Massachusetts Board of Registration in Nursing

BOARD NEWSLETTER

Fiscal Year 2023 [July 1, 2022 - June 30, 2023]-----



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Board of Registration in Nursing (BORN) and Bureau of Health Professions Licensure

The Bureau of Health Professions Licensure (BHPL) now oversees and supports the Drug Control Program and 21 boards of registration and certification in health professions, including the Board of Registration in Nursing (BORN). Standard rules and regulations set by the boards ensure the integrity and competence of all health care professionals in Massachusetts, and promote public health, wellness, and safety.

Board Mission

The BORN's mission is to protect the health, safety, and welfare of the citizens of the Commonwealth through the fair and consistent application of the statutes and regulations that govern nursing education and practice.

Board Responsibilities

M.G.L., Chapter 13, sections 13, 14, 14A, 15 and 15D and Chapter 112, sections 74 through 81C authorize the BORN to regulate nursing practice and education. Board responsibilities pursuant to these laws include:

- Making, adopting, amending, repealing, and enforcing regulations deemed necessary for the protection of the public health, safety and welfare
- Issuing advisory rulings which guide nursing practice and education
- Approving and monitoring nursing education programs which lead to initial licensure
- Issuing nursing licenses to qualified individuals
- Authorizing qualified nurses to practice in advanced roles
- Investigating and taking action on complaints concerning the performance and conduct of licensed nurses

- Auditing the continued competency of nurses
- Administering the Substance Addiction Recovery Program
- Preparing and publishing materials deemed integral to the delivery of safe, effective nursing care, including an annual notification to all licensees of changes in laws and regulations regarding nursing education, licensure, and practice
- Participating as an active member in the National Council of State Boards of Nursing
- Providing regulatory guidance and conducting workshops

Current Members of the Board of Registration in Nursing

L. Kelly, DNP, CNP, RN: Chairperson, Advanced Practice RN Direct Care

A.J. Alley, MSN, RN, NE-BC: Vice Chairperson, RN Nursing Service Administrator

K. A. Barnes, JD, RPh: Pharmacist

K.R. Crowley, DNP, CNP, RN: RN Education, Graduate Level

M. Harty, LPN: LPN Direct Care, Community Health

A. Joseph, MD: Physician

L. Keough, PhD, CNP, RN: Vice-Chairperson, Advanced Practice RN Direct Care

M. McAuliffe, DNP, RN: RN Direct Care, Outpatient/Community/Behavioral

***Vacant Seats**

Two (2) Consumer

J. Monagle, PhD, RN: RN Education, Post Graduate Level

D. Nikitas, BSN, RN: RN Direct Care, Patients Living with Chronic Pain

C. Norris, LPN: LPN Direct Care, Acute or Long-Term Care

V. Percy, MSN, RN: RN Direct Care, Not Advanced Nursing Practice

R. Reynolds, PhD, MSN, RN: RN Education, Pre-Licensure Level

A. Sprague, RN: RN Direct Care, Not Advanced Nursing Practice

L. Wu, RN, MBA: RN Direct Care, Patients with Substance Use Disorder

The composition of the 17-member Board is established at M.G.L., Chapter 13, §13 and includes eleven (11) registered nurses (RNs); two (2) licensed practical nurses (LPNs); one (1) physician registered pursuant to chapter 112; one (1) pharmacist registered under section 24 of chapter 112 and two (2) consumers. Both the RN and LPN members are required to include representation from long-term care, acute care, and community health practice settings. Additionally, among the eleven (11) RNs, there must be one representative from each level of nursing education whose graduates are eligible to write nursing licensure examinations (baccalaureate and higher degree programs are considered to be one level); two (2) RNs in advanced practice, at least one (1) of whom is employed providing direct patient care at the time of appointment; one (1) RN who is currently employed as a nursing service administrator and who is responsible for agency or service wide policy development and implementation; and two (2) RNs not authorized in advanced nursing practice and who provide direct patient care. The statute also specifies that the consumer representatives must be knowledgeable in consumer health concerns and have no current or prior association, directly or indirectly, with the provision of health care.

Nursing Board Elects 2023 Fiscal Year Officers



Members of the Board elected their 2024 Fiscal Year officers during the June 14, 2022 Board Meeting; Linda Kelly was re-elected as Chairperson and Anthony Alley was re-elected as Vice-Chairperson. Linda Kelly, Chairperson, (left) and Anthony Alley, Vice-Chairperson (right).

Board Member Vacancies

Currently, there are two (2) vacant seats on the Board: two (2) Consumers. To be eligible for a Board appointment, potential members must meet criteria established at M.G.L., Chapter 13, §13 that includes residency in the Commonwealth. Nurse members must hold current licensure as a RN or LPN based on seat; possess at least eight years of nursing practice experience in the ten years immediately preceding appointment; and be employed in the Commonwealth as a nurse. Appointments to the Board are made by the Governor for a three-year term; members may serve no more than two consecutive terms or until a successor is appointed. All members are subject to the State Conflict of Interest and Ethics Law in accordance with M.G.L. Part IV, Title I, c. 268A.

Individuals who are interested in an appointment to the Board should submit a letter of intent and current resume to:

Heather Cambra, BSN, RN, JD, Acting Executive Director Board of Registration in Nursing 250 Washington St., 3rd Floor Boston, MA 02108

Nursing Board Meeting Dates

For a list of the 2023 Calendar Year Board Meeting dates, visit the Board's website at <u>https://www.mass.gov/service-details/meetings-and-agendas-for-the-board-of-registration-in-nursing</u>

Executive Director



It's with a heavy heart that we share that **Dr. Claire MacDonald**, Executive Director of the Board of Registration in Nursing has passed away on 6/6/23 following a brief illness.

Claire began with the Board as Deputy Executive Director in 2016, eventually being promoted to Executive Director in 2021. Claire came to us with extensive leadership and academic experience, being widely published and owning her own consulting business. Claire was a champion for patient safety and passionate about furthering the future of nursing. Claire was involved at the state and national level and sat on multiple committees charged with patient safety, nursing education, and licensure. Claire will be remembered as a strong and compassionate leader. She prided herself on the connections she made with each and every staff member, always going the extra mile to make everyone feel included and valued. Her goal was to build a team around her that reflected the qualities that she held dear: openness, honesty, and transparency. She will be sorely missed as will her infectious laugh and her innate ability to be funny without even trying!

Heather Cambra, BSN, RN, JD has been appointed as Acting Executive Director of the Board of Registration in Nursing.



As Acting Executive Director, she will oversee and direct the Board's daily operations including:

- the licensure of over 120,000 Licensed Practical Nurses, Registered Nurses and Advanced Practice Registered Nurses;
- the administration of the Board's Substance Addiction Recovery Program;
- the regulation of nursing practice and education including the approval of 77 Registered Nurse and Licensed Practical Nurse education programs;
- collaboration with Board members in the development of public policy and provides the Board expert regulatory guidance;
- leading the development and implementation of programs and policies designed to provide for the regulation of nursing education and practice in the Commonwealth;
- ensuring the protection of the public through the issuance of licenses only to those qualified to provide safe nursing care to the citizens in the Commonwealth of Massachusetts; and
- Safeguarding the protection of the public through leading the complaint resolution process for the Board. Leads the disciplinary process by providing substantive and procedural direction to Board disciplinary staff, Bureau investigators and prosecutors, and Board members regarding the resolution of complaints against nurses.

Board Staff

Stewart Allen, Administrative Assistant

Lori Almeida, BSN, RN, Nursing Investigations Supervisor

Hansella Caines Robson, MSN, MHA, RN, Nursing Education Coordinator

John Cody, BSN, RN, Compliance Officer

Elizabeth Conlon, Substance Addiction Recovery Program Monitoring Coordinator

Carolyn DeSpirito, BSN, RN, JD, Complaint Resolution Coordinator

Laurie Falaro, MSN, RN, Compliance Officer

Theresa Flaherty, Compliance Officer

Robert Flood, Licensure Evaluation Coordinator

Stephen Gaun, Office Support Specialist I

Matthew Hale, Complaint Resolution Coordinator

Alan Hallowell, BSN, RN, Complaint Resolution Coordinator

Laurie Hillson, PhD, MSN, RN, Assistant Director, Policy & Research

Kimberly Jones, Probation Compliance Officer

Diane McKenney, Compliance Officer

Patricia McNamee, MS, RN, Nursing Practice Coordinator

Marissa Pagan, Licensing Coordinator, Contractor

Phillip Scott, Licensing Coordinator

Jean Scranton, LPN, Compliance Officer

Maryanne Sheckman, RN, Compliance Officer

Katelyn Vaughn, Compliance Officer

Gabrielle Vélez Rivera, Substance Addiction Recovery Program Monitoring Coordinator

Stacey Waite, DNP, RN, Nursing Education Coordinator

Mark Waksmonski, MPA, MSN, PMHNP-BC, Substance Addiction Recovery Program Coordinator

Lauren Woodward, ADN, RN, Compliance Officer

Board Counsel

Heather Engman, JD, MPH Marine M. Jardonnet, Esq. Lynn M. Worley, RN JD

Keeping Up to Date with BORN

The BORN posts information on its website to alert nurses to licensure requirement revisions or other noteworthy news. In order to keep current, the BORN recommends that nurses regularly check the BORN's website for further developments and subscribe at www.mass.gov/dph/boards/rn to be automatically notified via email when the Board posts a "news and announcements" item. Note: the RSS feed does not work with iPhones, iPads, Safari or Google. Please use a compatible web browser.

Q and A

- **Q**. What is Operation Nightingale?
- **A.** On January 25, 2023, the U.S. Department of Health and Human Services Office of Inspector General (HHS-OIG) and the Federal Bureau of Investigations ("FBI") launched a multi-state coordinated law enforcement actions against a large-scale scheme operated by Florida-based nursing education programs to sell false and fraudulent nursing degree diplomas and transcripts. The individuals who acquired the bogus nursing credentials used them to qualify to sit for the national nursing board exam. Upon successful completion of the board exam, the nursing applicants

became eligible to obtain licensure in various states to work as an RN or a LPN/VN. Once licensed, the individuals were then able to obtain employment in the health care field. The overall scheme involved the distribution of more than 7,600 fake nursing diplomas and transcripts. These schools are now closed. The Massachusetts Board of Registration Nursing (the "Board") has assisted the FBI throughout its criminal investigation and has been diligently and expeditiously working to identify and investigate any Massachusetts licensees who attended a fraudulent nursing education program. The Board continues its active investigation into this serious matter and will take any actions necessary to protect the health, safety, and welfare of the citizens of the Commonwealth.

- **Q**. How can nurses stay up to date with Bills and Laws in Massachusetts?
- **A.** Nurses can go to <u>https://malegislature.gov/Bills</u> and use the search bar to look for specific Bills or Laws or can search by profession or topic. Bills that have been introduced are referred to an appropriate Committee for study and review. Specific Bills regarding fiscal matters are referred to one of the Ways and Means Standing Committees depending on its sponsor. The Committee establishes a hearing date and invites legislators, members of the general public, and other interested parties to appear before it and comment on the relative merits or faults of the Bill. Each witness is responsible for providing testimony to educate the legislators of the Committee by providing information to support a particular point of view, or answering any concerns that the Legislators might have about the efficacy of the Bill. Hearing dates are on the General Court website <u>https://malegislature.gov/</u>
- **Q.** My facility is hiring licensed practical nurses. What is their scope of practice? Can they administer IV medication and start IV's?
- **A.** The regulations for licensed practical nurses and also registered nurses are found in 244 CMR 3.00: https://www.mass.gov/regulations/244-CMR-300-registered-nurse-and-licensed-practical-nurse. It is important to compare the functions and responsibilities of the RN and LPN to determine scope of practice. In comparing the scope of practice between RN and LPN, briefly, the regulations state:

3.02 (1): A registered nurse shall bear full and ultimate responsibility for the quality of nursing care he or she provides to individuals and groups. Included in such responsibility is health maintenance, teaching, counseling, collaborative planning and restoration of optimal functioning and comfort or for the dignified death of those they serve. A registered nurse, within the parameters of his or her generic and continuing education and experience, may delegate nursing activities to unlicensed persons in accordance with 244 CMR 3.05.

Under (2):

A registered nurse shall act, within his or her generic and continuing education and experience to:

- (a) systematically assess health status of individuals and groups and record the related health data;
- (b) analyze and interpret said recorded data; and make informed judgments there from as to the specific problems and elements of nursing care mandated by a particular situation;
- (c) plan and implement nursing intervention which includes all appropriate elements of nursing care, prescribed medical or other therapeutic regimens mandated by the particular situation, scientific principles, recent advancements and current knowledge in the field;
- (d) provide and coordinate health teaching required by individuals, families and groups so as to maintain the optimal possible level of health;
- (e) evaluate outcomes of nursing intervention, and initiate change when appropriate;
- (f) collaborate, communicate and cooperate as appropriate with other health care providers to ensure quality and continuity of care; and
- (g) serve as patient advocate, within the limits of the law.

In 3.04(1): A licensed practical nurse bears full responsibility for the quality of health care she or he provides to patients or health care consumers. A licensed practical nurse within the parameters of his or her generic and continuing education and experience, may delegate nursing activities to unlicensed persons in accordance with 244 CMR 3.05.

(2) A licensed practical nurse participates in direct and indirect nursing care, health maintenance, teaching, counseling, collaborative planning and rehabilitation, to the extent of his or her generic and continuing education and experience in order to:

(a) assess an individual's basic health status, records and related health data;

- (b) participate in analyzing and interpreting said recorded data, and making informed judgments as to the specific elements of nursing care mandated by a particular situation;
- (c) participate in planning and implementing nursing intervention, including appropriate health care components in nursing care plans that take account of the most recent advancements and current knowledge in the field;
- (d) incorporate the prescribed medical regimen into the nursing plan of care;
- (e) participate in the health teaching required by the individual and family so as to maintain an optimal level of health care;
- (f) when appropriate, evaluate outcomes of basic nursing intervention and initiate or encourage change in plans of care; and
- (g) collaborate, cooperate, and communicate with other health care providers to ensure quality and continuity of care.
- LPNs, although bearing full responsibility, does not bear ultimate responsibility.

Repeatedly, in the LPN regulations under 3.02, the word "participate" is used in contrast to the RN, who bears the ultimate responsibility for the quality of nursing care he or she provides to individuals and groups.

Although the LPN works under his or her own license and bears responsibility and accountability for their judgments and actions, the RN would need to be involved in the aspects outlined in 3.02 (2) and 3.04 (2) since LPNs may only participate.

Please review the Advisory Rulings (ARs) on the Board's website: https://www.mass.gov/lists/advisory-rulings-for-the-board-of-registration-in-nursing

The following ARs limit the scope of practice to RNs in its entirety or in select activities: •

https://www.mass.gov/doc/ar-1001-analgesia-by-catheter-techniques/download ·

https://www.mass.gov/doc/ar-9101-administration-of-medications-for-sedation-analgesia/download https://www.mass.gov/doc/ar-9204-infusion-therapy-pdf/download. Certain activities are limited to registered nurses. • https://www.mass.gov/doc/ar-9901-rn-as-first-assistants-at-surgery/download • https://www.mass.gov/doc/ar-23-01-the-registered-nurses-role-in-assisting-with-peripheral-nerveblock-placement/download • https://www.mass.gov/doc/ar-1301-cosmetic-and-dermatologicprocedures/download this AR states that the patient assessment must be completed by either a registered nurse or the authorized prescriber. • https://www.mass.gov/doc/ar-9802-the-lpn-in-chargeor-nurse-supervisor-role-0/download this AR delineates the difference between assignment and delegation.

RNs may not delegate activities to LPNs that are not within their scope of practice since, as per the regulations in the 244 CMR 9.00: STANDARDS OF CONDUCT at https://www.mass.gov/regulations/244-CMR-900-standards-of-conduct-for-nurses

9.03: Standards of Conduct for Nurses -

(9) Responsibility and Accountability. A nurse licensed by the Board shall be responsible and accountable for his or her nursing judgments, actions, and competency

(10) Acts within Scope of Practice. A nurse who holds a valid license and is engaged in the practice of nursing in Massachusetts shall only perform acts within the scope of nursing practice as defined in M.G.L. c. 112, § 80B, and 244 CMR 3.00: Registered Nurse and Licensed Practical Nurse.

(11) Performance of Techniques and Procedures. A nurse licensed by the Board shall perform nursing techniques and procedures only after appropriate education and demonstrated clinical competency.

(12) Competency. A nurse who holds a valid license shall only assume those duties and responsibilities within his or her scope of practice and for which he or she has acquired and maintained necessary knowledge, skills, and abilities.

Executive Order 562: Updates on the Board's 244 CMR Review

The BORN has undertaken a multi-step review of its regulations at 244 CMR in compliance with Executive Order (EO) 562, issued by Governor Baker on March 31, 2015. Update on revisions at 244 CMR 3.00, 4.00, 5.00, 6.00, 7.00, 8.00, 9.00 and 10.00 as of June 1, 2022.

BORN regulations at 244 CMR that were promulgated: 6.00: Approval of Nursing Education Programs and General Conduct There of (5/26/2023)

Status of the Enhanced Nurse Licensure Compact (eNLC) in Massachusetts

Currently, Massachusetts is not a member of the eNLC. Bill H.5164 makes appropriations for fiscal year 2021 for the Health Policy Commission, in consultation with the Board of Registration in Nursing, to conduct an analysis and issue a report evaluating Massachusetts' entry into the Nurse Licensure Compact. The eNLC allows for registered nurses (RNs) and licensed practical (LPNs) to have one multistate license, with the ability to practice in person or via telehealth in both their home state and other eNLC states. Licensing standards are aligned in eNLC states so all nurses applying for a multistate license are required to meet the same standards, which include a federal and state criminal background check.

Top 10 Patient Safety Concerns for 2023

The ECRI Institute has released its list of the top 10 patient safety concerns for 2023:

- 1. The pediatric mental health crisis
- 2. Violence against healthcare staff
- 3. Uncertainty with maternal-fetal medicine
- 4. Clinicians working outside their scope of practice
- 5. Delayed sepsis treatment
- 6. Care coordination for complex medical conditions
- 7. Not going beyond "five rights" of medication safety
- 8. Inaccurate patient medication lists

- 9. Accidental use of neuromuscular blocking agents
- 10. Preventable harm due to missed care

Created to support healthcare organizations in identifying potential patient safety threats and addressing concerns, detailed information is available from the ECRI Institute at <u>https://www.ecri.org/top-10-patient-safety-concerns-2023-special-report</u>

Nurse Licensure by the Numbers

MASSACHUSETTS NURSE LICENSURE AND APRN AUTHORIZATION

Nurse Licensure by the Numbers from July 1, 2022 to June 30, 2023.

Registered Nurse (RN)	15,389
Licensed Practical Nurse (LPN)	1,239
Certified Nurse Practitioner (CNP)	1,992
Certified Registered Nurse Anesthetist (CRNA)	111
Clinical Nurse Specialist (CNS)	4
Psychiatric Clinical Nurse Specialist (PCNS)	3
	18,777 Total

Massachusetts temporary nursing licenses expired on December 31, 2022. However, from July 1, 2022 to December 31, 2022 there were 1,772 Temporary Nursing licenses issued.

Order of the Commissioner: Expedited Nursing Licensure: Policy 10-03 Activated

https://www.mass.gov/news/order-of-the-commissioner-expedited-nursing-licensure-policy-10-03-activated

DETERMINATION OF THE COMMISSIONER OF PUBLIC HEALTH PURSUANT TO BOARD OF REGISTRATION IN NURSING LICENSURE POLICY 10-03 In accordance with Board of Registration in Nursing (Board) Licensure Policy 10-03, I have determined there are or will be insufficient nurses in Massachusetts to properly respond to disease outbreak or other critical public health concern. Therefore, I direct the Board to activate Licensure Policy 10-03, to expedite the processing of reciprocal license applications for nurses, effective December 1, 2022. Margret R. Cooke Commissioner

Beginning December 1, 2022, there is an <u>expedited pathway for licensure</u> available to:

- nurses holding a temporary license; and
- nurses licensed in good standing in other states who apply for permanent licensure in Massachusetts.

Under this policy, nurses qualified for a permanent license will receive conditional approval of their license while their application is processed.

1. Conditional approval of licensure will be issued within 3 business days of receipt of the application and fee.

- 2. Nurses must verify licensure online to ensure a conditional approval has been issued.
- 3. A nurse will be able to practice with conditional approval for 90 days from the date of issuance.
- 4. During the conditional approval period, the nurse must complete all outstanding licensure requirements.
- 5. After 90 days, to continue practicing in Massachusetts, a nurse must verify <u>online</u> that their permanent license has been issued.

Information Confidentiality Program

The BORN facilitates special management of specific information it holds related to MA nurse licensure. M.G.L., chapter 66A §10 provides an exemption to public records law that certain information associated with your license that would normally be publicly available shall be restricted if you are a victim of domestic violence, victim of an adjudicated crime, or a person providing or training in family planning services. This information includes the home address, telephone number, place of employment, and place of education listed in the BHPL database.

Once restricted, applicable information will not be disclosed under §10 in response to a public records request, whether that request is made in writing, in person or by telephone. The restricted information will no longer be publicly available on the Bureau's Check-a-License online feature. Under M.G.L., BHPL is legally mandated to respond to a public records request with the non-exempt information in your licensure records (e.g., your name, license number, and license status). Certain information, including dates of birth and social security numbers, are kept confidential and are exempt from disclosure for all individuals.

If you are interested in this program, please visit the BORN's website at <u>www.mass.gov/service-</u> <u>details/confidentiality-of-your-health-profession-license-information</u> Please be aware that restrictions applied are only associated with information in connection with your licensure by the BHPL. Should you hold a license not governed by the BHPL you would need to contact that agency directly.

Need A Reminder to Renew Your Nursing License?

The BORN will use email to send reminders to nurses who maintain a current email address in the BORN's database. Log onto the MA Department of Public Health Online Licensing site to update email or mailing addresses. Please note that the mailing and email addresses for each license held must be updated individually. For example, those with both a RN license and APRN authorization will be required to maintain current addresses for both categories.

The National Council of State Boards of Nursing (NCSBN) provides automatic, real-time license status notifications free of charge to LPNs, RNs and APRNS who enroll in Nursys® e-Notify. Nurses can self-enroll in Nursys e-Notify to receive license status updates, track license verifications, and manage license expiration reminders. Nursys e-Notify also provides real-time licensure, discipline and other publicly available notifications to enrolled nurse employers. The e-Notify system alerts subscribers when a modification is made to a nurse's license record including changes to license status, license expiration, license renewal and public disciplinary action/resolution and alerts. If a nurse's license is about to expire, the system will notify the employer of the expiration date. To learn more about Nursys e-Notify and to participate, visit www.nursys.com/e-notify

Contacting the Board

www.mass.gov/dph/boards/rn Email: <u>nursing.admin@state.ma.us</u>

250 Washington Street 3rd Floor Boston, MA 02108 Telephone: 617-973-0900 Toll-free: 800-414-0168

Email Directory

Applications	nursebyexam@pcshq.com
General Nursing	nursing.admin@state.ma.us
Good Moral Character (GMC)	GMCliaison@state.ma.us
Practice	nursing.admin@state.ma.us
Reciprocity	nursebyreciprocity@pcshq.com
Renewal Notice	renew.bymail@state.ma.us

Quick Links

Questions About	BORN Web Page	Telephone/Email
Scheduled Board meetings and agendas List of Board members List of Board staff	About the Board <u>www.mass.gov/board-of-registration-in-</u> <u>nursing-resources</u>	617-973-0900 or 800-414-0168
Board address and telephone numbers Directions to Board office Board email address	Contact Us www.mass.gov/info-details/contact-the- board-of-registration-in-nursing	617-973-0900 or 800-414-0168
Nursing laws and regulations	Statutes, Rules & Regulations <u>www.mass.gov/board-of-registration-in-</u> <u>nursing-resources</u>	617-973-0900 or 800-414-0168
BORN-approved RN and LPN education programs NCLEX pass rates by RN and education program	About Board approved pre-licensure nursing programs www.mass.gov/service-details/about- board-approved-prelicensure-nursing- programs	617-973-0900 or 800-414-0168
Records custodian, closed LPN education programs	Closed LPN program, records custodian	617-973-0900 or 800-414-0168

Questions About	BORN Web Page	Telephone/Email
	www.mass.gov/service-details/closed- schools-and-student-records-office-of- private-occupational-school-education	
License applications	Advanced Practice Licensure by exam (NCLEX) Licensure by reciprocity	Professional Credential Services 877-887-9727 (within US) 615-880-4275 (outside US) <u>nursebyexam@pcshq.com</u> <u>nursebyreciprocity@pcshq.com</u>
License related	Good moral character requirements Renewal Reciprocity Verification <u>www.mass.gov/nursing-licenses</u>	617-973-0900 or 800-414-0168
Recent News and Announcements	www.mass.gov/orgs/board-of- registration-in-nursing	
Practice scope: decision making guidelines	www.mass.gov/service-details/learn- about-the-nursing-scope-of-practice	
Advisory rulings	www.mass.gov/lists/advisory-rulings-for- the-board-of-registration-in-nursing	

Substance Addiction Recovery Program

Established in accordance with M.G.L. Chapter 112, § 80F, the Board of Registration in Nursing's Substance Addiction Recovery Program (SARP) is a voluntary, non-disciplinary approach to Substance Use Disorders (SUDs) among licensed nurses. SARP is a three-year abstinence-based program designed to protect the public health, safety and welfare by establishing adequate safeguards to maintain professional standards of nursing practice. It is accomplished by monitoring and supporting participants' ongoing recovery and their return to safe nursing practice.

In the Spring of 2023, in collaboration with the MA Bureau of Substance Addiction Services (BSAS) and Affinity, the vendor helping to coordinate logistics of the program, the SARP supplied SARP participants, through a reimbursement system, with an annual allotment of up to two thousand dollars in funds to cover the fees associated with the cost of participating in the SARP. These funds help to significantly reduce financial hardships that often face those in recovery.

The Substance Addiction Recovery Evaluation Committee (SAREC) that oversees SARP related matters, gained three new volunteers whose expertise and leadership has been essential for SARP related activities.

NCSBN Offers Free Substance Use Disorder Education Courses

The National Council of State Boards of Nursing now offers its continuing education courses, Understanding Substance Use Disorder in Nursing and Nurse Manager Guidelines for Substance Use Disorder, free of charge. These and other resources related to Substance Use Disorder are available at www.ncsbn.org.

Nursing Practice Updates

To provide more information about the applicability of statues and regulations enforced or administered by the BORN in accordance with M.G.L. c. 30A, § 8, the BORN issues adopted and revised Advisory Rulings (AR's). To date, the BORN has published twenty-six (26) AR's describing the applicability of a statute or regulation to nursing practice. In each of its AR's, the BORN affirms that the licensed nurse is responsible and accountable for acquiring and maintaining the knowledge, skills and abilities (i.e. competencies) necessary to practice in accordance with accepted standards. All licensed nurses, including Registered Nurses (RNs), Licensed Practical Nurses (LPNs), and Advanced Practice Registered Nurses (APRNs) are encouraged to review them at www.mass.gov/lists/advisoryrulings-for-the-board-of-registration-in-nursing

During Fiscal Year 2023, the BORN;

• Adopted two (2) AR's on March 15, 2023:

1. AR 23-01: The Registered Nurse's Role in Assisting with Peripheral Nerve Block Placement. The purpose of this AR is to guide the practice of the Registered Nurse who is assisting an anesthesia provider with the placement of a peripheral nerve block, and;

2. AR 23-02 *The Educational Requirements for Licensure Applicants Educated in an Out of State Nursing Program.* The purpose of this AR is to guide individuals educated outside of MA when applying for registered nurse or licensed practical nurse licensure by exam or by reciprocity. This AR specifically pertains to the educational requirements. There are additional eligibility requirements that can be found on our website at <u>https://www.mass.gov/how-to/apply-for-a-nursing-license-by-exam</u>; and

• Approved revisions of one (1) AR on May 7, 2023:

AR 92-04: Infusion Therapy. The purpose of this AR is to guide the practice of nurses when administering Infusion Therapy in any practice setting.

Nursing Practice Inquiry

The Board receives practice inquiries daily. When asking about practice, the board requests that the question be in writing using the link <u>Board of Registration in Nursing | Mass.gov</u> See the section "Contact Us" and use the email address: <u>nursing.admin@state.ma.us</u>

Business Ownership

The Board does not regulate facilities, clinics, business establishments or Tax ID's. It is the responsibility of each licensed nurse who owns a business or private practice to research the separate regulations that may need to be followed. However, a "Certificate by Regulatory Board" may be needed to open a professional corporation such as a Limited Liability Corporation.

Below are two links regarding the certificate:

https://www.mass.gov/how-to/request-a-certificate-by-regulatory-board

https://www.mass.gov/doc/certificate-by-regulatory-board-request-form-llc/

The certificate needs to be downloaded, printed and upon completion, mailed through the United States Postal Service to:

Massachusetts Department of Public Health Board of Registration in Nursing 250 Washington Street, 3rd Floor Boston, MA 02108

There is a \$15.00 fee, payable by check. The check should be made payable to Commonwealth of Massachusetts.

Telehealth

The Board does not regulate billing, specific prescriptive practice limitations or requirements as to the minimum number of times a patient must be seen in person when nursing is practiced using telehealth. There is also Federal Law that MA licensed nurses must follow when practicing nursing using telehealth. The Board *regulates the licensure that is required:*

244 CMR 10.00 Definitions and Severability: <u>https://www.mass.gov/doc/244-cmr-1000-definitions-and-severability/download</u>

Practice of Nursing. The practice of nursing as defined in M.G.L. c. 112, § 80B, and 244 CMR 3.00: Registered Nurse and Licensed Practical Nurse. Except for acts specifically excluded in M.G.L. c. 112, § 80B, the practice of nursing includes, but is not limited to, the provision of a nursing service using telecommunications technology by a nurse physically located outside Massachusetts to a person physically located within Massachusetts, seeking or accepting any paid or voluntary position as a Registered Nurse or Licensed Practical Nurse, or any paid or voluntary position requiring the applicant hold a valid license to practice nursing.

<u>Telecommunications Technology</u>. Those modalities used in the practice of nursing over distance, whether intrastate or interstate. Such modalities include, but are not limited to: telephones, facsimile, cellular phones, video phones, computers, e-mail, voice mail, CD-ROM, electronic bulletin boards, audio tapes, audio-visual tapes, teleconferencing, video conferencing, on-line services, World Wide Web, Internet, interactive television, real-time camera, and still-imaging.

If MA licensed nurse is practicing telecommunications technology while caring for a patient physically located outside of MA when the nursing service is performed, the following regulation is found in 244 CMR 9.00 Standards of Conduct: <u>https://www.mass.gov/regulations/244-CMR-900-standards-of-conduct-for-nurses</u>

(4) **Practice of Nursing in Another Jurisdiction Using Telecommunications Technology.** A nurse licensed by the Board who, while physically located within Massachusetts, provides a nursing service using telecommunications technology to a person physically located outside Massachusetts, shall also be governed by the licensure and practice laws and regulations of the state or jurisdiction in which the recipient of such a service is located.

Continuing Education for Licensure Renewal

The BORN frequently receives inquiries regarding the Board's regulatory requirements at 244 CMR 5.00 for continuing education (CE) programs. It is the responsibility of each licensed nurse to determine whether a CE program provides a planned learning experience that augments the knowledge, skills and attitudes for the enhancement of their individual nursing practice.

In general, CE programs approved by a professional review process or by other jurisdictions' boards of nursing satisfy the Massachusetts continuing educational requirements. However, it remains the responsibility of the licensee to determine whether the program satisfies all the Board's regulatory requirements.

What are the continuing education criteria for licensure?

The Board regulations pertaining to continuing education can be found under 244 CMR 5.00, utilizing the following link: <u>CMR 5.00: Continuing education | Mass.gov</u>

- Fifteen (15) hours of continuing education (CE) within the two (2) years immediately preceding renewal of registration are required for licensure. RNs renew on their birthday in even numbered years. LPNs renew on their birthday in odd numbered years. New licensees do not have to complete any CE requirements for their first renewal after initial licensure.
- There is *no* requirement for clinical hours of practice to renew a license, however, **APRNs** may have additional CE requirements to maintain certification, as well as practice hours. *These are separate from the Board's requirements*. As a reminder, all APRNs must maintain current certification through a Board approved national certifying organization to maintain current Board authorization to practice. If your certification lapses for any reason, you are no longer authorized to practice as an APRN. Learn how to request to remove or reinstate APRN authorization.
- The Board may request verification of compliance at any time. It is the nurses' responsibility to maintain evidence of CE completion for their most recent two (2) consecutive renewal periods in last four (4) years.
- While required in-services held by your work place provide necessary information for performing your job safely and effectively, they *do not* meet CE requirements for license renewal.
- Basic Life Support Training (BLS) *cannot* be used towards continuing education for licensure renewal. The *first time* Advanced Cardiac Life Support (ACLS) and/or Pediatric Advanced Life Support (PALS) is taken, it *may* be used.
- Refresher programs and educational programs that offer CME, AMA, or other professional recognized credit *may* satisfy the Board CE requirement. In general, programs approved by a professional review process or by other jurisdictions' boards of nursing will satisfy the Massachusetts CE requirements. However, it is nurse's responsibility to determine if the program contains all the Board's requirements using the checklist using the link <u>nursing-nurse-continuing-ed-checklist.pdf (mass.gov)</u>
- Providers can use the link contained on the following web page to find a checklist that determines if the continuing education programs satisfies Board's requirements: <u>Continuing</u> Education (CE) requirements for providers | Mass.gov
- The Board requires two (2) specific *one-time-only* continuing education activities: Alzheimer's Training and Domestic and Sexual Violence training. An attestation that these learning activities have been completed, is required upon license renewal or when applying for a license by exam or by reciprocity.

Guidance for Nursing Practice by Graduates and Students in Their Last Semester of Nursing Education Programs

Section 41 of chapter 2 of the Acts of 2023, signed by Governor Healey on March 29, 2023, continues the authorization allowed by Section 25 of chapter 20 of the Acts of 2020 of nursing practice by graduates and students in their last semester of nursing education programs in accordance with guidance from the Massachusetts Board of Registration in Nursing (BORN) until March 31, 2024.

In accordance with this legislation, individuals who are graduates of a BORN approved registered nursing or practical nursing program and individuals who are nursing students attending the last semester of a BORN approved registered nursing or practical nursing program are authorized to practice nursing and are exempt from the prohibitions against the unlicensed practice of nursing specified in G.L. c. 112, §§ 80, 80A and 80B provided that:

- The individuals are
 - employed by or providing health care services at the direction of a licensed health care facility or a licensed health care provider; and
 - directly supervised by a licensed nurse while providing health care services; and
 - providing health care services in response to the COVID-19 outbreak; and
- The employing licensed health care facility or licensed health care provider has verified that the individual is
 - a graduate of a BORN approved registered nursing or practical nursing program; or
 - a nursing student in his or her last semester at a BORN approved registered nursing or practical nursing program.

Pursuant to the legislation, nursing practice by nursing students, and supervision of nursing students must adhere to the following parameters issued by the Board:

- Nursing students in their last semester and graduate nursing students must practice under the direction and supervision of a licensed nurse, performing tasks within the scope of practice of the supervising nurse of equal or higher educational preparation.
- Direct supervision includes but is not limited to the supervising licensed nurse being physically present in the health care practice setting and readily available where nursing students and graduate nursing students are practicing.
- Nursing students and the graduate nursing students must be assigned tasks by the supervising nurse and seek assistance immediately when he or she encounters patient care situations that are beyond his or her competency and level of academic preparation.
- The employing licensed health care facility or licensed health care provider provides nursing students with an orientation to the patient care environment that aligns with the individual student academic preparation and competencies.
- The employing licensed health care facility or licensed health care provider provides nursing students with policies that support their practice in the clinical setting where they are assigned; and
- The employing licensed health care facility or health care provider ensures that patients are informed that such individuals are nursing students.

This guidance shall remain in effect until March 31, 2024.

https://www.mass.gov/news/guidance-for-nursing-practice-by-graduates-and-students-in-their-last-semester-of-nursing-education-programs-authorization-extended

Disciplinary Action Reporting to the National Practitioner Database

Disciplinary action reporting systems are designed to protect the public by making it easier to access data about the health care practitioner who is providing care to a patient. The Board of Registration in Nursing (Board) is required to report all disciplinary actions taken against a nurse as well as any non-disciplinary license/practice restrictions to National Practitioner Data Bank (NPDB), the result of a May 2013 merger of the federal Healthcare Integrity and Protections Data Bank and the National Practitioner Data Bank. The NPDB is intended to combat fraud and abuse in health insurance and health care delivery, and can be accessed by employers, federal and state governmental agencies, health insurance plans, medical facilities, individual health care practitioners and the public.

The Board also reports disciplinary action against licensees on its website. It also provides licensee information, including disciplinary actions, to the National Council of State Boards of Nursing NURSYS[®] database, the only national database for verification of nurse licensure.

Complaint Resolution and Patient Safety

State law authorizes the Board to investigate complaints against nurses. The Board may sanction a nurse's license when there is evidence of their violation of law, regulations, or standards of conduct that pose a risk to the public. Disciplinary action depends on what the Board determines is necessary to ensure that a nurse's unsafe behaviors or practice deficiencies are remediated. To remain licensed, nurses must demonstrate that they are able to practice in a safe and competent manner.

The Board has long supported a patient safety culture that balances individual accountability and system-related factors. To that end, it considers a variety of factors in its evaluation of a "complaint" or allegation that a nurse has engaged in practice that violates a law or regulation related to that practice. These factors include: the nature and related circumstances of the nurses conduct; applicable remedial activities successfully completed by the nurse; employment performance evaluations of the nurse prior to and following the error; any acknowledgment by the nurse of a practice error and its significance; prior repeated or continuing practice-related issues; associated practice environment or systems-related factors; and whether there is a need, in the public's interest, for an official record of the nurse's practice-related error.

For detailed information regarding the Board's complaint resolution process, visit <u>https://www.mass.gov/regulations/244-CMR-700-investigations-complaints-and-board-actions</u>

244 CMR 7.00: Investigations, complaints and board actions

244 CMR 7.00 authorizes Board staff to conduct investigations and initiate formal docketed complaints on behalf of the Board. It also establishes the grounds for discipline and the actions that may be taken in resolution of such complaints, by the Board and on behalf of the Board, in accordance with M.G.L. c. 30A, and 801 CMR 1.01: Formal Rules. It also establishes the standards and procedures for summary suspensions.

www.mass.gov

During calendar year 2022, the Nursing Investigation Unit opened a total of 324 complaints and 199 closed complaints. Of the complaints that were closed, 87 complaints closed with discipline, 89 dismissed without discipline, and 20 closed after probation was completed. Of the 87 complaints closed with discipline, the disciplinary actions include: 10 licenses were placed on probation; 17 licenses were surrendered; 20 licenses were revoked; 25 licenses were suspended; and 15 licenses were reprimanded. We also had 20 cases where the licensees were summarily suspended and 10 cases where the licensees had a non-disciplinary restriction placed on their license(s).

Disciplinary actions taken by other state boards of nursing can be found by clicking on Nursys Licensure Quick Confirm.

Pre-Licensure Nursing Education

Board-Approved Nursing Education Programs

M.G.L. c. 112, §81A and §81C, authorize the Board to establish regulations governing the approval and operation of RN and LPN education programs located in the Commonwealth. A list of all Board approved nursing education programs is available on the Board's website at www.mass.gov/eohhs/docs/dph/quality/boards/rnnecpro.pdf

Board actions related to individual nursing education programs during Fiscal Year 2023 is contained in the Board's Monthly Meeting Minutes available on the Minutes and Agendas of Previous Board Meetings web page at https://www.mass.gov/service-details/meetings-and-agendas-for-the-board-of-registration-in-nursing

As of June 30, 2023 there were 77 Board-approved RN and LPN education programs:

25 LPN Programs

Pre-requisite Approval Status: Middlesex Community College

Initial Approval Status: Quincy College – Quincy Campus Quincy College – Plymouth Campus

Approval with Warning Status: None

Full Approval Status: all other Practical Nurse programs

20 RN – Associate Degree Programs

Pre-requisite Approval Status: None

Initial Approval Status: Quincy College – Quincy Campus Quincy College – Plymouth Campus Roxbury Community College

Approval with Warning Status: Baystate College, effective March 2023 Laboure College, effective September 13, 2022

Full Approval Status: all other Associate Degree RN programs

25 RN – Baccalaureate Degree Programs

Pre-requisite Approval Status: None

Initial Approval Status: Assumption University Emmanuel College Massachusetts College of Liberal Arts Merrimack College Wheaton College

Approval with Warning Status: MCPHS University – Boston, Baccalaureate Degree Registered Nurse Program Effective February 9, 2022 MCPHS University – Worcester, Baccalaureate Degree Registered Nurse Program Effective February 9, 2022

Full Approval Status: all other pre-licensure Baccalaureate Degree programs

7 Direct Entry Graduate Degree Programs

Pre-requisite Approval Status: None

Initial Approval Status: Curry College

Approval with Warning Status: None

Full Approval Status: all other Direct Entry Graduate Degree programs

1 RN - Hospital-based Diploma Program

Pre-requisite Approval Status: None

Initial Approval Status: None

Approval with Warning Status: None

Full Approval Status: all

Summary:

From 2012-2021, there has been a 22% increase in RN program graduates (MA BORN Annual Reports, 2012-2021).

From 2012 -2021, the LPN programs have seen a 29% decrease in graduates (MA BORN Annual Reports, 2012-2021).

Graduation rates:

The total number of graduates from Board-approved RN education programs increased 3% in 2022 (n=4382) compared to 2021 (n=4,262).

For the 2022 graduation rates compared to 2021 rates: Increases in graduation rates were noted in the following programs:

- 1. Associate Degree programs increased 6.3% in 2022 (n=1431) compared to 2021 (n=1346)
- 2. Baccalaureate programs increased 2.4% in 2022(n=2628) compared to 2021(n=2567)
- 3. Generic Master's programs increased 12 % in 2022 (n=267) compared to 2021 (n=239)

Decreases in graduation rates were noted in the following programs:

- 1. LPN Programs decreased 11% in 2022 (n=574) compared to 2021 (n=674)
- 2. Diploma programs decreased 49% in 2022 (n= 54) compared to 2021 (n=110)

For the 2022 graduation rates compared to the 2018 rates:

The total number of graduates from Board-approved RN education programs increased 11% in 2022 (n=4,382) compared to 2018 (n=3951).

Increases in graduation rates were noted in the following programs:

- 1. Baccalaureate Degree nursing programs increased 15% in 2022 (n=2,628) compared to 2018(n=2,276).
- 2. Associate Degree RN programs increased 8% in 2022 (n=1,431) compared to 2018 (n= 1323).

Decreases in graduation rates were noted in the following programs:

- 1. LPN program graduates decreased 7% in 2022 (n=574) compared to 2018 (n= 616).
- 2. Diploma Nursing Programs decreased 37% in 2022 (n=54) compared to 2018 (n=85).

2022 NCLEX® Performance of Massachusetts Graduates

The 2022 pass rate of first-time writers of the National Council Licensure Examination for RN (NCLEX-RN) who graduated from Board-approved RN education programs was 82%. The 2022 performance of all U.S.-educated RN program graduates during the same period was 80%.

The pass rates for graduates of Board-approved LPN education programs who wrote the National Council Licensure Examinations for LPN (NCLEX-PN) for the first time during 2021 was 86% compared to 80% for all U.S.-educated LPN program graduates.

The NCLEX-RN and NCLEX-PN are valid and reliable assessments of the competencies needed to perform safely and effectively as a newly licensed, entry-level RN or LPN. The NCLEX exams are administered daily Monday through Friday using computer adaptive testing (CAT) which merges computer technology with the latest measurement theory to increase the efficiency of the exam process. The NCLEX has been administered using CAT since 1994 when it replaced the pencil-and-paper version of what many nurses refer to as "Boards." For information on the 2020 NCLEX pass rate for individual Board-approved nursing education programs, visit the Board's 2020 Performance Summary for Massachusetts Nursing Education Programs web page at <u>www.mass.gov/service-details/about-board-approved-prelicensure-nursing-programs</u>

Regulation, 244 CMR 6.08(1)(h), identifies an ongoing annual NCLEX pass rate less than 80% for first time writers who are graduates of a Board-approved nursing education program as grounds for the Board's review of the program's approval status and an on-site survey. In action taken March 8, 2017, the Board will now interpret the term "ongoing" as it appears in 244 CMR 6.08(1)(h) as any second year within a three-year period. As a result, the Board will direct a program with an NCLEX pass rate less than 80% for first-time writers for any second year within a three-year period to conduct an evaluation of its compliance with the regulations at 244 CMR 6.04: Standards for Nursing Education Program Approval.

Current NCLEX-PN® Passing Standard in Effect through March 2023

NCLEX-PN Passing Standard

In December 2019, the National Council of State Boards of Nursing (NCSBN) Board of Directors voted to raise the passing standard for the NCLEX-PN Examination. **The new passing standard is -0.18 logits*, 0.03 logits higher than the current standard of -0.21 logits.** The new passing standard took effect on April 1, 2020 and will remain in effect through March 31, 2023.

As the practice of nursing is constantly evolving, there is a need to periodically reevaluate the appropriateness of the NCLEX-RN and the NCLEX-PN passing standards. In taking this action, the NCSBN Board of Directors considered multiple sources of information including the recommendations of an expert panel of subject matter experts who performed a criterion-referenced standard setting procedure. The NCSBN Board of Directors also considered an historical record of the NCLEX-PN passing standard and test-taker performance and the results of the annual national surveys of nursing professionals including nurse educators and directors of nursing in acute and long-term care settings.

The NCSBN Board of Directors re-evaluates NCLEX passing standards every three years to ensure the minimum competence of entry-level Nurses.

Next Generation NCLEX®

Findings of research by Examination Department staff at the NCSBN indicated that critical thinking and decision-making skills were an essential component of entry-level nursing education. This research further identified the need for measurement of competence in clinical judgment within high-stakes nursing licensure exams.

As a result, NCSBN has announced it is conducting a research project to assess the ability of current and potential innovative items, or test questions, to evaluate a nurse licensure candidate's clinical judgment.

With an anticipated start in 2023, the NCLEX-RN® will include a Special Research Section. The Special Research Section will be given to select candidates taking the NCLEX-RN and will take approximately 30 minutes to complete. This section will be administered following a candidate's regular NCLEX exam and will not count as part of their NCLEX score. Information about the Special Research Section is available to NCLEX candidates via the NCSBN and Pearson VUE websites.

According to NCSBN, clinical judgment is defined as the observed outcome of critical thinking and decision-making. It is an iterative process that uses nursing knowledge to observe and access presenting situations, identify a prioritized client concern, and generate the best possible evidence-based solutions in order to deliver safe client care (please visit the following link for a more detailed discussion of the clinical judgment model: <u>www.jattjournal.com/index.php/atp/article/view/89187</u>). NCSBN research, literature review and pilot studies identified the following important elements of nursing clinical judgment: cue recognition; hypotheses generation; hypotheses evaluation; taking actions; and evaluating outcome.

Programs to Orient New Administrators and Faculty to Board Regulations

The BORN hosted its biannual New Administrator Orientation virtually in 2022. Designed to promote public protection through greater compliance by the Commonwealth's Board-approved nursing education programs with the regulations at 244 CMR 6.00: Approval of Nursing Education Programs and the General Conduct Thereof and 244 CMR 8.00: Licensure Requirements and their graduates, the program was attended by 17 new nurse administrators.

In addition, the BORN hosted its biannual Nursing Faculty Orientation for 237 nurse educators of Boardapproved RN and LPN education programs. Designed to promote public protection, enhance regulatory compliance, and the important role of nursing faculty in the development, implementation and evaluation of an evidence-informed program of study that prepares graduates for safe, entry-level practice.

New Administrators and Faculty to Board Regulations

The BORN hosted its biannual New Administrator Orientation virtually in 2021. Designed to promote public protection through greater compliance by the Commonwealth's Board-approved nursing education programs with the regulations at 244 CMR 6.00: Approval of Nursing Education Programs and the General Conduct Thereof and 244 CMR 8.00: Licensure Requirements and their graduates, the program was attended by 14 new nurse administrators.

In addition, the BORN hosted its biannual Nursing Faculty Orientation for 149 nurse educators of Board-approved RN and LPN education programs. Designed to promote public protection, enhance regulatory compliance, and the important role of nursing faculty in the development, implementation and evaluation of an evidence-informed program of study that prepares graduates for safe, entry-level practice.

MA Department of Public Health issued a guidance on COVID Exemptions

Massachusetts Department of Public Health Guidance on COVID Exemptions | Mass.gov

Massachusetts Department of Public Health Guidance on COVID Exemptions: Practitioners (Advance Practice Registered Nurses) who grant vaccination or mask exemptions must have a provider-patient relationship with the person who is the subject of the exemption and a legitimate medical reason supporting an exemption. Practitioners who grant an exemption outside the acceptable standard of care may be subject to discipline. The standard of care applicable is the same whether the patient is seen in person or through telemedicine.

National Council of State Boards of Nursing (NCSBN)

Policy Statement: Dissemination of Non-scientific and Misleading COVID-19 Information by Nurses

Purpose is to address the misinformation being disseminated about COVID-19 by nurses. Misinformation is defined as distorted facts, inaccurate or misleading information not grounded in the peer-reviewed scientific literature and counter to information being disseminated by the Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA). Nurses are expected to be "prepared to practice from an evidence base; promote safe, quality patient care; use clinical/critical reasoning to address simple to complex situations; assume accountability for one's own and delegated nursing care" (AACN, 2021). SARS-CoV-2 is a potentially deadly virus. Providing misinformation to the public regarding masking, vaccines, medications and/or COVID-19 threatens public health. Misinformation, which is not grounded in science and is not supported by the CDC and FDA, can lead to illness, possibly death, and may prolong the pandemic. It is an expectation of the U.S. boards of nursing, the profession, and the public that nurses uphold the truth, the principles of the *Code of Ethics for Nurses* (ANA, 2015) and highest scientific standards when disseminating information about COVID-19 or any other health-related condition or situation.

When identifying themselves by their profession, nurses are professionally accountable for the information they provide to the public. Any nurse who violates their state nurse practice act or threatens the health and safety of the public through the dissemination of misleading or incorrect information pertaining to COVID-19, vaccines, and associated treatment through verbal or written methods including social media may be disciplined by their board of nursing. Nurses are urged to recognize that dissemination of misinformation not only jeopardizes the health and well-being of the public but may place their license and career in jeopardy as well.

Keeping Up to Date with Board News

The Board posts information on its website to alert nurses to licensure requirement revisions or other noteworthy news. In order to keep current, the Board recommends that all nurses subscribe to the Board's RSS feed icon at http: www.mass.gov/dph/boards/rn boards/rn to be automatically notified via email when the Board posts a "news and alert" item. Note: the RSS feed does not work with iPhones, iPads, Safari or Google. Please use a compatible web browser.