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**VIRTUAL/TELECONFERENCE**  
**BOARD OF NURSING**  
**Virtual, 4822 Madison Yards Way, Madison**  
**Contact: Brad Wojciechowski (608) 266-2112**  
**January 11, 2024**

*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 record of the actions of the Board.*

**AGENDA**

**8:00 A.M.**

**OPEN SESSION – CALL TO ORDER – ROLL CALL**

- A. Adoption of Agenda (1-4)**
- B. Approval of Minutes of December 14, 2023 (5-11)**
- C. Reminders: Conflicts of Interests, Scheduling Concerns**
- D. Introductions, Announcements and Recognition – Discussion and Consideration**
- E. Administrative Matters – Discussion and Consideration**
  - 1. Department, Staff and Board Updates
  - 2. 2024 Meeting Dates (12)
  - 3. Annual Policy Review (13-15)
  - 4. Election of Officers, Appointments of Liaisons and Alternates, Delegation of Authorities
  - 5. Board Members – Term Expiration Dates
    - a. Anderson, John G. – 7/1/2025
    - b. Edelstein, Janice A. – 7/1/2024
    - c. Guyton, Vera L. – 7/1/2025
    - d. Kane, Amanda K. – 7/1/2027
    - e. Malak, Jennifer L. – 7/1/2026
    - f. Sabourin, Shelly R. – 7/1/2027
    - g. Saldivar Frias, Christian – 7/1/2023
    - h. Weinman, Robert W. – 7/1/2027
- F. Education and Examination Matters – Discussion and Consideration**
- G. Credentialing Matters – Discussion and Consideration (16-17)**
  - 1. License Renewal Information
- H. Legislative and Policy Matters – Discussion and Consideration**

- I. Administrative Rule Matters – Discussion and Consideration (18-33)**
  - 1. Discussion of N 6, Relating to Delegated Acts (19-31)
  - 2. Pending and Possible Rulemaking Projects (32-33)
- J. Speaking Engagements, Travel, or Public Relation Requests, and Reports – Discussion and Consideration**
- K. Newsletter Matters – Discussion and Consideration (34)**
- L. Nurse Licensure Compact (NLC) Update – Discussion and Consideration**
- M. Liaison Reports – Discussion and Consideration**
- N. Discussion and Consideration of Items Added After Preparation of Agenda:**
  - 1. Introductions, Announcements and Recognition
  - 2. Administrative Matters
  - 3. Election of Officers
  - 4. Appointment of Liaisons and Alternates
  - 5. Delegation of Authorities
  - 6. Education and Examination Matters
  - 7. Credentialing Matters
  - 8. Practice Matters
  - 9. Legislative and Policy Matters
  - 10. Administrative Rule Matters
  - 11. Liaison Reports
  - 12. Board Liaison Training and Appointment of Mentors
  - 13. Public Health Emergencies
  - 14. Informational Items
  - 15. Division of Legal Services and Compliance (DLSC) Matters
  - 16. Presentations of Petitions for Summary Suspension
  - 17. Petitions for Designation of Hearing Examiner
  - 18. Presentation of Stipulations, Final Decisions and Orders
  - 19. Presentation of Proposed Final Decisions and Orders
  - 20. Presentation of Interim Orders
  - 21. Petitions for Re-Hearing
  - 22. Petitions for Assessments
  - 23. Petitions to Vacate Orders
  - 24. Requests for Disciplinary Proceeding Presentations
  - 25. Motions
  - 26. Petitions
  - 27. Appearances from Requests Received or Renewed
  - 28. Speaking Engagements, Travel, Public Relation Requests, and Reports

**O. 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.).**

**P. Deliberation on Division of Legal Services and Compliance Matters (35-130)**

- 1. Administrative Warnings**
  - a. 22 NUR 449 – J.L.F. (35-37)
  - b. 22 NUR 482 – M.P.S. (38-39)
  - c. 22 NUR 793 – M.K.C. (40-41)
  - d. 23 NUR 189 – S.N.M. (42-43)
- 2. Case Closings**
  - a. 22 NUR 368 – K.M.A. (44-51)
  - b. 22 NUR 516 – A.A.R. (52-57)
  - c. 22 NUR 803 – A.K.R. (58-64)
  - d. 23 NUR 075 – C.A.M. (65-80)
  - e. 23 NUR 499 – L.A. (81-87)
  - f. 23 NUR 639 – A.J.P. (88-91)
- 3. Proposed Stipulations, Final Decisions, and Orders**
  - a. 19 NUR 486 – Jennifer M. Peltz (92-103)
  - b. 21 NUR 007 – Amy T. Jansen (104-109)
  - c. 22 NUR 875 – Rebecca Philantrope (110-115)
  - d. 23 NUR 022 – Meredith G. Ketzner (116-121)
  - e. 23 NUR 160 – Nicole D. Fields (122-130)

**Q. Monitoring Matters (131-312)**

- 1. Monitor Olson**
  - a. Tracie Koboski – Requesting Modification of Monitoring Order (133-158)
- 2. Monitor Heller**
  - a. Kamani McCoy – Requesting Full Licensure (159-196)
  - b. Karla Price – Requesting Full Licensure (197-214)
- 3. Monitor Krogman**
  - a. Heidi Sahr – Requesting Modification of Monitoring Order (215-250)
  - b. Rebecca Schmidt - Requesting Modification of Monitoring Order (251-276)
  - c. Shane Renner – Requestion Full Licensure (277-312)

**R. Deliberation of Items Added After Preparation of the Agenda**

1. Education and Examination Matters
2. Credentialing Matters
3. DLSC Matters
4. Monitoring Matters
5. Professional Assistance Procedure (PAP) Matters
6. Petitions for Summary Suspensions
7. Petitions for Designation of Hearing Examiner
8. Proposed Stipulations, Final Decisions and Order
9. Proposed Interim Orders
10. Administrative Warnings
11. Review of Administrative Warnings
12. Proposed Final Decisions and Orders
13. Matters Relating to Costs/Orders Fixing Costs
14. Case Closings
15. Board Liaison Training
16. Petitions for Assessments and Evaluations
17. Petitions to Vacate Orders
18. Remedial Education Cases
19. Motions
20. Petitions for Re-Hearing

21. Appearances from Requests Received or Renewed

S. Consulting with Legal Counsel

**RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION**

**T. Vote on Items Considered or Deliberated Upon in Closed Session if Voting is Appropriate**

T. Open Session Items Noticed Above Not Completed in the Initial Open Session

U. Board Meeting Process (Time Allocation, Agenda Items) – Discussion and Consideration

V. Board Strategic Planning and its Mission, Vision and Values – Discussion and Consideration

**ADJOURNMENT**

**NEXT MEETING: FEBRUARY 8, 2024**

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MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held virtually unless otherwise indicated. In-person meetings are typically conducted at 4822 Madison Yards Way, Madison, Wisconsin, unless an alternative location is listed on the meeting notice. In order to confirm a meeting or to request a complete copy of the board’s agenda, please visit the Department website at <https://dps.wi.gov>. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings may be changed by the examiner for the convenience of the parties. Requests for interpreters for the hard of hearing, or other accommodations, are considered upon request by contacting the Affirmative Action Officer, or the Meeting Staff at 608-267-7213.

**VIRTUAL/TELECONFERENCE  
BOARD OF NURSING  
MEETING MINUTES  
DECEMBER 14, 2023**

**PRESENT:** John Anderson, Janice Edelstein, Vera Guyton (*excused at 11:30*), Amanda Kane, Jennifer Malak, Shelly Sabourin, Robert Weinman

**EXCUSED:** Christian Saldivar Frias

**STAFF:** Brad Wojciechowski, Executive Director; Whitney DeVoe, Legal Counsel; Sofia Anderson, Administrative Rules Coordinator; Brenda Taylor, Board Services Supervisor; and other Department Staff

**CALL TO ORDER**

Robert Weinman, Chairperson, called the meeting to order at 8:01 a.m. A quorum was confirmed with seven (7) members present.

**ADOPTION OF THE AGENDA**

**Amendments to the Agenda**

- Additional Materials

**MOTION:** John Anderson moved, seconded by Jennifer Malak, to adopt the Agenda as amended. Motion carried unanimously.

**APPROVAL OF MINUTES NOVEMBER 9, 2023**

**MOTION:** Amanda Kane moved, seconded by Shelly Sabourin, to approve the Minutes of November 9, 2023, as published. Motion carried unanimously.

**Discussion of N6, Relating to Delegated Acts**

**MOTION:** Amanda Kane moved, seconded by Jennifer Malak, to acknowledge and thank Gina Dennik-Champion, chief executive officer, Wisconsin Nurses Association, for her appearance and presentation to the Board of Nursing. Motion carried unanimously.

**SPEAKING ENGAGEMENTS, TRAVEL, OR PUBLIC RELATION REQUESTS, AND  
REPORTS – DISCUSSION AND CONSIDERATION**

**2024 Scientific Symposium – Scottsdale AZ, January 23 - 24, 2024**

**MOTION:** Janice Edelstein moved, seconded by Shelly Sabourin, to designate Robert Weinman and an additional Board member designated by the travel liaison, as the Board's delegates, to attend the 2024 Scientific Symposium on January 23 - 24, 2024 in Scottsdale AZ. Motion carried unanimously.

**NLC Commission and NCSBN Midyear Meeting – Atlanta, GA, March 11 - 14, 2024**

**MOTION:** Janice Edelstein moved, seconded by Vera Guyton, to designate Robert Weinman as the Board’s delegate and Jennifer Malak, Shelly Sabourin, and Amanda Kane as alternate delegates to attend the NLC Commission and NCSBN Midyear Meeting on March 11 - 14, 2024 in Atlanta, GA. Motion carried unanimously.

**CLOSED SESSION**

**MOTION:** John Anderson moved, seconded by Robert Weinman, 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 warnings (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.). Robert Weinman, Chairperson, read the language of the motion. The vote of each member was ascertained by voice vote. Roll Call Vote: John Anderson-yes; Janice Edelstein-yes; Vera Guyton-yes; Amanda Kane -yes; Jennifer Malak-yes; Shelly Sabourin -yes; and Robert Weinman-yes. Motion carried unanimously.

The Board convened into Closed Session at 10:26 a.m.

**DELIBERATION ON DIVISION OF LEGAL SERVICES AND COMPLIANCE MATTERS**

**Administrative Warnings**

**MOTION:** Jennifer Malak moved, seconded by John Anderson, to issue Administrative Warnings in the following DLSC Cases:  
22 NUR 376 – S.A.S.  
22 NUR 464 – K.L.B.  
23 NUR 272 – K.M.S.  
23 NUR 485 – R.L.C.  
23 NUR 511 – J.A.L.  
23 NUR 566 – A.E.B.  
Motion carried unanimously.

**Case Closings**

**MOTION:** Amanda Kane moved, seconded by Shelly Sabourin, to close the following DLSC Cases for the reasons outlined below:  
21 NUR 768 – L.A.O. – Prosecutorial Discretion (P1)  
22 NUR 259 – M.V.M. – No Violation  
22 NUR 395 – P.M.S. – No Violation  
22 NUR 537 – S.S.S. – Insufficient Evidence

22 NUR 869 – D.A.M. – No Violation  
22 NUR 881 – E.W. & J.L.J. – No Violation  
23 NUR 072 & 23 NUR 248 – S.M.S. – Insufficient Evidence  
23 NUR 214 – H.J.G. – No Violation  
23 NUR 232 – K.M.C. – No Violation  
23 NUR 420 – K.M.K. – Insufficient Evidence  
23 NUR 423 – Unknown – Insufficient Evidence  
23 NUR 621 – L.A.C. – Prosecutorial Discretion (P2)  
Motion carried unanimously.

### **Proposed Stipulations and Final Decisions and Orders**

**MOTION:** Janice Edelstein moved, seconded by John Anderson, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of the following cases:

21 NUR 751 – Dawn M. Drum, R.N.  
22 NUR 009 – Erin M. Bligh, R.N.  
22 NUR 268 – Latrina Kingsby, R.N.  
22 NUR 491 – Donna J. Lowe, R.N.  
22 NUR 507 – Jennifer M. Shapiro  
22 NUR 756 – Daniel S. Wells, R.N.  
22 NUR 782 – Ryan C. Letsch, R.N.  
22 NUR 838 – Melissa M. Quest  
23 NUR 305 – Kathryn Barr  
23 NUR 419 – Curt R. Schultz, L.P.N.  
23 NUR 538 – Brent T. Hassemer  
23 NUR 650 – Rosalind P. Severson  
Motion carried unanimously.

***22 NUR 128 – Amy M. Radcliffe, R.N.***

**MOTION:** Jennifer Malak moved, seconded by Amanda Kane, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Amy M. Radcliffe, R.N., DLSC Case Number 22 NUR 128. Motion carried.

### **Proposed Final Decision and Order**

***Tonya L. Crouch, R.N., Respondent***

**MOTION:** John Anderson moved, seconded by Robert Weinman, to adopt the Findings of Fact, Conclusions of Law, and Proposed Decision and Order in the matter of disciplinary proceedings against Tonya L. Crouch R.N., Respondent – DHA case # SPS-23-0036/DLSC case # 23 NUR 120. Motion carried unanimously.

*(Janice Edelstein recused herself and left the room for deliberation and voting in the matter concerning Tonya L. Crouch, R.N., DHA case # SPS-23-0036/DLSC case # 23 NUR 120.)*

## Order Fixing Costs

*Clifton W. Davison, R.N. (DHA Case Number SPS-22 0028/DLSC Case Number 19 NUR 504)*

**MOTION:** Jennifer Malak moved, seconded by Vera Guyton, to adopt the Order Fixing Costs in the matter of disciplinary proceedings against Clifton W. Davison, R.N., Respondent – DHA Case Number SPS-22-0028/ DLSC Case Number 19 NUR 504. Motion carried unanimously.

*(Robert Weinman recused himself and left the room for deliberation and voting in the matter concerning Clifton W. Davison, R.N., DHA Case Number SPS-22 0028/DLSC Case Number 19 NUR 504.)*

## Monitoring Matters

*Rachel Gliszinski, L.P.N.*

*Requesting reduction in drug/alcohol screens to 36/year, termination of direct supervision and ability to work in home health care and hospice*

**MOTION:** Janice Edelstein moved, seconded by Amanda Kane, to grant the request of Rachel Gliszinski, L.P.N., for reduction in drug/alcohol screens to 36/year, but to deny the request for termination of direct supervision and ability to work in home health care and hospice. **Reason for Denial:** Insufficient time under the Board Order (4/10/2014) to demonstrate adequate compliance. Motion carried unanimously.

*Vera Guyton was excused at 11:30 a.m.*

*Claire Marlow (Weingart), R.N.*

*Board Review of Fitness for Duty Evaluation*

**MOTION:** John Anderson moved, seconded by Amanda Kane, to impose the following conditions on the reinstatement of the license of Claire Marlow, R.N., requiring Respondent to enroll and participate in a drug and alcohol monitoring program approved by the Department which shall include random urine screens at a frequency of not less than 28 times per year and one annual hair screen, to participate in after care treatment with a Treater approved by the board or its designee, with quarterly treatment reports submitted to the Department Monitor, and to submit quarterly work reports to the Department Monitor. Respondent may petition the Board for full, unrestricted licensure upon demonstration of continuous, successful compliance with the terms of the order for at least one (1) year. Respondent may petition for modification on an annual basis but no petition for modification prior to six months from her license being reinstated. Reason for Denial: N.2.41 Motion carried unanimously.

*Katie Fischer, R.N.*

*Requesting termination of C.8., termination or reduction in drug screens, reduction of AA/NA meetings to monthly, and the termination of treatment with treater recommendation.*



**MOTION:** Jennifer Malak moved, seconded by Amanda Kane, to deny the request of Katie Fischer, R.N., for termination of C.8., but to grant the request for reduction in drug screens to 28 urine screens per year and one annual hair test, reduction of AA/NA meetings to once weekly and for the termination of treatment with treater recommendation. **Reason for Denial:** Insufficient time under the Board Order (8/12/2021) to demonstrate adequate compliance. Motion carried unanimously.

***Lobsang Phintso, R.N.***

***Requesting Approval to Travel to India in February 24' for Father's End of Life***

**MOTION:** Janice Edelstein moved, seconded by John Anderson, to grant the request of Lobsang Phintso, R.N., for approval to travel to India from February 6 to February 23, 2024. Motion carried unanimously.

***Samantha Schmittinger, R.N.***

***Requesting Early Termination of Order per Treater Request***

**MOTION:** Jennifer Malak moved, seconded by Robert Weinman, to deny the request Samantha Schmittinger, R.N., for early termination of order per treater request. **Reason for Denial:** Insufficient time under the Board Order (10/8/2020) to demonstrate adequate compliance. Motion carried unanimously.

***Christina Brockhaus, R.N. - Requesting Full Licensure***

**MOTION:** Janice Edelstein moved, seconded by Amanda Kane, to grant the request of Christina Brockhaus, L.P.N. R.N., for a Full Licensure for both L.P.N. and R.N. Credentials. Motion carried unanimously.

***Rachel R. Malmquist, R.N.***

***Requesting reduction of drug and alcohol screens to 36 times per year, reduction of AA meetings to once per week, and termination of work setting restrictions (C.3.)***

**MOTION:** Jennifer Malak moved, seconded by John Anderson, to deny the request of Rachel R. Malmquist, R.N., for termination of work setting restrictions (C.3.), but to grant the request for reduction of drug and alcohol screens to 36 times per year, and for reduction of AANA meetings to once per week. Reason for Denial: Insufficient time under the Board Order (6/16/2021) to demonstrate adequate compliance. Motion carried unanimously.

***Rebecca Schmidt, R.N.***

***Requesting termination of AODA Treatment***

**MOTION:** John Anderson moved, seconded by Jennifer Malak, to grant the request of Rebecca Schmidt, R.N., for termination of AODA Treatment. Motion carried unanimously.

***Heidi Gwidt, Registered Nurse***  
***Requesting reduction in drug screens and AANA attendance***

**MOTION:** Amanda Kane moved, seconded by John Anderson, to grant/deny the request of Heidi Gwidt, Registered Nurse, for Reduction in Drug Screens to 36 drug screens per year and Reduction of AANA Meetings to once per week. Motion carried unanimously.

***Courtney Lindman, Registered Nurse***  
***Requesting reduction in drug screens and termination of treatment***

**MOTION:** John Anderson moved, seconded by Janice Edelstein, to grant the request of Courtney Lindman, Registered Nurse, for Reduction in Drug and Alcohol Screens to 28 per year and an annual hair test and termination of treatment. Motion carried unanimously.

***Christy Maloney, Registered Nurse***  
***Requesting Termination of Direct Supervision Requirement***

**MOTION:** Amanda Kane moved, seconded by Janice Edelstein, to grant the request of Christy Maloney, Registered Nurse, for Termination of Direct Supervision Requirement. Motion carried unanimously.

***Lyndsey McCauley, Registered Nurse - Requesting Full Licensure***

**MOTION:** Jennifer Malak moved, seconded by John Anderson, to grant the request of Lyndsey McCauley, Registered Nurse, for full licensure. Motion carried unanimously.

***Sarah Vanden Bergh, Registered Nurse***  
***Requesting full licensure OR reduction in drug screens, reduction in AANA meetings, reduction in treatment sessions***

**MOTION:** Jennifer Malak moved, seconded by Amanda Kane, to deny the request of Sarah Vanden Bergh, Registered Nurse, for full licensure, but to grant the request for a reduction in drug screens to 36 screens per year, a reduction in AANA meetings to once per week and frequency of treatment sessions to be set by treater. Reason for Denial: Insufficient time under the Board Order (12/8/2022) to demonstrate adequate compliance. Motion carried unanimously.

**RECONVENE TO OPEN SESSION**

**MOTION:** John Anderson moved, seconded by Amanda Kane, to reconvene into Open Session. Motion carried unanimously.

The Board reconvened into Open Session at 12:18 p.m.

**VOTING ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION**

**MOTION:** John Anderson moved, seconded by Jennifer Malak, to affirm all motions made and votes taken in Closed Session. Motion carried unanimously.

*(Be advised that any recusals or abstentions reflected in the Closed Session motions stand for the purposes of the affirmation vote.)*

**ADJOURNMENT**

**MOTION:** Amanda Kane moved, seconded by Robert Weinman, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 12:23 p.m.

**BOARD OF NURSING**  
**2024 Meeting dates**

<b>Meeting Date</b>		<b>Start time</b>	<b>Agenda item deadline</b>
Thursday, January 11, 2024	Virtual	8:00 AM	<b>12/19/2023</b>
Thursday, February 8, 2024	Virtual	8:00 AM	<b>1/29/2024</b>
Thursday, March 14, 2024	Virtual	8:00 AM	<b>3/4/2024</b>
Thursday, April 11, 2024	in person	8:00 AM	<b>4/1/2024</b>
Thursday, May 9, 2024	Virtual	8:00 AM	<b>4/29/2024</b>
Thursday, June 13, 2024	Virtual	8:00 AM	<b>6/3/2024</b>
Thursday, August 8, 2024	Virtual	8:00 AM	<b>7/29/2024</b>
Thursday, September 12, 2024	Virtual	8:00 AM	<b>8/30/2024</b>
Thursday, October 10, 2024	Virtual	8:00 AM	<b>9/30/2024</b>
Thursday, November 14, 2024	in person	8:00 AM	<b>11/4/2024</b>
Thursday, December 12, 2024	Virtual	8:00 AM	<b>12/2/2024</b>

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

**AGENDA REQUEST FORM**

1) Name and title of person submitting the request: Brenda Taylor, Board Services Supervisor		2) Date when request submitted: 12/14/2023	
3) Name of Board, Committee, Council, Sections: All Boards			
4) Meeting Date: First Meeting of 2024	5) Attachments: <input checked="" type="checkbox"/> Yes	6) How should the item be titled on the agenda page? Annual Policy Review	
7) Place Item in: <input checked="" type="checkbox"/> Open Session	8) Is an appearance before the Board being scheduled? <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if applicable: N/A	
10) Describe the issue and action that should be addressed:			
<p><b>Please be advised of the following Policy Items:</b></p> <ol style="list-style-type: none"> <li>1. <b>In-Person Meeting Policy:</b> Depending on the frequency of Board meetings, a Board may be allowed a certain number of in-person meetings. <ul style="list-style-type: none"> <li>• 4-5 Meetings per year = 1 in-person opportunity</li> <li>• 6-8 Meetings per year = 2 in-person opportunities</li> <li>• 12 Meetings per year = 4 in-person opportunities</li> </ul> </li> <li>2. <b>Attendance/Quorum:</b> Thank you for your service and commitment to meeting attendance. If you cannot attend a meeting or have scheduling conflicts impacting your attendance, please let us know as soon as possible. Timely notification is appreciated as a quorum is required for Boards, Sections, and Councils to meet pursuant to Open Meetings Law.</li> <li>3. <b>Walking Quorum:</b> Board/Section/Council members must not collectively discuss the body's business outside a properly noticed meeting. Should several members of a body do so, the members could be violating the open meetings law.</li> <li>4. <b>Mandatory Training:</b> All Board Members must complete Public Records and Ethics Training, annually.</li> <li>5. <b>Agenda Deadlines:</b> Please communicate agenda topics to your Executive Director before the agenda submission deadline at 12:00 pm, 8 business days prior to a meeting. (Attachment: Timeline of a Meeting)</li> <li>6. <b>Per Diem and Reimbursement Claims:</b> Please submit all Per Diem and Reimbursement claims to DSPPS within 30 days of the close of each month in which expenses are incurred. (Attachment: Per Diem Example)</li> <li>7. <b>Lodging Accommodations/Hotel Cancellation Policy:</b> Lodging accommodations are available to eligible members. Standard eligibility: the member must leave home before 6:00 am to attend a meeting by the scheduled start time. <ol style="list-style-type: none"> <li>a. If a member cannot attend a meeting it is their responsibility to cancel their reservation within the applicable cancellation timeframe.</li> <li>b. If a meeting is changed to occur remotely, is canceled, or rescheduled, DSPPS staff will cancel or modify reservations as appropriate.</li> </ol> </li> <li>8. <b>Inclement Weather Policy:</b> In the event of inclement weather, the DSPPS may change a meeting from an in-person venue to hosted as virtual/teleconference only.</li> </ol>			
11)		Authorization	
<i>Brenda Taylor</i>		<i>12/14/2023</i>	
<p><b>Directions for including supporting documents:</b></p> <ol style="list-style-type: none"> <li>1. This form should be saved with any other documents submitted to the <a href="#">Agenda Items</a> folders.</li> <li>2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director</li> </ol>			

## Timeline of a Meeting

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**8 business days prior to the meeting:** All agenda materials are due to the Department by 12:00 pm, 8 business days prior to the meeting date.

**7 business days prior to the meeting:** The draft agenda page is due to the Executive Director. The Executive Director transmits to the Chair for review and approval.

**5 business days prior to the meeting:** The approved agenda is returned to the Board Administration Specialist for agenda packet production and compilation.

**4 business days prior to the meeting:** Agenda packets are posted on the DSPS Board SharePoint site and on the Department website.

### Agenda Item Examples:

- Approval of the Agenda and previous meeting Minutes
- Open Session Items
  - Public Hearings (relating to Administrative Rules)
  - Administrative Matters
  - Legislation and Policy Matters
  - Administrative Rules Matters
  - Credentialing Matters
  - Education and Exam Issues
  - Public Agenda Requests
  - Current Issues Affecting the Profession
  - Public Comments
- Closed Session items
  - Deliberations on Proposed Disciplinary Actions
    - Stipulations
    - Administrative Warnings
    - Case Closings
    - Monitoring Matters
    - Professional Assistance Procedure (PAP) Issues
  - Proposed Final Decisions and Orders
  - Orders Fixing Costs/Matters Relating to Costs
  - Credentialing Matters
  - Education and Exam Issues

**Thursday of the Week Prior to the Meeting:** Agendas are published for public notice on the Public Notices and Meeting Minutes website: [publicmeetings.wi.gov](http://publicmeetings.wi.gov).

**1 business day after the Meeting:** "Action" lists are distributed by staff detailing board actions on closed session business.

**5 business days after the Meeting:** "To Do" lists are distributed to staff to ensure that board decisions are acted on and/or implemented within the appropriate divisions in the Department. Minutes approved by the board are published on the the Public Notices and Meeting Minutes website: [publicmeetings.wi.gov](http://publicmeetings.wi.gov).

# Department of Safety and Professional Services

## PER DIEM REPORT

**INSTRUCTIONS:** Claimant records board-related activities by entering the date of an activity, the duration of time spent in that activity, the relevant purpose code (see purpose code descriptions below), where the activity is conducted, and the type of activity performed. Only one (1) \$25.00 per diem payment can be issued on any given calendar day.

**Purpose Codes:**

- A. Official meetings including video/teleconference calls** (automatic day of per diem): i.e., board, committee, board training or screening panels; **Hearings**, i.e., Senate Confirmation, legislative, disciplinary or informal settlement conferences; **Examinations and Test Development Sessions**, i.e., test administration, test review or analysis events, national testing events, tour of test facilities, etc.)
- B. Other** (One (1) per diem will be issued for every five (5) hours spent in category B, per calendar month): i.e., review of disciplinary cases, consultation on cases, review of meeting materials, board liaison work e.g., contacts regarding Monitoring, Professional Assistance Procedure, Credentialing, Education and Examinations


NAME OF EXAMINING BOARD OR COUNCIL			BOARD OR COUNCIL MEMBER'S NAME	
<b>EXAMPLE EXAMINING BOARD</b>			<b>MARY SUNSHINE</b>	
Activity Date	Duration of Activity	Purpose Code	Where Performed	Activity
MM/DD/YY	Hours/Minutes	A or B	City/Location (Home, Work, DSPS)	Describe Activity Performed (see purpose codes)
12/2/20	2 hrs	B	Pleasant Prairie/Home	Review of screening panel materials
12/3/20	2 hr / 30 mins	B	Pleasant Prairie/Home	Review of screening panel materials
12/10/20	1 hr	A	Pleasant Prairie/Home	Screening Panel Meeting - Teleconference
12/12/20	1 hr / 30 mins	B	Pleasant Prairie/Home	Case consultation
12/13/20	1 hr	B	Pleasant Prairie/Home	Liaison: Application Review
12/16/20	6 hrs	A	Madison/DSPS	Board Member Training
				<p><b>The 5-hour rule applies to "B" code activities. Add the 'B' codes within the calendar month and then divide by five (5) hours to calculate your per diem payment. In this case the total is seven (7) hours which equals one (1) day of per diem.</b></p> <p><b>Each 'A' code is an automatic day of per diem regardless of time spent in that activity. Ms. Sunshine is eligible for two (2) additional days of payment.</b></p> <p><b>Department staff completes the fields titled "Total Days Claimed".</b></p>
<b>CLAIMANT'S CERTIFICATION</b>			Comments:	
The undersigned certifies, in accordance with § 16.53, Wis. Stats., that this account for per diem, is just and correct; and that this claim is for service necessarily incurred in the performance of duties required by the State, as authorized by law.				
<i>Mary Sunshine</i>		1/4/2021		
Claimant's Signature	Date	Supervisor	Date	

EMPL ID: 100012345-0

To be completed by Department staff: **TOTAL DAYS CLAIMED: 3 @ \$25.00 = 75.00**

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

**AGENDA REQUEST FORM**

1) Name and title of person submitting the request: Brad Wojciechowski		2) Date when request submitted: 12/18/2023 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: 1/11/2024	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Credentialing Matters – Discussion and Consideration 1) License Renewal Information	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <i>(If yes, please complete <a href="#">Appearance Request</a> for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <Appearance Name(s)> <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if applicable: <Click Here to Add Case Advisor Name or N/A>	
10) Describe the issue and action that should be addressed: DSPS email correspondence to nursing license holders.			
11) Authorization			
 Signature of person making this request		12/18/2023 Date	
Supervisor (Only required for post agenda deadline items)		Date	
Executive Director signature (Indicates approval for post agenda deadline items)		Date	
Directions for including supporting documents: 1. This form should be saved with any other documents submitted to the <a href="#">Agenda Items</a> folders. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			



Dear DSPS Credential Holder,

Please read this email in its entirety and take prompt action to ensure that your upcoming Registered Nurse credential renewal goes smoothly.

This is a reminder that the renewal period for your credential will open on January 10<sup>th</sup>, 2024. We are asking that all nurses ensure that they can log into LicenseE prior to the start of the renewal period.

If you currently hold a license in Wisconsin, an account has been created for you in our new licensing platform at [license.wi.gov](https://license.wi.gov)

Your username is: username

**DO NOT register for a new account.**

### **First-Time Logging into LicenseE:**

From the landing page, click “Forgot/Change Password?”

Enter your username. Your username is: username

Complete the process by clicking the “Change or Reset Password” button. The password reset information will be sent to your account’s email address.

Reset your password.

### **Returning LicenseE Users:**

If you have logged into LicenseE before, log-in with your username and password.

For more information, please see the [LicenseE Renewal Instructions](#).

### **Change Your Email Address:**

If you would like to change your email address, please submit a support ticket at this [link](#). Select *Account Questions* from the “I need assistance with” dropdown. Please provide your name, date of birth, the last 4 digits of your SSN and the new email address in the description field. Due to the large volume of nursing credentials, please allow up to three weeks for the processing of your email change.

### **Helpful Hints**

If you are having difficulty logging in to LicenseE and have a Hotmail, MSN or wi.rr email address, please consider requesting to change your email address using the process described above.

If you are using a mobile device to access LicenseE, turn your device horizontally to see the entire screen.

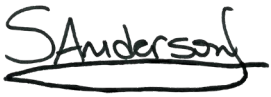
**Please note:** If you are having any difficulties, please submit a support ticket at this [link](#). Provide complete contact information and a detailed description of the issue you are experiencing. Include your date of birth and the last 4 digits of your SSN in the description field, so that we can verify your identity.

Thank you,

DSPS Renewal Team

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

**AGENDA REQUEST FORM**

<b>1) Name and title of person submitting the request:</b> Sofia Anderson, Administrative Rules Coordinator		<b>2) Date when request submitted:</b> 12/19/2023 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
<b>3) Name of Board, Committee, Council, Sections:</b> Board of Nursing			
<b>4) Meeting Date:</b> January 11, 2024	<b>5) Attachments:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>6) How should the item be titled on the agenda page?</b> Administrative Rules Matters – Discussion and Consideration 1. Discussion of N 6, relating to delegated acts. 2. Pending and Possible rulemaking projects	
<b>7) Place Item in:</b> <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	<b>8) Is an appearance before the Board being scheduled?</b> <i>(If yes, please complete <a href="#">Appearance Request</a> for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>9) Name of Case Advisor(s), if required:</b> N/A	
<b>10) Describe the issue and action that should be addressed:</b> Attachments: 1. N 6 Implemented Scope Statement. 2. Chapter N 6 revised after December meeting. 3. 4-state analysis comparative chart. 4. Nursing rule projects chart.			
<b>11) Authorization</b>			
		12/19/2023	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
<b>Directions for including supporting documents:</b> 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 Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

# STATEMENT OF SCOPE

## BOARD OF NURSING

Rule No.: N 6

Relating to: Delegated acts

Rule Type: Permanent

**1. Finding/nature of emergency (Emergency Rule only):**

N/A

**2. Detailed description of the objective of the proposed rule:**

The objective of the proposed rule is to review and possibly update ch. N 6 in order to clarify and further define the delegated acts. The Board may also perform a comprehensive review of this chapter in order to ensure that the language is up to date with current standards of practice and compliant with current Statutes.

**3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:**

Section N 6 contains the standards of practice for registered nurses and licensed practical nurses, which includes delegated acts. The Board of Nursing will review these delegated acts to determine whether they need to be modified.

The alternative would be to not revise the code, which would create confusion and a lack of clarity for stakeholders.

**4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):**

Section 15.08 (5) (b), Stats., provides an examining board “[s]hall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains. . .”

Section 227.11 (2) (a), Stats., “[e]ach agency may promulgate rules interpreting the provisions of any statute enforced or administered by the agency, if the agency considers it necessary to effectuate the purpose of the statute...”

Section 441.01 (3), Stats., provides “[t]he board may establish minimum standards for schools for professional nurses and schools for licensed practical nurses, including all related clinical units and facilities, and make and provide periodic surveys and consultations to such schools. It may also establish rules to prevent unauthorized persons from practicing professional nursing. It shall approve all rules for the administration of this chapter in accordance with ch. 227.”

**5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:**

80 hours

**6. List with description of all entities that may be affected by the proposed rule:**

Registered Nurses, Licensed Practical Nurses, entities that hire or may hire non-licensed caregivers, and individuals accessing health care services.

**7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:**

None

**8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):**

The proposed rule will have minimal to no economic impact on small businesses and the state's economy as a whole.

**Contact Person:** Sofia Anderson, Administrative Rules Coordinator, [DSAdminRules@wisconsin.gov](mailto:DSAdminRules@wisconsin.gov), (608) 261-4463.

Approved for publication:



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Authorized Signature

4/24/2023

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Date Approved

Approved for implementation:



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Authorized Signature

5/26/2023

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Date Approved

## Chapter N 6

### STANDARDS OF PRACTICE FOR REGISTERED NURSES AND LICENSED PRACTICAL NURSES

[N 6.01](#) Authority and intent.

[N 6.02](#) Definitions.

[N 6.03](#) Standards of practice for registered nurses.

[N 6.04](#) Standards of practice for licensed practical nurses.

[N 6.05](#) Violations of standards.

#### **N 6.01 Authority and intent.**

**(1)** This chapter is adopted pursuant to authority of ss. [15.08 \(5\) \(b\)](#), [227.11](#) and [441.001 \(3\)](#) and [\(4\)](#), Stats., and interprets the statutory definitions of professional and practical nursing.

**(2)** The intent of the board of nursing in adopting this chapter is to specify minimum practice standards for which R.N.s and L.P.N.s are responsible, and to clarify the scope of practice for R.N.s and L.P.N.s.

#### **N 6.02 Definitions.** As used in this chapter,

**(1)** "Advanced practice nurse prescriber" means a registered nurse who holds an advance practice nurse prescriber certificate under s. [441.16](#), Stats.

**(1m)** "Basic nursing care" means care that can be performed following a defined nursing procedure with minimal modification in which the responses of the patient to the nursing care are predictable.

**(2)** "Basic patient situation" as determined by an R.N., physician, podiatrist, dentist or optometrist means the following 3 conditions prevail at the same time in a given situation:

**(a)** The patient's clinical condition is predictable;

**(b)** Medical or nursing orders are not changing frequently and do not contain complex modifications; and,

**(c)** The patient's clinical condition requires only basic nursing care.

**(3)** "Complex patient situation" as determined by an R.N., physician, podiatrist, dentist or optometrist means any one or more of the following conditions exist in a given situation:

**(a)** The patient's clinical condition is not predictable;

**(b)** Medical or nursing orders are likely to involve frequent changes or complex modifications; or,

**(c)** The patient's clinical condition indicates care that is likely to require modification of nursing procedures in which the responses of the patient to the nursing care are not predictable.

(5) "Delegated act" means acts delegated to a registered nurse or licensed practical nurse or acts delegated by a registered nurse or licensed practical nurse to eligible staff of regulated entities who are at least 18 years old and have received the appropriate education and documented training required to perform the delegated act.

*OR*

(5) "Delegated act" means acts delegated to a registered nurse or licensed practical nurse or acts delegated by a registered nurse.

(6) "Direct supervision" means immediate availability to continually coordinate, direct and inspect at first hand the practice of another.

(7) "General supervision" means regularly to coordinate, direct and inspect the practice of another.

(8) "Nursing diagnosis" means a judgment made by an R.N. following a nursing assessment of a patient's actual or potential health needs for the purpose of establishing a nursing care plan.

(9) "Patient" means a person receiving nursing care by an R.N. or L.P.N. performing nursing services for compensation.

(10) "Protocol" means a precise and detailed written plan for a regimen of therapy.

~~(10m) "Provider" means a physician, podiatrist, dentist, optometrist or advanced practice nurse provider.~~

~~**Note:** There was an inadvertent error in CR 15-099. "Advanced practice nurse provider" should be "advanced practice nurse prescriber" consistent with sub. (1) and s. 441.16, Stats. The error will be corrected in future rulemaking.~~

(10m) "Provider" means any licensed professional who is legally authorized to delegate acts within the scope of their practice.

(11) "R.N." means a registered nurse licensed under ch. 441, Stats., or a nurse who has a privilege to practice in Wisconsin under s. 441.51, Stats.

(12) "L.P.N." means a licensed practical nurse licensed under ch. 441, Stats., or a nurse who has a privilege to practice in Wisconsin under s. 441.51, Stats.

### **N 6.03 Standards of practice for registered nurses.**

(1) General nursing procedures. An R.N. shall utilize the nursing process in the execution of general nursing procedures in the maintenance of health, prevention of illness or care of the ill. The nursing process consists of the steps of assessment, planning, intervention and evaluation. This standard is met through performance of each of the following steps of the nursing process:

(a) *Assessment.* Assessment is the systematic and continual collection and analysis of data about the health status of a patient culminating in the formulation of a nursing diagnosis.

(b) *Planning.* Planning is developing a nursing plan of care for a patient which includes goals and priorities derived from the nursing diagnosis.

**(c) Intervention.** Intervention is the nursing action to implement the plan of care by directly administering care or by directing and supervising nursing acts delegated to L.P.N.'s or less skilled assistants.

**(d) Evaluation.** Evaluation is the determination of a patient's progress or lack of progress toward goal achievement which may lead to modification of the nursing diagnosis.

**(2) Performance of delegated acts.** In the performance of delegated acts an R.N. shall do all of the following:

**(a)** Accept only those delegated acts for which there are protocols or written or verbal orders.

**(b)** Accept only those delegated acts for which the R.N. is competent to perform based on his or her nursing education, training or experience.

**(c)** Consult with a provider in cases where the R.N. knows or should know a delegated act may harm a patient.

**(d)** Perform delegated acts under the general supervision or direction of provider.

**(3) Supervision and direction of delegated acts.** In the supervision and direction of delegated acts an R.N. shall do all of the following:

**(a)** Delegate tasks commensurate with educational preparation and demonstrated abilities of the person supervised.

**(b)** Provide direction and assistance to those supervised.

**(c)** Observe and monitor the activities of those supervised.

**(d)** Evaluate the effectiveness of acts performed under supervision.

#### **N 6.04 Standards of practice for licensed practical nurses.**

**(1) Performance of acts in basic patient situations.** In the performance of acts in basic patient situations, the L.P.N. shall, under the general supervision of an R.N. or the direction of a provider:

**(a)** Accept only patient care ~~assignments~~ delegated acts which the L.P.N. is competent to perform.

**(b)** Provide basic nursing care.

**(c)** Record nursing care given and report to the appropriate person changes in the condition of a patient.

**(d)** Consult with a provider in cases where an L.P.N. knows or should know a delegated act may harm a patient.

**(e)** Perform the following other acts when applicable:

**1.** Assist with the collection of data.

**2.** Assist with the development and revision of a nursing care plan.

3. Reinforce the teaching provided by an R.N. provider and provide basic health care instruction.

4. Participate with other health team members in meeting basic patient needs.

(2) Performance of acts in complex patient situations. In the performance of acts in complex patient situations the L.P.N. shall do all of the following:

(a) Meet standards under sub. (1) under the general supervision of an R.N., physician, podiatrist, dentist or optometrist.

(b) Perform delegated acts beyond basic nursing care under the direct supervision of an R.N. or provider. An L.P.N. shall, upon request of the board, provide documentation of his or her nursing education, training or experience which prepares the L.P.N. to competently perform these ~~assignments~~ delegated acts.

(3) Assumption of charge nurse position in nursing homes. In assuming the position of charge nurse in a nursing home as defined in s. [50.04 \(2\) \(b\)](#), Stats., an L.P.N. shall do all of the following:

(a) Follow written protocols and procedures developed and approved by an R.N.

(b) Manage and direct the nursing care and other activities of L.P.N.s and nursing support personnel under the general supervision of an R.N.

(c) Accept the charge nurse position only if prepared for the responsibilities of charge nurse based upon education, training and experience beyond the practical nurse curriculum. The L.P.N. shall, upon request of the board, provide documentation of the nursing education, training or experience which prepared the L.P.N. to competently assume the position of charge nurse.

**N 6.05 Violations of standards.** A violation of the standards of practice constitutes unprofessional conduct or misconduct and may result in the board limiting, suspending, revoking or denying renewal of the license or in the board reprimanding an R.N. or L.P.N.



Minnesota	Iowa	Illinois	Michigan
<p><b>148.171. Subd. 3a. Assignment.</b> "Assignment" means the designation of nursing tasks or activities to be performed by another nurse or unlicensed assistive person.</p> <p><b>148.171 Subd. 7a. Delegation.</b> "Delegation" means the transfer of authority to another nurse or competent, unlicensed assistive person to perform a specific nursing task or activity in a specific situation.</p>	<p><b>655 IAC 6.3 (8)</b> The licensed practical nurse shall apply the delegation process when delegating to another licensed practical nurse by:</p> <ul style="list-style-type: none"> <li>a. Delegating only those nursing tasks that fall within the scope of practice of a licensed practical nurse.</li> <li>b. Delegating only those nursing tasks that fall within the delegatee's scope of practice, education, experience, and competence.</li> <li>c. Matching the patient's needs and circumstances with the delegatee's qualifications, resources, and appropriate supervision.</li> <li>d. Communicating directions and expectations for completion of the delegated activity and receiving confirmation of the communication from the delegatee.</li> <li>e. Supervising the delegatee by monitoring performance, progress and outcomes and ensuring appropriate documentation is complete.</li> <li>f. Evaluating patient outcomes as a result of the delegation process.</li> </ul>	<p><b>Section 1300.20 Nursing Delegation by a Registered Professional Nurse</b></p> <ul style="list-style-type: none"> <li>a) "Delegation" means transferring to a specific individual the authority to perform a specific nursing intervention, in a specific situation.</li> <li>b) A registered professional nurse may: <ul style="list-style-type: none"> <li>1) Delegate nursing interventions to other registered professional nurses, licensed practical nurses, and other unlicensed personnel. The delegation should be based on the comprehensive nursing assessment that includes, but is not limited to: <ul style="list-style-type: none"> <li>A) The stability and condition of the patient;</li> <li>B) The potential for harm;</li> <li>C) The complexity of the nursing intervention to be delegated;</li> <li>D) The predictability of outcomes; and</li> <li>E) The competency of the person to whom the nursing intervention is delegated. To ensure competency, the RN may have to provide instruction to the individual or</li> </ul> </li> </ul> </li> </ul>	<p><b>PUBLIC HEALTH CODE (EXCERPT) Act 368 of 1978</b></p> <p><b>333.16104 Definitions. (2)</b> "Delegation" means an authorization granted by a licensee to a licensed or unlicensed individual to perform selected acts, tasks, or functions that fall within the scope of practice of the delegator and that are not within the scope of practice of the delegatee and that, in the absence of the authorization, would constitute illegal practice of a licensed profession.</p> <p><b>MI Admin Code R 338.10104 Delegation.</b> (1) Only a registered nurse may delegate nursing acts, functions, or tasks. A registered nurse who delegates nursing acts, functions, or tasks shall do all of the following:</p> <ul style="list-style-type: none"> <li>(a) Determine whether the act, function, or task delegated is within the registered nurse's scope of practice.</li> <li>(b) Determine the qualifications of the delegatee before the delegation.</li> <li>(c) Determine whether the delegatee has the necessary knowledge and skills for the acts, functions, or tasks to be carried out safely and competently.</li> </ul>

	<p>g. Intervening when problems are identified, revising plan of care when needed, and reassessing the appropriateness of the delegation.</p> <p>h. Retaining accountability for properly implementing the delegation process.</p> <p>i. Promoting a safe and therapeutic environment by:</p> <p>(1) Providing appropriate monitoring and surveillance of the care environment;</p> <p>(2) Identifying unsafe care situations; and</p> <p>(3) Correcting problems or referring problems to appropriate management level when needed.</p> <p><b>655 IAC 6.3(9)</b> The licensed practical nurse shall apply the delegation process when delegating to an unlicensed assistive personnel (UAP) by:</p> <p>a. Delegating only those nursing tasks that fall within the scope of practice of a licensed practical nurse.</p> <p>b. Ensuring the UAP has the appropriate education and training and has demonstrated competency to perform the delegated task.</p>	<p>evaluate the individual's experience, training and/or education.</p> <p>2) Delegate medication administration to other licensed nurses.</p> <p>3) Refuse to delegate, stop, or rescind a previously authorized delegation.</p> <p>c) In community-based or in-home care settings, an RN may:</p> <p>1) Delegate medication administration (limited to oral or subcutaneous dosage and topical or transdermal application) to unlicensed personnel if the conditions of delegations set forth in subsection (b) are met.</p> <p>2) Delegate, guide and evaluate the implementations of nursing interventions as a component of patient care coordination after completion of the comprehensive patient assessment based on analysis of the comprehensive nursing assessment data. Care coordination may occur in person, by telecommunication, or by electronic communication.</p>	<p>(d) Supervise and evaluate the performance of the delegatee.</p> <p>(e) Provide or recommend remediation of the performance when indicated.</p> <p>(2) The registered nurse shall bear ultimate responsibility for the performance of nursing acts, functions, or tasks performed by the delegatee within the scope of the delegation.</p> <p><b>NOTE</b> (From Michigan.gov document about school nurses)</p> <ul style="list-style-type: none"> <li>• <i>ONLY an RN may delegate nursing acts, functions or tasks. LPNs may not delegate.</i></li> <li>• <i>LPNs must be supervised by the RN, physician, or dentist.</i></li> <li>• <i>The RN only delegates tasks -not the responsibility or accountability for patient care.</i></li> <li>• <i>The RN delegates from her/his scope of practice. The RN cannot delegate acts/tasks/functions that are not within her/his scope of practice.</i></li> <li>• <i>The RN determines whether the delegatee has the knowledge/skill to do a specific task.</i></li> <li>• <i>The RN determines whether the task for a specific client can be performed safely and competently for the specific client.</i></li> </ul>
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	<p>c. Ensuring the task does not require assessment, interpretation, and independent nursing judgment or nursing decision during the performance or completion of the task.</p> <p>d. Ensuring the task is consistent with the UAP's scope of employment and can be safely performed according to clear and specific directions.</p> <p>e. Verifying that, in the professional judgment of the delegating nurse, the task poses minimal risk to the patient.</p> <p>f. Communicating directions and expectations for completion of the delegated activity and receiving confirmation of the communication from the UAP.</p> <p>g. Supervising the UAP and evaluating the patient outcomes of the delegated task.</p>	<p>d) The following actions are prohibited by this Section:</p> <ol style="list-style-type: none"> <li>1) Mandating an RN to delegate nurse interventions when the RN has determined that it is not appropriate to do so.</li> <li>2) Delegating medication administration to unlicensed personnel in any institutional or long-term facility, including but not limited to those facilities licensed by the Hospital Licensing Act [210 ILCS 85], the University of Illinois Hospital Act [110 ILCS 330], State-operated mental health hospitals, or State-operated developmental centers.</li> <li>3) Delegating nursing judgement, the comprehensive patient assessment, development of a plan of care, and evaluations of care to licensed or unlicensed personnel;</li> <li>4) Allowing a licensed practical nurse or unlicensed personnel to re-delegate a nursing intervention that had been delegated to him or her by the RN.</li> </ol>	
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		<p>f) The delegation of medication administration in a community-based setting shall be rescinded upon the discharge of the patient from the home health, home nursing, or hospice agency, or when the nurse who delegated the nursing intervention is no longer providing or coordinating the nursing clinical care.</p> <p>g) An RN who has delegated a nursing intervention does not have to be physically present while the individual is performing the delegation so long as the RN has satisfied the conditions of delegation set forth in subsection (b) and is available to assist in person or by telecommunications.</p>	
<p><b>148.171 Subd. 14. Practice of practical nursing.</b> The "practice of practical nursing" means the performance, with or without compensation, of those services that incorporates caring for individual patients in all settings through nursing standards recognized by the board at the direction of a registered nurse, advanced practice registered nurse, or other licensed health care provider and includes, but is not limited to:</p> <p>(1) conducting a focused assessment of the health status of an individual patient through the collection and comparison of data to normal</p>	<p><b>655 IAC 6.3(3)</b> The licensed practical nurse, practicing under the supervision of a registered nurse, advanced registered nurse practitioner (ARNP), or licensed physician, consistent with the accepted and prevailing practices and practice setting, may participate in the nursing process by:</p> <p>a. Participating in nursing care, health maintenance, patient teaching, evaluation and collaborative planning and rehabilitation to the extent of the licensed practical nurse's education, experience, and competency.</p> <p>b. Conducting a thorough, ongoing nursing assessment based on the</p>	<p><b>(225 ILCS 65/55-30) Sec. 55-30. LPN scope of practice.</b></p> <p>(a) Practice as a licensed practical nurse means a scope of nursing practice, with or without compensation, under the guidance of a registered professional nurse or an advanced practice registered nurse, or as directed by a physician assistant, physician, dentist, podiatric physician, or other health care professionals as determined by the Department, and includes, but is not limited to, all of the following:</p> <p>(1) Conducting a focused nursing assessment and contributing to the ongoing comprehensive nursing</p>	<p><b>PUBLIC HEALTH CODE (EXCERPT) Act 368 of 1978 PART 172 NURSING 333.17201 Definitions; principles of construction.</b> (d) "Practice of nursing as a licensed practical nurse" or "l.p.n." means the practice of nursing based on less comprehensive knowledge and skill than that required of a registered professional nurse and performed under the supervision of a registered professional nurse, physician, or dentist.</p>

<p>findings and the individual patient's current health status, and reporting changes and responses to interventions in an ongoing manner to a registered nurse or the appropriate licensed health care provider for delegated or assigned tasks or activities;</p> <p>(2) participating with other health care providers in the development and modification of a plan of care;</p> <p>(3) determining and implementing appropriate interventions within a nursing plan of care or when delegated or assigned by a registered nurse;</p> <p>(4) implementing interventions that are delegated, ordered, or prescribed by a licensed health care provider;</p> <p>(5) assigning nursing activities or tasks to other licensed practical nurses (LPNs);</p> <p>(6) assigning and monitoring nursing tasks or activities to unlicensed assistive personnel;</p>	<p>patient's needs after the initial assessment is completed by the registered nurse.</p> <p>c. Assisting the supervising registered nurse, ARNP, or physician in planning for patient care by identifying patient needs and goals.</p> <p>d. Demonstrating attentiveness and providing patient surveillance and monitoring.</p> <p>e. Seeking clarification of orders when needed.</p> <p>f. Obtaining education and ensuring competence when encountering new equipment, technology, medication, procedures or any other unfamiliar care situations.</p> <p>g. Implementing treatment and therapy as identified by the patient's overall health care plan.</p> <p>h. Documenting nursing care accurately, thoroughly, and in a timely manner.</p> <p>i. Evaluating continuously the patient's response to nursing care and other therapies, including:</p> <p>(1) Patient's response to interventions.</p>	<p>assessment of the patient performed by the registered professional nurse.</p> <p>(2) Collaborating in the development and modification of the registered professional nurse's or advanced practice registered nurse's comprehensive nursing plan of care for all types of patients.</p> <p>(3) Implementing aspects of the plan of care.</p> <p>(4) Participating in health teaching and counseling to promote, attain, and maintain the optimum health level of patients.</p> <p>(5) Serving as an advocate for the patient by communicating and collaborating with other health service personnel.</p> <p>(6) Participating in the evaluation of patient responses to interventions.</p> <p>(7) Communicating and collaborating with other health care professionals.</p> <p>(8) Providing input into the development of policies and procedures to support patient safety.</p>	
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<p>(7) providing safe and effective nursing care delivery;</p> <p>(8) promoting a safe and therapeutic environment;</p> <p>(9) advocating for the best interests of individual patients;</p> <p>(10) assisting in the evaluation of responses to interventions;</p> <p>(11) collaborating and communicating with other health care providers;</p> <p>(12) providing health care information to individual patients;</p> <p>(13) providing input into the development of policies and procedures; and</p> <p>(14) accountability for the quality of care delivered, recognizing the limits of knowledge and experience; addressing situations beyond the nurse's competency; and performing to the level of education, knowledge, and skill ordinarily expected of an individual who has completed an approved practical nursing education program described in</p>	<p>(2) Need for alternative interventions.</p> <p>(3) Need to communicate and consult with other health team members.</p> <p>(4) Need to revise the plan of care.</p> <p>j. Collaborating and communicating relevant and timely patient information with patients and other health team members to ensure quality and continuity of care, including:</p> <p>(1) Patient concerns and special needs.</p> <p>(2) Patient status and progress.</p> <p>(3) Patient response or lack of response to interventions.</p> <p>(4) Significant changes in patient condition.</p> <p>(5) Interventions which are not implemented, based on the licensed practical nurse's professional judgment, and providing:</p> <p>1. A timely notification to the physician, ARNP, registered nurse, or other health care provider who prescribed the intervention that the order was not executed and reason(s) for not executing the order;</p>		
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<p>section <a href="#">148.211, subdivision 1.</a></p>	<p>2. Documentation in the medical record that the physician, ARNP, registered nurse, or other health care provider was notified and reason(s) for not implementing the order; and</p> <p>3. If appropriate, a timely notification to other persons who, based on the patient’s circumstances, should be notified of any orders which were not implemented.</p> <p>k. Providing a safe environment for the patient.</p> <p>l. Participating in the health care education of the patient and others, according to nursing standards and evidence-based practices.</p>		
<p><b>148.171 Subd. 24. Unlicensed assistive personnel.</b> "Unlicensed assistive personnel" (UAP) means any unlicensed person to whom nursing tasks or activities may be delegated or assigned, as approved by the board.</p>	<p><b>655 IAC 6.1(152) Definitions.</b> “Unlicensed assistive personnel” is an individual who is trained to function in an assistive role to the registered nurse and licensed practical nurse in the provision of nursing care activities as delegated by the registered nurse or licensed practical nurse.</p>		

**Board of Nursing  
Rule Projects (Updated 12/19/2023)**

<b>Clearinghouse Rule Number</b>	<b>Scope #</b>	<b>Scope Expiration</b>	<b>Date Scope Requested by Board</b>	<b>Rules Affected</b>	<b>Relating Clause</b>	<b>Synopsis</b>	<b>Stage of Rule Process</b>	<b>Next step</b>
	044-22	11/23/2024	N/A	Med 26	Military Medical Personnel (permanent rule)	The Medical Board rule project would create provisions in order to implement 2021 WI Act 158.	Legislative Review	If Legislature does not object, then rule can be adopted.
	049-22	12/20/2024	N/A	SPS 11	Military Medical Personnel (permanent rule)	Rule project would create provisions in SPS code relating to the operation and administration of the military medical personnel program.	Legislative Review	If Legislature does not object, then rule can be adopted.

**Permanent Rules**

<b>Clearinghouse Rule Number</b>	<b>Scope #</b>	<b>Scope Expiration</b>	<b>Date Scope Requested by Board</b>	<b>Rules Affected</b>	<b>Relating Clause</b>	<b>Synopsis</b>	<b>Stage of Rule Process</b>	<b>Next step</b>
	030-23	11/15/2025	2/9/2023	N 6	Delegated Acts	Review and update chapter N 6 to clarify and further define delegated acts.	Drafting rule	EIA comment period



**Board of Nursing**

**Scope Statements**

<b>Clearinghouse Rule Number</b>	<b>Scope #</b>	<b>Scope Expiration</b>	<b>Date Scope Requested by Board</b>	<b>Rules Affected</b>	<b>Relating Clause</b>	<b>Synopsis</b>	<b>Stage of Rule Process</b>	<b>Next step</b>
			10/8/2020	N 8	APNP prescribing limitations	Review of limitations in N8 regarding APNPs prescribing certain drugs.	Scope submitted to Governor's Office, 11/24/20.	
			7/30/2020	N 8	Collaboration with other health care providers	Review of the collaboration requirements in N8 and other changes throughout the chapter.	Scope submitted to Governor's Office, 10/15/20.	
			6/11/2020	N 2	Temporary permits	Requirements for temporary permits to respond to a future emergency and may promulgate a permanent rule to allow the Board to grant a waiver of or variance to the requirements in emergency situations.	Scope submitted to Governor's Office on 10/15/20	

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

**AGENDA REQUEST FORM**

1) Name and title of person submitting the request: Brenda Taylor, Board Services Supervisor		2) Date when request submitted: 12/15/2023 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: 1/11/2024	5) Attachments: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6) How should the item be titled on the agenda page? Newsletter Matters	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if applicable: N/A	
10) Describe the issue and action that should be addressed:  <p>The Board should discuss topics for the next newsletter and consider the topic list as outlined below. January 2024 Issue: <i>proofing</i></p> <ul style="list-style-type: none"> <li>• Chair’s Corner – Robert Weinman <i>received</i>.</li> <li>• New member Intro articles with photos /Headshots [ Kane, Malak, Sabourin] <i>received</i>.</li> <li>• Board Orders since 7/21/2023 (to Dec 31)</li> </ul> <p><b>May 2024 issue [May Nurses Month]</b></p> <ul style="list-style-type: none"> <li>• Chairs Corner</li> <li>• Possible article on burnout</li> <li>• Article Deadline: 3/20/2024</li> <li>• Reminder Deadline: 3/13/2024</li> <li>• Orders update 3/22/2024</li> </ul> <p><b>Articles/Ideas:</b></p> <ul style="list-style-type: none"> <li>• Rotating Articles on Professional Nursing Roles</li> <li>• New Member introductions with headshots (<i>As needed for new appointments, subject to oath receipts</i>)</li> <li>• Rotating Articles on Nurse Administrative Code</li> <li>• Possible N6 Status update</li> <li>• Consider reports by Robert Weinman and Brad Wojciechowski for newsletter articles on retention and recruitment, pipeline and the impact of Exam Room AI and AI in practice. (<i>mentioned at October meeting</i>)</li> <li>• Possibilities in the Nursing Field/Reasons to Become a Nurse – Robert Weinman</li> <li>• Reminder to Update Contact Information – DSPS Staff</li> <li>• Archive: <a href="https://dps.wi.gov/Pages/BoardsCouncils/Nursing/Newsletter.aspx">https://dps.wi.gov/Pages/BoardsCouncils/Nursing/Newsletter.aspx</a></li> </ul>			
11) <i>Brenda Taylor</i> Signature of person making this request		Authorization  <div style="text-align: right;">12/15/2023</div> Date	
Directions for including supporting documents: 1. This form should be saved with any other documents submitted to the <a href="#">Agenda Items</a> folders. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			