

## Summary

The WNA Organizational Affiliate Dialogue Forum on Priority #3, *Improve Wisconsin's public health infrastructure through greater utilization of nurses*, took place on Thursday, November 30, 2023, from 6:30 – 8:30 pm via Zoom.

The meeting discussion included clarity of the issue, what is known about the issue and identification of ideas that support the nurse's role and contributions to improving Wisconsin's public health infrastructure.

### Clarity of the issue and what we know

#### Wisconsin's public health infrastructure

- Department of Health Services (DHS) was Awarded \$45 Million to Support Public Health Workforce Development. The award is being used to assess the statewide public health system and the workforce to help build a stronger public health workforce through retention, recruitment, and training efforts. Dollars were also provided to the local public Health department. A desired outcome is to identify gaps and plan for funding preparedness for communicable diseases activities and begin to strategize on how to anticipate prevention needs.
- "Trust for America's Health" rankings indicate that Wisconsin is scored as low. From 2017-2021 three-quarters of the public health workforce were lost, thus lost. This is in part due to the perceived lack of benefits for communities and the public.

#### What is the current role of RNs within the public health infrastructure? (Source, WCN 2022)

- **Primary Place of Work** - Public health or community health (FQHC, Free Clinics, Schools, parish nurses, community health) Total = 2,750, 3.6%
- **Characteristics of Primary Position at Primary Place of Work** - Public health Total = 2,635 3.4% Community health Total 3.6%
- **Lack of recognition of the value of Certification** Public/Community health Total = 180 0.2%, Public health nursing-advanced (APHN) Total = 12 0.0% Advanced Public Health Nursing Certification (PHNA-BC),
- **Place of work by diversity Public/Community health:** BIPOC and Latinx Total = 352 4.7%, White and not Latinx = Total 2,398 3.5%
- **Employment Characteristics of RNs by DHS Region of Employment; Principal Place of Work for Nurses Providing DPC:**
  - Public/Community health by Region: Total 2,525 3.6%,
  - Southern 503 3.5%, Southeastern 898 3.3%,
  - Northeastern 561 3.9%, Western 296 3.3%,
  - Northern 267 4.4%

- **Specialized Clinical Knowledge and/or Experience** Public health Total: 2,548 3.4%,
  - Southern 553 3.7%, Southeastern 933 3.3%,
  - Northeastern 472 3.1% Western 340 3.6%,
  - Northern 250 3.9%
- **Primary Place of Employment and Position by APN Certification Type** Public or community health NP = 190 3.1%, CNM = 14 6.1%, CRNA \*\*, CNS = 9 2.6, APNP = 197 2.8
- **Changes in Expertise Community health certification** rose from 87 in 2020 to 228 in 2022
- **Leadership Roles by Primary Place of Work** Public health\* Report Leadership Role Total = 1,025 3.5%, Did Not Report Leadership Role Total = 1,489 3.6% *\*Includes community, occupational, and school health.*
- **Nurse Faculty Principal Place of Work: Principal Place of Work** Public health or community health Total = 35 3.0%
- **Median Annual Income by Place of Work and Functional Role** Public health (governmental: federal, state, or local) Total = \$70,000 (Range \$80,000 - \$60,000)
- **Health Rating Compared to Pre-Pandemic by Primary Place of Work:** Public/community health Total = 2,750 Better = 225 8.2% About the same = 1,107 40.3% Worse = 1,148 41.7%, 270 9.8%

### What are there gaps?

- Lack of partnerships between public health and other settings.
- Pharmacist Stress – providing immunization on top of filling scripts.
- Free immunizations are available in the public health space: but must be eligible.
- Acute care settings experiencing more communicable diseases and emergency preparedness deficits.
- Schools of Nursing partnering with public health so students can experience the practice site and nurses.
- Opportunity Student education placement in acute occurs more than relationship with Public Health.
- Educational Programs Accreditation requires community/public health experience.

### Ideas generated from the participants:

1. Mentor/educate newer public health nurses to become preceptors.
2. Increase collaboration between academia and public health settings.
3. Revised CCNE outcomes focus on public health standards throughout communities.
4. Services to older adults (Senior Centers) and young families and referrals to resources.
5. Actual exposure to public health nurses within the setting.
6. Future of Nursing – Public Health infrastructure.
7. Development of a Nurse Corp to respond to public health emergencies. Focus on preparedness. Grant to fund nurses responding/prepared to/for public health emergency.
8. Some health departments require or prefer when hiring a new PHN that they have at least one year of acute care experience, so that removing that “requirement” within health departments could be one priority. I’m not sure how many health departments practice that anymore.

9. Loan forgiveness and subsidy programs for Public Health Service (especially post-pandemic state) may also be something to consider.
10. The \$45 million, 5-year assessment and implementation grant can provide an opportunity for recognizing nurses role and value.
11. The need to promote diversity within the workforce is important, so that the workforce is representative of the community they serve.
12. Associated Degree Nurses should be financially incentivized to obtain a BSN and work in public health.
13. Reskilling/cross training between acute, primary care and public health nurses.

## **Resources**

Wisconsin Center for Nursing 2022 RN Workforce Survey: Zahner, S. J., Pinekenstein, B., Henriques, J., Merse, K. B., LeClair, J., Alnuaimi, N., & Krainak, K. (2023). Wisconsin 2022 RN workforce survey report. Wisconsin Center for Nursing, Inc. <https://wicenterfornursing.org/wp-content/uploads/2023/07/2022-RN-Report.pdf>

Future of Nursing [FON One Pagers Disasters and Public Health Emergencies.pdf](#)

Future of Nursing: [FON One Pagers Valuing Community and Public Health Nursing.pdf](#)

**WNA Recommendation January 2022**, That WNA will: Continue the collaboration between the Wisconsin Nurses Association and the Wisconsin Center for Nursing that supports articulating the role and responsibilities of nurses in disaster response and public health emergency preparedness.

**ANA Statement On Replenishing the Public Health Infrastructure and Public Health Nursing Workforce** <https://www.nursingworld.org/news/news-releases/2020/ana-statement-on-replenishing-the-public-health-infrastructure-and-public-health-nursing-workforce/>

**The Region V Public Health Training Center** is part of the national Public Health Learning Network, a consortium of ten regional Public Health Training Centers and the country's most comprehensive resource for public health workforce development. We seek to strengthen the skills of the current and future public health workforce through learning tools, continuing education, and student development. [About Us | Region V \(rvphtc.org\)](#)

**Nurses Respond Now Priority Training: Addressing the Needs of Vulnerable Populations during a Public Health Emergency** [NRN About the Training Final Scholarship.pdf](#)