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Tony Evers, Governor
Dan Hereth, Secretary

VIRTUAL/TELECONFERENCE
BOARD OF NURSING
Virtual, 4822 Madison Yards Way, Madison
Contact: Brad Wojciechowski (608) 266-2112
July 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 (1-4)

B. Approval of Minutes of June 11, 2026 (5-10)

C. Introductions, Announcements and Recognition

D. Reminders: Conflicts of Interests, Scheduling Concerns

E. Administrative Matters – Discussion and Consideration
1. Department, Staff and Board Updates
2. Appointment of Liaisons and Alternates
3. Board Members – Term Expiration Dates
   a. Anderson, John G.– 7/1/2029
   b. Brzozowski, Sarah L. – 7/1/2027
   c. DeGroot, Tina M. – 7/1/2030
   b. Kane, Amanda K. – 7/1/2027
   c. Malak, Jennifer L. – 7/1/2026
   d. McNally, Patrick J. – 7/1/2026
   e. Reinbold, Craig – 7/1/2027
   f. Saldivar Frias, Christian – 7/1/2023

F. Education and Examination Matters – Discussion and Consideration (11-40)
1. Herzing Madison ADN Closed Program Assessment and Instructional Plan Presentation **(11-12)**
2. Mount Mary University – NCLEX Score Assessment and Improvement Plan **(13-27)**
3. Lawrence University – Approval to Plan Presentation **(28-37)**
4. Herzing Brookfield – Assessment and Institutional Plan **(38-40)**

G. Administrative Rule Matters – Discussion and Consideration (41-43)
1. Pending and Possible Rulemaking Projects

H. Speaking Engagements, Travel, or Public Relation Requests, and Reports – Discussion and Consideration (44)

1. Travel Request: Leadership & Public Policy Conference, Oct. 7-9, 2026 – Philadelphia, PA

I. Interdisciplinary Advisory Committee – Discussion and Consideration (45)

1. Ketamine Guidance Document Review

J. Legislative and Policy Matters – Discussion and Consideration

K. Credentialing Matters – Discussion and Consideration

L. Newsletter Matters – Discussion and Consideration

M. Nurse Licensure Compact (NLC) Update – Discussion and Consideration

N. Liaison Reports – Discussion and Consideration

O. 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

P. 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.).

Q. Credentialing Matters

1. **Application Review**
   a. C.M. – Initial Application (IA-452826) **(46-59)**

R. Deliberation on Division of Legal Services and Compliance Matters

1. Proposed Stipulations, Final Decisions, and Orders

a. 23 NUR 527 and 24 NUR 081 – Vanessa J. Gravedoni **(60-67)**
b. 23 NUR 831 – Jasmine A. Banks **(68-74)**
c. 24 NUR 0186 – Patricia Frisella **(75-81)**
d. 24 NUR 0515, 25 NUR 0337 and 25 NUR 0871 – Stephenie J. Nerat **(82-91)**
e. 24 NUR 0813 – April N. Willett **(92-100)**
f. 25 NUR 0403 – Destiny L. Carter **(101-107)**

2. Case Closings

a. 24 NUR 0472 – E.M. **(108-111)**
b. 25 NUR 0262 – T.T.L. **(112-115)**
c. 25 NUR 0483 – S.M.K. **(116-122)**
d. 25 NUR 0581 – A.E.C. **(123-126)**
e. 25 NUR 0595 – E.J.M. **(127-130)**
f. 26 NUR 0210 – A.M.R. **(131-134)**
g. 26 NUR 0247 – N.C.B. **(135-141)**
h. 26 NUR 0283 – K.M.S. **(142-144)**

S. Monitoring

1. Monitor Heller
   a. Erica Sarver – Board Review of Order **(145-174)**

T. 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

U. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

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

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

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

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

ADJOURNMENT

NEXT MEETING: SEPTEMBER 10, 2026

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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:\\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
JUNE 11, 2026

PRESENT: John Anderson, Sarah Brzozowski, Tina DeGroot, Amanda Kane, Jennifer Malak, Patrick McNally

ABSENT: Craig Reinbold, Christian Saldivar Frias

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

CALL TO ORDER

Jennifer Malak, Chairperson, called the meeting to order at 9:35 a.m. A quorum was confirmed with six (6) members present.

ADOPTION OF THE AGENDA

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

APPROVAL OF MINUTES MAY 14, 2026

MOTION: Amanda Kane moved, seconded by Patrick McNally, to approve the Minutes of May 14, 2026, as published. Motion carried unanimously.

ADMINISTRATIVE MATTERS

Appointment of Liaisons and Alternates

LIAISON APPOINTMENTS	
Credentialing Liaison	Amanda Kane, Jennifer Malak *Alternate:* Patrick McNally
Monitoring Liaison	John Anderson *Alternate:* Sarah Brzozowski
Professional Assistance Procedure (PAP) Liaison	John Anderson *Alternate:* Sarah Brzozowski
Legislative Liaison	John Anderson, *Alternate:* Patrick McNally
Newsletter Liaison	Jennifer Malak

	Alternate: Sarah Brzozowski
Communication Liaison	Jennifer Malak
Education and Examination Liaison	Tina DeGroot *Alternate:* Amanda Kane
Controlled Substances Board Liaison as per Wis. Stats. §15.405(5g)	Amanda Kane *Alternate:* Tina DeGroot (Primary)
Wisconsin Coalition for Prescription Drug Abuse Reduction Liaison	Amanda Kane
Interdisciplinary Advisory Council Liaison	Tina DeGroot *Alternate:* Amanda Kane
Travel Authorization Liaison	Jennifer Malak (Chair) *Alternate:* Amanda Kane
COMMITTEE MEMBER APPOINTMENTS	
Rules Committee	Amanda Kane, Jennifer Malak, Patrick McNally, Tina DeGroot
BOARD APPOINTMENT TO THE INTERSTATE NURSE LICENSURE COMPACT COMMISSION	
Administrator of the Nurse Licensure Compact	Jennifer Malak *Alternate:* Patrick McNally

SCREENING PANEL APPOINTMENTS	
Alternates	Jennifer Malak, Patrick McNally
Screening Panel Rotation	
January – March (2025 & 2026)	Jennifer Malak, Craig Reinbold
April – June	John Anderson, Sarah Brzozowski
July – September	Patrick McNally, Tina DeGroot

October – December	Amanda Kane, Sarah Brzozowski

EDUCATION AND EXAMINATION MATTERS – DISCUSSION AND CONSIDERATION

Lac Courte Oreilles Ojibwe University Assessment & Institutional Plan

MOTION: John Anderson moved, seconded by Patrick McNally, to accept the NCLEX Pass Rate improvement plan of Lac Courte Oreilles Ojibwe University. Motion carried unanimously.

MOTION: Jennifer Malak moved, seconded by John Anderson, to acknowledge and thank Dana Jorczak and Cariann Dudley from Lac Courte Oreilles Ojibwe University for their appearance before the Board, and for submission of their plan. Motion carried unanimously.

ADMINISTRATIVE RULE MATTERS

Emergency Rule Draft: N 1 to 8, relating to APRN's and Comprehensive Review

MOTION: Amanda Kane moved, seconded by Patrick McNally, to delegate authority to the Chairperson or, in the absence of the Chairperson, the Vice Chairperson to approve the revised emergency rule drafting for N 1 to 8, relating to Advanced Practice Registered Nurses and comprehensive review, for emergency rule submission to the Governor, and publication in an official newspaper. 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)). Jennifer Malak, Chairperson, read the language of the motion. The vote of each member was ascertained by voice vote. Roll Call Vote: John Anderson-yes; Sarah Brzozowski-yes; Tina DeGroot-yes; Amanda Kane -yes; Jennifer Malak-yes; and Patrick McNally-yes. Motion carried unanimously.

The Board convened into Closed Session at 11:04 a.m.

CREDENTIALING MATTERS

D.M.H. – Renewal Application (IA-905229)

MOTION: Jennifer Malak moved, seconded by John Anderson, to deny the application (IA-905229) for Renewal. **Reason for Denial**: s. 441.07(1g)(b) and N 7.03(2), s 440.08(4), N 7.03(1)(h). Motion carried unanimously.

R.H. – Renewal Application (IA-875247)

MOTION: Amanda Kane moved, seconded by John Anderson, to deny the application (IA-875247) for Renewal. **Reason for Denial**: s. 441.07(1g)(b), N 7.03(2), and s 440.08(4). Motion carried unanimously.

DELIBERATION ON DIVISION OF LEGAL SERVICES AND COMPLIANCE MATTERS

Administrative Warnings

25 NUR 0885 – M.K.G.

MOTION: John Anderson moved, seconded by Patrick McNally, to send Administrative Warning in the matter of M.K.G., DLSC Case Number 25 NUR 0885 back to DLSC for further proceedings. Motion carried unanimously.

MOTION: Amanda Kane moved, seconded by Patrick McNally, to issue an Administrative Warning in the following DLSC Cases:
26 NUR 0255 – K.D.T.
26 NUR 0264 – T.J.K.
Motion carried unanimously.

Proposed Stipulations and Final Decisions and Orders

23 NUR 411 – Troy D. Shawn

MOTION: Amanda Kane moved, seconded by Jennifer Malak, to adopt Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Troy D. Shawn, DLSC Case Number 23 NUR 411. Motion carried unanimously.

23 NUR 859 – Roberta L. Ray

MOTION: Amanda Kane moved, seconded by Patrick McNally, to adopt Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Roberta L. Ray, DLSC Case Number 23 NUR 859. Motion carried unanimously.

24 NUR 0318 – Roberta L. Janovetz

MOTION: John Anderson moved, seconded by Patrick McNally, to adopt Findings of Fact, Conclusions of Law and Order in the matter of disciplinary

proceedings against Roberta L. Janovetz, DLSC Case Number 24 NUR 0318. Motion carried unanimously.

24 NUR 0416 and 25 NUR 0022 – Sharesea L. Busser

MOTION: Jennifer Malak moved, seconded by Sarah Brzozowski, to adopt Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Sharesea L. Busser, DLSC Case Number 24 NUR 0416 and 25 NUR 0022. Motion carried unanimously.

25 NUR 0506 – Amanda A. Skartvedt

MOTION: Amanda Kane moved, seconded by John Anderson, to adopt Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Amanda A. Skartvedt, DLSC Case Number 25 NUR 0506. Motion carried unanimously.

26 NUR 0114 – Morgan R. Hamlin

MOTION: Patrick McNally moved, seconded by Amanda Kane, to adopt Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Morgan R. Hamlin, DLSC Case Number 26 NUR 0114. Motion carried unanimously.

Case Closings

25 NUR 0399 – S.M.M. – Insufficient Evidence

MOTION: Sarah Brzozowski moved, seconded by Jennifer Malak, to close DLSC Case Number 25 NUR 0399, against S.M.M., for Insufficient Evidence. Motion carried unanimously.

DELIBERATION ON PROPOSED FINAL DECISION AND ORDERS

Marina Driza – (DHA Case Number SPS-23-0038/DLSC Case Number 22 NUR 831)

MOTION: Patrick McNally moved, seconded by Amanda Kane, to adopt the Findings of Fact, Conclusions of Law, and Proposed Decision and Order, in the matter of disciplinary proceedings against Marina Driza, Respondent – DHA Case Number SPS-23-0038/DLSC Case Number 22 NUR 831. Motion carried unanimously.

RECONVENE TO OPEN SESSION

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

The Board reconvened into Open Session at 12:30 p.m.

VOTING ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION

MOTION: Amanda Kane moved, seconded by John Anderson, 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: Patrick McNally moved, seconded by Sarah Brzozowski, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 12:31 p.m.

State of Wisconsin
Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Joan Gage, Program Manager OEE		**2) Date when request submitted:** 06/24/2026 **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: 07/09/2026	**5) Attachments:** ☒ Yes ☐ No	**6) How should the item be titled on the agenda page?** Herzing Madison ADN Closed Program Assessment and Instructional Plan Presentation	
7) Place Item in: ☒ Open Session ☐ Closed Session	**8) Is an appearance before the Board being scheduled?** *(If yes, please complete Appearance Request for Non-DSPS Staff)* ☐ Yes <Appearance Name(s)> ☒ 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:

In response to BON warning letter regarding Herzing Madison closed ADN program (US50405500) pass rates in 2025, Ms. Schaetzka will present their assessment and instructional plan.

Melissa Schaetzka, DNP, MSN, RN, CNE, BC

Program Chair

Herzing University

www.herzing.edu

mschaetzka@herzing.edu

O: 608-395-3456

11) Authorization

Joan Gage	06/24/2026
Signature of person making this request	**Date**
Joan R. Gage	06/24/2026
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.

HERZING
UNIVERSITY

Herzing University – Madison Campus
5218 East Terrace Drive, Madison, WI 53718
P 608-373-5482 • F 608-249-8593 • Herzing.edu

June 17, 2026

Department of Safety and Professional Services
Education and Examinations Office
Hill Farms State Office Building
4822 Madison Yards Way
Madison, WI 53705

Dear Ms. Gage and Members of the Board of Nursing,

This letter is in response to the Board of Nursing warning letter and NCLEX pass rate report received via email on June 2, 2026.

The WI-Herzing College- ADN (US50405500) program was voluntarily closed on February 1, 2018. In 2025, two 2017 graduates from our closed program retested, and both were unsuccessful in their attempts to become licensed 8 years after graduation. The students had been previously contacted and were offered the opportunity to work with the university to prepare for the NCLEX examination. Neither student availed themselves of this opportunity. As such, the time between graduation and retesting without guided preparation was a contributing factor in the reported pass rate.

Herzing provides, and continues to provide, support for all graduates preparing to take or retake their NCLEX examinations. Support offered includes review courses, 1 on 1 review sessions with the campus NCLEX coach (who is the program chair at the Madison Campus), recorded review sessions, online review platforms for individual work between coaching sessions, and the ability to audit courses without charge. The support is individualized for the graduates' needs and is offered as the graduates complete their final semester or if the graduate must retake the NCLEX examination.

Herzing supports all graduates in their preparation to become nurses utilizing both current resources and any new resources which become available. Evidence of the success of our support may be found in our current BSN program (US50510300) NCLEX pass rates.

It is our request to present our plan at the July 9, 2026, Board of Nursing Meeting. Please reach out if you require additional information as we move forward. Thank you for your time and consideration.

Respectfully,

Melissa M. Schaetzka, DNP, RN, CNE, BC
Nursing Program Chair-Madison Campus

State of Wisconsin
Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Joan R. Gage		**2) Date when request submitted:** 6/26/26 **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: 7/9/26	**5) Attachments:** ☒ Yes ☐ No	**6) How should the item be titled on the agenda page?** Mount Mary University NCLEX Score Assessment and Improvement Plan	
7) Place Item in: ☒ Open Session ☐ Closed Session	**8) Is an appearance before the Board being scheduled?** *(If yes, please complete Appearance Request for Non-DSPS Staff)* ☐ Yes <Appearance Name(s)> ☒ 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: Presenters can be found in the body of the email and the report is attached. Thanks!			
11) **Authorization**			
<NAME>			<Date: M/D/YYYY>
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**

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Mount Mary University School of Nursing

Assessment of Contributing Factors and Institutional Plan for Improvement of NCLEX-RN Results

Submitted in Response to Wisconsin Administrative Code N 1.09(3)

Submitted to the Wisconsin State Board of Nursing

June 25, 2026

Prepared by

Kelly Cole, EdD Candidate, MSN, RN

Dean of Nursing

Presenters

Kelly Cole, EdD Candidate, MSN, RN

Dean of Nursing

Dakota Hechimovich, MSN, RN

Assistant Professor of Nursing

Jennifer Nowicki, MSN, RN

Program Chair, School of Nursing

Introduction

Mount Mary University School of Nursing (SON) respectfully submits this assessment and institutional improvement plan in response to Wisconsin Administrative Code N 1.09(3) regarding the NCLEX-RN first-time pass rate for the 2025 graduating cohort.

Although the School's 2025 first-time NCLEX-RN pass rate fell below the required 80% benchmark, ongoing monitoring demonstrates that the overall NCLEX-RN pass rate for the 2025 cohort has increased to 88% as graduates continue to successfully complete the licensure examination. While the Board's benchmark is based on first-time test takers, these results suggest that graduates possess the knowledge and clinical judgment necessary for licensure and that recent improvement efforts are having a positive impact.

The School conducted a comprehensive review of program data, student outcomes, standardized testing performance, curriculum alignment, and graduate preparation processes to identify factors contributing to the lower first-time NCLEX-RN pass rate and to develop targeted institutional improvement strategies. The institutional improvement strategies outlined in this report are intentionally designed to strengthen student learning and clinical judgment development throughout the curriculum while enhancing graduate preparation for the NCLEX-RN examination. The School of Nursing views this assessment as an opportunity to strengthen program quality, enhance student success, and further improve first-time NCLEX-RN outcomes through continuous quality improvement.

Assessment of Contributing Factors

In accordance with Wisconsin Administrative Code N 1.09(3), the School conducted a comprehensive assessment of program data, student outcomes, standardized testing performance,

curriculum alignment, and graduate preparation processes. This assessment identified several factors that contributed to the 2025 first-time NCLEX-RN pass rate and guided the development of the institutional improvement plan presented in this report.

1. Variability in Graduate NCLEX Preparation, Testing Timelines, and Post-Graduation Support

Through review of graduate outcomes and NCLEX-RN testing data, the School of Nursing identified variability in both graduates' preparation strategies and the timing of NCLEX-RN examination completion following graduation. Graduates tested across a wide range of timeframes, with several delaying examinations beyond the School's recommended testing window of 4–8 weeks after graduation. Review of outcome data and current literature suggests that delayed testing may negatively impact knowledge retention and clinical judgment readiness.

Program review also identified variation in graduates' preparation strategies, including differences in practice question completion, engagement with NCLEX preparation resources, and consistency of study plans. Although graduates historically received NCLEX preparation resources and faculty guidance, the School identified an opportunity to strengthen accountability, individualized coaching, and structured follow-up during the post-graduation period. Enhancing faculty engagement and monitoring between graduation and NCLEX testing is expected to promote timely examination completion, reinforce knowledge retention, and improve first-time NCLEX-RN success.

2. Transition to the Next Generation NCLEX (NGN)

The continued implementation of the Next Generation NCLEX requires students to demonstrate advanced clinical judgment and decision-making skills. Review of assessment data suggested the need for additional opportunities to strengthen clinical judgment testing strategies

and application of NGN-style questions throughout the curriculum and during NCLEX preparation.

3. Variability in NCLEX Practice Question Exposure

Student performance data indicated variation in the number of NCLEX-style questions completed prior to graduation. For example, students complete a required 20-question NCLEX preparation quiz for each chapter in NUR 430, representing one strategy used to increase exposure to NCLEX-style questions. However, review of program data identified opportunities to further expand cumulative NCLEX practice throughout the curriculum. Consistent exposure to high-quality NCLEX-style testing remains an area of continued emphasis.

4. Transition Between Standardized Assessment Products

The 2025 graduating cohort completed most of their medical-surgical coursework using Elsevier products and was introduced to Wolters Kluwer (WK) assessment products during their senior year. This transition resulted in limited time for students to fully acclimate the WK testing platform, question structure, and remediation processes. The transition resulted in reduced longitudinal exposure to WK's integrated remediation features, Clinical Judgment Evaluations, and Next Generation NCLEX-style testing opportunities that are now embedded throughout the curriculum. The School recognizes that consistency and prolonged exposure to standardized assessment products may influence students' testing confidence, clinical judgment development, and NCLEX readiness.

5. Faculty and Administrative Transition

The School experienced significant faculty and administrative transition during this period. These transitions highlighted opportunities to further standardize assessment practices,

exam development processes, NCLEX preparation strategies, and faculty mentoring structures. Since then, additional support and standardized processes have been implemented to promote consistency across courses and programs.

Institutional Improvement Plan

The School has implemented multiple interventions designed to improve first-time NCLEX-RN success rates. Unless otherwise indicated, the following interventions were implemented beginning Spring 2026 and will continue as part of the School's continuous quality improvement process.

Intervention 1: Individualized Faculty Coaching and NCLEX Success Planning

Beginning in Spring 2026, the School of Nursing implemented individualized faculty coaching for graduates preparing to take the NCLEX-RN examination. Prior to graduation, each student meets individually with faculty to review academic performance, standardized assessment results, and readiness indicators to develop a personalized NCLEX success plan. These meetings identify individual strengths, areas requiring additional focus, recommended study strategies, and an optimal testing timeline based on the student's level of preparedness.

Faculty continue to provide individualized guidance following graduation through scheduled check-ins to encourage adherence to each graduate's study plan, address barriers to testing, and promote accountability throughout the preparation process. This structured coaching model is intended to provide consistent support while improving graduates' confidence, organization, and readiness for licensure.

Expected Outcomes:

- Individualized NCLEX preparation plan completed for 100% of graduates.
- Improved graduate confidence and accountability during NCLEX preparation.
- Earlier identification of graduates requiring additional support.
- Increased first-time NCLEX-RN pass rates.

Intervention 2: Required NCLEX Preparation Course

Students complete a required two-day NCLEX review utilizing the Lippincott NCLEX RN ReView program. Instruction emphasizes clinical judgment, Next Generation NCLEX item types, prioritization, delegation, and repeated application of NCLEX-style questions through case studies and simulation. Individual performance is used to guide personalized study plans and remediation.

Key Components include:

- Clinical judgment development
- Next Generation NCLEX item types
- Test-taking strategies
- Prioritization and delegation
- NCLEX-RN readiness assessment

Expected Outcomes:

- Improved NCLEX readiness and increased first-time pass performance.

Intervention 3: Enhanced NCLEX Practice Through Sim-Script and Structured Assessment

To increase students' exposure to NCLEX-style questions and strengthen clinical judgment, the School of Nursing implemented the Sim-Script NCLEX preparation platform throughout the curriculum. Students complete structured practice questions, Next Generation NCLEX case studies, and cumulative assessments that reinforce content across all nursing specialty areas. Faculty monitor student performance data to identify content trends and evaluate overall progression throughout the program. This intervention emphasizes repeated exposure to NCLEX-style testing, promotes content mastery through cumulative practice, and strengthens students' familiarity with clinical judgment and Next Generation NCLEX question formats.

Expected Outcomes:

- Increased completion of NCLEX-style practice questions throughout the curriculum.
- Improved performance on cumulative assessments and standardized testing.
- Increased clinical judgment and content retention.
- Improved first-time NCLEX-RN pass rates.

Intervention 4: Enhanced Clinical Judgment Evaluation (CJE) Integration

Faculty completed professional development training through Wolters Kluwer on the development, administration, and remediation of Clinical Judgment Evaluations (CJEs). Following training, CJEs were intentionally integrated throughout the curriculum, including:

- Nutrition
- Medical-Surgical Nursing
- Pathophysiology/Pharmacology
- Health Assessment
- Mental Health Nursing

Faculty implemented structured remediation plans based on student performance data and CJE scores.

Timeline: Implemented during the 2025-2026 academic year and ongoing.

Expected Outcome:

- Improved clinical judgment performance
- Increased familiarity with Next Generation NCLEX item types
- Earlier identification of at-risk students
- Enhanced remediation and readiness for NCLEX-RN success

Intervention 5: Curriculum Enhancements and Course Redesign

Following analysis of student performance data and Mountain Measurement reports, the School implemented several curricular changes designed to strengthen knowledge acquisition and improve content mastery.

Initiatives include:

- Creation of a dedicated Nutrition course to strengthen foundational knowledge supporting medication administration, chronic disease management, and clinical decision-making.
- Revision of the four-year plan to separate Medical-Surgical Nursing from Mental Health and Obstetric/Pediatric content to allow greater depth of content coverage and reduced cognitive overload.
- Increased integration of content-specific remediation strategies across courses.

Expected Outcome:

- Improved foundational knowledge and content mastery

- Enhanced clinical reasoning and NCLEX readiness

Intervention 6: Data-Driven Simulation Enhancement

Review of Mountain Measurement assessment data identified lower performance in respiratory concepts and oxygenation-related content. In response, the School expanded simulation experiences focused on respiratory care and oxygenation.

Initiatives include:

- Addition of an oxygenation-focused simulation experience within the first-year Foundations Nursing course.
- Development of respiratory-specific simulations in advanced medical-surgical courses.
- Increased number of simulation experiences beyond accreditation requirements.
- Comprehensive overhaul of the simulation program to include more rigorous, NCLEX-focused clinical judgment activities.
- Implementation of standardized simulation debriefing and remediation processes.

Expected Outcome:

- Improved clinical judgment related to respiratory and oxygenation concepts
- Increased application of clinical decision-making skills
- Enhanced Next Generation NCLEX readiness

Intervention 7: Investment in Simulation Infrastructure

The School made substantial investments to strengthen simulation-based learning and NCLEX preparation.

Initiatives include:

- Hiring a dedicated Simulation Operations Specialist to support simulation design, implementation, quality improvement, and faculty development.
- Acquisition and implementation of Laerdal Scenario Cloud simulation scenarios and the Laerdal Mama Anne high-fidelity manikin to provide standardized, evidence-based simulation experiences aligned with NCLEX-RN Mountain Measurement data.
- Expansion of simulation opportunities beyond program requirements to increase student exposure to high-acuity, NCLEX-focused clinical scenarios.

Expected Outcome:

- Increased exposure to NGN clinical judgment scenarios.
- Increased student performance on respiratory and oxygenation-related standardized assessments.
- Improved clinical judgment measurement scores.
- Improved performance in the Physiological Integrity Client Needs category

Intervention 8: Faculty Development and Assessment Excellence

Recognizing the critical role of faculty in student success, the School implemented extensive faculty development initiatives. Faculty also participated in Wisconsin League of Nursing NCLEX preparation webinars and Sigma Theta Tau International educational programs focused on Next Generation NCLEX implementation and best practices.

Initiatives include:

- Faculty education sessions on exam construction and item analysis.
- Standardized processes for reviewing examination performance data.

- Mentoring and coaching of newer faculty in examination development and NCLEX blueprint alignment.
- Increased structure and guidance related to curriculum delivery, assessment design, and remediation expectations.

Expected Outcomes:

- Improved quality and rigor of examinations
- Increased alignment with NCLEX-RN test plans and Next Generation NCLEX standards
- Greater consistency across courses and faculty

Intervention 9: Graduate NCLEX Accountability and Progress Monitoring

Beginning in Spring 2026, the School of Nursing established a structured graduate accountability process to monitor NCLEX preparation following graduation. Faculty track graduate engagement with required NCLEX preparation resources, monitor completion of assigned preparation activities, and maintain regular communication until each graduate successfully completes the licensure examination.

Graduates who demonstrate limited engagement with preparation activities or delay examination scheduling beyond the recommended testing window receive additional faculty outreach and individualized follow-up to address barriers, reinforce expectations, and support timely examination completion. This initiative promotes accountability while ensuring graduates remain actively engaged in NCLEX preparation through licensure.

Expected Outcomes:

- ≥90% of graduates actively engaged in assigned NCLEX preparation activities.

- Improved completion of NCLEX preparation prior to examination.
- Increased percentage of graduates testing within the recommended timeframe.
- Increased first-time NCLEX-RN pass rates.

Intervention 10: Revisions to Transitions Course (NCLEX Preparation)

The Transitions with NCLEX Preparation course was redesigned to include mandatory weekly subject-specific assessments, cumulative NCLEX practice, and structured faculty debriefings. These revisions increase exposure to NCLEX-style questions across all content areas, reinforce cumulative knowledge, and provide earlier identification of learning gaps while strengthening clinical judgment and testing confidence.

Expected Outcomes:

- Increased first-time NCLEX-RN pass rates.
- Increased student confidence and self-efficacy related to NCLEX preparation and readiness.
- Enhanced retention of previously learned nursing concepts through repeated exposure and cumulative review.
- Earlier identification and remediation of knowledge gaps

Measurable Outcomes

The School will monitor the following outcomes:

Outcome Measure	**Target**
NCLEX-RN First-Time Pass Rate	≥ 80%

Graduate participation in required NCLEX preparation activities	≥90%
Graduate Testing Within Recommended Timeframe Following Graduation	≥ 90%
Student participation in simulation experiences	Maintain 100% participation
Student performance on Clinical Judgment Evaluations	Improve average scores by 5% annually
Faculty completion of exam analysis and CJE training	Maintain at 100%
Number of NCLEX practice questions completed	≥ 2,000 NCLEX practice questions completed per student
Course examination alignment with NCLEX blueprint standards	100% review annually

Timeline

Activity	**Timeline**
Dedicated NCLEX Faculty Support	Implemented Spring 2026
Required NCLEX Virtual Preparation Course	Revised Spring 2026
Sim-Script Access for Graduates	Implemented Spring 2026
Curriculum and Assessment Review	Ongoing Each Semester
Outcome Monitoring and Reporting	Quarterly
Annual NCLEX Outcome Review	Annually
Graduate NCLEX Accountability Monitoring	Spring 2026 and Ongoing
Faculty Development and Assessment Training	Ongoing Annually

Conclusion

Mount Mary University School of Nursing is committed to continuous quality improvement and graduate success. The School has completed a comprehensive assessment of factors contributing to the 2025 NCLEX-RN first-time pass rate and has implemented targeted interventions designed to improve graduate readiness, strengthen clinical judgment, increase accountability during NCLEX preparation, and improve first-time licensure outcomes.

Preliminary outcomes are encouraging, as the 2025 cohort currently demonstrates an overall NCLEX-RN pass rate of 88%. The School will monitor NCLEX outcomes, standardized assessment data, graduate preparation metrics, and intervention effectiveness on a quarterly basis to evaluate progress and guide ongoing quality improvement. The School of Nursing will report progress to the Wisconsin Board of Nursing as requested and will use quarterly outcome data to evaluate intervention effectiveness and implement additional improvements as indicated.

State of Wisconsin
Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Joan Gage, DSPS-OEE		**2) Date when request submitted:** 06/29/2026 **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: BON			
4) Meeting Date: Date: 7/09/26	**5) Attachments:** X Yes ☐ No	**6) How should the item be titled on the agenda page?** Lawrence University – Approval to Plan presentation	
7) Place Item in: X Open Session ☐ Closed Session	**8) Is an appearance before the Board being scheduled?** *(If yes, please complete Appearance Request for Non-DSPS Staff)* ☐ Yes <Appearance Name(s)> X 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:

Lawrence University – Approval to Plan presentation

Beth A. Zinsli

Associate Provost

Lawrence University, Appleton WI

11) Authorization

Joan Gage	**Date: 6/30/26**
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**

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.

3025-OEE, Application for Authorization To Plan A School of Nursing

4/6/2026 3:24:03 PM

Introduction

Wisconsin Department of Safety and Professional Services

Wis. Admin. Code sec. N 1.03 requires an institution planning to establish and conduct a school of nursing for professional nursing or practical nursing to submit an application including all of the following to the Board:

1. Name and address of controlling institution and evidence of accreditation status of controlling institution.
2. 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.
3. Evidence of the availability of sufficient clinical facilities and resources.
4. Plans to recruit and employ a qualified educational administrator and qualified faculty.
5. Proposed timeline for planning and implementing the school and intended date of entry of the first class.

The Board shall make a decision on the application within two months of receipt of the completed application and will notify the controlling institution of the action taken on the application.

(Rev. 02/11/2026)

School Information

Name of School: Lawrence University of Wisconsin

Address

Address Line 1: 711 E. Boldt Way

Address Line 2:

City: Appleton

State: Wisconsin

Zip: 54911

Email Address: assoc_dean_fac@lawrence.edu

Telephone Number: (920) 832-6528

Nursing Program(s) (ADN, BSN, Other): No Nursing Programs to date; Applying to plan a BSN program.

Application Materials

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: 2. Lawrence Uni Statement of intent to establish a school of nursing April 2026.pdf

Evidence of the availability of sufficient clinical facilities and resources: 3. Lawrence Uni Evidence of sufficient clinical facilities resources April 2026.pdf

Plans to recruit and employ a qualified educational administrator and qualified faculty: 4. Lawrence Uni Plans to recruit employ qualified administrator and faculty April 2026.pdf

Proposed timeline for planning and implementing the school and intended date of entry of the first class: 5. Lawrence Uni Proposed timeline April 2026.pdf

Signature

Name of School Representative Submitting Proposal: Beth A. Zinsli

Title: Associate Provost

By affixing your name below, you attest that the information submitted is accurate to the best of your ability.

Signature: Beth A. Zinsli

Date

Date: 4/6/2026

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.

Lawrence University of Wisconsin submits its intent to establish a Nursing Program to address regional workforce needs and expand access to high-quality professional nursing education.

Programs to Be Offered: Lawrence University will develop and offer a pre-licensure Bachelor of Science in Nursing (BSN) program leading to NCLEX-RN eligibility.

Primary Method of Instruction: The program will be primarily offered in a face-to-face format for didactic and clinical educational experiences. The use of online modules and simulation will also be employed as appropriate to meet the program learning outcomes and goals of the program.

Institutional Accreditation: Lawrence University is accredited by the Higher Learning Commission (HLC), a regional accrediting body recognized by the U.S. Department of Education. The institution remains in good standing and participates in the HLC Open Pathway accreditation cycle.

Submitted on behalf of:
Lawrence University
711 E. Boldt Way
Appleton, WI 54911

Submitted by:
Beth Zinsli, Associate Provost
April 6, 2026

Evidence of the availability of sufficient clinical facilities and resources.

Lawrence University is in discussion with a regional multi-site health care organization that offers a variety of inpatient and community health care experiences in and around Northeast Wisconsin.

The regional health care organization serves approximately the following numbers of patients each year in these categories:

- Inpatients admissions: 32,000
- ED visits: 128,000
- Babies Delivered: 3100
- Outpatient Primary Care visits: 560,000
- Outpatient Specialty Care visits: 255,000

The regional health care organization also has Clinical Services in the following areas:

- Primary Care
- Cancer & Blood Disorders
- Cardiovascular
- Orthopedics
- Sports Medicine
- Surgery
- Pain Management
- Physical Medicine & Rehabilitation
- Behavioral Health
- Neurology & Stroke
- Pediatrics
- Therapy Services
- Women's Health
- Palliative Care

The regional health care organization is strongly supportive and eager to assist Lawrence University in establishing their nursing program because of the need for baccalaureate-prepared nurses in the Northeast Wisconsin region, to which both organizations are home. Additionally, preliminary assessments confirm the availability of acute care hospitals, community hospitals, long-term care facilities, community health clinics, schools, and other clinical settings near or within a reasonable distance of the university. No clinical contracts have been signed, in compliance with N 1.03(1)(c) of the Wisconsin Board of Nursing Rules and Regulations.

Submitted on behalf of:
Lawrence University
711 E. Boldt Way
Appleton, WI 54911

Submitted by:
Beth Zinsli, Associate Provost
April 6, 2026

Plans to recruit and employ a qualified educational administrator and qualified faculty.

Upon approval to plan a nursing program by the Wisconsin Board of Nursing, Lawrence University will undertake the recruitment and hiring of a qualified, doctoral-prepared nurse educator to serve as Director of Nursing. Faculty recruitment will include MSN- or doctoral-prepared educators and clinical faculty with appropriate practice experience and in full compliance with the Rules and Regulations of the Wisconsin Board of Nursing. Please see Recruitment and Hiring Plan and Job Description: Founding Director of Nursing – BSN Program below.

Recruitment and Hiring Plan: Director of Nursing

Lawrence University – Bachelor of Science in Nursing (BSN) Program

I. Recruitment and Hiring Plan

Purpose of the Hire: The Director of Nursing (DoN) will provide academic, regulatory, and operational leadership for Lawrence University's new BSN program, ensuring readiness for Board of Nursing approval, accreditation, and long-term sustainability.

1. Governance and Search Structure
    - Search authorized by the Provost / Academic Affairs
    - Reports to the Dean of Academic Programs
    - Search committee includes academic leadership, faculty, clinical partner, student affairs, DEI representative, and HR
2. Candidate Profile
    - Graduate degree in Nursing (DNP or PhD required)
    - Active RN license
    - Minimum of five years of nursing education leadership experience
    - Experience with Board of Nursing approval and accreditation readiness
3. Recruitment Strategy
    - National postings on AACN, HigherEdJobs, Chronicle of Higher Education
    - Targeted outreach to associate deans and program directors
    - Equity-focused recruitment through diverse professional networks
4. Selection Process and Timeline
    - Weeks 1–4: Application review and screening
    - Weeks 5–7: First-round virtual interviews
    - Weeks 8–11: Campus interviews and leadership presentation
    - Weeks 12–16: Final selection and offer
5. Onboarding and First-Year Priorities
    - First 90 days: Board of Nursing submission, faculty hiring, curriculum finalization
    - Year one: Program approval, accreditation readiness, first cohort launch

II. Job Description: Founding Director of Nursing – BSN Program

Position Summary: The Director of Nursing provides academic and administrative leadership for Lawrence University's BSN program, overseeing curriculum, accreditation, faculty leadership, and student success.

Essential Responsibilities

- Establish and lead the development, implementation, and evaluation of a progressive and rigorous baccalaureate-level nursing program.
- Provide leadership for curriculum development and assessment
- Serve as liaison to the State Board of Nursing
- Lead accreditation readiness (CCNE or ACEN)
- Recruit, develop, and evaluate nursing faculty
- Establish and maintain clinical partnerships
- Promote diversity, equity, inclusion, and student success
- Manage program budget and resources
- Make recommendations to university leadership for program and faculty resources

Required Qualifications

- Doctoral degree in Nursing or related discipline
- Active, unencumbered RN license in the State of Wisconsin or eligibility for same
- Minimum five years of nursing education leadership experience

Preferred Qualifications

- Experience leading a BSN program
- Accreditation experience

Appointment

- Full-time, 12-month administrative appointment
- Competitive salary and benefits

Submitted on behalf of:
Lawrence University
711 E. Boldt Way
Appleton, WI 54911

Submitted by:
Beth Zinsli, Associate Provost
April 6, 2026

Proposed timeline for planning and implementing the school and intended date of entry of the first class.

Planning Phase (Year 1):
- Q1-Q2: Recruit Director of Nursing; finalize curriculum; initiate CCNE candidacy.
- Q2-Q4: Renovate simulation lab; hire faculty.

Implementation Phase (Year 2):
- Q1: Submit program approval application to the Wisconsin Board of Nursing.
- Q3: Student recruitment.
- Q4: Admission finalization.

Intended First Cohort: Fall term 2027

Integrated 18-Month Timeline for BSN Program Approval & Launch
(Aligned to Months 1–18)

Month 1 — Program Blueprint Initiation
- Apply to BON to *Plan a Nursing Program*
- Finalize program concept paper + financial model.
- Launch discovery phase: stakeholder interviews with institution + statewide medical partner.
- Define mission, goals, program outcomes aligned with AACN Essentials (2021) + Wisconsin BON expectations.
- Initiate faculty governance pathways.
- Begin curricular framework + simulation planning.
- Deliverable: Mission/goals/outcomes package.

Month 2 — Governance Submission + Leadership Planning
- Submit BS/BSN proposals into faculty governance.
- Begin consultation with HLC liaison.
- Launch Program Director search (job description + search consulting plan drafted).
- Begin external advisory group engagement.
- Continue curriculum framework + initial clinical/simulation model concept.
- Begin faculty hiring plan outline (roles, phasing).

Month 3 — Approvals in Motion + HLC Drafting
- Advance faculty governance approvals.
- Draft HLC Substantive Change materials.
- Draft curriculum + assessment map.
- Outline clinical/practicum/simulation definitions at high level.
- Deliverable: High-level curriculum framework + sequencing.
- Receive BON approval to plan a program.

Month 4 — Board Approval + Deep Curriculum Build
- Board of Trustees approval for program + budget.
- Finalize HLC application materials.
- Program Director finalist interviews.
- Begin drafting clinical MOUs.

- Begin course-level outcomes development.
- Begin curriculum mapping and progression model refinement.

Month 5 — HLC Submission + Resource Planning

- Submit HLC Substantive Change application(s).
- Offer Program Director role.
- Advance simulation/resource planning (space, equipment concepts).
- Align program dossier with BON requirements.

Month 6 — Program Director Begins + BON Application Development

- Program Director begins duties.
- Begin documentation of clinical/practicum/simulation policies.
- Develop BSN marketing/awareness efforts.
- Prepare catalog materials.

Month 7 — BON Pre-Submission + Continued HLC Work

- BON pre-submission consultation, if needed.
- Submit BON Initial/Provisional Approval application to Admit Students.
- Respond to HLC information requests.

Month 8 — BON Reviewer Responses + Simulation Procurement

- Respond to BON reviewer questions, if any.
- Place simulation equipment orders.
- Continue development of simulation integration framework + use policy.

Month 9 — Final Narrative Adjustments + Faculty JD Drafting

- HLC final narrative adjustments.
- Prepare for BON Board application and presentation
- Draft faculty job descriptions.
- Begin BON narrative and exhibit editing cycles.
- Continue curriculum mapping + readiness checks for regulatory alignment.

Month 10 — BON Meeting + Handbook Finalization

- Target BON Board meeting for approval to admit students.
- Manage applicant communications and be ready to admit students as soon as BON approval is granted.
- Finalize program handbook drafts.
- Finalize simulation integration + experiential policies.
- Advance clinical agreements with partners once BON approval is granted.

Month 11 — HLC Approval Window Opens + Faculty Searches Begin

- HLC approval window opens.
- Open faculty searches.
- Finalize syllabi + simulation scenarios.
- Continue BON narrative revisions if needed.

Month 12 — Expected BON Approval + Recruitment Push

- Anticipated BON approval (if not received earlier).
- Hold faculty interviews.
- Increase recruitment and marketing efforts.
- Apply to become a member of AACN (Necessary before CCNE planning can begin).

Month 13 — Expected HLC Approval + Offers Issued

- Expected HLC approval.
- Begin issuing admission decisions.
- Extend faculty offers for core positions.
- Continue accreditation readiness analysis.

Month 14 — Catalog Publication + Assessment Plan

- Update marketing and academic materials upon receipt of approvals.
- Publish catalog pages.
- Complete/refine program assessment plan.
- Prepare recruitment FAQ, differentiators, and program story inputs.

Month 15 — Faculty Hiring Completion + Equipment Installation

- Complete faculty hiring.
- Receive and install simulation equipment.
- Finalize student onboarding logistics.
- Continue accreditation “readiness binder” development.

Month 16 — Faculty Onboarding + Compliance Build-Out

- Faculty onboarding + orientation to the university and the program.
- Implement compliance tracking systems.
- Finalize clinical evaluation tools.

Month 17 — Simulation Dry Runs + Orientation Prep

- Conduct simulation dry runs.
- Prepare student orientation schedule.
- Confirm all compliance requirements.

Month 18 — Program Launch

- Student orientation.
- Regulatory notifications as required.
- Start of Fall Term BSN program.

Submitted on behalf of:
Lawrence University
711 E. Boldt Way
Appleton, WI 54911

Submitted by:
Beth Zinsli, Associate Provost
April 6, 2026

State of Wisconsin
Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Joan Gage, Program Manager OEE		**2) Date when request submitted:** 6/30/26 **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: 7/9/26	**5) Attachments:** ☒ Yes ☐ No	**6) How should the item be titled on the agenda page?** Herzing-Brookfield Assessment and Institutional Plan (Ashley feel free fix this to match the others)	
7) Place Item in: ☐ Open Session ☐ Closed Session	**8) Is an appearance before the Board being scheduled?** *(If yes, please complete Appearance Request for Non-DSPS Staff)* ☐ Yes <Appearance Name(s)> ☐ 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:

Herzing-Brookfield Assessment and Institutional Plan to improve NCLEX exam pass rates to meet the BON requirement of 80%.

Prof. Megan L. Tinsley, MSN, RN
Herzing University- Brookfield

Nursing Program Chair
mtinsley@herzing.edu

Ashley – Please send Prof. Tinsley a confirmation of presentation and meeting contact info. Thank you!

11) Authorization

Joan Gage	6/30/2026
Signature of person making this request	**Date**
Joan R. Gage	6/30/2026
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.

HERZING UNIVERSITY

Herzing University – Brookfield Campus
15895 West Bluemound Road, Brookfield, WI 53005
P 262-725-0321 • F 262-797-9090 • Herzing.edu

June 30, 2026

Department of Safety and Professional Services
Education and Examinations Office
Hill Farms State Office Building
4822 Madison Yards Way
Madison, WI 53705

RE: Response to 2025 NCLEX-PN® Pass Rate for Herzing University – Brookfield Practical Nursing (PN) Program (US50110400)

Dear Ms. Gage and Members of the Board of Nursing,

This letter is in response to the Board of Nursing letter regarding the 2025 NCLEX-PN® pass rate for the Herzing University – Brookfield Practical Nursing (PN) Program, program code US50110400.

Herzing University – Brookfield has conducted a comprehensive review of NCLEX-PN® performance outcomes to identify contributing factors and implement targeted improvement strategies. The University takes this outcome seriously and is fully committed to meeting the Board's standards in 2026. This report is submitted in accordance with the Board's request and addresses the required elements.

Contributing Factors

The program maintains an active and continuously updated database of all graduates and their NCLEX performance. NCLEX outcomes are monitored in real time, allowing for proactive identification of graduates who have not yet tested or who require additional support. In 2025, six 2023 graduates were unsuccessful at their attempt of the NCLEX-PN® exam. Despite various attempts to contact these students to offer resources and support, none of the six students accepted assistance or communicated with the Brookfield Campus.

Current 2026 internal tracking indicates that 52 of 64 LPN testers (81.25%) have passed the NCLEX-PN® to date. The program remains committed to improving first-time pass rates through ongoing review of NCLEX outcomes, targeted preparation strategies, and early identification of graduates who may benefit from additional support prior to testing.

Plan for Improvement and Ongoing Compliance

The following interventions have been implemented or are actively underway to increase first-time pass rate and all-time pass rate performance to bring the program into full compliance with Board standards.

Enhanced Monitoring and Graduate Tracking

The program maintains an active and continuously updated tracker of LPN graduates and NCLEX-PN® performance. NCLEX outcomes, pending testers, anticipated test dates, unsuccessful attempts, readiness concerns, and graduate support needs are reviewed weekly by the Program Chair and NCLEX Lead Faculty. This weekly review allows the program to respond quickly to emerging concerns. All current and anticipated testers are monitored individually, and outreach is documented to ensure graduates preparing to test receive timely support.

Individualized Graduate Support
Since April 2025, the program has expanded one-on-one support for graduates, offering weekly individualized coaching sessions focused on test-taking strategies, content review, and performance improvement. Engagement is increased during peak testing periods to ensure consistent and timely support. Ongoing oversight is maintained through regular review of performance data by the Program Chair and NCLEX Coach. Weekly meetings to discuss at-risk students and their individual needs have been implemented. These reviews inform continuous adjustments to interventions, ensuring that support strategies remain responsive to student needs and aligned with improving NCLEX outcomes.

Early Identification and Intervention for At-Risk Students
The program has strengthened internal processes for identifying students at academic or NCLEX readiness risk earlier in the program. Faculty and program leadership review course performance, exam outcomes, standardized assessment results, remediation completion, and clinical judgment indicators to identify students requiring additional support. Students identified as at risk are provided with targeted intervention, which may include faculty conferences, content review, NCLEX-style practice questions, clinical judgment exercises, and documented remediation plans.

Standardized Remediation Expectations
The program is implementing consistent remediation expectations for students who perform below benchmark on course exams, standardized assessments, or clinical judgment activities. Remediation is designed to address individual learning needs and reinforce priority content areas related to NCLEX-PN® readiness. Remediation may include targeted content review, faculty-guided reflection, practice questions, review of rationales, clinical judgment activities, and follow-up with course faculty or the NCLEX Lead Faculty.

Ongoing Data Review and Program Accountability
NCLEX pass rates and tester status are reviewed weekly by the Program Chair and NCLEX Lead Faculty. This review includes current pass-rate data, graduates pending testing, anticipated test dates, readiness concerns, unsuccessful attempts, and follow-up support provided. Program leadership also reviews student readiness indicators, remediation completion, standardized assessment outcomes, and graduate testing progress to identify trends and adjust interventions as needed. Data trends are reviewed by program leadership and incorporated into the annual Systematic Plan of Evaluation.

Ongoing Curriculum Review
The program conducts continuous review of the nursing curriculum and completes an annual Systematic Plan of Evaluation. Findings are used to inform curriculum adjustments and student support strategies for each program cycle, ensuring alignment with current NCLEX-PN® test plans and evolving standards of nursing practice.

Herzing University – Brookfield remains committed to strengthening NCLEX-PN® performance through structured oversight, individualized support, and continuous monitoring to ensure all graduates are prepared for success. We respectfully request the opportunity to present this plan at the July 9, 2026, Board of Nursing meeting and are available to provide any additional information as needed.

Respectfully,

Megan Tinsley

Megan Tinsley, MSN, RN
Nursing Program Chair

State of Wisconsin
Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and title of person submitting the request:	2) Date when request submitted:
Sofia Anderson, Administrative Rules Coordinator	06/29/2026
	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:	5) Attachments:	6) How should the item be titled on the agenda page?
July 9, 2026	☒ **Yes** ☐ **No**	Administrative Rules Matters – Discussion and Consideration 1. Pending and Possible rulemaking projects.

7) Place Item in:	8) Is an appearance before the Board being scheduled? *(If yes, please complete **Appearance Request** for Non-DSPS Staff)*	9) Name of Case Advisor(s), if required:
☒ **Open Session** ☐ **Closed Session**	☐ **Yes** ☒ **No**	N/A

10) Describe the issue and action that should be addressed:

Attachments:

1. Nursing rule projects chart.

11) Authorization

SAnderson

06/29/2026

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**

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.

Revised 03/2021

Board of Nursing
Rule Projects (Updated 06/29/2026)

Emergency Rules

Clearinghouse Rule Number	Scope #	Scope Expiration	Rules Affected	Relating Clause	Synopsis	Stage of Rule Process	Next step
	064-25	03/22/2028	N 1	Faculty Accreditation Standards	Expand criteria regarding who can teach in a clinical setting to include BSNs.	Submitted to Chair and Vice-Chair for signature.	Submission to the Governor's Office for review.
	082-25	06/22/2028	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.	Submitted to the Governor's Office for review.	Publication in the official newspaper.

Permanent Rules

Clearinghouse Rule Number	Scope #	Scope Expiration	Rules Affected	Relating Clause	Synopsis	Stage of Rule Process	Next step
26-036	064-25	03/22/2028	N 1	Faculty Accreditation Standards	Expand criteria regarding who can teach in a clinical setting to include BSNs.	Submitted to Clearinghouse for review.	Public Hearing at the September 10 meeting.

Board of Nursing

Clearinghouse Rule Number	Scope #	Scope Expiration	Rules Affected	Relating Clause	Synopsis	Stage of Rule Process	Next step
	082-25	06/22/2028	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	Rules Affected	Relating Clause	Synopsis	Stage of Rule Process	Next step

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:** 6/29/2026 **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: 7/09/2026	**5) Attachments:** ☐ Yes ☒ 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: Leadership & Public Policy Conference, Oct. 7-9, 2026 – Philadelphia, PA	
7) Place Item in: ☒ Open Session ☐ Closed Session	**8) Is an appearance before the Board being scheduled?** *(If yes, please complete Appearance Request for Non-DSPS Staff)* ☐ Yes <Appearance Name(s)> ☐ 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 6/29/2026 **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**			
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.			

State of Wisconsin
Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and title of person submitting the request:	2) Date when request submitted:
Brad Wojciechowski, Executive Director	6/29/2026
	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:

Choose an item. **Interdisciplinary Advisory Committee**

4) Meeting Date:	5) Attachments:	6) How should the item be titled on the agenda page?
7/09/2026	☒ Yes ☐ No	Interdisciplinary Advisory Committee – Discussion and Consideration 1) Ketamine Guidance Document Review

7) Place Item in:	8) Is an appearance before the Board being scheduled? *(If yes, please complete Appearance Request for Non-DSPS Staff)*	9) Name of Case Advisor(s), if applicable:
☒ Open Session ☐ Closed Session	☐ Yes <Appearance Name(s)> ☐ No	<Click Here to Add Case Advisor Name or N/A>

10) Describe the issue and action that should be addressed:

11) Authorization

6/29/2026

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**

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