



VIRTUAL/TELECONFERENCE
BOARD OF NURSING
Virtual, 4822 Madison Yards Way, Madison
Contact: Brad Wojciechowski (608) 266-2112
April 9, 2026

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

9:30 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

- A. Adoption of Agenda (1-5)**
- B. Approval of Minutes of February 12, 2026 (6-7)**
- D. Introductions, Announcements and Recognition**
 - 1. Recognition: Robert Weinman, Board Member (Resigned: 3/11/2026)
- E. Reminders: Conflicts of Interests, Scheduling Concerns**
- F. Administrative Matters – Discussion and Consideration**
 - 1. Department, Staff and Board Updates
 - 2. **Election of Officers, Appointment of Liaisons and Alternates (8)**
 - 3. Board Members – Term Expiration Dates
 - a. Anderson, John G.– 7/1/2029
 - b. Kane, Amanda K. – 7/1/2027
 - c. Malak, Jennifer L. – 7/1/2026
 - d. McNally, Patrick J. – 7/1/2026
 - e. Saldivar Frias, Christian – 7/1/2023
- G. Presentation: 2024 Wisconsin Center for Nursing Survey relating to Wisconsin Baccalaureate Nurses Holding National Certification (10-17)**
- H. Administrative Rule Matters – Discussion and Consideration (18-34)**
 - 1. Drafting: N 1, Relating to Faculty Accreditation Standards (19-33)
 - 2. Pending and Possible Rulemaking Projects (34)
- I. Education and Examination Matters – Discussion and Consideration (35-39)**
 - 1. 2025 NCLEX Pass Rates

- J. Speaking Engagements, Travel, or Public Relation Requests, and Reports – Discussion and Consideration (40-55)**
 - 1. Travel Request: 2026 Discipline Case Management Conference – May 27-28, 2026 – Rosemont, IL
 - 2. Travel Request: 2026 NCSBN Executive Officer Summit – June 9-10, 2026 – Nashville, TN
 - 3. Travel Report: 2026 NCSBN Midyear Meeting – March 17-19, 2026 – Phoenix, AZ – Malak, Anderson

- K. Legislative and Policy Matters – Discussion and Consideration**

- L. Credentialing Matters – Discussion and Consideration**

- M. Newsletter Matters – Discussion and Consideration**

- N. Nurse Licensure Compact (NLC) Update – Discussion and Consideration**

- O. Liaison Reports – Discussion and Consideration**

- P. 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

- Q. 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.).

R. Credentialing Matters

1. Application Review

- a. R.K.T. – RN by Examination (IA-0000769534) **(56-72)**

S. Deliberation on Division of Legal Services and Compliance Matters

1. Administrative Warnings

- a. 23 NUR 796 – Q.D.H. **(73-78)**
- b. 24 NUR 0434 – C.D. **(79-85)**
- c. 25 NUR 0345 – C.C. **(86-90)**
- d. 25 NUR 0393 – S.E.B. **(91-95)**
- e. 25 NUR 0620 – E.A.C. **(96-101)**

2. Proposed Stipulations, Final Decisions, and Orders

- a. 23 NUR 004 – Catherine S. Alejandre **(102-108)**
- b. 23 NUR 196 – Matthew W. Kraus **(109-115)**
- c. 23 NUR 367 and 24 NUR 127 – Sittichok Weerapunyanont **(116-121)**
- d. 23 NUR 610 – Deborah J. Link **(122-128)**
- e. 23 NUR 833 – Jessica M. Mauss **(129-135)**
- f. 23 NUR 834 – Lesa R. McNamer **(136-142)**
- g. 23 NUR 882 – Jolene J. Sorensen **(143-149)**
- h. 24 NUR 0578 – Laura C. Osborne **(150-156)**
- i. 24 NUR 0616 – Sherry A. Mandel **(157-163)**
- j. 24 NUR 0657 – Angela M. Soczka **(164-172)**
- k. 24 NUR 0683 – Erica M. Miller **(173-179)**
- l. 24 NUR 0724 – Mallory R. Greicar **(180-191)**
- m. 24 NUR 0783 – Samuel R. Walker **(192-198)**
- n. 25 NUR 0252 – Gina R. Wildman **(199-205)**
- o. 25 NUR 0422 – Sherry L. Dorf **(206-212)**
- p. 25 NUR 0506 – Amanda A. Skartvedt **(213-223)**
- q. 25 NUR 0723 – Daniel S. Hacker **(224-230)**

3. Case Closings

- a. 22 NUR 136 – H.A.R. **(231-237)**
- b. 23 NUR 125 – F.C. **(238-243)**
- c. 23 NUR 418 – T.A.M. **(244-248)**
- d. 23 NUR 687 – L.E.S. **(249-260)**
- e. 24 NUR 0334 – K.G.M. and N.J.S. **(261-266)**
- f. 24 NUR 0625 – N.T.S. **(267-272)**
- g. 24 NUR 0824 – E.L.N. **(273-278)**
- h. 25 NUR 0092 – A.L.R. **(279-299)**
- i. 25 NUR 0141 – S.A.S. **(300-305)**
- j. 25 NUR 0304 – J.M.B. **(306-310)**
- k. 25 NUR 0325 – S.B.R. **(311-320)**
- l. 25 NUR 0351 – K.L.B. **(321-326)**
- m. 25 NUR 0413 – H.C.P. **(327-336)**
- n. 25 NUR 0461 – R.M.E. **(337-344)**

- o. 25 NUR 0496 – A.K. **(345-349)**
- p. 25 NUR 0530 – M.C.Y.S. **(350-352)**
- q. 25 NUR 0534 – M.R.B. **(353-364)**
- r. 25 NUR 0652 – S.M.B. **(365-368)**

T. Deliberation on Proposed Final Decision and Orders

- 1. Tina L. Lipske – (DHA Case Number SPS-25-0075/DLSC Case Number 24 NUR 730) **(369-387)**
- 2. Donna M. Haxton – (DHA Case Number SPS-25-0070/DLSC Case Number 25 NUR 0189) **(388-400)**
- 3. Dina M. Moos – (DHA Case Number SPS-25-0071/DLSC Case Number 24 NUR 0561) **(401-411)**

U. 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

V. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

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

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

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

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

ADJOURNMENT

NEXT MEETING: MAY 14, 2026

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://dsps.wi.gov>. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of any agenda item may be changed by the board for the convenience of the parties. The person credentialed by the board has the right to demand that the meeting at which final action may be taken against the credential be held in open session. Requests for interpreters for the hard of hearing, or other accommodations, are considered upon request by contacting the Affirmative Action Officer or reach the Meeting Staff by calling 608-267-7213.

**VIRTUAL/TELECONFERENCE
BOARD OF NURSING
MEETING MINUTES
FEBRUARY 12, 2026**

PRESENT: John Anderson, Amanda Kane, Jennifer Malak, Patrick McNally, Robert Weinman

ABSENT: Christian Saldivar Frias

STAFF: Brad Wojciechowski, Executive Director; Renee Parton, Assistant Deputy Chief Legal Counsel; Gretchen Mrozinski, Board Counsel, Sofia Anderson, Administrative Rules Coordinator; Ashley Sarnosky, Board Administrative Specialist; and other Department Staff

CALL TO ORDER

Robert Weinman, Chairperson, called the meeting to order at 9:30 a.m. A quorum was confirmed with five (5) members present.

ADOPTION OF THE AGENDA

MOTION: Patrick McNally moved, seconded by Jennifer Malak, to adopt the Agenda as published. Motion carried unanimously.

APPROVAL OF MINUTES JANUARY 8, 2026

MOTION: Amanda Kane moved, seconded by John Anderson, to approve the Minutes of January 8, 2026, as published. Motion carried unanimously.

CLOSED SESSION

MOTION: John Anderson moved, seconded by Patrick McNally, to convene to Closed Session to deliberate on cases following hearing (Wis. Stat. § 19.85(1)(a)); to consider licensure or certification of individuals (Wis. Stat. § 19.85(1)(b)); to consider closing disciplinary investigation with administrative warnings (Wis. Stat. §§ 19.85(1)(b) and 440.205); to consider individual histories or disciplinary data (Wis. Stat. § 19.85(1)(f)); and, to confer with legal counsel (Wis. Stat. § 19.85(1)(g)). 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; Amanda Kane -yes; Jennifer Malak-yes; Patrick McNally-yes; and Robert Weinman-yes. Motion carried unanimously.

The Board convened into Closed Session at 10:31 a.m.

Proposed Stipulations and Final Decisions and Orders

MOTION: Jennifer Malak moved, seconded by Robert Weinman, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of the following cases:
24 NUR 0619 – Catherine S. DePoole
24 NUR 0829 – Pamela J. Schuhmacher
25 NUR 0018 – Juanita Joseph
25 NUR 0292 – Margaret M. Prenger
25 NUR 0293 – April M. Schwinn
25 NUR 0600 – Lisa D. Craemer
Motion carried unanimously.

Case Closings

MOTION: Patrick McNally moved, seconded by Amanda Kane, to close the following DLSC Cases for the reasons outlined below:
24 NUR 0547 – C.K.D. – Prosecutorial Discretion (P1)
24 NUR 0786 – A.J.C. – No Violation
25 NUR 0322 – B.K.E. – No Violation
25 NUR 0569 – S.E.S. – Prosecutorial Discretion (P2)
25 NUR 0720 – S.E.K. – No Violation
25 NUR 0796 – K.L.S. – Prosecutorial Discretion (P1)
Motion carried unanimously.

RECONVENE TO OPEN SESSION

MOTION: Jennifer Malak moved, seconded by John Anderson, to reconvene into Open Session. Motion carried unanimously.

The Board reconvened into Open Session at 10:44 a.m.

VOTING ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION

MOTION: Robert Weinman moved, seconded by Patrick McNally, 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: Robert Weinman moved, seconded by John Anderson, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 10:45 a.m.

BOARD OF NURSING
2026 Elections and Liaison Appointments

2026 OFFICERS	
Chairperson	<i>Vacant</i>
Vice Chairperson	Jennifer Malak
Secretary	Patrick McNally

LIAISON APPOINTMENTS	
Credentialing Liaison	<i>Vacant</i> , Amanda Kane, Jennifer Malak <i>Alternate: Vacant</i>
Monitoring Liaison	John Anderson <i>Alternate: Patrick McNally</i>
Professional Assistance Procedure (PAP) Liaison	John Anderson <i>Alternate: Patrick McNally</i>
Legislative Liaison	John Anderson, <i>Vacant</i> <i>Alternate: Patrick McNally</i>
Newsletter Liaison	Jennifer Malak <i>Alternate: Vacant</i>
Communication Liaison	<i>Vacant</i>
Education and Examination Liaison	Amanda Kane <i>Alternate: Jennifer Malak</i>
Controlled Substances Board Liaison as per Wis. Stats. §15.405(5g)	Amanda Kane <i>Alternate: Vacant</i> (Primary)
Wisconsin Coalition for Prescription Drug Abuse Reduction Liaison	Amanda Kane
Interdisciplinary Advisory Council Liaison	Amanda Kane <i>Alternate: Jennifer Malak</i>


Travel Authorization Liaison	Vacant (Chair) <i>Alternate:</i> Jennifer Malak
COMMITTEE MEMBER APPOINTMENTS	
Rules Committee	Amanda Kane, Jennifer Malak, Patrick McNally, John Anderson
BOARD APPOINTMENT TO THE INTERSTATE NURSE LICENSURE COMPACT COMMISSION	
Administrator of the Nurse Licensure Compact	Vacant <i>Alternate:</i> Patrick McNally

SCREENING PANEL APPOINTMENTS	
Alternates	Vacant
Screening Panel Rotation	
January – March (2025 & 2026)	Patrick McNally (February)
April – June	John Anderson, Vacant
July – September	Vacant , Patrick McNally
October – December	Patrick McNally, Jennifer Malak

Updated 4/3/26

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Brad Wojciechowski, Executive Director		2) Date when request submitted: 3/2/2026 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: 3/12/2026	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Presentation: 2024 Wisconsin Center for Nursing Survey relating to Wisconsin Baccalaureate Nurses Holding National Certification	
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 Appearance Request for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <Appearance Name(s)> <input 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:			
11) Authorization			
 Signature of person making this request		3/2/2026 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 Agenda Items 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.			



Wisconsin Registered Nurse Survey 2024: Wisconsin Baccalaureate Nurses Holding National Certification

Submitted to the Wisconsin Board of Nursing
February 2026

This report, provided by Wisconsin Department of Workforce Development (DWD) at the request of the Wisconsin Center for Nursing (WCN) utilizes the 2024 Wisconsin Registered Nurse Survey (WRNS 2024) data to explore the following questions:

- How many Wisconsin nurses who report holding a national certification have a bachelor's degree as their highest level of academic attainment?
- What is the geographic distribution of certification holding BSN's?

The initial WRNS 2024 universe contained 93,008 registered nurses (RNs). Two filtering specifications were applied. First, the sample was restricted to include only those "actively working as a nurse." Second, the sample was restricted to only RNs holding a BSN as their "highest level of educational attainment." This resulted in a count of 34,720 nurses (or 37 percent of the WRNS 2024 universe).

Of the 34,720 actively working nurses in Wisconsin that held a BSN as their highest level of educational attainment, **6,765 (or 19 percent)** were reported to hold at least one of the 58 national board certification types listed in the WRNS 2024. **Table 1** shows the breakdown of this subset by certification type.

Table 1: BSN National Certification Distribution

Certification	Count	Percent
Acute Care/Critical Care	921	13.6
Addiction/AODA	S	S
Adult Health	36	0.5
Ambulatory Care Nursing	60	0.9
Anesthesia (CRNA)	232	3.4
Cardiac Rehabilitation Nursing	13	0.2
Cardiac-Vascular Nursing	167	2.5
Case Management Nursing	228	3.4
College Health Nursing	S	S
Community Health	83	1.2
Correctional Nursing (CCRN)	0	0
Diabetes Management-Advanced	59	0.9
Domestic Violence/Abuse Response	S	S
Emergency Nursing (CEN®, CFRN®)	373	5.5
Family Health	20	0.3
Family Planning	S	S
Gastroenterology (CGRN)	27	0.4
General Nursing Practice	101	1.5
Gerontological Nursing	68	1
High-Risk Perinatal Nursing	23	0.3
Home Health Nursing	28	0.4
Hospice and Palliative Nursing (CHPN®, ACHPN®)	98	1.4

Informatics Nursing	17	0.3
Infusion Nursing(CRNI)	22	0.3
Legal Nurse Consultant (LNCC®)	12	0.2
Medical-Surgical Nursing	379	5.6
Medical-Surgical Nursing (CMSRN®)	0	0
Neonatal	153	2.3
Nephrology (CNN,CDN)	28	0.4
Neurology (CNRN)	46	0.7
Nurse Educator(CNE)	S	S
Nurse Executive(CENP)	25	0.4
Nurse Executive-Advanced	S	S
Nurse Manager and Leader(CNML)	19	0.3
Nursing Case Management	34	0.5
Nursing Professional Development	26	0.4
OB/GYN/Women's Health Care	287	4.2
Occupational Health (COHN)	36	0.5
Orthopedic Nursing (ONC®)	73	1.1
Oncology Nursing (OCN®, CPON®, CBCN, AOCNP®, AOCNS®)	599	8.9
Parish Nurse	42	0.6
Perianesthesia (CPAN®, CAPA®)	111	1.6
Peri-Operative (CNOR®)	330	4.9
Pain Management	17	0.3
Pediatric Nursing	339	5
Perinatal Nursing	56	0.8
Psychiatric & Mental Health Nursing	71	1
Psychiatric & Mental Health Nursing-Advanced (APMHN)	S	S
Public/Community Health	74	1.1
Public Health Nursing-Advanced (APHN)	S	S
Radiology/Invasive Procedures Lab	17	0.3
Rehabilitation (CRRN®)	41	0.6
Respiratory/Pulmonary Care	35	0.5
School Nursing	44	0.7
School Nursing (NCSN®)	46	0.7
Transplant	73	1.1
Wound/Ostomy Nursing (CWOCN, CWCN, COCN, CCCN, CWON)	243	3.6
Other, not listed	1392	20.6
Total	7276	-

NOTE: Since RNs may hold multiple certifications at one time, totals in this table will exceed the existing number of nurses actively working, that (1) hold a BSN as their highest level of educational attainment and (2) hold at least one national board certification.

The second aspect of the request concerned the geographic distribution of certification holding BSNs. **Table 2** shows actively working nurses in Wisconsin that held a BSN as their highest level of educational attainment, by county. Three definitions were incorporated: by residence, by primary place of work, and by residence or primary place of work. The third definition was used due to the considerable amount of missing data for the primary place of work variable (1104 observations, or 16 percent of the sample). If primary place of work was missing but residence was not – place of work county was imputed with residence county. If both were present, primary place of work was used. This reduced the missing variable coverage to just 14 observations (or 0.2 percent of the sample).

Table 2: BSN By County and Location of Residence, Work and Both Combined

County	Residence		Primary Place of Work		Combined	
	Count	Percent	Count	Percent	Count	Percent
ADAMS	S	S	S	S	S	S
ASHLAND	S	S	12	0.2	13	0.2
BARRON	21	0.3	21	0.3	22	0.3
BAYFIELD	S	S	S	S	S	S
BROWN	346	5.1	396	5.9	444	6.6
BUFFALO	S	S	0	0	S	S
BURNETT	S	S	S	S	S	S
CALUMET	54	0.8	S	S	16	0.2
CHIPPEWA	47	0.7	16	0.2	24	0.4
CLARK	16	0.2	S	S	S	S
COLUMBIA	70	1	19	0.3	31	0.5
CRAWFORD	S	S	S	S	S	S
DANE	886	13.1	972	14.4	1078	15.9
DODGE	69	1	32	0.5	44	0.7
DOOR	23	0.3	11	0.2	21	0.3
DOUGLAS	22	0.3	S	S	24	0.4
DUNN	29	0.4	S	S	16	0.2
EAU CLAIRE	112	1.7	131	1.9	155	2.3
FLORENCE	0	0	S	S	S	S
FOND DU LAC	86	1.3	60	0.9	72	1.1
FOREST	S	S	S	S	S	S
GRANT	29	0.4	19	0.3	28	0.4
GREEN	52	0.8	24	0.4	28	0.4
GREEN LAKE	S	S	S	S	12	0.2
IOWA	20	0.3	S	S	11	0.2
IRON	S	S	S	S	S	S
JACKSON	15	0.2	11	0.2	15	0.2
JEFFERSON	79	1.2	26	0.4	39	0.6
JUNEAU	14	0.2	S	S	11	0.2

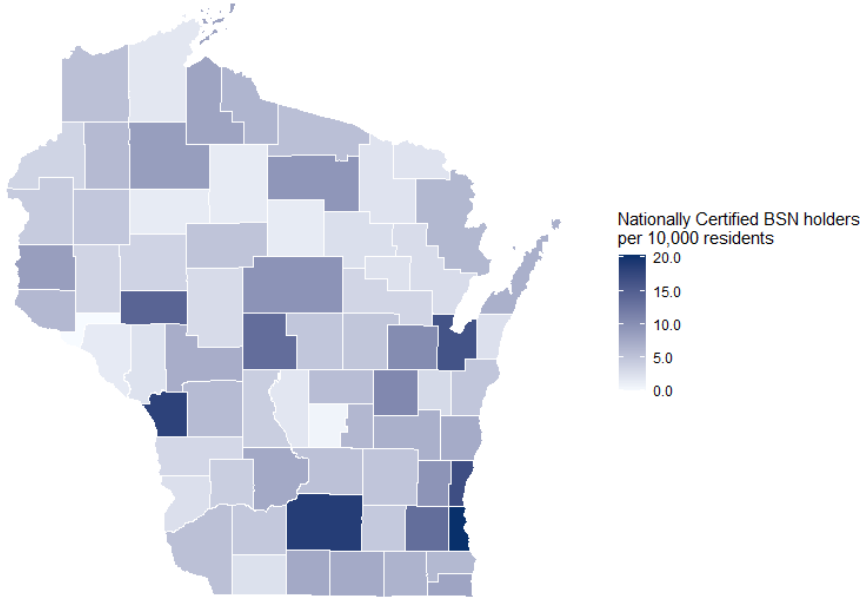
KENOSHA	123	1.8	96	1.4	135	2
KEWAUNEE	17	0.3	S	S	S	S
LA CROSSE	153	2.3	193	2.9	220	3.3
LAFAYETTE	S	S	S	S	S	S
LANGLADE	S	S	S	S	S	S
LINCOLN	S	S	S	S	S	S
MANITOWOC	55	0.8	29	0.4	39	0.6
MARATHON	149	2.2	106	1.6	134	2
MARINETTE	20	0.3	20	0.3	26	0.4
MARQUETTE	S	S	0	0	S	S
MENOMINEE	S	S	0	0	S	S
MILWAUKEE	1115	16.5	1717	25.4	1888	27.9
MONROE	26	0.4	23	0.3	27	0.4
OCONTO	38	0.6	S	S	11	0.2
ONEIDA	28	0.4	26	0.4	36	0.5
OUTAGAMIE	208	3.1	170	2.5	201	3
OZAUKEE	161	2.4	126	1.9	157	2.3
PEPIN	0	0	0	0	0	0
PIERCE	30	0.4	S	S	26	0.4
POLK	15	0.2	16	0.2	20	0.3
PORTAGE	37	0.5	25	0.4	34	0.5
PRICE	S	S	S	S	S	S
RACINE	197	2.9	86	1.3	120	1.8
RICHLAND	S	S	S	S	S	S
ROCK	125	1.8	97	1.4	123	1.8
RUSK	S	S	S	S	S	S
ST. CROIX	64	0.9	44	0.7	83	1.2
SAUK	56	0.8	37	0.5	50	0.7
SAWYER	11	0.2	14	0.2	16	0.2
SHAWANO	25	0.4	13	0.2	14	0.2
SHEBOYGAN	91	1.3	74	1.1	87	1.3
TAYLOR	S	S	S	S	S	S
TREMPEALEAU	21	0.3	S	S	S	S
VERNON	16	0.2	S	S	S	S
VILAS	14	0.2	S	S	13	0.2
WALWORTH	83	1.2	52	0.8	70	1
WASHBURN	S	S	S	S	S	S
WASHINGTON	272	4	93	1.4	133	2
WAUKESHA	961	14.2	438	6.5	556	8.2
WAUPACA	35	0.5	17	0.3	25	0.4
WAUSHARA	23	0.3	S	S	14	0.2

WINNEBAGO	152	2.2	161	2.4	185	2.7
WOOD	58	0.9	87	1.3	100	1.5
Missing / NA	275	4.1	1104	16.3	14	0.2
TOTAL	6765	100	6765	100	6765	100

Based on the third definition, the top 5 counties in Wisconsin with the highest frequency of certified BSN holders included Milwaukee (1888), Dane (1078), Waukesha (556), Brown (444), and La Crosse (220). Together, these counties accounted for nearly 62 percent of the population of interest. **Figure 1** plots nationally certified BSN-holding RNs per 10,000 residents by Wisconsin county.

Figure 1

Nationally Certified BSN-Holding Registered Nurses per 10,000 Residents
Wisconsin Counties



Source: Wisconsin Registered Nurse Survey (WRNS); U.S. Census Bureau, ACS 2020–2024

Additional variables in the WRNS 2024 allowed for observation of RNs that planned to pursue further education. **Table 3** shows the breakdown of plans for further education for the population of interest. Of these 6,765 RNs, 78 percent had no plans for further education. Roughly four percent were currently enrolled in an MSN program, while three percent were currently enrolled in a DNP program. A significant share planned to pursue further education within the next two years (927, or 13.7 percent).

Among the 927 that planned to pursue further education within the next two years, 57 percent reported they would seek an MSN, while 23 percent reported they would seek a DNP.

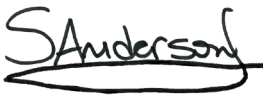
Table 3: BSN Plans to Pursue Further Education

Plans for Further Education	Count	Percent
I have no plans for additional nursing studies	5274	78
Enrolled in a BSN program	S	S
Enrolled in a MSN program	267	3.9
Enrolled in a Master's program in a related health field	37	0.5
Enrolled in a DNP program	193	2.9
Enrolled in a Nursing PhD program	S	S
Enrolled in a PhD program in a related field	S	S
Enrolled in a non-degree certification program	51	0.8
Plan to pursue further education in nursing in the next two years	927	13.7
Total	6765	100

Note:
Counts and percentages were suppressed for cells with 10 or fewer observations.

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Sofia Anderson, Administrative Rules Coordinator		2) Date when request submitted: 03/30/2026 <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: April 9, 2026	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Administrative Rules Matters – Discussion and Consideration 1. Drafting: N 1, relating to faculty accreditation standards. 2. Pending and Possible rulemaking projects.	
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 Appearance Request for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: Attachments: 1. Chapter N 1 redline. 2. Nursing rule projects chart.			
11) Authorization <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="text-align: center;">  <hr/> Signature of person making this request </div> <div style="text-align: center;"> 03/30/2026 <hr/> Date </div> </div> <div style="margin-top: 10px;"> <hr/> Supervisor (if required) Date </div> <div style="margin-top: 10px;"> <hr/> Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date </div>			
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 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.			

Chapter N 1

APPROVAL FOR SCHOOLS OF NURSING

- [N 1.01](#) Authority and intent.
- [N 1.02](#) Definitions.
- [N 1.03](#) Authorization to plan a school of nursing.
- [N 1.04](#) Authorization to admit students.
- [N 1.05](#) Approval of school of nursing.
- [N 1.06](#) Approval of out of state school of nursing.
- [N 1.07](#) Accreditation.
- [N 1.08](#) Standards.
- [N 1.09](#) Annual pass rates.
- [N 1.10](#) Continuation of board approval.
- [N 1.11](#) Closure of a school of nursing.
- [N 1.12](#) Nursing refresher course approval.

N 1.01 Authority and intent.

- (1) The rules in this chapter are adopted pursuant to authority of ss. [15.08 \(5\) \(b\)](#) and [441.01 \(3\)](#), Stats.
- (2) The intent of the board of nursing in adopting rules in this chapter is to clarify requirements and develop efficient timelines for the nursing school approval process and to reduce duplication that exists between the board and nursing accreditation processes for nursing schools.

N 1.02 Definitions. In this chapter:

- (1) “Annual NCLEX pass rate” means the pass rates for those who took the NCLEX or advanced practice certification examination between January 1 and December 31.
- (2) “Board” means board of nursing.
- (3) “Certificate of completion” means a student has completed the portion of the program equivalent to a diploma in practical nursing or professional nursing.
- (4) “Class” means a graduating class for each 12-month period.

- (5) “Institution” means the college, university or governing body which has the authority to conduct a school of nursing.
- (5g) “Institutional accreditation” means that the institution conforms to the standards of education prescribed by a regional accrediting commission recognized by the U.S. department of education.
- (5r) “NCLEX” means national council licensure examination.
- (6) “Nursing accreditation” means the school of nursing conforms to the standards of a board recognized nursing accreditation agency.
- (8) “Out-of-state school” means a school operating in Wisconsin with a physical location outside of Wisconsin.
- (10) “School of nursing” means a school for professional nurses or practical nurses.
- (11) “School of practical nursing” means a school preparing students for practical nurse licensure.
- (12) “School of professional nursing” means a school preparing nursing students at the associate, bachelor’s, or graduate degree level. This includes schools granting any of the following:
- (a) Certificate of completion for practical nurse licensure or professional nurse licensure.
 - (b) Postlicensure bachelor’s degree.
- (13) “Simulation” means planned clinical experiences to develop clinical judgment and assess learning utilizing patient simulators in an environment and under conditions that provide a realistic clinical scenario.

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 all of 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 all programs to be offered and the primary method of instruction.
 - (c) Evidence of the availability of sufficient clinical facilities and resources. No contracts with clinical facilities may be signed until after the institution receives authorization to plan from the board.

(d) Plans to recruit and employ a qualified educational administrator and qualified faculty.

(f) A proposed timeline 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 completed 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 all of the following:

(a) Verification of employment of an educational administrator meeting the qualifications in s. [N 1.08 \(2\) \(a\)](#).

(b) Evidence of employment of sufficient number of faculty meeting the qualifications in s. [N 1.08 \(3\)](#) to teach the courses offered for the first six months.

(c) The school of nursing's philosophy and objectives.

(d) An overview of curriculum including all of the following:

1. Content.

2. Course sequence.

3. Course descriptions.

5. Course syllabi for the first year and plan for subsequent years.

(dm) Documentation of a school evaluation plan.

(e) Verification of the establishment of student policies for admission, progression, retention, and graduation.

(em) Documentation of a plan for student or prospective student access to student policies.

(f) Verification of the students' ability to acquire clinical skills by providing all of the following:

1. Written agreements from clinical facilities securing clinical opportunities and documentation of the facility, type, size, number of beds, and type of patients. All written agreements shall be signed and dated after the date on which the school of nursing was granted authorization to plan by the board.

2. Documentation of simulation equipment and experiences.

3. Documentation that clinical experiences are representative of all areas of nursing practice covered by the school of nursing's curriculum.

(g) An updated timeline for implementing the program and intended date for entry of the first class.

(2) The board shall make a decision on the application within 2 months of the receipt of the completed application.

(2g) A school of nursing which has received authorization to admit students shall provide the board on the first day of March, June, September, and December until the school of nursing receives approval, evidence of employment of sufficient number of faculty meeting s. [N 1.08](#) (3) standards to teach the courses offered four months from the date the report is due.

(2r) The board may review the school of nursing to determine whether s. [N 1.08](#) standards are being met by requiring any of the following:

(a) A site survey.

(b) A self-assessment.

(c) A plan for improvement and any progress reports.

(3) Withdrawal of authorization may occur for failure to meet the standards in s. [N 1.08](#).

N 1.05 Approval of school of nursing.

(1) A school of nursing may apply for approval of the school of nursing upon graduation of the first class, but may not apply later than graduation of the third class. The school of nursing shall submit all of 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. The systematic evaluation plan shall include an evaluation of the annual pass rate of any graduates who took the NCLEX or an advanced practice certification examination.

(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 completed application, whichever is later. The board shall approve the school based on verification that the school of nursing is in compliance with nursing education standards in s. [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 that receives a conditional approval may not admit new students to the school of nursing until the school of nursing receives full approval. The school of nursing may apply for full approval in three months from the date the school of nursing receives conditional approval.

(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 controlling institution shall do all of the following:

(a) Implement the time frame established by the board for transfer of enrolled students to an approved school of nursing 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 and address 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) Close the school of nursing when the last student has transferred.

(d) Submit progress reports during the closure process upon request of the board.

(6) A 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 requirements are met:

(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 recognized by the Wisconsin board.

(2) CONTINUED APPROVAL. An out-of-state school shall maintain approval as long as school of nursing meets the requirements in sub. (1).

N 1.07 Accreditation.

- (1) A school of nursing shall receive nursing accreditation by a board recognized nursing accreditation agency within three years of school approval.
- (2) Schools of professional nursing that grant a certificate of completion shall hold accreditation at the level of the complete degree at which a diploma is conferred.
- (3) Failure to maintain 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. The institution shall do all of the following:
 - (a) 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) Maintain institutional accreditation.
 - (c) Develop and maintain written school of nursing administrative policies which are in accord with the institution.
 - (d) Have written documentation between the school of nursing and institutions which offer associated academic study, clinical facilities, and agencies for related services for students.
- (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 in Wisconsin that is not encumbered.
 2. A graduate degree with a major in nursing. A doctoral degree is required for a school of nursing offering a graduate degree nursing program.
 3. Knowledge of learning principles for adult education, including nursing curriculum development, administration and evaluation and one of the following:
 - a. Two years experience as an instructor in a nursing education program within the last 5 years.
 - b. One year experience as an instructor in a nursing education program within the last 5 years and the graduate degree included education preparation.
 4. Current knowledge of nursing practice.

(b) The educational administrator shall notify the board within 5 business days of a vacancy in the educational administrator's position or change in educational administrator. Failure to report by the educational administrator is considered a violation of s. [N 7.03 \(1\) \(intro.\)](#).

(c) The institution shall designate an interim or permanent educational administrator and notify the board within 5 business days of a vacancy in the educational administrator position. The institution may request board approval of an interim educational administrator who does not meet the qualifications in par. [\(a\)](#).

(d) The interim educational administrator may serve no longer than 6 months. The institution may request an extension of time based upon hardship. The institution and new educational administrator shall notify the board within 5 business days of the institution's hiring of the educational administrator.

(3) FACULTY.

(a) *Faculty standards.* The school of nursing shall have evidence of the faculty meeting the standards in this section on file in the school of nursing office and available upon request to the board.

(b) *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, **and unencumbered** registered nurse license or privilege to practice in Wisconsin ~~that is not encumbered~~.
2. A graduate degree with a major in nursing.
3. Notwithstanding subd. [2.](#), interprofessional faculty teaching interdisciplinary courses not specific to nursing shall have expertise and a graduate degree appropriate for the content being taught.

(c) *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 in Wisconsin that is not encumbered.
2. A baccalaureate degree with a major in nursing.

(d) *Faculty exceptions.* An educational administrator may apply to the board for exceptions to faculty requirements who are not teaching graduate level courses. A minimum of 50 percent of faculty must meet the faculty qualifications. A school of nursing that is granted a faculty exception for a faculty member shall provide the faculty

member with a supervisor who meets the qualifications in par. (b) or (c). The board may grant any of the following exceptions:

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 program in nursing.
- c.** A doctorate program in nursing.

2. ‘Emergency exception.’ A person with a bachelor’s 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. The emergency exception may not be renewed for the course taught or for the individual in consecutive semesters. An educational administrator who requests a second consecutive emergency exception is required to submit a plan regarding the school of nursing staffing levels, courses being offered, and the extenuating circumstances to the board prior to the board approving another emergency exception.

3. ‘Non-nursing masters degree exception.’ A non-nursing master’s degree exception is for a person who has a unique combination of knowledge, experience, and skills that will best serve the school of nursing, faculty, and students in a specific content area. The person shall meet all of the following:

- a.** A bachelor’s 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.

4. ‘Bachelor’s degree clinical faculty exception.’ A bachelor’s degree clinical faculty exception is for an individual who has relevant nursing education, experience, certification, and clinical skills that will best serve a professional school of nursing in a clinical capacity. This exception is ongoing and does not require annual renewal as long as all of the following required criteria remain met:

- a.** A baccalaureate degree with a major in nursing.
- b.** A current, active, and unencumbered registered nurse license or privilege to practice in Wisconsin.

c. Two years of clinical experience relevant to the assigned clinical area.

d. Be enrolled in a graduate program and maintain steady progress towards completion, have completed graduate-level courses or education in clinical best practices acceptable to the Board, or hold a national certification in a nursing field specialty relevant to the assigned clinical area.

d. Practice under the supervision of a registered nurse who meets the qualifications in par. (b).

(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. All curriculum shall be developed by nursing faculty with a graduate degree and designed to teach students to use a systematic approach to clinical decision-making and safe patient care. Curriculum for graduate level courses shall be developed by nursing faculty with a doctoral degree. Curriculum shall be revised as necessary to maintain a program that reflects advances in health care and its delivery. The curriculum shall include all of the following:

(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 all of the following:

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, and 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 from diverse cultural, ethnic, social and economic backgrounds. Prelicensure programs shall include patients across the lifespan.

(5) CLINICAL LEARNING EXPERIENCES.

(a) Patient experiences shall occur in a variety of clinical or simulated settings of nursing practice expected at the level of licensure and shall include all of the following:

1. Integrating evidence-based research with patient goals and values to produce optimal care.

3. Providing patient-centered culturally competent care by doing all of the following:

b. Recognizing that the patient or designee is the source of control and full partner in providing coordinated care.

c. Coordinating and managing patient care across settings.

d. Providing education at a level understandable by the patient.

4. Collaborating with interprofessional teams to foster open communication, mutual respect, and shared decision-making in order to achieve safe and effective patient care.

5. Experiencing 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 entities selected for clinical experiences shall adhere to standards which demonstrate concern for the patient and evidence of 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 all of the following:

1. Development of skills in the provision of direct patient care.

4. Delegation to and supervision of other health care providers.

5. Effective application of the nursing process.

(e) Clinical experiences shall be supervised by qualified faculty.

(f) All student clinical experiences, including those with preceptors, shall be directed by nursing faculty.

(5m) SIMULATION.

(a) Simulation used to meet clinical requirements shall adhere to all of the following:

1. Nursing faculty with documented education and training in the use of simulation shall develop, implement, and evaluate the simulation experience.

2. Prebriefing and debriefing are conducted by nursing faculty with subject matter expertise and training in simulation using evidence-based techniques.

(b) Simulation may not be utilized for more than 50% of the time designated for meeting clinical learning requirements.

(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 licensure 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 progress toward or achievement of program outcomes.

N 1.09 Annual pass rates.

(1) GENERALLY. The school of nursing NCLEX pass rate includes all prelicensure students taking the NCLEX 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. A school of nursing which contains graduate programs shall include all advanced practice certification examinations related to programs offered in the school of nursing.

(2) ANNUAL PASS RATE STANDARD. The annual pass rate of graduates taking the NCLEX or advanced practice certification examinations for all test takers is a minimum of 80%.

(3) ANNUAL PASS RATE STANDARD NOT MET. If the annual 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 pass rate and submit an assessment of contributing factors and institutional plan for improvement of examination results including outcomes and timeframes. The assessment and institutional plan shall be submitted to the board within 45 days of the board notifying the school of nursing of its failure to meet the annual pass rate standard and the

institutional plan shall be acted on by the board no later than July 15. Failure to have a board approved plan by July 15 results in a review of the school of nursing under s. [N 1.10 \(4\)](#).

N 1.10 Continuation of board approval.

(1) Schools of nursing shall file with the board all of the following:

- (a)** Annual self-evaluation reports by February 1.
- (b)** All documents submitted to or received from nursing accreditation agencies relating to compliance with accreditation standards.
- (c)** Notification of any actions, withdrawal or change in school nursing accreditation status within 30 days.

(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 s. [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 school are received and it is necessary to evaluate the complaints.
- (d)** Failure to meet annual pass rate standard in s. [N 1.09](#).
- (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-assessment.
- (c)** A plan for improvement and any progress reports.

(5) If the board makes a determination that s. [N 1.08](#) standards are not being met, all of the following procedures 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 shall review the proposed plan and may make modifications to the plan.
- (c)** The school of nursing shall 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. When a school of nursing intends to close, the institution shall do all of the following:

(a) Submit a plan of intent to close a school of nursing to the board, including all of the following:

1. The date of intended closure.
2. Reason for the closure.
3. Place for students who have not completed their nursing education.

(b) 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) Notify the board of the name and address 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 date of the notice.

(b) The institution shall do all of the following if approval of the school is withdrawn:

1. Implement the time frame established by the board for transfer of enrolled students to an approved school 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 and address 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. Close the school when the last student has transferred.
4. Submit progress reports during the closure process upon request of the board.

(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.

(1) INTENT OF NURSE REFRESHER COURSE. A nurse refresher course is designed for nurses who have not been practicing for five years or more.

(2) FACULTY.

(a) The instructor shall have all of 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.

(3) PROFESSIONAL NURSE CONTENT. The nurse refresher course designed for professional nurse shall have all of the following content:

(a) Theory portion including all of the following:

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.

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

(a) Theory portion including all of the following:

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.

(5) 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.

**Board of Nursing
Rule Projects (Updated 03/02/2026)**

Emergency and Permanent Rules

Clearinghouse Rule Number	Scope #	Scope Expiration	Date Scope Requested by Board	Rules Affected	Relating Clause	Synopsis	Stage of Rule Process	Next step
				N 1	Faculty Accreditation Standards	Expand criteria regarding who can teach in a clinical setting to include BSNs.	Drafting rule.	EIA comment period, Clearinghouse review, and public hearing.
				N 1 to 8	APRNs and comprehensive review	The Board will implement the changes of 2025 WI Act 17 and conduct a comprehensive review to ensure the code is up to current standards of practice.	Drafting rule.	EIA comment period, Clearinghouse review, and public hearing.

Scope Statements

Clearinghouse Rule Number	Scope #	Scope Expiration	Date Scope Requested by Board	Rules Affected	Relating Clause	Synopsis	Stage of Rule Process	Next step
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**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Joan Gage		2) Date when request submitted: 3/2/2026 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: 03/12/2026	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? 2025 NCLEX Pass Rates under the Education and Examination agenda placeholder.	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? (If yes, please complete Appearance Request for Non-DSPS Staff) <input type="checkbox"/> Yes <Appearance Name(s)> <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: Presentation of NCLEX Pass Rates for all Wisconsin nursing school programs including those who fall below the required 80% pass rate.			
11) Authorization			
<i>M/D/YYYY</i> Signature of person making this request Joan Gage 2026		<i><Date:</i> Date 03/02/26	
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 Agenda Items 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.			

2025 NCLEX Pass Rates

Test	Edu Program	
NCLEX-PN	WI - BLACKHAWK TECHNICAL COLLEGE - PN (US50100000)	
	WI - BRYANT AND STRATTON COLLEGE - PN (US50110000)	
	WI - CHIPPEWA VALLEY TECHNICAL COLLEGE - PN (US50109700)	
	WI - CHIPPEWA VALLEY TECHNICAL COLLEGE - STANDALONE PN (US50110600)	
	WI - CLOSED PROGRAM (US50900000)	
	WI - FOX VALLEY TECHNICAL COLLEGE - PN (US50105700)	
	WI - FOX VALLEY TECHNICAL COLLEGE - STAND ALONE (US50101200)	
	WI - GATEWAY TECHNICAL COLLEGE - PN (US50105900)	
	WI - HERZING COLLEGE - PN (US50102000)	
	WI - HERZING UNIVERSITY - BROOKFIELD - PN (US50110400)	
	WI - HERZING UNIVERSITY - KENOSHA - PN (US50110300)	
	WI - LAC COURTE OREILLES OJIBWE COMMUNITY COLLEGE - PN (US50110100)	
	WI - LAKESHORE TECHNICAL COLLEGE - PN (US50109800)	
	WI - LAKESHORE TECHNICAL COLLEGE - PN STAND ALONE (US50110200)	
	WI - MADISON AREA TECHNICAL COLLEGE - PN (US50105600)	
	WI - MATC-MADISON PN STAND ALONE (US50101300)	
	WI - MID STATE TECHNICAL COLLEGE - PN (US50101000)	
	WI - MILWAUKEE AREA TECHNICAL COLLEGE - PN (US50105800)	
	WI - MILWAUKEE AREA TECHNICAL COLLEGE - STAND ALONE (US50101400)	
	WI - MORaine PARK TECHNICAL COLLEGE - PN (US50105300)	
	WI - NICOLET AREA TECHNICAL COLLEGE - PN (US50100100)	
	WI - NORTH CENTRAL TECHNICAL COLLEGE - PN (US50100500)	
	WI - NORTHEAST WISCONSIN TECHNICAL COLLEGE - PN (US50105200)	
	WI - NORTHEAST WISCONSIN TECHNICAL COLLEGE - STAND ALONE (US50100600)	
	WI - NORTHWOOD TECHNICAL COLLEGE - PN (US50100300)	
	WI - SOUTHWEST WISCONSIN TECHNICAL COLLEGE - PN (US50109600)	
	WI - WAUKESHA COUNTY TECHNICAL COLLEGE - PN (US50109900)	
	WI - WESTERN TECHNICAL COLLEGE - PN (US50109500)	
	NCLEX-RN	WI - ALVERNO COLLEGE - BS (US50509100)
		WI - ALVERNO COLLEGE - MILWAUKEE - DIRECT ENTRY MSN (US50511300)
		WI - BELLIN COLLEGE - BS (US50502200)
		WI - BLACKHAWK TECHNICAL COLLEGE - ADN (US50407700)
WI - BRYANT & STRATTON COLLEGE - ADN (US50400200)		
WI - BRYANT & STRATTON COLLEGE - BS (US50510500)		
WI - CARDINAL STRITCH UNIVERSITY - BS (US50502700)		
WI - CARDINAL STRITCH UNIVERSITY - RUTH S. COLEMAN COLLEGE OF NURSINGÂ - ADI		
WI - CARROLL UNIVERSITY - BS (US50500000)		
WI - CARROLL UNIVERSITY - MILWAUKEE - ADN (US50408700)		
WI - CARROLL UNIVERSITY - WAUKESHA - MSN (US50511100)		
WI - CARTHAGE COLLEGE OF NURSING (US50510400)		
WI - CHIPPEWA VALLEY TECHNICAL COLLEGE - ADN (US50408100)		

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WI - CONCORDIA UNIVERSITY WISCONSIN - BS (US50509400)
WI - EDGEWOOD COLLEGE - BS (US50507500)
WI - FOX VALLEY TECHNICAL COLLEGE - ADN (US50407000)
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WI - HERZING UNIVERSITY MASTERS IN NURSING - DIRECT ENTRY - MADISON - MSN (U
WI - HOLY FAMILY COLLEGE (US50510200)
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WI - LAKESHORE TECHNICAL COLLEGE - ADN (US50407600)
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WI - MARANATHA BAPTIST UNIVERSITY - BS (US50500100)
WI - MARIAN COLLEGE FOND DU LAC - BS (US50503900)
WI - MARQUETTE UNIVERSITY - BS (US50509000)
WI - MARQUETTE UNIVERSITY - MSN (US50509700)
WI - MID STATE TECHNICAL COLLEGE - ADN (US50400000)
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WI - MORaine PARK TECHNICAL COLLEGE - ADN (US50408200)
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WI - NICOLET AREA TECHNICAL COLLEGE - ADN (US50400100)
WI - NORTH CENTRAL TECHNICAL COLLEGE - ADN (US50407500)
WI - NORTHEAST WISCONSIN TECHNICAL COLLEGE - ADN (US50407300)
WI - NORTHWOOD TECHNICAL COLLEGE - ADN (US50407200)
WI - RASMUSSEN COLLEGE - GREEN BAY - BS (US50510000)
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WI - UNIVERSITY OF WISCONSIN - MILWAUKEE - BS (US50508300)
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WI - VITERBO UNIVERSITY - BS (US50508200)
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Rev. 3/2/2026

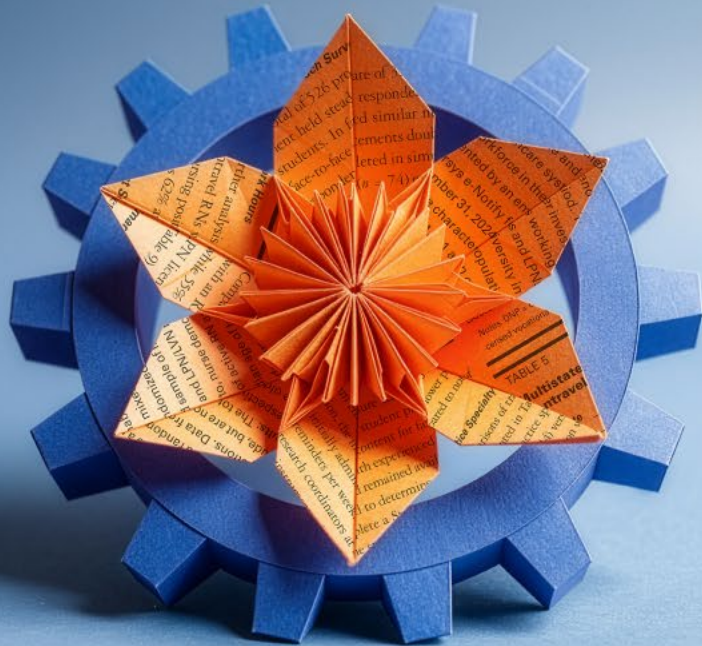
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72	68	94%
20	19	95%

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Brad Wojciechowski, Executive Director		2) Date when request submitted: 2/27/2026 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: 3/12/2026	5) Attachments: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6) How should the item be titled on the agenda page? Speaking Engagements, Travel, or Public Relation Requests, and Reports – Discussion and Consideration 1) Travel Request: 2026 Discipline Case Management Conference – May 27-28, 2026, Rosemont, IL 2) Travel Request: 2026 NCSBN Executive Officer Summit – June 9-10, 2026, Nashville, TN 3) Travel Report: 2026 NCSBN Midyear Meeting – March 17-19, 2026, Phoenix, AZ – Malak, Anderson	
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 Appearance Request for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <Appearance Name(s)> <input 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:			
11) Authorization			
		2/27/2026	
Signature of person making this request		Date	
Supervisor (Only required for post agenda deadline items)		Date	
Executive Director signature (Indicates approval for post agenda deadline items)		Date	



EVIDENCE
IN ACTION

2026 Environmental Scan: Future Trends in Nursing Regulation

Carol Timmings

Interim Editor-in-Chief

Journal of Nursing Regulation

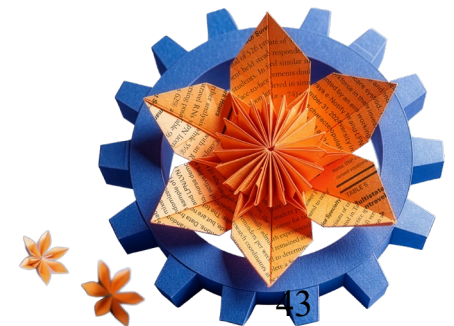
Purpose and Context

- Support NCSBN mission of public protection
- Comprehensive annual scan of healthcare landscape with focus on nursing and regulation
- New evidence and insights informed by data and reports, literature searches and consultations with experts in the field
- Current issues and emerging trends most likely to influence nursing regulation

EVIDENCE IN ACTION

Signals the importance of using current research and information from the broader environment to support:

- Evidence based planning and decision making;
- Policy development; and
- Regulatory frameworks that are sustainable, responsive and agile.



Regulatory Landscape



Workforce



Education



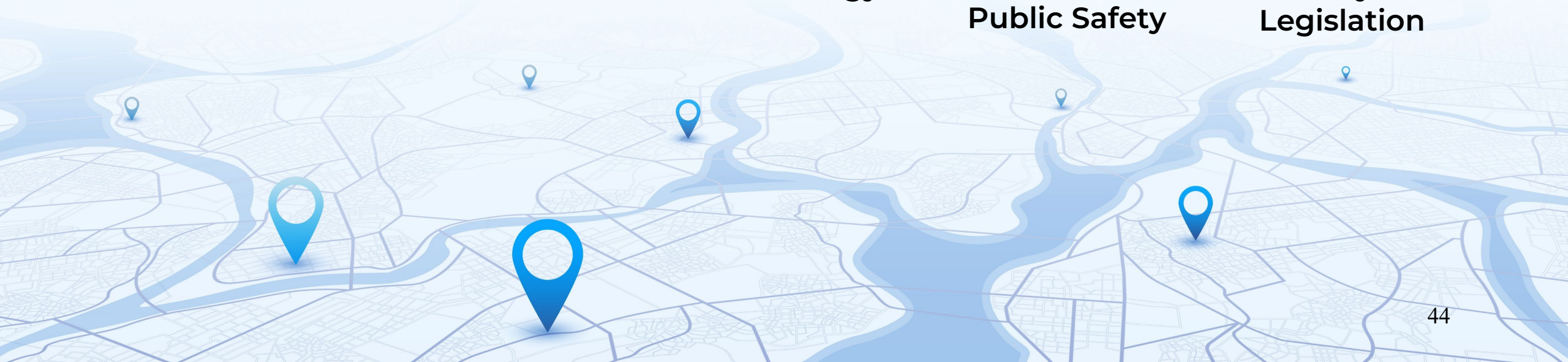
Technology



**Ensuring
Public Safety**



**Policy &
Legislation**



Evolving Workforce Trends in Nursing

- Age distribution has returned to pre-pandemic levels
- Employment levels stabilizing
- Turnover rates have improved
- Nursing salaries have risen



Evolving Workforce Trends (cont.)

- Aging population increasing healthcare needs
- 40% of Nurses plan to retire/leave the workforce within next 5 years
- High work loads and patient ratios contributing to mental distress and workforce burn-out
- Workplace violence persists



Shaping the Future of Education

- Long-term Nursing supply risk
- Number of Baccalaureate students steadily rising
- Number of RN/LPN/LVN declined while number of first time test-takers increased
- Decline in number of graduate level nursing programs
- Continued shortage of faculty and clinical placement sites

Navigating Technology

- AI adoption accelerating in clinical practice and administration
- Increased use of AI for clinical decision support, assessment and workflow efficiency
- APRN's increased use in diagnoses and disease management
- Notable risks: privacy, system bias and regulatory gaps
- Escalating cyber-security threats



Protecting the Public

- Workforce staffing challenges
- Substance misuse among nurses persists
- Decline in utilization of substance use monitoring programs
- IV hydration/med spa practice expansion
- Scope of practice enforcement challenges



Policy and Legislation in Nursing Regulation

- Reduction in barriers to APRN delivery of care
- Increased legalization of therapeutic use of psilocybin
- State influence increasing on NRBs
- Changes to H1-B visa program



Strategic Considerations

Nursing workforce volatility persists and is the largest systemic risk.

Strategic Considerations

- Education pipeline increasingly constrained by available faculty and decline in number of programs
- Technology advancing at rapid pace in healthcare – faster than regulation
- Public safety risks evolving beyond traditional care settings
- Legislative actions increasingly impacting regulatory independence and authority



Workforce



Education



Technology



**Ensuring
Public Safety**



**Policy &
Legislation**

- Proactive, evidence based and collaborative approaches are critical to ensuring public safety
- Regulatory modernization and the adoption of data driven processes are imperative to maintain legitimacy in regulating the profession

Public Protection

Table Work

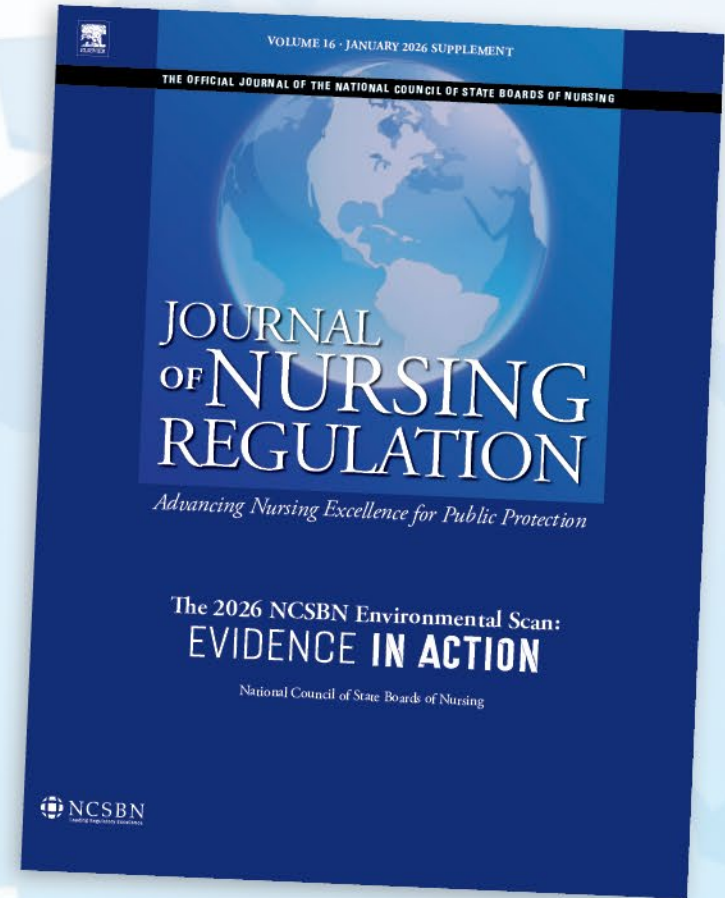
Discuss and provide answers to:

- 1 or 2 Evidence in Action Discussion Questions
- 1 General Discussion Question

Write your answers on the papers provided, or type them into this Qualtrics Survey:



<https://bit.ly/2026scan>



Read the scan online at:
ncsbn.org/2026scan

Thank You.
Any questions?

