

VISIONSERIES TRANSFORMING NURSING EDUCATION LEADING THE CALL TO REFORM

NLN VISION STATEMENT: ARTIFICIAL INTELLIGENCE (AI) IN NURSING EDUCATION

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MISSION

The National League for Nursing promotes excellence in nursing education to build a strong and diverse nursing workforce to advance the health of our nation and the global community (National League for Nursing, n.d.).

CORE VALUES

The National League for Nursing implements its mission guided by four dynamic and integrated core values that permeate the organization and are reflected in its work: Caring, Integrity, Diversity & Inclusion, and Excellence (National League for Nursing, n.d.).

INTRODUCTION

As artificial intelligence (AI) rapidly transforms healthcare delivery, nursing education must evolve in parallel to prepare future nurses for the opportunities and challenges of a technology-driven environment. All is no longer a futuristic concept—it is actively reshaping clinical decision-making, workforce operations, and patient engagement. In this context, nursing educators have a responsibility to ensure graduates are not only competent in clinical practice, but also equipped with the knowledge, critical thinking skills, and ethical grounding to interact with and shape AI technologies responsibly.

This vision statement is a call to action for nursing programs and their collaborative partners to align with national priorities, promote innovation, and uphold the NLN's core values while integrating Al into curricula, research, and practice. Centered on excellence, inclusivity, and integrity, this vision statement aims to help build a digitally literate, ethically grounded, and innovation-ready nursing workforce capable of leveraging Al to advance health for all communities.

BACKGROUND

The integration of Al into healthcare is rapidly transforming practice, education, and policy. For nursing, this shift represents both a challenge and a critical opportunity to modernize curricula, prepare future nurse leaders, and ensure inclusive, high-quality care. Nursing education must proactively evolve to include foundational Al knowledge, clinical applications, and ethical considerations, all while addressing challenges in care access and outcomes. This vision statement outlines a strategic framework for integrating Al into nursing education, grounded in current clinical practice, future needs, and established best practices.

The use of Al in higher education varies significantly across institutions, ranging from those that strictly limit its use to others that fully integrate it into all academic programs. In nursing education, typical applications of Al include enhancing operational efficiency, supporting curriculum development and

evaluation, and leveraging evidence-based practice tools to search, appraise, and synthesize research. Additionally, Al is used to develop multimedia content, deploy intelligent agents across various functions, design and evaluate simulations, and enable conversational Al within extended reality environments.

Within some institutions, Al is already being used in nursing education through virtual simulations, intelligent tutoring systems, predictive analytics for academic success, adaptive learning platforms, and development of syllabi and lesson plans. These tools enhance student engagement, personalize learning, and offer scalable, data-driven approaches to teaching complex clinical reasoning. Of note, lack of faculty competency in using Al to optimize teaching or teach Al in nursing practice is apparent. Nurse faculty need this competency to ensure they maintain a key role in designing and implementing Al for use in nursing education.

To prepare practice-ready nurses in the era of Al transformation in healthcare, a revision of current Al use in clinical practice to inform areas of focus for nursing education is warranted. In clinical settings, Al supports nursing through clinical decision support systems, workflow optimization, predictive risk modeling, and real-time monitoring. These applications are improving care delivery, enabling earlier interventions, and reshaping nursing roles at the bedside and in leadership. With the goal of Al being used as a medium for providing "hands off care" for nursing to provide more "hands on care," Al becomes a major transformational opportunity for improved patient care. Al can analyze patterns, predict outcomes, and streamline workflows, but it can't replace judgment, empathy, or advocacy. Those are uniquely human qualities, and they're at the core of nursing.

To keep pace with the rapid evolution of artificial intelligence (AI) and its integration into healthcare, nursing education must establish national standards for AI literacy and competency urgently. These standards should differentiate between foundational AI knowledge—such as ethical implications, societal impact, and basic functionality—and the more advanced skills needed to apply AI tools in clinical decision-making, patient monitoring, and workflow optimization. This distinction is crucial in preparing nurses across all roles and practice settings to safely and ethically engage with AI technologies. Establishing clear, role-specific competencies will ensure a consistent baseline of digital readiness across nursing education programs nationwide.

At the same time, faculty development must be prioritized to ensure educators are prepared to teach and assess these competencies. Many nursing faculty currently lack the technical knowledge and confidence to integrate Al into their teaching, which creates barriers to adoption and innovation. Targeted professional development, including workshops, micro-credentials, and interdisciplinary collaboration with data scientists and technologists, is essential. Faculty readiness must be matched with curricular innovation—embedding Al content across informatics, ethics, evidence-based practice, simulation courses, and in clinical practice to provide students with hands-on, real-world learning experiences.

To support this transformation, nursing programs must invest in infrastructure that enables scalable, equitable, and sustainable integration of AI. This includes adopting AI-enabled learning platforms,

simulation tools, and data analytics systems while ensuring access to programs for those with limited technological resources. A flexible mindset and an agile curricular model will be necessary to continuously revise and update content as AI tools, regulations, and best practices evolve. Institutions should foster a culture of innovation that welcomes rapid change and encourages experimentation.

Equipping Nurses with AI Literacy and Competency to Enhance Healthcare

As Al continues to revolutionize healthcare, nurses must be equipped with the skills to effectively leverage these technologies in their practice. According to Ng et al. (2021), Al literacy involves knowing, understanding, using, evaluating, and creating with Al. Simms (2024) suggests that to successfully incorporate generative Al literacy into nursing curricula, educators should employ a diverse strategy. This involves integrating instruction on Al essentials—covering topics like machine learning foundations, ethical issues, and real-world healthcare applications—into current courses such as Informatics, Ethics, or Evidence-Based Practice. Alternatively, these topics could be presented through dedicated workshops that provide practical, hands-on experience with Al technologies.

Chiu et al. (2024) referred to AI competency as a person's confidence and capability in explaining the workings and societal implications of AI technologies, using them ethically and responsibly, and effectively communicating and collaborating with them in any environment. Russell et al. (2023) and Lattuca et al. (2023) identified several essential competencies required for effectively using AI in nursing education or healthcare. Essential competencies for AI in nursing education can include foundational knowledge of artificial intelligence and its ethical, social, and legal implications; the ability to evaluate and apply AI tools safely and effectively in clinical practice; and skills in workflow analysis and practice-based learning. Nurses also should be equipped to engage in the development of AI guidelines and training programs, ensuring that AI technologies enhance clinical encounters and contribute to continuous professional development. These competencies aim to promote the safe, ethical, and evidence-based integration of AI in healthcare.

In summary, Al literacy is about what nurses need to know to understand and interact with Al responsibly. Al competency is about what nurses need to do to apply Al effectively and ethically in their clinical, educational, and administrative roles. Measurement for Al literacy and competency in nursing education and practice is warranted to further align them with nursing standards as outlined by accreditation bodies in the U.S.

Use of AI in Nursing Education

Artificial Intelligence (AI) plays a transformative role in nursing education by enhancing learning experiences and preparing nurses for future healthcare environments. Integrating AI technologies into pedagogical practices ensures that nurses are proficient in using these tools.

To become proficient in using AI technologies, nursing faculty should regularly engage with AI and emerging AI technologies. Continuous professional development is key to successful use and understanding of AI. This includes attending workshops, webinars, and training programs specifically focused on AI applications in pedagogy. Such initiatives have been shown to significantly enhance digital teaching competencies and self-confidence among nursing educators. Additionally, collaborating

with AI experts and participating in interdisciplinary research can provide valuable insights and practical experience, helping faculty understand the nuances of AI integration in nursing education. Staying up-to-date with the latest advancements in AI is crucial, as it ensures educators are aware of emerging tools and techniques that can be leveraged to improve teaching practices.

Fostering a culture of innovation and openness to new technologies is essential for effective Al integration. Research indicates that exposure to innovative activities can reshape nursing practice and enhance the acceptance of technological advancements (Knighton, 2025). By embracing these strategies, nursing faculty can better prepare students for the evolving healthcare landscape, ensuring they are equipped with the skills and knowledge needed to thrive in a technology-driven environment.

Al-powered interactive learning platforms adapt to students' learning pace, preferences, and styles, providing personalized content that enhances engagement and knowledge retention. These platforms utilize algorithms to analyze student performance data, allowing for tailored educational interventions that address individual learning needs and improve overall competency (Buchanan et al., 2021).

Predictive AI analytic tools can help educators identify trends and patterns in student performance, enabling them to proactively address potential issues and optimize teaching strategies (AIAIi et al., 2025). Additionally, AI-assisted assessment tools are invaluable in identifying educational gaps and potential skill deficiencies. These tools can analyze vast amounts of student data to pinpoint areas where students may be struggling and suggest targeted interventions. By identifying individual skill gaps, AI is able to customize targeted interventions to help students focus on their gaps and master materials. This approach ensures that nursing students are well-prepared for the high demands of the clinical and technological environment in healthcare. By continuously monitoring and assessing student progress, AI can help maintain high standards of education and ensure that graduates are competent and confident in their skills (Buchanan et al., 2021; AIAIi et al., 2025).

Al can also offer personalized learning paths and support, helping students at all levels to succeed. Adaptive learning systems can assess a student's strengths and weaknesses, adjusting the curriculum to focus on areas that need improvement. This personalized approach ensures that each student receives the support they need to achieve their full potential. Additionally, Al tutors can provide instant feedback and assistance, making learning more efficient and engaging (AlAli et al., 2025).

Al health technologies such as virtual avatars and predictive analytics can simulate real-world scenarios, providing students with life-like and critical scenarios that prepare them to respond and interact in future real-life scenarios with a strong foundational understanding of current healthcare environments. Virtual avatars can act as patients, allowing nursing students to practice clinical skills in a safe and controlled environment. By doing so, educators can create a more dynamic and responsive learning environment that better prepares students for the complexities of modern healthcare (Buchanan et al., 2021).

Al enables innovative teaching methods, such as virtual and augmented reality, which can provide immersive and interactive learning experiences. These technologies allow nursing students to practice clinical skills in a simulated environment, where they can make mistakes and learn from them without

risking patient safety. For example, virtual reality simulations can recreate complex clinical scenarios, enabling students to develop critical thinking and decision-making skills in a controlled setting. Augmented reality can overlay digital information onto the physical world, providing real-time guidance and feedback during clinical procedures (Buchanan et al., 2021).

Al in nursing education presents significant opportunities for enhancing learning outcomes and preparing students for the future of healthcare. However, it also poses challenges that must be addressed through ongoing professional development, ethical considerations, and collaborative efforts. By integrating Al thoughtfully and ethically, nursing educators can ensure that students are equipped with the knowledge and skills necessary to thrive in a technologically advanced healthcare environment.

Current Clinical Use of Artificial Intelligence and its Implication for Nursing Education

A major component of nursing education on Al requires up to date educational content that aligns with the use of Al in nursing clinical practice. Al is transforming clinical nursing by enhancing patient care, streamlining workflows, and supporting decision-making. Al technologies—such as machine learning, natural language processing, and predictive analytics—are increasingly utilized to support nurses in various settings, ranging from acute care to community health (Ahmad & Jenkins, 2022; Martinez-Ortigosa et al., 2023). These tools enhance clinical practice through decision support systems that aid in assessments and early detection of patient deterioration, workflow optimization that automates routine tasks, remote patient monitoring for continuous assessment, and telehealth solutions that expand access to care (Ladios-Martin et al., 2022; Choi et al., 2023). Natural language processing and generative Al also improve documentation accuracy and efficiency, supporting better clinical decision-making (Nashwan et al., 2024). The integration of AI has led to improved patient outcomes, greater efficiency through automation, data-driven decision-making, and critical support for nursing workforce challenges by reducing cognitive load and increasing job satisfaction (Wei et al., 2025; Yakusheva et al., 2025). Al is poised to play a transformative role in clinical care, offering tools to enhance patient care, improve efficiency, and support data-driven practice. While challenges remain, ongoing research, education, and ethical vigilance are crucial to harnessing Al's full potential for nursing and healthcare.

Innovation & Entrepreneurship of AI in Nursing Education

Al is impacting healthcare and healthcare education in ways that are rapidly evolving. The rate of change makes it challenging for both educational institutions and healthcare systems and represents unique opportunities to fundamentally change how we deliver education, how we learn, and most importantly how we deliver healthcare. To foster this growth and embrace the transformative potential of artificial intelligence, there are three core areas in which institutions can build upon.

First, we must encourage development and use of Al-driven educational tools. Nursing programs and healthcare institutions should be empowered to independently design, implement, and refine Al-powered educational platforms that support personalized learning, simulation, and competency assessment. A growing body of evidence underscores the need for Al fluency among nurse educators and students, emphasizing curriculum integration, ethical grounding, and practical application to ensure readiness for an Al-enhanced clinical environment (Cary et al., 2023; Provo College, 2023; Valizadeh et al., 2024).

Second, organizations will need to foster entrepreneurial ecosystems for nurse-led innovation. Schools, hospitals, and health systems are encouraged to build mentorship networks, innovation labs, and pilot programs that enable nurse-led innovation and accelerate the development of Al-powered solutions. Real-world examples demonstrate that when nurses are equipped with resources and collaborative support, they can drive impactful, scalable Al innovations that enhance clinical workflows, improve patient outcomes, and foster professional empowerment (Lucian Leape Institute, 2024; Mednition & Adventist Health Glendale, 2025; Sendak et al., 2020a; Sendak et al., 2020b; Wolters Kluwer, 2025).

Lastly, we must promote strategic partnerships with tech industry and entrepreneurs to scale nursing innovation. Educational institutions, clinical systems, and technology partners are urged to form strategic partnerships to scale and accelerate nursing innovation while adopting frameworks for shared governance, bias mitigation, and lifecycle accountability to ensure equitable and trustworthy clinical Al. Emerging models provide actionable guidance for fairness audits, co-governance roles, and alignment with global principles of explainability, robustness, and ethical compliance—offering roadmaps for transparent and inclusive Al systems that uphold professional integrity (Cary et al., 2024; Lekadir et al., 2025; Institute for Al Governance in Healthcare, 2024).

Research and Evaluation and AI in Nursing Education

Beyond use, nurses must be taught to appraise AI technologies for validity, bias, usability, and alignment with patient/student-centered values; for example, like the NLN core values of caring, integrity, diversity and inclusion, and excellence (NLN, n.d.). Al tools are playing a role in identifying and managing health conditions across patient populations and clinical settings. However, research has highlighted the presence of biases in algorithms, leading to downstream issues such as differential disease detection or care provision among patient populations. Given the profound potential of bias in Al to influence health outcomes, there have been efforts to develop strategies to identify and address such biases. In the largest and most comprehensive scoping review to date, researchers studied 109 articles comprising 45 empirical health care applications that included tools tested in health care settings, 16 frameworks, and 48 reviews and perspectives. They identified a wide range of technical, operational, and systemwide bias mitigation strategies for clinical algorithms. Technical strategies for addressing bias at the Al tool level include careful consideration of race, ethnicity, and social determinants of health variables, weighting and sampling methodologies, data augmentation techniques, model recalibration, and adjustable decision thresholds to optimize performance across diverse populations. Operational strategies were those applied across algorithms deployed within organizations. These strategies included establishing algorithm governance frameworks, incorporating key design principles (e.g., accountability, fairness, transparency, and usability) into Al tool development, evaluation and deployment. System-wide strategies included updating training and education programs, developing collaborative platforms to assist organizations with algorithmic auditing, establishing algorithm standards, e.g., CHAI. Further, researchers recommended the following for responsible AI: 1) Ensure Professional Diversity; 2) Require Auditable Clinical Algorithms; 3) Foster Transparent Organizational Culture; 4) Implement Health Equity by Design; 5) Accelerate Research; 6) Establish Governance Structures; and 7) Amplify Patients' Voices. The strategies to evaluate Al tools have yet to be developed in nursing education. Rigorous research is needed to evaluate the outcomes of nursing education in Al and its transferability into clinical practice. Nursing science must contribute to the evidence base for Al's

effectiveness and impact on patient outcomes. Al evaluation ensures that these technologies are not only accurate (technical performance), but also fair, usable, safe and legally compliant. For these guiding principles to be translated into repeatable practices for development, evaluation, and deployment, they must be operationalized using evaluation and governance frameworks. Specifically, operationalizing means embedding structure, multidisciplinary processes, and metrics across the Al lifecycle.

Ethical Implementation of Responsible Al-Barriers, Risks, and Potential Challenges

Integrating AI into nursing education presents significant challenges that must be addressed to ensure successful implementation and positive educational outcomes. These barriers span technological, institutional, ethical, and practical domains that nursing programs and educators require thoughtful consideration.

One of the primary barriers to effective Al integration is inadequate faculty preparation. Many nursing educators lack the technical knowledge, confidence, and experience to effectively incorporate Al tools into their teaching practices. This knowledge gap creates hesitation and resistance to adoption, as faculty may feel overwhelmed by rapidly evolving technology. Comprehensive faculty development programs are essential but often lacking, with limited resources for training in Al applications and pedagogical approaches (Buchanan et al., 2021). The "deskilling" of educators presents another concern, as over-reliance on Al for teaching tasks may erode critical instructional competencies. Faculty require ongoing professional development that balances technological adaptation with the preservation of core educational skills (Topaz et al., 2025).

Implementing AI technologies in nursing education demands substantial investments in technological infrastructure, software licensing, and technical support. Many nursing programs, particularly those in resource-constrained settings, face significant financial limitations that impede their ability to adopt comprehensive AI solutions. Infrastructural disparities may limit AI's effectiveness in under-resourced areas, potentially widening educational gaps between institutions with different levels of technological access (Hostetler et al., 2024). Technical challenges include compatibility issues with existing learning management systems, inadequate bandwidth, insufficient computing resources, and limited IT support for maintaining AI-enhanced teaching tools. These infrastructural barriers disproportionately affect rural or economically disadvantaged programs, raising concerns about equitable access to AI-enhanced educational opportunities.

Resistance to change represents a significant obstacle to AI integration in nursing education. Established institutional cultures and concerns with data privacy often prioritize traditional teaching methodologies and may view technological innovation skeptically. This resistance can manifest bureaucratic hurdles, slow approval processes for curricular changes, or institutional policies restricting innovative teaching approaches (Buchanan et al., 2021). Additionally, there may be philosophical concerns about the role of technology in nursing education, with some stakeholders expressing apprehension that AI might diminish the human element of nursing. As GenAI models can inadvertently expose personal details presenting risks of privacy violations, educational institutions will need to adjust by implementing robust data governance policies, ensure compliance with regulations like FERPA and HIPAA, and maintain strong cybersecurity measures. Though resistance stems from legitimate concerns about preserving the

art of nursing alongside science, to innovate, educational programs will need to embrace technological advancement while honoring nursing's core values.

Addressing bias and misinformation is one of the most pressing ethical challenges in integrating Al into nursing education. Al systems inherently reflect the data on which they are trained and, without careful oversight, can perpetuate existing healthcare disparities. For example, generative Al models trained predominantly on data from a single demographic may generate inaccurate or culturally insensitive recommendations for diverse populations (Topaz et al., 2025). Such biases are particularly dangerous in nursing education, where fostering culturally competent care is a foundational goal. Compounding this issue is the phenomenon of "hallucinations," in which generative Al produces factually incorrect yet convincing content. Because clinical accuracy directly impacts patient safety, nursing students and faculty must learn to critically evaluate Al outputs and verify them against reliable, evidence-based sources.

Building on these ethical concerns, overreliance on AI poses a significant pedagogical threat to the development of critical thinking skills, which are essential for nursing practice. When learners can effortlessly generate care plans or rationales through AI, they risk bypassing the cognitive processes required for sound clinical judgment and reasoning (Park et al., 2024). To counter this, curricula must intentionally engage students in activities that demand independent analysis and problem-solving beyond what AI tools can provide. Purposely designed assessments should, therefore, evaluate not only correct answers but also the reasoning behind them, thereby reinforcing decision-making abilities that are central to safe and effective nursing care.

Layered onto the ethical and educational challenges are complex legal and accountability issues that arise when Al is embedded in academic and clinical contexts. The potential for Al-generated errors raises questions about responsibility for both educational outcomes and patient care. As regulatory frameworks—such as the EU Al Act and the FDA's evolving Al guidance—continue to mature, institutions must proactively craft clear policies on Al use, attribution, and oversight. While these challenges are substantial, they are surmountable. By investing in faculty development, establishing robust data governance structures, and aligning interdisciplinary curricula with national standards, nursing education can harness the benefits of Al while safeguarding its core values. Transparent policies, continuous tool evaluation, and an unwavering commitment to equity and ethics will be crucial to realizing Al's full potential in nursing education.

Trustworthy Framework

Al has the potential to improve patient outcomes, streamline workflows, and reduce healthcare costs. However, recent experience with Al in clinical and other patient-facing settings suggests that thoughtful approaches to implementation and training will be essential to realizing the potential benefits of these technologies and avoiding potential hazards. In particular, careful integration of Al technologies into existing workflows has been shown to be a critical factor in the successful deployment and use of clinical Al.

As the largest segment of the healthcare workforce, nurses not only provide frontline patient care but also coordinate that care, monitor patient status, and educate patients and families. Their hands-on expertise

and patient-centered perspective make them indispensable to the success of Al initiatives. The urgency of involving nurses in Al adoption is amplified by the rapid expansion of Al tools intended for applications in healthcare, from predicting hospital readmissions to triaging emergency department patients. However, many ambitious Al programs have faltered or collapsed due to a lack of real-world usability. There is also growing recognition that Al can exacerbate health disparities if datasets are non-representative or biased. Finally, when technology solutions are implemented without careful engagement and input from frontline nursing professionals, they can often introduce workflow inefficiencies or bottlenecks, cause alert fatigue, and fail to improve clinical or organizational outcomes.

Nurses are ideally positioned to facilitate the selection, evaluation, and adoption of Al tools involved in implementation from the outset. Nurse leadership in and endorsement of Al implementation can foster greater acceptance among interdisciplinary teams and improve integration into day-to-day care. In addition, patients often see nurses as trusted advocates for their best interests, which further enhances their confidence in new technologies. In addition, nurses' frontline exposure to diverse patient populations equips them to spot biases quickly and advocate for inclusive approaches.

Nursing values such as patient-centered care, holistic assessment, and ethical oversight align closely with principles of transparency, fairness, and accountability in responsible Al use. Nurses routinely handle ethically complex situations, prioritizing patient autonomy and well-being. By involving nurses in Al design, health systems can ensure that algorithms align with these same ethical imperatives. For example, the CONCERN (Communicating Narrative Concerns Entered by RNs) Early Warning Score (EWS) trial exemplifies the value of thoughtfully incorporating nursing experience and perspectives into Al-driven healthcare solutions. Unlike traditional early warning systems that rely solely on physiological data, CONCERN integrates the rich narrative notes and documentation patterns of nurses to detect early signs of patient deterioration. The trial demonstrated that when nurses' insights were systematically captured and integrated into algorithmic models, it not only improved clinical outcomes but also fostered greater trust and adoption of Al tools among frontline staff. This approach underscores the critical importance of embedding nursing judgment and real-world practice into the design, development, and deployment of Al technologies in healthcare.

As artificial intelligence becomes more integrated into nursing education and practice, it must be implemented in ways that promote inclusivity, address legal complexities, and uphold ethical standards. Al has the potential to reduce disparities by supporting diverse learning needs and expanding access to high-quality care and education, particularly in underserved communities. At the same time, institutions must be prepared to navigate evolving legal challenges related to data governance, intellectual property, liability, and informed consent, establishing clear policies to protect all stakeholders. Ethically, the trustworthy integration of Al requires a careful examination of its impact on patient autonomy, privacy, and the nurse-patient relationship, while fostering a culture of digital professionalism and responsible use.

CALL TO ACTION

The NLN calls on nursing programs, leaders, educators, and practice partners to collaboratively advance the responsible integration of AI into nursing education. This transformation is critical to preparing a digitally fluent, ethically grounded, and AI-competent nursing workforce. As healthcare rapidly evolves with AI technologies, nursing education must establish strong AI literacy, competency, and innovation capacity across curricula and clinical practice. Stakeholders are urged to adopt inclusive, value-based, equitable, and standards-aligned approaches to ensure EVERY nursing graduate is prepared to use AI for improving patient care and decision-making.

RECOMMENDATIONS

FOR THE NATIONAL LEAGUE FOR NURSING

- Provide national faculty development programs on Al integration and best practices.
- Disseminate NLN values as a frame for the adoption, use, and evaluation of ethical Al.
- Develop and disseminate standardized Al literacy and competency frameworks tailored for nursing education.
- Collaborate with accrediting bodies to align Al integration with educational standards.
- Fund research and innovation grants focused on Al-driven nursing education models.
- Host national symposiums and communities of practice for ongoing dialogue and advancement on AI in nursing education and practice.

FOR LEADERSHIP IN NURSING PROGRAMS (DEANS/DIRECTORS/CHAIRS)

- Establish an Al governance and oversight committee within nursing schools.
- Invest in AI infrastructure including simulation, adaptive learning systems, personalized student support, and analytics platforms.
- Prioritize Al-related faculty development, including interdisciplinary partnerships with data scientists and ethicists.
- Incorporate Al readiness into strategic planning and budgeting.
- Promote a culture of innovation and agility to support iterative curricular reform empowered by AI.
- Strengthen collaboration with healthcare systems and Al industry on collaborative learning environment for learners.

FOR FACULTY

- Participate in training and credentialing programs on Al literacy and ethical use.
- Redesign curricula to embed Al content in clinical reasoning, simulation, informatics, and ethics courses.
- Use Al-enhanced learning tools (e.g., virtual avatars, predictive analytics) to personalize instruction.
- Model responsible Al use, emphasizing human oversight and critical thinking.
- Develop assessment rubrics that evaluate both knowledge of and practical engagement with Al.

FOR COLLABORATION WITH PRACTICE PARTNERS

- Co-create simulation and clinical learning experiences that incorporate Al-based decision-making tools.
- Establish mentorship programs where nurses in practice mentor students on Al use.
- Share data and tools to train students on real-world Al platforms used in clinical settings.
- Support nurse-led innovation projects and pilot programs in Al-enhanced care delivery.
- Align education and workforce development for current and future nurses on Al education.
- Explore joint appointments for Al-savvy faculty and clinicians to bridge academia and practice.

CONCLUSION

The integration of AI into nursing education is not optional, it is imperative. As AI redefines healthcare delivery, nursing must prepare graduates who are literate in AI technologies and competent in using them ethically and effectively. This requires coordinated action across academic, clinical, and industry sectors. Through investment in faculty development, curricular redesign, and innovation ecosystems, nursing education can ensure its graduates are ready not just to participate in, but to lead, the future of healthcare in an AI-driven world. The NLN invites all stakeholders to join in realizing this transformative vision.

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ARTIFICIAL INTELLIGENCE STRATEGIC ACTION GROUP

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Power One Consulting

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Microsoft

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Chief Clinical Officer

Quadrivia Al

NLN Staff

Kellie Bryant, DNP, WHNP, CHSE, FSSH, FADLN, FAAN

Director of the Center for Innovation in Education Excellence