



## TAX CREDIT FOR NURSE PRECEPTORS TO GROW THE NURSING PROFESSION

**THE ISSUE** Nursing students pursuing a degree as a licensed Registered Nurse or an Advanced Practice Registered Nurse (APRN) require hands-on experience in a clinical setting. The student's clinical educational experience is dependent upon employed nurses volunteering to be preceptors. Undergraduate or graduate level nursing students learn to apply their academic knowledge to actual nursing care to patients through the guidance and support of nurse preceptors.

As working clinicians themselves, preceptors remain responsible for the oversight of the nursing student while at the same time needing to care for their patients, perform other patient-related duties, and remain productive. Unfortunately, preceptors receive little to no compensation for this important work.

Wisconsin is seeing increased difficulties in maintaining and finding preceptors. A lack of available nursing staff, an increase in the number of nursing schools, and an increased number of students enrolled in nursing programs are all contributing factors to recruiting and retaining preceptors. This comes at a time when there is also a need to increase the supply of both RNs and APRNs.

**POSSIBLE SOLUTION** Currently, four states have enacted a tax benefit plan that include nurses, and in four states, legislation has been introduced. Unlike a tax deduction which simply lowers one's taxable income by the amount of the deduction, a tax credit reduces the amount of taxes owed to the state. WNA would like to see Wisconsin's legislature explore a preceptor tax credit as an option in growing a competent nursing workforce.

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## FACTORS IMPACTING WISCONSIN'S NURSING WORKFORCE SHORTAGE

**The Wisconsin Nurses Association would like to increase legislators' awareness of the factors contributing to Wisconsin's nursing workforce shortage.** RNs are the largest number of health care providers in Wisconsin and are utilized in every health care related setting. Knowing the reasons for the departure of nurses is important to identifying solutions.

In May 2020, the Department of Workforce Development released the "Wisconsin Registered Nurse Supply and Demand Forecast Results Report." The report indicated that the supply of RNs will not keep up with demands and will impact health care delivery. The Wisconsin Center for Nursing released its 2020 RN Workforce Survey Report which indicated approximately 9 percent of RNs (or 8,100 of the over 90,000 licensed registered nurses in Wisconsin) providing direct care were planning to leave their positions in two years or less. The report also noted that by approximately 2030, Wisconsin will see 44 percent of RNs (approximately 36,000) providing direct care leaving their positions. Reasons given for leaving the bedside were need for "more or flexible" hours, improved health benefits, improved pay, and work environment. (Source: Wisconsin Center for Nursing, [wicenterfornursing.org/](http://wicenterfornursing.org/)).

WNA believes the number of nurses who have left the bedside 'in two years or less' has exceeded the reported 9 percent of nurses noted above. This is evidenced by the number of vacant positions, increased use of agency staff, closures of long-term care facilities and beds, patients waiting for beds in emergency rooms, and overcrowding in emergency departments. Through nurse to nurse interviews, surveys, and employer feedback, the following themes have emerged as reasons for the "mass resignation of nurses":

- Care demands exceed the physical capacities required to provide care.
- Pay discrepancies — travel nurse versus nurse employee pay.
- Newly graduated nurses feel unsupported and are leaving.
- Lack of financial recognition for those nurses who provide care to COVID patients.
- Increased workplace violence.
- Gaps in supporting well-being.
- Concern regarding nurse-to-patient care assignments.

WNA feels that it is important to increase legislator awareness of the issues impacting nurse retention and recruitment for Wisconsin so that a broader and more meaningful conversation regarding possible policy remedies can take place.

**For more information, contact Gina Dennik-Champion, WNA Executive Director: [gina@wisconsinnurses.org](mailto:gina@wisconsinnurses.org)**



## **SUPPORT SENATE BILL 394: THE ADVANCED PRACTICE REGISTERED NURSE PRACTICE ACT**

Wisconsin's population is aging. Workforce predictions from the Wisconsin Hospital Association show a dire need for health care providers now—and in the future. APRNs have proven themselves ready and able to fill those needs, particularly in rural and urban underserved areas. APRNs provide access to care at no added cost to the state, no delay in the benefit to the consumer and are a solution that has a track record of 50 years of success. According to the Wisconsin Department of Safety and Professional Services (DSPS), on January 31, 2022, there are 8,942 advanced practice nurses providing care to the residents of Wisconsin. These APRNs provide demonstrated quality and accessible care in clinical areas that include all facets of primary care, hospitals, psychiatric and mental health clinics as well as anesthesia providers to name a few.

There are 26 states and U.S. territories that have APRN Practice Acts. The practice act describes the conditions and criteria necessary to be licensed and to remain licensed as an APRN in Wisconsin. We believe SB 394 reflects input from the key stakeholders and should be supported by all legislators and the Governor. Thank you to those legislators already in support of this bill.

SB 394 defines the scope of practice and the criteria needed to obtain and maintain APRN Licensure. There are four advanced practice nursing roles for licensure as an APRN: Certified Nurse Midwife, Certified Registered Nurse Anesthetist, Clinical Nurse Specialist and Nurse Practitioner. The criteria include the following:

- The APRN must have and maintain national board certification in the role for which she/he has been educationally prepared.
- The APRN has graduated with a master's degree in nursing or higher from an accredited school of nursing.
- The APRN has malpractice liability insurance coverage at the same amount as a physician. This currently exists for those advanced practice nurses who prescribe.
- The APRN must obtain at least 16 hours of continuing education in either pharmacology or therapeutics. (To maintain national board certification APRNs need on average one hundred hours per renewal cycle of 3-5 years)
- The APRN will consult, collaborate, or refer his/her patient to a physician or other appropriate health care provider when the care exceeds the APRN expertise.
- A newly licensed APRN graduate is required to work in a collaborative relationship with a physician for approximately two years before practicing to the full extent of her/his scope of practice.

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