Nursing Education and Workforce Advisory Committee Meeting

MEETING MATERIALS

November 18, 2026

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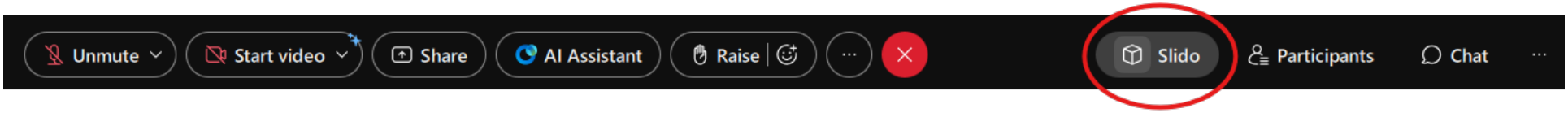
Agenda Item 2.0

General instructions for the format of a teleconference meeting

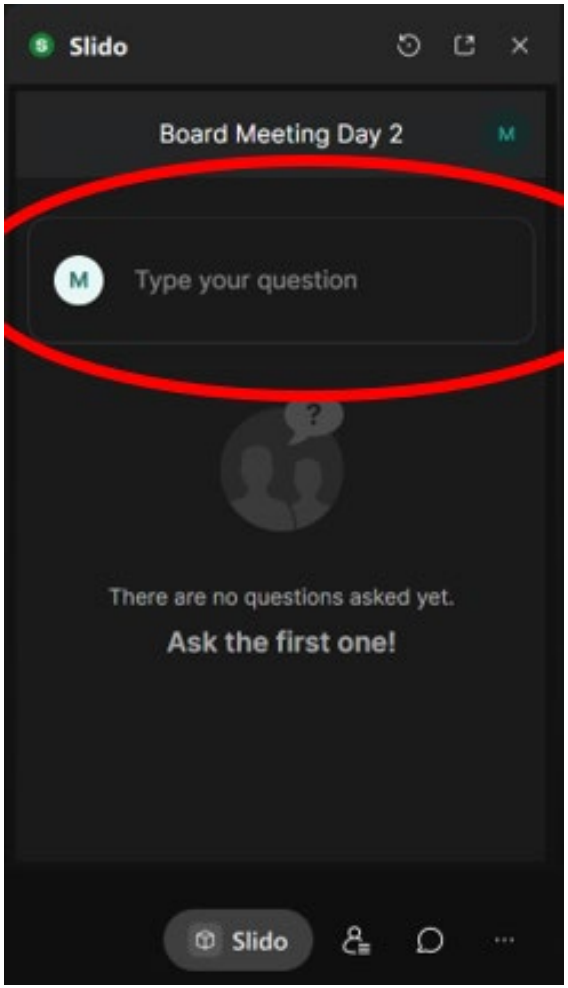
Nursing Education and Workforce Advisory Committee (NEWAC) Meeting | November 18, 2026

Participating During a Public Comment Period

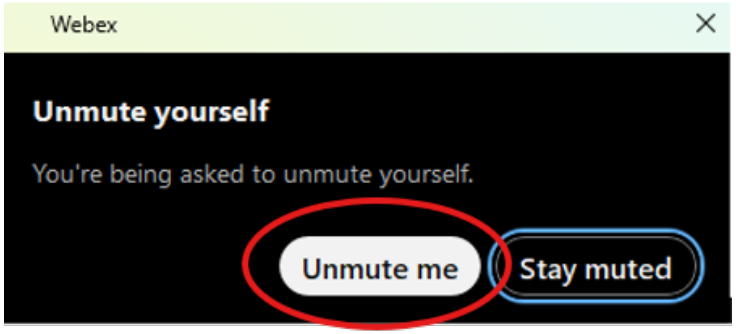
If you would like to make a public comment:



2. The ‘Slido’ panel will appear. (Your screen may look slightly different than pictured depending on Webex version.)



3. In the ‘Slido’ Q&A panel, type “I would like to make a comment.” You will be identified by the name or moniker you used to join the Webex session, and your line will be opened. On the “Unmute yourself” pop-up, click the ‘**Unmute me**’ button (this may be hidden behind other open applications), and you will then be able to provide your comment. Every effort is made to take comments in the order which they are requested.



Agenda Item 4.0

Review and vote on whether to approve previous meeting minutes

Nursing Education and Workforce Advisory Committee (NEWAC) Meeting | November 18, 2026

DRAFT

BOARD OF REGISTERED NURSING
NURSING EDUCATION AND WORKFORCE ADVISORY COMMITTEE
COMMITTEE MEETING MINUTES

Date: January 21, 2026

11:00 am **Start Time:** 11:00 a.m.

Location: The Board of Registered Nursing's Nursing Education and Workforce Advisory Committee (NEWAC) held a public meeting in accordance with Government Code section 11123.5 that was accessible via a teleconference platform and at the primary physical meeting location indicated below:

1747 North Market Blvd.
Hearing Room, Room 186
Sacramento, CA 95834

11:05 am **1.0** **Call to order, roll call, and establishment of a quorum**
Jeannine Graves, Chair, called the meeting to order at 11:05 am. Quorum established at 11:05 am.

Committee Members:
Jeannine Graves, MPA, BSN, RN, OCN, CNOR – Chair
Sagie De Guzman, PhD, A-CNS, ANP-C – Vice Chair
Alice Benjamin, MSN, ACNS-BC, FNP-C, CEN CV-BC
Arielle Hernandez
Cheri Fortin – College Chancellor's Office Member
Chris Perry - HCAI Member (absent)
Garrett Chan, PhD, RN, APRN, FAEN, FPCN, FCNS, FNAP, FAAN
Hazel Torres, MN, RN, DNP (absent)
Jacqueline Bowman
Joanne Spetz, PhD
Judy Kornell, RN
Kathy Hughes, RN
Tammy Vant Hul, PhD, RN, ACNP, CNE
Tanya Altmann, PhD, RN
Wendy Hansbrough, PHN, RN, CNE

BRN Staff:
Loretta (Lori) Melby, RN, MSN – Executive Officer
Reza Pejuhesh, DCA Legal Affairs Division, Attorney
McCaulie Feusahrens, Chief of Licensing Division-Staff Liaison

11:07 am **2.0** **General Instructions for the format of a teleconference meeting**

11:09 am **3.0** **Public comment for items not on the agenda; items for future agendas**

Public Comment for Agenda Item 3.0:

Prestin Sante, Nursing Student, Samuel Merritt University: Commented that the December 2025 workforce data for the Oakland region is invalid. Requested that the NEWAC report include "in-process" rates, rather than only the "graduate" rates for accuracy.

Loretta Melby: Appreciated the student's comment and advised the student to contact the Nursing Education Consultant (NEC) assigned to Samuel Merritt University for further review. She explained the process for calculating rates, including attrition, and stated that submitting a formal complaint could initiate an additional review.

Lysett Ruiz, Nursing Student, Samuel Merritt University: Withdrew comment, stating that Loretta Melby already answered her question. She further commented that she was also a nursing student from Samuel Merritt University who had the same concerns as the previous commenter.

11:15 am **4.0** **Review and vote on whether to approve previous meeting minutes**

- September 10, 2025

Committee Discussion: No committee discussion

Motion: **Judy Kornell**: Motioned to approve the minutes from the September 10, 2025, NEWAC meeting.

Second: **Tanya Altmann**

Public Comment for Agenda Item 4.0: No public requests for comments

Vote	JG	SDG	AB	AH	CF	CP	GC	HT	JB	JS	JK	KH	TVH	TA	WH	
	Y	Y	Y	A	Y	AB	Y	AB	A	Y	Y	Y	Y	Y	Y	
Key: Yes: Y | No: N | Abstain: A | Absent for Vote: AB																

Motion Passed

11:20 am	**5.0**	**Discussion and possible action:** Report from the Board of Registered Nursing's Executive Officer (EO) regarding updates on activities which may impact nursing education and/or workforce, including legislation, policy and procedure changes, regulatory updates, etc.
	Committee Discussion:	Loretta Melby encouraged members to review the Sunset Review Report, noting that a bill will be introduced soon and that the report is mandated for submission in early January. She asked members to review the Executive Summary and Sections 9 and 10, explaining that these sections outline previously addressed issues and planned improvements. She clarified that regulatory updates require supporting statutes in order to move forward. She explained that a new Strategic Plan was adopted in November, highlighting the Board's priorities, and noted that it is available on the Board's website. She emphasized that the outlined projects represent significant upcoming changes and encouraged members to participate in the upcoming legislative session.
	Public Comment for Agenda Item 5.0:	No public requests for comments
11:27 am	**6.0**	**Discussion and possible action:** Report from the seven NEWAC subcommittees: Simulation Standards; Clinical Placement and Impaction; Cultural Competency, Diversity, Pathway to Nursing; Theory Practice Gap and New Grad Orientation; Workforce Retention; Curriculum Standards and Guidelines; and Faculty.
	Committee Discussion:	**Simulation Standards** Garrett Chan reported on completion of the first phase of the work. Loretta Melby explained how completion of this phase is needed, as outlined in Section 10 of the BRN Sunset Report. **Clinical Impaction and Impaction** Garrett Chan mentioned that he and Judy Kornell have been trying to coordinate calendars for the work. Judy Kornell confirmed that they will connect soon. **Cultural Competency** Jacqueline Bowman mentioned that she needs to connect with the other subcommittee member. Loretta Melby explained that person serving in this specific Advisory Committee position can be any representative from the California Community College Chancellor's Office, and the current representative is Cheri Fortin. **Theory Practice Gap and New Grad Orientation**

Wendy Hansbrough stated that there are no updates at this time.

Workforce Retention
Arielle Hernandez reported that she replaced Carmen Comsti on the committee and she looks forward to connecting with Hazel Torres for this subcommittee.

Curriculum Standards and Guidelines
Jeannine Graves and Sagie De Guzman reported that there were no updates

Jeannine Graves provided an overview of AI guardrails and considerations for healthcare implementation. Loretta Melby noted that current guidance is inclusive and referenced California Code of Regulations, title 16 (16 CCR), section 1426, informing members that AI may be incorporated into curriculum discussions. Subcommittees may review this language further, as the minimum standards are written to be inclusive. Programs may also choose to require AI content.

Jeannine Graves asked whether the standardized procedures address curriculum changes or assume a foundational understanding. Loretta Melby clarified that the procedures focus on entry-level expectations and that curriculum updates are not included because they fall under licensing requirements. Mandating curriculum changes would affect all states, territories, and international partners.

Jeannine Graves concluded that this topic may be more appropriately addressed by NCSBN. Loretta Melby added that NCSBN is currently leading national efforts on AI in nursing education and will be providing guidance moving forward.

Faculty
Tanya Altmann reported that she and Tammy Vant Hul conducted a survey of nursing school deans and directors, noting that the response rate was low. Key issues identified included succession planning challenges, low salaries, and the need for faculty to maintain outside employment, approximately a 50/50 split among respondents. Another major barrier was a limited applicant pool of candidates with advanced degrees. Regarding faculty retention, the top concern was salary, cited by 92% of respondents. Additional barriers included insufficient preparation for teaching roles and a high teaching workload, with 81% reporting overload. A notable percentage of directors indicated plans to leave their role within one to five years.

Jeannine Graves asked how retention efforts were being approached. Tanya Altmann explained that strategies include mentoring, budget considerations, and incentive structures.

Tammy Vant Hul added that their focus remains on faculty retention and improvement, acknowledging the seriousness of the issue. Jeannine Graves observed that the situation appears consistent with challenges previously discussed.

Wendy Hansbrough reported that the Cal State system has faced significant budget constraints over the past few years, leaving no additional funding available and creating ongoing challenges. She noted that teaching remains one of the lowest-paid professions, and faculty salaries are tied to university pay scales. While a portion of her faculty are full-time, the majority of lecture faculty are part-time, which further complicates staffing and workload stability.

Tammy Vant Hul noted that the RNI grants have been especially helpful because they emphasize innovative approaches to faculty recruitment and faculty retention. She highlighted that the grants support creative strategies and new initiatives aimed at strengthening and sustaining the faculty workforce.

Alice Benjamin asked how physicians maintain their professor workforce and whether they face challenges similar to those in nursing.

Loretta Melby responded that physicians experience the same issues, noting limited support. She added that APRNs have stepped in to help, providing additional instructional capacity.

Garrett Chan clarified that graduate medical education is primarily funded at the federal level, with approximately $22 billion directed to academic medical centers to support physician training. He emphasized that nursing does not receive comparable state or federal funding. Even with Title VIII funding, about $250,000, and HRSA budget challenges, nursing education continues to struggle.

Wendy Hansbrough added that healthcare organizations are financially committed to medical training, which creates disparities. She noted that securing sufficient clinical sites remains a major challenge each semester, requiring significant effort to locate appropriate placements.

Garrett Chan reiterated that medicine has financial resources that nursing lacks, including public interest funds dedicated to workforce development.

Judy Kornell stated that nursing needs stronger organizational support. She explained that Medicare funding is available within scope-of-practice billing structures, but many organizations choose not to utilize it. She noted that nursing has historically avoided engaging in business models, which has been

detrimental. She emphasized the need for organizations to adopt business-aligned approaches to strengthen nursing's legitimacy and financial positioning.

Loretta Melby reminded the group of Bagley-Keene requirements, stating that a detailed discussion on this topic must be formally agendized in order to comply with legal requirements. She also clarified that the BRN cannot participate in discussions related to faculty wages, pay scales, billing, or reimbursement. While these are important topics, they are not directly within the Board's authority. She recommended holding further clinical-related discussion for the next agenda item.

Joanne Spetz asked the Faculty Committee to review the survey questions used with deans and directors, noting that response rates may have influenced the results. She referenced the annual school survey draft report and encouraged members to consider how the questions align with faculty roles and positions. Regarding economic competencies, she shared that she was invited to participate on behalf of RNs, including chief officers.

Loretta Melby recommended that survey questions be shared through a formal, agendized process to ensure appropriate documentation.

Public Comment for Agenda Item 6.0:

Judy Corless: Asked whether there has been any reporting on clinical site distribution since the Board reduced the requirement of direct patient care clinical training to 500 hours. She noted that during COADN and other meetings, many programs have not reduced their clinical hours, possibly due to limited access to simulation resources. She asked whether leveling down hours would make a difference and whether any statistics are available, stating her belief that it likely would.

Loretta Melby responded that the Board also believes the change will have an impact, but statistics have not yet been collected. She explained that during the COVID-19 state of emergency, the requirement shifted to 18 units, unrelated to direct patient care, which equates to approximately 864 hours still required by schools as a minimum. She noted that previous regulations required 75% of content areas to meet specific clinical hour expectations, but these varied, such as in pediatrics, because there was no standardized formula. The COVID-era shift to 18 units prompted changes, and during Sunset Review, the Board formally reduced direct patient care requirements to 500 hours, reflecting increased use of simulation. Loretta clarified that programs must still meet minimum hour requirements across specialty areas. For example, even meeting the 30-hour minimum in certain specialties was difficult, with some programs reaching only 27 hours and needing to increase hours to comply. She

emphasized that not all programs reduced hours; some had to increase psychiatric hours to meet minimums.
She reiterated that California is now better aligned with national standards, but the Board sets minimums, not maximums. Programs may allocate clinical units across any direct patient care experiences as long as they meet clinical objectives. The Board does not approve decreases below the minimum requirements.

12:10 pm **Recess:** Jeannine Graves called the meeting to recess for a break until 12:20 pm.

12:22 pm **Reconvene:** Jeannine Graves called the meeting to order and reestablished a quorum.

12:24 pm **7.0** **Discussion and possible action:** Requirements in Senate Bill 1015 for NEWAC to study and recommend standards regarding how approved schools of nursing or nursing programs manage or coordinate clinical placements, and to report to the Legislature; presentation by Garett Chan on Health Impact's receipt of grant funding from California Health Care Foundation to study clinical placements.

Garrett Chan provided an update related to Senate Bill 1015 and the legislative charge assigned to NEWAC. He noted that the work required is substantial and claimed that it is currently an unfunded mandate. Because of this, he engaged the California Health Care Foundation (CHCF), which has shown strong interest in health professions workforce issues. He explained that CHCF previously funded a project led by Dr. Diane Wittenhouse of Mathematica, a policy research organization. That project examined clinical placement and rotation availability across multiple programs in California, including MD, DO, NP, and PA programs. The final Mathematica report is expected within the next two months. Garrett shared that, through his role as CEO and President of HealthImpact, he approached CHCF to propose a similar study focused on nursing. CHCF awarded a small grant for salary support to examine clinical placements, incorporating issues raised in Senate Bill 1015. He informed the Committee that this work is underway and that additional information will be available over the coming year.
He emphasized that NEWAC retains full discretion regarding how it chooses to use or not use the study's findings, acknowledging NEWAC's legislative mandate. He noted that the study will use a public and inclusive methodology and reiterated his intent to ensure progress on the required work. He stated that the topic has not yet been formally initiated but wanted to make this announcement during the meeting.

Loretta Melby clarified that SB 1015 is now law and requires the Board to submit a report to the Legislature. She thanked Garrett Chan for identifying needed work but emphasized that HealthImpact's study cannot substitute for the Board's mandated report; it may serve only as one data point, not the full submission.

Cheri Fortin asked for an update on actions taken since the bill's introduction in 2023. Loretta explained that because NEWAC meets only twice a year, subcommittees were formed to carry out the work referenced in Garrett's report. The scope of the assignment is substantial, and while reviews have begun, no formal product has yet been developed. She noted that additional legislation may eventually be required due to the size of the undertaking.

Judy Kornell highlighted challenges related to the number of participants and subcommittees. Loretta reminded members of Bagley-Keene requirements, noting that any committee discussion amongst a quorum must be publicly noticed. Subcommittees allow more frequent meetings and broader input while maintaining compliance.

Arielle Hernandez clarified her understanding that the clinical placement study is a third-party analysis for subcommittee review, not approval. She expressed concern about approving a study without BRN direction. Loretta confirmed that NEWAC is not approving the study, only reviewing information relevant to clinical placements.

Garrett Chan stated that his intention is to provide information to support NEWAC's work. He noted that future legislation may be needed and emphasized the importance of volunteer participation to meet timelines established in SB 1015.

Loretta encouraged continued discussion on clinical placements so members can carry accurate information forward. She noted that NEWAC includes representatives from workforce organizations, APRN groups, CACN, COADN, CSU and Community College Chancellor's Offices, unions, HCAI, and research vendors, offering a wide range of expertise.

Cheri Fortin asked whether the presentation was specific to Dr. Chan. Loretta clarified that it was not; the discussion centered on statutory requirements in Business and Professions Code section 2785.6(h)(1). She also reviewed the history of statewide and regional clinical consortium efforts and challenges related to clinical site availability when programs seek to expand. Loretta explained that the Board has no jurisdiction over clinical facilities, only academic programs. Clinical placement issues often arise when facilities are not part of consortiums or do not

report placements. She also noted differences in curriculum units across programs, which complicate statewide alignment.

Judy Kornell referenced AB 1577, noting gaps in data related to private schools and out-of-state programs. Loretta clarified that out-of-state programs cannot place students in clinical training performing patient care in California unless they are BRN-approved, and any program doing so would be violating the law. Loretta also corrected misconceptions about faculty presence during clinical hours, explaining that preceptor models are allowed and support apprenticeship pathways. Programs must document non-faculty experiences, but faculty do not need to be physically present at all sites. She further explained that AB 1577 requires facilities to participate in conversations about placements, and HCAI will use BRN-collected data. Some facilities are stuck in approval processes, preventing NEC review and tying up resources.

Loretta described improvements in clinical placement data collection, transitioning from paper-heavy EDP-18 forms to a system where schools enter placement information, facilities verify it, and NECs review it. This will eventually allow supply and demand analysis, regional comparisons, and public reporting of placement capacity.

Wendy Hansbrough noted confusion among schools regarding clinical site requirements. Loretta confirmed that clinical sites themselves have no direct obligations under the Board's purview; nursing programs must secure contracts under 16 CCR section 1427 and submit documentation to NECs.

Loretta Melby explained that the EDP-P-18 form fulfills the requirements under section 1427, confirming that programs have met all regulatory criteria for clinical placements. She noted that the Board is transitioning away from the EDP-P-18 toward the Clinical Facility Authorization (CFA) Data Bank, although some programs still rely on the older form. She reported that many healthcare facilities are not logging into the CFA to approve placements, which prevents programs from using those sites. The Board's authority, though not preferred, is to inform schools that they cannot use a clinical site unless the facility approves it. This places a significant burden on programs to work directly with facilities to ensure they log in and confirm placements. Loretta emphasized the importance of collaboration between programs and clinical partners. When programs negotiate placements, identifying days, times, number of students, faculty, and objectives, facilities need only log in and click "approve." She stressed that this is not a heavy lift for facilities. She explained that the requirement for facility approval was implemented due to clinical placement fraud during COVID-19. Some academic institutions reported using clinical sites that did not exist or were not actually providing

placements, resulting in the removal of more than 500 fraudulent placements. As a consumer protection agency, the Board must intervene when programs submit inaccurate or falsified data or fail to provide promised direct patient care experiences. She also noted that some programs attempted to use clinical sites that could not meet required objectives, such as daycare settings for pediatric clinical competencies. NECs must review placements to ensure alignment with curriculum and objectives. If a site cannot meet objectives, programs must either adjust objectives or use simulation as a supplemental method. She concluded by noting that simulation can serve as an adjunct to direct patient care when appropriate, but the overall process remains complex due to varying clinical objectives and site capabilities.

Wendy Hansbrough asked where on the Board's website the portal is located. Loretta Melby explained that the CFA has already been emailed to all program directors and their designees, and multiple training sessions were offered in April and May. Program directors are not required to manage the system themselves as clinical placement coordinators or designated faculty may handle data entry and approvals. She acknowledged concerns raised about facilities where numerous schools submit placement requests. She confirmed that this issue was evident during the initial rollout of the CFA when inconsistent information was provided by different contacts within the same facility, such as conflicting availability or capacity estimates. This resulted in poor-quality and duplicative data. To address these issues, the Board is developing a single clinical facility profile and a single school profile, each completed once and used for all future placement activity. With nursing programs statewide, this change will eliminate repeated submissions and establish a consistent foundation for analyzing supply and demand across clinical sites. Loretta stated that these profiles are currently in development and will be released soon, accompanied by instructions for completion.

Garrett Chan concluded the discussion by noting that the group had engaged in a robust conversation on a complex topic. He thanked members for their contributions and acknowledged that some follow-up work will need to occur offline.

	Public Comment for Agenda Item 7.0:	No public requests for comments
1:33 pm	**8.0**	**Information only:** Presentation of the Accreditation Commission for Education in Nursing (ACEN) Joint Accreditation Continuing Approval Visit crosswalk that aims to minimize duplication, reduce the burden on nursing programs, and improve efficiency.

	Committee Discussion:	Loretta Melby reported that the crosswalk was only published earlier this morning and is still in its infancy stages. She noted that the Board will continue to facilitate development as much as possible. She explained that we're beginning with ACEN, followed by CCNE, and then NLN CNEA. She presented the crosswalk, explaining how it illustrates alignment across accrediting bodies. Loretta emphasized that once fully implemented, this crosswalk will provide effective and efficient data that will significantly benefit California's nursing education landscape.
	Public Comment for Agenda Item 8.0:	No public requests for comments
1:57 pm	**Adjournment:**	Jeannine Graves, Chair, adjourned the meeting at 1:57 p.m.

Agenda Item 5.0

Discussion and possible action: Regarding election of Chair and Vice Chair positions

Nursing Education and Workforce Advisory Committee (NEWAC) Meeting | November 18, 2026

BOARD OF REGISTERED NURSING
Nursing Education and Workforce Advisory Committee Meeting
Agenda Item Summary

AGENDA ITEM: 5.0
DATE: November 18, 2026

ACTION REQUESTED: **Discussion and possible action:** Regarding election of Chair and Vice Chair positions

REQUESTED BY: Loretta Melby, Executive Officer

BACKGROUND:

NEWAC members will nominate and vote on a committee Chair and Vice Chair to facilitate meetings in collaboration with the Board's Executive Officer. The Chair will develop the meeting agendas in collaboration with the Board's Executive Officer, staff liaison, and other Board support staff. The Vice Chair has the authority to perform the committee Chair's duties in the Chair's absence and is knowledgeable regarding issues that impact NEWAC and the policies and procedures by which the committee must be run. Members must be available for telephone and email consultation with BRN staff relative to program work and other program issues.

RESOURCES:

NEXT STEPS:

FISCAL IMPACT, IF ANY: None

PERSON(S) TO CONTACT:
McCaulie Feusahrens
Chief of the Licensing Division
California Board of Registered Nursing
mccaulie.feusahrens@dca.ca.gov

Agenda Item 6.0

Discussion and possible action: Regarding meeting dates for 2026

Nursing Education and Workforce Advisory Committee (NEWAC) Meeting | November 18, 2026

BOARD OF REGISTERED NURSING
Nursing Education and Workforce Advisory Committee Meeting
Agenda Item Summary

AGENDA ITEM: 6.0
DATE: November 18, 2026

ACTION REQUESTED: **Discussion and possible action:** Regarding meeting dates for 2027

REQUESTED BY: Loretta Melby, Executive Officer

BACKGROUND:

The NEWAC will meet twice per year. Meetings will be open to the public and adhere to the Bagley-Keene Open Meeting Act requirements. Special meetings may be held at such times as the Board may elect, or on the call of the Board President or the Executive Officer.

A proposed schedule is included in the meeting materials.

RESOURCES:

NEXT STEPS:

FISCAL IMPACT, IF ANY: None

PERSON(S) TO CONTACT:
McCaulie Feusahrens
Chief of the Licensing Division
California Board of Registered Nursing
mccaulie.feusahrens@dca.ca.gov

Board, Committee, and Advisory Committee Meetings in 2027

January 20, 2027	**Board Advisory Committee Meeting** Nursing Education and Workforce Advisory Committee
February 10-11, 2027	**Board Committee Meetings** Nursing Practice Committee Education/Licensing Committee Enforcement, Investigations, and Intervention Committee Legislative Committee
March 24, 2027	**Board Meeting**
April 2027	**Board Advisory Committee Meeting** Clinical Nurse Specialist Advisory Committee Certified Registered Nurse Anesthetist Advisory Committee Nurse-Midwifery Advisory Committee Nurse Practitioner Advisory Committee
May 12-13, 2027	**Board Committee Meetings** Nursing Practice Committee Education/Licensing Committee Enforcement, Investigations, and Intervention Committee Legislative Committee
June 23, 2027	**Board Meeting**
July 28, 2027	**Board Advisory Committee Meeting** Nursing Education and Workforce Advisory Committee
August 4-5, 2027	**Board Committee Meetings** Nursing Practice Committee Education/Licensing Committee Enforcement, Investigations, and Intervention Committee Legislative Committee
September 22, 2027	**Board Meeting**
October 2027	**Board Advisory Committee Meetings** Clinical Nurse Specialist Advisory Committee Certified Registered Nurse Anesthetist Advisory Committee Nurse-Midwifery Advisory Committee Nurse Practitioner Advisory Committee
November 3-4, 2027	**Board Committee Meetings** Nursing Practice Committee Education/Licensing Committee Enforcement, Investigations, and Intervention Committee Legislative Committee
December 8, 2027	**Board Meeting**

Agenda Item 7.0

Discussion and possible action: Report from the Board of Registered Nursing's Executive Officer (EO) regarding updates on activities which may impact nursing education and/or workforce, including legislation, policy and procedure changes, regulatory updates, etc.

Nursing Education and Workforce Advisory Committee (NEWAC) Meeting | November 18, 2026

BOARD OF REGISTERED NURSING
Nursing Education and Workforce Advisory Committee Meeting
Agenda Item Summary

AGENDA ITEM: 7.0
DATE: November 18, 2026

ACTION REQUESTED: **Discussion and possible action:** Report from the Board of Registered Nursing's Executive Officer (EO) regarding updates on activities which may impact nursing education and/or workforce, including legislation, policy and procedure changes, regulatory updates, etc.

REQUESTED BY: Loretta Melby, Executive Officer

BACKGROUND:

Loretta Melby, Executive Officer for the Board of Registered Nursing, will provide updates on Board activities which may impact nursing education and/or workforce, including legislation, policy and procedure changes, regulatory updates, etc.

RESOURCES:

NEXT STEPS:

FISCAL IMPACT, IF ANY: None

PERSON(S) TO CONTACT:
McCaulie Feusahrens
Chief of the Licensing Division
California Board of Registered Nursing
mccaulie.feusahrens@dca.ca.gov

Agenda Item 8.0

Discussion and possible action: Regarding possible assignment/reassignment of members and/or topics to subcommittees and updates from subcommittees: Simulation Standards; Clinical Placement and Impaction; Cultural Competency, Diversity, Pathway to Nursing; Theory Practice Gap and New Grad Orientation; Workforce Retention; Curriculum Standards and Guidelines; and Faculty.

Nursing Education and Workforce Advisory Committee (NEWAC) Meeting | November 18, 2026

BOARD OF REGISTERED NURSING
Nursing Education and Workforce Advisory Committee Meeting
Agenda Item Summary

AGENDA ITEM: 8.0
DATE: November 18, 2026

ACTION REQUESTED: **Discussion and possible action:** Regarding possible assignment/reassignment of members and/or topics to subcommittees and updates from subcommittees: Simulation Standards; Clinical Placement and Impaction; Cultural Competency, Diversity, Pathway to Nursing; Theory Practice Gap and New Grad Orientation; Workforce Retention; Curriculum Standards and Guidelines; and Faculty.

REQUESTED BY: Loretta Melby, Executive Officer

BACKGROUND:

The seven NEWAC subcommittees will provide updates on work conducted. The subcommittees and members are as follows:

- Simulation Standards*:
- Clinical Placement and Impaction*: Judy Kornell
- Cultural Competency, Diversity, Pathways to Nursing: Jacqueline Bowman and Cheri Fortin
- Theory Practice Gap and New Grad Orientation: Christopher Harkins and Wendy Hansbrough
- Workforce Retention: Hazel Torres and Arielle Hernandez
- Curriculum Standards and Guidelines*: Sagie De Guzman
- Faculty*: Tammy Vant Hul

**Asterisk next to subcommittee name indicates that a seat on the subcommittee is presently vacant.*

The committee may assign/reassign members and/or topics to subcommittees, if needed.

RESOURCES:

NEXT STEPS:

FISCAL IMPACT, IF ANY: None

PERSON(S) TO CONTACT:
McCaulie Feusahrens
Chief of the Licensing Division
California Board of Registered Nursing
mccaulie.feusahrens@dca.ca.gov

Agenda Item 9.0

Information and discussion only: Overview of Senate Bill 1302 (BRN's Sunset bill) and updates on the legislative process

Nursing Education and Workforce Advisory Committee (NEWAC) Meeting | November 18, 2026

BOARD OF REGISTERED NURSING
Nursing Education and Workforce Advisory Committee Meeting
Agenda Item Summary

AGENDA ITEM: 9.0
DATE: November 18, 2026

ACTION REQUESTED: Information and discussion only: Overview of Senate Bill 1302 (BRN's Sunset bill) and updates on the legislative process

REQUESTED BY: Loretta Melby, Executive Officer

BACKGROUND:

Loretta Melby, Executive Officer, will provide an overview of Senate Bill (SB) 1302, the BRN's Sunset bill, and the legislative process.

RESOURCES:

SB 1302 (legislative text, bill analysis, etc.):
https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202520260SB1302

The most recent BRN Sunset Report, background papers, and other reports submitted to the Legislature are linked below, and similar documents from prior years can be found on the BRN website:

- 2026 Sunset Review Report
- 2026 Background Response Paper

NEXT STEPS:

FISCAL IMPACT, IF ANY: None

PERSON(S) TO CONTACT:
McCaulie Feusahrens
Chief of the Licensing Division
California Board of Registered Nursing
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Agenda Item 10.0

Information and discussion only: Overview of the 2026 Regional Forecasts of the Registered Nurse Workforce in California report

Nursing Education and Workforce Advisory Committee (NEWAC) Meeting | November 18, 2026

BOARD OF REGISTERED NURSING
Nursing Education and Workforce Advisory Committee Meeting
Agenda Item Summary

AGENDA ITEM: 10.0
DATE: November 18, 2026

ACTION REQUESTED: Information and discussion only: Overview of the 2026 Regional Forecasts of the Registered Nurse Workforce in California report

REQUESTED BY: Joanne Spetz, PhD
Nursing Education and Workforce Advisory Committee

BACKGROUND:

Joanne Spetz, Director, Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco, will provide an overview of the 2026 Regional Forecasts of the Registered Nurse Workforce in California report.

RESOURCES:

Regional Forecasts of the Registered Nurse Workforce in California 2026:
https://www.rn.ca.gov/pdfs/forms/forecast2026.pdf

NEXT STEPS:

FISCAL IMPACT, IF ANY: None

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