

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

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

Board Members Present

K. Gehly, CNP, Chair
P. Gales, RN, Vice Chair
A. Alley, RN
M. Beal, CNM
J. Killion, LPN
B. Levin, RN
A. Peckham, RN
C. Simonian, PharmD, RPh
S. Taylor, RN
C. Urena, LPN

Board Members Not Present

E. Richard Rothmund, Public Member
C. Tebaldi, CNP

Staff Present

C. Silveira, RN, Assistant Director
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

Guests

See attached list.

TOPIC:

Call to Order & Determination of Quorum

DISCUSSION:

None.

ACTION:

At 9:27 a.m., K. Gehly, Chairperson, called the September 9, 2015, Regularly Scheduled Board Meeting to order and called roll. A quorum of the Board members was determined to be present.

TOPIC:

Approval of Agenda

DISCUSSION:

Ms. Fein stated that Agenda Item VI, Part 2, Section A 2 would be heard with Agenda Item VI, Part 2, Section C 5.

ACTION:

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

TOPIC:

Approval of Board Minutes for the June 10, 2015 Meeting of the Regularly Scheduled Board Meeting and the August 5, 2015, Emergency Board Meeting.

DISCUSSION:

Minutes of the June 10, 2015, and August 5, 2015, meetings were distributed prior to the meeting. Ms. Cambra provided a point of clarification on page 2 of the August 5, 2015, meeting minutes in response to Ms. Taylor's request.

ACTION:

Motion by B. Levin, seconded by C. Urena, and unanimously passed to accept the Minutes of the June 10, 2015 Regularly Scheduled Board Meeting.

Motion by J. Killion, seconded by P. Gales, and unanimously passed to accept the Minutes of the August 5, 2015, Emergency Board Meeting.

TOPIC:

Reports

A. Executive Director's Report

B. Staff Report

1. Deputy Executive Director
2. Assistant Director
3. Practice
4. Education
5. Complaint Resolution
6. Application Processing Report
7. SARP
8. Probation Monitor

DISCUSSION:

A. Executive Director's Report: None.

B. Staff Reports:

1. None.
2. Members reviewed Ms. Silveira's previously distributed memos for the months of July and September. In relation to Ms. Silveira's report on the National Council of State Boards of Nursing (NCSBN) Annual Report contained in her memo dated September 3, 2015, Ms. Gehly pointed out that the NCSBN Board of Directors sets the National Council Licensure Examination passing standard and explained the process.

3. Members reviewed Ms. Talarico's previously distributed memo. Ms. Talarico noted that Board staff have been collaborating with DPH Information Technology staff to plan for the retirement of paper renewal notices and paper licenses. In addition, Board Staff have completed updates to the MA Nurse Practice Act Educational Program that is offered on the NCSBN web site. The Board received confirmation from the Drug Control Program that prescribing APRNs are now automatically enrolled in the Prescription Monitoring Program when their MA Controlled Substance Registration is renewed.
4. Members reviewed Ms. Ashe's previously distributed memos for the months of July and September. Ms. Ashe provided details for Board members wishing to register for the Member Board Review of NCLEX Items with a deadline of Friday September 11, 2015. Members were encouraged to participate in this process with an opportunity to review NCLEX RN and PN items, exam security, and the computerized adaptive examination experience. Also, members were updated on available virtual software for educational and remediation purposes. The vendor offers at least eighteen different skills modules with competency verification. Chairperson K.Gehly asked how students and nurses access software. Individuals may create, pay for and access their own account.
5. Members reviewed the previously distributed memos prepared by the Complaint Resolution Coordinators.
6. Ms. Cambra presented an oral application processing report, updating the Board members on actions immediately taken by Board staff related to the reciprocal license application processing by Professional Credential Services. In response, Ms. Gales recognized Board staff for its work in identifying and addressing the fraudulently obtained licenses.
7. Members reviewed the SARP Coordinators' previously distributed SARP Activity Reports.
8. Members reviewed the Probation Monitor's previously distributed report.

Ms. Cambra announced that the meeting was being recorded.

ACTION:

Motion by B. Levin, and seconded by P. Gales, to accept the staff reports.

TOPIC:

Consensus Agenda

A. NCSBN Update

B. Coalition for the Prevention of Medical Errors Update

DISCUSSION:

Ms. Talarico announced that, beginning with this September Board meeting, the NCSBN Update and the MA Coalition for the Prevention of Medical Errors Update will be provided to Board members as part of the Practice Staff Report. Because of its volume, the minutes and report from the MA Coalition for the Prevention of Medical Errors will be presented as separate electronic files, allowing members the option of viewing or printing the information. The NCSBN Update will be an appendix to the Practice Staff Report.

A. Members reviewed Ms. Talarico's previously distributed NCSBN Update.

B. The May, 2015 minutes and June 2015 report from the Coalition for the Prevention of Medical Errors were made available to members in the Board packet.

ACTION:

- A. Accepted by consensus
- B. Accepted by consensus

TOPIC:

Pending Board Complaint: **In the Matter of A. Cameron**, LN86183, NUR-2014-0056. The Board's Compliance Officer and Complaint Resolution Coordinator presented their previously distributed Investigation Report with CRC recommendations outlining the allegations reported, information obtained regarding the Licensee's practice related conduct and any corresponding mitigating and aggravating circumstances, and any remedial activities completed. Specifically, the CRC recommended that the information and documentation obtained during the investigation substantiated that from 8/8/2013 until 2/14/14, while employed and practicing as an LPN, the Licensee practiced while her LPN license was expired. MLO records and copies of emails submitted by the Licensee verify that the Licensee: (a) attempted to renewed her LPN license online well before it was due to expire on 8/7/13; however, experienced problems doing so that she reported to the DHPL help desk, but thereafter did not recognize that she needed to complete her renewal online as she was informed in the response that she received from the helpdesk; (b) upon learning on or about 2/14/14 that her LPN license was expired and had not been renewed as she intended, she immediately went on online and successfully renewed her license for her renewal period through 8/7/15, including paying the late renewal fee; (c) prior to and since the incident presented by this complaint, the Licensee has renewed her LPN license timely; and (d) has been licensed by the Board as an LPN since 9/4/09 and has not had any other complaints filed with the Board. The Licensee has also submitted reliable documentation showing that other than the incident presented by this complaint, the Licensee has engaged in nursing practices that consistently meet accepted standards of practice.

DISCUSSION:

None.

ACTION: Motion by P. Gales, seconded by B. Levin and voted unanimously to DISMISS the complaint without prejudice as discipline is not warranted based on consideration of the above referenced circumstances.

TOPIC:

Pending Board Complaint: **In the Matter of C. Baptiste**, LN91567, NUR-2015-0142. Board Counsel O. Atueyi presented a Consent Agreement for Permanent Revocation (Agreement) of Licensee's LN license for ratification by the Board. In the Agreement, Licensee admitted that he submitted fraudulent documents in order to obtain a Massachusetts LN license by reciprocity. He also admitted that he submitted fraudulent documents in an attempt to obtain a Massachusetts RN license by reciprocity.

DISCUSSION:

None

ACTION:

Motion by C. Simonian, seconded by M. Beal and unanimously voted to ratify the consent agreement.

TOPIC:

Pending Board Complaint: **In the Matter of H. Philippe**, RN2299766, NUR-2015-0143. Board Counsel O. Atueyi presented a Consent Agreement for Permanent Revocation (Agreement) of Licensee's RN license for ratification by the Board. In the Agreement, Licensee admitted that he submitted fraudulent documents in order to obtain a Massachusetts RN license by reciprocity.

DISCUSSION:

None

ACTION:

Motion by P. Gales, seconded by M. Beal and unanimously voted to ratify the consent agreement.

TOPIC:

Pending Board Complaint: In the Matter of **G. Belony**, RN2297853, NUR-2015-0144. Board Counsel O. Atueyi presented a Consent Agreement for Permanent Revocation (Agreement) of Licensee's RN license for ratification by the Board. In the Agreement, Licensee admitted that she submitted fraudulent documents in order to obtain a Massachusetts RN license by reciprocity.

DISCUSSION:

None

ACTION:

Motion by B. Levin, seconded by A. Peckham and unanimously voted to ratify the consent agreement.

TOPIC:

Pending Board Complaint: In the Matter of **J. Marceus**, LN92686, NUR-2015-0150. Board Counsel O. Atueyi presented a Consent Agreement for Permanent Revocation (Agreement) of Licensee's LN license for ratification by the Board. In the Agreement, Licensee admitted that he submitted fraudulent documents in order to obtain a Massachusetts LN license by reciprocity.

DISCUSSION:

None

ACTION:

Motion by J. Killion, seconded by S. Taylor and unanimously voted to ratify the consent agreement.

TOPIC:

Request for Order of Summary Suspension in the Matter of J. Clemat, RN2300490, NUR-2015-0153 and LN61194, NUR-2015-0157

DISCUSSION:

B. Oldmixon, Board Prosecutor reviewed with the members the previously distributed Request for Summary Suspension of this Licensee's RN and LN licenses and supporting documentation. The Licensee validly obtained an LN license by examination on September 13, 2000. On April 7, 2015, he submitted an application for RN licensure by reciprocity in which he represented that he held an RN license from the state of Alabama issued in 2005. His application did not list his Massachusetts LPN license and did not list a Georgia license of any type. The board received verification forms ostensibly confirming licensure from the boards of nursing in Georgia and Alabama. Investigators spoke with officials from both boards who advised that the licensee had not been licensed in either state. A. Fein also reported to the members that K. Ashe, Education Coordinator for the Board had verified there was not record of this Licensee having registered to take the NCLEX-RN licensing exam in the NCSBN database.

ACTION:

Motion by B. Levin, seconded by J. Killion, and unanimously passed to authorize the issuance of the requested Order of Summary Suspension of both licenses issued to this Licensee, specifically RN license no. 2300490 and LN license no. 61194.

TOPIC:

Request for Order of Summary Suspension in the Matter of G. Phanor, RN2302190, NUR-2015-0156.

DISCUSSION:

M. Fentress, Board Prosecutor reviewed with the members the previously distributed Request for Summary Suspension of this Licensee's RN license and supporting documentation. On June 1, 2015, the licensee submitted an application for RN licensure by reciprocity in which she represented that she completed nursing education at Kauai Community College. The board received a verification form ostensibly confirming RN licensure from the board of nursing in Hawaii. Investigators spoke with officials from the Hawaii board who advised that the licensee had not been licensed in that state.

ACTION 1:

Motion by C. Urena, seconded by C. Simonian, and unanimously passed to authorize the issuance of the requested Order of Summary Suspension of this Licensee's RN license no. 2302190.

FURTHER DISCUSSION: A. Fein also reported to the members that K. Ashe, Education Coordinator for the Board had verified there was not record of this Licensee having registered to take the NCLEX-RN licensing exam in the NCSBN database.

ACTION 2:

Motion by P. Gales, seconded by A. Alley, and unanimously passed to include the absence of evidence that the licensee had registered to take the NCLEX-RN as further information, in addition to that included within the request for summary suspension, on which the Board made its determinations supporting the issuance of the Order of Summary Suspension.

TOPIC:

Request for Order of Summary Suspension in the Matter of P. Phanord, RN2300492, NUR-2015-0154.

DISCUSSION:

M. Fentress, Board Prosecutor reviewed with the members the previously distributed Request for Summary Suspension of this Licensee's RN license and supporting documentation. On June 1, 2015, the licensee submitted an application for RN licensure by reciprocity in which she represented that she had obtained RN licensure in Hawaii in 2009. The board received a verification form ostensibly confirming RN licensure from the board of nursing in Hawaii. Investigators spoke with officials from the Hawaii board who advised that the licensee had not been licensed in that state.

ACTION:

Motion by P. Gales, seconded by C. Urena, and unanimously passed to authorize the issuance of the requested Order of Summary Suspension of this Licensee's RN license no. 2300492.

FURTHER DISCUSSION: A. Fein also reported to the members that K. Ashe, Education Coordinator for the Board had verified there was not record of this Licensee having registered to take the NCLEX-RN licensing exam in the NCSBN database.

ACTION 2:

Motion by J. Killion, seconded by S. Taylor, and unanimously passed to include the absence of evidence that the licensee had registered to take the NCLEX-RN as further information, in addition to that included within the request for summary suspension, on which the Board made its determinations supporting the issuance of the Order of Summary Suspension.

TOPIC:

Request for Order of Summary Suspension in the Matter of M. Aubourg, RN2300115, NUR-2015-0159

DISCUSSION:

M. Fentress, Board Prosecutor reviewed with the members the previously distributed Request for Summary Suspension of this Licensee's RN license and supporting documentation. On March 26, 2015 the licensee submitted an application for RN licensure by reciprocity in which she represented that she had obtained RN licensure in Oklahoma in 2011. The board received a verification form ostensibly confirming RN licensure from the board of nursing in Oklahoma. Board staff spoke with officials from the Oklahoma board who advised that the licensee had not been licensed in that state. A. Fein also reported to the members that K. Ashe, Education Coordinator for the Board had verified there was not record of this Licensee having registered to take the NCLEX-RN licensing exam in the NCSBN database.

ACTION:

Motion by A. Peckham, seconded by B. Levin, and unanimously passed to authorize the issuance of the requested Order of Summary Suspension of this Licensee's RN license no. 2300115.

TOPIC:

Request for Order of Summary Suspension in the Matter of A. Smith, RN2298729, NUR-2015-0161

DISCUSSION:

M. Fentress, Board Prosecutor reviewed with the members the previously distributed Request for Summary Suspension of this Licensee's RN license and supporting documentation. On October 20, 2014, the licensee submitted an application for RN licensure by reciprocity in which she represented that she had obtained RN licensure in Hawaii in 2009. The board received a verification form ostensibly confirming RN licensure from the board of nursing in Hawaii. Investigators spoke with officials from the Hawaii board who advised that the licensee had not been licensed in that state. A. Fein also reported to the members that K. Ashe, Education Coordinator for the Board had verified there was not record of this Licensee having registered to take the NCLEX-RN licensing exam in the NCSBN database.

ACTION:

Motion by C. Simonian, seconded by J. Killion, and unanimously passed to authorize the issuance of the requested Order of Summary Suspension of this Licensee's RN license no. 2298729.

TOPIC:

Request for Order of Summary Suspension in the Matter of A. Adebisi RN2299283, NUR-2015-0158

DISCUSSION:

M. Fentress, Board Prosecutor reviewed with the members the previously distributed Request for Summary Suspension of this Licensee's RN license and supporting documentation. On December 31, 2014, the licensee submitted an application for RN licensure by reciprocity in which he represented that she had obtained RN licensure in Oklahoma in 2011. The board received a verification form ostensibly

confirming RN licensure from the board of nursing in Oklahoma. Board staff spoke with officials from the Oklahoma board who advised that the licensee had not been licensed in that state. A. Fein also reported to the members that K. Ashe, Education Coordinator for the Board had verified there was not record of this Licensee having registered to take the NCLEX-RN licensing exam in the NCSBN database.

ACTION:

Motion by B. Levin, seconded by A. Alley, and unanimously passed to authorize the issuance of the requested Order of Summary Suspension of this Licensee's RN license no. 2299283.

TOPIC:

Request for Order of Summary Suspension in the Matter of E. Okon RN2300116, NUR-2015-0160

DISCUSSION:

M. Fentress, Board Prosecutor reviewed with the members the previously distributed Request for Summary Suspension of this Licensee's RN license and supporting documentation. On May 1, 2015, the licensee submitted an application for RN licensure by reciprocity in which she represented that she had obtained RN licensure in Hawaii in 2009. The board received a verification form ostensibly confirming RN licensure from the board of nursing in Hawaii. Investigators spoke with officials from the Hawaii board who advised that the licensee had not been licensed in that state. A. Fein also reported to the members that K. Ashe, Education Coordinator for the Board had verified there was not record of this Licensee having registered to take the NCLEX-RN licensing exam in the NCSBN database.

ACTION:

Motion by J. Killion, seconded by P. Gales, and unanimously passed to authorize the issuance of the requested Order of Summary Suspension of this Licensee's RN license no. 2299283.

TOPIC:

Authorization for Settlement and for Orders to Show Cause in the Matters of J. Clemat, LN61194, NUR-2015-0157 and RN2300490, NUR-2015-0153; G. Phanor, RN2302190, NUR-2015-0156; P. Phanord, RN2300492, NUR-2015-0154; M. Aubourg RN2300115, NUR-2015-0159; A. Smith RN2298729, NUR-2015-0161; A. Adebiyi RN2299283, NUR-2015-0158; and E. Okon RN2300116, NUR-2015-0160

DISCUSSION:

A. Fein, CRC reviewed with the members her previously distributed request for Board authorization to initiate formal disciplinary proceedings through the referral to the office of prosecutions for issuance of an order to show cause in each of the matters where the board had authorized an order of summary suspension. A. Fein requested also, in the alternative, for authorization to offer and enter into a Consent Agreement for permanent license revocation(s) in final resolution of each of the above-referenced complaints based on fraudulent information submitted with the Licensee's application for Massachusetts licensure by reciprocity.

ACTION:

Motion by P. Gales, seconded by B. Levin, and unanimously passed to authorize the Consent Agreements and Orders to Show Cause as requested.

TOPIC:

Practice

A. Revision recommendations to AR 9801: *Holistic Nursing and Complementary/Alternative Modalities*

- B. Revision recommendations to Advisory Ruling 0802: *The Use of a Vagal Nerve Stimulator Magnet*
- C. Revision recommendations to Advisory Ruling 9804: *Administration of Immunizing Agents or Vaccines*
- D. Development of APRN Certification Verification System
- E. Communication related to RNs with Oncology Certification

DISCUSSION:

- A. Members reviewed the previously distributed memo from Ms. Talarico. In the memo a variety of evidence-based data and information was presented noting that: Based upon its review of a variety of evidence-based data and information, the Nursing Practice Advisory Panel noted that:
 1. Previous evidence-based references upon which Advisory Ruling 9801 was based have been expanded and updated.
 2. The Federal government's National Center for Complementary and Alternative Medicine (NCCAM) has changed its name to the National Center for Complementary and Integrative Health (NCCIH).
 3. When referencing complementary approaches to health care, the term "alternative" (defined as unproven practices used in place of conventional medicine) has been replaced by "integrative" (defined as combining complementary approaches into conventional treatment plans) by NCCIH. Correspondence reviewed from American Holistic Nurses Association (AHNA) representatives agrees that "integrative" reflects the way a holistic nurse would incorporate complementary health modalities into patient care; using a comprehensive, often interdisciplinary approach to treatment, prevention and health promotion that brings together complementary and conventional therapies.
 4. NCCIH generally uses the term Complementary Health Approaches (CHA) when discussing holistic practices and products implemented for various health conditions, retiring the terminology Complementary Alternative Modalities (CAM). AHNA agrees with the NCCIH perspective.
 5. The current AR has redundant language when referencing competency acquisition for performing relaxing massage.
 6. Correspondence received from Community Health Link proposes that AcuDetoxification, a procedure that involves acupuncture, be included in the scope of holistic nursing practice for nurses certified as AcuDetoxification Specialists. The modality of acupuncture continues to require a license from the Board of Registration in Medicine and would not be considered as the practice of nursing pursuant to M.G.L. Chapter 112, ss.148 and 159.
 7. Correspondence received from the Homeopathic Nurses Association asserts that "homeopathy is a form of energy medicine" and that "nurses should be allowed to recommend homeopathic remedies". There has been no change in the prescribing requirements at M.G.L. Chapter 94C; nurses who are not Board authorized advanced practice registered nurses registered with the Department of Public Health Drug Control Program are not legally authorized to prescribe. In addition, there has been no change to the Board's regulation at 244 CMR 9.03(38) requiring licensed nurses obtain orders from duly authorized prescribers before administering any prescription or non-prescription drug which, pursuant to MGL c. 94C s.1, includes homeopathy, herbal medicines and/or nutraceuticals.
 8. Chiropractic care continues to require a license from the Board of Registration of Chiropractors and would not be considered as the practice of nursing pursuant to M.G.L. Chapter 112, ss. 89 and 91.
 9. The current AR does not include guidance to the responsibilities of the nurse in the management role.
 10. Some of the references in the AR are no longer current.

- B. Members reviewed the previously distributed memo from Ms. Talarico. In the memo a variety of evidence-based data and information was presented noting that: Based upon its review of a variety of evidence-based data and information, the Nursing Practice Advisory Panel noted that:
1. By using a Cumulative Index of Nursing and Allied Health Literature (CINAHL) search, NPAP did not identify new information related to the use of VNS in seizure management.
 2. In 2005, the U.S. Food and Drug Administration (FDA) approved VNS for use in treating major depression in certain circumstances; if the illness has lasted two years or more, if it is severe or recurrent, and if the depression has not eased after trying at least four other treatments.
 3. Because the vagus nerve is associated with many different functions and brain regions, research is being done to determine the usefulness of a VNS in treating other illnesses, including various anxiety disorders, Alzheimer's disease, migraines, fibromyalgia, obesity, and tinnitus.
 4. With the exception of when an individual is compromised during a seizure, additional situations could not be identified when a person other than the individual implanted with a VNS would provide assistance using a VNS magnet.
 5. The National Association of School Nurses does not have a position statement regarding VNS; however, it refers its members to the Epilepsy Foundation documentation "*Managing Students with Seizures: A Training for School Nurses*" which describes VNS function and use.
 6. Training by a qualified licensed nurse is the act of imparting information and/or instructions to improve the recipient's knowledge or performance of an activity. Information obtained by training can be applied to individuals or situations for which the licensed nurse may not have responsibility and accountability; engagement in the act of training is not synonymous with delegation of duty.
 7. Advisory Ruling 0802: *The Use of a Vagal Nerve Stimulator Magnet* provides current information and does not require substantive changes.
 8. Changes to the language in Advisory Ruling 0802: *The Use of a Vagal Nerve Stimulator Magnet* would improve readability.
- C. Members reviewed the previously distributed memo from Ms. Talarico. In the memo a variety of evidence-based data and information was presented noting that:
1. Federal law 42 U.S.C. § 300aa-26 requires, as of March 2013, healthcare providers review the Vaccine Information Statements (VISs), produced by the Centers for Disease Control and Prevention (CDC), with the patient and/or responsible person, for specific vaccines
 2. VIS are available for additional vaccines
 3. There have been no changes to the MA Law at chapter 111 § 24M
 4. Massachusetts Department of Public Health Immunization Program reviewed AR 9804: *Administration of Immunizing Agents or Vaccines* and suggested language include recommendations to:
 - a. require review and provision of Vaccine Information Statements (VISs), produced by the Centers for Disease Control and Prevention (CDC), to the patient and/or responsible person, for specific vaccines as required by federal law
 - b. screen for indications, contraindications and precautions
 - c. include documentation practices identifying:
 - i. The edition date of the VIS
 - ii. The date the VIS is provided
 - iii. The office address and name and title of the person who administers the vaccine
 - iv. The date the vaccine is administered
 - v. The vaccine manufacturer, lot number, and expiration date
 - d. provide for response to allergic reactions
 - e. provide for reporting of adverse events and medical errors

Advisory Ruling 9804: *Administration of Immunizing Agents or Vaccines* does not include responsibilities of the nurse in a management role to ensure the availability of sufficient resources to provide for administering immunization agents and vaccines consistent with current nursing standards. Resources must include, but not limited to, organizational evidence-based policies and procedures, consistent with local, state and federal requirements that provide for:

- Protocols for obtaining and documenting informed consent
- Protocols for assessing, validating and documenting competency acquisition and maintenance for administering immunization agents and vaccines
- Protocols for providing VIS consistent with 42 U.S.C. § 300aa-26
- Protocols for reporting MIIS data to the Registry, consistent with MGL c. 111, § 24M
- Protocols for reporting errors and adverse events that comply with federal and state requirements
- Nursing care responsibilities, including, but not limited to patient assessment, monitoring, education principles, response to potential complications and/or emergency situations, and documentation criteria”

5. Advisory Ruling 9804: *Administration of Immunizing Agents or Vaccines* does not include resources to support standards of care

- D. Members reviewed the previously distributed memo from Ms. Talarico discussing Board staff efforts to develop an APRN Certification Verification System. Board staff have received updated certification information from many of the Board approved certification organization enabling staff to obtain information from APRNs to update the data base. Going forward, APRNs will be required to enter pertinent certification information into the Board’s data base in order to renew their APRN authorization. Board staff have worked with information technology staff to create this system. New or reciprocal APRN certification information will be entered into the data base at the time of application. Board staff will be able to produce reports that indicate upcoming certification expiration dates. In addition, the certifying organizations, with the exception of NCC, will proactively inform the Board on a periodic basis as MA APRN certifications lapse. Plans for the future include cross referencing the Board’s data base with and by the individual certifying organizations.
- E. Members reviewed the previously distributed memo from Ms. Talarico discussing communication from Cynthia Miller Murphy, MSN, RN, CAE, Executive Director for the Oncology Nursing Certification Corporation (ONCC) in Pittsburgh, PA. Ms. Murphy states in her 7/24/15 email (included in the Board packet) that the ONCC Board of Directors urges [the Board] to “consider some alternatives to grandfather” those nurses who hold ONCC certification and have been practicing in the CNS role as Advanced Practice Registered Nurses (APRN). The Board considered a similar request at its May 13, 2015 meeting. Members reviewed historical information leading to its promulgation of 244 CMR 4.00 revisions effective 8/1/14 through which the clinical category of a non-psychiatric clinical nurse specialist was officially recognized as an advanced practice registered nurse. RNs with specialty certification that does not meet the role and population foci as defined in the Consensus Model can continue to practice in the same manner in which they practiced prior to promulgation of revised APRN regulations. The practice of such RNs does not require Board authorization and regulation as an APRN. The Board has requested that employers reserve the job title of Clinical Nurse Specialist (CNS) for those individuals who meet eligibility requirements at 244 CMR 4.05. Some organizations that employ nurses who have held the CNS title but do not meet the Board’s requirements for CNS authorization (that include a grandfather clause consistent with LACE¹) have renamed job titles pertaining to specialty. For instance, a RN who is certified in oncology nursing may be titled “Certified Oncology Nurse” and the job description remains the same. While Ms.

¹ LACE is an acronym for Licensure Accreditation Certification Education and part of the Advanced Practice Committee work objectives for implementation the APRN Consensus Model
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(Approved 11/18/2015)

Talarico intended the information presented and discussed to be intended for informational purposes
K. Gehly agreed to request members ratify its established position.

ACTION:

- A. Motion by J. Killion, seconded by S. Taylor, and unanimously passed to revise Advisory Ruling 9801: *Holistic Nursing and Complementary/Alternative Modalities* by:
2. Including the Board-approved, standardized statement requiring licensee compliance with all nursing licensure and practice laws and regulations
 3. Replacing references to “alternative” practices with “integrative” to reflect contemporary holistic nursing as incorporating complementary and conventional health modalities into patient care in a comprehensive and interdisciplinary manner
 4. Replacing references to “complementary alternative modalities (CAM)” with “complementary health approaches (CHA)” to reflect NCCIH current terminology and AHNA standards when discussing holistic practices
 5. Rewording the AR guidance related to competency acquisition for relaxation massage to reduce redundancy
 6. Retaining guidance related to acupuncture, chiropractic care, and homeopathy
 7. Including a section related to the nurse in a management role that states:
The nurse in a management role must ensure the availability of sufficient resources to provide for safe implementation of CHA, including, but not limited to organizational evidence-based policies and procedures consistent with current nursing standards that provide for:
 - protocols for assessing, validating and documenting CHA competency acquisition and maintenance for each activity
 - nursing care responsibilities, including, but not limited to patient assessment, monitoring, medication practices, response to potential complications and/or emergency situations, and documentation criteria
 8. Updating references
- B. Motion by M. Beal, seconded by C. Simonian, and unanimously passed to revise Advisory Ruling 0802: *The Use of a Vagal Nerve Stimulator Magnet* by:
1. Including the Board-approved, standardized statement requiring licensee compliance with all nursing licensure and practice laws and regulations
 2. Providing language changes to improve readability
 3. Not extending the AR beyond its original guidance for seizure control efforts
 4. Including a section related to the nurse in a management role that states:
The nurse in a management role must ensure the availability of sufficient resources to provide for VNS magnet use, including, but not limited to training sessions and organizational evidence-based policies and procedures consistent with current nursing standards that provide for:
 - protocols for assessing, validating and documenting competency acquisition and maintenance for VNS magnet use
 - nursing care responsibilities, including, but not limited to patient assessment, monitoring, education principles, response to potential complications and/or emergency situations, and documentation criteria
- C. Motion by B. Levin, seconded by A.M. Peckham, and unanimously passed to revise Advisory Ruling 9804: *Administration of Immunizing Agents or Vaccines* by:
1. Including the Board-approved, standardized statement requiring licensee compliance with all nursing licensure, practice laws, and regulations
 2. Including Massachusetts Department of Public Health Immunization Program recommendations to:

- a. require review and provision of Vaccine Information Statements (VISs), produced by the Centers for Disease Control and Prevention (CDC), to the patient and/or responsible person, for specific vaccines as required by federal law
 - b. require screening for indications, contraindications and precautions
 - c. include documentation practices identifying:
 - i. The edition date of the VIS
 - ii. The date the VIS is provided
 - iii. The office address and name and title of the person who administers the vaccine
 - iv. The date the vaccine is administered
 - v. The vaccine manufacturer, lot number, and expiration date
 - d. provide for response to allergic reactions
 - e. provide for reporting of adverse events and medical errors
3. Including a section related to the nurse in a management role that states:
 “The nurse in a management role must ensure the availability of sufficient resources to provide for administering immunization agents and vaccines consistent with current nursing standards. Resources must include, but not limited to, organizational evidence-based policies and procedures, consistent with local, state and federal requirements that provide for:
- Protocols for obtaining and documenting informed consent
 - Protocols for assessing, validating and documenting competency acquisition and maintenance for administering immunization agents and vaccines
 - Protocols for providing VIS consistent with 42 U.S.C. § 300aa-26
 - Protocols for reporting MIIS data to the Registry, consistent with MGL c. 111. § 24M
 - Protocols for reporting errors and adverse events that comply with federal and state requirements
 - Nursing care responsibilities, including, but not limited to patient assessment, monitoring, education principles, response to potential complications and/or emergency situations, and documentation criteria”
4. Including resources to support standards of care
- D. Motion by P. Gales, seconded by J. Killion, and unanimously passed:
1. To authorize Board staff to report to the Office of Public Protection for additional investigation of all instances of continued failure by an APRN to respond to Board requests for additional certification information after October 15, 2015
 2. To ratify Board staff’s acceptance and implementation of voluntary requests by APRNs who have allowed their certification to lapse to have their authorization to practice placed in an “expired” status without issuing a complaint
 3. From now, until December 31, 2015, to permit APRNs who have allowed their certification to lapse to voluntarily request that their authorization to practice be placed in an “expired” status without issuing a complaint
- E. Motion by M. Beal, seconded by J. Killion, and unanimously passed to ratify the Board’s established position recognizing CNS as an APRN clinical category with specific role and population foci as defined in the National Consensus Model.

Recess 11:30 a.m. to 11:45 a.m.

TOPIC:
EDUCATION
Part 1 (July)

- A. 244 CMR 6.04(1)(c)&(1)(f) Administrative Changes
 - 1. Anna Maria College *Chief Executive Officer*
 - 2. Northeastern University Bouve College of Health Sciences *Program Administrator*
 - 3. Bay Path Regional Vocational Technical High School *Program Administrator*
- B. 244 CMR 6.08(1)(h) 2014 NCLEX Report: MCPHS University Accelerated Baccalaureate Degree Program

PART 2 (September)

- A. 2015 Quarter 2 NCLEX Performance Reports
 - 1. MA Licensure Candidates Regardless of State of Education
 - 2. MA Graduates Regardless of State of Licensure
- B. 244 CMR 6.04(1)(c)&(1)(f) Administrative Changes
 - 1. Fitchburg State University, *Chief Executive Officer*
 - 2. MassBay Community College, *Chief Executive Officer*
 - 3. Bay Path Regional Vocational Technical High School *Program Administrator*
 - 4. Curry College, Baccalaureate Degree Program, *Program Administrator*
 - 5. Quinsigamond Community College, Associate Degree Program, *Program Administrator*
 - 6. Springfield Technical Community College, Associate Degree Program, *Program Administrator*
- C. 244 CMR 6.08(1)(h) 2014 NCLEX Reports
 - 1. Bunker Hill Community College Associate Degree Program
 - 2. Elms College Baccalaureate Degree Program
 - 3. MGH Institute of Health Professions Baccalaureate Degree
 - 4. Regis College Baccalaureate Degree Program

DISCUSSION:

Part 1 (July)

- A. Members reviewed Ms. Ashe's previously distributed memo.
 - 1. Anna Maria College *Chief Executive Officer*
 - 2. Northeastern University Bouve College of Health Sciences *Program Administrator*
 - 3. Bay Path Regional Vocational Technical High School *Program Administrator*
- B. Members reviewed Ms. Ashe's previously distributed 244 CMR 6.08(1)(h) 2014 NCLEX compliance report for MCPHS University Accelerated Baccalaureate Degree Registered Nurse Program. A discussion on the DPH Occupation Immunization of Massachusetts Recommendation and Requirements resulted in an revised and more immediate due date to ensure public protection.

Part 2 (September)

- A. Members reviewed Ms. Ashe's previously distributed report. The *Massachusetts Licensure Candidates Regardless of State of Education* and the *Massachusetts Graduates Regardless of State of Licensure* report descriptions and details were reviewed. Ms. Ashe noted that the NCLEX RN and PN reports reflect only Quarter 2 reports, with most candidate results reporting in Quarter 3. Of note according to the NCLEX 2015 MA *Graduates Regardless of State of Licensure* Q2 report pass rate numbers for baccalaureate and associated degree candidates grew 18% and 10% respectively.
- B. Members reviewed Ms. Ashe's previously distributed memo.
- C. Members reviewed Ms. Ashe's previously distributed 244 CMR 6.08(1)(h) 2014 NCLEX compliance reports for
 - 1. Bunker Hill Community College Associate Degree Registered Nurse Program
 - 2. Elms College Baccalaureate Degree Registered Nurse Program
 - 3. MGH Institute of Health Professions Baccalaureate Registered Nurse Degree
 - 4. Regis College Baccalaureate Degree Registered Nurse Program

Mary T. Folan MSN, CAGS, RN, CNE, Bunker Hill Community College ADN-RN program and Linda C. Andrist, PhD, RN, WHNP-BC, Interim Dean, School of Nursing, MGH Institute of Health Professions were present and available to response to Board member questions,

ACTION:

Part 1

A. Find compliance with regulation 244 CMR 6.04(1)(c) & (1)(f) in the notification of the appointments of:

1. Mary Lou Retelle, President, (*Chief Executive Officer*), Anna Maria College
2. Nancy P. Hanrahan, RN, PhD, FAAN, Professor and Dean of the School of Nursing, Associate Dean of the Bouve College of Health Sciences, (*Program Administrator*), Northeastern University, Bouve College of Health Sciences
3. Gretheline R. Bolandrina, MSN, RN, Interim Practical Nursing Director, (*Program Administrator*), Bay Path Regional Vocational Technical High School

B. Catherine Simonian had recused herself from this matter and previously left the room during discussion of this matter. Motion by B. Levin seconded by C. Urena, and unanimously passed to accept the 2014 NCLEX-RN Performance Report by the MCHPS University Accelerated Baccalaureate Degree Program(Program) finding has provided satisfactory evidence of compliance with regulations 244 CMR 244 CMR 6.04((3)(a) (4)(a)and(b)with recommendations; adding

- Include a statement of education mobility in the MCHPH Nursing Program Student Handbook. Consider the Board's updated Position Statement on Educational Mobility for Nurses (1/97) found at <http://www.mass.gov/eohhs/gov/departments/dph/programs/hcq/dhpl/nursing/education/faculty-resources/roles-and-responsibilities/>
- Update Health Immunization Policy to include the current DPH 2015 recommended to state 1 dose of Tdap by September 18, 2015.
- Explore other methods to obtain and verify graduate self-reporting of NCLEX-RN success and failure so that correlating factors can be better indentified going forward.

Part 2

A. 2014 Quarter 3 NCLEX Reports accepted by consensus.

B. Motion by P. Gales, seconded by J. Killion and unanimously passed to find compliance with 244 CMR 6.04(1)(c) and 6.04(1)(f) in the appointments of:

1. Richard S. Lapidus, PhD, President, (*Chief Executive Officer*), Fitchburg State University,
2. Dr. Yves Salomon-Fernandez Interim President, (*Chief Executive Officer*), MassBay Community College
3. Gretheline R. Bolandrina MSN, RN, Practical Nursing Director, (*Program Administrator*), Bay Path Regional Vocational Technical High School
4. Susan A. LaRocco, PhD, RN, CNL, FNAP, Division Chairperson, (*Program Administrator*), Division of Nursing, Curry College
5. Ellen Vangel-Brousseau MSN, RN, Nurse Administrator (*Program Administrator*) Quinsigamond Community College, Associate Degree Program .
6. Lisa A. Fugiel, MSN, RN BC, Director of Nursing, (*Program Administrator*), School of Health and Patient Simulation, Springfield Technical Community College

C. 244 CMR 6.08(1)(h) 2014 NCLEX Reports

1. Motion by B Levin, seconded by S. Taylor and unanimously passed to accept the 2014 NCLEX-RN Performance Report submitted by the Bunker Hill Community College Associate Degree RN

program (Program), finding the Program has provided satisfactory evidence of compliance with regulations 244 CMR 6.04((3)(a) (4)(a)and(b)and 5.

2. Motion by S. Taylor, seconded by C. Urena and unanimously passed to accept the 2014 NCLEX-RN Performance Report submitted by Elms College Baccalaureate Degree program (Program) finding the Program has provided satisfactory evidence of compliance with regulations 244 CMR 6.04(1)-(5) with recommendations adding recommendations; adding provide documentary evidence of compliance with Section III, Education Policy 02-02 Waiver Option # 3, of a novice nurse educator mentor program or an immediate plan to implement a novice nurse educator mentor program including but not limited to essentials of mentoring according to Guidelines for Clinical Nursing Experiences, and other nurse educator mentor program best practices. Documentary evidence is due by November 16, 2015.
3. M. Beal had recused herself from this matter and previously left the room during discussion of this matter. Motion by P. Gales, seconded by J. Killion and unanimously passed to accept the MGH Institute of Health Professions Baccalaureate Degree-RN program's (Program) 2014 NCLEX-RN Performance Report, finding the Program has provided satisfactory evidence of compliance with regulations 244 CMR 244 CMR 6.04((3)(a) (4)(a)and(b)and 5 with the following recommendations; adding
 - provide evidence of missing nursing data correlating success in science and nursing course and NCLEX-RN success [ref 244 CMR 6.04(4)(a)].
 - provide evidence of a revised action plan based on the faculty summer workshop including a review of learning outcomes relating to competencies and scope of practice for each nursing course, improvement to test construction and lessons plans in nursing courses as they correlate to the NCLEX-RN Detailed Test Plan by end of Summer 2016 academic term [ref 244 CMR 6.04(4) (b)(3)].
 - provided a updated report on the outcomes of Curriculum Committee review of the focused work groups work (Report p.33), regarding curriculum changes by end of Summer 2016 academic term [ref 244 CMR 6.04(4) (b)(3)].
 - provide evidence of an assessment of teaching-learning duties, full and part time faculty assignments, and correlation to student NCLEX pass/fail data that was not provided
 - To enhance the integrity of the nursing program; faculty will revise the Policy on Student Duty to Report to better distinguish statutory regulation of a licensed nurse's Duty to Report [ref: 244 CMR 9.03(26)], with faculty expectations for student behavior in instances when unlicensed students' may observe concerning actions relate to patient safety.[ref: 244 CMR 6.04 (1) (d) and (3)(a) 2].
 - provide 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 10/13/2015
4. Motion by P. Gales, seconded by J.Killion and unanimously passed to accept the 2014 NCLEX-RN Performance Report submitted by Regis College Baccalaureate Degree program (Program) finding the Program has provided satisfactory evidence of compliance with regulations 244 CMR 6.04((3)(a) (4)(a)and(b)and 5.

TOPIC:

Request to Extend Probation in the Matter of M. Reed-Adekunle, RN263048, NUR-2012-0002

Members reviewed the previously distributed memo from Ms. Fishman. This case came before the Board as a request to extend the time allowed for this nurse to complete the "active practice" terms of the Consent Agreement for Probation she entered into with the Board effective, January 8, 2013, for one (1) year. The Licensee requested a termination of probation in May 2014 but was denied because she had not

yet completed the “active practice” requirement of her probation. The Board did, however, extend her probation for a period of six (6) months at that time. The Licensee has complied with all other terms of her probation but is still unable to find a nursing job commensurate with the Agreement.

K. Fishman recommended that the Board allow the Licensee an extension of six (6) months to find a nursing job and one (1) year to complete the “active practice” terms of probation, for a total of one and a half (1 ½) years extension, beginning the date of written notice to the Licensee of the Board’s approval of such extension, so that she can comply with all of the active nursing practice related requirements of the consent agreement. During the extension period, the Licensee must submit monthly written updates of her job search activities.

DISCUSSION: A. Fein requested clarification that all other requirements of the Agreement will remain in effect including the “Active Practice” requirements. K. Fishman clarified that the recommendation does include that the Licensee must continue to comply with all other requirements of the Agreement.

ACTION: Motion by Catherine Simonian, Seconded by Cheryl Urena, and unanimously passed to accept the recommendation.

TOPIC:

Request for ratification of acceptance of Voluntary Surrender, in the matter of C. Beliveau, RN260152, NUR-2012-0278

This case comes before the Board as a request to ratify the acceptance of the Licensee’s voluntary surrender of her nursing license which became *effective May 29, 2015*. She entered into the subject Consent Agreement for Probation (“Agreement”) with the Board on July 25, 2013 but had difficulty completing the “active practice” requirements of her probation. She notified the Probation Monitor in a letter received on February 23, 2015 that she will no longer be seeking employment as a Registered Nurse and is surrendering her nursing license to the state. The Probation Monitor sent a Voluntary Surrender Agreement in letter form to the Licensee on May 18, 2015 to confirm her intent to surrender her license, which the Licensee signed.

K. Fishman recommended that the Board ratify the acceptance of the licensee’s voluntary surrender of her nursing license.

DISCUSSION: B. Levin inquired as to how long the Licensee had her license. K. Fishman responded that the Licensee obtained her license in 2004. A. Fein requested clarification that the recommendation is for the Surrender to be effective as of May 29, 2015. K. Fishman confirmed that the recommendation is for the Surrender to be effective as of May 29, 2015.

ACTION: Action: P. Gales seconded by M. Beal, and unanimously passed to accept the commendation.

TOPIC:

Flex Session

- A. Announcements
- B. Topics for Next Agenda
- C. SAREC Appointment
- D. Proposed Staff Authority on Fraudulent Applicant Cases
- E. Proposed Revisions to Division Policy 14 – 01: VALOR Act Implementation
- F. Executive Order 562: Regulatory Review

- G. Updates to License Status Codes
- H. Discussion regarding reinstatement eligibility for individual participants undergoing Suboxone Opioid Substitution Therapy
- I. Schedule Tentative Emergency Meeting

DISCUSSION:

- A. There were no announcements.
- B. No new topics for the next agenda were identified.
- C. D. M. DeVaux presented a candidate for a Public Member seat for the Holyoke SAREC. Members reviewed the candidate's qualifications.
- D. Ms. Berg presented her previously distributed proposed policy, highlighting subsequent edits to reflect the current situation of co-interim Executive Directors.
- E. Ms. Berg presented her previously distributed proposed revisions to the DHPL Policy 14-01: VALOR Act Implementation
- F. Ms. Berg presented the previously distributed Executive Order 562 and corresponding schedule.
- G. Ms. Berg presented her previously distributed memo. Ms. Taylor commented that she supported the updates to the license status codes.
- H. Ms. Westgate requested Board member guidance as to whether nurses on Suboxone can request license reinstatement. During the discussion, Ms. Iyawe recommended that, in the event the Board determined that a nurse on Suboxone could request license reinstatement, such a request should include a neuropsychiatric evaluation. Ms. DeVaux recommended that toxic screens should also be required. Ms. Gales commented that the conditions for the license reinstatement of a nurse who is on Suboxone should be consistent with those of SARP participants who are on Suboxone. Staff will prepare a draft written guidance based on Board member comments for Board member review during a future Board meeting.
- I. Members identified October 1, 2015 and November 4, 2015, beginning at 8:30, as dates and times for possible emergency meetings.

ACTION:

- A. None.
- B. None.
- C. Motion by P. Gales, seconded by J. Killion, and unanimously passed to appoint Susan Hillis, LICSW, CADC-II, LADC-1 to the Public Member seat in Holyoke.
- D. Motion by P. Gales, seconded by A. Alley and unanimously passed to adopt the proposed Staff Authority on Fraudulent Applicant Cases with revisions as identified by Ms. Berg.
- E. Motion by C. Simonian, seconded by A. Peckham, and unanimously passed to approve proposed edits to the DHPL Policy 14-01: VALOR Act Implementation
- F. Noted. Informational purpose.
- G. Noted. Informational purpose.

TOPIC:

G.L. c.30A, §21 Executive Session

DISCUSSION:

None

ACTION:

Motion by C. Simonian. seconded by C. Urena, and unanimously passed by roll call vote to go into Executive Session at 1:20 p.m. as per the following purposes of G.L. c.30A, §21 (a)(1): the Board will

discuss and evaluate the Good Moral Character as required for registration for pending applicants; 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, or compliance with licensing conditions, or petitions to modify consent agreements; the Board will discuss and evaluate a request by a licensee for a waiver of licensure renewal requirements due to ongoing medical issues; and the Board will discuss and evaluate pending disciplinary complaints that involve patient records and treatment of patients.

G.L. c. 30A, § 21 Executive Session 1:20 p.m. to 1:59 p.m.

TOPIC:

Adjudicatory Session

DISCUSSION:

None

ACTION:

Motion by P. Gales, seconded by J. Killion, and unanimously passed by roll call vote to go into Adjudicatory Session at 4:12 p.m. to discuss decisions in pending adjudicatory matters.

Adjudicatory Session 4:12 p.m. to 4:17 p.m.

TOPIC:

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

DISCUSSION:

None.

ACTION:

Motion by B. Levin, seconded by P. Gales, and unanimously passed by roll call vote to go into G.L. c. 112, s. 65C Session at --- a.m. to discuss negotiated settlements of complaints.

G.L. c. 112, s. 65C Session 4:17 p.m. to 5:34 p.m.

TOPIC:

Adjournment

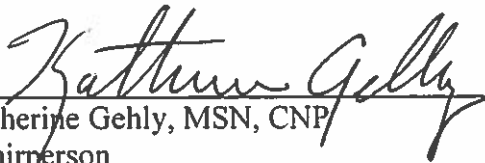
DISCUSSION:

None.

ACTION:

Motion by B. Levin, seconded by J. Killion, and unanimously passed to adjourn the meeting at 5:35 p.m.

Minutes of the Board's September 9, 2015, Regularly Scheduled Meeting were approved by the Board on October 14, 2015.


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**

September 9, 2015

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

PRELIMINARY AGENDA AS OF 9/3/15 2 pm

| Estimated Time | # | 1. Item | Exhibits | Presented by |
|----------------|------|--|--|--|
| 9:00 a.m. | I. | 2. CALL TO ORDER & DETERMINATION OF QUORUM | None | |
| | II. | APPROVAL OF AGENDA | Agenda | |
| | III. | APPROVAL OF BOARD MINUTES A. Draft Minutes for the June 10, 2015 Meeting of the Board of Registration in Nursing, Regular Session B. Draft Minutes of the August 5, 2015 Emergency Meeting of the Board of Registration in Nursing, Regular Session | Minutes Minutes | |
| | IV. | REPORTS A. Executive Director's Report B. Staff Report 1. Deputy Executive Director 2. Assistant Director (July and September) 3. Practice (July and September) 4. Education (July and September) 5. Complaint Resolution (July and September) 6. Application Processing Report (September) 7. SARP (July and September) 8. Licensing Coordinator 9. Probation Monitor (July) | -- -- Reports Reports Reports Reports Reports Reports None Quarterly Report | -- -- CS LT KA AF/HC HC VI/DM KK KF |
| | V. | CONSENSUS AGENDA PART 1 (July) A. NCSBN Update B. Coalition for the Prevention of Medical Errors Update PART 2 (September) A. Beginning in September, 2015, the NCSBN Update will be included as an appendix in the Nursing Practice Coordinator Report B. Beginning in September, 2015, the Coalition for the Prevention of Medical Errors Update will be included as an appendix in the Nursing Practice Coordinator Report | Memo May, 2015 minutes; June 2015 report | LT LT |

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|--|------|---|---|---|
| | VI. | <p>COMPLAINT RESOLUTION PART 1 (July): None</p> <p>PART 2 (September) A. Resolution of Pending Board Complaints 1. A. Cameron, LN86183, NUR-2014-0056 2. J. Clemat, LN61194, NUR-2015-0157</p> <p>B. Resolution of Pending Board Staff Assignments: None</p> <p>C. Request for Summary Suspension Order 1. J. Baptiste, LN91567, NUR-2015-0142 2. H. Philippe, RN2299766, NUR-2015-0143 3. G. Belony, RN2297853, NUR-2015-0144 4. J. Marceus, LN92686, NUR-2015-0150 5. J. Clemat, RN2300490, NUR-2015-0153 6. G. Phanor, RN2302190, NUR-2015-0156 7. P. Phanord, RN2300492, NUR-2015-0154 8. M. Aubourg RN2300115, NUR-2015-0159 9. A. Smith RN2298729, NUR-2015-0161 10. A. Adebiyi RN2299283, NUR-2015-0158 11. E. Okon RN2300116, NUR-2015-0160</p> | Investigation Report per complaint | ES/ASF HC |
| | VII. | <p>PRACTICE PART 1 (July) A. Revision recommendations to AR 9801: <i>Holistic Nursing and Complementary/Alternative Modalities</i></p> <p>PART 2 (September) A. Revision recommendations to Advisory Ruling 0802: <i>The Use of a Vagal Nerve Stimulator Magnet</i> B. Revision recommendations to Advisory Ruling 9804: <i>Administration of Immunizing Agents or Vaccines</i> C. Development of APRN Certification Verification System D. Communication related to RNs with Oncology Certification</p> | <p>Memo</p> <p>Memo</p> <p>Memo</p> <p>Memo</p> | <p>LT</p> <p>LT</p> <p>LT</p> <p>LT</p> |

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|-----------------|--------------|---|-----------------------|--|
| | 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 reputation, character, physical condition or mental health, rather than professional competence, of licensees relevant to their petitions for license status change, or compliance with licensing conditions, or petitions to modify consent agreements. • A request by a licensee for a waiver of licensure renewal requirements due to ongoing medical issues. • Pending disciplinary complaints that involve patient records and treatment of patients. | CLOSED SESSION | |
| | XII. | ADJUDICATORY SESSION (M.G.L. ch. 30A, § 18) | CLOSED SESSION | |
| | XIII. | M.G.L. c. 112, § 65C SESSION | CLOSED SESSION | |
| 6:00 PM. | XIV. | ADJOURNMENT | | |