

Revised March 25, 2025

In Re: North Carolina Board of Nursing Temporary Waivers in response to the State of Emergency declared by Governor Cooper in response to Hurricane Helene.

On September 25, 2024, Governor Roy Cooper declared a state of emergency due to the impact of Hurricane Helene. Pursuant to the Governor's Declared Statement Number FEMA-4827-DR, the following counties or territories in Western North Carolina were identified:

Alexander, Alleghany, Ashe, Avery, Buncombe, Burke, Caldwell, Catawba, Clay, Cleveland, Gaston, Haywood, Henderson, Jackson, Lincoln, Macon, Madison, McDowell, Mecklenburg, Mitchell, Polk, Rutherford, Swain, Transylvania, Watauga, Wilkes, and Yancey Counties and the Eastern Band of Cherokee Indians.

On October 5, 2024, Governor Roy Cooper issued Executive Order No. 318 (2024) to increase the pool of professional healthcare workers and provide regulatory flexibility to expand healthcare workforce. On October 10, 2024, Session Law 2024-51 – The Disaster Recovery Act of 2024 extended the State of Emergency until March 1, 2025.

On March 19, 2025, Session Law 2025-2, The Disaster Recovery Act of 2025- Part I, extended the State of Emergency until June 30, 2025.

Emergency Temporary Curriculum Waiver for Pre-Licensure Nursing Education Programs

21 NCAC 36 .0321 Curriculum.

- (a) The program curriculum shall:
 - (1) be planned by members of the program faculty;
 - (2) reflect the stated program philosophy, purposes, and objectives, pursuant to 21 NCAC 36 .0302(b)(2);
 - (3) be consistent with Article 9A of G.S. 90 and the Rules in this Chapter governing the practice of nursing;
 - (4) define the level of performance required to pass each course in the curriculum;
 - (5) enable a student to develop the nursing knowledge, skills, and abilities necessary for competent practice consistent with the level of licensure and scope as set forth in 21 NCAC 36 .0221, .0224, .0225, and .0231;
 - (6) include content in the biological, physical, social, and behavioral sciences to provide a foundation for competent and effective nursing practice;
 - (7) provide students the opportunity to acquire and demonstrate, through didactic content and clinical experience under faculty supervision, the knowledge, skills, and abilities required for effective and competent nursing practice in the areas of medical/surgical, obstetric, pediatric, psychiatric/mental health, and community health, across the lifespan; and
 - (8) be revised to reflect changes and advances in health care and its delivery.
- (b) Didactic content and supervised clinical experience across the lifespan appropriate to program type shall include:

- (1) implementing quality and safety principles and practices minimizing the risk of harm to clients and providers through both system effectiveness and individual performance to include clinical judgment, skill in clinical management, time management, and emergency preparedness;
 - (2) using informatics to communicate, manage knowledge, mitigate error, and support decision making;
 - (3) employing evidence-based practice to integrate the best research with clinical expertise and client values for optimal care, including skills to identify and apply best practices to nursing care;
 - (4) providing client-centered, culturally competent care by:
 - (A) respecting client differences, values, preferences, and expressed needs;
 - (B) involving clients in decision-making and care management;
 - (C) coordinating and managing continuous client care consistent with the level of licensure. This shall include a demonstrated ability to delegate and supervise others and provide leadership within the profession appropriate for program type; and
 - (D) promoting healthy lifestyles for clients and populations;
 - (5) working in interdisciplinary teams to cooperate, collaborate, communicate, engage in patient teaching consistent with the level of licensure, and integrate client care and health promotion;
 - (6) participating in quality improvement processes to measure client outcomes, identify hazards and errors, and develop changes in client care; and
 - (7) legal and ethical issues and professional responsibilities of the licensed nurse.
- (c) Clinical experience hours, traditional or simulated, shall accomplish the objectives of the curriculum, shall be supervised by qualified faculty pursuant to 21 NCAC 36 .0318, and shall ensure students' ability to practice at an entry level.
 - (d) All student clinical experiences, including those with preceptors, shall be directed by nursing faculty.
 - (e) A focused client care experience with a minimum of 120 hours shall be provided in the final year of curriculum implementation for programs preparing registered nurses.
 - (f) A focused client care experience with a minimum of 90 hours shall be provided in the final semester of the curriculum for programs preparing practical nurses.
 - (g) Learning experiences and methods of instruction, including distance education methods, shall be consistent with the written curriculum plan and shall demonstrate logical curricular progression.
 - (h) Remediation strategies for students shall be in place at the beginning of each course and include processes to remediate errors in the clinical setting.
 - (i) Objectives for each course shall indicate the knowledge, skills, and abilities expected for competent student performance. These objectives shall:
 - (1) indicate the relationship between the classroom learning and the application of this learning in the clinical experience;
 - (2) serve as criteria for the selection of the types of and settings for learning experiences; and
 - (3) serve as the basis for evaluating student performance.
 - (j) Student course syllabi shall include a description and outline of:
 - (1) the course content;
 - (2) the learning environments and activities;
 - (3) when the course is taken in the curriculum;
 - (4) Allocation of time for didactic content, clinical experience, laboratory experience, and simulation; and
 - (5) evaluation by faculty of student performance, including all evaluation tools used in the course.
 - (k) Each course shall be implemented in accordance with and evaluated by reference to the student course syllabus.
 - (l) Requests for approval of changes in the currently approved curriculum, or expansion of, the program, shall be submitted to the Board in writing at least 60 days prior to implementation for approval by the Board. Criteria for approval shall include program approval status, the availability of classrooms,

laboratories, clinical placements, equipment, and supplies and faculty sufficient to implement the curriculum to an increased number of students. Requests for expansion in enrollment shall be considered only for programs with full approval status.

- (m) The program shall notify the Board at least 45 days prior to implementation of:
 - (1) alternative or additional program schedules; and
 - (2) planned decrease in the Board-approved student enrollment number to accurately reflect program capacity.
- (n) The program shall have written policies and procedures on the following:
 - (1) short-term and long-term plans for integrating simulation into the curriculum;
 - (2) method of debriefing for each simulated activity; and
 - (3) a plan for orienting faculty to simulation.
- (o) For all programs using simulation experiences substituted for clinical experience time, the nursing education program shall:
 - (1) demonstrate that simulation faculty have been formally educated and maintain the competencies in simulation and debriefing; and
 - (2) provide a simulation environment with faculty, space, equipment, and supplies that simulate realistic clinical experiences to meet the curriculum and course objectives.
- (p) Programs shall limit simulation experiences to:
 - (1) no more than 25 percent in the focused client care experience; and
 - (2) no more than 50 percent of clinical experience time in each course.
- (q) External standardized examinations shall not be used to determine a student's progression or graduation in a nursing education program preparing students for initial nurse licensure. When used, external examinations shall not weigh more than 10 percent of the final course grade or final course points calculation.

Waive the provisions of focused client care experience for RNs and LPNs in .0321(e)(f) and limitations on simulation experiences in .0321 (p)(1)(2). The emergency waiver of curriculum requirements is temporary and shall expire on June 30, 2025, unless the waiver provisions are sooner amended, or rescinded by the Board or further Executive Order. These waiver provisions are for the following institutions located in the affected areas which operate an RN and/or LPN pre-licensure nursing education programs:

Appalachian State	Western Carolina University	Isothermal Comm College
Belmont Abbey College	Asheville-Buncombe Tech Comm College	McDowell Tech Comm College
Galen College of Nursing, South College	Blue Ridge Comm College	Mayland Comm College
Gardner-Webb University	Caldwell Comm College & Tech Institution	Region A Nursing Consortium
Lenoir-Rhyne University	Catawba Valley Comm College	Southwestern Comm College
Mars Hill University	Cleveland Comm College	Western Piedmont Comm College
South College	Gaston College	Wilkes Comm College

This waiver does not waive other statutory requirements or limitations. This waiver shall take effect on October 10, 2024, and shall remain in full force and effect until June 30, 2025, or unless sooner amended, or rescinded by the Board or further Executive Order.

Handwritten signature of Crystal L. Tillman in black ink.

Crystal Tillman, DNP, RN, CPNP, PMHNP-BC, FRE
Chief Executive Officer
North Carolina Board of Nursing