workplace can take an extreme toll on mental health and coping mechanisms. At a time when our state is struggling to retain experienced nurses, this important program offers skilled professionals a safe and supportive pathway to re-enter practice in a way that honors their commitment to work diligently to recover and re-enter our workforce; and it promotes their sustainable recovery.

My recommendation for the board to consider is that there is a plan for ongoing assessment of these rules and any barriers they may unintentionally cause for nurses accessing the program, specifically around confidentiality and worksite monitoring. All barriers identified should be thoughtfully addressed in a timely manner to alleviate any fear or hesitancy associated with seeking help for what has been stigmatized for far too long. A program is only effective if people feel safe enough to use it.

I want to thank the board for taking the time to thoughtfully engage in the rule making process and re-engage with HPSP, recognizing that supporting the mental health of all nurses supports the foundational goals of public safety, professional accountability, and well-being as public protection. Thank you for your ongoing leadership and for providing an opportunity to provide support for the proposed rules on this important topic.

Sincerely,

A handwritten signature in black ink that reads 'Christy Simila'. The signature is written in a cursive, flowing style.

Christy Simila, BSN, RN, CMSRN, HNB-BC, HWNC-BC

Director of Professional Practice

Oregon Nurses Association

Oregon Nurses Association

18765 SW Boones Ferry Rd, Suite 200

Tualatin, OR 97062

www.oregonrn.org

503-293-0011

July 17, 2025

Oregon State Board of Nursing

17938 SW Upper Boones Ferry Road

Portland, OR 97224

RE: Public Comment – Administrative Rule Hearing on Nurse Practice Act, Divisions 10 and 70

Dear Members of the Oregon State Board of Nursing,

On behalf of the Oregon Nurses Association (ONA), we would like to express our sincere appreciation to the Board for your thoughtful and determined effort in re-entering into the Health Professionals' Services Program (HPSP). We commend your commitment to supporting healthcare professionals struggling with substance use disorders and mental health challenges. Providing a structured, monitored pathway toward well-being—while allowing nurses and other licensees to maintain their licensure and protecting the public—is a critical public health and workforce strategy.

ONA supports the intent and overarching goals of the proposed changes to Divisions 10 and 70. However, we respectfully submit two areas of concern for the Board's further consideration, particularly as they impact program participants' ability to succeed in their recovery, maintain employment, and continue contributing to safe and effective patient care.

1. Monitored Practice Requirements – Barriers to Employment

While we support the intent of Monitored Practice to safeguard patients and support participant accountability, we have observed that many participants experience significant difficulty securing employment under the conditions required by the program. Employers often terminate the employee, or, alternatively, participants feel forced to resign due to the inability to identify a willing and eligible worksite monitor. Even when an employer is open to continuing the nurse's employment, challenges arise in finding a suitable unit and a colleague who is both qualified and willing to serve as a monitor, and as a result they resign.

We urge the OSBN to consider including language that strongly encourages Chief Nursing Officers and healthcare employers to actively support their staff in providing monitored practice

to participants. This could include designating trained worksite monitors and creating internal structures to help participants remain employed while fulfilling program obligations. Formal OSBN guidance or partnership with employer organizations could help create a culture of accountability *and* compassion in supporting workforce retention.

2. Economic Impact to Participants – Unsustainable Financial Burdens

We are also concerned about the cumulative and often prohibitive costs borne by HPSP participants. Nurses and nurse practitioners are frequently the primary wage earners in their families, and the costs associated with toxicology testing, clinical evaluations, treatment monitoring, and required consultation services can be financially overwhelming—particularly when a participant becomes unemployed or loses health insurance coverage.

Additionally, participants who are referred to inpatient or outpatient treatment programs often face substantial out-of-pocket expenses, exacerbated by a loss of income and health benefits. These financial pressures may compromise a participant’s ability to fully engage in recovery, comply with program requirements, and maintain basic living necessities.

To mitigate this barrier, we respectfully encourage the OSBN to explore alternative solutions and partnerships to reduce the economic impact to participants. Potential avenues may include grants, sliding-scale fees, employer subsidies, or coordination with agencies to cover a portion of the costs or offer a discounted fee. These supports would enhance both individual recovery outcomes and overall program efficacy.

In Closing

The Oregon Nurses Association is deeply grateful for the leadership and thoughtful engagement of the OSBN in reinstating participation in the HPSP program. We recognize the magnitude of the work involved and applaud your commitment to balancing public protection with the preservation of the nursing workforce. Thank you for all you do in advocating for healthcare professionals across our state. We look forward to continued collaboration in supporting Oregon’s nurses and advancing safe, equitable, and compassionate care for all.

With gratitude,

Therese Hooft, MHS, RN, NPD-BC

Nurse Practice Consultant

18765 SW Boones Ferry Rd, Suite 200

Tualatin, OR 97062

www.oregonrn.org

503-293-0011 x1329