

Modernize Personal Care Supervision Rules

Give Nurses More Flexibility While Protecting Essential Personal Care

Wisconsin's caregiver crisis isn't only about finding enough personal care workers. Agencies also need Registered Nurses to provide required supervision—and outdated requirements can stretch an already limited workforce even further.

People with disabilities and older adults rely on personal care workers for essential assistance that makes living independently possible.

Wisconsin should maintain appropriate clinical oversight while giving nurses greater flexibility to determine how frequently that oversight needs to occur in person.

For consumers with stable, long-term needs, WILN believes modernizing Wisconsin's supervision requirements can reduce unnecessary scheduling burdens, make better use of limited nursing resources and help prevent disruptions in essential care.

The Problem

Wisconsin's administrative rules require nurse supervision of personal care services every 50–60 days.

For people whose conditions or personal care needs are changing, frequent in-person supervision may be appropriate.

But many people receiving personal care have stable conditions and have relied on the same services for years. Their personal care workers may consistently perform the same tasks, and their plans of care may change very little from one supervisory period to the next.

Yet the same supervisory schedule applies.

This creates challenges for both consumers and providers.

Personal care agencies are struggling to recruit and retain enough Registered Nurses to complete required supervisory visits. At the same time, consumers and their families must fit frequent visits around work, school, medical appointments, caregiving responsibilities and everyday life.

If a required visit cannot be completed within the established timeframe, payment for services can be interrupted—even when nothing about the consumer's needs has changed.

The result can put essential personal care services at risk because of a scheduling requirement rather than a change in the person's health or support needs.

WILN's Solution

Give Registered Nurses greater flexibility to determine how supervision should occur based on each consumer's individual circumstances.

WILN recommends two changes:

1. Allow remote nurse supervisory visits when appropriate.

Wisconsin temporarily allowed personal care agencies to conduct remote nurse supervisory visits during the COVID-19 public health emergency.

WILN recommends restoring that flexibility in specific circumstances.

For consumers whose conditions and personal care needs have remained stable, agencies and their RNs should be able to determine—within appropriate state guidelines—when a supervisory visit can safely and effectively occur through telehealth.

Registered Nurses would retain the professional responsibility to determine when an in-person visit is necessary.

2. Move routine supervisory visits to a quarterly schedule.

WILN recommends changing the current 50–60 day supervisory requirement to quarterly visits.

This would maintain regular clinical oversight while reducing scheduling burdens for consumers with stable needs.

It would also allow nurses to devote more of their limited time to consumers experiencing changing or complex medical needs.

Why It Matters

Good oversight should respond to the individual—not simply the calendar.

A person whose condition has changed may need additional attention and an in-person visit.

Someone whose condition and personal care routine have remained stable for years may not need an RN physically present every 50–60 days to provide appropriate oversight.

Greater flexibility would allow nurses to use their professional judgment while continuing to protect consumer health and safety.

It could also make personal care services less disruptive for consumers and families, reduce pressure on agencies struggling to recruit nurses and allow limited nursing resources to be focused where they are needed most.

WILN also believes reducing unnecessary supervisory costs could allow more resources to be invested in caregiver wages and benefits.

The Ask

WILN calls on Wisconsin policymakers and the Department of Health Services to:

Allow Registered Nurses to conduct supervisory visits through telehealth when clinically appropriate and move routine personal care supervisory visits from every 50–60 days to a quarterly schedule.

These changes should preserve appropriate clinical oversight while giving licensed nurses the flexibility to determine when an in-person visit is necessary based on the individual needs of each consumer.

The Bottom Line

Wisconsin can maintain strong oversight without treating every consumer and every situation exactly the same. Give nurses the flexibility to focus their time where it is needed most while protecting continuity of personal care for people with disabilities and older adults.