



STATE OF WISCONSIN

Department of Safety and Professional Services
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Madison WI 53703

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Governor Scott Walker Secretary Dave Ross

BOARD OF NURSING

**ROOM 121A, 1400 EAST WASHINGTON AVENUE, MADISON, WI
CONTACT: DAN WILLIAMS (608) 266-2112**

DECEMBER 19, 2013

Notice: The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a description of actions and deliberation of the Board.

AGENDA

8:00 A.M.

CALL TO ORDER – ROLL CALL – OPEN SESSION

- A. Adoption of the Agenda**
- B. 8:00 A.M. – Public Hearing – Administrative Rule N 7 relating to Unprofessional Conduct**
 - 1) Review and Respond to Clearinghouse Report and Public Hearing Comments
- C. 8:05 A.M. – Public Hearing – Administrative Rule N 9 relating to Nurse License Compact**
 - 1) Review and Respond to Clearinghouse Report and Public Hearing Comments
- D. Attendance at the Legislation and Rules Committee**
- E. Report of the Legislation and Rules Committee**
- F. Approval of the Board of Nursing Minutes of November 14, 2013**
- G. Administrative Matters – Discussion and Consideration**
 - 1) Staff Updates
 - 2) January-2014 Screening panel

H. Legislative / Administrative Rule Matters- Discussion and Consideration

- 1) Update on SB337/AB404
- 2) Update on SB39

I. School Program Matters - Discussion and Consideration

- 1) Bryant & Stratton
- 2) Site Surveys

J. Discussion and Consideration of Items Received After Preparation of the Agenda:

- 1) Introductions, Announcements, and Recognition
- 2) Presentations of Petition(s) for Summary Suspension
- 3) Presentation of Proposed Stipulation(s), Final Decision(s) and Order(s)
- 4) Presentation of Final Decision and Order(s)
- 5) Informational Item(s)
- 6) DLSC Matters
- 7) Status of Statute and Administrative Rule Matters
- 8) Education and Examination Matters
- 9) Credentialing Matters
- 10) Practice Questions
- 11) Legislation / Administrative Rule Matters
- 12) Liaison Report(s)
- 13) Speaking Engagement(s), Travel, or Public Relations Request(s)
- 14) Consulting with Legal Counsel

K. Public Comments

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85 (1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85 (1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.).

L. Deliberation of DLSC Matters

1) Proposed Stipulations and Final Decisions and Orders

- a. 12 NUR 289 David N. Innis, L.P.N.
- b. 12 NUR 352 Patricia A. Stright, R.N., A.P.N.P.
- c. 13 NUR 009 Briana L. Steiner, R.N.
- d. 13 NUR 107 Michelle. McCombie, R.N.
- e. 13 NUR 194 Erik M. Costea
- f. 13 NUR 316 Jacqueline L. Kerchefski, R.N.
- g. 13 NUR 331 Kristen K. Hewitt, R.N.
- h. 13 NUR 332 Leda C. Jahnke, R.N.
- i. 13 NUR 342 Beth A Herbst, R.N.
- j. 13 NUR 347 Terri J. Pixely, L.P.N.
- k. 13 NUR 460 Kathryn E. Seppi, R.N.
- l. 13 NUR 464 Vicki L. Dorn, R.N.
- m. 13 NUR 468 Debra K. Isaak, R.N.
- n. 13 NUR 473 Julia A. Harley, L.P.N.
- o. 13 NUR 493 Karen L. Jaslowski, R.N.
- p. 13 NUR 555 Christy M. Pullara, R.N.

M. Deliberation of Case Closures

- 1) Case Status report

N. Deliberation of Monitoring Matters

- 1) **Appearance** – Kristen Bleichwehl, R.N. – Reconsideration of Stay of Removal
- 2) Denise Denton, R.N. – Reduction in Drug and Alcohol Screens and Termination of Therapy
- 3) Gayle Glynn – Removal of Limited License Granted Solely for Nurse Refresher Course
- 4) Ann Stanton, R.N. – Termination of Therapy Requirement
- 5) Brooke Steinacker, R.N. – Return of Full Licensure
- 6) Jennifer Waloway, A.P.N.P. – Return of Full Licensure

O. Deliberation of Credentialing Matters

1) Discipline and Conviction Review

- a. Betty Wake
- b. Valeria Whitehead

2) Conviction Reviews

- a. Fred Kavalauskas
- b. Nicole Penass

3) Disciplinary Review

- a. Kathleen Sayles

4) Suit Claim Review

- a. Kristiina Bousherhri
- b. William Barnhill

RECONVENE INTO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

Voting on Items Considered or Deliberated on in Closed Session, If Voting is Appropriate

P. Board Meeting Process (Time Allocation, Agenda Items) - Discussion and Consideration

1) NSCBN Appointments

Q. Board Strategic Planning and its Mission, Vision, and Values - Discussion and Consideration

ADJOURNMENT

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Sharon Henes Administrative Rules Coordinator		2) Date When Request Submitted: <i>10 December 2013</i>	
		Items will be considered late if submitted after 4:30 p.m. and less than: ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: 19 December 2013	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? PUBLIC HEARING ON ADMINISTRATIVE RULE N 7 RELATING TO UNPROFESSIONAL CONDUCT Review and respond to Clearinghouse Report and Public Hearing comments	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: Hold Public Hearing at 8:05 a.m. Discuss any public hearing comments. Review, discuss and respond to any Clearinghouse comments.			
11) Authorization			
<i>Sharon Henes</i>		<i>10 December 2013</i>	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

STATE OF WISCONSIN
BOARD OF NURSING

IN THE MATTER OF RULE-MAKING :
PROCEEDINGS BEFORE THE :
BOARD OF NURSING : NOTICE OF PUBLIC HEARING
:

NOTICE IS HEREBY GIVEN that pursuant to authority vested in the Board of Nursing in §§ 15.08 (5) (b), and 227.11 (2), Wis. Stats., and interpreting §441.07, Wis. Stats., the Board of Nursing will hold a public hearing at the time and place indicated below to consider an order to repeal 7.04, amend 7.01(2), repeal and recreate 7.03 and create 7.02(1m) relating to code of conduct

Hearing Date, Time and Location

Date: December 19, 2013
Time: 8:05 a.m.
Location: 1400 East Washington Avenue
Room 121A
Madison, Wisconsin

APPEARANCES AT THE HEARING:

Interested persons are invited to present information at the hearing. Persons appearing may make an oral presentation but are urged to submit facts, opinions and argument in writing as well. Facts, opinions and argument may also be submitted in writing without a personal appearance by mail addressed to Sharon Henes, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8935, Madison, Wisconsin 53708. Written comments must be received at or before the public hearing to be included in the record of rule-making proceedings.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted: § 441.07

Statutory authority: §§ 15.08(5)(b) and 227.11(2)(a)

Explanation of agency authority:

The Board of Nursing has general agency authority to promulgate rules interpreting the provisions of any statute enforced or administered by the Board of Nursing.

The Board also has specific agency conferred by the legislature to promulgate rules for its own guidance and for the guidance of the profession and define and enforce professional conduct and unethical practices.

Related statute or rule: § 441.07

Plain language analysis:

Section 1 amends the statement of intent to include certificate due to the disciplinary action may be taken against an advanced practice nurse prescriber certificate.

Section 2 provides a definition for certificate.

Section 3 creates a new section defining the grounds for disciplinary action

Section 4 repeals N 7.04 which defined unprofessional conduct. This proposed rule combines the negligence and unfit to practice section with the unprofessional conduct section to make one section identifying the grounds for disciplinary action.

Summary of, and comparison with, existing or proposed federal regulation: None

Comparison with rules in adjacent states:

Illinois: The grounds for disciplinary actions in Illinois include: findings of unethical or unprofessional conduct which includes engaging in behavior that crosses professional boundaries; sexual conduct; deceiving, defrauding or harming the public; and departure from or failure to conform to the standards of professional or practical nursing. In addition, Illinois incorporates by reference the “Code for Nurses with Interpretive Statements” and “Standards of Practice and Educational Competencies of Graduates of Practical/Vocational Nursing Programs.”

Iowa: The grounds for disciplinary actions in Iowa include: behavior which constitutes knowingly making misleading, deceptive, untrue or fraudulent representations in the practice of a profession; behaviors which constitutes unethical conduct; behavior which constitutes fraud; behavior which constitutes knowingly making misleading, deceptive, untrue or fraudulent representations; and professional incompetency.

Michigan: The grounds for disciplinary actions in Michigan include: personal disqualifications; practicing outside the scope; unprofessional conduct; fraud or deceit; obtaining, possessing or attempting to obtain a controlled substance; and unethical business practices.

Minnesota: The grounds for disciplinary actions in Minnesota include: non-compliance with requirements; practicing outside the scope; criminal convictions; violating confidentiality; engaging in conduct with a patient that is sexual or may reasonably be interpreted as sexual; obtaining money, property or services from a patient through the use of undue influence; engaging in fraud or deceit; failing to or inability to perform professional or practical nursing with reasonable skill and safety; engaging in unprofessional conduct; actual or potential inability to practice nursing with reasonable skill and safety; engaging in any unethical conduct; improper management of patient records; and improper supervision.

Summary of factual data and analytical methodologies:

The Board of Nursing reviewed the recently adopted model rules of the National Council of State Boards of Nursing and the surrounding states as well as utilizing knowledge of current minimum standards to determine what would be in the best interest of the state of Wisconsin when setting forth the practices which constitute grounds for discipline.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

These rules were posted for economic comments for a 14 day period and no comments were received.

Fiscal estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis is attached.

Initial Regulatory Flexibility Analysis or Summary:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator may be contacted by email at Tom.Engels@wisconsin.gov, or by calling (608) 266-8608.

Agency contact person:

Sharon Henes, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, Room 151, P.O. Box 8935, Madison, Wisconsin 53708; telephone 608-261-2377; email at Sharon.Henes@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Sharon Henes, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, Room 151, P.O. Box 8935, Madison, WI 53708-8935, or by email to Sharon.Henes@wisconsin.gov. Comments must be received at or before the

public hearing to be held at 8:05 a.m. on December 19, 2013 to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. N 7.01 (2) is amended to read:

N 7.01 (2) The intent of the board of nursing in adopting this chapter is to specify grounds for limiting, suspending, revoking or denying renewal of a license or certificate or for reprimanding a license or certificate.

SECTION 2. N 7.02(1m) is created to read:

N 7.02(1m) “Certificate” means a certificate of an advanced practice nurse prescriber.

SECTION 3. N 7.03 is repealed and recreated to read:

N 7.03 Grounds for denying renewal or disciplinary action. The grounds for denying renewal or taking disciplinary action on a license or certificate are as follows:

- (1) Noncompliance with federal, jurisdictional or reporting requirements including:
 - (a) Engaging in conduct that violates the security of the licensure examination or the integrity of the examination results.
 - (b) Having a license to practice nursing or a nurse licensure compact privilege to practice denied, revoked, suspended, limited or otherwise disciplined in another state, territory or country. A certified copy of the record of the board is conclusive evidence of the final action.
 - (c) After a request of the board, failing to cooperate in a timely manner, with the board’s investigation of a complaint filed against a license holder. There is a rebuttable presumption that a credential holder who takes longer than 30 days to respond to a request of the board has not acted in a timely manner.
 - (d) Practicing without an active license.
 - (e) Practicing beyond the scope of practice permitted by law.
 - (f) Failing to inform the board of the advanced practice nurse prescriber’s certification status with a national certifying body as a nurse anesthetist, nurse-midwife, nurse practitioner or clinical nurse specialist.
 - (g) Violating any term, provision or condition of any order of the board.
 - (h) Failing to notify the board of a felony or misdemeanor in writing of the date, place and nature of the conviction or finding within 48 hours after the entry of the judgment of conviction. Notice shall include a copy of the judgment of conviction and a copy of the complaint or other information which describes the nature of the crime in order that the board may determine whether the circumstances of the crime of which the credential holder was convicted are substantially related to the practice of nursing.

- (i) Failing to report to the board or institutional supervisory personnel any violation of the rules of this chapter by a licensee. This provision does not require a nurse to report treatment information which would fall within the nurse-patient privilege set forth in s. 905.04(1)(b).

- (2) Violating or aiding and abetting a violation of any law substantially related to the practice of nursing. Being convicted of any crime substantially related to the practice of nursing. A certified copy of a judgment of conviction is prima facie evidence of a violation.

- (3) Confidentiality, patient privacy, consent or disclosure violations, including:
 - (a) Failing to safeguard the patient's dignity, and the right to privacy.
 - (b) Knowingly, recklessly or negligently divulging a privileged communication or other confidential patient health care information except as required or permitted by state or federal law.
 - (c) Making statements or disclosures that create a risk of compromising a patient's privacy, confidentiality and dignity, including statements or disclosures via electronic or social media.

- (4) Misconduct or abuse, including:
 - (a) Soliciting, borrowing, misappropriating, obtaining or attempting to obtain money or property from a patient or a patient's family.
 - (b) Obtaining or attempting to obtain any compensation by fraud, misrepresentation, deceit, duress or undue influence in the course of nursing practice.
 - (c) Abusing a patient by a single or repeated act of force, violence, harassment, deprivation, neglect, or mental pressure which reasonably could cause physical pain or injury or mental anguish or fear.
 - (d) Engaging in repeated or significant disruptive behavior or interaction with health care personnel, patients, family members or others that interferes with patient care or could reasonably be expected to adversely impact the quality of care rendered.
 - (e) Violating principles of professional boundaries, including:
 - 1. Failing to establish, maintain or communicate professional boundaries with the patient.
 - 2. Engaging in relationships with patients that could impair the nurse's professional judgment;
 - 3. Exploiting in any manner the professional relationship with a patient for the nurse's emotional, financial, sexual or personal advantage or benefit.
 - 4. Engaging in dual relationships if the nurse's ability to provide appropriate care would be impaired due to the nature of the additional relationship with the patient.
 - 5. Engaging in any dual relationship in mental health nursing.
 - 6. Engaging in self-disclosure to a patient which creates a risk or adversely impacts the patient's care and well-being.

7. Using any confidence of a patient to the patient's disadvantage or for the advantage of the nurse.
8. Failing to have a written agreement with the patient regarding financial matters.
9. Arrangements for reimbursement must be made at the initiation of the nurse-patient relationship or the case of emergency treatment as soon as is practicable.
10. Accepting gifts which are more than minimal value or cash from a patient or patient's family.

This paragraph does not include providing health care services to a person with whom the nurse has a preexisting, established personal relationship where there is no evidence of or potential for exploiting the patient and contact that is necessary for a health care purpose that meets the standards of the profession.

(f) Engaging in sexually misconduct, including:

1. Sexual explicit conduct, sexual contact, exposure, gratification, other sexual behavior with or in the presence of a patient.
2. Conduct that may reasonably be interpreted by a patient as sexual or in any verbal behavior that is sexually harassing to a patient.
3. Posing, photographing or recording the body or any body part of a current or former patient, other than for health care purposes.
4. Transmitting information about a patient via electronic media that can be reasonably interpreted as sexual or sexually demeaning by the current or former patient.
5. Engaging or attempting to engage in sexual or seductive conduct with a former patient if doing so creates a risk that the relationship could cause harm to or exploitation of the former patient.

For the purpose of this paragraph, due to the unique vulnerability of mental health patients, including patients with substance use disorders, nurses are prohibited from engaging in or attempting to engage in sexual or seductive conduct with such former patients, a former patient's immediate family or person responsible for the patient's welfare, for a period of at least 2 years after the termination of nursing services.

(5) Fraud, deception or misrepresentation, including:

- (a) Falsifying or inappropriately altering reports, patient documentation, agency records and other health documents.
- (b) Intentionally making incorrect entries in a patient's medical record or other related documents.
- (c) Engaging in abusive or fraudulent billing practices, including violations of federal Medicare and Medicaid laws or state laws.
- (d) Submitting false claims.
- (e) Fraud, deceit or material omission in obtaining a license or certification or in the renewal of the license or certification.
- (f) Impersonating another licensee or allowing another person to use the licensee's credential for any purpose.
- (g) Submitting false information in the course of an investigation.

- (h) Misrepresentation of credentials.
 - (i) Misleading, false or deceptive advertising or marketing.
- (6) Unsafe practice or substandard care, including:
- (a) Failing to perform nursing with reasonable skill and safety.
 - (b) Lack of knowledge, skill or ability to discharge professional obligations within the scope of nursing practice.
 - (c) Departing from or failing to conform to the minimal standards of acceptable nursing practice that may create unnecessary risk or danger to a patient's life, health or safety. Actual injury to a patient need not be established.
 - (d) Failing to supervise student experiences as a clinical nursing instructor.
 - (e) Failing to report to or leaving a nursing assignment without properly notifying appropriate supervisory personnel and ensuring the safety and welfare of the patient or client.
 - (f) Practicing nursing while under the influence of alcohol, illicit drugs or while impaired by the use of legitimately prescribed pharmacological agents or medications.
 - (g) Unable to practice safely by reason of alcohol or other substance use.
 - (h) Unable to practice safely by reason of psychological impairment or mental disorder.
 - (i) Unable to practice safely by reason of physical illness or impairment.
 - (j) Failure to consult or delay in consultation with supervisor.
 - (k) Failure to treat.
 - (L) Inadequate or improper infection control practices.
 - (m) Failure to provide medically reasonable or necessary items or services.
 - (n) Discriminating on the basis of age, marital status, gender, sexual preference, race, religion, diagnosis, socioeconomic status or disability while providing nursing services.
 - (o) Executing an order which the licensee knew or should have known would harm or present the likelihood of harm to a patient.
 - (p) Failing to execute a medical order unless the order is inappropriate and the licensee reports the inappropriate order to a nursing supervisor or other appropriate person.
 - (q) Failing to observe the conditions, signs and symptoms of a patient, record them, or report significant changes to the appropriate person.
- (7) Improper supervision or allowing unlicensed practice, including:
- (a) Delegating a nursing function or a prescribed health function when the delegation could reasonably be expected to result in unsafe or ineffective patient care.
 - (b) Knowingly aiding, assisting, advising or allowing a person to engage in the unlawful practice of nursing.
 - (c) Inappropriate or inadequate supervision or delegation.
- (8) Improper prescribing, dispensing, administering medication or drug related offenses, including:

- (a) Prescribing of any drug other than in the course of legitimate practice or as otherwise prohibited by law.
- (b) Dispensing of any drug other than in the course of legitimate practice or as otherwise prohibited by law.
- (c) Administering any drug other than in the course of legitimate practice or as otherwise prohibited by law.
- (d) Error in prescribing, dispensing or administering medication.
- (e) Obtaining, possessing or attempting to obtain or possess a drug without lawful authority.

SECTION 4. N 7.04 is repealed.

SECTION 5. EFFECTIVE DATE The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin administrative register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

COPIES OF RULE

Copies of this proposed rule are available upon request to (Name), (Title), Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708, by email at Sharon.Henes@wisconsin.gov or on our website at <http://dsps.wi.gov/Default.aspx?Page=44e541e8-abdd-49da-8fde-046713617e9e>.

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis

Original Updated Corrected

2. Administrative Rule Chapter, Title and Number

N 7

3. Subject

Misconduct or unprofessional conduct

4. Fund Sources Affected

GPR FED PRO PRS SEG SEG-S

5. Chapter 20, Stats. Appropriations Affected

20.165(1)(g)

6. Fiscal Effect of Implementing the Rule

No Fiscal Effect Increase Existing Revenues Increase Costs
 Indeterminate Decrease Existing Revenues Could Absorb Within Agency's Budget
 Decrease Cost

7. The Rule Will Impact the Following (Check All That Apply)

State's Economy Specific Businesses/Sectors
 Local Government Units Public Utility Rate Payers
 Small Businesses (if checked, complete Attachment A)

8. Would Implementation and Compliance Costs Be Greater Than \$20 million?

Yes No

9. Policy Problem Addressed by the Rule

The policy problem addressed by the rule is to update and modernize the misconduct or unprofessional conduct rule which has not been updated since 1995.

10. Summary of the businesses, business sectors, associations representing business, local governmental units, and individuals that may be affected by the proposed rule that were contacted for comments.

This rule was posted for 14 days for economic comments and none were received.

11. Identify the local governmental units that participated in the development of this EIA.

None

12. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

This rule will not have an economic or fiscal impact on specific businesses, business sectors, public utility rate payers, local governmental units or the state's economy as a whole. The rule addresses conduct of the licensee.

13. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

The benefit of implementing the rule is including current minimum standards of the profession necessary for the protection of the public. In addition, as a member state of the Nurse Licensure Compact, the benefit is to have consistency among the compact states as to what practices are construed as misconduct or unprofessional conduct.

The alternate to updating and modernizing the misconduct or unprofessional conduct rule is to continue with a current rule that creates uncertainty to the licensee as to what is misconduct or unprofessional conduct when a situation arises involving technology, practices or laws that were not in place in 1995.

14. Long Range Implications of Implementing the Rule

The long range implication is notice provided to the licensees and public as to what constitutes unprofessional conduct.

15. Compare With Approaches Being Used by Federal Government

None

16. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

The grounds for disciplinary actions in our neighboring states include: behavior which crosses professional boundaries; sexual conduct; fraud; departure from or failure to conform to the standards of nursing; practicing outside the scope; obtaining, possessing

ADMINISTRATIVE RULES
Fiscal Estimate & Economic Impact Analysis

or attempting to obtain a controlled substance outside the practice of nursing; unethical business practices; criminal convictions; violating confidentiality; obtaining money, property or services from a patient through the use of undue influence; failing to or inability to perform nursing with reasonable skill and safety; engaging in unethical practices; improper management of patient records; and improper supervision.

17. Contact Name

Sharon Henes

18. Contact Phone Number

(608) 261-2377

This document can be made available in alternate formats to individuals with disabilities upon request.

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**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Sharon Henes Administrative Rules Coordinator		2) Date When Request Submitted: <i>10 December 2013</i>	
		Items will be considered late if submitted after 4:30 p.m. and less than: ■ 10 work days before the meeting for Medical Board ■ 14 work days before the meeting for all others	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: 19 December 2013	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? PUBLIC HEARING ON ADMINISTRATIVE RULE N 9 RELATING TO NURSE LICENSE COMPACT Review and respond to Clearinghouse Report and Public Hearing comments	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: Hold Public Hearing at 8:00 a.m. Discuss any public hearing comments. Review, discuss and respond to any Clearinghouse comments.			
11) Authorization			
<i>Sharon Henes</i>		<i>10 December 2013</i>	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

STATE OF WISCONSIN
BOARD OF NURSING

IN THE MATTER OF RULE-MAKING :
PROCEEDINGS BEFORE THE :
BOARD OF NURSING : NOTICE OF PUBLIC HEARING
:

NOTICE IS HEREBY GIVEN that pursuant to authority vested in the Board of Nursing in §§ 15.08 (5) (b), 227.11 (2); 441.01; 441.50 (6); 441.50 (6)(c), Wis. Stats., and interpreting §441.50, Wis. Stats., the Board of Nursing will hold a public hearing at the time and place indicated below to consider an order to create N 9, relating to nurse licensure compact

Hearing Date, Time and Location

Date: December 19, 2013
Time: 8:00 a.m.
Location: 1400 East Washington Avenue
Room 121A
Madison, Wisconsin

APPEARANCES AT THE HEARING:

Interested persons are invited to present information at the hearing. Persons appearing may make an oral presentation but are urged to submit facts, opinions and argument in writing as well. Facts, opinions and argument may also be submitted in writing without a personal appearance by mail addressed to Sharon Henes, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8935, Madison, Wisconsin 53708. Written comments must be received at or before the public hearing to be included in the record of rule-making proceedings.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted: s. 441.50

Statutory authority: ss. 15.08 (5) (b), 227.11 (2); 441.01; 441.50 (6); 441.50 (6)(c) Stats.

Explanation of agency authority: An examining board shall promulgate rules for its own guidance and for the guidance of the profession to which it pertains. The Board may establish rules to prevent unauthorized persons from practicing professional nursing. The Board shall approve all rules for the administration of ch. 441 in accordance with ch. 227.

The Board shall have the authority to promulgate uniform rules and regulations which are developed by the nurse licensure compact administrators. These uniform rules shall be adopted by party states.

Related statute or rule: s. 441.50

Plain language analysis:

Wisconsin is a party state to the Nurse Licensure Compact. The Nurse Licensure Compact requires the adoption of the uniform rules for facilitation and coordination of the implementation of the Nurse Licensure Compact. The issues the rules address include: issuance of a multi-state license; limitations or discipline on a multi-state licensure; required data to collect (and who has access to that data); and various reporting to the information system requirements.

Summary of, and comparison with, existing or proposed federal regulation: None

Comparison with rules in adjacent states:

Illinois: Illinois is not part of the nurse licensure compact.

Iowa: Iowa is part of the nurse licensure compact and has adopted these rules.

Michigan: Michigan is not part of the nurse licensure compact.

Minnesota: Minnesota is not part of the nurse licensure compact.

Summary of factual data and analytical methodologies:

The nurse licensure compact administrators approve the uniform rules.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

These rules were posted for economic comments for a 14 day period and no comments were received.

Fiscal estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis is attached.

Initial Regulatory Flexibility Analysis or Summary:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department’s Regulatory Review Coordinator may be contacted by email at Tom.Engels@wisconsin.gov, or by calling (608) 266-8608.

Agency contact person:

Sharon Henes, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, Room 151, P.O. Box 8935, Madison, Wisconsin 53708; telephone 608-261-2377; email at Sharon.Henes@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Sharon Henes, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, Room 151, P.O. Box 8935, Madison, WI 53708-8935, or by email to Sharon.Henes@wisconsin.gov. Comments must be received at or before the public hearing to be held at 8:00 a.m. on December 19, 2013 to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. N 9 is created to read:

Chapter N 9
Nurse Licensure Compact

N 9.01. Definitions of terms in the Compact. (1) For the purpose of the compact:

- (a) “Board” means party state’s regulatory body responsible for issuing nurse licenses.
- (b) “Information system” means the coordinated licensure information system.
- (c) “Primary state of residence” means the state of a person’s declared fixed permanent and principal home for legal purposes; domicile.
- (d) “Public” means any individual or entity other than designated staff or representatives of party state Boards or the National Council of State Boards of Nursing, Inc.

(2) Other terms used in this chapter are to be defined as in s. 441.50, Stats.

N 9.02. Issuance of a license by a compact party state. For the purposes of this compact:

(1) As of July 1, 2005, no applicant for initial licensure will be issued a compact license granting a multi-state privilege to practice unless the applicant first obtains a passing score on the applicable NCLEX examination or any predecessor examination used for licensure.

(2) A nurse applying for a license in a home party state shall produce evidence of the nurse's primary state of residence. Such evidence shall include a declaration signed by the licensee. Further evidence that may be requested may include, but is not limited to:

- (a) Driver's license with a home address;
- (b) Voter registration card displaying a home address;
- (c) Federal income tax return declaring the primary state of residence;
- (d) Military Form No. 2058 – state of legal residence certificate;
- (e) W2 from US Government or any bureau, division or agency thereof indicating the declared state of residence.

(3) A nurse on a visa from another country applying for licensure in a party state may declare either the country of origin or the party state as the primary state of residence. If the foreign country is declared the primary state of residence, a single state license will be issued by the party state.

(4) A license issued by a party state is valid for practice in all other party states unless clearly designated as valid only in the state which issued the license.

(5) When a party state issues a license authorizing practice only in that state and not authorizing practice in other party states (i.e. a single state license), the license shall be clearly marked with words indicating that it is valid only in the state of issuance.

(6) A nurse changing primary state of residence, from one party state to another party state, may continue to practice under the former home state license and multi-state licensure privilege during the processing of the nurse's licensure application in the new home state for a period not to exceed ninety (90) days.

(7) The licensure application in the new home state of a nurse under pending investigation by the former home state shall be held in abeyance and the ninety (90) day period in sub. 6 shall be stayed until resolution of the pending investigation.

(8) The former home state license shall no longer be valid upon the issuance of a new home state license.

(9) If a decision is made by the new home state denying licensure, the new home state shall notify the former home state within (10) business days and the former home state may take action in accordance with that state's laws and rules.

N 9.03 Limitations on multi-state licensure privileges – Discipline. (1) Home state boards shall include in all disciplinary orders or agreements, which limit practice or

require monitoring the requirement that the licensee is subject to in the order or agreement, the requirement that the licensee will limit the licensee's practice to the home state during the pendency of the order or agreement. This requirement may, in the alternative, allow the nurse to practice in other party states with prior written authorization from both the home state and such other party state boards.

(2) An individual who had a license which was surrendered, revoked, suspended, or an application denied for cause in a prior state of primary residence, may be issued a single state license in a new primary state of residence until such time as the individual would be eligible for an unrestricted license by the prior state(s) of adverse action. Once eligible for licensure in the prior state(s), a multistate license may be issued.

N 9.04 Information System. (1) Levels of access as follows:

(a) The public shall have access to nurse licensure information limited to:

1. The nurse's name;
2. Jurisdiction(s) of licensure;
3. License expiration date;
4. Licensure classification and status;
5. Public emergency and final disciplinary actions, as defined by contributing state authority; and
6. The status of multi-state licensure privileges.

(b) Non-party state boards shall have access to all information system data except current significant investigative information and other information as limited by contributing party state authority.

(c) Party state boards shall have access to all information system data contributed by the party states and other information as limited by contributing non-party state authority.

(2) The licensee may request in writing to the home state board to review the data relating to the licensee in the information system. In the event a licensee asserts that any data relating to him or her is inaccurate, the burden of proof shall be upon the licensee to provide evidence that substantiates such claim. The board shall verify and within ten (10) business days correct inaccurate data to the information system.

(3) The board shall report to the information system within ten (10) business days the following:

- (a) Disciplinary action, agreement or order requiring participation in alternative programs or which limit practice or require monitoring (except agreements and order relating to participation in alternative programs required to remain nonpublic by contributing state authority);
- (b) Dismissal of complaint; and
- (c) Changes in status of disciplinary action, or licensure encumbrance.

(4) Current significant investigative information shall be deleted from the information system within ten (10) business days upon report of disciplinary action, agreement or order requiring participation in alternative programs or agreements which limit practice or require monitoring or dismissal of a complaint.

(5) Changes to licensure information in the information system shall be completed with ten (10) business days upon notification by a board.

SECTION 2. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin administrative register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

COPIES OF RULE

Copies of this proposed rule are available upon request to (Name), (Title), Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708, by email at Sharon.Henes@wisconsin.gov or on our website at <http://dsps.wi.gov/Default.aspx?Page=44e541e8-abdd-49da-8fde-046713617e9e>.

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis

Original Updated Corrected

2. Administrative Rule Chapter, Title and Number

N 9

3. Subject

Nurse Licensure Compact

4. Fund Sources Affected

GPR FED PRO PRS SEG SEG-S

5. Chapter 20, Stats. Appropriations Affected

20.165(1)(g)

6. Fiscal Effect of Implementing the Rule

No Fiscal Effect Increase Existing Revenues Increase Costs
 Indeterminate Decrease Existing Revenues Could Absorb Within Agency's Budget
 Decrease Cost

7. The Rule Will Impact the Following (Check All That Apply)

State's Economy Specific Businesses/Sectors
 Local Government Units Public Utility Rate Payers
 Small Businesses **(if checked, complete Attachment A)**

8. Would Implementation and Compliance Costs Be Greater Than \$20 million?

Yes No

9. Policy Problem Addressed by the Rule

Wisconsin is a party of the Nurse Licensure Compact. The Nurse Licensure Compact requires the adoption of the uniform rules for facilitation and coordination of implementation of the compact.

10. Summary of the businesses, business sectors, associations representing business, local governmental units, and individuals that may be affected by the proposed rule that were contacted for comments.

This rule was posted for economic impact comments for 14 days and none were received.

11. Identify the local governmental units that participated in the development of this EIA.

None

12. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

This rule will not have an economic or fiscal impact on specific businesses, business sectors, public utility rate payers, local governmental units or the state's economy as a whole.

13. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

The benefit of implement the rules is our continued participation in the Nurse Licensure Compact. The Nurse Licensure Compact allows nurses to practice across state lines. If Wisconsin were removed from the Nurse Licensure Compact, for failure to implement the uniform rules, there would be an economic impact on the state and nurses license in Wisconsin would be ineligible to practice out of state under their Wisconsin license.

14. Long Range Implications of Implementing the Rule

The long range implication of implementing the rule is continual participation in the Nurse Licensure Compact.

15. Compare With Approaches Being Used by Federal Government

None

16. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Iowa is a member of the Nurse Licensure Compact and have adopted the uniform rules. Illinois, Michigan and Minnesota are not current party states to the Nurse Licensure Compact.

17. Contact Name

Sharon Henes, Administrative Rules Coordinator

18. Contact Phone Number

(608) 261-2377

This document can be made available in alternate formats to individuals with disabilities upon request.



LEGISLATION AND RULES COMMITTEE

BOARD OF NURSING
ROOM 121A, 1400 EAST WASHINGTON AVENUE, MADISON WI
CONTACT: DAN WILLIAMS (608) 266-2112
December 19, 2013

Notice: The following agenda describes the issues that the Committee plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a description of the actions and deliberations of the Committee. A quorum of the Board may be present during the committee meeting.

8:10 a.m.

CALL TO ORDER – ROLL CALL – OPEN SESSION

- A. Approval of Agenda**
- B. Approval of Legislation and Rules Committee Minutes of December 16, 2013**
- C. Rule-making Matter - Discussion and Consideration**
 - 1) Draft rule amending N 2 and N 3 relating to applications
 - 2) Draft rule amending N 1 relating to school approval
- D. Public Comments**

ADJOURNMENT OF LEGISLATION AND RULES COMMITTEE MEETING

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Sharon Henes Administrative Rules Coordinator		2) Date When Request Submitted: <i>10 December 2013</i>	
		Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Board of Nursing, Legislative/Rule-making Committee			
4) Meeting Date: 19 December 2013	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Rule-making Matters – Discussion and Consideration Draft rule amending N 2, 3 relating to licensure Draft rule amending N 1 relating to school approval 2014 Rule Projects	
7) Place Item in: <input type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: <p>NOTE: There will be revisions to the documents after the Legislative/Rule-making Committee meets on December 16th and prior to this meeting.</p>			
11) Authorization			
<i>Sharon Henes</i>		<i>10 December 2013</i>	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Chapter N 2
LICENSURE

N 2.01 **Authority.** This chapter is adopted pursuant to authority of ss. 15.08, 227.11, and 441.01(3).

N 2.02 **Definitions.** As used in this chapter.

- (1) “Board” means board of nursing.
- (2) “Board approved school” means one of the following:
 - (a) A school in Wisconsin which has been approved by the board or the board has granted authorization to admit students under ch. N 1.
 - (b) A school which participates in the electronic application process.
- (3) “Certificate of Approval” means the school of nursing approves the applicant to take the NCLEX prior to receiving a diploma in practical nursing or professional nursing.
- (4) “Certificate of Completion” means the applicant has completed the portion of the program equivalent to a diploma in practical nursing or professional nursing.
- (5) “Comparable school” means one of the following:
 - (a) A school holding nursing accreditation by a board-recognized nursing accreditation organization.
 - (b) A school located in the United States approved by the board of nursing for that jurisdiction
 - (c) A school located in a U.S. territory or a province of Canada which approved by the board of nursing for that jurisdiction and meets the standards of the Wisconsin board of nursing.
- (6) “Department” means the department of safety and professional services.
- (7) “Direct supervision” means immediate availability to coordinate, direct and inspect the practice of another.
- (8) “LPN” means licensed practical nurse.
- (9) “NCLEX” means national council licensure examination
- (10) “RN” means registered nurse.

SUBCHAPTER I
LICENSURE BY EXAMINATION

N 2.10 **Qualifications for licensure.** (1) REGISTERED NURSE APPLICANTS. An applicant is eligible for licensure if the applicant:

- (a) Graduated from a high school or its equivalent;
- (b) Does not have an arrest or conviction record, subject to ss. 111.321, 111.322 and 111.335.
- (c) Graduated from one of the following:

1. a board-approved school of professional nursing
2. a comparable school of professional nursing

or submits evidence of general and professional educational qualifications comparable to those required in this state at the time of graduation.

- (d) Passes the NCLEX.

(2) LICENSED PRACTICAL NURSE APPLICANTS. An applicant is eligible for licensure if the applicant:

- (a) Completed two years of high school or its equivalent;
- (b) Does not have an arrest or conviction record, subject to ss. 111.321, 111.322 and 111.335.
- (c) Graduated from one of the following:
 1. a board-approved school of practical nursing
 2. a comparable school of practical nursing

or submits evidence of general and professional educational qualifications comparable to those required in this state at the time of graduation.

(d) Passes the NCLEX.

N 2.11 Application procedure for applicants from board approved schools. (1) Each applicant shall complete and submit an application by the electronic application process or on forms provided by the department and pay the fee.

(2) The educational administrator or designee for a school of professional nursing or practical nursing shall either:

(a) submit via the electronic application process a verification that the person has graduated or received a certificate of completion; or

(b) submit a certification of graduation or completion to the department.

(3) NCLEX.

(a) The board shall notify the applicant of eligibility for admission to the examination once it receives verification of one of the following:

1. Certificate of approval

2. Graduation

3. Certificate of completion

(b) The applicant shall contact the examination provider to schedule the examination date and time within one year from the time the notice of eligibility is received.

(c) The board shall send notification of results to applicants who fail to earn a passing score on the NCLEX. An applicant may apply to the board for authorization to schedule reexamination. The reexamination may not occur earlier than 45 days after the most recent sitting for the examination.

(4) An applicant who has a pending criminal charge or has been convicted of any crime or ordinance violation shall provide the board all related information necessary for the board to determine whether the circumstances of the arrest or conviction or other offense substantially relate to the circumstances of the licensed activity.

(5) An applicant who has committed any act, which would be subject to discipline under N 7, shall provide the board with all related information regarding the act necessary for the board to make a determination on the application for licensure.

N 2.12 Application procedure for applicants from comparable schools. (1) Each applicant shall complete and submit an application on forms provided by the department.

(2) The school of professional nursing or practical nursing shall forward directly to the department, official transcripts of nursing education for applicants who graduated from the school. If the applicant graduated from a school of professional nursing or practical nursing from a U.S. territory or outside the United States, the applicant shall submit one of the following:

(a) For a professional nursing applicant, a valid certificate issued by the commission on graduates of foreign nursing schools or another board approved entity which evaluates education.

(b) For a practical nursing applicant, a credential evaluation service academic report and demonstration of passing a board accepted language proficiency exam.

(3) NCLEX.

(a) The board shall notify the applicant of eligibility for admission to the examination once it receives verification of one of the following:

1. Certificate of approval

2. Graduation

(b) The board shall notify the applicant of eligibility for admission to the examination. The applicant shall contact the examination provider to schedule the examination date and time within one year from the time the notice of eligibility is received.

(c) The board shall send notification of results to applicants who fail to earn a passing score on the NCLEX. An applicant may apply to the board for authorization to schedule reexamination. The reexamination may not occur earlier than 45 days after the most recent sitting for the examination.

(4) An applicant who has a pending criminal charge or has been convicted of any crime or ordinance violation shall provide the board all related information necessary for the board to determine whether the circumstances of the arrest or conviction or other offense substantially relate to the circumstances of the licensed activity.

(5) An applicant who has committed any act, which would be subject to discipline under N 7, shall provide the board with all related information regarding the act necessary for the board to make a determination on the application for licensure.

SUBCHAPTER II LICENSURE BY ENDORSEMENT

N 2.20 Endorsement of an applicant from a nurse licensure compact state. A license from a state which has adopted the nurse licensure compact is considered to have met educational and other qualifications comparable to those required in this state.

(1) The applicant shall file a completed application, declare Wisconsin as the primary state of residence, and pay the applicable fee.

(2) An applicant who has a pending criminal charge or has been convicted of any crime or ordinance violation shall provide the board with all related information necessary for the board to determine whether the circumstances of the arrest or conviction or other offense substantially relates to the practice of nursing.

(3) An applicant who has committed any act, which would be subject to discipline under N 7, shall provide the board with all related information regarding the act necessary for the board to make a determination on the application for licensure.

(4) An applicant who has a nursing license encumbered by adverse action shall provide the board with all related information necessary to determine whether the Board deems the action taken to warrant a denial in Wisconsin. Any license issued to an applicant with an encumbered nursing license elsewhere shall be a single state license to practice in the state of Wisconsin.

N 2.21 Endorsement of an applicant from another U.S. state, territory or Canada. (1) (a) A license from another U.S. state, territory or Canada is considered to have met educational and other qualifications comparable to those required in this state provided the requirements of the initial license included the following:

1. Graduated from a school approved by the board in the jurisdiction of initial licensure or had education the board in the jurisdiction of initial licensure deemed to be comparable to a school that board approves.

2. Passed the NCLEX.

(b) An applicant, whose initial license from another U.S. state, territory or Canada does not meet the requirements in par. (a), shall submit the following to determine whether the qualifications are comparable:

1. Evidence of educational qualifications.

2. Evidence of passing the NCLEX or other nursing licensure examination.

(2) An applicant shall submit a completed application and pay the applicable fee. The application shall include:

- (a) Verification of licensure from the state, territory or province in which the original license by examination was issued and the state, territory or province in which the current license was issued.
- (b) Documentation of employment history.
- (c) An applicant who has a pending criminal charge or has been convicted of any crime or ordinance violation shall provide the board with all related information necessary for the board to determine whether the circumstances of the arrest or conviction or other offense substantially relate to the practice of nursing.
- (d) An applicant who has a license encumbered by adverse action shall provide the board with all related information necessary to determine whether the Board deems the action taken to warrant a denial in Wisconsin.
- (e) An applicant who has been terminated from any employment related to nursing shall provide the board with all related information necessary to determine current competency.
- (f) An applicant who has committed any act, which would be subject to discipline under N 7, shall provide the board with all related information regarding the act necessary for the board to make a determination on the application for licensure.

(3) An applicant who does not have current nursing education or been employed in a position that requires a nursing license within the last five years may apply to the board for a limited license to enable the applicant to complete a nursing refresher course approved by the board. Upon successful completion of an approved nursing refresher course, the license holder may petition the board for full licensure.

SUBCHAPTER III TEMPORARY PERMITS

N 2.30 Definitions. In this subchapter:

- (1) “G.N.” means graduate nurse.
- (2) “G.P.N.” means graduate practical nurse.

N 2.31 Application. A nurse who has graduated from a board approved school or comparable school or granted a certificate of completion by a board approved school may be granted a temporary permit. An applicant shall submit a completed application and pay the applicable fee. The application shall include one of the following:

- (1) Verification from a board approved school via the electronic application process that the applicant has graduated or received a certificate of completion.
- (2) A certification of graduation or completion from a board approved school
- (3) An official transcript of nursing education submitted by the school of professional nursing or practical nursing directly to the department.

N 2.32 Title. (1) A registered nurse applicant for licensure by exam who is granted a temporary permit may use the title “graduate nurse” or the letters “G.N.”

(2) A practical nurse applicant for licensure by exam who is granted a temporary permit may use the title “graduate practical nurse” or the letters “G.P.N.”

(3) A registered nurse or practical nurse for licensure by endorsement who is granted a temporary permit may use the title “registered nurse” or “licensed practical nurse.”

N 2.33 **Supervision.** (1) The holder of a temporary permit shall practice only under the direct supervision of registered nurse.

(2) A holder of a temporary permit who is currently licensed as a registered nurse or practical nurse in another jurisdiction is not required to practice under direct supervision.

N 2.34 **Duration.** The temporary permit is valid for a period of three months or until the holder receives notification of failing the NCLEX, whichever is shorter. Practice under temporary permits, including renewals under s. 2.35 may not exceed 12 months total duration.

N 2.35 **Renewal.** (1) A temporary permit for a registered nurse or practical nurse may be renewed once by completing an application, completing a nursing workforce survey and payment of applicable fees.

(2) Subsequent renewals may be granted in hardship cases including illness, family illness or death, accident, natural disaster or delay of verification from another state. The board shall consider each application for renewal under this subsection individually on its merits, and the board may grant a renewal as deemed appropriate.

N 2.36 **Denial or Revocation.** A temporary permit may be denied or revoked for the following:

(1) Providing fraudulent information on an application for licensure.

(2) Misrepresentation of being an R.N., G.N., L.P.N. or G.P.N. without holding a valid temporary permit.

(3) Violation of any of the rules of conduct set forth in ch. N 7.

Chapter N 3 EXAMINING COUNCILS

N 3.01 **Duties.** The duties of the examining councils on registered nurses and licensed practical nurses serve the board of nursing in an advisory capacity.

N 3.02 **Appointment.** (1) The board shall send to nursing related organizations, schools and others a call for nominations for open council appointments prior to the expiration of a term.

(2) Nominations for council appointments shall be filed with the department. Consent of the person nominated shall be included. Self-nominations are allowed.

(3) The board shall appoint a nominee from those submitted.

N 3.03 **Registered nurses council.** (1) **COMPOSITION.** The registered nurse council shall consist of four registered nurses. (2) **QUALIFICATIONS.** Qualifications for appointment to the registered nurse council are a current Wisconsin license to practice professional nursing and experience in nursing practice or nursing education within three years immediately preceding the appointment.

N 3.04 **Practical nurses council.** (1) **COMPOSITION.** The practical nurses council shall consist of one registered nurse, three licensed practical nurses and one registered nurse who is a faculty member of an approved school for practical nurses. No member may be a member of the examining council on registered nurses.

(2) **QUALIFICATIONS.** The qualifications for appointment to the practical nurses council is as follows:
(a) The two registered nurse members of the council shall have a current Wisconsin license to practice professional nursing. One registered nurse member shall have experience as a supervisor of practical

nurses within three years immediately preceding the appointment. One registered nurse member shall be a faculty member of an approved school for practical nurses.

(b) The practical nurses members of the council shall have a current Wisconsin license to practice as a licensed practical nurse and experience in practical nursing within three years immediately preceding the appointment.

N 3.05 Termination of council members. The Board may terminate the appointment of a council member prior to the expiration of the term if it finds the member is not satisfactorily carrying out any of the duties or if the member is found to have violated rules of the board.

N 1.01 Authority and Intent

N 1.02 Definitions. In this chapter:

- (1) “Annual NCLEX pass rate” means the NCLEX pass rates for those who took the NCLEX between January 1st and December 31st.
- (2) “Certificate of completion” means a student has completed the portion of the program equivalent to a diploma in practical nursing or professional nursing.
- (3) “Class” means a graduating class for each 12 month period
- (4) “Institution” means the college, university or governing body which has the authority to conduct a school of nursing.
- (5) “National nursing accreditation” means the school of nursing conforms with the standards of a board approved nursing accreditation agency.
- (6) “NCLEX” means national council licensure examination.
- (7) “Out of state school” means a school operating in Wisconsin with a physical location outside of Wisconsin.
- (8) “Regional accreditation” means that institution conforms with the standards of education prescribed by a regional accrediting commission recognized by the U.S. department of education.
- (9) “School of Nursing” means a school for professional nurses or practical nurses.
- (10) “School of practical nursing” means a school preparing students for practical nurse licensure.
- (11) “School of professional nursing” means a school preparing students for registered nurse licensure. This includes schools granting certificate of completion for practical nurse licensure or professional nurse licensure.

N 1.03 Authorization to plan a school of nursing. (1) An institution planning to establish and conduct a school of nursing for professional or practical nursing shall file with the board an application including the following:

- (a) Name and address of the controlling institution and evidence of the accreditation status of the controlling institution.
 - (b) Statement of intent to establish a school of nursing, including the academic and licensure levels of the program and the primary method of instruction.
 - (c) Evidence of the availability of sufficient clinical facilities and resources.
 - (d) Plans to recruit and employ a qualified educational administrator and qualified faculty.
 - (f) A proposed time line for planning and implementing the program and intended date of entry for the first class.
- (2) The board shall make a decision on the application within two months of the receipt of the application and notify the controlling institution of the action taken.

N 1.04 Authorization to admit students. (1) The school of nursing shall file with the board an application including the following:

- (a) Verification of employment of an educational administrator.
- (b) Evidence of provision of faculty meeting the qualifications in s. N 1.08(3).
- (c) The school of nursing’s philosophy and objectives.

- (d) An overview of curriculum including:
 1. Content.
 2. Course sequence
 3. Course descriptions
 4. Program evaluation plan
 5. Course syllabi for 1st year and plan for subsequent years.
 - (e) Verification of the establishment of student policies for admission, progression, retention and graduation.
 - (f) Verification of the students' ability to acquire clinical skills by providing the following:
 1. Letter of intent or contracts from clinical facilities securing clinical opportunities and documentation of the facility, type, size, number of beds and type of patients.
 2. Documentation of simulation equipment and experiences.
 - (g) An updated time line for implementing the program and intended date for entry of the first class.
- (2) The board shall make a decision on the application within two months of the receipt of the completed application.
 - (3) Withdrawal of authorization may occur for failure to meet N 1.08 standards.

N 1.05 Approval of school of nursing. (1) A school of nursing may apply for approval of program upon graduation on the 1st class or eligibility for NCLEX, but may not apply later than graduation of the 3rd class. The school of nursing shall submit the following:

- (a) A self-evaluation report setting forth evidence of compliance with the standards in s. N 1.08.
 - (b) The school of nursing's ongoing systematic evaluation plan, including an evaluation of the NCLEX success rate.
- (2) The board may conduct a site survey of the school of nursing. A determination to conduct a site survey shall occur within 2 months of receipt of completed application for approval.
 - (3) The board shall make a decision on the application within two months of the completed site survey or receipt of the application, whichever is later. The board shall approve the school based on verification that the program is in compliance with nursing education standards in N 1.08.
 - (4) The board may grant conditional approval. The notice of conditional approval shall contain a short statement in plain language of the basis, specifying the standard upon which the conditional approval is based. A school of nursing who receive a conditional approval may not admit new students to their school until the school receives full approval. The school of nursing may apply for full approval in three months.
 - (5) If the board denies the school of nursing approval, the notice of denial shall contain a short statement in plain language of the basis for denial, specifying the standard upon which the denial is based. The school of nursing shall do the following:
 - (a) The controlling institution shall implement the time frame established by the board for transfer of enrolled students to an approved program and report to the board the date of transfer for each student by name.
 - (b) Arrange for the secure storage and access to academic records and transcripts for the next 50 years. Provide the board with the name of the educational institution or other

organization that will be responsible for secure storage and access to academic records and transcripts for 50 years.

(c) Program closure shall occur when the last student has transferred.

(d) The board may require progress reports during the closure process.

(6) The school of nursing denied approval or given a conditional approval may request a hearing within 30 calendar days after the mailing of a notice. The school of nursing may be granted a stay of the school closure during the appeal process.

N 1.06 Approval of out of state school of nursing. (1) APPROVAL. An out of state school of nursing shall be approved if all of the following:

(a) The school is approved by the board of the state the school is located.

(b) The school is accredited by a nursing accreditation body approved by the board.

(2) CONTINUED APPROVAL. An out of state school shall maintain approval as long as school of nursing meets the requirements in s. 1.06(1)(a) and (b).

N 1.07 Accreditation. (1) A school of nursing shall receive national nursing accreditation by a board recognized nursing accreditation agency within three years of school approval. Schools of nursing which have received board approval prior to July 1, 2014 shall receive national nursing accreditation by a board recognized nursing accreditation agency by July 1, 2017.

(2) Schools of professional nursing that grant a certificate of completion shall hold accreditation at the level of the complete degree.

(3) Failure to maintain national nursing accreditation shall result in withdrawal of school approval.

N 1.08 Standards (1) ORGANIZATION AND ADMINISTRATION. The institution shall assume legal responsibility for overall conduct of the school of nursing.

(a) The institution shall designate an educational administrator, establish administrative policies and provide fiscal, human, physical, clinical and technical learning resources adequate to support school processes, security and outcomes.

(b) The institution shall maintain regional accreditation.

(c) There shall be written administrative policies which are in accord with the institution.

(d) There shall be written contracts between the school of nursing and institutions which offer associated academic study, clinical facilities and agencies for related services.

(2) EDUCATIONAL ADMINISTRATOR. (a) The qualifications for the educational administrator are all of the following:

1. Current, active registered nurse license or privilege to practice that is not encumbered.

2. A graduate degree with a major in nursing.

3. Knowledge of learning principles for adult education, including nursing curriculum development, administration and evaluation and either educational preparation or two years experience as an instructor in a nursing education program within the last five years.

4. Current knowledge of nursing practice.

(b) The institution shall notify the Board within 48 hours of the termination of an educational administrator and designate the interim educational administrator within five business days. The institution may request approval of an interim educational administrator who does not meet the

qualifications in paragraph (a). The interim educational administrator may serve no longer than 6 months. The institution may request an extension of time based upon hardship.

(3) FACULTY. The school of nursing shall have evidence of the faculty meeting standards on file in the school of nursing office and available upon request to the board.

(a) *Qualifications for professional nursing faculty.* The qualifications for the faculty of a school of professional nursing are all of the following:

1. Hold a current, active registered nurse license or privilege to practice that is not encumbered.
2. A graduate degree with a major in nursing. Interprofessional faculty teaching non-clinical nursing courses shall have advanced preparation appropriate for the content being taught.

(b) *Qualifications for practical nursing faculty.* The qualifications for the faculty of a school of practical nursing are all of the following:

1. Hold a current, active registered nurse license or privilege to practice that is not encumbered.
2. A baccalaureate degree with a major in nursing.

(c) *Faculty Exceptions.* An educational administrator may apply to the board for exceptions to faculty requirements. A minimum of fifty percent of faculty must meet the faculty qualifications.

1. 'Standard exception.' A standard exception may be renewed upon showing proof of progress and continued active enrollment each year. The standard exception is for a person who has a baccalaureate degree in nursing and is actively enrolled in one of the following:

- a. A master's program with a major in nursing.
- b. A bachelor's in nursing to doctorate in nursing.
- c. A doctorate in nursing.

2. 'Emergency exception.' A person with a baccalaureate degree in nursing may be employed for a short term, unanticipated emergency situation including medical leave. The emergency exception is for a term no longer than one semester and may not be renewed.

3. 'Non nursing masters degree exception.' Each school of professional nursing is allowed to apply for one exception of the graduate degree qualifications provided the person meets all of the following:

- a. A bachelor degree in nursing.
- b. A graduate degree related to the topic of the course the person is teaching.
- c. Nursing experience in the area of teaching assignment.
- d. Unique combination of knowledge, experience and skills that will best serve the school of nursing, faculty and students in a specific content area.

(4) CURRICULUM. The curriculum shall enable the student to develop the nursing knowledge, skills and abilities necessary for the level, scope and standards of competent nursing practice expected at the level of licensure. Curriculum shall be revised as necessary to maintain a program that reflects advances in health care and its delivery. The curriculum shall include:

(a) Evidence-based learning experiences and methods of instruction consistent with the written curriculum plan. The methods of instruction may include distance education methods.

(b) Diverse didactic and clinical learning experiences consistent with program outcomes.

(c) Coursework shall include:

1. Content in the biological, physical, social and behavioral sciences to provide a foundation for safe and effective nursing practice.
 2. Content regarding professional responsibilities, legal and ethical issues, history and trends in nursing and health care.
 3. Didactic content and supervised clinical experiences in the prevention of illness and the promotion, restoration and maintenance of health in patients across the lifespan and from diverse cultural, ethnic, social and economic backgrounds.
- (5) PATIENT EXPERIENCES. (a) Patient experiences shall occur in a variety of clinical or simulated settings and shall include:
1. Integrating patient safety principles throughout the didactic and clinical coursework.
 2. Implementing evidence-based practice to integrate best research with clinical expertise and patient values for optimal care, including skills to identify and apply best practices to nursing care.
 3. Providing a patient-centered culturally competent care that recognizes that the patient or designee is the source of control and full partner in providing coordinated care by the following:
 - a. Respecting patient differences, values, preferences and expressed needs.
 - b. Involving patients or designees in decision-making and care management.
 - c. Coordinating and managing patient care across settings.
 - d. Explaining appropriate and accessible interventions to patients and populations that may positively affect their ability to achieve healthy lifestyles.
 4. Collaborating with interprofessional teams to foster open communication, mutual respect, and shared decision-making in order to achieve quality patient care.
 5. Participating in quality improvement processes to monitor patient care outcomes, identify possibility of hazards and errors and collaborate in the development and testing of changes that improve the quality and safety of health care systems.
 6. Using information technology to communicate, mitigate errors and support decision-making.
- (b) All cooperating agencies selected for clinical experiences shall have standards which demonstrate concern for the patient and evidence the skillful application of all measures of safe nursing practices.
- (c) All faculty teaching clinical or practicum courses shall be experienced in the clinical area of the course and maintain clinical expertise.
- (d) Faculty supervised clinical practice shall include the following:
1. Development of skills in direct patient care.
 2. Making clinical judgments.
 3. Care and management of both individuals and groups of patients across the lifespan.
 4. Delegation to and supervision of other health care providers.
- (e) Clinical experiences shall be supervised by qualified faculty.
- (f) All student clinical experiences, including those with preceptors, shall be directed by nursing faculty.
- (6) PRECEPTORS. (a) Preceptors shall be approved by the faculty of the school of nursing.
- (b) The school of nursing shall provide each preceptor with an orientation concerning the roles and responsibilities of the students, faculty and preceptors. The preceptor shall have clearly documented roles and responsibilities.

- (c) Clinical preceptors shall have an unencumbered license or privilege to practice in Wisconsin as a nurse at or above the level for which the student is being prepared.
- (d) Preceptors shall demonstrate competencies related to the area of assigned clinical teaching responsibilities.
- (7) EVALUATION. The school of nursing shall implement a comprehensive, systematic plan for ongoing evaluation. Evidence of implementation shall reflect achievement of program outcomes.

N 1.09 NCLEX pass rates. The school of nursing NCLEX pass rate includes all programs or tracks in the school of nursing. The board shall consider both the registered nurse NCLEX and practical nurse NCLEX pass rates when evaluating a school of professional nursing that grants a certificate of completion for practical nursing.

(1) NCLEX PASS RATE STANDARD. A school of nursing meets the NCLEX pass rate standard by one of the following:

- (a) The annual NCLEX pass rate of graduates taking the NCLEX for the first time within six months of graduation is 80%.
- (b) The annual NCLEX pass rate of all graduates taking the NCLEX, including those who repeated the test, is a minimum of 80%. The school shall submit an explanation or analysis documentation and the school's plan to meet the pass rate of those who take the NCLEX for the first time. The plan does not require board approval.

(2) NCLEX PASS RATE STANDARD NOT MET. (a) If the NCLEX pass rate standard is not met, the school of nursing shall receive a warning letter. The school shall identify factors that are potentially affecting the low NCLEX pass rate and submit an institutional plan for assessment and improvement of NCLEX results including outcomes and times which is approved by the board no later than July 1st. The plan shall address administration, faculty, students, curriculum, resources and policies.

(b) The school of nursing shall submit annual progress reports to the board including the outcomes of the institutional approved plan as long as the NCLEX pass rate standard is not met.

N 1.10 Continuation of board approval. (1) Schools of nursing shall file with the board the following:

- (a) Annual self-evaluation reports.
- (b) All documents submitted to or received from nursing accreditation agencies.
- (c) Notification of withdrawal or change in school nursing accreditation status.

(2) Failure to maintain nursing accreditation shall result in withdrawal of board approval and the procedures in s. N 1.11(2) will commence.

(3) The board may review the school of nursing to determine whether N 1.08 standards are being met in the following situations:

- (a) Change in school nursing accreditation status.
- (b) Nursing accreditation reports indicate standards are not being met.
- (c) Complaints regarding the conduct of the program are received and it is necessary to validate the complaints.
- (d) Failure to meet NCLEX pass rate standards for more than 2 consecutive years.
- (e) Violation of any of the rules under this chapter.

(4) The review of the school may include any of the following:

- (a) A site survey

- (b) A self-study report.
- (c) A progress report.
- (5) If the board makes a determination N 1.08 standards are not being met, the following procedure shall be followed:
 - (a) The school of nursing shall submit an institutional plan, including timelines, to correct identified deficiencies in the school of nursing.
 - (b) The board will review the proposed plan and may make modifications to the plan.
 - (c) The school of nursing will make progress reports to the board as requested.
 - (d) The board may withdraw board approval if the school of nursing continues to not meet standards.

N 1.11 Closure of a school of nursing. (1) VOLUNTARY. The institution shall do the following:

- (a) Submit a plan of intent to close a school of nursing, including:
 - 1. The date of intended closure.
 - 2. Reason for the closure.
 - 3. Provide placement for students who have not completed their nursing education.
 - (b) The institution shall ensure that the school of nursing is maintained, including retention of adequate number of faculty and approved curriculum, until the last student is transferred or graduates from the school of nursing.
 - (c) The institution shall notify the board of the name of the educational institution or other organization that will be responsible for secure storage and access to academic records and transcripts for 50 years.
- (2) WITHDRAWAL OF NURSING APPROVAL. (a) If the board withdraws approval of the school of nursing, the notice of withdrawal of approval shall contain a short statement in plain language of the basis for withdrawal of approval. The school of nursing may request a hearing within 30 calendar days after the mailing of the notice.
- (b) The school of nursing shall do the following:
 - 1. The institution shall implement the time frame established by the board for transfer of enrolled students to an approved program and report to the board the date of transfer for each student by name.
 - 2. Arrange for the secure storage and access to academic records and transcripts for the next 50 years. Provide the board with the name of the educational institution or other organization that will be responsible for secure storage and access to academic records and transcripts for 50 years.
 - 3. Program closure shall occur when the last student has transferred.
 - 4. The board may require progress reports during the closure process.
 - (c) The school of nursing may be granted a stay of the closure of the school during the appeal process.

N 1.12 Nursing Refresher Course Approval. A nurse refresher course is designed for nurses who have not been practicing for five years or more.

- (1) FACULTY. (a) The instructor shall meet the following qualifications:
- 1. Masters degree in nursing
 - 2. Recent clinical experience or clinical teaching experience

(b) If preceptors are used, the preceptor is selected by the instructor using criteria developed for the course and the instructor provides supervision of preceptors.

(2) PROFESSIONAL NURSE CONTENT. The nurse refresher course designed for professional nurses shall have the following content:

(a) Theory portion including:

1. Nursing process review
2. Infection control
3. Medication and pharmacology update
4. Recent trends in nursing techniques and responsibilities
5. Communication
6. Documentation and reporting
7. Supervision and delegation

(b) Skills lab of at least 25 hours including basic nursing skills review and technology and equipment update.

(c) Directly supervised or precepted clinical experience of 100 hours or more performed in a hospital, clinic, long term, or subacute facility.

(3) PRACTICAL NURSE CONTENT. The nurse refresher course designed for practical nurses shall have the following content:

(a) Theory portion including:

1. Nursing process review
2. Infection control
3. Medication and pharmacology update
4. Recent trends in nursing techniques and responsibilities
5. Communication
6. Documentation and reporting
7. Supervision and delegation
8. Aging population

(b) Skills lab of at least 15 hours including basic nursing skills review and technology and equipment update.

(c) Directly supervised or precepted clinical experience of 70 hours or more performed in a hospital, clinic, long term or subacute facility.

(4) APPROVAL PROCESS. The board will review curriculum of nurse refresher courses submitted for inclusion on a listing of approved courses. Individual course participants shall be required to submit curriculum only if the course is not on the approved list.

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BOARD OF NURSING

MEETING MINUTES

NOVEMBER 14, 2013

PRESENT: Julia Nelson, Julie Ellis, Carol Ott, Gretchen Lowe, Jeffrey Miller, Lillian Nolan, Maria Joseph

STAFF: Dan Williams, Executive Director; Matt Guidry, Bureau Assistant; Sharon Henes, Rules Coordinator; Pamela Stach, Legal Counsel; and other Department Staff

CALL TO ORDER

The chair called the meeting to order at 8:05a.m. A quorum of seven (7) members was confirmed.

ADOPTION OF AGENDA

- Item "T.15"(Open Session) **ADD** the agenda item titled "13 NUR 188 Dawn E. Witek"

REPORT OF PRACTICE COMMITTEE

MOTION: Julie Ellis moved for the adoption of the Practice Committee's recommendations. The Board adopts by unanimous consent.

REPORT OF EDUCATION AND LICENSURE COMMITTEE

MOTION: Carol Ott moves to adopt the Education and Licensure Committee's recommendations. The Board adopts by unanimous consent.

REPORT OF LEGISLATION AND RULES COMMITTEE

MOTION: Jeffrey Miller moves to adopt the Legislation and Rules Committee's recommendations. The Board adopts by unanimous consent.

APPROVAL OF MINUTES OF OCTOBER 10, 2013

MOTION: Carol Ott moved, seconded by Jeffrey Miller, to approve the minutes of October 10, 2013 as published. Motion carried unanimously.

ADMINISTRATIVE MATTERS

MOTION: Julie Ellis moved, seconded by Jeffrey Miller, to thank Gretchen Lowe for hard work and dedication, and excellent service to the Board of Nursing. Motion carried unanimously.

MOTION: Gretchen Lowe moved, seconded by Julie Ellis, to thank Carol Ott for hard work and dedication, and excellent service to the Board of Nursing. Motion carried unanimously.

MOTION: Lillian Nolan moved, seconded by Julie Ellis, to designate the chair to draft a letter to Wisconsin State Representative Ott in support of Legislation to amend 440.15 and 440.03 to make an exception to require finger printing and criminal background checks as a requirement for initial licensure or endorsement for nurses. Motion carried unanimously.

LEGISLATION/ADMINISTRATIVE RULE MATTERS

MOTION: Julie Ellis moved, seconded by Carol Ott, the board will develop a Nursing Workforce Survey with the Department of Safety and Professional Services and the Department of Workforce Development to the satisfaction of the Board pursuant to Wis. Stats. Section 441.01(7)(b) for those credential holders renewing after the applicable renewal date. Motion carried unanimously.

CLOSED SESSION

MOTION: Lillian Nolan moved, seconded by Maria Joseph, to convene to closed session to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85 (1)(b), Stats.); to consider closing disciplinary investigation with administrative warning (ss.19.85(1)(b), Stats. and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85 (1)(f), Stats.); and, to confer with legal counsel (s.19.85(1)(g), Stats.). Julia read the language of the motion. The vote of each member was ascertained by voice vote. Roll Call Vote; Julia Nelson-yes; Gretchen Lowe-yes; Julie Ellis-yes; Lillian Nolan-yes; Jeffrey Miller-yes; and Carol Ott-yes; Maria Joseph – yes. Motion carried unanimously.

The Board convened into Closed Session at 11:25 a.m.

DELIBERATION OF PROPOSED FINAL DECISION AND ORDER

Jeffrey Miller has recused himself from voting and deliberations at 11:42a.m.

MOTION: Lillian Nolan moved, seconded by Maria Joseph, to adopt the Proposed Final Decision and Order of the Administrative Law Judge in the matter of disciplinary proceedings against Hope VanNyhuis, Respondent with the following variance: in paragraph one(1) of the order replace the phrase “privilege of the respondent, Hope VanNyhuis, R.N. to practice nursing in the state of Wisconsin, pursuant to the Nurse Licensure Compact is hereby revoked” with “license of respondent “Hope VanNyhuis, R.N. to practice nursing in the state of Wisconsin, and her privilege to practice in Wisconsin under another state license pursuant to the Nurse Licensure Compact, are hereby revoked.” The Board also varies the paragraph two (2) on page eight (8) of the decision to remove the phrase “respondent’s privilege to practice in the state of Wisconsin, pursuant to the Nurse Licensure Compact” and replace with the following language “respondent’s license and privilege to practice in the state of Wisconsin.” – DHA Case # SPS-13-0029/DLSC Case # 13 NUR 151. Motion carried.

Jeffrey Miller has returned at 11:52 a.m.

ORDER FIXING COSTS

MOTION: Carol Ott moved, seconded by Julie Ellis, to issue the Order Fixing Costs in the matter of Carey Krajewski, R.N. Order0002253; Shane Nelson, R.N. Order0002254; and Linda Reddish, R.N. Order0002372. Motion carried unanimously.

DELIBERATION OF PROPOSED STIPULATIONS FINAL DECISIONS AND ORDERS

MOTION: Jeffrey Miller moved, seconded by Maria Joseph, to reject the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Kristin K. Hewitt, R.N.(12 NUR 331). Motion carried unanimously.

MOTION: Julie Ellis moved, seconded by Lillian Nolan, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Julie Ellis A Breitbach, R.N (12 NUR 587). Motion carried.

MOTION: Carol Ott moved, seconded by Gretchen Lowe, to reject the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Deborah R. Grossbier, L.P.N. (12 NUR 597). Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Lillian Nolan, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Thomas M. Banholzer, R.N. (13 NUR 052). Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Gretchen Lowe, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Joann E. Saunders, R.N. (13 NUR 095). Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Lillian Nolan, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Christine A. Gonzales, R.N. (13 NUR 141). Motion carried unanimously.

MOTION: Gretchen Lowe moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Jayme C. Valentine, L.P.N. (13 NUR 309). Motion carried unanimously.

- MOTION:** Julie Ellis moved, seconded by Jeffrey Miller, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Diane M. Schiavo, L.P.N. (13 NUR 330). Motion carried unanimously.
- MOTION:** Julie Ellis moved, seconded by Lillian Nolan, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Michael G. Tomkowiak, R.N. (13 NUR 331). Motion carried unanimously.
- MOTION:** Gretchen Lowe moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Kevin L. Peters, L.P.N. (13 NUR 363). Motion carried unanimously.
- MOTION:** Jeffrey Miller moved, seconded by Lillian Nolan, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Michelle A. Somers, L.P.N. (13 NUR 371). Motion carried unanimously.
- MOTION:** Jeffrey Miller moved, seconded by Lillian Nolan, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Dawn L. Reagor-White, R.N. (13 NUR 426). Motion carried unanimously.
- MOTION:** Jeffrey Miller moved, seconded by Lillian Nolan, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Lisa K. McClanahan, R.N. (13 NUR 431). Motion carried unanimously.
- MOTION:** Gretchen Lowe moved, seconded by Lillian Nolan, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Benjamin A. Dahms, R.N. (13 NUR 478). Motion carried unanimously.
- MOTION:** Julie Ellis moved, seconded by Jeffrey Miller, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order in the matter of disciplinary proceedings against Dawn E. Witek, R.N. (13 NUR 188). Motion carried unanimously.

DELIBERATION ON DENIALS

- MOTION:** Jeffrey Miller moved, seconded by Maria Joseph, upon receipt and consideration of further information provided by DLSC after investigation and not available to the Board at the initial review and denial, the Board grants the petition for reconsideration rescinds the denial of July 16, 2013 and grants the applicant Josh Grubb the right to sit for the required examination. Motion carried unanimously.

MOTION: Gretchen Lowe moved, seconded by Jeffrey Miller, to close case # 13 Nur 511 (JMG) for prosecutorial discretion (P7). Motion carried unanimously.

PROFESSIONAL ASSISTANCE PROCEDURE (PAP)

MOTION: Jeffrey Miller moved, seconded by Gretchen Lowe, to affirm the denial of L.S.'s application for Professional Assistance Procedure (PAP). Motion carried unanimously.

CASE CLOSINGS

MOTION: Jeffrey Miller moved, seconded by Maria Joseph, to close case #13 Nur 573 (PJ) for prosecutorial discretion (P1). Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Maria Joseph, to close case # 13 Nur 574 (AL) for prosecutorial discretion (P3). Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Maria Joseph, to close case # 13 Nur 341 (CB) for insufficient evidence (I.E.). Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Maria Joseph, to close case # 13 Nur 438 (unknown) for lack of jurisdiction (N.J.). Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Maria Joseph, to close case # 12 Nur 189 (S.G.) for insufficient evidence (I.E.). Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Maria Joseph, to close case # 12 Nur 622 (J.S.) for no violation (N.V.). Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Maria Joseph, to close case # 13 Nur 457 (D.R.) for no violation (N.V.). Motion carried unanimously.

MONITORING

MOTION: Jeffrey Miller moved, seconded by Maria Joseph, to grant the request of Sara Bauman, (fka Hirschberg), R.N. for reinstatement of Full Licensure. Motion carried unanimously.

MOTION: Julie Ellis moved, seconded by Carol Ott, to deny the request of Mary Ervin, (fka Saxe), R.N. for modification of the order removing the restriction on working in home health care, hospice, pool nursing, or an agency setting from her license.. **Reason for Denial:** non-compliance with the order due to positive drug screen without prescription and failure to adhere to testing protocols with multiple missed calls. Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Julie Ellis, to grant the request of Jennifer Flynn, R.N. for modification of the order that the testing frequency be reduced. The frequency is to be reduced to 14 urine screens plus 1 hair per year. Motion carried unanimously.

MOTION: Julie Ellis moved, seconded by Jeffrey Miller, to deny the request of Gold Omereoney, R.N. for all limitations are removed from her license. **Reason for Denial:** work reports show continuing anger management issues. Motion carried unanimously.

MOTION: Carol Ott moved, seconded by Gretchen Lowe, to refer the work reports of Gold Omereoney, R.N. to DLSC for screening panel review. Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Gretchen Lowe, to grant the request of Bonnie Rabic, R.N. for full licensure once all requirements are met. Motion carried unanimously.

MOTION: Gretchen Lowe moved, seconded by Lillian Nolan, to grant the request of Kimberly Rodgers, R.N. for removal of limitations on her license and grant full licensure. Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Lillian Nolan, to grant the request of Colleen Sullivan, R.N. for reinstatement of licensure. Motion carried unanimously.

CREDENTIALING MATTERS

MOTION: Jeffrey Miller moved, seconded by Carol Ott, to deny Tara Gardner's request to sit for Examination for Licensure. **Reason for Denial:** incomplete application: failure to provide certified copies of police reports or criminal complaints upon request. Motion carried unanimously.

MOTION: Julie Ellis moved, seconded by Jeffrey Miller, to grant Roxanne Melendrez's application request to sit for the examination for licensure. Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Gretchen Lowe, to grant Brandi Kittl's request to sit for Examination for Licensure. Motion carried.

MOTION: Jeffrey Miller moved, seconded by Lillian Nolan, to grant Jessica Peterson's request to sit for Examination for Licensure. Motion carried unanimously.

MOTION: Gretchen Lowe moved, seconded by Maria Joseph, to grant Jesse Tuck's request for licensure by endorsement as a Professional Nurse once all requirements are met. Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Gretchen Lowe, to grant Sajeetha Babu's request for licensure by endorsement as a Professional Nurse once all requirements are met. Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Carol Ott, to grant Maxwell Kirsch's request for Licensure by Endorsement as a Practical Nurse once all requirements are met. Motion carried unanimously.

RECONVENE TO OPEN SESSION

MOTION: Jeffrey Miller moved, seconded by Lillian Nolan, to reconvene into open session. Motion carried unanimously.

The Board reconvened into Open Session at 3:23 p.m.

VOTING ON ITEMS CONSIDERED OR DELIBERATED ON IN CLOSED SESSION

MOTION: Gretchen Lowe moved, seconded by Jeffrey Miller, to affirm all motions made in closed session. Motion carried unanimously.

MOTION: Gretchen Lowe moved, seconded by Lillian Nolan, that all the issues relating to the Education and Licensure be directed to Julie Ellis for the December meeting. Motion carried unanimously.

MOTION: Lillian Nolan moved, seconded by Jeffrey Miller, that Jeff Miller assumes screening panel responsibilities in lieu of Carol Ott for December 2013. Motion carried unanimously.

MOTION: Jeffrey Miller moved, seconded by Maria Joseph, that enforcement matters originally assigned to Carol Ott be directed to Julia Nelson until further notice or reassignment. Motion carried unanimously.

ADJOURNMENT

MOTION: Carol Ott moved, seconded by Jeffrey Miller, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 3:55 p.m.

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BOARD OF NURSING

2014 Meeting and Screen Panel Dates

1/6/2014	Nursing SP	112	13:00
1/9/2014	Nursing	121A	8:00
2/5/2014	Nursing SP	112	13:00
2/13/2014	Nursing	121A	8:00
3/5/2014	Nursing SP	112	13:00
3/13/2014	Nursing	121A	8:00
4/2/2014	Nursing SP	112	13:00
4/10/2014	Nursing	121A	8:00
4/30/2014	Nursing SP	112	13:00
5/8/2014	Nursing	121A	8:00
6/4/2014	Nursing SP	112	13:00
6/12/2014	Nursing	121A	8:00
7/2/2014	Nursing SP	112	13:00
7/10/2014	Nursing	121A	8:00
8/6/2014	Nursing SP	112	13:00
8/7/2014	Nursing	121C	8:00
9/3/2014	Nursing SP	112	13:00
9/11/2014	Nursing	121A	8:00
10/1/2014	Nursing SP	112	13:00
10/9/2014	Nursing	121A	8:00
11/5/2014	Nursing SP	112	13:00
11/13/2014	Nursing	121A	8:00
12/3/2014	Nursing SP	112	13:00
12/11/2014	Nursing	121A	8:00

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**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Sharon Henes Administrative Rules Coordinator		2) Date When Request Submitted: <i>10 December 2013</i>	
		Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: 19 December 2013	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Legislative/Rule-making Matters – Discussion & Consideration Update on SB337/AB404 Update on SB391	
7) Place Item in: <input type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by _____ (name) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed:			
11) Authorization			
<i>Sharon Henes</i>			
Signature of person making this request			Date
Supervisor (if required)			Date
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)			Date
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

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STATE OF WISCONSIN

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November 26, 2013

Gayle P. Russell, PhD, RN
Nursing Program Administrator
Bryant and Stratton College
10950 W. Potter Road
Wauwatosa, WI 53226
gprussell@bryantstratton.edu

Re: Bryant and Stratton College Removal of Probationary Status

Dear Dr. Russell:

At the Wisconsin Board of Nursing meeting on November 14, 2013, the Board reviewed the Bryant and Stratton College revised curricular decision-making policy, information on the admissions process and the progression policy. At the meeting, a motion was passed to delegate the chair of the Board of Nursing for review and approval of Bryant and Stratton's submission for compliance with N1 and if approved, to remove Bryant and Stratton from probation.

Please note that the Board of Nursing Chair has reviewed and approved the materials received from Bryant and Stratton; therefore, Bryant and Stratton College is removed from probation.

Cordially yours,

A handwritten signature in black ink that reads 'Jill M. Remy'.

Jill M. Remy
On Behalf of the Board of Nursing
Department of Safety and Professional Services
1400 E. Washington Avenue
P.O. Box 8935
Madison, WI 53708-8935
jill.remy@wisconsin.gov

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