

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

**Minutes of the Regularly Scheduled Board Meeting**  
Wednesday, June 8, 2016

**Board Members Present**

K. Gehly, CNP, Chair  
P. Gales, RN, Vice Chair  
S. Abbott, Public Member  
M. Beal, CNM  
J. Killion, LPN  
C. LaBelle, RN  
A. Peckham, RN  
C. Tebaldi, CNP  
B. Levin RN  
J. Fantes, MD

**Board Members Not Present**

C. Simonian, PharmD, RPh  
C. Urena, LPN

**Staff Present**

L. Silva, RN, DNP, Executive Director  
C. MacDonald, RN, DNP, Deputy Executive Director  
C. Silveira, MS, RN, Assistant Director  
K. Ashe, RN, Nursing Education Coordinator  
O. Atueyi, JD, Board Counsel  
H. Cambra, RN, JD, Complaint Resolution Coordinator  
D. M. DeVaux, RN, SARP Coordinator  
A. Fein, RN, JD, Complaint Resolution Coordinator  
V. Iyawe, RN, SARP Coordinator  
K. Keenan, Licensing Coordinator  
C. Pascarella, JD, Probation Staff  
L. Talarico, CNP, Nursing Practice Coordinator  
T. Westgate, Program Coordinator  
B. Oldmixon, Board Counsel  
K. Fishman, Probation Monitor

**Staff Not Present**

**Guests**

See attached list.

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**TOPIC:**

Call to Order & Determination of Quorum

**DISCUSSION:**

K. Gehly confirmed by roll call that a quorum of the Board members were present. Board Members and staff introduced themselves.

**ACTION:**

At 9:07 a.m., K. Gehly, Chairperson, called the June 8, 2016 Regularly Scheduled Board Meeting to order.

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**TOPIC:**

Approval of Agenda

**DISCUSSION:**

K. Gehly stated that the meeting was being recorded. The Prescription Monitoring Program Presentation with Guest, Eric Sheehan, Director, DPH Bureau of Health Care Safety and Quality, was deferred.

**ACTION:**

Motion by B. Levin, seconded by M. Beal, and unanimously passed to approve the agenda as presented/as revised.

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**TOPIC:**

Approval of Board Minutes for the March 9, 2016 Meeting of the Regularly Scheduled Board Meeting

**DISCUSSION:**

None.

**ACTION:**

Motion by P. Gales, seconded by J. Killion, and unanimously passed to accept the Minutes of the March 9, 2016, Regularly Scheduled Board Meeting.

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**TOPIC:**

Reports, Announcements and Administrative Matters

A. Executive Director's Report

B. Staff Report

1. Assistant Director

2. Practice

3. SARP

4. Probation Monitor

C. Announcements

**DISCUSSION:**

A. Executive Director's Report:

1. Dr. Silva reported on the previously distributed ballot for the Fiscal Year 2017 offices of Chairperson and Vice-Chairperson, stating that Ms. Gehly had been nominated for the office of Board Chairperson and that Ms. Levin had been nominated for the office of Vice-Chairperson. There were no nominations from the floor in response to Dr. Silva's request.

B. Staff Reports:

1. C. Silveira noted she will provide an updated BRN-At-A-Glance document next month. M. Beal asked if there will be a quorum for the August meeting. L. Silva stated that an email will be sent to Board members. B. Levin requested clarification regarding the August meeting since the Board historically did not meet in August. Dr. Silva responded that the August meeting had been added to the Fiscal Year 2017 schedule in light of the meeting cancellations

earlier this year. She noted that the Fiscal Year 2017 dates had been discussed during the June 1 meeting.

2. Members reviewed Ms. Talarico's previously distributed April and May memos without discussion.
3. V. Iwaye stated that six new members have joined SARP.
4. K. Fishman stated she distributed the quarterly report in addition to the April and May reports.

C. None.

**ACTION:**

- A. Motion by M. Beal, seconded by P. Gales, and unanimously passed to elect Ms. Gehly as Board Chairperson and Ms. Levin as Vice-Chairperson for Fiscal Year 2017.
- B. Motion by B. Levin, seconded by A. Peckham, and unanimously passed to accept the reports.
- C. So noted.

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**TOPIC:**

Complaint Resolution

Ratification of Voluntary Agreement Not to Practice for L. Camille, LN87418, NUR-2016-0045.

**DISCUSSION:**

M. Fentress briefed the Board members on the history of the case and that the licensee had signed an agreement not to practice.

**ACTION:**

Motion by P. Gales, seconded by J. Killion, and unanimously passed to ratify the agreement.

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**TOPIC:** Probation

In the Matter of A. Finlay, LN69025, NUR-2012-0219.

**DISCUSSION:**

K. Fishman stated that the licensee has been unable to find employment and asked for a six month extension. P. Gales asked if the licensee was in compliance which K. Fishman stated she was.

**ACTION:**

Motion by A. Peckham, seconded by M. Beal, and unanimously passed to extend the probation by six months.

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**TOPIC:** Probation

In the Matter of D. Girouard, RN251264, NUR-2008-0023.

**DISCUSSION:**

K. Fishman stated the licensee had found employment but needed an extension to complete her probation.

**ACTION:**

Motion by P. Gales, seconded by M. Beal, and unanimously passed to extend the probation.

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**TOPIC:** Probation

In the Matter of G. Grammont, LN54939, NUR-2011-0102.

**DISCUSSION:**

K. Fishman stated the licensee had found employment but needed an extension to complete her probation.

**ACTION:**

Motion by J. Killion, seconded by M. Beal, and unanimously passed to extend probation.

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**TOPIC:** Practice

Proposed Revisions to Advisory Rulings:

1. 0801: Withholding Initiation of CPR in LTC Facilities
2. 9401: The Role of the Licensed Nurse as Trainer or Consultant for the DPH MAP Program

**DISCUSSION:**

1. Board members reviewed Ms. Talarico's previously distributed memo recommending:
  - Renaming AR 0801 to "*Cardiopulmonary Resuscitation in Long-term Care Facilities*" and providing language changes to improve readability; replacing "withholding" with "not initiating" because the former has the connotation of deprivation, the latter a deliberate action that preserves patient choice and dignity after professional decision-making
  - Finding that the information presented in AR 0801, reviewed in 2013 by the NPAP, remains consistent with the AHA CPR guidelines (2015)
  - Retaining the Board's 2008 position that, in the context of practice in a Massachusetts long-term care facility with 24-hour skilled nursing staff on duty, current practice standards require the initiation of CPR when a patient or resident has experienced a cardiac arrest **except** when the patient or resident has:
    - o A current, valid Do Not Resuscitate (DNR) order; **OR**
    - o Signs of irreversible death (e.g. decapitation, decomposition, rigor mortis, dependent lividity); **OR**
    - o Situations where attempts to perform CPR would place the rescuer at risk of serious injury or mortal peril
  - Clarifying that nurses in a management role are required to apply CMS revised guidance for long term care facilities that participate in Medicare/Medicaid, including providing staff at all times who have maintained current CPR certification for healthcare providers through CPR training that includes hands-on practice and in-person skills assessment
  - Revising Advisory Ruling 0801 with updated citations
2. Board members reviewed Ms. Talarico's previously distributed memo regarding findings based on the MA DPH Medication Administration Program Clinical Reviewer and the Nursing Practice Advisory Panel appraisals of the AR 9401 to include:
  - Since the 2013 revisions of AR 9401, MAP has introduced a new "Nurse Monitor Role" to the existing RN MAP training and consulting roles; and
  - AR 9401 lacks a standardized statement requiring licensee compliance with all nursing licensure and practice laws and regulations

**ACTION:**

1. Motion by M. Beal, seconded by A. Peckham, and unanimously passed to:
  - Rename AR 0801 to "*Cardiopulmonary Resuscitation in Long-term Care Facilities*" and provide language changes to improve readability
  - Find that the information presented in AR 0801, reviewed in 2013 by the NPAP, remains consistent with the AHA CPR guidelines (2015)

- Retain the Board's 2008 position that, in the context of practice in a Massachusetts long-term care facility with 24-hour skilled nursing staff on duty, current practice standards require the initiation of CPR when a patient or resident has experienced a cardiac arrest except when the patient or resident has:
    - A current, valid Do Not Resuscitate (DNR) order; **OR**
    - Signs of irreversible death (e.g. decapitation, decomposition, rigor mortis, dependent lividity); **OR**
    - Situations where attempts to perform CPR would place the rescuer at risk of serious injury or mortal peril
  - Clarify that nurses in a management role are required to apply CMS revised guidance for long term care facilities that participate in Medicare/Medicaid, including providing staff at all times who have maintained current CPR certification for healthcare providers through CPR training that includes hands-on practice and in-person skills assessment
  - Update citations
2. Motion by P. Gales, seconded by B. Levin, and unanimously passed to amend Advisory Ruling 9401: *The Role of the Licensed Nurse as Trainer or Consultant for the Department of Public Health Medication Administration Program* to:
- Add the "Nurse Monitor Role" to the existing RN roles of MAP training and consulting
  - Remove "*as Trainer or Consultant*" in the AR title;
  - A standardized statement requiring licensee compliance with all nursing licensure and practice laws and regulations; and
  - Add references:
    - 104 CMR 28.00: *Licensing and Operational Standards for Community Programs*
    - 105 CMR 700.000: *Implementation of M.G.L. c. 94C*
    - 115 CMR 5.00: *Standards to Promote Dignity*
    - *Medication Administration Program Policy Manual*

**TOPIC:**

Education

(4/13/16 agenda)

A. 244 CMR 6.04(1)(c)&(1)(f) Administrative Changes

1. Westfield State University (CEO)
2. University of Massachusetts- Dartmouth (CEO)
3. Massachusetts General Hospital Institute of Health Professions (Program Administrator)

B. 244 CMR 6.05 (3)(a) Application for Full Approval Status: Mildred-Elley Practical Nursing Program

(5/11/16 agenda)

A. 244 CMR 6.04(1)(c) & (1)(f) Administrative Change; University of Massachusetts Graduate Nursing School (Program Administrator)

(6/8/16 agenda)

A. 244CMR 6.06(2) Site Survey Waiver Request Berkshire Community College Associate Degree RN Program

## **DISCUSSION:**

(4/13/16 agenda)

A. Members reviewed Ms. Ashe's previously distributed memo, which she presented during the meeting. K. Ashe recommended accepting the notifications included in the memo.

B. Members reviewed Ms. Ashe's previously distributed memo, which she presented during the meeting. Dr Patricia Newman, Program Director, Mildred Elley School, was present to answer Board Member questions and to provide an update on progress of a revised program systematic evaluation plan (SEP). K Gehly asked if the Program was able to comply with the Board recommended due date for updates SEP. Dr. Newman stated work was progressing and that the SEP would be completed revised and beginning operation by August 2016.

(5/11/16 agenda)

Members reviewed Ms. Ashe's previously distributed memo which she presented during the meeting. K. Ashe recommended accepting the notifications included in the memo. K. Gehly stated for the minutes that C. LaBelle arrived at the Board meeting.

(6/8/16 agenda)

Members reviewed Ms. Ashe's previously distributed compliance report which she presented during the meeting. Dr, Tochi Ubani, Director of Nursing, was present to answer Board member questions K. Ashe reported that the compliance report submitted by the Program was received late do the interim program administrator changes, however with Dr Ubani's appointment in January, the Program faculty have begun to make corrective actions to areas of non compliance sited in the ACEN accreditation report. K. Ashe recommended that the Board grant the waiver. The Dean thanked the Board and reviewed some of the corrective actions.

## **ACTION:**

(4/13/16 agenda)

A. Motion by J. Killion, seconded by A. Peckham, and unanimously passed to find compliance with 244 CMR 6.04(1)(c) and (1)(f) in the appointment of:

1. Dr Peyton Randal Helm, Interim Chancellor, (CEO), University of Massachusetts Dartmouth, North Dartmouth Massachusetts;
2. Dr. Ramon S. Torrecilha President (CEO), Westfield State University, Westfield, MA; and
3. Inez Tuck, PhD, MBA, MDiv, RN, Professor and Dean (Program Administrator), School of Nursing, MGH Institute of Health Professions, Boston, MA.

B. Motion by P. Gales, seconded by M. Beal, and unanimously to accept the staff compliance report; and to accept the Mildred Elley School Full Approval Application, finding the Mildred Elley School has provided satisfactory evidence of its ability to maintain on-going compliance with 244 CMR 6.04 directing the program faculty to:

1. develop and implement a current written plan for the systematic evaluation of all components of the program;
2. provide evidence the plan documents the measurement of the outcomes of the program;
3. provide evidence that the results of the evaluation are used for the development, maintenance and revision of the program;
4. the revised systemic evaluation plan will be submitted to the Board no later than August 1, 2016.

(5/11/16 agenda)

- A. Motion by J. Killion, seconded by B. Levin and unanimously passed to find compliance with 244 CMR 6.04(1)© and 6.04(1)(f) in the appointment of Joan M Vitello-Cicciu, PhD, RN, FAAN, Dean (Program Administrator), Graduate School of Nursing, University of Massachusetts, Worcester, MA.

(6/8/16 agenda)

- A. Motion by P. Gales, seconded by A. Peckham, and unanimously voted to grant a waiver of 244 CMR 6.06(1) (a) to the Associate Degree Nursing Program, Berkshire Community College, based on review of the findings and recommendations of the Accrediting Commission for Nursing Education (ACEN), the nursing program's Self-Study Report, the report addressing compliance with the 2015 Annual Report to the Board, directing the program provide:
1. evidence of compliance with the immunization regulation [ref 244 CMR 6.04(3) (a)] specified by the MA DPH Adult Occupational Immunizations Massachusetts Recommendations and Requirements for 2015. Due date 10/10/2016;
  2. a progress report outlining compliance with the ACEN recommendations including evidence that:
    - a. the curriculum incorporates established professional standards, guidelines, and competencies and has clearly articulated student learning outcomes consistent with contemporary practice;
    - b. the student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress;
    - c. the faculty regularly review the curriculum for rigor and currency;
    - d. the systematic evaluation plan emphasizes the ongoing assessment and evaluation of the student learning outcomes and the role-specific graduate competencies;
    - e. the systematic evaluation plan emphasizes the ongoing assessment and evaluation of the student learning outcomes and the role-specific graduate competencies;
    - f. the systematic evaluation plan contains a minimum of three (3) years of data for each component within the plan;
    - g. evaluation findings are aggregated and trended and are used to inform program decision-making for the maintenance; and
    - h. improvement of the student learning outcomes and the program outcomes.
  3. Submit the ACEN Follow-Up Report as directed by ACEN. Both reports due October 1, 2017.
  4. Direct the program to provide written evidence of the action taken by the ACEN Board of Commissioners, following review of the Follow-Up Report, demonstrating continued accreditation of the nursing program with the next evaluation visit scheduled for spring 2023, or denying continuing accreditation. The findings of the ACEN Board of Commissioners will be reported to the Board within 15 days of receipt by the program administrator.

**TOPIC:**

Strategic Development, Planning and Evaluation

(4/13/16 agenda)

- A. Systematic Policy Evaluation:
1. Licensure Policy 06-01: Board-designated Tests of English Proficiency
  2. Licensure Policy 93-01: NCLEX Retake
  3. Licensure Policy 99-01: Board Staff Action to Determine NCLEX Examination Administration Modifications
  4. Licensure Policy 99-02: Staff Action to Extend NCLEX Eligibility Period
  5. Licensure Policy 99-05: Determination of Compliance with 244 CMR 8.04(1)(c)4 (Comparable PN Education)

(6/8/16 agenda)

B. Topics for Next Agenda

C. FY 2017 Board Meeting Schedule

D. FY 2017 Election of Board Officers

**DISCUSSION:**

(4/13/16 agenda)

A. Systematic Policy Evaluation:

1. K. Ashe presented her previously distributed memo, briefing the Board on proposed policy changes designed to align the policy with evidence related to English proficiency exams.
2. K. Ashe presented her previously distributed memo, briefing the Board on proposed policy changes.

(6/8/16 agenda)

B. None.

C. None.

D. None.

**ACTION:**

(4/13/16 agenda)

A. Systematic Policy Evaluation:

1. Motion by B. Levin, seconded by A. Peckham, and unanimously passed to

1. Find that:

- a. The National Council of State Boards of Nursing (NCSBN) Uniform Licensure Requirements serve as a standard for nurse licensure endorsed by Member Boards since 2011 and specify that the non-US educated nurse licensure applicant is responsible for successfully passing an English proficiency exam that includes four components: reading, speaking, writing and listening except when the applicant is from a country where nursing education including language of instruction and textbooks is in English;
- b. The NCSBN makes legally defensible, nursing-focused cut score recommendations for the International English Language Testing System - Academic (ILETS Academic), Test of English as a Foreign Language (TOEFL) iBT (Internet-based test), Pearson Test of English Academic and Michigan English Language Assessment Battery, noting that the NCSBN recommends:
  - i. a minimum TOEFL iBT cut score of 84 with a minimum speaking score of 26 while the TOEFL iBT cut score currently designated by the Board is 83 and does not address the speaking component;
  - ii. a minimum IELTS Academic band score of 6.5 overall with a minimum of 6.0 in *any one* module (reading, writing, speaking and listening) while the Board, in 2011, designated an IELTS cut score as 6.5 overall with a minimum of 6.0 in *all* modules;
- c. Educational Testing Service no longer administers the TOEFL exam in paper or computer-based formats;
- d. The exams and cut scores used in the English proficiency component of the Commission on Graduates of Foreign Nursing Schools Certification Program are not consistent with NCSBN's legally defensible recommendations;
- e. The Canadian English Language Benchmark Assessment for Nurses (CELBAN) is recognized as evidence of English proficiency by all Canadian nurse regulatory bodies for licensure purposes and includes components found in NCSBN's URLs: speaking, listening, reading and writing; the recommended cut score for the listening component was

increased from 9 to 10 in 2011; and

2. Amend Licensure Policy 06-01: *Board-designated Tests of English Proficiency and Required Minimum Cut Scores* to:
    - a. No longer accept the Commission on Graduates of Foreign Nursing Schools Qualifying Examination Certificate for the purpose of demonstrating English proficiency;
    - b. Continue to require an IELTS an overall band score of 6.5 with a minimum cut score of 6.0 in all modules and specify the IELTS Academic exam as the IELTS exam acceptable for licensure purposes;
    - c. No longer accept TOEFL administered in paper or computer-based formats and increase the TOEFL iBT score from 83 to 84;
    - d. Continue to require a CELBAN cut score of 8 in the speaking and reading components, a score of 7 in the writing component and increase the listening component from 9 to 10; and
    - e. Continue to accept the MELAB and PTE Academic exams and their corresponding cut scores.
2. Motion by P. Gales, seconded by J. Killion, and unanimously passed to:
- a. Find that Licensure Policies 93-01: *NCLEX Retake*; 99-01: *Board Staff Action to Determine NCLEX Examination Administration Modifications*; 99-02: *Staff Action to Extend NCLEX Eligibility Period*; and 99-05: *Determination of Compliance with 244 CMR 8.04(1)(c)4 (Comparable PN Education)* remain current and relevant.
  - b. Retain Licensure Policy 93-01: *NCLEX Retake* as written.
  - c. Consolidate Licensure Policies 99-01: *Board Staff Action to Determine NCLEX Examination Administration Modifications*; 99-02: *Staff Action to Extend NCLEX Eligibility Period*; and 99-05: *Determination of Compliance with 244 CMR 8.04(1)(c)4 (Comparable PN Education)* into one staff action policy, retaining the policies as otherwise written and rescind the discrete policies.
  - d. Delete the phrases, "Candidates with Disabilities" and "applicant has a disability" referenced in Licensure Policy 99-01.

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**TOPIC:**

G.L. c.30A, §21 Executive Session

**DISCUSSION:**

K. Gehly stated the reasons the Board was going into Executive session.

**ACTION:**

Motion by P. Gales, seconded by B. Levin, and unanimously passed by roll call vote to go into Executive Session at 9:44 a.m. as per Purpose One of G.L. c.30A, §21 (a)(1).

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G.L. c. 30A, § 21 Executive Session 9:44 a.m. to 11:37 a.m.

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**TOPIC:**

Adjudicatory Session

**DISCUSSION:**

None

**ACTION:**

Motion by P. Gales, seconded by J. Killion, and unanimously passed to go into Adjudicatory Session at 12:31 p.m. to discuss decisions in pending adjudicatory matters.

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**Adjudicatory Session 12:31 p.m. to 1:03 p.m.**

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**TOPIC:**

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

**DISCUSSION:**

The Board moved to go into 65C before Adjudicatory.

**ACTION:**

Motion by B. Levin, seconded by M. Beal, and unanimously passed to go into 65 C before Adjudicatory.  
Motion by K. Gehly, seconded by P. Gales, and unanimously passed by e to go into G.L. c. 112, s. 65C Session at 11:53 a.m..

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**G.L. c. 112, s. 65C Session 11:53 a.m. to 12:30 p.m.**

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**TOPIC:**

Adjournment

**DISCUSSION:**

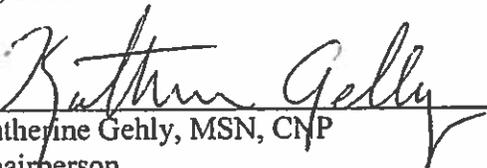
None

**ACTION:**

Motion by P. Gales, seconded by B. Levin, and unanimously passed to adjourn the meeting at 1:03 p.m.

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Minutes of the Board's June 8, 2016, Regularly Scheduled Meeting were approved by the Board on July 13, 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**

June 8, 2016

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

**PRELIMINARY AGENDA AS OF <5/26/16 5:12 pm>**

Estimated Time	#	A. Item	Exhibits	Presented by
9:00 a.m.	I.	<b>B. CALL TO ORDER &amp; DETERMINATION OF QUORUM</b>	None	
	II.	<b>APPROVAL OF AGENDA</b>	Agenda	
	III.	<b>APPROVAL OF BOARD MINUTES</b> A. Draft Minutes for the March 9, 2016, Meeting of the Board of Registration in Nursing Regular Session	Minutes	
	IV.	<b>REPORTS, ANNOUNCEMENTS AND ADMINISTRATIVE MATTERS</b> A. Executive Director's Report (April, May, June) B. Staff Report 1. Assistant Director (April) 2. Practice (April) 3. SARP (April, May, June) 4. Probation Monitor (Qtr 1, April, May) C. Announcements	Oral  Report Report Reports Reports	LS  CS LT VI/DM KF
	V.	<b>COMPLAINT RESOLUTION</b> (4/13/16 agenda) A. Resolution of Pending Board Complaints: None B. Resolution of Pending Board Staff Assignments: None C. Ratification of Voluntary Agreement Not to Practice 1. L. Camille, LN 87418, NUR 2016-0045	Oral	MF
	VI	<b>PROBATION</b> (4/13/16 agenda) - None  (5/11/16 agenda) - None  A. Requests for Extension in the matters of: 1. A. Finlay, LN69025, NUR-2012-0219 2. D. Girouard, RN251264, NUR-2008-0023 3. G. Grammont, LN54939, NUR-2011-0102	Compliance Summary  Memo	KF/CP  KF/CP

	<b>VII PRACTICE:</b> A. Proposed Revisions to Advisory Rulings: 1. 0801: Withholding Initiation of CPR in LTC Facilities 2. 9401: The Role of the Licensed Nurse as Trainer or Consultant for the DPH MAP Program	Memo Memo	LT LT
	<b>VIII. EDUCATION</b> <b>(4/13/16 agenda)</b> B. 244 CMR 6.04(1)(c)&(1)(f) Administrative Changes 4. Westfield State University (CEO) 5. University of Massachusetts- Dartmouth (CEO) 6. Massachusetts General Hospital Institute of Health Professions (Program Administrator) C. 244 CMR 6.05 (3)(a) Application for Full Approval Status: Mildred-Elley Practical Nursing Program  <b>(5/11/16 agenda)</b> A. 244 CMR 6.04(1)(c) & (1)(f) Administrative Change 1. University of Massachusetts Graduate Nursing School (Program Administrator)  <b>6/8/16</b> A. 244CMR 6.06(2) Site Survey Waiver Request Berkshire Community College Associate Degree RN Program	Memo  Compliance Report  Memo  Compliance Report	KA  KA  KA  KA
	<b>IX REQUESTS FOR LICENSE REINSTATEMENT: None</b>		
	<b>X. STRATEGIC DEVELOPMENT, PLANNING AND EVALUATION</b> <b>(4/13/16 agenda)</b> E. Systematic Policy Evaluation (April): 1. Licensure Policy 06-01: Board-designated Tests of English Proficiency 2. Licensure Policy 93-01: NCLEX Retake 3. Licensure Policy 99-01: Board Staff Action to Determine NCLEX Examination Administration Modifications 4. Licensure Policy 99-02: Staff Action to Extend NCLEX Eligibility Period 5. Licensure Policy 99-05: Determination of Compliance with 244 CMR 8.04(1)(c)4 (Comparable PN Education)  <b>6/8/16</b> F. Topics for Next Agenda G. FY 2017 Board Meeting Schedule H. FY 2017 Election of Board Officers	Memo  Memo Memo Memo Memo  Memo Ballot	KA  KA KA KA KA  LS LS
◀	<b>LUNCH</b>		

	<b>XI. EXECUTIVE SESSION</b> 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.  1. Specifically, the Board will discuss and evaluate the reputation, character, physical condition or mental health, rather than professional competence, of licensees relevant to their petitions for license status change.  2. Specifically, the Board will discuss and evaluate pending disciplinary complaints that involve patient records and treatment of patients or that involve a physical condition or the mental health of the licensee.  3. Approval of prior executive session minutes in accordance with M.G.L. ch.30A, § 22(f) for sessions held during the June 1, 2016, meeting.	CLOSED SESSION	
	<b>XII ADJUDICATORY SESSION (M.G.L. ch. 30A, § 18)</b>	CLOSED SESSION	
	<b>XIII M.G.L. c. 112, § 65C SESSION</b>	CLOSED SESSION	
4:30 p.m.	<b>XIV</b> Prescription Monitoring Program Presentation: Guest, Eric Sheehan, Director, DPH Bureau of Health Care Safety and Quality	OPEN SESSION	
5:00 p.m.	<b>XV ADJOURNMENT</b>		