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24101202D SENATE BILL NO. 35

Offered January 10, 2024 Prefiled December 16, 2023

A BILL to direct the Board of Medicine and the Board of Nursing to require completion of training on unconscious bias and cultural competency as part of their continuing education and continuing competency requirements for licensure.

Patrons—Locke, Carroll Foy, Head and Aird

Referred to Committee on Education and Health

Be it enacted by the General Assembly of Virginia:

1. § 1. That the Board of Medicine shall, pursuant to its authority under § 54.1-2928.3 of the Code of Virginia, require that licensees complete continuing learning activities on the topic of unconscious bias and cultural competency. The Board of Nursing shall promulgate regulations requiring that the continued competency requirements for renewal of an active license shall include completion of unconscious bias and cultural competency training. The Board of Medicine and Board of Nursing shall designate organizations that identify and facilitate an evidence-based curriculum to comply with this legislation. Such unconscious bias and cultural competency training shall be required for every license renewal period for licensees of the Board of Medicine and Board of Nursing.

§ 2. That the first unconscious bias and cultural competency training required pursuant to § 1 of this act shall be comprehensive and cover how unconscious racial bias affects care during pregnancy and the postpartum period. Subsequent unconscious bias and cultural competency training shall provide relevant practice-related content as determined by the Board of Nursing and Board of Medicine. The Board of Medicine and Board of Nursing shall update the training as they identify additional needs.

§ 3. That the Board of Medicine and Board of Nursing shall evaluate the impact of training required pursuant to § 1 of this act and develop a method for assessment of its effectiveness. The Board of Medicine and Board of Nursing shall report the number of licensees who have successfully completed the training as well as recommendations for training improvement to the Department of Health and the Virginia Neonatal Perinatal Collaborative to be included in their annual reports.