We understand that the ability for students to finalize their 400 clinical hours has been difficult for many of you as we continue to deal with the COVID-19 pandemic. Rest assured that the Commission on Nurse Certification (CNC) is here to oversee the CNL Certification Program and also clarify questions that you may have.

We agree with supporting the students and being as flexible as possible. Our guidelines for the CNL certification program come from the American Association of Colleges of Nursing's (AACN) Competencies and Curricular Expectations for Clinical Nurse Leader℠ Education and Practice and AACN's Recommended CNL Practice Experiences. Note that the Commission on Collegiate Nursing Education (CCNE) has also released Guidance to Accredited Nursing Education Programs Related to COVID-19 Pandemic.

As quoted in AACN's 2013 Competencies and Curricular Expectations for Clinical Nurse Leader Education and Practice, "The total number of clinical hours should be determined by the CNL program faculty. However, each CNL student should complete a minimum of 400 clinical/practice hours as part of the education program. In addition to the clinical/practice experiences integrated throughout the education program, an extended practice immersion experience, prior to graduation, mentored by an experienced CNL or other appropriate clinicians/professionals, is critical to the effective integration of CNL practice into the healthcare delivery system. A minimum of 300 of the 400 total practice hours should be dedicated to the immersion experience(s)."

As per AACN's 2017 Recommended CNL Experiences, "Ideally, the student should have the opportunity, either face-to-face or virtually, to be precepted or mentored. The immersion may be completed in one setting or in several settings with different preceptors depending upon the needs of the student."

At this time, in order to sit for the CNL Certification Exam, and as part of the CNL Education Program requirements, CNC will continue to require that students complete a minimum of 400 clinical hours of which 300 must be in a clinical immersion experience. Students who are currently registered for the CNL Certification exam during the spring testing period are eligible to sit for the test as long as they have completed their total 400 clinical hours by June 30th.

If students are unable to complete their 400 clinical hours and are registered to take the CNL Exam in the spring, they will need to switch their exam registration to another testing period in order to complete the required clinical hours. CNC has waived the exam date change fee for all students in this situation through May 31st. CNL Program Directors will need to contact CNC staff at CNL@aacnnursing.org and provide the names of students who will not meet the 400 clinical hour requirement by June 30th.

Due to the COVID-19 pandemic, CNC has provided a waiver to extend the spring 2020 testing period for all candidates. The spring testing period will now end on June 30, 2020. CNC is also offering Live Remote Proctoring for candidates taking the exam during the Spring testing cycle. CNC has been notified by Prometric SMT that all testing centers will be closed through May 31st and are scheduled to re-open on June 1st.

We continue to monitor the COVID-19 situation and will make necessary adjustments to the CNL Certification Program to assist candidates. To stay abreast of updates to the CNL Certification Program, visit CNC's COVID-19 Information webpage.
Innovative Ways for CNL Students to Complete their Clinical Hours

- Take courses through LinkedIn Learning - useful for some CNL competencies.

- Complete the Institute for Healthcare Improvement (IHI) modules and case studies. IHI’s Basic Certification is at no cost to schools or students. Embed it into a course where faculty could assign a reasonable number of hours. Elaborate on some of the case studies from the IHI course in VoiceThread/BlackBoard discussions.

- Adapt assignments from other courses and specialties, role play different scenarios, and review case-studies.

- Collect data from student’s competency logs to determine which competencies have they had experiences in and not. Tailor clinical experiences based on student data.

- Students can write letters to politicians based on the AACN Policy and Advocacy newsletters in reference to bills.

- Visit with finance officers at the facility (in person or remotely) for competencies on finance.

- Students can call nursing home residents twice a week. Note: they must go through the administrator to ensure HIPPA compliance.

- Students could participate with leaders in COVID-19 planning meetings and work with nurse executives on staffing. Address how the hospital will orient new employees. Determine other plans in process to orient at the microsystem level.

- Participate in AACN webinars covering simulation.

- Participate in community volunteer/engagement experiences that could align with health promotion, policy, and/or population health. Sign-up to deliver prepared meals by a local food cupboard. Students could also complete assigned readings about social determinants of health, share experiences on BB/online, and respond to faculty posed questions.

- Respond to a community request to review COVID-19 prevention with a community agency serving immigrant populations (aligns with population health, health education, interprofessional practice, diversity/inclusion, vulnerable population). Collaborate with local clinics and community programs to identify needs.

- Shadow/assist in a COVID-19 hospital command center by fielding calls, collecting, and tracking data to answer evaluation questions.

- Students could do a self-assessment of their competencies and tie their work to the CNL Competencies and AACN’s Recommended CNL Practice Experiences.

- Students could enhance the evaluation of their immersion project, add secondary data elements, develop a plan for the next test of change or adapt to another microsystem. They can also work on a poster presentation and submit an abstract of their immersion projects.