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## Changes in Education Requirements for Nursing Programs During COVID-19

Because of the COVID-19 outbreak that is causing practice facilities to limit or refuse clinical experiences, just when we need more nurses in the pipeline, many nursing programs are struggling to find ways to meet students' clinical experiences. Here is a list of changes that some Nursing Regulatory Bodies (NRB) have implemented to facilitate completion of nursing education clinical experiences. When available, we are including pdfs of letters to the deans and directors. The state links under NRBs provide the specific changes to the educational requirements. If an NRB has no changes at this time, the link is to that state's dedicated COVID-19 page.

<b>Boards of Nursing</b>	<b>Relevant Update</b>
<a href="#">Alabama</a>	<i>Letter to deans and directors:</i> Guidance on clinical experiences and preceptorships and on general instructional options.
<a href="#">Alaska</a>	N/A
<a href="#">American Samoa</a>	N/A
<a href="#">Arizona</a>	<i>Arizona Board of Nursing Emergency Declaration:</i> Allows nursing programs to apply for waivers for substituting online teaching for face to face and to replace clinical experiences with simulation.
<a href="#">Arkansas</a>	<i>Direct contact to deans and directors:</i> "The Rules will be flexible; however, detailed documentation needs to be kept to assure all clinical and didactic learning objectives are met, prior to authorizing students completion of their program."
<a href="#">California-RN</a>	N/A
<a href="#">California-PN</a>	N/A
<a href="#">Colorado</a>	N/A
<a href="#">Connecticut</a>	N/A
<a href="#">Delaware</a>	<i>Letter to nursing programs:</i> Calling for nursing programs to be flexible and creative in completing the mandatory clinical hours.  Related to the link, students in an approve nursing program are authorized to conduct medical exams and tests and perform

	administrative duties, as long as they are supervised by a licensed medical professional with an active license.
<a href="#">District of Columbia</a>	N/A
<a href="#">Florida</a>	N/A
<a href="#">Georgia</a>	<i>Letters to LPN and RN nurse educators:</i> BON provides guidance to programs about fulfilling their clinical hours.
<a href="#">Guam</a>	N/A
<a href="#">Hawaii</a>	N/A
<a href="#">Idaho</a>	<i>Letter to deans and directors:</i> Fast-tracking apprenticeship programs, and practice hours will count as clinical hours. <i>Since the attached letter, the following has changed:</i> 1) They have expanded the role of the nurse apprentice on a temporary basis. As part of this temporary program and in compliance with the delegation model, a nurse apprentice is authorized to perform specific nursing functions within the limits of their nursing education and up to the knowledge and skills that they have successfully obtained as verified by their nursing program with direct supervision from a licensed registered nurse. 2) Nursing students that have successfully completed a basic fundamentals nursing course and are in good academic standing may apply for the Nurse Apprentice program. If the Nursing Student/Nurse Apprentice has successfully completed a pharmacology course, they may assist with medication administration. 3) The BON has eliminated the “graduation within 30 days” requirement. If they are senior nursing students in good academic standing to graduate this semester, they are eligible to apply for a New Grad Temp License, even if they are 30+ days away from graduation.
<a href="#">Illinois</a>	N/A
<a href="#">Indiana</a>	<i>Pursuit to Executive order 20-13 (2 e):</i> Suspends requirements for initial licensure (completion of nursing program, CBC, NCLEX), for 90 days, with increments of renewal for 30 days. Will be implemented April 6, 2020.
<a href="#">Iowa</a>	<i>Letter to Nursing Education Programs:</i> Programs are allowed to use more than 50% simulation, though for those students not graduating, the Board strongly encourages the programs to provide additional clinical experiences in the future. 4/1 <i>Memorandum to Nursing Education Programs</i> further answers questions about education modalities.
<a href="#">Kansas</a>	N/A
<a href="#">Kentucky</a>	On March 31, 2020, the governor approved a BON memorandum that relaxed enforcement of two (2) clinical education requirements; and allows for provisional licensure for exam applicants, and temporary work permits for endorsement

	applicants, in circumstances where a criminal background check has not yet been completed. Please follow link for details.
<a href="#">Louisiana-RN</a>	<i>Letter to Nursing Program Deans, Directors and Educators:</i> Asks for programs to submit any actions programs anticipate taking and any restrictions that have been imposed.
<a href="#">Louisiana-PN</a>	N/A
<a href="#">Maine</a>	<i>Letter to nursing program administrators:</i> Flexibility with online teaching and use of simulation, though request the BON be notified.
<a href="#">Maryland</a>	<i>Letter to Maryland Higher Education Commission:</i> Will accept simulation formatted clinical experiences in place of clinicals, as well as other alternative course formats.
<a href="#">Massachusetts</a>	The Board of Registration in Nursing posted an update for student planning in nursing programs. Please follow the link for more information.
<a href="#">Michigan</a>	<a href="#">Executive order 2020-30</a> allows students who are enrolled in programs to become licensed, registered, or certified health care professionals to volunteer or work within the facility in whatever roles that are necessary to support the facility's response to the COVID-19 pandemic and are appropriate to the student's education, training, and experience. <a href="#">Communication to nursing programs</a> allows 100% virtual simulation, or other clinically related online activities, to replace clinical experiences.
<a href="#">Minnesota</a>	<p><i>Direct contact to directors:</i> Thank you for all of your questions related to COVID-19. The board recognizes this very unusual, serious circumstance that continues to evolve. One frequent question is the simulation to clinical ratio:</p> <ul style="list-style-type: none"> <li>• Minnesota Rules are not prescriptive on this ratio although the "standard" used when developing the rules was 1:1.</li> <li>• Note that there are no rigorous studies that support a 1:2 ratio of simulation to clinical experiences, and NCSBN's National Simulation Study only used a 1:1 ratio.</li> <li>• Given the need for flexibility, the program may make the determination to use 1:2.</li> <li>• Recognize there is no prescriptive number of hours for clinical</li> <li>• MR 6301.2340 Subp 3. The nursing education program must "provide a curriculum to enable the student to develop the competence necessary for the level, scope and standards with the type of licensure". <a href="https://www.revisor.mn.gov/rules/6301.2340/">https://www.revisor.mn.gov/rules/6301.2340/</a></li> <li>• The board will continue to explore areas that support your programs.</li> </ul>

<a href="#">Mississippi</a>	Mississippi Institutions of Higher Learning regulates pre-post licensure registered nursing education programs (mississippi.edu/nursing) <i>Direct contact to nurse educators:</i> <b>IHL Nursing Education response to COVID-19:</b> Schools of Nursing are allowed to use a Temporary Undergraduate Simulation Alternate Approval Process for up to 50% and 1:2 ratio substitution.
<a href="#">Missouri</a>	Guidance statement states that prior approval is not needed for temporary distance learning/alternate clinical experiences. Please <a href="#">click here</a> for more information.
<a href="#">Montana</a>	N/A
<a href="#">Nebraska</a>	<a href="#">Letter to deans and directors</a> : Provides strategies programs might use to facilitate clinical experiences being completed.
<a href="#">Nevada</a>	N/A
<a href="#">New Hampshire</a>	The Board Administrator drafted a rule defining “clinical experience” and added changes to requirements during a state of emergency, effective for 180 days from March 16 <sup>th</sup> . Please follow link for more information.
<a href="#">New Jersey</a>	<a href="#">Letter to nursing program administrators</a> : Program should inform Board in writing of any alterations in curriculum delivery or clinical hours.
<a href="#">New Mexico</a>	<a href="#">Memo to nursing education program directors</a> : Provides guidance on where their rules are flexible and on the use of simulation.
<a href="#">New York</a>	<a href="#">Executive order 202.10</a> allows students, in programs to become licensed in New York State, to practice as a healthcare professional and to volunteer at the healthcare facility for educational credit as if the student had secured a placement under a clinical affiliation agreement, without entering into any such clinical affiliation agreement. Additionally <a href="#">Executive order 202.11</a> permits graduates of registered professional nurse and licensed practical nurse licensure qualifying education programs registered by the State Education Department to be employed to practice nursing under the supervision of a registered professional nurse and with the endorsement of the employing hospital or nursing home for 180 days immediately following graduation.
<a href="#">North Carolina</a>	<a href="#">Letter to nursing program directors</a> recognizing flexibility in how program outcomes are met.
<a href="#">North Dakota</a>	N/A
<a href="#">Northern Mariana Islands</a>	N/A
<a href="#">Ohio</a>	<a href="#">Letter to deans and directors</a> . Link has guidance for nursing education programs.
<a href="#">Oklahoma</a>	Link has guidance for nursing education programs.

<a href="#">Oregon</a>	Link has clinical education replacement options. Further <a href="#">update</a> (4/2) on clinical options: senior students working as healthcare workers in acute care.
<a href="#">Pennsylvania</a>	Link describes flexibility for graduates who have been unable to take the NCLEX because of COVID-19
<a href="#">Rhode Island</a>	N/A
<a href="#">South Carolina</a>	<p><i>Direct contact to deans and directors:</i> “The Board has <i>TEMPORARILY</i> removed its position statement on use of simulation as clinicals. The Board reiterates that “Student admission, readmission, progression and graduation are governed by the established policies and procedures of the parent institution and the nursing program.</p> <p>Not all programs are the same across our state, individual program flexibility and creativity is necessary. Take advantage of the teachable moments: Be flexible with your simulation: Consider front-loading theory, providing clinical experiences when available; Optimize the use of apps, assigning written homework, virtual clinicals, tabletop simulations, and using case studies.”</p>
<a href="#">South Dakota</a>	N/A
<a href="#">Tennessee</a>	N/A
<a href="#">Texas</a>	Link to nursing education changes during the COVID-19 outbreak.
<a href="#">Utah</a>	BON does not regulate nursing education/schools must be accredited by a national nursing accreditor.
<a href="#">Vermont</a>	<i>Letter to nursing education programs, directors and deans:</i> Allows for relaxation of requirements of clinical education, including simulation cap of 25%. Changes to the curriculum may be made without prior approval. Programs to continue to meet national nursing accreditation requirements.
<a href="#">Virgin Islands</a>	N/A
<a href="#">Virginia</a>	Link to waivers due to COVID-19
<a href="#">Washington</a>	<i>Letter to dean and directors:</i> Prioritizing clinical spaces, front-loading didactic content, and simulation guidelines during these times.
<a href="#">West Virginia PN</a>	N/A
<a href="#">West Virginia-RN</a>	N/A
<a href="#">Wisconsin</a>	Link specifies changes in online education requirements.
<a href="#">Wyoming</a>	Link to memo from BON to nursing programs: No need to present substantive changes to the BON.

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