

**COMMONWEALTH OF MASSACHUSETTS
BOARD OF REGISTRATION IN NURSING**
239 Causeway Street, Room 417A
Boston, MA 02114

Minutes of the Regularly Scheduled Board Meeting
Wednesday, December 9, 2015

Board Members Present

K. Gehly, CNP, Chair
P. Gales, RN, Vice Chair
S. Abbott, Public Member
A. Alley, RN
M. Beal, CNM
J. Killion, LPN
C. LaBelle, RN
A. Peckham, RN
C. Simonian, PharmD, RPh (out at 4pm)
S. Taylor, RN (out at 1:09pm)
C. Tebaldi, CNP

Board Members Not Present

E. Richard Rothmund, Public Member
C. Urena, LPN

Staff Present

K. Ashe, RN, Nursing Education Coordinator
O. Atueyi, JD, Board Counsel
V. Berg, Chief Board Counsel
H. Cambra, RN, JD, Complaint Resolution Coordinator
D. M. DeVaux, RN, SARP Coordinator
A. Fein, RN, JD, Complaint Resolution Coordinator
K. Fishman, Probation Monitor
K. Keenan, Licensing Coordinator
V. Iyawe, RN, SARP Coordinator
L. Talarico, CNP, Nursing Practice Coordinator
T. Westgate, Program Coordinator

Staff Not Present

C. Silveira, RN, Assistant Director

Guests

See attached list.

TOPIC:

Call to Order & Determination of Quorum

DISCUSSION:

Ms. Gehly confirmed by roll call that a quorum of the Board members were present and announced the meeting was being recorded.

ACTION:

At 9:03 a.m., K. Gehly, Chairperson, called the December 9, 2015 Regularly Scheduled Board Meeting to order and determined that a quorum of the Board members were present.

TOPIC:

Approval of Agenda

DISCUSSION:

A. Fein requested that the meeting agenda items listed at section X. be reordered and addressed as follows: X.A, X.B, X.E, X.D and X.C. She also identified that section XI. should correctly identify that during the Executive Session the Board will discuss and evaluate the prior executive session minutes for the session held during the November 18, 2015 meeting, not the September 9, 2015 meeting as is incorrectly listed.

ACTION:

Motion by P. Gales, seconded by J. Killion, and unanimously passed to approve the agenda as revised.

TOPIC:

Approval of Board Minutes for the November 18, 2015 Regularly Scheduled Board Meeting.

DISCUSSION:

A. Alley identified that he did not recuse himself from the discussion and action on the Request for Termination of Stayed Probation **in the Matter of F. Kimani**, LN64172, NUR-2012-0038, as is incorrectly listed on the draft minutes of this matter on draft November 18, 2015 Meeting of the Regularly Scheduled Board Meeting.

ACTION:

Motion by M. Beal, seconded by A. Peckham, and unanimously passed to accept the Minutes of the November 18, 2015, Regularly Scheduled Board Meeting as corrected.

TOPIC:

Reports

A. Executive Director's Report

B. Staff Report

1. Deputy Executive Director
2. Policy and Research
3. Practice
4. Education
5. Complaint Resolution
6. SARP
7. Probation Monitor

DISCUSSION:

A. Executive Director's Report: None

B. Staff Reports:

1. None.
2. None.
3. Members reviewed Ms. Talarico's previously distributed memo.
4. None.

5. Members reviewed the CRCs previously distributed report. Ms. Fein reminded Board members who have not yet completed the Conflict of Interest educational requirements that these must be completed by 11/30/15.
6. None.
7. None.

ACTION:

A. and B. Motion by J. Killion, seconded by P. Gales, and unanimously voted to accept all reports.

TOPIC:

Probation: Request for Termination of Probation in the Matter of **M. Hackett**, LN28529, LN-97-060. This case comes before the Board as the Licensee's request to terminate the probationary status on Licensee's LN license, pursuant to the Post-Revocation Consent Agreement for Probation she entered into with the Board on 3/27/2012. Licensee was issued her LN license sometime prior to August 1983, with no previous complaints issued against her license.

While on Probation, Licensee's nursing practice has been excellent according all of the Supervision Report Forms (Form 2s) submitted by Licensee's supervisor. However, Licensee has not demonstrated that she has remediated the conduct that gave rise to the probation in that she has continued to fail to abide by the terms and conditions of the Post-Revocation Consent Agreement for Probation. Notably, Licensee did not submit a Form 2 from 5/27/2014 until 11/10/2015 and did not inform the Board (staff) or the Probation Monitor of her change of address of record during the Probationary Period.

K. Fishman recommended: (1) Six (6) month extension of probation; (2) Require the Licensee to complete a continuing education course in the area of ethics or, as suggested by Practice Coordinator, have Licensee submit attestation that she has read and understands the Standards of Conduct at 244 CMR 9.00.

DISCUSSION:

V. Berg clarified to the Board that a disciplinary notice will be sent to Licensee.

ACTION:

Motion by S. Taylor, seconded by M. Beal, and unanimously passed to accept the Probation Monitor's recommendation to extend probation for 6 months and have Licensee submit attestation of having read 244 CMR 9.00.

TOPIC:

Probation: Request for Termination of Stayed Probation in the Matter of **M. Sol Parena**, RN181787, NUR-2012-0216. This case comes before the Board to request termination of stayed probation and return the Licensee's license to "current" status, as she sufficiently complied with the terms and conditions of the Consent Agreement for Stayed Probation that was effective 11/26/2012, and subsequent Notice of Violation and Modification of Licensure Conditions. Licensee was issued a nursing license on 10/01/1987 and has had no other complaints against her nursing license. The Licensee has been employed at three (3) facilities during the Probation period; Lexington Health Care Center, Dr. Maria Batilo Medical Office, and Sancta Maria Nursing Facility.

Despite her earlier practice issues which led to both her separation from Lexington Health Care Center and a six (6) month extension of her Probation by the Board, the Licensee has since received a positive quarterly report on which Licensee was rated as "meets" or "exceeds" expectations in all categories. In

addition, Licensee has not had incidents of any kind at both Dr. Maria Batilo's Medical Office, and Sancta Maria Nursing Facility. The Licensee has received a combined six (6) quarterly supervision reports from Dr. Maria Batilo's Medical Office (1 quarterly report), and Sancta Maria Nursing Facility; all of these quarterly reports rate Licensee as "meets" or "exceeds" in all categories. Most recently, Licensee's supervisor at Sancta Maria Nursing Facility provided a verbal confirmation during a phone call that Licensee is continuing to "do great" and practice nursing without any incidents or reprimands.

K. Fishman recommended termination of the stayed probation.

DISCUSSION:

None.

ACTION:

Motion by P. Gales, seconded by M. Beal, and unanimously passed to accept the Probation Monitor's recommendation.

TOPIC:

Probation: Request for Termination of Probation/Stayed Probation in the Matter of **C. Brick**, RN284789, NUR-2013-0020. This case comes before the Board as a request to TERMINATE the probation status on her nursing license(s), pursuant to the Consent Agreement she entered into with the Board, effective 6/12/2014. Licensee was issued her RN license in August 2008 and has no previous complaints against her license(s), and has completed the terms and conditions of Probation. Licensee is subject to 1 year probation, effective 6/12/2014, pursuant to the Agreement. Licensee has worked at Clinical Administrative Assistant at Primary Home Care Specialties throughout her probation. Her duties do not include "field work." Licensee has received a combined five positive Form 2's for her nursing practice.

K. Fishman recommended termination of the probation.

DISCUSSION:

A. Fein inquired as to the most recent communication with Licensee. K. Fishman responded that the most recent communication was on 9/9/2015, and Licensee's nursing practice was excellent.

ACTION:

Motion by J. Killion, seconded by C. Simonian, and unanimously passed to accept the Probation Monitor's recommendation.

TOPIC:

Probation: Request for Notice of Violation and Further Discipline in the matter of **P. Hoynoski**, RN198115, LN42464 (exp.), RN-07-043. This case comes before the Board as a request for the Board to consider the Licensee's non-compliance with the terms and conditions of the Consent Agreement for Probation she entered into with the Board effective 10/26/2011, and make a determination as to further Board action. Licensee was issued her license in October 1991 and has no previous complaints against her license. The Licensee worked two (2) nursing jobs during the Probationary Period: Wing Memorial Hospital and Governor' Center. Wing Memorial Hospital hired this nurse in December 2011; however, they let her go almost immediately thereafter because the facility said they were unable to fulfill the Board's supervision requirements. Licensee then worked at Governor's Center from on or about 10/17/2013 until she voluntarily left the employ of the Governor's Center on or about 11/12/2014. However, it is unclear why she left their employ and this writer has not been able to get the information from the Employer due to changes in management and lack of records in Licensee's Human Resources

File. The Licensee has not been in contact with this writer for approximately 1 ½ years. To date, she has not responded to a 2nd Notice of Violation, issued on 5/14/2015, despite the fact that she signed the “green card” on 6/1/2015, indicating she received the Notice sent by certified mail.

K. Fishman recommended suspension of Licensee’s nursing license.

DISCUSSION:

None.

ACTION:

Motion by M. Beal, seconded by A.M. Peckham, and unanimously passed to accept the Probation Monitor’s recommendation.

TOPIC:

Probation: Request for Notice of Violation in the matter of **T. Dolan**, RN2270906, NUR-2013-0020. Licensee was present. This case comes before the Board as a request for the Board to consider the Licensee’s non-compliance with the terms and conditions of the Post-Revocation Consent Agreement for Probation (Agreement) he entered into with the Board, effective 11/6/2014 and make a determination as to whether further Board action is warranted. Licensee was issued his license in March 2011, and he has no previous complaints against his license. Licensee is also licensed to practice as an RN in Connecticut (CT). His CT license was issued on 12/1/2003 and is currently active with no complaints issued against his license.

On or about 2/3/2015, the Licensee began working as a nurse under the supervision of Ean James, M.D., D.M.D. (“Dr. James”), who has a dentistry practice in Bristol, CT. This writer explained to the Licensee that the Agreement requires him to work under the supervision of a nurse. Licensee responded that the doctor’s wife is a nurse. PM later learned that the doctor’s wife is not a nurse and subsequently contacted the Licensee and told him that in order for him to be allowed to practice under the direct supervision of a doctor under the Agreement, he must submit in writing a request to modify the Agreement to allow him to practice under the direct supervision of a doctor rather than a nurse.

On or about 11/16/2015, the Licensee finally submitted a written request to the Board that they allow Dr. James to supervise his nursing practice and complete the required Employer Forms. PM told the Board that Dr. James’ dentistry license was subject to Stayed Probation then to Probation for a period of 6 months for violations of the Stayed Probation Agreement and that she monitored the dentist for compliance of the Agreement during those periods. Consequently, the Licensee has been working as a nurse in violation of the Agreement.

K. Fishman explained the options for the Board to Extend, Modify or Suspend the nurses’ license, pursuant to the Agreement, but no recommendation was made.

DISCUSSION:

K. Gehly opened the floor to Licensee. Licensee indicated that he has had a very difficult time finding a nursing job. He also indicated that he has suffered great personal and financial difficulties during and as a result of his probation. Licensee also represented that he did not have an opportunity to respond to the First Violation Notice at the Board meeting immediately proceeding the date of the Notice, because he was out of the state and did not receive the notice until after the meeting. Licensee indicated that he had difficulties getting Dr. James (supervisor/practice owner) to complete and/or submit the required forms for his probation. Licensee represented that he has been doing everything he can to comply with his

Agreement. K. Gehly inquired whether the forms Licensee is required to submit have been received by the Probation Monitor. K. Fishman responded that those forms have not been received. H. Cambra inquired for clarification as to whether the “owner of the practice” and the “supervisor” is Dr. James. K. Fishman replied in the affirmative. K. Gehly commented that Dr. James does not meet the qualifications of a “supervisor” as defined in Licensee’s Agreement. K. Fishman clarified for the Board that she advised Licensee to submit a request for supervisor modification before she knew that fact. A. Fein inquired to the Licensee as to whether he knew the job he was taking did not meet the requirements of his Agreement. Licensee responded that it did not occur to him, because this job would help with the financial difficulties he was/is experiencing. A. Fein inquired as to a previous modification request made by Licensee to the Board. K. Fishman clarified that request was made prior to the commencement of Licensee’s probation. M. Beal commented as to her concern that Dr. James’ wife was falsely represented as a nurse to the Board. Licensee replied that she engaged in several activities that appeared to require nursing training, and she wore “whites” and that he assumed that she was a nurse when he started. V. Berg inquired whether Licensee submitted a Form 1 signed/completed by Dr. James’ wife. Licensee responded in the negative. P. Gales asked the Licensee when he learned that Dr. James’ wife was not a nurse. Licensee responded that he learned shortly after he started work (approximately February). K. Fishman commented that this time period matched with her records. P. Gales inquired in follow-up as to why the Licensee did not request modification upon discovering Dr. James’ wife was not a nurse. Licensee responded that it was an oversight, because he was primarily concerned about his financial issues and taking care of his family. M. Beal commented that she didn’t believe Licensee’s work environment promotes the goal of his probation. S. Abbott inquired whether Licensee had to find a job in Massachusetts. Other Board members responded in the negative. In follow-up, S. Abbott inquired as to whether Licensee must disclose his probation to potential employers. Other Board members responded in the affirmative. K. Fishman clarified that the motion previously made by J. Killion (for 6 month extension of probation) did not require Licensee to leave his current position, and that he could work a nursing job commensurate with the Agreement for an average of 20 hours per week and Licensee would have his probation extended for six (6) months to find a nursing job, and another six (6) months for performance evaluation.

ACTION:

Motion by J. Killion, seconded by S. Taylor, and voted in favor by all members present except A. Alley opposed with K. Gehly abstaining to deny any modification to the supervision requirements of the consent agreement, and to extend Licensee’s probation for six (6) months for Licensee to find a nursing job with monthly submissions detailing his job search activities, to be followed, if nursing employment was obtained by an additional six (6) months for compliance with the active practice related requirements of the consent agreement.

TOPIC:

Pending Board Complaint: D. Ursin, RN169592, NUR-2014-0048. **RECUSAL:** C. Tebaldi rescued herself from this matter and left the room during deliberation and vote. The Board’s Compliance Officer and Complaint Resolution Coordinator presented the Compliance Officer’s previously distributed Investigation Report with CRC recommendations outlining the allegations reported, information obtained regarding the Licensee’s practice related conduct, any corresponding mitigating and aggravating circumstances, and any remedial activities completed. Specifically, the CRC recommended that the information and documentation obtained during the investigation substantiates that the Licensee during or about 3/1/2012-1/9/2014, while employed as a Registered Nurse at UMass Medical Center in Worcester, MA, the Licensee practiced on an expired nursing license. The Licensee: (a) has been licensed by the Board as an RN since 1984 and has not had any other complaints filed with the Board; (b) has cited multiple mitigating circumstances that resulted in the conduct that gave rise to this complaint, including

but not limited to a processing error by the bank; (c) contends that she made an additional payment in 2012 to renew her license, however, the Board has no record of this payment. To date, however, the Board *has not* received documentation that substantiates that the Licensee has engaged in nursing practices that consistently meet accepted standards of practice.

DISCUSSION:

None.

ACTION:

Motion by P. Gales and seconded by M. Beal and voted unanimously to DISMISS the complaint without prejudice as discipline is not warranted.

TOPIC:

Practice

DISCUSSION:

There was no business related to practice.

ACTION:

None.

TOPIC:

Education

- A. 244 CMR 6.06(2) Onsite Survey Waiver Request Middlesex Community College Associate Degree RN Program. **RECUSAL:** K.Gehly, Chair, rescued herself from this matter and left the room during deliberation and vote.
- B. MassBay Community College RN Associate Degree Program Review of Program Stability
- C. 244 CMR 6.08(1)(h) 2014 NCLEX Evaluation Report
 - 1. Bay State College Associate Degree RN Program
 - 2. Laboure College Associate Degree RN Program. **RECUSAL:** P. Gales rescued herself from this matter and left the room during deliberation and vote.

DISCUSSION:

- A. Members reviewed Ms. Ashe's previously distributed 244 CMR 6.06(2) Onsite Survey Waiver Request compliance report and supporting documents for the Middlesex Community College Associate Degree RN Program. The Program Administrator, Ms. Sandra Shapiro, was present to answer Board member questions.
- B. Members reviewed Ms. Ashe's previously distributed MassBay Community College Associate Degree RN program Review of Program Stability compliance report and supporting documents. The Program Administrator, Dr. Patti-Ann Collins, was in attendance to answer Board member questions. P.Gales reviewed timeline and early submission of fall 2015 report. Dr. Collins stated changes in faculty assignments for spring 2016 were already complete, and other data for report was available to submit. The 244 CMR 6.06(2) Onsite Survey Waiver Request follow up recommendations were reviewed and discussed, with evidence of Accreditation Commission for Education in Nursing (ACEN) continued accreditation status.
- C. 1. Members reviewed Ms. Ashe's previously distributed 244 CMR 6.08(1)(h) 2014 NCLEX compliance report and attachments for Bay State College Associate Degree RN Program. S. Taylor expressed cautioned since the Quarter 3 performance was 83.3% for first time writers from program.

2. Members reviewed Ms. Ashe's previously distributed 244 CMR 6.08(1)(h) 2014 NCLEX compliance report and attachments for Laboure College Associate Degree RN Program. The Program Administrator, Dr. Karen Manning, was in attendance to answer Board member questions.

ACTION:

- A. Motion by S. Taylor, seconded by A. Peckham, and unanimously voted to grant a waiver of 244 CMR 6.06(1)(a) to Middlesex Community College, Associate Degree RN Program, based on the findings and recommendations of the Accreditation Commission for Education in Nursing (ACEN) and the Program's Annual Report with recommendation: Provide evidence that all candidates for admission are required to provide satisfactory evidence of compliance with the immunization requirements specified at 244 CMR 6.04(3) (a) 1. Evidence due to the Board no later than 2/10/2016.
- B. Motion by P. Gales, seconded by S. Taylor and unanimously voted to:
 1. Accept the Massachusetts Bay Community College Associate Degree Registered Nurse Program follow-up report finding the Program has provided satisfactory evidence of compliance with regulations 244 CMR 6.04: Standards for Nursing Education Program Approval, noting that the Program has:
 - a. maintained its cap on admissions to both the day and evening formats of the Associate Degree (ADN) RN, pending the Board's finding of *sustained* programmatic stability, and notified the Board on November 16, 2015 that the Program was suspending admissions into the evening ADN and Practical Nurse program options due to lack of enrollment and lack of qualified candidates;
 - b. provided updates to the Board on faculty resignations and terminations at conclusion of the fall 2014, spring 2015 and fall 2015 reporting that since the fall 2014 there has been the departures of one adjunct position and 2 fulltime positions which have been replaced;
 - c. provided evidence that faculty are oriented to the role and specifically the concept based curriculum in semester long orientation program; and
 - d. received continuing approval status from the ACEN with the next scheduled visit fall 2020; and
 2. Continue the Program's Full Approval status:
 - a. accepting the Program's notification of its suspension of the ADN part-time evening option program until such time the Program notifies the Board of renewed interest in the part-time evening option by qualified candidates;
 - b. granting the Program's 244 CMR 6.01(1)(a) site waiver request submitted June 19, 2013 based on the Program's: continuing approval status from the Accreditation Commission in Nursing Education (ACEN); development and implementation of policies for the maintenance and retirement of student, graduate, faculty and schools records; submission of evidence of consistency of program documents in both electronic and paper formats; and
 - c. directing the Program to provide a summary report demonstrating its continued programmatic stability including, but not limited, to consistent administrative oversight, faculty turnover rates, orientation of new faculty, and to ensure the integrity the educational process, student admissions and enrollments and NCLEX first time pass rate date for inclusive of academic year 2015-2016 and 2016- 2017. Due June 22, 2017.
- C. 1. Motion by C. Simonian, seconded by A. Peckham, and unanimously voted to accept the 2014 NCLEX-RN additional Progress Report submitted by the Bay State College Associate Degree RN program (Program), finding the Program has provided satisfactory evidence of compliance with regulations 244 CMR 6.04 (1)-(5) and directing the Program to:

- a. ensure publication of its current approval status in all official publications including but not limited to the college catalog, the student handbook, the nursing student handbook, the Program website as well as recruitment materials; and
 - b. provide evidence of sustained NCLEX –RN pass rate improvement for first-time writers by providing aggregate data relating to Program graduates taking the 2016 NCLEX-RN as reported in the Education Summary Report. Report due March 2017.
- C. 2. Motion by S. Taylor, seconded by M Beal, and unanimously passed to accept the 2014 NCLEX-RN Performance Report submitted by the Laboure College Associate Degree Registered Nurse (Program) program, finding the Program has provided satisfactory evidence of compliance with regulations at 244 CMR 6.04(3)(a)2, (4)(a) and (b), and (5), and directing the Program to:
- a. Provide a summary report addressing the Program’s progress to date related to its 2014 NCLEX Performance Corrective Action Plan implementation including its:
 - i. recruitment and appointment of course coordinators and standardized assessment coordinator;
 - ii. faculty activities relating to the development of test question construction, item analysis and exam developed correlating to the 2016 NCLEX-RN Detailed Test Plan;
 - iii. evidence of outcomes for the NCLEX Student Success Plan for graduates of May 2016, due October 2016;
 - iv. nursing course exam blue prints, methods for performing item analysis;
 - v. descriptions of level at which test questions are written and status of item analysis,
 - vi. development of written agreements with all cooperating agencies utilized as clinical learning sites; and
 - vii. aggregate data analyzing full time and part time faculty correlations to NCLEX. Report to be submitted no later than June 24, 2016; and
 - b. Submit copies of ACEN correspondence related to its actions on the Program’s substantive change reports relating to declining NCLEX scores and curriculum revision within 15 days of receipt by the Program Administrator.

TOPIC:

Requests for License Reinstatement: In the matter of **G. Grammont**, LN54939; NUR-2011-0102.

DISCUSSION:

T. Westgate presented her previously distributed memorandum outlining the Respondent’s conduct that gave rise to the Complaint and resulted in the suspension of his nursing license. Specifically, the Respondent admitted that on or about May 4, 2011, while employed as a LPN at Masconomet Healthcare ("Masconomet") in Topsfield, Massachusetts, and at Penacook Place ("Penacook") in Haverhill, MA, it was discovered that Respondent had diverted discontinued non-narcotic controlled substances from these facilities for a family member's use. Respondent acted beyond the scope of her authority, violated patient confidentiality, and failed to maintain the security and integrity of these controlled substances. The Respondent’s license was Suspended effective September 27, 2013, and she has since complied with all of the requirements set forth in the Agreement and is eligible for reinstatement. T. Westgate recommended that the Board grant the Respondent’s request for license reinstatement on the condition that she enter into a standard consent agreement for Probation for 1 year and properly renew her nursing license..

ACTION:

Motion by E. R. Rothmund, seconded by M. Beal, and unanimously passed to reinstate the Respondents nursing license as outlined above.

TOPIC:

Strategic Development, Planning and Evaluation: Systematic Policy Evaluation - None

TOPIC:

Strategic Development, Planning and Evaluation: Topics for Next Agenda

DISCUSSION:

S. Taylor asked to address at the next Board meeting a discussion about security at the Nursing Board meetings. Other Board members agreed with this request and A. Fein stated that this would be arranged.

ACTION:

So noted by Board member and Board staff.

TOPIC:

Strategic Development, Planning and Evaluation: Executive Order 562 Regulatory Review.

DISCUSSION: V. Berg presented her previously distributed memorandum concerning Executive Order 562, which requires all state agencies to undertake a review of each and every regulation currently published in the Code of Massachusetts Regulations. The regulatory review must be completed by March 31, 2016. V. Berg conveyed her recommendations for each of the Board's regulation chapters to the Board. These recommendations are also memorialized in the memorandum. Redline drafts showing proposed revisions had also been previously distributed. V. Berg explained that if the Board approved of the proposed revisions, they would need to be submitted for approval by the Executive Office of Health and Human Services and the Executive Office of Administration and Finance pursuant to Executive Order 562. V. Berg requested that the Board first consider whether it approved the proposed revisions, and if so, to authorize submitting the revisions for administrative approval, and further authorizing, if administrative approval is given with no recommendations for further changes, to proceed with the promulgation process pursuant to M.G. L. c. 30A by submitting the drafts for public hearing. The Board considered the proposals for each chapter, and deliberated as to each chapter as follows:

244 CMR 3.00 – Board members agreed with the proposed revisions generally. They further agreed to making additional changes to section titles 3.01 and 3.02, by replacing the term “Definition” with the term “Designation.” They also agreed that the asterisk/footnote in 3.01 should be removed.

ACTION:

Motion by S. Taylor, seconded by P. Gales, and unanimously voted to: (1) approve proposed revisions to 244 CMR 3.00, as further amended with the additional changes agreed upon during discussion, (2) send the proposed revisions for administrative review and (3) proceed with the promulgation process if administrative approval is given with no recommendations for further changes.

244 CMR 4.00 – Board members agreed with the proposed revisions generally. M. Beal raised a concern that the requirement for enrollment in MassHealth as a condition of obtaining authorization to engage in advanced practice nursing, specifically, that the requirement may be too onerous and present a barrier to authorization. V. Berg advised the Board that the requirement was set by statute (St.2012, c.118, amending M.G.L. c. 112, § 80B. L. Talarico agreed to test the process and report back to the board.

ACTION:

Motion by P. Gales, seconded by M. Beal, and unanimously voted to: (1) approve proposed revisions to 244 CMR 4.00 (2) send the proposed revisions for administrative review and (3) proceed with the promulgation process if administrative approval is given with no recommendations for further changes.

244 CMR 5.00 – Board members agreed with the proposed revisions.

ACTION:

Motion by A. Peckham, seconded by J. Killion, and unanimously voted to: (1) approve proposed revisions to 244 CMR 5.00, (2) send the proposed revisions for administrative review and (3) proceed with the promulgation process if administrative approval is given with no recommendations for further changes.

244 CMR 6.00 – Board members agreed with the proposed revisions generally. Board members and K. Ashe discussed appropriate deadlines for the requirement that programs achieve accreditation. P. Gales and M. Beal were particularly concerned that making the deadline too soon would adversely affect non-collegiate programs in particular. Board members agreed that incorporating an interim step and deadline for achieving program accreditation candidacy would ensure that non-accredited programs were on track for accreditation, while enlarging the time to achieve full accreditation. Board members also noted that, when discussing 244 CMR 10.00, they will need to define program accreditation candidacy.

ACTION:

Motion by P. Gales, seconded by C. Simonian, and unanimously voted to change the deadline for nursing education programs to achieve program accreditation from the proposed December 31, 2022 to December 31, 2025, and further, to add in a new deadline for achieving program accreditation candidacy.

ACTION:

Motion by S. Taylor, seconded by A. Peckham, and unanimously voted to: (1) approve proposed revisions to 244 CMR 6.00, as further amended with the additional changes voted upon during discussion, (2) send the proposed revisions for administrative review and (3) proceed with the promulgation process if administrative approval is given with no recommendations for further changes.

244 CMR 7.00 – Board members agreed with the proposed revisions. V. Berg noted that this proposed revision incorporated provisions for the Board chair to authorize a summary suspension, thus putting into regulations the summary suspension mechanism that the Board had authorized by policy. V. Berg also noted that the proposed revisions are being recommended to all boards within the Division, to facilitate a greater uniformity in how all the Boards in the Division approach investigations and disciplinary proceedings.

ACTION:

Motion by J. Killion, seconded by P. Gales, and unanimously voted to: (1) approve proposed revisions to 244 CMR 5.00, (2) send the proposed revisions for administrative review and (3) proceed with the promulgation process if administrative approval is given with no recommendations for further changes.

244 CMR 8.00 – Board members agreed with the proposed revisions.

ACTION:

Motion by C. Simonian, seconded by A. Alley, and unanimously voted to: (1) approve proposed revisions to 244 CMR 8.00, (2) send the proposed revisions for administrative review and (3) proceed

with the promulgation process if administrative approval is given with no recommendations for further changes.

244 CMR 9.00 – Board members agreed with the proposed revisions generally. They further agreed to making additional changes to 9.03(27) to remove the requirement that licensee’s inform the Board of a change of personal data *in writing*, to reflect that this update is frequently accomplished electronically.

ACTION:

Motion by A. Peckham, seconded by C. Tebaldi, and unanimously voted to: (1) approve proposed revisions to 244 CMR 3.00, as further amended with the additional changes agreed upon during discussion, (2) send the proposed revisions for administrative review and (3) proceed with the promulgation process if administrative approval is given with no recommendations for further changes.

244 CMR 10.00 – Board members agreed with the creation of a new chapter of regulations to contain a single set of definitions applicable to all of the Board’s regulation chapters. In follow-up to their discussion on 244 CMR 6.00, Board agreed to incorporate a definition for program accreditation candidacy and to refine the definition of program accreditation. In addition, Board members agreed on further clarifications in the definitions for: applicant, conditions of renewal, final decision and order, and part (e) of supervising physician.

ACTION:

Motion by P. Gales, seconded by S. Allen, and unanimously voted to (1) approve proposed new regulation chapter 244 CMR 10.00, as further amended with the additional changes agreed upon during discussion, (2) send the proposed revisions for administrative review and (3) proceed with the promulgation process if administrative approval is given with no recommendations for further changes.

TOPIC:

Strategic Development, Planning and Evaluation: Summary Report, BRN Representative to BRM Quality and Patient Safety Division: Diane Hanley, MSN, RN, Guest. Ms. Hanley provided the members with an overview of her professional education and experience, and the background on her representation of the Board of Nursing on the Quality and Patient Safety Division (QPSD) Committee of the Board of Registration in Medicine. She reviewed her previously distributed report with Board members that briefly summarized the legal authority that established and governs the QPSD, the functions and activities of the QPSD and its Committee, the composition and meeting frequency of the QPSD Committee, and advisories, reports and publications produced by the Committee. Ms. Hanley suggested that the Board consider appointing an advanced practice nurse authorized by the Board to the QPSD Committee in addition to having a Registered Nurse representative.

DISCUSSION:

Board members identified that the information provided by Ms. Hanley was very informative and identified their interest in receiving future periodic reports from her that included higher level issues addressed by the QPSD Committee that were publically available. The members also requested further information about the QPSD Committee membership requirements. Board staff encouraged members to identify any interest in additional Board representation on the QPSD Committee.

ACTION:

Motion by S. Taylor, seconded by M. Beal, and unanimously voted to accept Ms. Hanley’s report, to obtain further information about the QPSD Committee membership requirements, and to implement

future periodic reports to the Board from Ms. Hanley approximately every six (6) months regarding her participation on, and the activities of, the QPSD Committee.

TOPIC:

Strategic Development, Planning and Evaluation: License Status Codes Relative to SARP. Board Counsel O. Atueyi summarized her previously distributed memo. In August 2015, the Division of Health Professions Licensure reviewed and updated the license status codes and definitions accessible by the public through the license verification website for the Department of Public Health, Bureau of Health Care Safety and Quality (BHCSQ). The goal of the review was to narrow the list of codes to cover the essentials and eliminate confusing, duplicative license statuses. Implementation of the new license status codes prompted a review of the license status code currently used for SARP participants.

Prior to implementation of the new license status codes, the only license status code available that would safeguard confidentiality of SARP participants was "Current." However, the new license status codes include options that would indicate the existence of non-disciplinary restrictions or conditions on practice without identifying that the licensee is a participant in SARP. Currently, the non-disciplinary license codes are used for Non-Disciplinary Stayed Probation, Non Disciplinary Agreement not to Practice, Non-Disciplinary Agreement not Practice due to Medical Incapacity, Non-Disciplinary Agreement Not to Practice Due to Out of State Discipline and Bridge Agreements. Therefore, a non-disciplinary license status will not disclose the fact of participation in SARP.

In SARP, new participants must refrain from nursing practice during the first year. During subsequent years, participants are allowed to practice nursing with conditions. Prior to accepting a nursing position, participants are required to inform employers that they are in SARP. In addition, an employer must provide quarterly reports and monitor the participant as required by the program.

Recommendation: Authorize use of the Division's new license status codes for new SARP participants effective on January 1, 2016. Specifically, license status code "Non-Disciplinary Restriction," which is defined as "Practice is not authorized pursuant to an agreement or order that is non-disciplinary in nature" can be used for first year participants. When participants return to nursing practice, their license status can be changed to "Non-Disciplinary Conditions" defined as "Practice is authorized subject to conditions pursuant to an agreement or order that is non-disciplinary in nature." All documents related to SARP were reviewed and both SARP Coordinators were consulted with regard to this recommendation.

DISCUSSION:

The new license status codes will not apply to current participants because they may have relied on the representation that their license status would remain "current." However, prospective participants will be informed of the new license status codes prior to entering into an agreement.

ACTION:

Motion by J. Killion, seconded by A. Alley, and unanimously voted to accept the recommendation.

TOPIC:

G.L. c.30A, §21 Executive Session

DISCUSSION:

None

ACTION:

Motion by A. Alley, seconded by C. Simonian, and unanimously passed by roll call vote to go into Executive Session at 12:45 p.m. as per Purpose One and Five of G.L. c.30A, §21 (a)(1).

Recess 12:45 p.m. to 12:55 p.m.

G.L. c. 30A, § 21 Executive Session 12:55 p.m. – 1:09 p.m.

TOPIC:

Adjudicatory Session - None

Meal Break 1:09 p.m. to 1:45 p.m.

TOPIC:

G.L. c. 112, s. 65C Session

DISCUSSION:

None.

ACTION:

Motion by A. Alley seconded by M. Beal, and unanimously passed to go into G.L. c. 112, s. 65C Session at 1:45 p.m. to discuss negotiated settlements of complaints.

G.L. c. 112, s. 65C Session 1:45 p.m. to 4:42 p.m.

TOPIC:

Adjournment

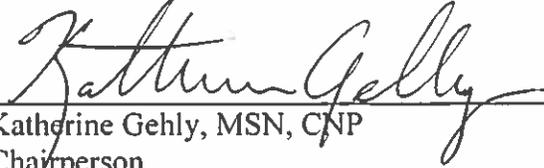
DISCUSSION:

None.

ACTION:

Motion by P. Gales, seconded by A. Alley, and unanimously passed to adjourn the meeting at 4:42 p.m.

Minutes of the Board's December 9, 2015, Regularly Scheduled Meeting were approved by the Board on February 10, 2016.


Katherine Gehly, MSN, CNP
Chairperson
Board of Registration in Nursing

Agenda with exhibits list attached.

COMMONWEALTH OF MASSACHUSETTS

NOTICE OF THE REGULARLY SCHEDULED MEETING OF THE
BOARD OF REGISTRATION IN NURSING

December 9, 2015

239 Causeway Street ~ Room 417 A&B
Boston, Massachusetts 02114

Agenda as of 12/3/15

Estimated Time	#	1. Item	Exhibits	Presented by
9:00 a.m.	I.	2. CALL TO ORDER & DETERMINATION OF QUORUM		
	II.	APPROVAL OF AGENDA	Agenda	
	III.	APPROVAL OF BOARD MINUTES A. Draft Minutes for the November 18, 2015 Meeting of the Board of Registration in Nursing, Regular Session	Minutes	
	IV.	REPORTS, ANNOUNCEMENTS AND ADMINISTRATIVE MATTERS A. Executive Director's Report B. Staff Report 1. Deputy Executive Director 2. Assistant Director 3. Practice 4. Education 5. Complaint Resolution 6. SARP 7. Probation Monitor C. Announcements	-- -- -- Report None Report None None Oral	-- -- -- LT -- AF/HC -- -- ASF
9:10 a.m.	V.	PROBATION A. Termination of Probation/Stayed Probation 1. M. Hackett, LN28529, LN-97-060 2. M. Sol Parena, RN181787, NUR-2012-0042 3. C. Brick, RN284789, NUR-2012-0216 B. Request for Notice of Violation and Further Discipline in the matter of P. Hoynoski, RN198115, LN42464 (exp.), RN-07-043 C. Request for Notice of Violation in the matter of T. Dolan, RN2270906, NUR-2013-0020	Memos Memo Memo	KF KF KF
	VI.	COMPLAINT RESOLUTION A. Resolution of Pending Board Complaints 1. D. Ursin, RN169592, NUR-2014-0048 B. Resolution of Pending Board Staff Assignments: NONE	Report	MC/HC
	VII.	PRACTICE: NONE		LT

	VIII. EDUCATION D. 244 CMR 6.06(2) Onsite Survey Waiver Request Middlesex Community College Associate Degree RN Program E. MassBay Community College RN Associate Degree Program Review of Program Stability F. 244 CMR 6.08(1)(h) 2014 NCLEX Evaluation Report 1. Bay State College Associate Degree RN Program 2. Laboure College Associate Degree RN Program	Compliance Report Compliance Report Compliance Report	KA KA KA
	IX. REQUESTS FOR LICENSE REINSTATEMENT: NONE		
	X. STRATEGIC DEVELOPMENT, PLANNING AND EVALUATION A. Systematic Policy Evaluation: NONE B. Topics for Next Agenda C. Summary Report, BRN Representative to BRM Quality and Patient Safety Division: Diane Hanley, MSN, RN, Guest D. License Status Codes Relative to SARP E. Executive Order 562 Regulatory Review	Oral Memo Memo Memo and Draft Regulations	ASF ASF OA VB
12:15 p.m.	XI. EXECUTIVE SESSION The Board will meet in Executive Session as authorized pursuant to M.G.L. c.30A, § 21(a)(1) for the purpose of discussing the reputation, character, physical condition or mental health, rather than professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual. Specifically, the Board will discuss and evaluate: <ul style="list-style-type: none"> • The Good Moral Character as required for registration for pending applicants. • The approval of prior executive session minutes in accordance with M.G.L. ch.30A, § 22(f) for sessions held during the November 18, 2015 meeting. 	CLOSED SESSION	
12:45 p.m.	LUNCH		
	XII. ADJUDICATORY SESSION (M.G.L. c. 30A, § 18)	NONE	
	XIII. M.G.L. c. 112, § 65C SESSION	CLOSED SESSION	
4:30 p.m.	XIV. ADJOURNMENT		