It is hard to believe that one year ago, at 2019 WNA Nurses Day at the Capitol, Senator Dale Kluessenger announced he was going to sponsor the Workplace Violence against Nurses legislation. With that announcement, 900-plus Nurses Day at the Capitol attendees met with their legislators asking for support of the legislation. These efforts made a difference because the legislation (SB 163 and AB 175) led by WNA were signed into law by Governor Evers on February 5, 2020 at the State Capitol.

The law, Wisconsin Act 97, will provide a Class H Felony for perpetrators who cause battery to Registered Nurses, nursing personnel and other health care providers during the course of employment. The penalty carries with it up to seven years of incarceration and/or a maximum $10,000 fine.

I would like to share a few thoughts with you in my first message as President. My first introduction to the Wisconsin Nurses Association was as a student at Columbia Hospital School of Nursing. We attended the WNA convention at the Olympia Resort in Oconomowoc, WI. It was a fantastic experience that I shared with my classmates and thought that someday I would like to run for office.

That was approximately forty years ago, and I am grateful to say that I am now the 50th President in the 110-year history of the Wisconsin Nurses Association. Since that time, I have watched tremendous and historic WI Nursing leaders. My hope is to make a difference as they have. I especially wish to thank Linda Gobis for her very long tenure and legal expertise that helped to shape the Association these past years. Her knowledge of both ANA and WNA was invaluable and I learned a great deal from her. The past presidents I have had the privilege of knowing and watching have provided me with role models beyond compare. And finally, Gina Dennick-Champion who works tirelessly to move nursing forward and is always there for WI Nurses, as is the staff of the WNA, Megan, Bri, and Teresa.

Even more exciting is that this year is the 200th Birthday of Florence Nightingale and the International Year of the Nurse and Midwife. It was serendipitous that on my way to the ANA Membership Assembly in November, while waiting for my plane, I decided to browse in the airport.
JOIN TODAY!

WNA/ANA Membership Activation Form

Important Information

First Name/MA/NPI Last Name

Phone Number

Date of Birth

Current Employment Status (eg. Full-time nurse)

Email Address

Employer

Check preference □ Home □ Work

Social Security Number

Professional Information

Type of Work Setting (eg. Hospital)

Email Address

WISCONSIN NURSES ASSOCIATION

Pamela Macari Sanberg, President

Elizabeth Markham, Vice President

Tanya Brueggen, Treasurer

Megan LeClair-Netzel, Secretary

Wendy Crary, Director-at-Large

Julie Olson, Director-at-Large

Laura Tidwell, Director-at-Large

Adey Tewolde, Staff Nurse Representative

Lisa Pisney, APRN Representative

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Megan Leadholm, Associate Director

Briona Dunbar, Events and Membership Coordinator

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Membership

JOIN TODAY!

Just because you received this newsletter doesn’t mean you’re a member of WNA.

Visit www.jooinana.org or complete this application.

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 Phone: (920) 324-4029

 recruiter@hfmshealth.org

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WE DID IT continued from page 1

Wisconsin Nurses Association (WNA) wishes to convey its sincere appreciation and thanks to Wisconsin Governor Tony Evers for signing Senate Bill 163/Assembly Bill 175 into law and the lead authors who championed this legislation: State Senator Dale Kn Briggs (R-Brookfield) and retired nurse, Representative Gae Magnafici (R-Dresser). This law provides another avenue of support for the 105,000 nurses and the over 60,000 certified nursing assistants in Wisconsin who experience this type of violence in the workplace. Other health care providers were added to the language as an amendment. WNA did not oppose this amendment.

WNA members provided very factual and compelling testimony during the public hearings that took place in the Senate Committee on Judiciary and Public Safety on September 17, 2019 and the Assembly Committee on Criminal Justice and Public Safety on September 18, 2019. Special thanks to the WNA members who testified: Pam Macari Sanberg, WNA President; Megan LeClair-Netzel, WNA Secretary; Marie Garwood, WNA Past President; Barbara Nichols, Past ANA and WNA President; and Gina Dennik-Champion, WNA Executive Director. The testimony at both hearings can be found on Wisconsin Eye at: Senate Wisconsin Eye and Public Safety.

Opposition to the legislation was brought forward by representatives from mental health, disabilities and Alzheimer-related agencies. These groups wanted an amendment that would exempt those individuals in one of those categories from being charged. WNA did not believe this was necessary as in order to be charged with battery the perpetrator must 1) know that the victim is a nurse and 2) intend to cause harm. In addition, nurses, because of our advocacy role, do not typically report these types of patients to law enforcement nor press charges.

In a press release, WNA President Pam Macari Sanberg offered the following quotes, “If nurses do not feel safe they cannot practice safely. This newly enacted law is an important part of a larger campaign of educating and empowering nurses to report workplace violence and hopefully avoid life threatening situations.”

According to the American Nurses Association, one in four nurses is assaulted at work. Data from two surveys conducted by WNA found there is an increase in workplace violence against nurses in Wisconsin. Workplace violence includes physical, verbal and sexual assault. Workplace violence against nurses can come from patients, family members and/or visitors.

WNA thanks all of you who contacted your legislators and Committee members asking for support. We have a good reason to celebrate the World Health Organization’s declaration of 2020 Year of the Nurse.

WNA President Letter continued from page 1

bookstore and found a book entitled “Nightingales - The extraordinary upbringing and curious life of Miss Florence Nightingale” written by Gillian Gill in 2004. It is a biography of not just Florence but of her entire family. I am still reading it but would like to quote this from his book about Florence: “Florence’s dreams were large scale, suited to women born into the ruling class of Great Britain, the hegemonic power of the nineteenth century. She dreamed of becoming a nurse, of developing nursing as a profession for educated, dedicated, capable young women like herself of making Britain a healthier, safer, and happier place for all of its citizens, of reasserting and rebuilding the whole system of health care in public institutions.” (p.xvii) Quite an undertaking for an individual.

Two hundred years later, Nursing continues to be a major force in health care. Ernest Grant, ANA President stated on the NPR radio program 1A on Jan 10, 2020 that there are currently 100 specialties where Nurses practice – “we are innovative – we are now everywhere not just in hospitals and we continue to contribute in the change of healthcare.”

An article in “Health Leaders”(2020) indicates that key take-aways for nurses leader this year includes: Tapping into the knowledge of the existing nursing workforce which will promote quality patient care and peer-to-peer support can help nurses cope with stressful situations.

WNA will continue to do this by:
• continuing to move forward with our APRN legislation;
• through initiating Affiliated groups, WNA will continue to bring the voices of Nursing together;
• we will renew the NFW to continue to provide educational and research scholarships;
• we will continue to look at the issues that plague our state related to opioids and human trafficking;
• we will bring WNA a new technology through Wisconsin Nurses CONNECT networking platform;
• Our Healthy Nurse program will continue to teach nurses a healthy lifestyle to avoid burnout and workplace violence – if you haven’t joined us for our conference in March before, please do so this March.

What does Nursing bring to the table of health care? How do we make a difference? Already the most respected and trusted profession, nursing makes an impact every day not only in giving care but in being scientific. There will be a lot of discussion about nurses this year and the goal is to continue that discussion to help nursing advance and continue to thrive in the state of WI.

I thank you for this opportunity and look forward to working with all of you. If you should have any questions or comments, please feel free to contact me at pam@wisconsinnurses.org.
Summary of the January 17, 2020 WNA Annual Meeting

WNA's Annual Meeting took place from 12:00 pm – 1:15 pm on Friday January 17, 2020. Members attended the meeting either on-site or virtually. The following is a summary of the meeting proceedings:

The meeting was called to order by WNA President Linda Gobis at 12:00 pm. There were not enough members for a quorum which resulted in the WNA Board of Directors voting on all action items. WNA Treasurer, Pam Macari Sanberg provided her report of the 2018 fiscal year-end which ended in income over expenses of $56,438. 2019 year-to-date shows about $9,000 in income over expenses. The Treasurer's Report can be found on WNA's website at the “About WNA” tab.

Action Item – Approval of an Additional Membership Option

The proposal to add an additional WNA membership option was passed at the 2020 Annual Meeting. This allows for the continuation of the Premier membership which is the current WNA membership dues category for those paying full, reduced or special dues. The new member dues option is the Standard which has one dues amount of $15.00 per month or $174.00/year. Both dues option are split with ANA. The Standard membership option is the result of a four year ANA member value pricing project. WNA participated in the piloted dues pricing project with ANA which resulted in a 25% growth in membership for WNA. The value pricing dues option was adopted at the June 2019 ANA Annual Meeting. The WNA Board of Directors brought a WNA Dues Policy proposal to the Annual Meeting that included both membership options. There are additional member benefits afforded the Premier member at both the ANA and WNA level as a means of showing appreciation for maintaining membership at this dues level.

Informational Reports

There were three written and distributed Informational Reports that summarized the activities that took place over the year related to the Professional Policies adopted at the January 18, 2019 Annual Meeting. The three Informational Reports were WNA Commitment to Mentoring, WNA Role in Addressing the Opioid Crisis, and WNA Organizational Affiliates. These reports can be found in this issue of The Wisconsin Nurse.

Installation of newly elected leaders

The newly elected members of WNA's Board of Directors, three Councils, Representatives to ANA Membership Assembly and Nominating Committee were announced and took their Oath of Office delivered by outgoing WNA President, Linda Gobis. Newly elected WNA President, Pam Macari Sanberg, took the Oath of Office delivered by WNA Executive Director, Gina Demnik-Champion.

Address to the Membership

Linda Gobis presented “Reflection on My WNA Presidency,” which provided an overview of her approximately six years as Interim and Elected WNA President. She presented a summary of WNA’s transformation as an effective and visible association as it relates to governance, financial improvement, increased member engagement, increased visibility and political advocacy.

WNA President Pam Macari Sanberg presented her goals and commitment to WNA and the profession of nursing. Pam is the 50th WNA President which happens to coincide with the 2020 Year of the Nurse and Midwife as declared by the World Health Organization.

Join us on Wisconsin Nurses CONNECT

WNA has launched Wisconsin Nurses CONNECT! Wisconsin Nurses CONNECT is our new social media platform developed just for you, the WNA member. Wisconsin Nurses CONNECT will allow you to network, connect and communicate with one another. The social media platform selected is Mighty Networks which has become a favorite among other associations like ours. Wisconsin Nurses CONNECT operates like a LinkedIn or Facebook format.

Wisconsin Nurses CONNECT is a true member engagement site designed to provide networking in real time, a home for our Mutual Interest Groups (MIGs), WNA Councils, Committees and Board of Directors. Wisconsin Nurses CONNECT will include member profiles, online courses, membership events, creation of other topics of interest that members can join, and one-on-one or group messaging.

By now you should have received an invitation to join Wisconsin Nurses CONNECT. Please join us! When you receive the email invite, click on the link provided and once you are on the platform follow the steps to join Wisconsin Nurses CONNECT.

We want Wisconsin Nurses CONNECT to provide you with an experience that will:

- Allow exclusive content and conversations between WNA members.
- Connect with nurses who share your interests.
- Assist you in making better, well-informed decisions about the things that are important to you.
- Support shared experiences through exchange of stories and ideas.
- Provide you with inspiration, thought-provoking conversations, and expert perspective each day.

We hope you will take advantage of this amazing membership benefit and opportunity. Do not hesitate to contact us if you have any questions or concerns by emailing WNA at info@wisconsinnurses.org.
2020 WNA Membership Assembly Highlights
Focus on Opioids and Role of Nurse

The January 17, 2020 WNA Membership Assembly took place at Buck & Honey’s Restaurant located in Monona, WI. WNA’s Task Force on the Role of WNA and Nurses in the Opioid Crisis planned a half-day education and information conference on opioids. The content included the pathophysiology of opioid addiction, treatment, policy considerations and examples of community-based recovery resources. The specific titles and presenters are as follows:

- **Addiction and Treatment of Opioid Use Disorder: What Nurses Need to Know**
  - Presented by Gina M. Bryan DNP, PMHCNS-BC, APNP, FAAN; Clinical Professor, UW-Madison School of Nursing and Psychiatric Nurse Practitioner, Rock County Mental Health

- **Panel: Community Resources to Support Recovery for Opioid Dependency**
  - Moderated by Kristin Brunsell RN, BSN, PhD student; Co-chairperson of WNA’s Opioid Task Force on Role of WNA and Nurses
  - Presenters:
    - Suzanne Madecky, RN, BSN; RN Case Manager, UW Hospital Emergency Department and Executive Director Dave Gallup Foundation, Watertown
    - Dr. Sarah Pagenkopf, PharmD, BCPS; Director of Pharmacy, Fort Health Care, Fort Atkinson
    - Emi Reiner, MPH, RN; Public Health Nurse, Jefferson County Health Department
    - Kimberly A. Hill, SAC, CCS, CSAC-IT; Program Director, Recovery Pathways Program-Southwestern Community Action Program.

- **Naloxone Training: Wisconsin Overdose Response Program**
  - Presenters:
    - Emi Reiner
    - Kimberly A. Hill

Feedback from the participants was very positive. The Task Force will review the content of the presentations to continue the development of recommendations related to the education of nurses and nursing students.

**WNA’s Annual Nightingale Tribute**

WNA has available to any family member or significant other a ceremony that can be provided during the funeral service of a nurse. The ceremony is *The Nightingale Tribute* which was first sanctioned in 2003 at ANA’s Annual Meeting. ANA State Nurses Associations received permission to offer the ceremony in their state. In 2006, WNA adopted this tribute as its official ceremony for honoring nurses who are no longer with us and continues to be offered annually. Over the years the Tribute has been offered during many funeral services. Names of deceased nurses can be forwarded to WNA for posting on the Nightingale Tribute site. WNA members who would like to volunteer to offer the ceremony at the funeral of a nurse can do so by emailing Bri, WNA Membership and Conference Coordinator at bri@wisconsinnurses.org. Anyone can contact WNA to request the Tribute be offered at a nurses funeral.

**Celebrating Florence Nightingales 200th Birthday and Year of the Nurse and Midwife**

The participants attending the Membership Assembly had the opportunity to celebrate the 200th birthday of Florence Nightingale and the World Health Organization’s declaration of 2020 being the Year of the Nurse and Midwife. There was a birthday cake to honor Nightingale as well as a unrecorded rendition of Happy Birthday.

WNA Sings Happy 200th Birthday Florence!
Background
The membership at the 2019 WNA Annual Meeting adopted recommendations related to Wisconsin’s opioid epidemic.

The approved recommendations are as follows:

1. Establish a Task Force to identify WNA’s role in addressing the opioid epidemic in Wisconsin.
2. Task Force members to include WNA’s three councils, related Mutual Interest Groups and other interested WNA members.
3. Task Force to explore the areas of nursing-related policy/regulatory, practice, research, education, workforce and leadership.
4. Task Force to explore forming partnerships with community-based organizations focused on prevention of drug dependency and promotion of mental health in the community.
5. Report progress to the WNA Board and at the 2019 WNA Annual Meeting.

Status
A Task Force was formed that consisted of representatives from WNA’s three Councils. The Task Force reviewed the four Recommendations and the nursing related practice, education, policy, workforce and leadership area that are to be explored.

The Task Force decided on exploring the educational gaps that exist for practicing and student nurses. The task force invited community-based nurses, pharmacists, and AODA-related service providers to assist in gaining a better understanding of the resources available among Wisconsin counties.

An educational offering on January 17, 2020 in conjunction with WNA Membership Assembly was developed by the Task Force. The content included the state of opioid addiction, treatment, the role of community resources and training on administration of naloxone.

The Task Force will review the participant evaluations from the program to determine other education needs of nurses and develop a plan for closing their knowledge gap.

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2019 Report and Recommendation: WNA Commitment to Mentoring New Graduates of Nursing Programs

Background
The membership at the 2019 WNA Annual Meeting adopted recommendations related to WNA’s commitment to mentoring new graduates of nursing programs.

The approved recommendation is as follows: That the WNA Board of Directors develop a formal policy that describes the purpose, goals, activities and outcomes related to mentoring of new graduates of nursing programs.

Status
The WNA Board of Directors learned of ANA’s National Mentorship Program initiative which was introduced in early 2019. More information about the initiative was provided at the 2019 ANA Membership Assembly. WNA representatives to the ANA Membership Assembly provided a report about ANA’s Mentorship Program to the WNA Board. The WNA Board reviewed the purpose of the ANA Mentorship Program and decided to table discussion and activities related to WNA’s mentoring program development to see the results of ANA’s approach. It is expected that the ANA report will be presented at the June 2019 WNA Membership Assembly. Below is information provided by ANA that the WNA Board would like to share with members. The ANA Mentorship Program launched their initiative which is termed the Mentorship Class of 2019-2020.

The ANA Mentorship Program is a structured career stage mentoring program designed to match mentees with nurses who have more professional experience. ANA members enroll online as mentors or mentees. ANA staff will match members and communicate these matches and appropriate next steps. For the first Mentorship Class, members enrolled as a Mentor, Mentee or both. During the enrollment process, members answered a series of demographic and career-related questions that allowed the ANA Mentorship Team to match mentors and mentees. ANA’s priority was to craft matches between more experienced RNs (mentors) and less experienced RNs (mentees). Therefore, years of nursing experience is the most important factor in the matching process. Nursing specialty was not considered.

ANA also developed a guided connection plan utilizing a Mentor and Mentee Online Community. The community assisted in developing mutually beneficial mentoring relationships. In addition, two webinars were held in October – one for mentees and another for mentors. ANA also provided best practices for mentor and mentee connections that consisted of every other week for a total of one hour per month based on an agreed upon schedule and mutual expectations.

Source: ANA Mentorship FAQs: https://higherlogicdownload.s3.amazonaws.com/ANANURSESPACE/8176cfba-e7f5-4ae3-a7dd-7d7dfe2c4458/UploadedImages/ANA-621-FAQ_document-1.pdf

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News from WNA CEP

WNA’s Continuing Education Approval Program (WNA CEP) was recently reaccredited by the American Nurses Credentialing Center’s Commission on Accreditation (ANCC COA). WNA CEP has been accredited as an approved continuing nursing education by ANCC since the program’s inception in 1975. We, again, are pleased to receive this honor.

The WNA CEP Committee is continually looking for qualified nurse peer reviewers to become part of our review team. Nurse peer reviewers must have at least a bachelor’s degree in nursing, and some level of involvement in continuing nursing education is helpful. Consider joining this dedicated group of nurses serving their professional association!

For more information, please contact Megan Leadholm at 608-221-0383, ext. 203 or megan@wisconsinnurses.org.

---

WNA Welcome

2020 Informational Report

Report and Recommendations on WNA’s Role in Addressing the Opioid Epidemic in Wisconsin

WNA Welcome

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WNA Welcome

2020 Informational Report

WNA Organizational Affiliates

Background
At the January 2019 WNA Annual Meeting the WNA Members approved the addition of another WNA membership category, Organizational Affiliate. Organizational Affiliate members are Wisconsin-based specialty-related nursing associations. The members of the WNA Organizational Affiliate join to increase communication among one another through sharing of information and collaborating to find solutions to common issues that face the nursing profession, regardless of specialty.

Each member of the Organizational Affiliate maintains its autonomy, but by utilizing combined efforts of experience and expertise, a shared and visible voice for the nursing profession will emerge. This in turn advances the nursing profession in supporting patient access to quality and safe nursing care throughout Wisconsin.

In addition to adding the Organizational Affiliate Membership category into the WNA Bylaws at the January 2019 Annual Meeting, the members identified the benefits for Organizational Affiliate membership. The WNA Board of Directors was charged to begin an implementation strategy.

Status
The WNA Board of Directors has developed and is implementing a plan that addresses the structure, outreach, dues and desired outcomes of the Organizational Affiliate. The Board has identified the specialty nursing associations that they would like to inform and invite to join. The member recruitment implementation plan will continue and remain a priority for 2020.

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856-667-7537 | Ebony.Moore@fmc-na.com

Kim Davie
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WNA provides political advocacy, professional development and strategies that support nursing practice, competence, and personal health.

### Nurse Workforce Health, Rights, & Safety

<table>
<thead>
<tr>
<th>Activity</th>
<th>APRNs Modernization Act</th>
<th>Legislation introduced. 2019 Senate Bill 249 and 2019 Assembly Bill 267 provide for separate license for Advanced Practice Nurses based on education, certification and school accreditation criteria. Did not progress this legislative session.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workplace Violence Legislation Signed into Law!</td>
<td>The Governor signed the Workplace Violence against Nurses Bill on Wednesday, February 5, 2020. This law creates a Class H felony to individuals who cause battery to a nurse. 2019 Wisconsin Act 97</td>
<td></td>
</tr>
<tr>
<td>Healthy Nurses for Wisconsin MIG</td>
<td>WNA’s Healthy Nurses is a Mutual Interest Group (MIG) working on their conference scheduled for March 28, 2020. The focus is on resiliency.</td>
<td></td>
</tr>
<tr>
<td>Preserving the Nurse Workforce Survey</td>
<td>WNA continues to monitor for any attempts to dismantle RN and LPN Wisconsin’s Nursing Workforce Survey.</td>
<td></td>
</tr>
<tr>
<td>APRN Roundtable</td>
<td>WNA’s APRN Roundtable continues to meet to work on issues related to medical staff bylaws, preceptorships and scope of practice.</td>
<td></td>
</tr>
<tr>
<td>Supporting Resiliency</td>
<td>WNA’s Workforce Advocacy Council is working on the development of a debriefing toolkit to support nurses involved in traumatic workplace events.</td>
<td></td>
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</tbody>
</table>

### Continued Competence & Conferences

WNA serves as a preceptor site for UW-Madison Undergraduate Nursing Students

### WNA 2020 Educational Offerings

| Nurses Role in the Opioid Epidemic in WI | Nurses Day at the Capitol March 4, 2020, Madison |
| Healthy Nurse Conference March 28, 2020, Elkhart Lake | APRN Clinical and Pharm Conference, April 24, 2020, Madison |
| Wisconsin Association of School Nurses Annual Conference 4/20 – 4/23, Wisconsin Dells | 2020 Wisconsin Center for Nursing Annual Conference, June 5, 2020, Pewaukee |
| Heart Health Symposium May 28, 2020, Pewaukee | Foundations of Faith Community Nursing Course, June 5 – 6 and June 19 – 20, WNA |

### Appropriate Nurse Staffing & Nurse Shortage

<table>
<thead>
<tr>
<th>Topic</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthcare Workforce Planning</td>
<td>The Wisconsin Council on Medical Education and Workforce (WCMEW), of which WNA is a member, focuses on healthcare workforce data and health care delivery design models.</td>
</tr>
<tr>
<td>RN Workforce Report</td>
<td>The Wisconsin Center for Nursing has released the 2018 RN Workforce Report. Go to: <a href="https://wicenterfornursing.org/">https://wicenterfornursing.org/</a></td>
</tr>
<tr>
<td>Future Nursing Leader Award</td>
<td>WNA is accepting nominations for the May 2020 Future Nurse Leader Awards. To find out more contact WNA at: <a href="mailto:info@wisconsinnurses.org">info@wisconsinnurses.org</a></td>
</tr>
<tr>
<td>Nurse Faculty Shortage</td>
<td>WNA and ANEW is looking at options for developing legislation to secure allocation of $10 million to financially support nurses interested in becoming nurse educators.</td>
</tr>
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### Patient Safety/Advocacy

<table>
<thead>
<tr>
<th>Topic</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team-Based Care &amp; Hyperlipidemia</td>
<td>WNA’s Clinical Expert Hyperlipidemia Panel is completing recommendations for health care organizations and teams that support decreasing the incidence of hyperlipidemia in WI.</td>
</tr>
<tr>
<td>Opioid Epidemic</td>
<td>WNA’s Opioid Task Force is working on education guidelines for RNs and nursing students in relation to identifying nurses’ role in addressing Wisconsin’s Opioid Epidemic.</td>
</tr>
<tr>
<td>Mandate CE for nurses</td>
<td>WNA is working on a legislative strategy that calls for mandatory CE for nurses as part of relicensure.</td>
</tr>
<tr>
<td>Reducing hyperlipidemia</td>
<td>WNA is developing learning tools and an awareness campaign to prevent, treat and reduce hyperlipidemia.</td>
</tr>
<tr>
<td>Healthy Hearts Initiative</td>
<td>WNA is working with others to provide an on-line platform that will connect health professionals to identify strategies to improving cardiovascular disease in WI. Go to: <a href="https://wisconsin-heart-health-cop.mn.co/">https://wisconsin-heart-health-cop.mn.co/</a></td>
</tr>
</tbody>
</table>

### YOU WERE REPRESENTED mid-November – mid-February

<table>
<thead>
<tr>
<th>Program</th>
<th>Activity</th>
<th>WHERE</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td>Advocacy</td>
<td>Attended Board of Nursing Meeting</td>
<td>DSPS</td>
<td>11/14/19</td>
</tr>
<tr>
<td>Workforce</td>
<td>Attended WI Council on Medical Education and Workforce Meeting</td>
<td>Madison</td>
<td>11/14/19</td>
</tr>
<tr>
<td>Advocacy</td>
<td>Meeting with Hospital Association Lobbyists and legislators on APRN Legislation</td>
<td>State Capitol</td>
<td>11/19/19</td>
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Wisconsin Nurses Association Updates

Welcome New WNA Members! 11/15/19 – 2/3/20

Artemis Alan
Mohammed Ansari
Kathryn Babcock
Amber Bachand
Mary Barneson
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Kizito Wemani
Kristy Werner
Ingra Wesby
Reha Zaidi
Harley Zelzer

Workforce
- Attended WI Council on Medical Education and Workforce Meeting
  - Madison 1/7/20

Grant
- Meeting with Mercy Health System on Team Based Care Activities
  - Janesville 1/13/20

Advocacy
- WNA Public Policy Meeting
  - Conf Call 1/13/20
- WNA Board of Directors Meeting
  - Conf Call 1/14/20
- WNA Membership Assembly and Annual Meeting
  - Madison 1/17/20
- WNA Board of Director Orientation and Strategic Planning
  - WNA 1/18/20
- Contracted Partners Meeting to discuss grant
  - Madison 1/22/20

Workforce
- Workforce Data Collaborative Meeting
  - DWD 1/27/20

Advocacy
- Governor Bill signing allowing APRNs to determine incapacity and DNRs
  - Gov. Office 2/5/20
- Governor Bill signing creating Felony for battery to a nurse
  - Gov Office 2/5/20
- Submitted testimony urging passage of transfer and storage of sexual assault kits
  - Madison 2/5/20

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Wisconsin Nurses Association Updates

March 2020  The Wisconsin Nurse  Page 9
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Friday, October 2
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Rothschild, Wisconsin

Questions?
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ANA Enterprise Gears Up for Global ‘Year of The Nurse’ in 2020

Silver Spring, MD – The ANA Enterprise announced its intent to elevate and celebrate the essential, robust contributions of nurses as the world recognizes 2020 as the “Year of the Nurse.”

The ANA Enterprise is the family of organizations that is composed of the American Nurses Association (ANA), the American Nurses Credentialing Center (ANCC), and the American Nurses Foundation. ANA Enterprise will celebrate Year of the Nurse by engaging with nurses, thought leaders and consumers in a variety of ways that promote nursing excellence, infuse leadership and foster innovation.

“As the largest group of health care professionals in the U.S. and the most trusted profession, nurses are with patients 24/7 and from the beginning of life to the end. Nurses practice in all healthcare settings and are filling new roles to meet the ever-growing demand for health and health care services,” said ANA President Ernest J. Grant, PhD, RN, FAAN. “Despite the major role nurses play in health care delivery and community outreach, there are opportunities to increase understanding of the value of nursing in order to expand investment in education, practice and research, as well as increase the numbers of nurses who serve in leadership positions.”

“We look forward to working with partner organizations to communicate a contemporary and accurate view of nurses and the critical work they do, as well as challenge boards and other influencers to commit to nursing and nursing leaders in order to improve the nation’s health,” said Grant.

Given the wide range of nursing roles in the U.S., ANA Enterprise will promote inclusivity and wide engagement of all nurses throughout Year of the Nurse. As an example, during 2020, ANA Enterprise will expand National Nurses Week, traditionally celebrated from May 6 to May 12 each year to a month-long celebration in May to expand opportunities to elevate and celebrate nursing.

The World Health Assembly, the governing body of the World Health Organization, declared 2020 the International Year of the Nurse and Midwife, in honor of the 200th anniversary of Florence Nightingale’s birth. The celebration offers a platform to recognize past and present nurse leaders globally, raise the visibility of the nursing profession in policy dialogue and invest in the development and increased capacity of the nursing workforce. This declaration is an extension of work initiated by the Nursing Now campaign to elevate the profession and ensure nurses are leading efforts to improve health and health care. ANA Enterprise is leading Nursing Now USA along with the Chief Nurse, U.S. Public Health Service; the University of North Carolina Chapel Hill; and the University of Washington, School of Nursing.

Nurses are encouraged to use #yearofthenurse and follow us on social media as we celebrate nurses in 2020.

The ANA Enterprise is the organizing platform of the American Nurses Association (ANA), the American Nurses Credentialing Center (ANCC), and the American Nurses Foundation. The ANA Enterprise leverages the combined strength of each to drive excellence in practice and ensure nurses’ voice and vision are recognized by policy leaders, industry influencers and employers. From professional development and advocacy, credentialing and grants, and products and services, the ANA Enterprise is the leading resource for nurses to arm themselves with the tools, information, and network they need to excel in their individual practices. In helping individual nurses succeed—across all practices and specialties, and at each stage of their careers—the ANA Enterprise is lighting the way for the entire profession to succeed.
The Impact of Nurse Practitioners on the Opioid Crisis

Tina Bettin DNP, MSN, RN, FNP-BC, APNP, FAANP

The United States is in the midst of an “Opioid Crisis.” We have all heard this whether in our professional circles or in the popular press. There have been a number of initiatives in recent years hoping that health care providers will be able to have a positive impact in reversing the opioid crisis. One of these initiatives includes opioid prescribing guidelines by the Center for Disease Control (CDC). Within the State of Wisconsin, there were also initiatives implemented. One of the initiatives was the PDMP (Prescription Drug Monitoring Program), which required providers to query a patient whom they were prescribing controlled substances to. Another initiative implemented by the Board of Nursing (BON) was the continuing education requirement for “16 contact hours per biennium in clinical pharmacology or therapeutics relevant to the advanced practice nurse prescriber’s area of practice; including at least two contact hours in responsible prescribing of controlled substances” (Wisconsin Administrative Code N8.05(1)). Additionally, there were Federal regulation changes. In 2016, the Comprehensive Addiction and Recovery Act (CARA) implemented a five-year pilot program granting nurse practitioners (NPs) the authorization to prescribe medically assisted treatments (MATs) to treat opioid use disorder. In October 2018, the Substance-Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) Act was signed into law, permanently authorizing NPs to prescribe MAT. At the same time in 2018, a five-year pilot program was implemented for the other APRNs (CRNAs, CNSs, and CNMs).

Some may question what if any impact are nurse practitioners having on the opioid crisis. As of May 2019, over 19,000 NPs are authorized by the Drug Enforcement Agency (DEA) to prescribe MAT. The data is coming in which is very supportive of NPs prescribing MAT. NPs in reduced or restricted practice states are less likely to have Buprenorphine Waiver than NPs in Full practice authority (FPA) states. When a NP in a FPA state takes the Waiver Course, that NP can immediately start prescribing Buprenorphine which has a direct impact on the opioid crisis. Whereas, there are road blocks in reduced and restricted states. For example, in Wisconsin, because NPs have a collaborative agreement, to prescribe Buprenorphine, the NP must have a collaborating physician, who also has the Buprenorphine Waiver. This can take time and money to find this collaborating physician.

To prescribe MAT, the prescriber must complete a Buprenorphine Waiver Training Course, which is 24 hours in length. This course is offered free through AANP.

Please note WISCONSIN is in the bottom quartile

Source: AANP

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For more information, contact Linda Krueger
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The Role of the Advanced Practice Nurse in Faith Community Nursing

Kathryn A. Dykes, RN, MSN, APNP

In addition to the basic general knowledge of the BSN and preparation as a Faith Community Nurse (FCN), an advanced practice nurse (APN) brings an additional array of professional skills to the FCN role. In addition to the specialty area of expertise for which the APN is prepared at the Masters’ or Doctoral level, the APN also brings additional life experience, leadership skills and knowledge, based on community involvement. While the BSN prepared FCN is able to implement community-focused or population-focused care and has knowledge of community agencies and resources, the APN prepared at the Masters or Doctoral level can provide health care through evidence-based knowledge, theory, research, and consultation. In addition to spiritual maturity and leadership skills which have been developed through participation in the faith community, the APN is able to bring additional nursing education, professional expertise, and life experience to the FCN role.

The APN’s success, depending on their educational preparation and life experience, can include in-depth knowledge of specific demographic groups within the faith community (for example, geriatrics, women’s health, pediatrics) as well as specific health concerns: mental health, addictions, childhood vaccinations, Alzheimer’s Disease, opioid abuse, educational theory/experiences or preparation in administration and management, to name just a few. These skills not only prepare the APN for service within the faith community in ways that no other parish staff member is prepared to do but give the APN the opportunity to serve as the primary FCN or as a consultant to one or more FCN’s.

For example, the APN has learned advanced community assessment skills which can be partnered with the needs identified by other non-nurse faith community staff members. Perhaps the faith community is looking for offerings that will enhance services and membership of younger parents and children, as this demographic group has been less involved in the faith community. In discussing general community health concerns for this particular demographic group, the FCN determines that there are many concerns about the safety of childhood vaccinations. An educational program with a Q&A session could be offered on the topic of childhood vaccines. Written educational items could be offered in the weekly bulletin, or the parish newsletter, or just as a flyer for anyone who may be interested. Perhaps the correct use of car seats needs to be addressed for a particular demographic group in the parish (i.e. non-English speakers, or grandparents who are caring for grandchildren). The APN may contact a community agency to discuss partnering for a grant for an educational program related to car seat use in order to reduce the number of accidental deaths and injuries by infants and young children in a certain community. The APN may write and submit the grant application, offer educational items could be offered in the weekly bulletin, or the parish newsletter, or just as a flyer for anyone who may be interested. Perhaps the correct use of car seats needs to be addressed for a particular demographic group in the parish (i.e. non-English speakers, or grandparents who are caring for grandchildren). The APN may contact a community agency to discuss partnering for a grant for an educational program related to car seat use in order to reduce the number of accidental deaths and injuries by infants and young children in a certain community. The APN may write and submit the grant application, offer current legal and effective car seats at a reduced cost, have educational information written and available for members of the faith community and beyond (outreach to the local community), offer a day for one-on-one education for any interested attendees to have car seats safely installed in their vehicles, and perhaps offer a blessing of car seats by the clergy of the faith community. Research about the effectiveness of the program on knowledge and attitudes toward car seat safety could be conducted by the APN or the FCN in consultation with the APN.

Another example may be a request for an educational program on dementia and Alzheimer’s Disease. Perhaps the FCN who is a GNP or member of the Alzheimer’s Association Board of Directors could offer an educational program for the Senior Group from the parish at one of their monthly meetings. It may be discovered through discussion after or during this program, that there are a significant number of parishioners who are caregivers for a family member or spouse with dementia. Perhaps an ongoing caregiver support group with either an educational focus or a focus of emotional support, or a blend of both, is needed within the faith community. The APN could offer to lead a support group for caregivers, offer a podcast on a regular basis related to the topic of dementia, or offer information from the Alzheimer’s Association within the parish library as a resource for all in the faith community.

Perhaps in the parish blood pressure screening program, there are a few participants who are having difficulty controlling their blood pressure despite their regular use of prescribed medications from their health care provider. The APN who is offering services through the blood pressure screening program, while not prescribing medications, can offer information to the participant about various other medications and lifestyle changes that may improve that person’s outcomes in terms of hypertension control and reducing risk factors for cardiac disease and strokes. By using evidence-based information, the APN can guide the person in terms of what to discuss with their primary health care provider, how to evaluate health information they may find in the general media, and provide health counseling in terms of lifestyle changes in diet, exercise, or other behavior. The APN is able to track the effect of the blood pressure screening program on the individuals who participate, such as how many were able to achieve satisfactory readings by participation in the screenings and one-on-one health counseling, or by using the program’s educational materials. The APN could develop evaluation forms in order to collect blood pressure readings as the persons participate in the screening program, as well as qualitative data obtained by asking participants how they feel the program has affected their health. Use of research strategies to evaluate program outcomes will help to advance the practice of chronic disease management within a faith community setting.

By using advanced knowledge, professional skills, and personal experience, and with the intention of inclusion of faith and spirituality, the APN is in a key position to be an instrument of change within the faith community. This can be done by the APN as the FCN or as a consultant to FCN’s in a leadership/partnership capacity. The involvement can be extensive or focused on a particular project or program, such as outcome evaluation of a particular parish nurse and their impact on their individual faith community. Outcome evaluation can increase the recognition of the positive value of the FCN role in today’s health care continuum.

References


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News from the Wisconsin Center for Nursing

**Barbara Nichols, PhD(H), MS, RN, FAAN, Executive Director Wisconsin Center for Nursing**

The Wisconsin Center for Nursing is a 501c3 non-profit organization that was created in 2006 to engage nurse and healthcare organizations, public and private academic programs, government agencies and related service providers to work together as collaborative partners in an effort to ensure an adequate, competent and diverse nursing workforce for the people of Wisconsin. Through partnerships with the Wisconsin Department of Workforce Development, it strives to accurately and continually collect, analyze and disseminate nursing workforce data to assist healthcare organizations and academic institutions to fully assess both nursing resources and nursing education so they are utilized effectively now, and in the future.

Work of the Center

1. The Center conducts educational surveys with the assistance of the Administration of Nursing Education of Wisconsin (ANEW) that assess program specific data for approved and accredited nursing programs in the State including recruitment and retention of faculty and students.
2. Analyzes nurse licensure data on a biennial basis:
   - Even numbered years, Registered Nurses (RNs), uneven numbered years Licensed Practical Nurse (LPNs)
   - Workforce supply and demand, demographics and education trends and detailed characteristics of the Nursing Workforce

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**Wisconsin 2019 LPN Workforce Survey**

### At a Glance Information

<table>
<thead>
<tr>
<th>Total number of respondents</th>
<th>% of applicable respondents</th>
</tr>
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<tbody>
<tr>
<td>10,306</td>
<td>100%</td>
</tr>
</tbody>
</table>

- **Gender**: Female: 7,091 (69%)
- **Race/Ethnicity**: White: 8,342 (83.7%)

### Wisconsin Labor Market

<table>
<thead>
<tr>
<th>Primary place of work in Wisconsin</th>
<th>% of applicable respondents</th>
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</thead>
<tbody>
<tr>
<td>Extended Care Facility (home, Assisted Living, etc)</td>
<td>3,299 (42.2%)</td>
</tr>
<tr>
<td>Hospital or Critical Access Hospital</td>
<td>2,657 (34.7%)</td>
</tr>
<tr>
<td>Home Health Care (HHC)</td>
<td>892 (11.5%)</td>
</tr>
<tr>
<td>Private Community Health/School/Other</td>
<td>415 (5.4%)</td>
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</table>

<table>
<thead>
<tr>
<th>Number of years in current primary job</th>
<th>% of applicable respondents</th>
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<tr>
<td>8.29 (n=8,596)</td>
<td>==============================</td>
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</table>

<table>
<thead>
<tr>
<th>Average years of LPN experience</th>
<th>% of applicable respondents</th>
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<tbody>
<tr>
<td>17.88 (n=7,871)</td>
<td>==============================</td>
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</table>

<table>
<thead>
<tr>
<th>Has training in emergency response</th>
<th>% of applicable respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>6,391 (66.8%)</td>
<td>==============================</td>
</tr>
</tbody>
</table>

### Age distribution

- **Below 25**: 271 (4.1%)
- **26-30**: 1,228 (19.5%)
- **31-35**: 1,200 (18.5%)
- **36-40**: 1,250 (18.8%)
- **41-45**: 1,392 (20.9%)
- **46-50**: 1,737 (25.9%)
- **51-55**: 1,066 (15.9%)
- **56-60**: 800 (11.9%)
- **61-65**: 313 (4.7%)
- **66 and older**: 267 (4.0%)

### Highest degree held in nursing

- **Associate Degree**: 3,079 (35.3%)
- **Bachelor Degree**: 2,177 (25.5%)
- **Master Degree**: 1,671 (19.5%)
- **Doctorate Degree**: 253 (3.0%)
- **Other**: 2,471 (28.8%)

### Enrolled or planning to enroll in further nursing education in the next 2 years

- **3,216 (33.6%)**

### Place for further education in nursing

- **Associate Degree**: 1,087 (12.0%)
- **Bachelor Degree**: 1,112 (13.0%)
- **Master Degree**: 472 (5.5%)
- **Doctorate Degree**: 48 (0.6%)
- **Other**: 3,495 (40.6%)

### Employment status

- **Full-time**: 3,368 (40.7%)
- **Part-time**: 1,265 (15.3%)
- **Per diem**: 1,405 (16.8%)
- **Float**: 1,275 (15.2%)
- **Reserve**: 201 (2.4%)
- **Temporary**: 113 (1.4%)
- **Not working**: 95 (1.1%)

---

### Technical Notes:

- The survey encompassed a multi-disciplinary data set of the Wisconsin LPN workforce, including demographic data, education and employment trends and characteristics of the workforce. The survey was conducted via paper and telephone surveys and online surveys with the assistance of the University of Wisconsin Madison School of Nursing.

- The survey was conducted by the Wisconsin Center for Nursing (WCN) with the assistance of the Department of Safety and Professional Services (DSPS) and the Wisconsin State Legislature.

- Drill-down security and confidentiality were maintained throughout the project, and results are provided to the WCN and its partners to improve the Wisconsin health workforce.

- The full report will be available at: [wisconsincenterfornursing.org](http://www.wisconsincenterfornursing.org) (March 2020)
Debriefing for Nurses After a Crisis: CISD and/or Support of our Peers

Suzanne Marnocha PhD, RN, MSN, CCRN ret.
Licensure Program Director, UW Oshkosh

As a member of the Wisconsin Nurses Association (WNA) Board of Directors, I have had the privilege to work with colleagues on issues that are vital to the health and welfare of nurses in the state of Wisconsin. Two articles were published in 2019 from our members including Adrienne Badger, Cheryl Deering, and Michelle Hagen, and Olivia Schroeder’s article on preparing our nursing graduates to face burnout. The current article will introduce the idea of caring for ourselves and others and instituting a critical incident stress debriefing (CISD) after a crisis approach in our agencies.

Many Registered Nurses (RNs) are exposed to critical incidents which may or may not predispose them to Post-Traumatic Stress Disorder (PTSD). The purpose of CISD is to create a place for nonjudgmental information-sharing and event-processing between peers. Our respected peers in preceptors, peers or mentors shame new or accumulated and unresolved stresses may call for increased peer support and individual counseling. (Excerpted in part from Hanna & Romana). There are many articles that have been published concerning critical stress debriefing, but these address the need for changes in our nursing work culture. Critical incident stress debriefing (CISD) has not been used as a standard of practice within our nursing culture and now is the time for change.

Victim and perpetrators, peers or mentors shame new or one individual may be non-stressful to another. (Excerpted from FV CISDM brochure)

What is a critical incident and when should you call for a CISD?

Nursing experiences are fraught with situations that can lead to extreme stress. However, events that could lead to a need for CISD include episodes of unusual events such as prolonged rescues/resuscitations, hostage situations, workplace violence, terrorism, mass casualty, industrial accidents, the unexpected death of a patient, death of a child, or death of a colleague or several difficult situations in a short period of time.

We may have experienced examples of important and intense incidents that may not rise to the level of a crisis and instead are events that can disturb the sense of peace and purpose of the healthcare team. These events can accumulate and contribute to staff burnout which ultimately detracts from care quality. These episodes have been highlighted in the literature especially when preceptors, peers or mentors shape new or fellow nurses. An example may be an employee who spends ‘too much time with a family after loss that negatively affects the staff as a group.

Critical Incident Stress Debriefing (CISD)

CISD is a process that is specifically designed to prevent or mitigate the development of post-traumatic stress (PTS) among helping professionals. The process is designed for groups who have direct experience with an unusually traumatic event, a ‘critical incident.’ Once the nurse manager becomes aware of the need for a debriefing, a professional peer skilled in CISD should be asked to assist with the process. A time that is convenient for debriefing is agreed upon by the nurse manager, the professional peer, and the affected staff.

All individuals involved in the distressing situation should be invited to participate in the debriefing session. The CISD approach is based on team awareness and support. A single group session lasts between 30 minutes and three hours, depending on the nature of the event. If the event has led to a death more time may be taken and warrant numerous group and one-on-one sessions.

Events that are more ordinary, such as daily sources of distress, are less likely to receive managerial attention, yet they can become more permanently damaging to the workgroup and to patient care if continuously unacknowledged. Accumulated and unresolved stresses may call for increased peer support and individual counseling.

Shockingly, statistics on nurse suicide have not been tracked until very recently. We know that the numbers of nurse suicides nationally have risen and some institutions are seeing the need to formalize debriefing after a crisis and other supportive interventions for individuals via the confidential Employee Assistance Program (EAP). There are additional resources in the reference list including research that helps to stop and prevent suicide among nurses. The American Nurses Association website is filled with resources for nurses to assist with these vital changes.

Are you or others you work with at risk? What can you do?

If you are at risk, please think about ways to take care of yourself and your needs. Help them identify issues of stress, burnout, and suicidal ideation. Engage an active plan that leads to healthy staff and encourage methods to prevent these situations. Be part of the change in the culture in nursing that supports healthy lifestyles and supporting each other.

If you know someone else who is struggling, do not remain silent but advocate for them. Other nurses do amazing work for others but sometimes find it difficult to advocate for ourselves.

For those of you actively working please speak with your nurse managers about issues in your unit or agency. Help them identify issues of stress, burnout, and suicidal ideation. Encourage an active plan that leads to healthy staff and encourage methods to prevent these situations. Be part of the change in the culture in nursing that supports healthy lifestyles and supporting each other.

If you know someone else who is struggling, do not remain silent but advocate for them. Other nurses do amazing work for others but sometimes find it difficult to advocate for ourselves.


Wisconsin Nurses Association (WNA) Debriefing page. Wisconsin Nurses Association / WNA Healthy Nurses Wisconsin.

https://www.wisconsinurses.org/healthy-nurses-wisconsin/
WNA Legislative Update - 2/12/20

WNA’s Public Policy Council has reviewed and taken a position on the following legislation introduced this 2019-2020 Legislative Biennium. Positions are decided based on WNA's 2019-2020 Public Policy Agenda and current Position Statements. The information below includes the Bill numbers, topic, WNA position, and bill status. WNA’s Public Policy Council has been spending time reviewing legislative proposals. Below is a summary of the bills that WNA has a position.

Support
WNA Position: Continue state funding of services for children, families and vulnerable populations. This bill provides a tax credit up to $1000.00 per year. The expenses include amounts spent to improve the claimant’s primary residence to assist the family member, equipment to help the family member with daily living activities, and obtaining other goods or services to help the claimant care for the family member.

Assembly Bill 139 & Senate Bill 134
Relating to: reporting of naloxone administration by ambulance service providers.

Support
WNA Position: The collection of data related to the administration of naloxone is another important tool to addressing the opioid overdose crisis for Wisconsin.

Assembly Bill 162 & Senate Bill 155
Relating to: participation in the Volunteer Health Care Provider program by agencies serving homeless individuals.

Support
WNA Position: Registered nurses are critical to achieving the goals of improving population health and reducing health care costs in Wisconsin. Provides access to care for the homeless population. Which in turn can reduce community detention and hospital readmissions.

Assembly Bill 248 & Senate Bill 262
Relating to: eliminating personal conviction exemption from immunizations.

Support
WNA Position: Support community-based prevention services including screening, nutrition, immunizations, family planning, violence prevention and health education across the life span.

Assembly Bill 267 & Senate Bill 249
Relating to: advanced practice registered nurses, extending the time limit for emergency rule procedures, providing an exemption from emergency rule procedures, and granting rule-making authority.

Active Support
WNA Position: Allow registered nurses and advanced practice registered nurses to practice to the full extent of their education, training, experience and license to improve patient access and outcomes. This legally acknowledges Advanced Practice Registered Nurse (APRN) in state statute. An APRN license will be issued if the following criteria are met: graduate with a master’s degree or higher from an accredited nursing program and the individual has national board certification related to their role. This bill will provide increased access for patients and safety.

Assembly Bill 278 & Senate Bill 254
Relating to: certifications for advanced directives and findings of incapacity related to powers of attorney for health care.

Amendment added that provides coverage for hospital health
Status: Assembly Action: 1/21/20 – SB 163 received by the Assembly and passed out of the full Assembly 10/17/19 Passed out of the Committee on Criminal Justice and Public Safety with one amendment. Assembly Substitute Amendment 1. 9/19/Public Hearing.

Status: Senate Action: 1/27/20 – Correctly enrolled, Moved on to the Governor for consideration. Passed the full Senate 9/25/19 – Passed out of the Senate Committee on Judiciary and Public Safety. Public Hearing September 17, 2019.

2/5/20 – Signed by the Governor 2019 Wisconsin Act 97

Assembly Bill 178 & Senate Bill 166
Relating to: eligibility for physician, dentist, and health care provider educational loan assistance programs.

Support
WNA Position: Increase the supply of nurse educators through a variety of funding options that include student loans, loan forgiveness, fellowships, and financial aid. This bill provides loan forgiveness to nurse midwives, nurse practitioners and mental health providers if he or she agrees to practice in a free or charitable clinic or a mental health shortage area for the required time. Two amendments added: 2019 SA2-SB166 and 2019 SA3-SB166.

Status: Assembly Action: 11/12/19 – Assembly to vote on AB and SB. Passed out of Assembly Committee on Health. Public Hearing 7/10/19.

Senate Action: 11/5/19 – to be voted on by the full Senate. 9/10/19 – Exec’d out of the Senate Committee on Universities, Technical Colleges, Children and Families. 8/27/19 – Public Hearing. Governor Action: 11/26/19 – Signed by the Governor.

Assembly Bill 234 & Senate Bill 200
Relating to: storage and processing of sexual assault kits and requiring the exercise of rule-making.

Support
WNA Position: Protect the rights and safety of patients in and across all health care settings. This bill addresses forensic evidence collected by Sexual Assault Nurse Examiners (SANE) has assurance that the evidence kit backlogs are addressed and instill a timely and patient centered process for the collection and processing of kits.

Status: Assembly Action: 10/8/19 – SB 200 received from the Senate. Waiting to be scheduled for a vote by the full Assembly.

Senate Action: 10/8/19 – Passed the full Senate. 10/3/19 – Exec’d out of the Committee on Insurance, Financial Services, Government Oversight and Courts. 9/19/19 – Public Hearing.

Assembly Bill 235 & 2019 Senate Bill 217
Relating to: diabetes care and prevention plan

Support
WNA Position: Provide accessible and affordable prescription drugs, medical supplies, and other health services, including dental and preventative services. Approximately 356,000 adults and 6,500 children and adolescents in Wisconsin have been diagnosed with diabetes and is the 7th leading cause of death in Wisconsin. This bill requires the DHS, in consultation with the ETF, to develop and implement a plan to reduce the incidence of diabetes in WI, improve diabetes care, and control complications associated with diabetes.

Status: Assembly Action: 1/15/20 – Voted out of Committee. 10/8/19: Received the SB 225 which was passed by the Senate. Waiting for the bill to be scheduled for a vote by the full Assembly. Committee on Health held a Public Hearing 7/10/19.

Senate Action: 10/8/19 Passed the full Senate. 9/24/19 – Voted out of the Senate Committee on Health and Human Services. 8/6/19 Public Hearing.

Assembly Bill 242 & 2019 Senate Bill 225
Relating to: establishing a Palliative Care Council.

Support
WNA Position: WNA collectively and collaboratively advocates for access to comprehensive and coordinated health care which enables all individuals to achieve optimal quality of life across the continuum. This bill requires the Department of Health Services to establish a state wide palliative care consumer and professional information and education program and must make available on its Internet site information and resources regarding palliative care.

Status: Assembly 12/17/19 Assembly Amendment 1 offered.

Status: Senate No action.

Assembly Bill 287 & 2019 Senate Bill 254
Relating to: creating a nonrefundable individual income tax credit for certain expenses incurred by a family caregiver to assist a qualified family member. (FE)

Support
WNA Position: Eliminate bullying and violence in the workplace. This bill provides the same penalty for battery i.e. Workplace Violence, to a nurse regardless of employment setting. The criminal penalty is a Level H felony subject to a $10,000 fine and/or six years of incarceration.

Assembly Bill 175 & Senate Bill 163
Relating to: causing bodily harm to a nurse and providing a penalty.

Active Support
WNA Position: Eliminate bullying and violence in the workplace. This bill provides the same penalty for battery i.e. Workplace Violence, to a nurse regardless of employment setting. The criminal penalty is a Level H felony subject to a $10,000 fine and/or six years of incarceration.

Assembly Bill 287 & 2019 Senate Bill 254
Relating to: creating a nonrefundable individual income tax credit for certain expenses incurred by a family caregiver to assist a qualified family member. (FE)
Legislative Updates

Actively Support
WNA Position: Assure nurses’ role in coordinated, community-based health care services that include home care, long-term care, palliative and end-of-life care. This bill allows an attending physician assistant or attending advanced practice registered nurse to issue do-not-resuscitate orders and allows, unless a health care power of attorney specifies otherwise, one physician and one qualified physician assistant or nurse practitioner to personally examine principals and make findings of incapacity upon which a health care power of attorney becomes effective.

Status: There is a proposed amendment that addressed WNA’s concern about APRNs being defined in 441.01 when there is a lack of state statute in Wisconsin’s Nurse Practice Act that defines them. The amendment removes this. The bill substituted Advanced Practice Clinician.

Assembly Action: 11/7/19 – Passed by the Assembly 10/30/19 – Voted out of the Assembly Committee on Health with an amendment that greater clarity on the bill: Assembly Amendment 1 10/16/19 – Public Hearing.

Senate Actions: 1/21/20 – Passed the full Senate, 1/8/20 Available for scheduling, 1/8/20 – Voted out of committee, 11/20/19 Public Hearing Committee on Health and Human Services. 11/8/18 Received AB 287 by the Assembly.

2/3/20 – Signed by the Governor. 2019 Wisconsin Act 90

2019 Assembly Bill 304 & 2019 Senate Bill 286
Relating to: permitting pharmacists to prescribe certain contraceptives, extending the time limit for emergency rule procedures, providing an exemption from emergency rule procedures, granting rule-making authority, and providing a penalty.

Support
WNA Position: Support community-based prevention services including screening, nutrition, immunizations, family planning, violence prevention and health education across the life-span.

This bill permits a pharmacist to prescribe and dispense hormonal contraceptive patches and self-administered oral hormonal contraceptives, subject to limitations described in the bill.

Status: Assembly Action: 11/7/19 – Passed the Assembly, 10/30/19 – Exec’d out of the Committee on Health with one assembly amendment Assembly Amendment 1 to amendment Assembly Amendment 1. Assembly Public Hearing 8/14/19.

Status: Senate Action: 1/8/20 Available for scheduling, 1/8/20 – Voted out of the Committee with adoption of Senate Amendment 1. 11/20/19 Public Hearing Committee on Health and Human Services. 11/8/19 AB 304 – forwarded to Senate.

2019 Assembly Bill 358 & 2019 Senate Bill 332
Relating to: tracking of sexual assault kits in sexual assault cases and making an appropriation. (FE)

Support
WNA Position: Protect the rights and safety of patients in and across all health care settings. This bill limits the use of restraints pregnant and postpartum people who are in the custody of a correctional facility.

Status: Assembly Action: 9/5/19 –Introduced and referred to Committee on Corrections

Senate Action: 9/24/19 – Amendment offered; 8/14/19 – Public Hearing; 7/10/19 – Introduced and referred to Committee Judiciary and Public Safety.

2019 Assembly Bill 410 & 2019 Senate Bill 380
Relating to: coverage of services under Medical Assistance provided through telehealth and other technologies, extending the time limit for emergency rule procedures, and granting rule-making authority. (FE)

Support
WNA Position: Provide access to telehealth services and care for the patient that are delivered or coordinated by registered nurses and/or advanced practice registered nurses.

Status: Assembly Action: 11/7/19 – SB 380 passed by the Assembly, 11/7/19 – Laid on the Table; 11/5/19 – Received SB 380; 11/5/19 – Sent to Committee on Rules; 10/30/19 – Passed out of Committee with amendments; 9/24/19: Public Hearing; 9/5/19

Introduction referred Committee on Medicaid Reform and Oversight.

Senate Action: 11/5/19 – Passed full Senate; 10/23/19 – Passed out of committee with amendment; 10/9/19 – Public Hearing; 8/29/19 – Introduced and referred to Senate Committee on Health and Human Services.

11/26/19 – Signed by the Governor 2019 Wisconsin Act 56

2019 Assembly Bill 422 & 2019 Senate Bill 364
Relating to: raising the legal age for sale, purchase, and possession of cigarettes and nicotine and tobacco products, providing a legal age for sale, purchase, and possession of vapor products, and providing a penalty. (FE)

Support
WNA Position: Support community-based prevention services including screening, nutrition, immunizations, family planning, violence prevention and health education across the life-span. This bill changes the age for purchasing cigarettes, tobacco products, or nicotine products from 18 to 21, and imposes a minimum age for purchasing vapor products.

Status: Assembly Action: 11/6/19 Public Hearing Committee on Substance Abuse and Prevention.

Assembly Bill 460 & 2019 Senate Bill 589
Relating to: a school district revenue limit adjustment for the cost of employing school nurses.

Support
WNA Position: Access to quality healthcare for all people is achievable if registered nurses are utilized to the full extent of their education, skills, expertise and licensure.

This bill creates a school district revenue limit adjustment for the costs of employing school nurses. Under the bill, if a school board adopts a resolution, the school district’s revenue limit is increased by the amount the school district spent during the second quarter of the school year on salaries and benefits for school nurses.

Status: Assembly Action: None.

Status: Senate Action: SB 589 Introduced 11/27/19

2019 Assembly Bill 462 & 2019 Senate Bill 418
Relating to: right to specific staffing arrangements for certain patients in an intensive treatment program.

Submitted Testimony: LC Hearing Materials for AB462 on 10/16/2019

WNA Position: Watch.

2019 Assembly Bill 491 & 2019 Senate Bill 442
Relating to: restrictions on the use of products used for inhaling or exhaling vapor.

Support
WNA Position: Support community-based prevention services including screening, nutrition, immunizations, family planning, violence prevention and health education across the life-span.

This bill specifies that the term “smoking,” for purposes of the general prohibition under current law against smoking in indoor locations, includes inhaling or exhaling vapor from a “vapor product,” including nicotine.

Status: No action in either house.

2019 Assembly Bill 525 & 2019 Senate Bill 503
Relating to: implementing a suicide prevention program and making an appropriation. (FE)

Support
WNA Position: Continue state funding of services for children, families and vulnerable populations. This bill requires the Department of Health Services to implement a suicide prevention program, coordinate suicide prevention activities with other state agencies, administer grant programs, and perform various other functions specified in the bill to promote efforts to prevent suicide. The bill authorizes two positions in DHS for implementing the suicide prevention program, one of which is the director of the suicide prevention program.

Status: Assembly Action: 11/7/19 – Passed by the Assembly. 11/17/19 – Exec’d out of the Assembly Committee on Health. 10/29/19 – Public Hearing.
This bill requires the Department of Public Instruction to annually award a grant to a cooperative educational service agency to support a collaborative project between DPI and CESA that provides training and technical assistance to school districts related to prevention and intervention programs for alcohol, tobacco and other drug abuse, mental health programs, and programs to promote school safety.

Status: Assembly Action: 11/7/19 – Passed by the Assembly. 11/1/19 – Voted out of Committee on Education with Amendment Assembly Amendment 1 that deletes “general wellness” and substitute “mental health wellness as it pertains to suicide prevention” 11/1/10 Referred to Committee on Rules. 10/24/19 – Public Hearing.

Senate Action: Received by the Assembly. To be scheduled for a vote by the Senate.

Support WNA Position: Provide accessible and affordable prescription drugs, medical supplies, and health care services, including dental and preventative services.

This bill allows for reimbursement of travel, ancillary costs, and other direct patient-incurred expenses related to cancer clinical trial participation will not be considered an undue influence to participate in a cancer clinical trial, and reimbursement for travel and ancillary costs may not be considered coercive or as exerting undue influence to participate in a cancer clinical trial, but rather as a means to create parity in cancer clinical trial access and remove a barrier to participation.

Status: Assembly Action: 2/24/20 – Referred to Committee on Rules; 1/29/20 Passed out of the Senate Health Committee. 1/7/20 Public Hearing Committee on Health. No other action.

Senate Action: 1/21/20 Passed out of the Senate and referred to the Assembly. 1/8/20 Passed out of the Senate Health Committee. 11/20/19 Public Hearing Committee on Health and Human Services. No other action.

2019 Assembly Bill 583 & 2019 Senate Bill 514

Relating to: practicing as a physician assistant or nurse while performing official duties for the armed services or federal health services.

Support WNA Position: Allow registered nurses and advanced practice registered nurses to practice to the full extent of their education, training, experience and license to improve patient outcomes.

Status: Assembly Action: 2/24/20 – Referred to Committee on Rules; 1/29/20 – Passed out of Committee; 1/7/20 – Public Hearing; 11/4/19 – Introduced and referred to Assembly Committee on Health.

Senate Action: 1/21/20 Passed out of the Senate. 1/21/20 Received by the Assembly. 1/29/20 Assembly Committee voted AB 583 out of Committee. 11/20/19 Public Hearing Committee on Health and Human Services

2019 Assembly Bill 584 & 2019 Senate Bill 516

Relating to: requiring hospitals to allow designation of a caregiver.

Support WNA Position: Patients, families and caregivers are actively engaged and valued as equal members of the health care team. This bill requires hospitals to provide a patient or, if applicable, a patient’s legal guardian with an opportunity to designate a caregiver who will receive, before the patient is discharged from the hospital, instruction regarding assistance with the patient’s care after discharge.

Status: Assembly Action: Referred to Committee on Health

Senate Action: Referred to Committee on Government Operations, Technology and Consumer Protection.

2019 Assembly Bill 694 & 2019 Senate Bill 635

Relating to: requiring hospitals to have a policy requiring written and verbal informed consent before a medical student may perform a pelvic exam on a patient who is under general anesthesia or otherwise unconscious.
**Support**

**WNA Position:** Protect the rights and safety of patients in and across all health care settings. Written informed consent regarding other procedures i.e., pelvic examinations by medical students, the purpose of surgery must be obtained in writing.

**Status:** Assembly Action: 12/23/19 – Introduced and referred to Committee on Health.

**Status:** Senate Action: 1/29/20 – Introduced and referred to Committee on Government Operations, Technology and Consumer Protection.

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**Grant Updates**

Registered Nurses have a big impact on the health education of our patients. With the support of health professionals like you, we can educate the public about the risks of high blood pressure, high cholesterol and stroke. WNA continues to be a grant partner with the State of WI in the goal to make WI residents heart healthy.

According to the AHA’s 2020 Heart & Stroke Statistics:

- Only one in four U.S. students get their recommended one hour a day of at least moderate physical activity.
- Nearly 40% of U.S. adults and almost 20% of young people are obese.

**2019 Assembly Bill 839 & 2019 Senate Bill 759**

Relating to: use of epinephrine prefilled syringes and standing order for epinephrine.

**Support**

**WNA Position:** The bill allows a health care provider with prescribing authority who is employed by or under contract with the Department of Health Services to issue a statewide standing order for the dispensing of epinephrine auto-injectors or prefilled syringes for use by trained individuals. The bill also allows prescribers to issue a standing order for the dispensing of epinephrine auto-injectors or prefilled syringes for use by trained individuals. This increases access to care and services.

**Status:** Assembly Action: 1/30/20 – Introduced and assigned to Committee on Health

**Status:** Senate Action: 1/29/20 – Introduced and assigned to Committee on Health and Human Services

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**Legislative Updates**

- Vaping is an epidemic among young Americans.
- There are still more than one billion tobacco users worldwide, and at least 80% of them live in low- or middle-income countries.
- Type 2 diabetes prevalence more than doubled between 1990 and 2017 in the U.S.

It is important to utilize proper technique when taking B/P. AHA Association provides the following graphic to display best practices for measuring BP accurately along with the potential impact of incorrect positioning:

**2019 Assembly Bill 844**

Relating to: creating a sexual assault victim bill of rights; collection and reporting of data regarding sexual assault kits; storage and processing of sexual assault kits; tracking of sexual assault kits in sexual assault cases; and requiring the exercise of rule-making authority. (FE)

**Oppose**

**WNA Position:** WNA Supports AB 214 as it addresses the specific issues and problem. AB 844 adds language that is contentious.

**Status:** Assembly Action: 2/11/20 – Passed the full Assembly with 6 amendments; 2/6/20 – Passed out of the committee with 5 amendments; 2/5/20 – Public Hearing; 2/3/20 Introduced and referred to Assembly Committee on Health.

**Senate Action:** 2/11/20 – Received from the Assembly.

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**Heart Health**

- Vaping is an epidemic among young Americans.
- There are still more than one billion tobacco users worldwide, and at least 80% of them live in low- or middle-income countries.
- Type 2 diabetes prevalence more than doubled between 1990 and 2017 in the U.S.

Our role in Heart Health does not stop in February. Raise awareness of the risks of high blood pressure all year long:

- **February 2020:** American Heart Month
- **May 2020:** High Blood Pressure Education Month
- **May 2020:** National Stroke Awareness Month
- **May 17, 2020:** World Hypertension Day

Thank you for all you do to keep Hearts Healthy!
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