

## Steven Sepe

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**From:** Jill Trelease <jilltrelease@gmail.com>  
**Sent:** Wednesday, March 26, 2025 10:34 PM  
**To:** House Health and Human Services Committee  
**Cc:** Rep. McGaw, Michelle E.  
**Subject:** Bill H6088

Dear Representative Michelle McGaw,

My name is Jill Trelease, and I am writing in support of Bill H6088. I have lived in Rhode Island on and off for years. My grandparents were physicians at the Osteopathic hospital in Cranston, my mother was a clinical nurse specialist and practiced in RI for most of her career. I received all three of my nursing degrees at the University of Rhode Island.

I have been a nurse for almost 26 years, the last 10 years, I have been a family nurse practitioner. I completed my Doctorate of Nursing Practice in 2019. I was elected to the Wound, Ostomy and Continence Nursing Certification Board (WOCNCB) in 2012 as the Liaison to the Foot Care Committee and later was the President of the WOCNCB 2018-2020. I am currently chair of the Exam Prep Committee for the WOCNCB. I have also had the honor of speaking at the podiatry conference, Desert foot on three occasions, most recently in June and July of 2024.

I was introduced to foot care when I was a nurse at a local hospital and there were not any podiatrists available to provide nail care. The hospital administration recommended I pursue the Foot Care Certification. I enrolled in classes and was mentored by a local podiatrist for the hands on skills. I passed my Certification in Foot Care in 2010.

For decades nurses have provided care to homebound patients. This vital service provided health care management for those at risk. Nurses are able to assess patient needs, perform care to enhance health and quality of life, and when needed send a patient to seek care at a physician practice or the emergency room. This is nursing practice.

I am director and a provider at a hospital based outpatient wound center. When patients are not able to come to my clinic, it is the home health nurses who are able to see these patients. These nurses are our partners in the provision of care for this at risk population.

That is what this bill is about...home care focused on feet. When a nurse goes into the home to help a patient with congestive heart failure, the cardiologist recognizes that the nurse is their partner. That nurse is there to monitor, assess and assist; and if needed, reach out to the physician. The nurse is not trying to be a physician, they are trying to provide nursing care. In this bill, the focus is on nursing providing nursing care for management of the foot.

Look at the data...this does not lead to worse outcomes or increased incidence of infections. This leads to increased patient safety and wellness; nurses providing this care can use their assessment skills to identify potential infections and ensure the patient is seen by podiatry to manage it.

That is what this bill is about, being able to see patients in their home and provide care to them that is otherwise unavailable. Ask any provider who has relied on a home health nurse to see a homebound patient --- they will tell you the services these nurses provide is necessary and desperately needed.

This bill is simply about nursing focused care for the feet. This is not asking for permission to go in the home and allow nurses perform outside of their scope...It is about offering basic care to facilitate quality of life for those who are unable to leave their home environments. In the larger picture, this could help to provide referrals to podiatrists in the area and partner with them to help care for these patients.

TO suggest that allowing nurses to provide this care is a cataclysmic journey that can negatively impact patient's health is hypocrisy. To further suggest there is concern over the "credentialing process" to practice foot care demonstrates a lack of understanding as to the rigor of the exam for the Certified Foot Care Nurse. The questions are written with the guidance of psychometricians and are thoroughly tested to ensure the level of knowledge meets the requirement of foot care nursing. The exam is provided by a national board that is accredited by the Accreditation Board for Specialty Nursing Certification and the National Commission for Certifying Agencies.

I would ask of the podiatrists who have opposed this bill, are you planning on providing these home care visits? How many of you include homecare visits as part of your podiatry practice?

Lets work together as colleagues, as partners, to help this fragile patient population in Rhode Island receive services to provide quality of life and quality of foot care.