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***2021 NCSBN Scientific Symposium - Global Regulatory Response to the COVID-19 pandemic: A Descriptive Study Video Transcript***  
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**Event**

2021 NCSBN Scientific Symposium

More info: [ncsbn.org/15185.htm](https://ncsbn.org/15185.htm)

**Presenter**

Nicole K. Ozturk, PhD, MA, Research Scientist I, NCSBN

- [Woman] Nicole Ozturk is a research scientist at NCSBN. Dr. Ozturk received her Ph.D. in education psychology in 2018 focusing on Bayesian applications to psychometric data. In addition, she has five years experience drawing upon quantitative analytical techniques to deliver actionable data products in an education setting. Dr.

Ozturk's previous projects include developing a Bayesian augmented testing algorithm, evaluating student competencies, and learning outcomes in healthcare curricula.

- [Dr. Ozturk] Good afternoon. I'm Nicole Ozturk and my talk is titled Global Regulatory Response to the COVID-19 Pandemic: A Descriptive Study. We'll do a live Q&A at the end of the session. So throughout the presentation, feel free to enter questions you have in the Q&A box.

To begin, I will outline the general structure of my talk today. I will start out with some limited background information, my primary research question, research design and methodology, analysis plan, respond in distribution, the results of my study, and finally, a summary of key findings.

As of February 2021, the World Health Organization reports cumulatively there have been 103 million confirmed cases of COVID-19 and 2.2 million resulting deaths. The monumental swell of the COVID-19 pandemic has strained healthcare systems and personnel worldwide.

With nurses serving on the frontlines of hospitals, there are increasing concerns that nurses' capacity to provide care will be stretched to the breaking point by rising need. Nursing regulatory bodies have taken a variety of actions to safeguard the nursing profession. The primary goal of this study is to examine what changes have been made and if these changes are permanent, temporary, or somewhere in between.

In particular, we were interested in identifying changes in telehealth, nursing mobility, education, and the disciplinary process. To address this question, a web survey was developed in collaboration with

NCSBN staff and sent to about 150 individuals representing non-U.S. nursing jurisdictions. The survey was sent on January 2021 and closed in February.

The survey was developed to better understand what changes jurisdictions had made during the COVID-19 pandemic. The web survey was developed in and administered with Qualtrics. The Global Regulatory Atlas: COVID-19 Pandemic Response Survey consisted of 41 items with branching logic across governance, practice and workforce, education, telehealth, and discipline domains.

The web survey was then translated into 11 languages to increase the diversity of responses. Our final sample consisted of 30 jurisdictions. Frequencies and counts were drawn upon to evaluate jurisdiction changes as a result of the COVID-19 pandemic. All analyses were conducted in SAS and Tableau. Google Translate was used to interpret free-response items.

As mentioned on the previous slide, we had 30 jurisdictions participate in our COVID Response Survey resulting in a 21% response rate. In the map above, countries are represented in teal while provinces are colored in blue. To begin, we asked jurisdictions about changes to nursing regulatory governance.

More specifically, we asked about any sort of regulatory actions taken to facilitate the movement of nurses in or out of their jurisdiction. Interestingly enough, roughly one-third or about 10 jurisdictions of our sample, colored green on this map, indicated legislative action was taken to support the movement of nurses in and out of the jurisdiction.

Those that have not are colored red. Next, we asked respondents about their jurisdiction practice and workforce changes. In terms of nursing practice, only Poland and Sweden along with Honduras and El Salvador expanded the role of the nurse generalists during the pandemic. Sweden, for example, had expanded the role of nurse generalists and pediatric nurses to prescribe the COVID-19 vaccine, provided they can demonstrate knowledge related to vaccinations.

We found five other jurisdictions also indicated they temporarily altered the process of accepting internationally educated nurses into their respective jurisdictions. For example, El Salvador temporarily accepted to nurses educated in Spain as part of an international team to treat COVID-19 patients. One-third of our sample altered their continued competency requirements for generalist nursing, moving courses to online and distance learning platforms, and offering courses in infectious diseases as was the case in Taiwan, personal protective equipment and ethics as is the case in Seychelles, and emergency care as was the case in the Solomon Islands.

And one last element, 16 jurisdictions in our sample allowed retired nurses to reenter the workforce. We then moved on to changes made to nursing education during the COVID-19 pandemic. Similar to what we have seen in our U.S. pre-licensure study in which we examined the shift from in-person lectures to online learning environments, two-thirds of our sample or about 20 jurisdictions moved a portion of their lecture-based curriculum to online learning environments.

Further, most indicated such changes were a mix of both temporary and permanent. We then asked about disruptions to the clinical curriculum. Slightly fewer jurisdictions, 18 in our sample, indicated that their clinical curriculum was disrupted due to the pandemic. The most often identified solutions were offering clinicals through simulation, virtual simulation, and waivers to clinicals entirely.

All others indicated there was a general delay or the pandemic did not influence their clinical offerings to a great degree. No jurisdiction indicated these changes were permanent, rather most indicated the changes were a mix of temporary and permanent. Lastly, with the exception of El Salvador, all jurisdictions reported students would not be allowed to graduate early to enter the workforce.

As for discipline during the pandemic, most jurisdictions observed about the same number of complaints relative to pre-pandemic times. In addition, an even larger majority indicated that they did not alter their disciplinary process. Of those that adjusted their disciplinary process, the jurisdiction of Newfoundland and Labrador simply indicated hearings were just held online.

In terms of telehealth changes, about 30% of the jurisdictions in our sample made changes to their telehealth policies. This included clarifying telehealth scope of practice and developing guidelines for virtual care. Again, a little over a third of the jurisdictions addressing this question reported their population received care via telehealth.

However, only 15% of our sample reported that nurses based in their own jurisdictions were providing care outside of their borders. In summary, the COVID-19 pandemic has strained nurses' capacity to provide care and as a result, nursing regulatory bodies had taken a variety of actions to support the nursing workforce.

The most significant changes appear to have been nursing education as clinicals have been shifted to simulation and lecture-based courses to online learning environments. Additionally, jurisdictions in our sample have brought retired nurses back into the workforce to supplement the current group and offered virtual continued competency courses on COVID-19 preparedness.

Residents within these jurisdictions are also receiving cross-jurisdictional care. It's unclear if these changes will remain temporary or permanent. As our study found, jurisdictions made numerous changes during the COVID-19 pandemic which invites the question of how all these changes will impact the future of nursing.

Thank you for listening to my talk. I'd like to open the floor for any questions. All right. One of the questions we received from Allison was, "Can you repeat if telehealth changes were temporary or permanent?"

So we did ask our sample countries or jurisdictions if these changes were temporary or permanent, and we received a middle ground answer. So some said that they were temporary and some said that they would remain permanent. It doesn't seem there was a lot of clarity yet if they will remain permanent at this time.

All right. It doesn't appear we have any other questions. Again, if you have any additional questions that pop up a little bit later, you're certainly welcome to email me at [nkaminski-ozturk@ncsbn.org](mailto:nkaminski-ozturk@ncsbn.org). Thank you and have a lovely afternoon.