

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

250 Washington Street, Room 3C
Boston, MA 02108

And Via Zoom Webinar

Wednesday, February 12, 2025 9:00 am | 1 Hour 45 Minutes | (GMT-04:00) Eastern Time (US & Canada)

Event address for attendees:

<https://zoom.us/j/98036757434>

Webinar ID: 980 3675 7434

Join by Phone:

+1-929-436-2866 US (New York)

Webinar ID: 980 3675 7434

Minutes of the Regularly Scheduled Board Meeting

Wednesday, February 12, 2025

Board Members Present In Room 3C

None

Board Members Not Present

K. Crowley, DNP, RN

Board Members Present Via Audio Or Video

A. Alley, MSN, RN, Chairperson

L. Kelly, DNP, RN, CNP, Vice Chairperson

K.A. Barnes, JD, RPh

A. Joseph, MD

L. Keough, PhD, RN, CNP

J. Monagle, PhD, RN

D. Nikitas, BSN, RN

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

E. Conlon, SARP Monitoring Coordinator

K. Jones, Probation Compliance Officer

Staff Present Via Audio Or Video

H. Cambra, JD, BSN, RN, Executive Director

L. Hillson, PhD, MSN, RN, Assistant Director for
Policy and Research

H. Engman, JD, Chief Board Counsel

R. Barros, JD, Board Counsel

M. Bresnahan, JD, Board Counsel

C. Walsh, MSN, RN, Nursing Education Coordinator

H. Caines Robson, 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
L. Almeida, RN, Nursing Investigations Supervisor
M. Waksmonski, MSN, RN, SARP Coordinator
G. Luke, MBA, SARP Monitoring Coordinator

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 February 12, 2025 Regularly Scheduled Board Meeting to order.

TOPIC:

Approval of Agenda

DISCUSSION:

None.

ACTION:

Motion by A. Alley, seconded by L. Kelly, and voted by roll call with A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, D. Nikitas, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to approve the Agenda as presented.
Motion carries.

TOPIC:

Approval of Board Minutes for the January 8, 2025 Meeting of the Regularly Scheduled Board Meeting

DISCUSSION:

None.

ACTION:

Motion by A. Alley, seconded by L. Kelly, and voted by roll call with A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, D. Nikitas, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to accept the Minutes of the January 8, 2025 Regularly Scheduled Board Meeting as presented.
Motion carries.

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 announced a new website has launched with a Bureau-wide initiative for vacant Board seats, and Licensees interested in applying to become a Board Member can electronically apply for vacant seats. H. Cambra stated that there is a Notice and Alerts box on the Board of Registration in Nursing's website that interested applicants can navigate to. H. Cambra added that this initiative is still very new, and Board Staff are working diligently to organize and create processes to communicate with individuals regarding inquiries.

H. Cambra announced that the May Board Meeting falls during Nurse's Week, and after several requests to reschedule the May meeting, Board Staff will be sending out a survey to gauge availability for May. H. Cambra added that there is a possibility to build this switch into the following years' calendars.

ACTION:

So noted.

TOPIC: URAMP

Activity Report

DISCUSSION:

M. Waksmonski was available for questions.

ACTION:

So noted.

TOPIC: Probation

Staff Action Report – None

DISCUSSION:

None.

ACTION:

None.

TOPIC: Probation

Request for Termination of Probation/Stayed Probation – None

DISCUSSION:

None.

ACTION:

None.

TOPIC: Probation

Request for Notice of Violation and Further Discipline – None

DISCUSSION:

None.

ACTION:

None.

TOPIC: Practice Coordinator Staff Report

DISCUSSION:

P. McNamee was available for questions.

ACTION:

So noted.

TOPIC: Education

Nursing Education Staff Report

Staff Action Report

Site Survey Report

Nursing Education Annual Report

Admissions, Enrollments, Graduation Numbers 2024

DISCUSSION:

C. Walsh was available for questions.

ACTION:

So noted.

TOPIC: Education

244 CMR 6.05 (3) Annual Reports

University of Massachusetts Amherst BSN Program – Represented by Dean of School of Nursing A.

Vorderstrasse, with Associate Dean of Academic Affairs M.E. Burke, present via Zoom Audio and Video

DISCUSSION:

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

R. Reynolds asked when the last site survey was completed, and C. Walsh stated 2018.

J. Monagle asked about the SEP data, and A. Vorderstrasse stated that data can be added. J. Monagle asked when the last accreditation was, and A. Vorderstrasse stated the program is due for re-accreditation in 2030.

A. Vorderstrasse and M.E. Burke stated that the mid-cycle QI report will be submitted to CCNE this December.

ACTION:

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

1. Accept the Program's submission of a comprehensive plan, clock to credit hour table and systematic evaluation plan.
2. Accept the Board staff compliance memo.
3. Find the Program noncompliant with 244 CMR 6.04 (1)(h).
4. Continue full approval status at this time.
5. Determine if the Program does not warrant a 6.08 site survey.
6. Direct the Program to provide to the Board the following in order to demonstrate correction of the regulatory deficiencies:
 - a. Due by May 9, 2025:
 - i. 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.[ref: 244 CMR 6.04 (1)(h)].
7. 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.

TOPIC: Education

244 CMR 6.05 (3) Annual Reports

University of Massachusetts Boston BSN Program – Represented by Professor and Interim Chair L. Hayman, with Assistant Chair of Nursing C. Salvucci, and Director of the Traditional Option J. Mazzawi, present via Zoom Audio and Video

DISCUSSION:

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

ACTION:

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

1. Accept the Program's submission of a comprehensive plan and systematic evaluation plan.
2. Find the Program non-compliant with 244 CMR 6.04 (1)(h).
3. Direct the Program to submit the following evidence of correction:
 - a. Submit by May 9, 2025:
 - i. 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.[ref: 244 CMR 6.04 (1)(h)].
 - ii. An audit of all faculty and preceptor educational and experiential qualifications and comprehensive plan of correction [244 CMR 6.04 (2) (b)(3)(4)].
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.

TOPIC: Education

February 12, 2025 Regular Session Board Meeting Minutes
(to be Approved 03/12/2025)

244 CMR 6.06 (2) Site Survey Waiver Requests

Berkshire Community College Associate Degree Program – Director of Nursing M.R. Williams, present via Zoom Audio and Video

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board.

R. Reynolds asked when the last site survey was completed, and H. Caines Robson stated 2019.

ACTION:

Motion by J. Monagle, seconded by R. Reynolds, and voted by roll call with A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, D. Nikitas, 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 and recommendations 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)(h), (1) (i) , (1) (j), (1) (k) (1) (l), (1) (m), (2)(a), (2)(b), (3)(a)1, (3)(a), (3)(c), (3) (d)y, (4)a, (4)b (1) (4) (b) (2), (4) (b) (3), (4)(b(4), (5)(a), (5)(b),(5)(c) (5)(d), (5)(e), (5) (f) and noncompliance with 244 CMR 6.04(3) (b) and (5)(b)(1).
2. Continue Full Approval status at this time.
3. Determine the Program qualifies for a Waiver of 244 CMR 6.06(2)(a) Site Survey of Nursing Education Programs.
4. Direct the Program to provide to the Board the following to demonstrate correction of the regulatory deficiencies:
 - a. Due May 12, 2025:
 - i. Revised 14 Board policies which include specific nondiscriminatory, non-arbitrary criteria. [ref 244 CMR (3) (b)].
 - ii. Revised clinical agreements to include a provision for an annual review of the agreement.
5. For the effectiveness of the nursing education program submit:
 - a. SEP Calendar
 - b. SEP to Include operational definitions; and
 - c. Update on the patient institutions Heighten Cash Management Status.
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.

TOPIC: Education

244 CMR 6.06 (2) Site Survey Waiver Requests

University of Massachusetts Chan Medical School Tan Chingfen Graduate School of Nursing – Represented by Dean J. Vitello, with Associate Dean for Academic Affairs P. Gazarian and Director of GEP Program A. Duah, present via Zoom Audio and Video

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board.

ACTION:

Motion by R. Reynolds, seconded by J. Monagle, and voted by roll call with A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, D. Nikitas, 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)(1), (2)(b), and 5(b) and noncompliance with 244 CMR 6.04 (1)(h).
2. Continue Full Approval at this time.
3. Direct the Program to provide to the Board the following in order to demonstrate correction of the regulatory deficiencies:
 - a. Due by May 12, 2025:
 - i. a fully implemented, data-driven, faculty-operated systematic evaluation plan with evidence that trended and aggregate outcomes were used to develop, maintain and revise the program, including, but not limited to, clearly stated evaluation criteria, operational definitions, expected levels of achievement specificity (achievable and measurable) across all criterion; a calendar outlining the evaluation schedule; and review of all Board required outcomes and 14 Board required policies. [ref 244 CMR 6.04 (1)(h)].
 - ii. faculty meeting minutes demonstrating the use of data by faculty to develop, implement, and evaluate the 14 required policies and that results of the systematic evaluation of Program components are used for Program development, maintenance and revision [ref 244 CMR 6.04 (1)(h)].
4. Failure to provide evidence to the Board 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.

TOPIC: Education

244 CMR 6.07 Notification of Program Change

Cape Cod Community College Associate Degree Program – Represented by Director of Nursing Education A. Kilcoyne, present via Zoom Audio and Video

DISCUSSION:

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

ACTION:

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

1. Accept the Program's 244 CMR 6.07 (1)(d) and (1)(e) Change report: Change in Program mission, philosophy, goals, and/or outcomes.
2. Determine Compliance with 244 CMR 6.07(1)(d) and (1)(e).
3. Continue Full Approval Status at this time.

Motion carries.

TOPIC: Education

244 CMR 6.07 Notification of Program Change

February 12, 2025 Regular Session Board Meeting Minutes
(to be Approved 03/12/2025)

DISCUSSION:

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

R. Reynolds asked if there was any prior communication that the increase was going to happen or is the notification coming after the increase happened, and C. Walsh confirmed. R. Reynolds noted that the program deviated from the standard process, and asked A. Corrado how the Program was doing with hiring new faculty. A. Corrado states that the Program has strong part-time faculty and recently reposted the job openings due to a previously failed search and has high hopes that a full-time faculty member will start soon. A. Alley asked if there were current candidates, and A. Corrado confirmed they are interviewing.

J. Monagle asked if faculty went down by one (1) faculty member while student admissions increased by 37%, and A. Corrado stated that when students were admitted, there were three (3) faculty in place, and neglected to consider the admissions year during the COVID-19 pandemic and was excited to grow the program as the Program's new Administrator. A. Corrado reiterated that she believes that the position will be filled shortly. R. Reynolds asked if the three (3) year mean affected overall numbers and asked for the differences between 2023 and 2024. A. Corrado states that 40 students were admitted in 2023, and 24 students were admitted in 2022, and admissions numbers were typically around 40.

ACTION:

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

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. Continue Full Approval Status at this time.

Motion carries.

TOPIC: Education

244 CMR 6.08 Non-Compliance with Standards

Diman Regional Vocational Technical School Practical Nursing Program – Represented by Superintendent Director B. Bentley, with Interim Director of Nursing B. Pitera, present via Zoom Audio and Video

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board.

B. Pitera stated that she is working full time at the Program, and the Program consists of 15 students who are in the building only four (4) hours per week and still maintains a flexible schedule to meet student and program needs. B. Bentley states that the Program is still searching for a full-time Director and will be interviewing by the end of this month. R. Reynolds asked if the full-time position is the conventional 40-hour per week position, and B. Bentley confirmed. R. Reynolds stated that the Program is non-compliant

with the regulations for a full-time Director, and J. Monagle asked for clarification regarding the Program structure and the fact that it is part-time. R. Reynolds stated that the Board cannot assume that nothing will happen on the days that B. Pitera is not on-call and emphasized access for the students five (5) days a week. B. Pitera stated that the Administrator has B. Pitera's phone number, and she lives nearby in the event that there is a situation that requires her attention.

J. Monagle asked H. Caines Robson if there were any student complaints regarding the Administrator's availability or lack thereof, and H. Caines Robson stated there were no complaint on record. H. Caines Robson added that the regulations require that the Program Administrator be full-time, and there is a policy that requires the Program Administrator to be full-time, but they do not have to physically be at the location for those hours. H. Caines Robson stated that the Program Administrator needs to be appointed full-time, and the Program's submitted documentation was unclear if the role was appointed as full-time as the role is only 20 hours, which is not technically full-time hours.

D. Nikitas agreed with R. Reynolds that the Program is non-compliant as the position is not full-time, even though B. Pitera is available as needed. R. Reynolds added that conventional full-time positions are 40 hours per week, and this role is not 40 hours per week. R. Reynolds noted that the person who will be offered the Program Administrator position will be offered full-time at 40 hours per week. A. Joseph asked H. Caines Robson if the Board requires contracted full-time, and H. Caines Robson confirmed. J. Monagle asked B. Bentley if B. Pitera is contracted full-time, and B. Bentley confirmed, and is being compensated for 20 hours due to B. Pitera's retirement. J. Monagle asked H. Caines Robson to repeat the language regarding the full-time requirement. J. Monagle stated that B. Pitera is appointed as full-time and there are only 15 students in the program currently, but the Program intends to expand the Program to 36 students and hire a full-time Program Administrator at 40 hours per week. J. Monagle stated that she does not find the program in non-compliance because B. Pitera was appointed full-time. K.A. Barnes and L. Kelly agreed with J. Monagle.

ACTION:

Motion by J. Monagle, seconded by K.A. Barnes, and voted by roll call with A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, and R. Sesay in favor to:

1. Accept the Program's submitted evidence.
2. Determine the evidence is sufficient to demonstrate compliance with 244 CMR 6.04 (1)(e) and (2)(a).
3. Direct the program to submit an ongoing plan to recruit a permanent program administrator.

D. Nikitas, R. Reynolds, and H. Underwood voted in opposition.

Motion carries.

TOPIC: Education

244 CMR 6.08 Non-Compliance with Standards

Laboure College Associate Degree Nursing Program – Represented by Dean of Nursing E. Costello, President L. Hsu, and Associate of Chair of Nursing A. Sinewick, present via Zoom Audio and Video

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board.

J. Monagle asked E. Costello to elaborate on the policies and procedures issue regarding discriminatory language and why it hasn't been fixed yet. E. Costello stated that H. Caines Robson provided feedback on four (4) of the 14 policies that needed revision, and the Program is working on them, but two (2) of the

policies are College policies, and the revision and approval process takes longer than the Nursing specific policies. E. Costello stated that three (3) are just about ready to resubmit to H. Caines Robson, and the last one is still in the approval process at the College. E. Costello stated that, hopefully, within a month to six (6) weeks, all of the revisions will be approved, and they can all be resubmitted to the Nursing Education Coordinators for review.

ACTION:

Motion by R. Reynolds, seconded by J. Monagle, and voted by roll call with A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, D. Nikitas, 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)(h) and noncompliance with (3)(b).
2. Continue Full Approval status at this time.
3. Directed the Program to submit the follow directives, Due May 12, 2025:
 - a. Revised published policies for the 14 Board required policies with specific non-discriminatory criteria and faculty meeting minutes demonstrating the use of data by faculty to develop, implement, and evaluate those policies [ref 244 CMR 6.04 (1)(g) & (3)(b)]
 - b. Continue quarterly reports to include:
 - i. Update on full-time faculty recruitment
 - ii. Number of students enrolled in general education and each professional course
 - iii. Program completion rates for AY 22/23 and 23/24
 - iv. Evaluation of students admitted under the revised admission criteria including but not limited to progression.
4. For the effectiveness of the nursing education program continue to refine the evaluation of the Board required policies.
5. Failure to provide evidence to the Board 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.

TOPIC: Education

244 CMR 6.11 Discontinuance of an Approved Nursing Education Program

Mildred Elley Practical Nursing Program – Represented by Program Administrator P. Newman, Chief Executive Officer and President J. McGrath, and Chief Academic Officer K. Clough, present via Zoom Audio and Video

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board.

A. Alley asked H. Caines Robson for clarification on the timeline of events, and how many students were accepted after the approved end date, and H. Caines Robson stated that that Program re-admitted nine (9) students to the program after the approved end date of January 19, 2025. A. Alley asked P. Newman if the Program is closed at this time, and P. Newman confirmed. A. Alley asked what happened to those nine (9) students, and K. Clough stated that those nine (9) students are waiting on the Board's decision to determine if they can continue the program. K. Clough stated that the Accrediting Agency approved an extension for a teach-out and would like to offer the students an opportunity to finish the program. J. McGrath added that the program stopped teaching on January 19th in accordance with the directives, and the students are aware of the current status of the program. J. McGrath stated that there were some last-

minute staffing issues and the oversight of the submission of the quarterly report was unintentional. J. McGrath stated that there are 12 students left in the program, with three (3) appealing grades, but when the teach-out started there were 30 students. J. McGrath stated that the Program is requesting an extension until July to fulfill their obligations to the students and reiterated that the Accrediting Agency approved the extension.

A. Alley asked if students and faculty were informed that the Program was going to be closed before coming before the Board in May 2024, and J. McGrath confirmed that students and faculty were informed of the closure and the closure date. J. Monagle asked what the three (3) students were appealing, and voiced concerns about the quality of teaching now and the students' ability to pass the NCLEX. K. Clough stated that the three (3) students did not receive a passing grade in one of their nursing courses, and the students are permitted to appeal a grade, and continue to monitor student progress and provide them with support through the end of the program. R. Reynolds stated that the Program was given eight (8) months to relocate students that were needing to complete the program, re-admitted nine (9) students after the closure date, there is no full-time faculty or Program Administrator, and the Program is requesting that the Board accept the request to extend the closed. Board Members voiced concerns that students have been out of school for a few weeks, and that there is no infrastructure to support the students at this time.

ACTION:

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

1. Find the Program in non-compliance and determine the Program does not warrant approval for an extension of operations to July 13, 2025.
2. Uphold the previous Board decision that the Program has closed and will officially close as of January 19, 2025, and no re-admitting of students or continuance in the Program.

Motion carries.

TOPIC: Requests for License Reinstatement – None

DISCUSSION:

None.

ACTION:

None.

TOPIC: Strategic Development, Planning and Evaluation

Proposed Advisory Ruling 25-01 Registered Nurse and Licensed Practical Nurse Scope of Practice

DISCUSSION:

P. McNamee summarized her previously distributed memorandum and attached exhibits to the Board.

ACTION:

Motion by A. Alley, seconded by L. Kelly, and voted by roll call with A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, D. Nikitas, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to approve the Advisory Ruling.

Motion carries.

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

DISCUSSION:

None.

ACTION:

So noted.

TOPIC:

Adjournment of Regular Session

DISCUSSION:

None.

ACTION:

Motion by A. Alley, seconded by L. Kelly, and voted by roll call with A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, D. Nikitas, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to adjourn Regular Session at 10:32 a.m.

Motion carries.

TOPIC:

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

DISCUSSION:

None.

ACTION:

Motion by A. Alley, seconded by K.A. Barnes, and voted by roll call with A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, D. Nikitas, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to convene the G.L. c. 112, s. 65C Session at 10:49 a.m.

Motion carries.

G.L. c. 112, s. 65C Session 10:49 a.m. to 12:54 p.m.

TOPIC:

Adjudicatory Session

DISCUSSION:

None.

ACTION:

Motion by A. Alley, seconded by L. Kelly, and voted by roll call with A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, D. Nikitas, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to convene the Adjudicatory Session at 12:54 p.m. to deliberate on proposed final decisions and orders, and rulings on pending adjudicatory matters.

Motion carries.

Adjudicatory Session 12:54 p.m. to 1:03 p.m.

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 A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, D. Nikitas, 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.

G.L. c. 30A, § 21 Executive Session 1:24 p.m. to 4:05 p.m.

TOPIC:

Adjournment

DISCUSSION:

None.

ACTION:

Motion by A. Alley, seconded by K.A. Barnes, and voted by roll call with A. Alley, K.A. Barnes, A. Joseph, L. Kelly, L. Keough, J. Monagle, D. Nikitas, R. Reynolds, R. Sesay, and H. Underwood unanimously in favor to adjourn the meeting at 4:05 p.m.
Motion carries.

Minutes of the Board's February 12, 2025, Regularly Scheduled Meeting were approved by the Board on March 12, 2025.



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 Webinar

Wednesday, February 12, 2025 9:00 am | 1 Hour 45 Minutes | (GMT-04:00) Eastern Time (US & Canada)

Event address for attendees:
<https://zoom.us/j/98036757434>
Webinar ID: 980 3675 7434

Join by Phone:
+1-929-436-2866 US (New York)
Webinar ID: 980 3675 7434

Wednesday, February 12, 2025

PRELIMINARY AGENDA AS OF 2/3/25 4:30pm

Estimated Time	Item #	Item	Exhibit	Presented by
9:00 a.m.	I.	CALL TO ORDER & DETERMINATION OF QUORUM	None	
	II.	APPROVAL OF AGENDA	Agenda	
	III.	APPROVAL OF MINUTES A. Draft Minutes for the January 8, 2025 Meeting of the Board of Registration in Nursing, Regular Session Via Zoom	Minutes	
	IV.	REPORTS, ANNOUNCEMENTS AND ADMINISTRATIVE MATTERS A. Announcements	Oral / Memo	HC
	V.	URAMP A. Activity Report	Report	MW
	VI.	PROBATION A. Probation Staff Action Report – None B. Termination of Probation / Stayed Probation – None C. Request for Notice of Violation and Further Discipline – None		

	VII. PRACTICE A. Practice Coordinator Staff Report	Report	PM
	VIII. EDUCATION A. Nursing Education Staff Report 1. Staff Action Report 2. Site Survey Report 3. Nursing Education Annual Report 4. Admissions, Enrollments, Graduation Numbers 2023 B. 244 CMR 6.05 (3) Annual Reports 1. University of Massachusetts Amherst BSN Program 2. University of Massachusetts Boston BSN Program C. 244 CMR 6.06 (2) Site Survey Waiver Requests 1. Berkshire Community College Associate Degree Program 2. University of Massachusetts Chan Medical School Tan Chingfen Graduate School of Nursing D. 244 CMR 6.07 Notification of Program Change 1. Cape Cod Community College Associate Degree Program 2. Montachusett Technical Regional Practical Nursing Program E. 244 CMR 6.08 Non-Compliance with Standards 1. Diman Regional Vocational Technical School Practical Nursing Program 2. Laboure College Associate Degree Nursing Program F. 244 CMR 6.11 Discontinuance of an Approved Nursing Education Program 1. Mildred Elley Practical Nursing Program	Report Report Report Report Memo Memo Report Report Memo Memo Memo Report Memo	CW CW CW CW CW CW HCR HCR CW CW HCR HCR HCR
	IX. REQUESTS FOR LICENSE REINSTATEMENT – None		
	X. STRATEGIC DEVELOPMENT, PLANNING AND EVALUATION A. Proposed Advisory Ruling 25-01 Registered Nurse and Licensed Practical Nurse Scope of Practice B. Topics For Next Agenda	Proposed Advisory Ruling and Memo	PM

		LUNCH BREAK	
	XI.	M.G.L. c. 112, § 65C SESSION	CLOSED SESSION
	XII.	M.G.L. c. 30A, § 18 ADJUDICATORY SESSION	CLOSED SESSION
	XIII.	EXECUTIVE SESSION The Board will meet in Executive Session as authorized pursuant to M.G.L. c.30A, § 21(a)(1) for the purpose of discussing the reputation, character, physical condition or mental health, rather than professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual. <ol style="list-style-type: none"> 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. 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. 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. Approval of prior executive session minutes in accordance with M.G.L. c. 30A, § 22(f) for sessions held during the January 8, 2025 meeting. 	CLOSED SESSION
5:00 p.m.	XIV.	ADJOURNMENT	

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.