State of Wisconsin Department of Safety and Professional Services

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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
November 12, 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. Approval of Agenda (1-4)

B. Approval of Minutes of October 8, 2026 (5-8)

C. Introductions, Announcements and Recognition

D. Reminders: Conflicts of Interest, Scheduling Concerns

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

F. Education and Examination Matters – Discussion and Consideration (9-35)
1. Findley Educational Institute – Approval to Plan Presentation

G. Administrative Rule Matters – Discussion and Consideration (36-38)
1. Pending or Possible Rulemaking Projects

H. Interdisciplinary Advisory Committee – Discussion and Consideration (39-46)
1. Ketamine Guidance Document

I. Prescription Drug Monitoring Program (PDMP) Updates (47-49)

J. Speaking Engagements, Travel, or Public Relation Requests, and Reports – Discussion and Consideration (50)

1. Travel Report: 2026 NCSBN Leadership and Public Policy Conference, Oct. 7-9, 2026 – Philadelphia, PA – Brzozowski, Kane, Malak, McNally

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. Deliberation on Division of Legal Services and Compliance Matters
- **1. Proposed Stipulations, Final Decisions, and Orders**
  - a. 24 NUR 0629 – Heide Ann Huerth **(51-62)**
  - b. 26 NUR 0148 – Brittany Fox **(63-75)**
  - c. 26 NUR 0190 – Bianca L. Van **(76-82)**
- **2. Administrative Warnings**
  - a. 25 NUR 0071 – E.M.S. **(83-86)**
- **3. Case Closings**
  - a. 26 NUR 0050 – W.S.K. **(87-91)**

b. 26 NUR 0259 – A.N.S. **(92-106)**

S. Deliberation of Proposed Final Decision and Orders

1. Nikol S. Gerou, Respondent (DHA Case Number SPS-25-0077/ DLSC Case Number 23 NUR 591) **(107-149)**
2. Jennifer Smith, Respondent (DHA Case Number SPS-26-0014/ DLSC Case Number 23 NUR 716) **(150-159)**
3. Connie Mesteth, Respondent (DHA Case Number SPS-26-0026/ DLSC Case Number 24 NUR 0415) **(160-171)**

T. Monitoring Matters

1. Desiree Sims – Requesting Full Licensure **(172-227)**

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: DECEMBER 10, 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. 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. Alternatively, reach the Meeting Staff by calling 608-267-7213.

VIRTUAL/TELECONFERENCE
BOARD OF NURSING
MEETING MINUTES
OCTOBER 8, 2026

PRESENT: Anita Allen, John Anderson, Sarah Brzozowski, Tina DeGroot, Amanda Kane, Jennifer Malak, Patrick McNally, Craig Reinbold

ABSENT: Christian Saldivar Frias

STAFF: Brad Wojciechowski, Executive Director; Renee Parton, Assistant Deputy Chief Legal Counsel; Emily Constantine, 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 9:32 a.m. A quorum was confirmed with eight (8) members present.

ADOPTION OF THE AGENDA

Amendments to the Agenda

- *Remove item C.1.*

MOTION: Amanda Kane moved, seconded by Patrick McNally, to adopt the Agenda as amended. Motion carried unanimously.

APPROVAL OF MINUTES SEPTEMBER 10, 2026

MOTION: John Anderson moved, seconded by Amanda Kane, to approve the Minutes of September 10, 2026 as published. Motion carried unanimously.

ADMINISTRATIVE MATTERS

Appointment of Liaisons and Alternates

LIAISON APPOINTMENTS	
Credentialing Liaison	Amanda Kane, Jennifer Malak, Anita Allen *Alternate:* Sarah Brzozowski
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, Sarah Brzozowski *Alternate:* Anita Allen

Communication Liaison	Craig Reinbold
Education and Examination Liaison	Tina DeGroot *Alternate:* Sarah Brzozowski
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 (2027)	Jennifer Malak, Craig Reinbold, Anita Allen
April – June	John Anderson, Anita Allen
July – September	Patrick McNally, Tina DeGroot
October – December	Amanda Kane; Sarah Brzozowski

BOARD OPIOID ABUSE GOAL SETTING AND REPORT PURSUANT TO WIS. STAT. § 440.035 (2M) (C) – DISCUSSION AND CONSIDERATION

MOTION: Amanda Kane moved, seconded by Sarah Brzozowski, to adopt the goals to address opioid abuse as presented with the agenda and to delegate the

Department to file the Wis. Stat. s. 440.35 Report to the Legislature. 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: Anita Allen-yes; John Anderson-yes; Sarah Brozozowski-yes; Tina DeGroot-yes; Amanda Kane -yes; Jennifer Malak-yes; Patrick McNally-yes; and Craig Reinbold-yes. Motion carried unanimously.

The Board convened into Closed Session at 10:06 a.m.

DELIBERATION ON DIVISION OF LEGAL SERVICES AND COMPLIANCE MATTERS

Proposed Stipulations, Final Decisions, and Orders

MOTION: Jennifer Malak moved, seconded by John Anderson, to adopt the Findings of Fact, Conclusions of Law in the matter of disciplinary proceedings the following cases:
24 NUR 0715 – Marshall Kothrade
25 NUR 0045 – Roxanne A. Thornton
25 NUR 0192 – Mary Schoneck
26 NUR 0231 – Suzanne M. Brodt
Motion carried unanimously.

22 NUR 753 – Melissa R. Knutson

MOTION: John Anderson moved, seconded by Patrick McNally, to reject Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Melissa R. Knutson, DLSC Case Number 22 NUR 753 and to return the matter to DLSC for further consideration. Motion carried unanimously.

Case Closings

MOTION: Amanda Kane moved, seconded by Sarah Brzozowski, to close the following DLSC Cases for the reasons outlined below:
22 NUR 857 – W.A.Z. – Insufficient Evidence
24 NUR 0353 – T.C.B. – Prosecutorial Discretion (P2)
24 NUR 0778 – J.L.C. – Prosecutorial Discretion (P2)
25 NUR 0091 – C.T.G. and J.C. – No Violation
25 NUR 0321 – E.K.D. – No Violation
25 NUR 0454 – A.D.G. – No Violation
25 NUR 0499 – S.W. – Prosecutorial Discretion (P2)
26 NUR 0019 – T.F. – No Violation
26 NUR 0459 – J.L.V. – Insufficient Evidence
Motion carried unanimously.

RECONVENE TO OPEN SESSION

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

The Board reconvened into Open Session at 10:53 a.m.

VOTING ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION

MOTION: Jennifer Malak moved, seconded by Amanda Kane, 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: Craig Reinbold moved, seconded by Anita Allen, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 10:55 a.m.

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:** 10/28/2026 **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: 11/12/2026	**5) Attachments:** ☒ Yes ☐ No	**6) How should the item be titled on the agenda page?** Findley Foundation seeking Approval to Plan a nursing school	
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 See below ☐ 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:

Findlay Foundation is seeking approval to plan a nursing school.

I will forward presenter information to you as soon as I receive it. Thanks!

Presenter:

11) Authorization

<NAME>	<Date: M/D/YYYY>
Signature of person making this request	**Date**
Joan R. Gage	11/12/2026
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.

FINDLEY EDUCATIONAL INSTITUTE

Application for Approval to Plan a School of Nursing

Practical Nursing (LPN) Program

Presented to the Wisconsin Board of Nursing • November 12, 2026

Dr. Stephanie Findley-Chukwuma, Board Vice-Chair, Findley Foundation, Inc.

with Deanna Banjanen, Student Services Coordinator

The Controlling Institution & Accreditation Status

- **Findley Foundation, Inc.** — a Wisconsin nonprofit corporation founded in 2017 — is the controlling institution and owner of Findley Educational Institute.
- **School address:** 6114 W. Capitol Drive, Suite 102, Milwaukee, WI 53216. The Foundation also operates Findley Medical Clinic at the same campus (Suite 101).
- **Accreditation status:** Findley Educational Institute is **not currently accredited** by a regional or national accrediting agency, and does not represent itself as accredited.
- The Institute is pursuing Wisconsin Educational Approval Board (EAB) approval as a private school, supported by a $25,000 surety bond (Merchants National Bonding, effective October 26, 2026).
- Programmatic nursing accreditation will be pursued once the program is approved and established, in the ordinary sequence for new schools of nursing.

Intent: A Diploma-Level Practical Nursing Program

- **Intent:** to establish a school of nursing offering a **Practical Nursing diploma program** that prepares graduates for the NCLEX-PN examination and licensure as Licensed Practical Nurses in Wisconsin.
- **Program length:** 1,350 clock hours over 13 months (54 weeks) full-time.
- **Hour distribution:** 852 hours theory • 96 hours skills laboratory • 402 hours simulation & clinical practica.
- The Institute already operates a Nursing Assistant (CNA) program track under EAB oversight — the Practical Nursing program is the next rung of the same healthcare career ladder.

THEORY	SKILLS LAB	SIMULATION / CLINICAL	TOTAL
852 hours	96 hours	402 hours	1,350 hours

Primary Method of Instruction: Resident, On-Ground

- **Resident (on-ground) delivery** at the Institute's Milwaukee campus — classroom theory, a dedicated skills laboratory, and simulation.
- **Three clinical practica** (Basic Nursing Care; Physiological Integrity; Physiological & Psychosocial Integrity across the Lifespan) completed at affiliated clinical sites.
- **Competency-based curriculum** built on the nursing process, with a program-wide clinical skills checklist used across all courses.
- Instruction is governed by the Institute's Clinical Manual and Forms — covering faculty and preceptor roles, student clinical requirements, evaluations, and end-of-course reporting.
- Course sequence runs in three phases of 450 hours each, from foundations and anatomy & physiology through pharmacology, adult health, maternal-child, and mental health nursing to integrated nursing concepts.

Clinical Facilities and Resources

- **Findley Medical Clinic** — the Foundation's own operating free and charitable clinic on the same campus (6,888 patient visits in the past year) — anchors students' understanding of community-based care.
- **On-campus skills laboratory and simulation** carry 96 laboratory hours and the simulation portion of the practica before and alongside site placements.
- **402 simulation & clinical hours** are completed at affiliated clinical sites under the school's Clinical Manual, with qualified faculty and preceptors supervising every rotation.
- **An established clinical education site:** Findley Medical Clinic already hosts nursing students under executed affiliation agreements with Milwaukee Area Technical College (2024) and Mount Mary University (2023), and UW-Milwaukee DNP students for precepted clinical experience.
- **Seven nursing affiliation partners:** affiliation agreements are also in place with Alverno College, Concordia University Wisconsin, Chamberlain University (2026), and Walden University (2025). Articulation discussions opened in November 2026 with the five Milwaukee-area partners toward LPN-to-RN pathways for Findley graduates.
- Students complete health, immunization, background-check, and CPR requirements before clinical placement.

Educational Administrator: Dr. Ellen Sono

ELLEN SONO

DNP, FNP-BC, APNP

Nursing Program

Administrator

WI APNP License #11390-33

NPI 1437812054

- **Doctor of Nursing Practice — Family Nurse Practitioner**, University of Wisconsin–Milwaukee (2021); ANCC board-certified family nurse practitioner.
- **Bachelor of Science in Nursing**, University of Ghana (2006); registered nurse since 2009 in skilled nursing, medical-surgical, and resource-pool practice (Ascension, Wheaton Franciscan).
- **Clinical Nursing Instructor, Bryant & Stratton College (2021–present)** — five years teaching nursing students in the clinical environment.
- As administrator she directs curriculum delivery, faculty supervision, and clinical placement for the Practical Nursing program.

Plans to Recruit and Employ Qualified Faculty

- **Structure in place:** the Clinical Manual already defines the program's faculty roles — nursing program administrator, course faculty, clinical lab coordinator, and preceptors.
- **Recruitment standard:** registered-nurse faculty holding the graduate preparation and Wisconsin licensure the Board requires for nursing education, with clinical expertise matched to each course block.
- Recruitment draws on the Institute's clinical network — Findley Medical Clinic providers, Milwaukee hospital and long-term-care partners, and area nursing programs' adjunct pools.
- Every clinical rotation is supervised by qualified faculty or preceptors under the Clinical Manual, with student evaluations and end-of-course reporting for each cohort.
- Faculty files — licenses, transcripts, and resumes — will be assembled and available for Board review as hiring is completed.

Proposed Timeline & First Class

NOV 2026

Approval to Plan

Board of Nursing presentation and decision (November 12, 2026).

DEC 2026

Program Development

Finalize curriculum and course materials; execute clinical affiliation agreements; complete EAB school approval filing.

JAN 2027

Faculty & Admissions

Administrator-led faculty team employed; skills laboratory ready; admissions and enrollment for the first cohort.

FEB 8, 2027

First Class Enters

First Practical Nursing cohort begins — 1,350 clock hours over 13 months (54 weeks).

Built in the community, for the community.

Findley Foundation has served Milwaukee since 2017 through its free clinic and community programs. Findley Educational Institute extends that mission: training practical nurses where the need — and the students — already are.

Thank you for your consideration.

Findley Educational Institute • 6114 W. Capitol Drive, Suite 102, Milwaukee, WI 53216 • 414.246.7550

3028-OEE, Nursing Program Self-Evaluation Report for Continuation of Approval

9/16/2026 7:19:52 AM

Introduction

Wisconsin Department of Safety and Professional Services

Schools that do not hold accreditation from a Board recognized nursing accreditation agency are responsible for meeting
the standards in Wis. Admin. Code sec. N 1.06 and shall complete and submit this form to the Board of Nursing on an annual basis, when
specifically requested. (Wis. Admin. Code secs. N 1.05 (1) & (2))

NOTE: Schools that are accredited by a Board recognized nursing accreditation agency are only required to complete the
first section (Name of Program, Address and Program) and last section (Program Completed By), and submit the form to the
Board of Nursing on an annual basis, when specifically requested.

Directions for completing the Self-Evaluation Report: On the line next to each requirement please indicate “yes”,
“no”, or “NA” for not applicable. For each “NA” please describe why this rule does not apply to the nursing program in
the space provided in the "Nursing Program Self-Evaluation Notes" section or on an attached document.

(Rev. 04/03/2026)

Program Information

Name of Program: Findley Foundation, Inc dba Findley Vocational Institute

Address

Address Line 1: 6114 W Capitol Drive

Address Line 2: Ste 101

City: Milwaukee

State: Wisconsin

Zip: 53216

Program (ADN, BSN, Other): License Practical Nursing Program

N 1.06(1) Organization and Administration of the Program

N 1.06 (1) (a) Governing Institution

The nursing program has a governing institution that assumes legal responsibility for the overall conduct of the program.: N/A

The governing institution has designated an educational administrator; established administrative policies; and provided sufficient financial support, resources, and facilities for the operation of the program.: Yes

The governing institution has attached to the Self-Evaluation Report an organizational chart and written plan which describes the relationship of the nursing program to the governing institution and the organization of the nursing program.: Yes

The governing institution has attached to the Self-Evaluation Report evidence of being regionally accredited.: N/A

N 1.06 (1) (b) Administrative Policies

The nursing program has administrative policies that are in accord with those of the governing institution.: Yes

The nursing program has written contracts between the school and institutions which offer associated academic study, clinical facilities and agencies for related services.: Yes

The administrative policies specify that the educational administrator has authority and responsibility for the development, implementation, and evaluation of the program.: Yes

The administrative policies contain provisions for a system of records and reports essential to the operation of the program.: Yes

The administrative policies include written personnel policies for the faculty which include position expectations and faculty rights and responsibilities.: Yes

N 1.06 (2) Curriculum

Curriculum is based on a stated purpose, philosophy, conceptual framework, and program objectives expressed in terms of student competencies, and a copy of the curriculum is attached to the Self-Evaluation Report. For clarity, the sections of the curriculum that satisfy requirements are highlighted with the corresponding item number (listed on the left-hand side of each requirement) clearly indicated: Yes

N 1.06(2)(a) Professional Nursing Curriculum

The professional nursing curriculum contains an 'area of general education' which covers

scientific knowledge basic to nursing practice including principles from the biological and physical sciences.: Yes

human and cultural knowledge basic to understanding motivation and behavior including currently accepted concepts and principles form the social and behavioral sciences.: Yes

The professional nursing curriculum contains an 'area of nursing education' which includes theory and selected experiences designed to enable students to provide nursing care that promotes, maintains, and restores the physical and mental health of the individual throughout the life span.: Yes

After completion of the professional nursing curriculum, graduates will be able to

Use the nursing process to plan and provide nursing care.: Yes

Apply knowledge derived from the scientific, human and cultural areas to meet health needs.: Yes

Individualize nursing care during preventative, maintenance, restorative, and terminal phases: Yes

Promote positive health practices.: Yes

Understand the roles and relationship of nurses to other health care providers.: Yes

Plan for health services with individuals, families, communities and health care providers.: Yes

Practice professional nursing according to the legal standards of N 6.: Yes

Function as a responsible, accountable nursing professional.: Yes

Identify the need for continued competency: Yes

Recognize the impact of historical trends in nursing.: Yes

N 1.06(2)(b) Practical Nursing Curriculum

The practical nursing curriculum contains an 'area of health, growth, and development' that covers

the general aspects of human structure and body function.: Yes

the general aspects of health, signs of physical and emotional health and normal development, effects of emotional climate upon health, attitudes and behavior of individuals and the family as a social unit.: Yes

The practical nursing curriculum contains an 'area of personal and vocational relationships' that covers

basic principles of human relationships.: Yes

legal and ethical responsibilities in nursing.: Yes

The practical nursing curriculum contains an 'area of nursing education' which provides content with experiences in meeting basic nursing needs of the individual throughout the life span.: Yes

After completion of the practical nursing curriculum, graduates will be able to

Identify basic needs of a patient.: Yes

Employ common nursing measures to meet basic needs of patients.: Yes

Observe and report relevant data regarding a patient's health status.: Yes

Use communication techniques to assist patients to achieve identified goals.: Yes

Establish positive relationships with patients and other health team members.: Yes

Practice practical nursing according to the legal standards of ch. N 6.: Yes

Identify the need for continued competency: Yes

N 1.06 (3) Instruction

Instruction is based on written objectives which give direction to planning student objectives.: Yes

A variety of teaching methods are used to facilitate student learning.: Yes

Criteria based on written objectives are used in the evaluation of student learning.: Yes

Clinical laboratory learning experiences are supervised by nursing faculty meeting standards under N 1.06 (4).: Yes

There are written contracts with an adequate number of clinical facilities and resources to meet the program objectives.: Yes

The clinical facilities meet the following standards

The clinical experience gained from each clinical facility is consistent with the nursing program objectives.: Yes

Formal written agreements between each clinical facility and nursing program demonstrate willingness to cooperate in promoting the nursing program clinical objectives.: Yes

The practice of the registered nurse and the licensed practical nurse at each clinical facility is within the legal scope of practice under s. 441.001 (3) and (4), Stats: Yes

N 1.06 (4) Faculty

The faculty are adequate in number and academic and professional qualifications to develop, implement and evaluate the program in nursing in relation to its stated purpose, philosophy, objectives and conceptual framework, number and size of classes admitted annually, and the clinical facilities used in the program.: Yes

The educational administrator of the professional nursing education program holds a current license to practice as a registered nurse in Wisconsin, has a minimum of 2 years of full-time or equivalent direct care experience as a practicing nurse, has 3 years of experience in nursing education within the last 10 years, and holds a master's degree with a major in nursing.: Yes

The educational administrator of the practical nursing education program holds a current license to practice as a registered nurse in Wisconsin, has a minimum of 2 years of full-time or equivalent direct care experience as a practicing nurse, has 3 years of experience in nursing education within the last 10 years, and holds a master's degree with a major in nursing or a related field.: Yes

All nurse faculty members who teach nursing courses in a professional nursing program hold a current license to practice as a registered nurse in Wisconsin, have at least 2 years of full-time or equivalent direct care experience as a practicing nurse, were employed in nursing within the last five years, and hold a master's degree with a major in nursing: Yes

All nurse faculty members who teach nursing courses in a professional nursing program hold a current license to practice as a registered nurse in Wisconsin, have at least 2 years of full-time or equivalent direct care experience as a practicing nurse, were employed in nursing within the last five years, and hold a baccalaureate degree with a major in nursing.: Yes

The ratio of students to faculty in the clinical area allow for meeting clinical course objectives and safe patient care.: Yes

The educational administrator has taken responsibility for ensuring that individual faculty members are academically and professionally qualified, and that faculty staff is adequate to carry out program objectives.: Yes

N 1.06 (5) Evaluation

The educational administrator will conduct systematic and periodic evaluations of the total program.: Yes

Nursing Program Self-Evaluation Notes

For each "NA" indicated in this report please describe why this rule does not apply to your specific nursing program in the space provided below. Please write the corresponding report item number for each instance. Attach additional pages as necessary.

Notes: We are currently reviewing accreditation partnerships to apply.

Additional Materials

Attach additional materials here: findley.pdf

Nursing Program Self-Evaluation Report Completed By

Name of Educational Administrator: Dr. Ellen Sono

Title: Educational Administrator

Wisconsin RN License: 11390-33

Educational Preparation

Name of Institution: UW-Milwaukee

Location: Milwaukee, WI

Date Graduated: 05-16-2021

Degree Earned or Number of Credits: DNP

Major: Advanced Registered Nurse Practitioner

Minor:

Nursing Practice Experience

From Mo/Yr

From Mo/Yr: 9/2017

To Mo/Yr

To Mo/Yr: 2026

Part or Full-Time: Full-Time

Employer: Ascension

Location (City/State): Milwaukee

Position Title: Advanced Nurse Prescriber

Nursing Education Experience

From Mo/Yr

From Mo/Yr: 9/2021

To Mo/Yr

To Mo/Yr: 2026

Part or Full-Time: Part-Time

Employer: Bryant & Stratton College

Location (City/State): Milwaukee, WI

Position Title: Clinical Nursing Instructor

Education Administrator Signature: Dr. Ellen Sono

Date Signed

Date Signed: 9/16/2026

Telephone Number of Educational Administrator: 4142467550

Email Address of Educational Administrator: info@findleyfoundation.org



FINDLEY VOCATIONAL TRAINING INSTITUTE

Practical Nursing (PN) Program

Mission Statement

Findley is a student-centered vocational training institution dedicated to delivering high-quality, career-focused education. Our mission is to prepare students for licensure, employment, ethical practice, and lifelong professional growth.

Program Overview

The Practical Nursing (PN) Program combines classroom instruction, skills laboratory practice, and supervised clinical training. Graduates are prepared to sit for the NCLEX-PN licensure examination in accordance with state regulations.

Program Structure

Program Component	Hours
Classroom & Skills Lab	950 Hours
Clinical Training	400 Hours
Total Program Hours	1,350 Hours

Admission Requirements

- Minimum 18 years of age

- High school diploma, GED, or equivalent
- Passing entrance assessment
- Admission interview
- Health clearance and immunizations
- Criminal background check
- Current CPR certification (Healthcare Provider)

Career Opportunities

- Hospitals
- Long-Term Care Facilities
- Rehabilitation Centers
- Clinics
- Home Health Agencies
- Community Health Settings

Contact Information

6114 W Capitol Drive, Suite 101, Milwaukee, WI, United States, Wisconsin

(414) 246-7550

info@findleyfoundation.org

Instagram: findleyfoundation

Website: the-findley-foundation.ueniweb.com

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Findley Vocational Training Institute benefits from the availability of sufficient clinical facilities and resources through its affiliation with the Findley Foundation, Inc. This organization operates a free and charitable clinic, which provides a valuable clinical training site for students in the Practical Nursing Program. The clinic offers a real-world healthcare environment where students can gain supervised clinical experience, thereby enhancing their practical skills and ensuring they meet the clinical training requirements outlined in the program. This partnership ensures that students have access to appropriate clinical resources and diverse patient care settings necessary for comprehensive clinical education.

In accordance with the requirements outlined in the findley.pdf document, Findley Vocational Training Institute has developed a plan to recruit and employ qualified personnel to ensure the effective delivery of the Practical Nursing Program. Dr. Ellen Sono has been appointed as the educational administrator. She holds a Doctor of Nursing Practice (DNP) degree and brings extensive teaching experience, having served at Bryant and Stratton College for the past five years. Her advanced credentials and professional background provide the necessary leadership and expertise to oversee the academic quality and compliance of the program. Additionally, the Institute will continue to recruit qualified faculty members who possess appropriate nursing credentials, licensure, and teaching experience to ensure a high standard of education and clinical instruction.

The Findley Vocational Training Institute intends to establish a school of nursing that will offer a Practical Nursing (PN) Program aimed at preparing students for licensure and employment in various healthcare settings. The primary method of instruction will encompass a combination of classroom instruction, skills laboratory practice, and supervised clinical training. The program is designed to meet the requirements for students to sit for the NCLEX-PN licensure examination, ensuring graduates are qualified for licensure and entry-level nursing positions. The academic level of this program is at the practical nursing level, focusing on foundational nursing skills and knowledge necessary for licensure and professional practice.

The proposed timeline for planning and implementing the school of nursing at Findley Vocational Training Institute is as follows: The intended date of entry for the first class is February 8, 2027. The planning and development phase will span approximately 12 months, concluding around February 8, 2028. This timeline allows sufficient time for program development, recruitment, faculty hiring, facility preparation, and accreditation processes to ensure a successful launch of the Practical Nursing Program.

The program curriculum for the Practical Nursing (PN) Program at Findley Vocational Training Institute, as outlined in findley.pdf, includes a total of 1,350 hours divided between classroom instruction, skills laboratory practice, and clinical training:

Classroom & Skills Laboratory: 950 hours

Clinical Training: 400 hours

This comprehensive curriculum combines theoretical knowledge with practical skills development to prepare students for licensure and employment in various healthcare settings. Graduates will be equipped to sit for the NCLEX-PN licensure examination and pursue careers in hospitals, long-term care facilities, rehabilitation centers, clinics, home health agencies, and community health settings.

PRIVATE SCHOOL BOND

Bond No. 102048118

KNOW ALL PERSONS BY THESE PRESENTS, that

Findley Foundation Inc,
(Name of Owner or Controlling Entity)

- ☐ an individual as sole proprietor
- ☐ a partnership
- ☐ a limited liability company
- ☒ a single corporation
- ☐ a series of corporations
- ☐ other: _____

doing business as Findley Educational Institute
(Name of School)

at 6114 W Capitol Drive Suite 102, Milwaukee, WI 53216
(Address of School)

as PRINCIPAL and Merchants National Bonding, Inc.
(Name of Surety)

of P.O. Box 14498, Des Moines, IA 50306-3498
(Address of Surety)

as SURETY, are held and firmly bound unto the Wisconsin Educational Approval Board as a representative of each member of that class of persons defined as those provided the right of indemnification by virtue of the provisions of Chapter EAB 4.06, Wisconsin Administrative Code, and the State of Wisconsin for the benefit of such class or individual members thereof, in the sum of $25,000.00 representing the said Principal in the State of Wisconsin, for payment of which well and truly to be made, we the Principal and the Surety, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents, provided that no obligation hereunder shall require payment for the same loss or damage to more than one Obligee named herein.

The CONDITION OF THE ABOVE is such that, whereas the Principal has applied for, or has been granted approval to do business as a Private School pursuant to s.38.50 of the Wisconsin Statutes or any successor statutes subsequently amended or created, and the rules and regulations issued pursuant thereto, and the solicitors (representatives) of the Principal have been issued permits or have applied for permits or are about to apply for permits to act as solicitors (representatives) for the Principal pursuant to the provisions of s.38.50 (8) of the Wisconsin Statutes.

NOW, THEREFORE, if neither the Principal nor any of the solicitors, representatives, agents, and employees shall cause, to any Obligee protected by this bond, economic loss or damage by engaging in the practices which would entitle said Obligee to indemnification therefore as provided in Chapter EAB 4.06 (3), Wisconsin Administrative Code, as extant at the time of such breach, and if the Principal and such solicitors (representatives) shall faithfully comply with the provisions of s.38.50 of the Wisconsin Statutes and the rules and regulations issued pursuant thereto, then this obligation shall be void, otherwise it shall be and remain in full force and effect.

PRIVATE SCHOOL BOND

LIABILITY UNDER THIS BOND shall be continuous in nature; provided however, that in the event of the renewal hereof for one or more annual periods, the liability of the Surety shall not be cumulative and, regardless of the number of years that this bond is continued in force or the number of annual premiums that is paid or payable, the aggregate liability of the Surety during the entire period in which this bond is in force shall not exceed the penal sum of this bond or, in the case of any one solicitor (representative), two thousand dollars ($2,000).

This bond may be terminated by the Surety by the giving of thirty (30) days written notice to the State of Wisconsin Educational Approval Board; provided, however, that in the event of such termination, the Surety shall be relieved of liability hereunder only with respect to breaches of Condition occurring on and after the effective date of such termination.

The written application made to the Wisconsin Educational Approval Board by or on behalf of any solicitor showing that each representative is an authorized agent of the said Principal shall be conclusive as to the number and identity of the solicitors authorized by the Principal to solicit business for it as aforesaid, and the records of the Wisconsin Educational Approval Board shall be conclusive as to the number of permits and the period of time covered by the permits and each renewal thereof to each solicitor under this bond.

This bond is effective on the 26th day of October, 2026.

Merchants National Bonding, Inc.
(Print or Type Name of Surety)

By: _____
(Attorney-in-Fact for Surety)

James A. Holter, Attorney-in-Fact
(Print or Type Name of Attorney-In-Fact)

October 26, 2026
(Signed and Dated On)

_____
(Signature of Witness as to Surety)

Dan Lengeling
VP Commercial Underwriting

MERCHANTS NATIONAL BONDING, INC. INCORPORATED -o- 2003

Findley Foundation Inc dba Findley Educational Institute
(Print or Type Name of Principal)

By: _____
(Representative of Principal)

Stephanie Chukwuma
(Print or Type Name of Representative of Principal)

October 26, 2026
(Signed and Dated On)

_____
(Signature of Witness as to Principal)

LP 2916 WI (6/11)

MERCHANTS BONDING COMPANY™

POWER OF ATTORNEY

Know All Persons By These Presents, that MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., both being corporations of the State of Iowa, and MERCHANTS NATIONAL INDEMNITY COMPANY , an assumed name of Merchants National Bonding, Inc., (herein collectively called the "Companies") do hereby make, constitute and appoint, individually,

James A. Holter

their true and lawful Attorney(s)-in-Fact, to sign its name as surety(ies) and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

This Power-of-Attorney is granted and is signed and sealed by facsimile under and by authority of the By-Laws adopted by the Board of Directors of the Companies.

"The President, Secretary, Treasurer, or any Assistant Treasurer or any Assistant Secretary or any Vice President shall have power and authority to appoint Attorneys-in-Fact, and to authorize them to execute on behalf of the Company, and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof."

"The signature of any authorized officer and the seal of the Company may be affixed by facsimile or electronic transmission to any Power of Attorney or Certification thereof authorizing the execution and delivery of any bond, undertaking, recognizance, or other suretyship o obligations of the Company, and such signature and seal when so used shall have the same force and effect as though manually fixed."

In connection with obligations in favor of the Florida Department of Transportation only, it is agreed that the power and authority hereby given to the Attorney-in-Fact includes any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts required by the State of Florida Department of Transportation. It is fully understood that consenting to the State of Florida Department of Transportation making payment of the final estimate to the Contractor and/or its assignee, shall not relieve this surety company of any of its obligations under its bond.

In connection with obligations in favor of the Kentucky Department of Highways only, it is agreed that the power and authority hereby given to the Attorney-in-Fact cannot be modified or revoked unless prior written personal notice of such intent has been given to the Commissioner - Department of Highways of the Commonwealth of Kentucky at least thirty (30) days prior to the modification or revocation.

In Witness Whereof, the Companies have caused this instrument to be signed and sealed this 26th day of October , 2026

MERCHANTS BONDING COMPANY (MUTUAL)
MERCHANTS NATIONAL BONDING, INC.
MERCHANTS NATIONAL INDEMNITY COMPANY

By Larry Taylor

President

STATE OF IOWA
COUNTY OF DALLAS ss.

On this 26th day of October 2026 , before me appeared Larry Taylor, to me personally known, who being by me duly sworn did say that he is President of MERCHANTS BONDING COMPANY (MUTUAL), MERCHANTS NATIONAL BONDING, INC., and MERCHANTS NATIONAL INDEMNITY COMPANY; and that the seals affixed to the foregoing instrument are the Corporate Seals of the Companies; and that the said instrument was signed and sealed in behalf of the Companies by authority of their respective Boards of Directors.

NOTARIAL SEAL IOWA

Penni Miller
Commission Number 787952
My Commission Expires
January 20, 2027

Notary Public

(Expiration of notary's commission does not invalidate this instrument)

I, Elisabeth Sandersfeld, Secretary of MERCHANTS BONDING COMPANY (MUTUAL), MERCHANTS NATIONAL BONDING, INC., and MERCHANTS NATIONAL INDEMNITY COMPANY do hereby certify that the above and foregoing is a true and correct copy of the POWER-OF-ATTORNEY executed by said Companies, which is still in full force and effect and has not been amended or revoked.

In Witness Whereof, I have hereunto set my hand and affixed the seal of the Companies on this 26th day of October , 2026 .

Secretary

POA 0018 (5/25)

ELLEN SONO, DNP, FNP-BC, APNP

7918 North Riverview Court, Milwaukee, Wisconsin 53224 • (773) 577-7790 • ellensono@yahoo.com

Wisconsin Advanced Practice Nurse Prescriber — License #11390-33 • NPI 1437812054

PROFESSIONAL HIGHLIGHTS

A Doctor of Nursing Practice (DNP) prepared and ANCC board certified family nurse practitioner with international patient care experience. I believe that primary care entails treating a patient as an individual in a holistic manner. I possess good time management skills, proficient critical thinking skills and proven leadership abilities.

EDUCATION

Doctor of Nursing Practice — Family Nurse Practitioner, University of Wisconsin–Milwaukee, College of Nursing (May 2021)

Bachelor of Science in Nursing, University of Ghana, School of Nursing (2006)

FNP CLINICAL ROTATIONS

Family Nurse Practitioner Clinical Rotations — Providence Family Medical Clinic, Glendale, WI • May 2020 – December 2020

- Cared for patients across the lifespan.
- Managed patients with acute and chronic diseases such as diabetes, hypertension, and metabolic disorders.
- Offered pain management including knee and trigger point injection.
- Performed minor surgical procedures such as incision and drainage, sebaceous cyst removal and suturing.
- Offered preventive health services including immunization, child wellness visits, smoking cessation, Pap smears, pre-operative testing, STI counselling, testing and treatment.

Family Nurse Practitioner Clinical Rotations — CVS Minute Clinic, Menomonee Falls, WI • January 2020 – March 2020

- Diagnosed and treated common illnesses, injuries, and skin conditions.
- Administered vaccinations and offered health screenings and physicals.
- Provided patient education and recommendations.

EMPLOYMENT

Clinical Nursing Instructor — Bryant and Stratton College • September 2021 – Present

- Assists students to adapt to the clinical healthcare environment.
- Teaches students clinical nursing skills.
- Performs other assigned administrative duties.

Registered Nurse (Resource Pool) — Ascension Regional Resource Pool, WI • September 2017 – Present

- Offered patient and family teaching.
- Administered IV, IM, Sub-Q, and oral medications.
- Performed procedures including foley catheter insertion, IV-line insertion and continuous bladder irrigation.

Registered Nurse (Medical-Surgical Acute Care Unit) — Wheaton Franciscan St. Josephs Campus, Milwaukee, WI • September 2014 – August 2017

- Initiated and evaluated patients' interdisciplinary plan of care.
- Telemetry strips / EKG reading and interpretation.

Registered Nurse (Skilled Nursing Unit Supervisor) — Buckingham Pavilion, Chicago, IL • October 2009 – August 2014

- Supervised 45 bed floor and coordinated clients' care.
- Developed clients plans of care.
- Supervised team of RNs, LPNs, CNAs, and delegated duties.

Graduate Nurse (Orthopedic/Surgical Unit) — St. Joseph's Hospital, Koforidua, Ghana • July 2007 – August 2008

- Developed client plans of care; coordinated clients' care.
- Pre- and post-operative patient care.
- Client education — safety, health promotion.

LICENSURES / CERTIFICATIONS

- Advanced Practice Nurse Prescriber — Wisconsin Board of Nursing, License #11390-33
- Registered Nurse — Wisconsin Board of Nursing
- Registered Nurse — Illinois Board of Nursing
- Registered Nurse — Nurses and Midwives Council of Ghana
- ANCC FNP-BC — Current
- Basic Life Support (BLS) Certification — Current
- NIH Stroke Management Certification — Current
- National Provider Identifier (NPI) — 1437812054

SPECIAL SKILLS

- Good verbal and written communication skills for patient teaching.
- HIPAA compliance / legal considerations.
- EKG, telemetry, X-rays, and laboratory readings.
- Holter monitor placement, EEG monitoring.
- Suturing, casting, and splinting.
- Epic, eClinicalWorks and Cerner electronic health record systems trained.
- Computer skills: Microsoft Word, Excel, and PowerPoint.

AWARDS

2006 Akuaba Award for the best graduating student in primary health care — University of Ghana, School of Nursing

PROFESSIONAL AND COMMUNITY INVOLVEMENT

- Metro Milwaukee Nurse Practitioners — Member
- Riverview Neighborhood Association — Executive Member

REFERENCES

Available upon request.

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:** 11/02/2026 **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: November 12, 2026	**5) Attachments:** ☒ **Yes** ☐ **No**	**6) How should the item be titled on the agenda page?** Administrative Rules Matters – Discussion and Consideration 1. Pending and Possible rulemaking projects.
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** ☒ **No**	**9) Name of Case Advisor(s), if required:** N/A
10) Describe the issue and action that should be addressed: Attachments: 1. Nursing rule projects chart.		
11) Authorization SAnderson 11/02/2026 **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 11/02/2026)

Emergency Rules

Clearinghouse Rule Number	Scope #	Scope Expiration	Rules Affected	Relating Clause	Synopsis	Stage of Rule Process	Next step
EmR 2606	064-25	03/22/2028	N 1	Faculty Accreditation Standards	Expand criteria regarding who can teach in a clinical setting to include BSNs.	Effective as of July 24, 2026, until December 20, 2026.	
EmR 2607	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.	Effective as of September 1, 2026, until September 1, 2028, or until the permanent rule takes effect.	

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.	Final Rule Draft and Leg Report submitted to Governor's Office for review on October 26.	After approval, we can submit rule for publication.

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: Paralegal Richanda Turner on behalf of Attorney Renee Parton			**2) Date when request submitted:** 10/27/26 **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: 11/12/26	**5) Attachments:** ☒ Yes ☐ No	**6) How should the item be titled on the agenda page?** Ketamine Guidance Document	
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 ☒ No	**9) Name of Case Advisor(s), if applicable:**	
10) Describe the issue and action that should be addressed: Adoption of Ketamine Guidance Document			
11) Authorization **Signature of person making this request** Richanda Turner			**Date** **10/27/26**
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.**

JOINT ADVISORY OPINION OF THE WISCONSIN EXAMINING BOARDS OF MEDICAL, NURSING, PHARMACY, AND COSMETOLOGY, THE PHYSICIAN ASSISTANT AFFILIATED CREDENTIALING BOARD, AND THE WISCONSIN CONTROLLED SUBSTANCES BOARD REGARDING THE ADMINISTRATION OF KETAMINE

It is the overall duty of each Board to protect the health, safety, and welfare of Wisconsin's citizens. Each Board seeks to improve the profession it supervises and to foster a better relationship between the profession and the general welfare of this state. Each Board is empowered to set standards of professional competency and conduct for the profession it supervises. With these principles in mind, the Interdisciplinary Advisory Committee (Committee), consisting of the Wisconsin Medical Examining Board, Pharmacy Examining Board, Board of Nursing, Physician Assistant Affiliated Credentialing Board, Cosmetology Examining Board, and Controlled Substances Board, was established to discuss issues of mutual concern.

In recent years, Wisconsin has seen an increase in the off-label use[1] of ketamine in outpatient settings for the treatment of psychiatric disorders and chronic pain, as well as other conditions. Beginning in January 2025, ForwardHealth and the Wisconsin Department of Health Services established a coverage policy for the off-label use of IV Ketamine, including clinical criteria for its administration in certain off-label uses.[2] The Department of Safety and Professional Services (DSPS) has received complaints related to the off-label use of ketamine, as well as questions from health care professionals concerning credentialing and other legal requirements for ketamine administration within the scope of professional practice.

Ketamine is a Schedule III controlled substance approved by the FDA for the induction and maintenance of general anesthesia and surgical pain management. Though research is showing efficacy, ketamine is not currently FDA-approved for the treatment of any mental health condition, including major depressive disorder (treatment-resistant depression (TRD)),[3] post-traumatic stress disorder, or severe suicidal ideation.[4] While the FDA has

[1] The United States Food and Drug Administration (FDA) defines “off-label use” as use of a medication: for a disease or medical condition it is not approved to treat, the medication is given in a different way, or given in a different dose.

[2] https://www.forwardhealth.wi.gov/kw/pdf/2024-53.pdf

[3] Major Depressive Disorder that is treatment resistant as defined by the American Psychological Association (APA) as a mood disorder characterized by persistent sadness and other symptoms of major depressive episode, without accompanying episodes of mania or hypomania, or mixed episodes of depressive and manic/hypomanic symptoms (APA Dictionary of Psychology (https://dictionary.apa.org) and in alignment with the Diagnostic and Statistical Manual of Mental Disorders).

[4] The FDA approved intranasal esketamine (Spravato®) as a standalone treatment for treatment resistant depression (TDR) in 2025. (Esketamine is a ketamine derivative and a Schedule III controlled substance). As part of its approval of Spravato®, which bears a boxed warning, the FDA imposed a Risk Evaluation and Mitigation Strategy (REMS that imposes specific, in-person administration and monitoring requirements. https://www. accessdata.fda.gov/drugsatfda_docs/label/2025/211243s016lbl.pdf.

DRAFT

approved ketamine for use in surgical pain management, it has not been approved for chronic pain management. Nevertheless, hundreds of clinics and facilities have opened across the United States, including in Wisconsin, offering varying forms of ketamine to treat a variety of medical conditions for which it is not an approved treatment. **This guidance document sets forth the relevant laws and standards of care implicated by off-label ketamine use and administration, based on existing Wisconsin law.**

This document provides guidance when assessing, ordering/prescribing, compounding, dispensing, administering, and monitoring patients with ketamine use. The intent of this guidance is to protect public safety, ensure evidence-based practice, mitigate risks, and provide clarity to health care professionals.

SCOPE OF PRACTICE CONSIDERATIONS

It is unprofessional conduct for any credential holder to provide services outside of their level of competency. If a credential holder does not have education, training and experience regarding treating and diagnosing Major Depressive Disorder and DSM criteria, they must refer these patients to other providers with necessary competence and expertise.

A physician must possess the appropriate education and clinical competence to assess, order/prescribe, administer, and monitor the off-label use of ketamine. Physicians need to continue to monitor current guidance, medical literature, and FDA warnings prior to prescribing off-label use of ketamine.

Any physician who uses telemedicine in the diagnosis and treatment of a patient located in Wisconsin must hold appropriate Wisconsin licensure. Providers are held to the same standards of practice and conduct regardless of whether health care services are provided in person or by telemedicine.[5]

ASSESSMENT AND ORDER

The assessment of the patient shall be documented and include, at a minimum:

- A thorough review of the patient's medical history[6], including relevant cardiovascular disease, psychosis/mania, substance use, interactions with alcohol, opioids, benzodiazepines, and other sedatives, current medications prescribed and identification of any prior ketamine use.
- Assessment of the patient's current symptoms, including any suicidal ideation or TRD as applicable

[5] *See* Wis. Admin. Code §§ Med 24.04-24.05.

[6] Sleep apnea and high Body Mass Index (BMI) should be clinical evaluated prior to any ketamine administration.

- A psychiatric evaluation to assess the patient's mental health status and any potential for treatment-resistant depression.
- Baseline assessment (PHQ-9, pain scale).
- Prior treatment failures or contraindications to first-line therapy.
- Physical examination, including an in-person assessment of the patient's airway.
- The benefits of using ketamine versus the risks of other treatments or of not using ketamine it at all. Any consultation should include informed consent for off-label drug orders.
- Treatment recommendations.

The provider must follow the Wisconsin Prescription Drug Monitoring Program (PDMP) requirements before ordering/prescribing ketamine to identify any signs of misuse or diversion.[7]

Before prescribing ketamine in a compounded formulation for at home administration by the patient (sublingual troches, oral lozenges and tablets, etc.) the provider must obtain informed consent that clearly outlines the risks of such formulations and administration outside of a clinical setting. Unlike esketamine (Spravato®), compounded ketamine is not subject to Risk Evaluation and Mitigation Strategy (REMS) and thus presents comparatively increased risks due to varying formulations, dosages, and lack of onsite monitoring.[8] Use of ketamine products without monitoring by an adequately trained health care provider may put patients at risk for serious adverse effects, including excessive sedation, dissociation, changes in vital signs, non-fatal overdoses, bladder toxicity, and substance use disorder.[9, 10] Like all compounded drugs, compounded ketamine products are not approved by the FDA, and have no FDA-approved indications or routes of administration. [11]

[7] WI PDMP is not required to be reviewed if ketamine is ordered and administered in the clinic. *See* Wis. Stat. § 961.385 (2)(cs)2. However, Ketamine abuse is a known risk and can be safeguarded against by at a minimum checking WI PDMP. *See* Pai, Sudhakar, et al., *The Off-Label Use of Ketamine: A Challenging Drug Treatment Delivery Model with an Inherently Unfavorable Risk-Benefit Profile*, The Journal of Clinical Pharmacology, 2022, accp1.org/pdfs/documents/publications/policy/JCP-2021-Off-Label-Use-Ketamine-Challenging-Drug-Treatment.pdf

[8] *See* U.S. Centers for Disease Control (CDC) *For Health Officials: Responding to Disruption Events Involving Esketamine and Ketamine*, https://www.cdc.gov/overdose-prevention/media/pdfs/2026/09/26_Ketamine_Factsheet_508c.pdf.

[9] *See* Compounding Risk Alert, *"FDA warns patients and health care providers about potential risks associated with compounded ketamine products, including oral formulations, for the treatment of psychiatric disorders*," 10 October 2023, *U.S. Food and Drug Administration*, https://www.fda.gov/drugs/human-drug-compounding/compounding-risk-alerts

[10] *See* CDC guidance, note 10, *supra*.

[11] *See* Compounding Risk Alert, *"FDA alerts health care professionals of potential risks associated with compounded ketamine nasal spray*" 16 February 2022, *U.S. Food and Drug Administration*, https://www.fda.gov/drugs/human-drug-compounding/compounding-risk-alerts

Only prescribe such formulations to patients who have undergone a thorough evaluation and for whom the expected benefits outweigh the known risks, including abuse and misuse, psychiatric events, increases in blood pressure, respiratory depression, and lower urinary tract and bladder symptoms.[12] Before prescribing compounded ketamine, prescribers should thoroughly evaluate the available evidence concerning whether compounded ketamine is safer, more effective, or works faster than FDA approved drugs for the condition in question.

Patients prescribed oral ketamine for at-home administration should be educated regarding off-label use and risk, potential side effects, the importance of adhering to prescribed dosages, and how to recognize an emergency. Ensure that the patient has a plan that they can follow to seek emergency medical assistance if necessary.

RECORDS

The patient records should specify the form of ketamine prescribed (IV infusion, IV injection, oral and sublingual, nasal spray), justification for prescribed form, dose, dosage/administration instructions, and quantity.

Patient records must document informed consent of the following as appropriate: off-label status, risks, side-effects, diversion and misuse potential, risks of compounded formulations, and alternative treatment options.

Medical records must be stored in compliance with state and federal law.

COMPOUNDING

Pursuant to Wis. Stat. § 450.01(3), to compound "means to mix, combine or put together various ingredients or drugs for the purpose of dispensing." Compounding does not include mixing, reconstituting or other such acts that are performed in accordance with directions contained in approved labeling by the product's manufacturer and other manufacturer directions consistent with labeling.[13] Currently, compounded ketamine may take the form of IV/IM ketamine, nasal sprays, rapid dissolve tablets, troches, and/or suppositories.

The United States Pharmacopeia (USP) sets forth standardized requirements for compounding, including sterile compounding found in USP <797>, and has been adopted by the FDA and the Wisconsin Pharmacy Examining Board as the enforceable standard. USP

[12] *See* Compounding Risk Alert, *"FDA warns patients and health care providers about potential risks associated with compounded ketamine products, including oral formulations, for the treatment of psychiatric disorders*," 10 October 2023, *U.S. Food and Drug Administration*, https://www.fda.gov/drugs/human-drug-compounding/compounding-risk-alerts

[13] *See* 21 U.S.C. § 353a(e).

<797> applies to all individuals who prepare compounded sterile preparations (CSPs) and all places where CSPs are prepared for human and animal patients.

The "immediate use" provision of USP <797> does not supersede USP sterile compounding requirements. USP <797> should not be viewed as a workaround for the standards governing sterile product preparation. Failure to comply with these standards may result in unsanitary and unsafe conditions for patients,[14] and may result in professional discipline.

DISPENSING

A pharmacist should exercise caution before dispensing compounded ketamine to patients for unsupervised home use and should consider the risks associated with the particular formulation.[15],[16],[17] Depending on the circumstances presented, the standard of care may require the pharmacist to:

- Verify the intended use prior to dispensing.
- Utilize the PDMP to review the patient's prescription history and identify any signs of misuse or diversion.
- Follow all PDMP recording requirements.
- Provide consultation when required by Wis. Admin. Code ch. Phar 7.

Where a patient has been prescribed ketamine for at-home use (i.e. sublingual troches), the pharmacist should provide consultation to the patient (and their caregivers if applicable) regarding the proper administration of ketamine, potential side effects, and the importance of adhering to prescribed dosages.

ADMINISTRATION

Only a licensed physician, PA, APRN, or RN (via an order from, and under the supervision of a licensed prescriber) with the appropriate training and experience may administer ketamine intravenously, and ketamine should be administered intravenously only in locations with adequate equipment, medication, and qualified personnel available to restore or maintain an airway and stabilize the patient should an emergency arise.

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[14] *See Compounding Risk Alert, "FDA highlights concerns with compounding of drug products by medical offices and clinics under insanitary conditions," 25 October 2021, U.S. Food and Drug Administration, https://www.fda.gov/drugs/human-drug-compounding/compounding-risk-alerts*

[15] *See* Wis. Admin. Code § Phar 10.03(2) and (3).

[16] Under the FDA-required Spravato® REMS, a pharmacy may not dispense or deliver Spravato/esketamine directly to a patient for home use; it may only be dispensed to REMS-certified healthcare settings for supervised administration. *See SPRAVATO® REMS (Risk Evaluation and Mitigation Strategy)*.

[17] Physicians and PAs have broad authority to dispense prescription drugs within their scope of practice. APRNs are limited to dispensing at the treatment facility the patient is being treated. *See* Wis. Stat. §§ 448.01(9), 448.975(1)(b)1., Wis. Admin. Code §§ PA 3.06, N 8.09(2*)*.

The standard of professional practice for the intravenous administration of ketamine is the same for both off-label and approved uses.[18] During administration, adequate monitoring of heart rate, blood pressure, respiratory status, and sedation level at regular intervals is mandatory. After administration, the patient must remain under observation until exhibiting stable vitals, normal consciousness, and adequate airway control. The location should have emergency equipment/medication available to stabilize the patient should loss of airway or another adverse event occur.

The patient's post-administration status should be monitored and documented by a qualified practitioner. Discharge decisions should be made by a qualified practitioner, based on established criteria, taking into account the depth of sedation administered and all other clinically relevant factors.[19]. Post administration the patient should have documented goals, periodic measurement of response, adverse-effect surveillance, and criteria for continuation or discontinuation.

CONCLUSION

The practices involved in assessing, ordering, compounding, dispensing, and administering ketamine involve multiple professions. Individuals engaged in these practices must hold the appropriate license and practice within the scope of practice allowed by their credentials. The standards of practice do not change depending on whether the usage of ketamine is off-label or approved, or whether it occurs in a hospital, clinic, or in-home setting. Licensees who fail to comply with the laws governing their practice may be subject to disciplinary proceedings, as appropriate.

ACKNOWLEDGMENT SECTION

Alabama State Board of Medical Examiners, Position Statement on the Off-Label Use of Ketamine for the Treatment of Treatment-Resistant Depression in Outpatient Settings, p. 1, https://www.albme.gov/uploads/pdfs/Ketamine_Position_Statement_and_Guidelines.pdf

Alabama State Board of Medical Examiners, Guidelines for the Off-Label use of Ketamine for the Treatment of Treatment-Resistant Depression in Outpatient Settings, pgs. 2-4, https://www.albme.gov/uploads/pdfs/Ketamine_Position_Statement_and_Guidelines.pdf

Arizona State Board of Nursing, Advisory Opinion: Subanesthetic Ketamine Administration, issued November 15, 2025, https://azbn.gov/sites/default/files/AO-Administration-Monitoring-Subanesthetic-IV-Ketamine.pdf

Arizona State Board of Nursing, Position Statement: Advanced Practice Registered Nurses Prescribing Ketamine for Home Administration via Mail Order Pharmacies, revised January 25,

[18] Change in modality of care is only acceptable if it meets established regulations. *See* Wis. Admin. Code chs. Med 24, PA 3 and N 8.

[19] Standards for clinical practice guidelines are established by the American Society of Anesthesiologists

2025, https://azbn.gov/sites/default/files/PS-APRNs-Prescribing-Ketamine-for-Home-Administration-via-Mail-Order-Pharmacies.pdf

Commonwealth of Pennsylvania, Prescribing Guidelines for Pennsylvania: Guidelines for Safe Administration of Low-Dose Ketamine, revised October 7, 2020, www.pa.gov/content/dam/copapwp-pagov/en/health/documents/topics/documents/opioids/Ketamine%20Guidelines.pdf

Kentucky Board of Nursing, Advisory Opinion Statement: Role of Nurses in the Administration of Subanesthetic Dosing Ketamine for Psychiatric Disorders and Chronic Pain, issued February 2024, https://kbn.ky.gov/KBN%20Documents/aos43-admin-subanesthetic-dosing-ketamine.pdf

Model Policy: Regulation of Off-Label Ketamine Use in Freestanding and Telehealth Clinical Settings

New Mexico Board of Nursing Advisory: Ketamine, A Joint Advisory from New Mexico Boards of Nursing and Medicine, Review by Board of Pharmacy, issued May 11, 2023, https://www.nmmb.state.nm.us/wp-content/uploads/2024/05/ketamine-use-by-licensees-policy-2023-05-11.pdf

Soin, Amal, et al., Ketamine and its Regulatory Implications: A Review, accepted October 17, 2025, http://meridian.allenpress.com/jmr/article-pdf/111/3/41/3547500/i2572-1852-111-3-41.pdf

DRAFT

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:
Marjorie Liu **Program Lead, PDMP**	11/2/2026 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:	5) Attachments:	6) How should the item be titled on the agenda page?
11/12/2026	☒ Yes ☐ No	Prescription Drug Monitoring Program (PDMP) Updates

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	

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

1. WI PDMP Updates: Recent Enhancements
2. PDMP Participation Updates: Advanced Practice Registered Nurses

11) Authorization

Marjorie Liu — 11/2/2026

Signature of person making this request **Date**

Supervisor (if required) **Date**

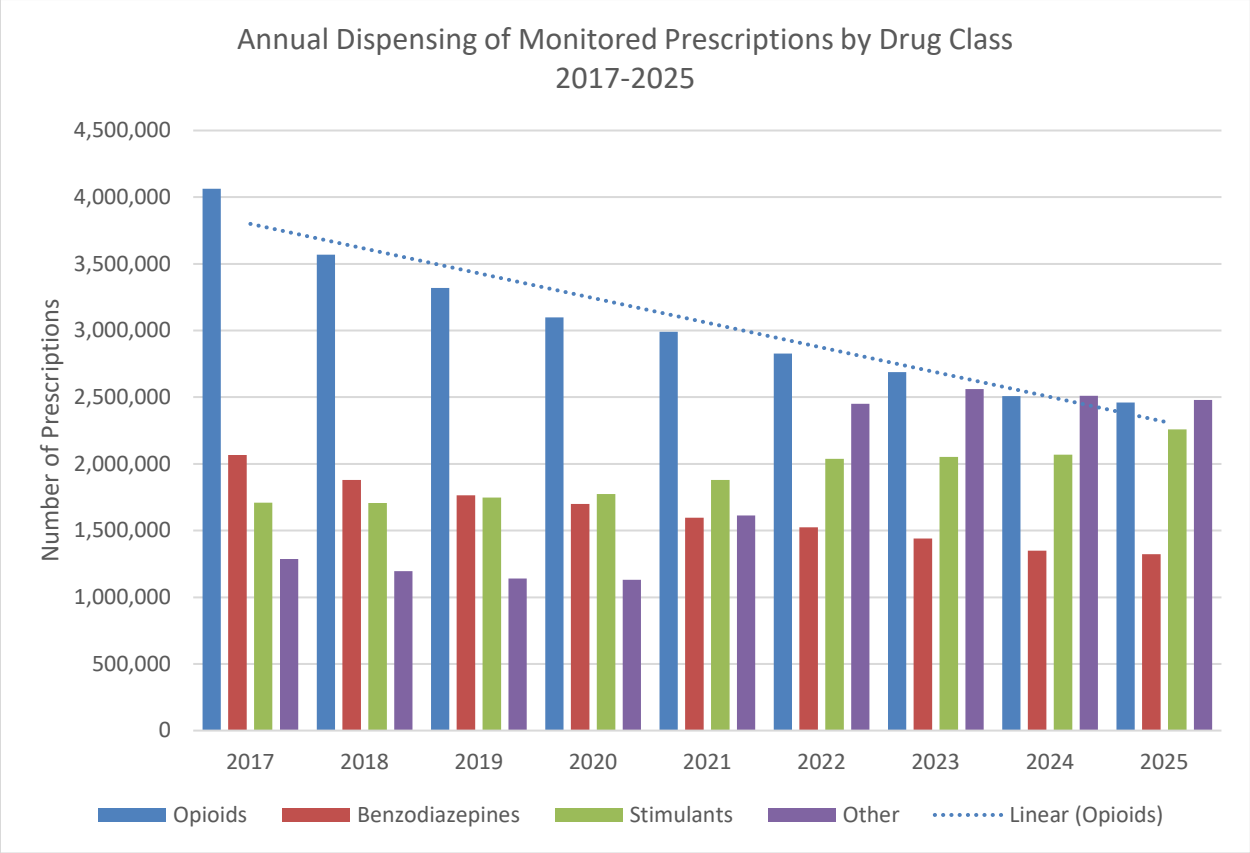
Executive Director signature (indicates approval to add post agenda deadline item to agenda) **Date**

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.

WISCONSIN | ePDMP

Wisconsin Prescription Drug Monitoring Program (PDMP) Overview

- 977,000 Dispensing Records Submitted per Month in 2025
- 69,300 Data-Driven Patient History Alerts per Month in 2025
- 57,200 Active Healthcare Professional Users
- 606,900 Patient Queries per Month by Prescribers and Delegates in 2025



Wisconsin Prescription Drug Monitoring Program (PDMP) Updates- Advanced Practice Registered Nurses (APRN)

ePDMP Registration (As of 9/30/2026)

Total Number of Licensed APRNs - Active w. Prescriptive Authority	14,106
Total Number of Licensed APRNs Registered with the WI ePDMP	8,925

ePDMP Usage (Q3 2026)

Number of APRNs with Rx Required of PDMP Review		5,000
Total Queries by APRNs (Including Delegates)		541,446
ePDMP Usage/Prescribing Compliance Rate	**ePDMP Usage**	**Number of Prescribers**
	100%	2,052
	99-75%	634
	74-51%	551
	50-26%	534
	25-1%	581
	0%	648

Prescribing of Monitored Prescription Drugs Q3 2026

	Total Unique Prescribers	**Total Prescriptions**
APRNs with Opioid Prescriptions	3,718	178,781
APRNs with Benzo Prescriptions	3,635	101,136
APRNs with Stimulant Prescriptions	2,625	235,161

Annual Opioid Prescribing Trend 2022-2025 (APRN)

	2022	**2023**	**2024**	**2025**
Opioid Prescriptions	687,396	706,553	692,289	698,984
Change from Prev. Year		2.8%	-2.0%	1.0%

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:** **10/28/2026** **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: **11/12/2026**	**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 Report: 2026 NCSBN Leadership and Public Policy Conference, Oct. 7-9, 2026 – Philadelphia, PA – Brzozowski, Kane, Malak, McNally	
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 **10/28/2026** **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.**			

Revised 03/2021