

**COMMONWEALTH OF MASSACHUSETTS  
BOARD OF REGISTRATION IN NURSING**

250 Washington Street, Room 3C  
Boston, MA 02108

And Via Zoom

Wednesday, December 10, 2025 9:00 am | 3 Hours | (GMT-04:00) Eastern Time (US & Canada)

Event Address for Attendees:

<https://zoom.us/j/97914373231>

Webinar ID: 979 1437 3231

Join by Phone:

+1 929 436 2866 US (New York)

Webinar ID: 979 1437 3231

**Minutes of the Regularly Scheduled Board Meeting**

Wednesday, December 10, 2025

**Board Members Present In Room 3C**

None

**Board Members Not Present**

K. Sanclemente, BSN, RN

**Board Members Present Via Audio Or Video**

A. Alley, MSN, RN, Chairperson  
L. Kelly, DNP, RN, CNP, Vice Chairperson  
S. Abshir, LPN  
K. Crowley, DNP, RN  
A. Joseph, MD  
L. Keough, PhD, RN, CNP  
D. Nikitas, BSN, RN  
K. Pelletier, ADN, RN (Joined at 9:05am)  
R. Reynolds, PhD, MSN, RN  
R. Sesay, ASN, RN  
H. Underwood, LPN

**Staff Present In Room 3C**

P. Scott, Licensing Coordinator  
L. Bermudez, Program Coordinator I  
S. Gaun, Office Support Specialist I

**Staff Not Present**

H. Engman, JD, Chief Board Counsel  
H. Caines Robson, MSN, RN, Nursing  
Education Coordinator

**Staff Present Via Audio Or Video**

H. Cambra, JD, BSN, RN, Executive Director  
J. Matthews, MSN, APRN, MPH, Deputy Executive  
Director  
L. Hillson, PhD, MSN, RN, Assistant Director for  
Policy and Research  
R. Barros, JD, Board Counsel  
M. Bresnahan, JD, Board Counsel

C. Walsh, MSN, RN, Nursing Education Coordinator  
P. McNamee, MS, RN, Nursing Practice Coordinator  
C. DeSpirito, JD, BSN, RN, Complaint Resolution  
Coordinator  
A. Hallowell, BSN, RN, Complaint Resolution  
Coordinator  
M. Waksmonski, MSN, RN, SARP Coordinator  
J. Showalter, MSCJ, LADCI, URAMP Program  
Coordination Supervisor  
G. Luke, MBA, SARP Monitoring Coordinator  
E. Conlon, SARP Monitoring Coordinator  
K. Jones, Probation Compliance Officer  
D. McKenney, Compliance Officer  
K. Foster, Compliance Officer  
R. Laguerre, Compliance Officer  
R. Cody, Compliance Officer  
S. McCauley, Compliance Officer  
V.A. McDonough, Compliance Officer  
M. Hale, Compliance Officer  
J. Scranton, Compliance Officer  
J. Cody, Compliance Officer  
E. Ketchum, Program Coordinator I

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**TOPIC:**

Call to Order & Determination of Quorum

**DISCUSSION:**

A. Alley confirmed by roll call that a quorum of the Board members was present and announced that the meeting was being recorded.

**ACTION:**

At 9:00 a.m., A. Alley, MSN, RN, Chairperson, called the December 10, 2025 Regularly Scheduled Board Meeting to order.

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**TOPIC:**

Regularly Scheduled Board Meeting

**DISCUSSION:**

None.

**ACTION:**

Motion by A. Alley, seconded by L. Kelly, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to convene the Regularly Scheduled Board Meeting at 9:02 a.m.  
Motion carries.

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**TOPIC:**

## Approval of Agenda

### **DISCUSSION:**

C. Walsh deferred VIII. B. 1. Middlesex Community College, Practical Nurse Program, VIII. E. 3. MCPHS University Boston Baccalaureate Degree Program, VIII. E. 4. MCPHS University Worcester Baccalaureate Degree Program, and VIII. E. 5. MCPHS University Worcester Baccalaureate Degree Program. C. Walsh stated she will be presenting VIII. E. 2. Merrimack College, Baccalaureate Degree Program for H. Caines Robson.

P. McNamee deferred X. D. AR place holder.

M. Bresnahan deferred X. C. Compliance with Out-of-State Alternative to Discipline Programs.

### **ACTION:**

Motion by A. Alley, seconded by L. Kelly, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to approve the Agenda as revised.

Motion carries.

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### **TOPIC:**

Approval of Board Minutes for the November 26, 2025 Meeting of the Regularly Scheduled Board Meeting

### **DISCUSSION:**

None.

### **ACTION:**

Motion by A. Alley, No Second, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to accept the Minutes of the November 26, 2025 Regularly Scheduled Board Meeting as presented. Motion carries.

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### **TOPIC:** Reports, Announcements and Administrative Matters

Announcements

### **DISCUSSION:**

H. Cambra reminded Board Members to change their Outlook passwords to avoid being locked out of their accounts.

H. Cambra reminded Board Members to sign up for Complaint Committee meetings and noted that the 2026 schedule was sent out, alongside a link to a survey to collect feedback from the Board Members on the best timing for those meetings.

H. Cambra announced that L. Keough has resigned, and this will be her final Board meeting, and Board Members thanked L. Keough for her contributions to the Board.

H. Cambra added that there have been several deferred matters during this meeting, which shift the timing of the meeting, and staff are figuring out how to keep the meeting moving. H. Cambra stated that 65C and Adjudicatory sessions may be convened before Executive but will keep the Board Members updated.

**ACTION:**

So noted.

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**TOPIC:** URAMP

Activity Report – None

**DISCUSSION:**

None.

**ACTION:**

None.

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**TOPIC:** Probation

Staff Action Report – None

**DISCUSSION:**

None.

**ACTION:**

None.

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**TOPIC:** Practice Coordinator Staff Report

**DISCUSSION:**

P. McNamee was available for questions.

**ACTION:**

So noted.

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**TOPIC:** Education

Nursing Education Staff Report

**DISCUSSION:**

C. Walsh was available for questions.

**ACTION:**

So noted.

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**TOPIC:** Education

244 CMR 6.05 (2) Initial Approval

Middlesex Community College, Practical Nurse Program

**DISCUSSION:**

Deferred.

**ACTION:**

Deferred.

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**TOPIC:** Education

244 CMR 6.06 (1) Site Survey

American International College, Baccalaureate Degree Program – Represented by Program Administrator E. Furman, present via Zoom Audio and Video

**DISCUSSION:**

C. Walsh summarized her previously distributed memorandum and attached exhibits to the Board.

E. Furman stated that the 14 Board policies were reviewed and any ambiguous or discriminatory language was removed. E. Furman stated that an SEP calendar was established and is scheduled for January 2026.

K. Crowley asked why the SEP matters haven't been addressed in the seven (7) months since the Program was before the Board. E. Furman stated the Program thought they had been and developed a calendar per the site visit guidelines. E. Furman stated that the faculty went through the 14 Board policies and removed any ambiguous language, which they believed was the directive. E. Furman stated that the policies will be reviewed and evaluated again for their effectiveness. K. Crowley clarified that the SEP has more outcomes than just the 14 Board policies and several other components were not met. K. Crowley recommended moving up the deadline date. R. Reynolds asked if the Program received the list of suggestions to bring the Program up to compliance, and C. Walsh confirmed. C. Walsh added that she met with E. Furman and discussed this matter and stated that the Program has a solid plan on how to evaluate the effectiveness of the policies. C. Walsh asked if Board Members would consider moving the date up for C. Walsh to review the structure of how the Program would evaluate the policies to ensure the Program is on the right track. R. Reynolds and A. Alley agreed and stated that it would identify any issues sooner rather than later.

**ACTION:**

Motion by K. Crowley, seconded by R. Reynolds, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to:

1. Accept the staff compliance report finding:
  - a. Program has provided satisfactory evidence of compliance with the regulations at 244 CMR 6.04 (1)(h), 244 CMR 6.04 (1)(l), and noncompliance with 244 CMR 6.04 (3)(b);
2. Continue Full Approval Status at this time;
3. Provide the Nursing Education Coordinator a structured outline of the SEP, **Due: March 15, 2026**
4. Direct the Program to provide to the Board the following in order to address the regulatory deficiencies **Due: May 15, 2026:**
  - a. A current updated systematic evaluation plan that includes definitions, expected levels of achievement (achievable and measurable), a calendar of outlining schedule of evaluation of components along with evidence of faculty participation in the development process, findings (aggregate and trended data) and outcomes that were used to develop, maintain and revise the program; including a review of the effectiveness of the 14 required Board Policies;
5. Authorize the Nursing Education Coordinators to review the Program's corrective directives related to the regulatory deficiency at 244 CMR 6.04(1)(h) with the following stipulations:
  - a. The Nursing Education Coordinator(s) may determine, on behalf of the Board, whether the Program has demonstrated correction of the deficiency and achieved compliance;

- b. If the Nursing Education Coordinator(s) determine that the Program has not met the requirements, the Coordinator(s) will bring the matter before the Board for final determination;
6. Failure to correct these regulatory deficiencies by the established due dates will result in the Board's evaluation of the Program's approval status [ref 244 CMR 6.08(1)].

Motion carries.

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**TOPIC:** Education

244 CMR 6.06 (2) Waiver of Site Survey

Holyoke Community College, Associate Degree Program – Represented by Director K. Briand, with ASN Program Chair J. Loughrey and Interim Dean J. Shortsman, present via Zoom Audio and Video

**DISCUSSION:**

C. Walsh summarized her previously distributed memorandum and attached exhibits to the Board.

R. Reynolds voiced concerns about the survey delay. R. Reynolds added that the last survey was in 2018 and there are still several significant outstanding items. R. Reynolds recommended denying the survey waiver and noted that the survey may be useful in assisting the Program in guiding the Program forward. K. Crowley voiced agreement and noted 5 areas of noncompliance as well as a 78% pass rate for 2025 graduates.

**ACTION:**

Motion by R. Reynolds, seconded by K. Crowley, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to:

1. Accept the staff compliance report finding:
  - a. written evidence of the program's accreditation.
  - b. the written findings of the Board-recognized accrediting agency in nursing based on its review of the program.
  - c. the Program has provided satisfactory evidence of compliance with the regulations at 244 CMR 6.04 (1)(a), (1)(b), (1)(c), (1)(d), (1)(e), (1)(f), (1)(g), (1)(i), (1)(j), (1)(k), (1)(l), (1)(m), (2)(a), (2)(b), (2)(c), (3)(a), (3)(c), (3)(d), (4)a, (4)b(1), (4)(b)(2), (4)(b)(4), (5)(a), (5)(b)(2), (5)(c), (5)(d), (5)(e), (5)(f) and noncompliance with 244 CMR 6.04 (1)(h), (3)(b), (4)(b)(3), and (5)(b)(1);
2. Continue Full Approval status at this time;
3. Determine the Program does not qualify for a Waiver of 244 CMR 6.06(1)(a) Site Survey of Nursing Education Programs and request the Nursing Education Coordinators conduct a site survey;
4. Direct the Program to provide to the Board the following to demonstrate correction of the regulatory deficiencies
  - a. **Due March 11, 2026:**
    - i. Revised 14 Board policies to include specific nondiscriminatory, non-ambiguous criteria;
  - b. **Due May 13, 2026:**
    - i. Revised clinical agreements to include a provision for an annual review of the agreement;
    - ii. A systematic evaluation plan that includes all components of 244 CMR 6.04, operating definitions, expected levels of achievement (achievable and measurable), a calendar outlining the schedule of evaluation for all components along with

evidence of faculty participation in the development process, findings (aggregated and trended data) and outcomes that were used to develop, maintain and revise the program;

5. Failure to correct these regulatory deficiencies by the established due dates will result in the Board's evaluation of the Program's approval status [ref 244 CMR 6.08(1)].

Motion carries.

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**TOPIC:** Education

244 CMR 6.07 (2) Program Change

Bristol Community College, Associate Degree Program – Represented by Program Administrator J. Pimental, present via Zoom Audio and Video

**DISCUSSION:**

C. Walsh summarized her previously distributed memorandum and attached exhibits to the Board.

J. Pimental clarified that the Program already has a hybrid cohort of 24 and this is to secure evening and weekend clinicals for these students.

**ACTION:**

Motion by K. Crowley, seconded by R. Reynolds, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to:

1. Accept the Program's 244 CMR 6.07 (1)(a) Notification of adding or removing a program option within a nursing program;
2. Accept the Board staff memo; and
3. Determine if the program warrants approval for the proposed additional of an option as previously outlined.

Motion carries.

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**TOPIC:** Education

244 CMR 6.07 (2) Program Change

Merrimack College, Baccalaureate Degree Program – Represented by Academic Dean of Nursing and Program Administrator T. Alberti, present via Zoom Audio and Video

**DISCUSSION:**

C. Walsh summarized her previously distributed memorandum and attached exhibits to the Board.

K. Crowley commended the Program for the level of detail provided proactively to the Board. K. Crowley voiced slight concerns about completion rates but noted that the increase in staff may help to address that.

K. Crowley stated that the NCLEX pass rates are great. K. Crowley asked C. Walsh about the directives of where the reports related to preceptors' rotation, if there is any way the Board can get updated completion rates at different intervals, and C. Walsh stated that the Program is trending downwards and is doing some internal monitoring and can add monitoring into the directives.

**ACTION:**

Motion by K. Crowley, seconded by R. Reynolds, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to:

December 10, 2025 Regular Session Board Meeting Minutes  
(to be Approved 1/14/2026)

1. Accept the Program's 244 CMR6.07 (1)(b) Change report: an increase in student admissions of 20% or more above the most recent three-year admission mean;
2. Determine if the Program warrants approval for the increase in student admissions of 20% or more above the most recent three-year admission mean;
3. Determine Compliance with 244 CMR 6.07(1)(b);
4. For the effectiveness of the Nursing Education Program, direct the Program to provide updates on clinical site availability and student preceptor placements at the following designated dates:
  - March 2, 2026
  - June 15, 2026
  - October 15, 2026

Each update shall include:

- a. Monitoring of completion report and if anything becomes out of compliance, that is brought to the Board for evaluation
- b. Documentation of current clinical site availability and actual preceptorship assignments completed for all required courses;
- c. Student-to-faculty ratios for each clinical rotation, noting any deviations from the required 6:1 ratio and corrective actions taken;
- d. Evidence of efforts to secure additional clinical sites or preceptors if demand exceeds capacity;
- e. A comparison with previous reports to demonstrate trends and scalability of clinical site and preceptorship resources; and

5. Continue Full Approval Status at this time.

Motion carries.

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**TOPIC:** Education

244 CMR 6.07 (2) Program Change

MCPHS University Boston Baccalaureate Degree Program

**DISCUSSION:**

Deferred.

**ACTION:**

Deferred.

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**TOPIC:** Education

244 CMR 6.07 (2) Program Change

MCPHS University Worcester Baccalaureate Degree Program

**DISCUSSION:**

Deferred.

**ACTION:**

Deferred.

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**TOPIC:** Education

244 CMR 6.07 (2) Program Change

MCPHS University Worcester Baccalaureate Degree Program

**DISCUSSION:**

Deferred.

**ACTION:**

Deferred.

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**TOPIC:** Education

244 CMR 6.08 Noncompliance with standards

Greater Lowell Technical, Practical Nurse Program – Represented by Director of Practical Nursing, J. Machado, present via Zoom Audio and Video

**DISCUSSION:**

C. Walsh summarized her previously distributed memorandum and attached exhibits to the Board.

K. Crowley stated that there has been improvement, but there are still some areas of noncompliance. K. Crowley asked C. Walsh to confirm if the (4)(b)(4) inconsistency is the same as the original findings that led to warning status, and C. Walsh stated it's a different area surrounding testing policies and variations in how they were evaluating students in different courses. C. Walsh stated the Program has been proactive in addressing that and fixing it immediately. K. Crowley asked Board Members if they should take the program off Warning status, and should the Board allow the increase in admissions despite the areas that need to be worked on. R. Reynolds noted that the Program has made improvement and agrees that the Program should be taken off Warning status and recommended holding off on doubling the number of students during a tenuous time. A. Alley agreed that Warning status is not indicated at this time. C. Walsh stated that the Program admits in January, and the cap was placed due to not having direct patient care clinical sites or outcomes, which the Program now has. K. Crowley asked how many students are in the queue and J. Machado stated that they are at full capacity with 20 students for the day program and 20 students for the evening program, and previously the Program has always had 40 and 40. K. Crowley asked if the Program has done another admission cycle, and J. Machado stated they have not and C. Walsh stated they were holding off until coming before the Board. A. Alley stated that the increase in admissions is acceptable. D. Nikitas stated their numbers are good and Board Members agreed.

**ACTION:**

Motion by K. Crowley, seconded by R. Reynolds, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to:

1. Accept the staff compliance report;
2. Find that the Program has provided satisfactory evidence of compliance with the regulations at 244 CMR 6.04 (1)(a), (1)(b), (1)(c), (1)(d), 1(e), (1)(f), 1(g), 1(i), 1(j), (1)(k), (1)(l), (1)(m), (2)(a), (2)(b), (2)(c), (3)(a), (3)(c), (3)(d), (4)(a), (4)(b)(1), (4)(b)(2), (4)(b)(3), (5)(a), (5)(c), (5)(d), (5)(e) and (5)(f), partially met (4)(b)(4) and noncompliance with 244 CMR 6.04 (1)(h), (3)(b), and (5)(b);
3. Find the program has provided satisfactory evidence of correction with the regulations at 244 CMR 6.08 (1)(f) and determine compliance with 244 CMR 6.08 (1)(f);
4. Determine a preponderance of the evidence warrants a restoration to Full Approval Status;
5. Determine a preponderance of the evidence supports restoration of full admission capacity of 40 students in the day option and 40 students in the evening option;
6. Direct the Program to provide to the Board the following in order to demonstrate correction of the regulatory deficiencies:

- i. Submit a comprehensive plan for a program-wide grading policy and implementation timeline that ensures fair, equitable, and consistently applied evaluation criteria across all nursing courses, including standardized weighting of examinations and cumulative assessments;
- ii. Documentation to demonstrate that the immunization policy includes all immunization requirements but not limited to negative;
- iii. Documentation to demonstrate that all publications and materials reflect the immunization policy clarifications;

**b. Due May 6, 2026:**

- i. Complete an internal audit of all clinical affiliation agreements to ensure compliance with Board regulations and revise written agreements with cooperating agencies utilized as clinical learning sites specifying that they are developed and reviewed annually by both program and agency personnel and defining the responsibilities of the program and the cooperating agency; Provide the Board the results of the internal audit and a proposed timeline for correction;
- ii. Provide revised course syllabi for all nursing courses demonstrating consistent grading structures, standardized assessment components, and inclusion of cumulative end-of-course evaluations;
- iii. A revision and publication of the 14 Board required policies which include specific nondiscriminatory criteria;
- iv. A systematic evaluation plan that includes all components of 244 CMR 6.04, operating definitions, expected levels of achievement (achievable and measurable), a calendar outlining the schedule of evaluation for all components along with

in place of participation in the overall development process, management and central institutions tend to work away to develop and replace the national, in the event of a failure of the effects of the development process:

DATE 09/11/2017: Clerk to the court has been advised of the entry of return, and  
status case has been set for October 11, 2017 and 11/22/2017 and 11/29/2017 and is being set for  
a 11/29/2017.

7. To test the hypothesis that the mean number of children per woman is less than 2.0, a sample of 14 women was selected. The sample mean was 1.8. The sample standard deviation was 0.4. The test statistic is  $t = -1.75$ . The critical value is  $t_{0.05, 13} = 1.771$ . The decision is to fail to reject the null hypothesis. The conclusion is that there is not enough evidence to support the claim that the mean number of children per woman is less than 2.0.

NOTES

**TOPIC:** Education

244 CMR 6.08 Noncompliance with standards

Worcester State University, Baccalaureate Degree Program – Represented by Associate Dean C. Thomas, and Department Chair W. Chadbourne, present via Zoom Audio and Video

### DISCUSSION:

C. Walsh summarized her previously distributed memorandum and attached exhibits to the Board.

K. Crowley and R. Reynolds stated that the first few things from August and October seem to be moving in a good direction, but because there's a December 2025 due date for several items, the Nursing Education Coordinators have not yet had a chance to review that. K. Crowley recommended leaving things the way they are, and C. Walsh stated that the Program was supposed to be before the Board in November as a status update, and may be before the Board again in early spring.

**ACTION:**

Motion by R. Reynolds, seconded by K. Crowley, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to:

1. Accept the staff compliance report finding that the Program has provided satisfactory evidence of compliance with the regulations at 244 CMR 6.04 (1)(l), (4)(b)(1) and (4)(b)(2);
2. Continue Approval with Warning Status; and
3. Direct the Program to submit the following:
  - a. Directives Due December 12, 2025, as outlined in the June 11, 2025, Board meeting; and
  - b. Program quarterly reports as outlined in the June 11, 2025, meeting on December 18, 2025 and March 4, 2026; with
4. Failure to correct these regulatory deficiencies by the established due dates will result in the Board's evaluation of the Program's approval status [ref 244 CMR 6.08(1)].

Motion carries.

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**TOPIC:** Requests for License Reinstatement – None**DISCUSSION:**

None.

**ACTION:**

None.

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**TOPIC:** Strategic Development, Planning and Evaluation

Presentation / Report

Affirmation of the revisions to URAMP Operational Policy, 24-08

**DISCUSSION:**

M. Waksmonski reviewed his previously distributed memorandum and provided additional context regarding the specific updates to the policy.

A. Joseph inquired whether the evaluator would be the participant's mental health clinician. M. Waksmonski clarified that the evaluator would not be their clinician; URAMP is initially seeking an independent evaluator, specifically a clinical psychiatrist or psychologist. K. Crowley asked if these changes were consistent with practices observed in other boards. M. Waksmonski acknowledged that this program is relatively new to other boards. However, he noted the existence of other ATD substance use disorder and mental health programs similar to URAMP. These policy adjustments were informed by a thorough analysis conducted by Eastern Research Group, which examined how various programs approach mental health cases presented to the board, as well as their monitoring processes. Each state administers its program and licenses on an individualized basis, and these adjustments aim to align with a more personalized approach, placing significant emphasis on the evaluator and the collateral information available at the time. This methodology enhances the quality of evaluations and prognostications regarding a licensee's stability and their capacity to practice safely moving forward. H. Cambra remarked that a compelling aspect of the discussion surrounding these changes is that the policies continue to prioritize REC as a central component of this process, ensuring that URAMP does not rely solely on the evaluator but also engages their expert panel. L. Keough sought clarification regarding whether the term "qualifying professionals" included APRNs. M. Waksmonski responded that APRNs are not currently recognized as a qualifying group for

evaluations. When L. Keough requested further explanation, M. Waksmonski elaborated that the requisite training for evaluators is crucial to maintaining the highest quality of evaluations. He emphasized the importance of not undermining APRN practice while highlighting the risks associated with allowing evaluations by APRNs, given uncertainties regarding their expertise in conducting such assessments and the implications for public safety. There have been discussions about potentially expanding the evaluator group to include APRNs, provided that appropriate criteria are established. L. Keough questioned why psychologists would be included while APRNs would not. M. Waksmonski clarified that the distinction lies in the level of training required for licensure.

H. Cambra pointed out that APRNs could conduct evaluations related to nursing professions, referencing their previous involvement with SARP assessments. she also inquired whether the policy was under review by other boards and how the nursing Board could provide feedback to ERG and the other boards. M. Waksmonski explained that the policy must be submitted for review and approval by each board. L. Kelly expressed concern over the prevailing assumptions regarding APPs, stating that it is disheartening. She asserted that those discussing this issue need further education and conveyed that, as the board, they could not support the policy based on the information presented. K. Crowley concurred with L. Kelly's sentiments. A. Alley asked if URAMP is seeking approval from this board, to which M. Waksmonski confirmed that approval of the policy is indeed being sought.

H. Cambra proposed coordinating a response to provide the best feedback possible. R. Barros advised that the board could defer the matter to a subsequent meeting while documenting a few directives for the record.

**ACTION:**

Motion by L. Kelly, seconded by A. Alley, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to defer all the recommended changes and policy, with the caveat that the BORN staff will be in conversation with whomever is involved with the publishing of the document.  
Motion carries.

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**TOPIC:** Strategic Development, Planning and Evaluation  
Presentation / Report  
Legislative Update

**DISCUSSION:**

L. Hillson summarized her previously distributed memorandum and attached exhibits to the Board.

**ACTION:**  
So noted.

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**TOPIC:** Strategic Development, Planning and Evaluation  
Presentation / Report  
Compliance with Out-of-State Alternative to Discipline Programs

**DISCUSSION:**  
Deferred.

**ACTION:**  
Deferred.

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**TOPIC:** Strategic Development, Planning and Evaluation  
Presentation / Report  
AR place holder

**DISCUSSION:**  
Deferred.

**ACTION:**  
Deferred.

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**TOPIC:** Strategic Development, Planning and Evaluation  
Topics for Next Agenda

**DISCUSSION:**  
None.

**ACTION:**  
So noted.

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**TOPIC:**  
Adjournment of the Regular Session

**DISCUSSION:**  
None.

**ACTION:**  
Motion by A. Alley, seconded by L. Kelly, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to adjourn the Regular Session at 10:37 a.m.  
Motion carries.

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**TOPIC:**  
Adjudicatory Session

**DISCUSSION:**  
None.

**ACTION:**  
Motion by A. Alley, seconded by L. Kelly, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to convene the Adjudicatory Session at 10:49 a.m. to deliberate on proposed final decisions and orders, and rulings on pending adjudicatory matters.  
Motion carries.

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**Adjudicatory Session 10:49 a.m. to 11:00 a.m.**

**TOPIC:**

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

**DISCUSSION:**

None.

**ACTION:**

Motion by A. Alley, seconded by L. Kelly, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to convene the G.L. c. 112, s. 65C Session at 11:02 a.m.  
Motion carries.

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**G.L. c. 112, s. 65C Session 11:02 a.m. to 12:49 p.m.**

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**TOPIC:**

G.L. c.30A, §21 Executive Session

**DISCUSSION:**

None.

**ACTION:**

Motion by A. Alley, seconded by L. Kelly, and voted by roll call with S. Abshir, A. Alley, K. Crowley, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to convene the Executive Session at 1:03 p.m. as per Purpose One of G.L. c.30A, §21 (a)(1).  
Motion carries.

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**G.L. c. 30A, § 21 Executive Session 1:03 p.m. to 4:30 p.m.**

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**TOPIC:**

Adjournment

**DISCUSSION:**

None.

**ACTION:**

Motion by A. Alley, seconded by K. Crowley, and voted by roll call with S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to adjourn the meeting at 4:30 p.m.  
Motion carries.

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Minutes of the Board's December 10, 2025, Regularly Scheduled Meeting were approved by the Board on January 14, 2026.



Anthony Alley, MSN, RN  
Chairperson  
Board of Registration in Nursing

Agenda with exhibits list attached.

**Commonwealth of Massachusetts  
Board of Registration in Nursing**

**Notice of the Regularly Scheduled Meeting**

**Regular Session**

250 Washington Street  
Conference Room 3C  
Boston, Massachusetts 02108

And Via Zoom

Wednesday, December 10, 2025 9:00 am | 3 Hours | (GMT-04:00) Eastern Time (US & Canada)

Event Address for Attendees:

<https://zoom.us/j/97914373231>

Webinar ID: 979 1437 3231

Join by Phone:

+1 929 436 2866 US (New York)

Webinar ID: 979 1437 3231

**Wednesday, December 10, 2025**

**PRELIMINARY AGENDA AS OF 12/01/25 1:40pm**

<b>Estimated Time</b>	<b>Item #</b>	<b>Item</b>	<b>Exhibit</b>	<b>Presented by</b>
9:00 a.m.	<b>I.</b>	<b>CALL TO ORDER &amp; DETERMINATION OF QUORUM</b>	None	
	<b>II.</b>	<b>APPROVAL OF AGENDA</b>	Agenda	
	<b>III.</b>	<b>APPROVAL OF MINUTES</b> A. Draft Minutes for the November 26, 2025 Meeting of the Board of Registration in Nursing, Regular Session Via Zoom	Minutes	
	<b>IV.</b>	<b>REPORTS, ANNOUNCEMENTS AND ADMINISTRATIVE MATTERS</b> A. Announcements	Oral / Memo	HC
	<b>V.</b>	<b>URAMP – None</b>		
	<b>VI.</b>	<b>PROBATION</b> A. Probation Staff Action Report – None		

	<b>VII. PRACTICE</b> A. Practice Coordinator Staff Report	Report	PM
	<b>VIII. EDUCATION</b> A. Nursing Education Staff Report B. 244 CMR 6.05 (2) Initial Approval 1. Middlesex Community College, Practical Nurse Program C. 244 CMR 6.06 (1) Site Survey 1. American International College, Baccalaureate Degree Program D. 244 CMR 6.06 (2) Waiver of Site Survey 1. Holyoke Community College, Associate Degree Program E. 244 CMR 6.07 (2) Program Change 1. Bristol Community College, Associate Degree Program 2. Merrimack College, Baccalaureate Degree Program 3. MCPHS University Boston Baccalaureate Degree Program 4. MCPHS University Worcester Baccalaureate Degree Program 5. MCPHS University Worcester Baccalaureate Degree Program F. 244 CMR 6.08 Noncompliance with standards 1. Greater Lowell Technical, Practical Nurse Program 2. Worcester State University, Baccalaureate Degree Program	Report Compliance Report Compliance Report Compliance Report Memo Memo Memo Memo Memo Compliance Report Compliance Report	CW HCR CW CW CW HCR HCR HCR HCR CW CW
	<b>IX. REQUESTS FOR LICENSE REINSTATEMENT – None</b>		
	<b>X. STRATEGIC DEVELOPMENT, PLANNING AND EVALUATION</b> A. Affirmation of the revisions to URAMP Operational Policy, 24-08 B. Legislative Update C. Compliance with Out-of-State Alternative to Discipline Programs D. AR place holder E. Topics for Next Agenda	Memo Memo/Report Memo Memo	MW LH EY PM

		<b>LUNCH BREAK</b>	
	<b>XI.</b>	<b>EXECUTIVE SESSION</b> The Board will meet in Executive Session as authorized pursuant to M.G.L. c.30A, § 21(a)(1) for the purpose of discussing the reputation, character, physical condition or mental health, rather than professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual. <ol style="list-style-type: none"> <li>Specifically, the Board will discuss and evaluate the Good Moral Character and Massachusetts Department of Children and Families Cases as required for registration for pending applicants.</li> <li>Specifically, the Board will discuss and evaluate the reputation, character, physical condition or mental health, rather than professional competence, of licensees relevant to their petitions for license status change.</li> <li>Specifically, the Board will discuss and evaluate the reputation, character, physical condition or mental health, rather than professional competence, of licensees relevant to their compliance with the term of monitored licensed practice or participation in the Board's Substance Addiction Recovery Program.</li> <li>Approval of prior executive session minutes in accordance with M.G.L. c. 30A, § 22(f) for sessions held during the October 8, 2025 meeting.</li> </ol>	CLOSED SESSION
	<b>XII.</b>	<b>M.G.L. c. 112, § 65C SESSION</b>	CLOSED SESSION
	<b>XIII.</b>	<b>M.G.L. c. 30A, § 18 ADJUDICATORY SESSION</b>	CLOSED SESSION
5:00 p.m.	<b>XIV.</b>	<b>ADJOURNMENT</b>	

***If you need reasonable accommodations in order to participate in the meeting, contact the DPH ADA Coordinator Stacy Hart at Stacy.Hart@mass.gov in advance of the meeting. While the Board will do its best to accommodate you, certain accommodations may require distinctive requests or the hiring of outside contractors and may not be available if requested immediately before the meeting.***