



Home	Bill Information	California Law	Publications	Other Resources	My Subscriptions	My Favorites
------	------------------	----------------	--------------	-----------------	------------------	--------------

Code:  Section:

[Up^](#) [Add To My Favorites](#)

**BUSINESS AND PROFESSIONS CODE - BPC**

**DIVISION 2. HEALING ARTS [500 - 4999.129]** ( *Division 2 enacted by Stats. 1937, Ch. 399.*  )

**CHAPTER 6. Nursing [2700 - 2838.4]** ( *Chapter 6 repealed and added by Stats. 1939, Ch. 807.*  )

**ARTICLE 4. Nursing Schools [2785 - 2789]** ( *Article 4 added by Stats. 1939, Ch. 807.*  )

[2785.](#) The board shall prepare and maintain a list of approved schools of nursing in this state whose graduates, if they have the other necessary qualifications provided in this chapter, shall be eligible to apply for a license to practice nursing in this state.

(Amended by Stats. 1983, Ch. 742, Sec. 5.)

[2785.5.](#) The board shall establish a workgroup, or use an existing committee, to encourage and facilitate efficient transfer agreements or other enrollment models between associate degree nursing programs and baccalaureate degree nursing programs so students are able to complete the baccalaureate program without unnecessary repetition of coursework.

(Added by Stats. 2004, Ch. 271, Sec. 1. Effective January 1, 2005.)

[2785.6.](#) There is created within the jurisdiction of the board a Nursing Education and Workforce Advisory Committee, which shall solicit input from approved nursing programs and members of the nursing and health care professions to study and recommend nursing education standards and solutions to workforce issues to the board.

(a) The committee shall be comprised of the following:

- (1) One nursing program director representative of a statewide association for associate's degrees in nursing programs.
- (2) One nursing program director representative of a statewide association representing bachelor's degrees in nursing programs.
- (3) One California Community Colleges Chancellor's Office representative.
- (4) One California State University Office of the Chancellor representative.
- (5) One currently practicing registered nurse representative.
- (6) Two currently practicing advanced practice registered nurse representatives.
- (7) Two registered nurse employer representatives in nursing service administration.
- (8) One professional nursing organization representative.
- (9) Three nursing union organization representatives.
- (10) One public representative.
- (11) One Health Workforce Development Division representative.
- (12) One board research vendor.

(13) Any other members representing an organization in the nursing education or workforce field that the board determines is necessary for the work of the committee and is not listed under this subdivision.

(b) (1) Except as provided in paragraph (2), all appointments shall be for a term of four years and vacancies shall be filled for the unexpired term. No person shall serve more than two consecutive terms except for the representatives from organizations.

(2) (A) The initial appointments for the education representatives shall be for the following terms:

(i) One Nursing Program Director who is a member of a statewide association for associate's degrees in nursing programs shall serve three years.

(ii) One nursing program director who is a member of a statewide association representing bachelor's degrees in nursing programs shall serve a term of two years.

(iii) One California Community Colleges Chancellor's Office representative shall serve a term of four years.

(iv) One representative from the California State University Office of the Chancellor shall serve a term of four years.

(B) The initial appointments for the workforce representatives shall be for the following terms:

(i) One practicing registered nurse representative shall serve a term of four years.

(ii) One of the two practicing advanced practice registered nurse representatives shall serve a term of three years and the other shall serve a term of two years.

(C) The initial appointments for the employer representatives shall be for the following terms:

(i) One of the two registered nurse employer representatives shall serve a term of three years and the other shall serve a term of four years.

(ii) One professional nursing organization representative shall serve a term of two years.

(D) The public member shall serve a term of four years.

(c) The committee shall meet a minimum of two times per year and shall appoint officers annually.

(d) (1) The committee shall dedicate a minimum of one meeting each towards nursing education issues and nursing workforce issues.

(2) The committee may establish subcommittees to study issues specific to education, workforce, or any other topic relevant to the purpose of the committee.

(e) The committee may refer information and recommendations to the board or other committees of the board.

(f) (1) The board may implement, interpret, or make specific this section by means of a charter, or other similar document, approved by the board.

(2) The board may revise the charter, or other similar document, developed pursuant to this section, as necessary. The development or revision of the charter, or other similar document, shall be exempt from the requirements of the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code).

(g) The committee shall study and recommend standards for simulated clinical experiences based on the best practices published by the International Nursing Association for Clinical Simulation and Learning, the National Council of State Boards of Nursing, the Society for Simulation in Healthcare, or equivalent standards.

(h) (1) The committee shall study and recommend standards regarding how approved schools of nursing or nursing programs manage or coordinate clinical placements. The study shall include, at a minimum, all of the following topics:

(A) How approved schools of nursing or nursing programs maintain clinical education standards.

(B) The participation of approved schools of nursing or nursing programs in consortiums with other approved schools of nursing or nursing programs to manage or coordinate clinical placements.

(C) The necessity and feasibility of a statewide consortium or regional consortiums under the regulatory oversight of the board to manage or coordinate clinical placements of approved schools of nursing or nursing programs.

(D) Identifying and reporting violations of Section 2786.4.

(E) Ensuring fair and equitable access to clinical placement among approved schools of nursing or nursing programs.

(F) Identifying necessary information for the board to collect to ensure that approved schools of nursing and nursing programs comply with standards recommended by the committee.

(2) (A) The board shall submit a report to the Legislature detailing the committee's findings and recommendations pursuant to paragraph (1).

(B) A report to be submitted pursuant to subparagraph (A) shall be submitted in compliance with Section 9795 of the Government Code.

*(Amended by Stats. 2024, Ch. 776, Sec. 1. (SB 1015) Effective January 1, 2025.)*

**2786.** (a) (1) An approved school of nursing, or an approved nursing program, is one that has been approved by the board, gives the course of instruction approved by the board, covering not fewer than two academic years, is affiliated or conducted in connection with one or more hospitals, and is an institution of higher education. For purposes of this section, "institution of higher education" includes, but is not limited to, community colleges offering an associate of arts or associate of science degree and private postsecondary institutions offering an associate of arts, associate of science, or baccalaureate degree or an entry-level master's degree, and is an institution that is not subject to the California Private Postsecondary Education Act of 2009 (Chapter 8 (commencing with Section 94800) of Part 59 of Division 10 of Title 3 of the Education Code).

(2) An approved school of nursing or nursing program shall meet a minimum of 500 direct patient care clinical hours in a board-approved clinical setting with a minimum of 30 hours of supervised direct patient care clinical hours dedicated to each nursing area specified by the board.

(A) Additional clinical hours required by the program for nursing education preparation in each nursing area as specified by the board shall be identified and documented in the curriculum plan for each area.

(B) An approved school of nursing or nursing program shall not be required to track the minimum clinical hours by individual students.

(3) An approved school of nursing or nursing program may cover fewer than two academic years if approved to provide a course of instruction that prepares a licensed vocational nurse licensed under the Vocational Nursing Practice Act (commencing with Section 2840) for a license under this chapter.

(b) A school of nursing that is affiliated with an institution that is subject to the California Private Postsecondary Education Act of 2009 (Chapter 8 (commencing with Section 94800) of Part 59 of Division 10 of Title 3 of the Education Code), may be approved by the board to grant an associate of arts or associate of science degree to individuals who graduate from the school of nursing or to grant a baccalaureate degree in nursing with successful completion of an additional course of study as approved by the board and the institution involved.

(c) (1) The board shall determine by regulation the required subjects of instruction to be completed in an approved school of nursing for licensure as a registered nurse and shall include the minimum units of theory and clinical experience necessary to achieve essential clinical competency at the entry level of the registered nurse. The board's regulations shall be designed to require all schools to provide clinical instruction in all phases of the educational process, except as necessary to accommodate military education and experience as specified in Section 2786.1.

(2) Notwithstanding paragraph (1), whenever an agency or facility used by an approved nursing program for direct patient care clinical practice is no longer available or sufficient, the director of the approved nursing program may submit to a board nursing education consultant a request that the approved nursing program allow theory to precede clinical practice if all of the following conditions are met:

(A) No alternative agency or facility located within 25 miles of the impacted approved nursing program, campus, or location, as applicable, has a sufficient number of open placements that are available and accessible to the approved nursing program for direct patient care clinical practice hours in the same subject matter area. An approved program shall not be required to submit more than required under subparagraph (A) of paragraph (3) of subdivision (a) of Section 2786.3.

(B) Clinical practice takes place in the academic term immediately following theory.

(C) Theory is taught concurrently with clinical practice not in direct patient care if no direct patient care experiences are available.

(3) (A) The board shall annually collect, analyze, and report information related to the number of clinical placement slots that are available and the location of those clinical placement slots within the state, including, but not limited to, information concerning the total number of placement slots a clinical facility can accommodate and how many slots the programs that use the facility will need.

(B) The board shall utilize data from available regional or individual institution databases.

(C) The board shall publish the annual report on its internet website.

(4) (A) (i) The board shall annually collect, analyze, and report information related to the management of clinical placements and coordination with clinical facilities by approved schools of nursing or nursing programs.

(ii) The report shall include information relating to how approved schools of nursing or nursing programs collaborate and coordinate with other approved schools of nursing, nursing programs, or regional planning consortiums that utilize the same clinical facility.

(B) (i) The board shall publish the annual report on its internet website.

(ii) Notwithstanding Section 10231.5 of the Government Code, the board shall annually submit the report under this subparagraph to the Legislature.

(iii) A report to be submitted under this subparagraph shall be submitted in compliance with Section 9795 of the Government Code.

(d) The board shall perform or cause to be performed an analysis of the practice of the registered nurse no less than every five years. Results of the analysis shall be utilized to assist in the determination of the required subjects of instruction, validation of the licensing examination, and assessment of the current practice of nursing.

(e) (1) The executive officer shall develop a uniform method for evaluating requests and granting approvals pursuant to this section.

(2) The executive officer may revise the uniform method developed pursuant to this subdivision, as necessary. The development or revision of the uniform method shall be exempt from the requirements of the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code).

(3) The board's nursing education consultants shall use the uniform method to evaluate requests and grant approvals pursuant to this section.

(4) The board shall post the approved method and any revisions on the board's website.

(f) (1) Graduation requirements for an approved school of nursing, or an approved nursing program, shall include one hour of direct participation in an implicit bias training which shall include all of the following:

(A) Identification of previous or current unconscious biases and misinformation.

(B) Identification of personal, interpersonal, institutional, structural, and cultural barriers to inclusion.

(C) Corrective measures to decrease implicit bias at the interpersonal and institutional levels, including ongoing policies and practices for that purpose.

(D) Information on the effects, including, but not limited to, ongoing personal effects, of historical and contemporary exclusion and oppression of minority communities.

(E) Information about cultural identity across racial or ethnic groups.

(F) Information about communicating more effectively across identities, including racial, ethnic, religious, and gender identities.

(G) Discussion on power dynamics and organizational decisionmaking.

(H) Discussion on health inequities within the perinatal care field, including information on how implicit bias impacts maternal and infant health outcomes.

(I) Perspectives of diverse, local constituency groups and experts on particular racial, identity, cultural, and provider-community relations issues in the community.

(J) Information on reproductive justice.

(2) This subdivision shall not be construed to do any of the following:

(A) Affect the requirements for licensure under this chapter.

(B) Require a curriculum revision.

(C) Affect licensure by endorsement under this chapter.

**2786.1.** (a) The board shall deny the application for approval made by, and shall revoke the approval given to, any school of nursing that does not give student applicants credit in the field of nursing for military education and experience by the use of challenge examinations or other methods of evaluation.

(b) The board shall adopt regulations by January 1, 2017, requiring schools to have a process to evaluate and grant credit for military education and experience. The regulations shall be adopted pursuant to the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code). The word "credit," as used in this subdivision, is limited to credit for licensure only. The board is not authorized to prescribe the credit that an approved school of nursing shall give toward an academic certificate or degree.

(c) The board shall review a school's policies and practices regarding granting credit for military education and experience at least once every five years to ensure consistency in evaluation and application across schools. The board shall post on its Internet Web site information related to the acceptance of military coursework and experience at each approved school.

(Added by Stats. 2015, Ch. 489, Sec. 6. (SB 466) Effective January 1, 2016.)

**2786.2.** (a) A private postsecondary school of nursing approved by the board pursuant to subdivision (b) of Section 2786 shall comply with Chapter 8 of Part 59 of Division 10 of Title 3 of the Education Code. The board shall have a memorandum of understanding with the Bureau for Private Postsecondary Education to delineate the powers of the board to review and approve schools of nursing and the powers of the bureau to protect the interest of students attending institutions governed by the California Private Postsecondary Education Act of 2009, Chapter 8 (commencing with Section 94800) of Division 10 of Title 3 of the Education Code.

(b) (1) For approved schools of nursing that are actively accredited by an institutional or programmatic accreditor recognized by the United States Department of Education, the board shall, without requiring additional documentation or action, do the following, unless unrelated to the scope of accreditation:

(A) Perform site inspections jointly with accreditors.

(B) Accept continuing accreditation decisions from accreditors.

(C) Accept faculty hiring decisions made by the approved program director.

(D) Accept the self-study required by programmatic accreditors as a substitute for board self-study or data collection if the following are met:

(i) The program provides a crosswalk connecting the items in the report to the board's regulatory requirements.

(ii) If the report does not address any of the board's regulatory requirements, the program provides an addendum to the report to address those requirements.

(E) Accept substantive change requests, as defined under the uniform method developed under subdivision (e) of Section 2786, if approved by the accreditor unless the request is a request to increase enrollment or perform a major curriculum revision.

(F) When considering a request to increase enrollment, the board may consider only the following factors related to the ability to adequately train additional students:

(i) Adequacy of resources, including, but not limited to, faculty, facilities, equipment, and supplies.

(ii) Availability of clinical placements.

(iii) Complaints that have been verified by the board from students, faculty, or other interested parties.

(iv) Licensing examination pass rates, graduation rates, and retention rates.

(v) Any other similar factors specified by the board in regulations. The board shall not consider nursing workforce issues, including those identified under Section 2717, as factors for purposes of this subparagraph.

(2) Upon complaint or other evidence that an approved school of nursing does not meet the board's standards, the board may withhold approval under this subdivision or perform additional site inspections pursuant to Section 2788.

(3) The board may make or withhold approvals under this subdivision prior to the adoption of implementing regulations.

*(Amended by Stats. 2022, Ch. 413, Sec. 12. (AB 2684) Effective January 1, 2023.)*

**2786.3.** (a) Until the end of the 2023–24 academic year, or whenever the Governor declares a state of emergency for a county in which an agency or facility used by an approved nursing program for direct patient care clinical practice is no longer available, the director of the approved nursing program may submit to a board nursing education consultant requests to do any of the following:

(1) Utilize a clinical setting until the end of the academic term without the following:

(A) Approval by the board.

(B) Written agreements with the clinical facility.

(C) Submitting evidence of compliance with board regulations relating to the utilization of clinical settings, except as necessary for a board nursing education consultant to ensure course objectives and faculty responsibilities will be met.

(2) Utilize preceptorships until the end of the academic term without having to maintain written policies relating to the following:

(A) Identification of criteria used for preceptor selection.

(B) Provision for a preceptor orientation program that covers the policies of the preceptorship and preceptor, student, and faculty responsibilities.

(C) Identification of preceptor qualifications for both the primary and the relief preceptor.

(D) Description of responsibilities of the faculty, preceptor, and student for the learning experiences and evaluation during preceptorship.

(E) Maintenance of preceptor records that includes names of all current preceptors, registered nurse licenses, and dates of preceptorships.

(F) Plan for an ongoing evaluation regarding the continued use of preceptors.

(3) Subject to subparagraph (F), request that the approved nursing program be allowed to reduce the required number of direct patient care hours to 50 percent in geriatrics and medical-surgical and 25 percent in mental health-psychiatric nursing, obstetrics, and pediatrics if all of the following conditions are met:

(A) No alternative agency or facility has a sufficient number of open placements that are available and accessible within 25 miles of the approved nursing program for direct patient care clinical practice hours in the same subject matter area. An approved nursing program shall submit, and not be required to provide more than, the following:

(i) The list of alternative agencies or facilities listed within 25 miles of the impacted approved nursing program, campus, or location, as applicable, using the facility finder on the Department of Health Care Access and Information website.

(ii) The list of courses impacted by the loss of clinical placements and the academic term the courses are offered.

(iii) Whether each of the listed alternative agencies or facilities would meet the course objectives for the courses requiring placements.

(iv) Whether the approved nursing program has contacted each of the listed alternative agencies or facilities about the availability of clinical placements. The approved nursing program shall not be required to contact a clinical facility that would not meet course objectives.

(v) The date of contact or attempted contact.

(vi) The number of open placements at each of the listed alternative agencies or facilities that are available for the academic term for each course. If an alternative agency or facility does not respond within 48 hours, the approved nursing

program may list the alternative agency or facility as unavailable. If the alternative agency or facility subsequently responds prior to the submission of the request to a board nursing education consultant, the approved nursing program shall update the list to reflect the response.

(vii) Whether the open and available placements are accessible to the students and faculty. An open and available placement is accessible if there are no barriers that otherwise prohibit a student from entering the facility, including, but not limited to, the lack of personal protective equipment or cost-prohibitive infectious disease testing. An individual's personal unwillingness to enter an alternative agency or facility does not make a placement inaccessible.

(viii) The total number of open and available placements that are accessible to the students and faculty compared to the total number of placements needed.

(B) The substitute clinical practice hours not in direct patient care provide a learning experience, as defined by the board consistent with Section 2708.1, that is at least equivalent to the learning experience provided by the direct patient care clinical practice hours.

(C) The temporary reduction provided in paragraph (3) shall cease as soon as practicable or by the end of the academic term, whichever is sooner.

(D) The substitute clinical practice hours not in direct patient care that are simulation experiences are based on the best practices published by the International Nursing Association for Clinical Simulation and Learning, the National Council of State Boards of Nursing, the Society for Simulation in Healthcare, or equivalent standards approved by the board.

(E) A maximum of 25 percent of the direct patient care hours specified in paragraph (3) in geriatrics and medical-surgical may be completed via telehealth.

(F) Notwithstanding subdivision (a), no new requests under this paragraph shall be approved after the 2023–2024 academic year and any requests approved under this paragraph shall expire at the end of the 2023–24 academic year.

(b) If the conditions in paragraph (1), (2), or (3) of subdivision (a), as applicable to the request, are met, a board nursing education consultant shall approve the request. If an approved nursing program fails to submit information satisfactory to the board nursing education consultant, or fails to meet the conditions specified, the board nursing education consultant shall deny the request. If the request is not approved or denied on or before 5:00 p.m. on the date seven business days after receipt of the request, the request shall be deemed approved.

(c) (1) Within 30 days of the effective date of this section, the board's executive officer shall develop a uniform method for evaluating requests and granting approvals pursuant to this section.

(2) The executive officer may revise the uniform method developed pursuant to this subdivision from time to time, as necessary. The development or revision of the uniform method shall be exempt from the requirements of the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Title 2 of the Government Code).

(3) The board's nursing education consultants shall use the uniform method to evaluate requests and grant approvals pursuant to this section.

(4) The board shall post the uniform method and any revisions on the board's website.

*(Amended by Stats. 2022, Ch. 413, Sec. 13. (AB 2684) Effective January 1, 2023.)*

**2786.4.** (a) An institution of higher education or a private postsecondary school of nursing subject to Section 2786, or an entity affiliated with the institution or school of nursing, shall not make a payment to any clinical agency or facility in exchange for clinical experience placements for students enrolled in a nursing program offered by or affiliated with the institution or private postsecondary school of nursing.

(b) A payment shall be deemed a violation of subdivision (a) if made within two years of a clinical experience placement at a facility.

(c) The payment of reasonable administrative fees for purposes of credentialing, databank registration, purchasing supplies, or similar costs or reimbursements does not constitute a violation of subdivision (a).

*(Added by Stats. 2022, Ch. 413, Sec. 14. (AB 2684) Effective January 1, 2023.)*

**2786.5.** (a) Subject to the provisions of Section 128.5, an institution of higher education or a private postsecondary school of nursing approved by the board pursuant to subdivision (b) of Section 2786 shall remit to the board for deposit in the Board of Registered Nursing Fund the following fees, in accordance with the following schedule:

(1) The fee for approval of a school of nursing shall be fixed by the board at not more than eighty thousand dollars (\$80,000).

(2) The processing fee for authorization of a substantive change to an approval of a school of nursing shall be fixed by the board at not more than five thousand dollars (\$5,000). The board shall not require a fee for substantive changes approved under subparagraph (E) of paragraph (1) of subdivision (b) of Section 2786.2 or curriculum revisions, as defined under the uniform method developed under subdivision (e) of Section 2786.

(b) If the board determines that the cost of providing oversight and review of a school of nursing, as required by this article, is less than the amount of any fees required to be paid by that institution pursuant to this article, the board may decrease the fees applicable to that institution to an amount that is proportional to the board's costs associated with that institution.

*(Amended by Stats. 2022, Ch. 413, Sec. 15. (AB 2684) Effective January 1, 2023.)*

**2786.6.** The board shall deny the application for approval made by, and shall revoke the approval given to, any school of nursing which:

(a) Does not give to student applicants credit, in the field of nursing, for previous education and the opportunity to obtain credit for other acquired knowledge by the use of challenge examinations or other methods of evaluation; or,

(b) Is operated by a community college and discriminates against an applicant for admission to a school solely on the grounds that the applicant is seeking to fulfill the units of nursing required by Section 2736.6.

The board shall prescribe, by regulation, the education for which credit is to be given and the amount of credit which is to be given for each type of education. The word "credit," as used in the preceding sentence, is limited to credit for licensure only. The board is not authorized to prescribe the credit which an approved school of nursing shall give toward an academic certificate or degree.

*(Amended by Stats. 1983, Ch. 742, Sec. 8.)*

**2787.** If the board requires the approval of the faculty or directors in regulations promulgated pursuant to Section 2786, all of the following apply:

(a) The board may approve an individual to serve as a member of the faculty, director, or assistant director of an approved school of nursing or nursing program.

(b) The board shall approve an applicant for individual approval if the applicant submits a completed application in the form prescribed by the board demonstrating that the applicant meets the requirements established by the board for faculty, directors, and assistant directors of an approved school of nursing or nursing program.

(c) The individual approval under this section shall be valid for five years and may be renewed if the individual demonstrates to the board that they continue to meet the requirements established by the board for faculty, directors, and assistant directors of an approved school of nursing or nursing program.

(d) The board shall display an approved individual's faculty, director, or assistant director approval status, including the approved faculty level and content areas, if applicable, and the status of their nursing license through an online search tool administered by the department.

(e) (1) If an applicant for approval under this section has a faculty position and does not meet a requirement established by the board for a different position, the board may accept a remediation plan submitted by an approved school of nursing or nursing program to help the applicant meet the requirement.

(2) If the board accepts the plan submitted under paragraph (1), the board may approve the applicant to instruct in theory under the mentorship and supervision of the content expert identified in the plan for up to one year.

(f) If required by the board for directors and assistant directors of an approved school of nursing or nursing program, an approved school of nursing or nursing program shall continue to report to the board changes in the nursing program's director and assistant director of nursing positions.

(g) An approved school of nursing or nursing program shall not be required to report to the board any of the following faculty changes:

(1) A change in a faculty member's teaching area.

(2) An offer of employment for a faculty member position.

(3) Termination of employment of a faculty member.

(h) This section does not modify any limitations on the powers of the board related to the faculty approval of accredited schools of nursing and nursing programs as specified in subdivision (b) of Section 2786.2.

*(Added by Stats. 2024, Ch. 370, Sec. 1. (AB 2015) Effective January 1, 2025.)*



**2788.** It shall be the duty of the board, through its executive officer, to inspect all schools of nursing in this state at such times as the board shall deem necessary. Written reports of the executive officer's visits shall be made to the board, which shall thereupon approve those schools of nursing that meet the requirements provided by the board.

Upon receiving the report of the executive officer, if the board determines that any approved school of nursing is not maintaining the standard required by the board, notice thereof in writing specifying the defect or defects shall be immediately given to the school. If the defects are not corrected within a reasonable time, the school of nursing may be removed from the approved list and notice thereof in writing given to it.

*(Amended by Stats. 1983, Ch. 742, Sec. 10.)*

**2789.** None of the provisions of this chapter shall be applicable to any school or schools conducted by any well recognized church or denomination for the purpose of training the adherents of such church or denomination in the care of the sick in accordance with its religious tenets.

*(Added by Stats. 1939, Ch. 807.)*