# COMMONWEALTH OF MASSACHUSETTS BOARD OF REGISTRATION IN NURSING

250 Washington Street, Room 3C Boston, MA 02108

And Via Zoom

Wednesday, October 8, 2025 9:00 am | 1 Hour 30 Minutes | (GMT-04:00) Eastern Time (US & Canada)

Event Address for Attendees:

https://zoom.us/j/96295730294

Webinar ID: 962 9573 0294

Join by Phone:

+1 929 436 2866 US (New York)

Webinar ID: 962 9573 0294

# Minutes of the Regularly Scheduled Board Meeting

Wednesday, October 8, 2025

#### **Board Members Present In Room 3C**

None

# **Board Members Not Present**

R. Reynolds, PhD, MSN, 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 9:07am)
- K. Sanclemente, BSN, RN
- R. Sesay, ASN, RN
- H. Underwood, LPN (Joined at 9:08am)

#### Staff Present In Room 3C

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

### 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
- H. Engman, JD, Chief Board Counsel
- R. Barros, JD, Board Counsel

# Staff Not Present

L. Almeida, RN, Nursing Investigations Supervisor

October 8, 2025 Regular Session Board Meeting Minutes (to be Approved 11/26/2025)

- 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

- M. Waksmonski, MSN, RN, SARP Coordinator
- G. Luke, MBA, SARP Monitoring Coordinator
- E. Conlon, SARP Monitoring Coordinator
- K. Jones, Probation Compliance Officer

### 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 9:03 a.m., A. Alley, MSN, RN, Chairperson, called the October 8, 2025 Regularly Scheduled Board Meeting to order.

### **TOPIC:**

Regularly Scheduled Board Meeting

#### **DISCUSSION:**

None.

#### **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. Sanclemente, and R. Sesay unanimously in favor to convene the Regularly Scheduled Board Meeting at 9:06 a.m. Motion carries.

#### **TOPIC:**

Approval of Agenda

### **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. Sanclemente, and R. Sesay unanimously in favor to approve the Agenda as presented.

Motion carries.

#### **TOPIC:**

Approval of Board Minutes for the September 10, 2025 Meeting of the Regularly Scheduled Board Meeting

### **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. Keough, D. Nikitas, K. Sanclemente, and R. Sesay unanimously in favor to accept the Minutes of the September 10, 2025 Regularly Scheduled Board Meeting as presented. L. Kelly abstained.

TOPIC: Reports, Announcements and Administrative Matters

Announcements

Motion carries.

# **DISCUSSION:**

- H. Cambra reminded Board Members to change their Outlook passwords to avoid being locked out of their accounts.
- H. Cambra urged Board Members to review emails from C. DeSpirito for Complaint Committee members and sign up where they are able.
- H. Cambra reminded the Board and the public that there are several vacant Board seats, and interested individuals can apply online via portal that can be found within the Board's website.

#### **ACTION:**

So noted.

**TOPIC:** URAMP – None

#### **DISCUSSION**:

None.

### **ACTION:**

None.

**TOPIC:** Probation – 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

#### **DISCUSSION:**

C. Walsh was available for questions.

# **ACTION**:

So noted.

#### **TOPIC:** Education

244 CMR 6.03 (2) Out of State Education Programs

Keene State University, Baccalaureate Degree – Represented by S. Breidt, present via Zoom Audio and Video

### **DISCUSSION:**

- C. Walsh summarized her previously distributed memorandum and attached exhibits to the Board.
- S. Breidt stated that administrative help was hired and noted that many students are from Massachusetts and are interested in returning to Massachusetts to practice.

# **ACTION:**

Motion by K. Crowley, 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, K. Sanclemente, R. Sesay, and H. Underwood unanimously in favor to:

- 1. Accept the Program's comprehensive plan of correction; and
- 2. Find the program compliant with 244 CMR 6.03 (2).

Motion carries.

#### **TOPIC:** Education

244 CMR 6.05 (2) Initial Approval Status

Roxbury Community College, Associate Degree – Represented by Program Administrator G. Cater, present via Zoom Audio and Video

#### **DISCUSSION:**

- H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board.
- K. Crowley asked if the delay was due to onboarding of faculty, and G. Cater stated it was due to onboarding administrative staff to help with the workload. G. Cater stated that she has been handling administrative duties. K. Crowley asked if the staff member is nursing administrative staff or support administrative staff, and G. Cater stated that it is a nursing administrative staff, the Associate Dean of

Nursing. K. Crowley voiced concerns regarding the increase in enrollment and decrease in pass rates, and asked G. Cater what the Program has identified as the challenges resulting in a decrease in pass rates and what plans have been put in place to mitigate that. G. Cater stated that there is a weekly faculty meeting and have been working to increase simulations and change the simulations that students receive so that there's more focus on their role in patient care. G. Cater added that she has been working on increasing clinical sites and switching sites, so students are getting a more well-rounded experience. G. Cater stated the didactic portion is okay, and test scores have remained okay as well. K. Crowley recommended assessing the root cause of the pass rates and reviewing benchmarks to be able to identify at risk students and provide support. K. Crowley recommended granting the extension and asked Board Members if they wanted to have the Program submit a plan on how they will be assessing the pass rates. Board Members agreed. L. Keough voiced concerns about the didactic portion, given the pass rates. G. Cater added that the Program has a rigorous ATI partnership and faculty may not have been using it as well as they should have until second semester of last year.

#### **ACTION**:

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

- 1. Accept the Board staff memo;
- 2. Determine the program warrants approval for an extension of the 244 CMR 6.05(3)(a) application for Full Approval Status.
- 3. Direct the Program to submit a plan of how they are being proactive related to current pass rates, using the benchmark metrics used in the Program ATI course scores, and policies related to that, for faculty to ensure that there's a follow-through.
- L. Keough abstained.
- R. Sesay recused.

Motion carries.

### **TOPIC:** Education

244 CMR 6.06 (2) Site Survey Waiver Requests

Berkshire Community College, Associate Degree – Represented by Program Administrator M.R. Williams, present via Zoom Audio and Video

#### **DISCUSSION:**

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

# **ACTION:**

Motion by K. Crowley, 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, K. Sanclemente,

- R. Sesay, and H. Underwood unanimously in favor to:
  - 1. Accept the staff compliance report finding:
    - a. the Program has provided satisfactory evidence of compliance with the regulations at 244 CMR 6.04, (1)(h), (3)(b) and (5)(b)(1)
  - 2. Continue Full Approval status at this time.

Motion carries.

#### **TOPIC:** Education

Emmanuel College, Baccalaureate Degree – Represented by Program Administrator and Chair of BSN Program, C. Femia, present via Zoom Audio and Video

#### **DISCUSSION**:

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

### **ACTION**:

Motion by K. Crowley, 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, K. Sanclemente,

- R. Sesay, and H. Underwood unanimously in favor to:
  - 1. Accept the Program's submission in response to the Board directive of June 11, 2025.
  - 2. Accept the Board staff memo; and
- 3. Find that the submitted evidence demonstrate compliance with 244 CMR 6.07 (1)(e). Motion carries.

### **TOPIC:** Education

244 CMR 6.08 Noncompliance with standards

Greenfield Community College, Associate Degree – Represented by Dean of Nursing M. Ames Zamojski, with President M. Schutt, AD Program Coordinator L. Bell, present via Zoom Audio and Video

#### **DISCUSSION:**

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

M. Ames Zamojski commended the Program staff for working tirelessly to improve the program and student success. M. Ames Zamojski requested the Board reinstate Full Approval Status while the Program addresses the rest of the Board's directives. M. Ames Zamojski noted that in accordance with the January 2025 directives, the Program submitted all the policies for review to Board staff in April, but received no feedback from April to October. M. Ames Zamojski stated that due to not receiving feedback, the Program went ahead and implemented the revised policies as they were submitted. M. Ames Zamojski stated that if the Program was made aware of the non-prescriptive requests before the start of the semester, the Program would have worked to clarify the policy considerations. M. Ames Zamojski referenced the Program's academic dishonesty policy that was brought up as having language ambiguity when referencing the student code of conduct and noted that it was specifically stated as having language that indicated that it can be used in a discriminatory manner. M. Ames Zamojski stated that the student code of conduct applies to all 15 community colleges in the state and has been in place since February 2020 and has not been cited as an issue with any of the other community colleges over the past five (5) years. M. Ames Zamojski stated the code of conduct was drafted consistent with state and federal law in order to ensure that all students have a learning and clinical environment free from discrimination. M. Ames Zamojski stated that the regulations do not require that there be an additional site visit to obtain full approval status and specifically cites 244 CMR 6.08(2). M. Ames Zamojski reiterated that since the regulations do not require a site visit, the Program respectfully requests that the Program be returned to full approval status.

K. Crowley asked for clarification on the date of the next report to be due, and H. Caines Robson confirmed it would be January 8, 2026. K. Crowley asked when the last site survey was, and H. Caines Robson stated it was in 2024 and noted that the Board has traditionally requested a site survey when a Program's approval status is changed to verify the information the Program has provided. A. Alley asked

if the verification survey would be after the January 2026 submission and H. Caines Robson confirmed that it would be a focused site survey to verify compliance. L. Keough asked when the last accreditation visit was, and K. Crowley stated it is ACN, and the last visit was in 2023, and they granted full approval with several areas needing attention in curriculum.

A. Alley asked for clarification regarding the policies submitted in April that were not reviewed until October. H. Caines Robson stated that the Program submitted the policies requesting feedback and set an agreed upon date of October 1st, and met with the Program on that date to provide the information. A. Alley asked if the Program was aware of not implementing the policies until the Board reviewed them with the Program on October 1st. H. Caines Robson stated the Program did not share that they were implementing the policies before Board staff had an opportunity to review those policies. A. Alley asked if the Program was aware that they should not have implemented the policies until they were reviewed with Board staff on the agreed upon date of October 1st. H. Caines Robson stated that she is unsure if the Program was aware they shouldn't implement, but they were aware they had no feedback on the policies and chose to move forward and implement the policies without the feedback. K. Crowley asked if both parties agreed upon the date of October 1st and if there was communication between April and October from the Board to the Program. H. Caines Robson stated that there was communication regarding other items and issues, and when the final request came, Board staff scheduled a meeting for October 1st. L. Kelly noted that, based on the Program's statement today, they understand, or appear to understand, the Board regulations, but supporting those understandings in documents is needed. M. Ames Zamojski stated that when they received the initial report following the January 2025 Board meeting, it indicated that the policies were to be reviewed by Board staff and that they were to be distributed prior to the end of the semester. M. Ames Zamojski stated that they asked for feedback prior to the start of the spring semester and did not receive feedback before the end of the semester. M. Ames Zamojski stated that feedback was requested several times, and nothing was indicated that there were any concerns regarding the updated policies at those times. M. Ames Zamojski stated the Program went ahead and implemented because they were told by Board staff verbally that if the Program did not receive any information, they would be good to go. M. Ames Zamojski added that the policies were implemented for the fall semester, but according to the directives, there was indication that those policies should have been implemented sooner, and most of them were. H. Caines Robson stated that at no point in time did Board staff ever tell the Program that if they did not hear back that it would be okay to move forward with any plans. H. Caines Robson stated that that is typically not the process and has had multiple conversations with the Program, including in January, June, July, and August, but there were specific meetings in October regarding the Program's submission. H. Caines Robson stated that the Board can order a site survey at its discretion, and although it may not be outlined as a requirement, the Board members can dictate that a site survey is necessary for whatever purpose the Board determines. H. Caines Robson stated that nursing education programs can have different policies than their parent institution, and Board staff asks for a table where the Programs provide rationales for the differences in policy. K. Crowley stated that the 14 policies were part of the initial issue and recommended discussing the Board's recommendations. K. Crowley stated that the Program was initially cited with 11 or 12 noncompliant areas, and have worked to be compliant with everything except partial compliance with 6.04(1)(h) and noncompliance with 6.04(3)(b), with also the 14 policies that need to be verified and updated.

K. Crowley asked Board Members their opinions on reinstating full approval status and getting a site visit after January's submission to verify. A. Alley asked for clarification regarding the verification survey and H. Cambra asked for clarification if the quarterly reports would still be required. K. Crowley confirmed that the verification survey and quarterly reports are recommended because of the number of issues. K. Crowley added that it doesn't seem necessary to keep the Program on warning status with only a few non-compliant areas remaining. A. Alley agreed as long as the quarterly reports continue, and the verification

site survey is completed. H. Caines Robson added that the information was submitted by the Program but not yet verified.

# **ACTION**:

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

- 1. Accept the staff compliance report;
- 2. Find that the Program Compliant with 244 CMR 6.04 (1)(f), (1)(g), (1)(l), (3)(d), (4)(b)(2), (4)(b)(3), (4)(b)(4), (5)(b)(1), and (5)(d); partially compliant with 244 CMR 6.04 (1)(h) and noncompliance with 244 CMR 6.04 (3)(b);
- 3. Grant Full Approval Status at this time;
- 4. Continue cadence of quarterly reports;
- 5. Direct the Program to provide to the Board the following in order to address the regulatory deficiencies:
  - a. Due by January 8, 2026:
    - i. 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 [ref: 244 CMR 6.04 (1)(h)];
    - ii. Evidence demonstrating the effectiveness of the 14 Board required policies ref: 244 CMR 6.04(1)(g)];
    - iii. A revision and publication of the 14 Board policies which include specific nondiscriminatory criteria [ref 244 CMR 6.04 (3)(b)].
- 6. Direct Board staff to conduct a verification site survey after receipt of the submission of the next quarterly report;
- 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)].

A. Joseph voted in opposition.

Motion carries.

# **TOPIC:** Education

244 CMR 6.08 Noncompliance with standards

Southeastern Regional Vocational Technical Practical Nurse Program – Program Representative A. Kilcoyne, and Executive Director K. Lazaro, present via Zoom Audio and Video

### **DISCUSSION:**

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

A. Kilcoyne stated that she has been reviewing what has and has not been done within the Program and requested an extension to work with staff and administration and requested that the site visit be delayed a little bit longer. A. Kilcoyne stated the Program's pass rate is excellent and students are happy and did acknowledge the lack of documentation and verification on the Program's part. A. Kilcoyne requested the extension so the Program can get back on track with documentation, compliance with regulations, and a SEP that is in line with regulations and not fragmented. A. Alley noted that the site visits assist with planning and helps identify the gaps that need attention. K. Crowley asked when the ACEN visit was, and C. Walsh stated there was no visit and they submitted a report in July 2025, which was returned

insufficient in August 2025. K. Crowley voiced concerns regarding A. Kilcoyne's comment that the Program has only been reviewing this for 48 hours, despite the report being returned two (2) months ago. K. Crowley added that the lack of documentation is inappropriate because the Program has a responsibility to the students, the Board, and the accreditor, to ensure that there are verification and documentation, especially for a program going through initial accreditation. K. Crowley voiced concerns that the Program is not attending to the requirements for accreditation as seriously as it needs to and would like the Program to explain what they've done since August related to the ACEN findings. A. Kilcoyne clarified that she meant that she has only had 48 hours to look at and find information, work with staff, and speak with the Executive Director of the Program. A. Kilcoyne stated that she is still assessing the needs of the returned report in August and has been working with Board staff to get everything back on track. K. Crowley asked if A. Kilcoyne is the interim Program Administrator and A. Kilcovne stated that's what's been put forward. K. Crowley recommended keeping the scheduled site survey dates due to students being enrolled already and having paid tuition. K. Crowley asked when the PN program started, and K. Lazaro stated he believes it was 1968. K. Lazaro stated that he has only been the Executive Director for a few months, as the previous retired in July 2025. K. Lazaro stated the Program has been working with Board staff, and the Program has a permanent Director that will be fully working with the Program by the end of the month.

# **ACTION:**

Motion by K. Crowley, 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, K. Sanclemente, R. Sesay, and H. Underwood unanimously in favor to:

- 1. Accept the Board staff memorandum summarizing the Program's request and the ACEN candidacy report findings; and
- 2. Defer the Programs request for an extension to the timeframe required under 244 CMR 6.04(1)(b) pending site survey findings related to 244 CMR 6.04 and notify the program that the extension request will be reconsidered at the Board's regularly scheduled meeting where the site survey findings will be presented.

Motion carries.

# **TOPIC:** Education

244 CMR 6.11 Procedure for Discontinuance or Termination of an Approved Nursing Education Program Bay Path Practical Nurse Academy – Not represented

### **DISCUSSION:**

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

K. Crowley noted that the Program went MIA and is not interested in providing the Board with the information needed and also taking care of the students involved in that area. K. Crowley asked what recourse happens for the Program that is non-compliant and is not following through with ensuring that students are placed in other schools and identifying where records will be stored. L. Kelly recommended withdrawing approval status. H. Cambra asked for legal perspective on recourse because it doesn't remedy the fact that people that need the records will not be able to find them. R. Barros stated that she will need to do further research but mentioned it might be helpful to notify the Department of Education. K. Crowley recommended also notifying the accrediting body. A. Joseph noted that the Board doesn't have enforcement authority, and it may exceed the ability of the Board to mandate the program to ensure the records are in safe custody. A. Joseph asked if prosecutors can get involved from outside agencies to be able to handle this matter. R. Barros recommended authorizing Board Counsel to refer to outside

agencies as needed. K. Crowley asked if the Program provided the Board with information related to where the enrolled students were going and H. Caines Robson stated that the Program was on pause and are unsure if the cohort that recently graduated, if all enrolled students were successful, if anyone qualified for readmission, which would be considered enrolled students. A. Alley stated the Program is non-compliant and have been before the Board several times.

### **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, K. Sanclemente, and R. Sesay unanimously in favor to:

- 1. Accept the Board staff memo;
- 2. Withdraw Approval at this time.
- 3. Refer to Board Counsel to refer to outside agencies as necessary
- 4. Accept the Program's submitted notification of discontinuance or Termination of an Approved Nursing Education Program; and
- 5. Find the Program non-compliance with 244 CMR 6.11 for failure to submit the requirements outlined in 244 CMR 6.11.

H. Underwood recused.

Motion carries.

**TOPIC:** Education

2025 Q3 NCLEX Results

Q3 NCLEX MA Graduates Regardless of State of Licensure

O3 NCLEX MA Licensure Candidates Regardless of State of Education

Nursing Education Program with NCLEX Pass Rates Below

80%

### **DISCUSSION:**

C. Walsh was available for questions.

L. Kelly voiced concerns regarding the number of programs with pass rates below 80%. C. Walsh stated that board staff is actively monitoring these programs. H. Cambra asked if the Programs are engaged in coming to the Board and having directives or are they being monitored from a staff perspective. C. Walsh stated that all the seven (7) programs are active participants are Board meeting with directives, and/or monitoring, and/or compliance reports, and/or conversations.

# **ACTION**:

So noted.

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

#### **DISCUSSION:**

None.

### **ACTION:**

None.

TOPIC: Strategic Development, Planning and Evaluation

Topics for Next Agenda

### **DISCUSSION**:

L. Kelly requested an update on the NLC.

#### **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 S. Abshir, A. Alley, K. Crowley, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, K. Sanclemente, R. Sesay, and H. Underwood unanimously in favor to adjourn the Regular Session at 10:19 a.m. Motion carries.

### **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, A. Joseph, L. Kelly, L. Keough, D. Nikitas, K. Pelletier, K. Sanclemente, R. Sesay, and H. Underwood unanimously in favor to convene the Executive Session at 10:19 a.m. as per Purpose One of G.L. c.30A, §21 (a)(1).

Motion carries.

# G.L. c. 30A, § 21 Executive Session 10:30 a.m. to 2:15 p.m.

# **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, D. Nikitas, K. Pelletier, K. Sanclemente, R. Sesay, and H. Underwood unanimously in favor to convene the Adjudicatory Session at 2:15 p.m. to deliberate on proposed final decisions and orders, and rulings on pending adjudicatory matters.

L. Keough not present.

# Adjudicatory Session 2:29 p.m. to 2:39 p.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, K. Sanclemente, R. Sesay, and H. Underwood unanimously in favor to convene the G.L. c. 112, s. 65C Session at 2:39 p.m. Motion carries.

# G.L. c. 112, s. 65C Session 2:39 p.m. to 3:31 p.m.

### **TOPIC:**

Adjournment

# **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, K. Sanclemente, R. Sesay, and H. Underwood unanimously in favor to adjourn the meeting at 3:31 p.m.

Motion carries.

Minutes of the Board's October 8, 2025, Regularly Scheduled Meeting were approved by the Board on

November 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

Wednesday, October 8, 2025 9:00 am | 1 Hour 30 Minutes | (GMT-04:00) Eastern Time (US & Canada)

**Event Address for Attendees:** 

https://zoom.us/j/96295730294

Webinar ID: 962 9573 0294

Join by Phone:

+1 929 436 2866 US (New York)

Webinar ID: 962 9573 0294

# Wednesday, October 8, 2025

PRELIMINARY AGENDA AS OF 09/29/25 4:45pm

Estimated Time	Item #	Item	Exhibit	Presented by
9:00 a.m.	I.	CALL TO ORDER & DETERMINATION OF QUORUM	None	
	11.	APPROVAL OF AGENDA	Agenda	
	III.	APPROVAL OF MINUTES  A. Draft Minutes for the September 10, 2025 Meeting of the Board of Registration in Nursing, Regular Session Via Zoom	Minutes	
	IV.	REPORTS, ANNOUNCEMENTS AND ADMINISTRATIVE MATTERS  A. Announcements	Oral / Memo	НС
	V.	URAMP – None		
	VI.	PROBATION - None		
	VII.	PRACTICE A. Practice Coordinator Staff Report	Report	РМ

VIII.	EDUCATION A. Nursing Education Staff Report	Report	CW
	<ul><li>B. 244 CMR 6.03 (2) Out of State Education Programs</li><li>1. Keene State University, Baccalaureate Degree</li></ul>	Memo	CW
	C. 244 CMR 6.05 (2) Initial Approval Status 1. Roxbury Community College, Associate Degree	Memo	HCR
	<ul><li>D. 244 CMR 6.06 (2) Site Survey Waiver Requests</li><li>1. Berkshire Community College, Associate Degree</li></ul>	Compliance Report	HCR
	<ul><li>E. 244 CMR 6.07 (2) Program Change</li><li>1. Emmanuel College, Baccalaureate Degree</li></ul>	Memo	HCR
	<ul> <li>F. 244 CMR 6.08 Noncompliance with standards</li> <li>1. Greenfield Community College, Associate Degree</li> <li>2. Southeastern Regional Vocational Technical Practical Nurse Program</li> <li>G. 244 CMR 6.11 Procedure for Discontinuance or Termination of</li> </ul>	Compliance Report Memo	HCR CW
	an Approved Nursing Education Program  1. Bay Path Practical Nurse Academy  H. 2025 Q3 NCLEX Results	Memo	HCR
	Q3 NCLEX MA Graduates Regardless of State of Licensure     Q3 NCLEX MA Licensure Candidates Regardless of State     of Education	Report Report	CW CW
	<ol> <li>Nursing Education Program with NCLEX Pass Rates Below 80%</li> </ol>	Report	CW
IX.	REQUESTS FOR LICENSE REINSTATEMENT – None		
X.	STRATEGIC DEVELOPMENT, PLANNING AND EVALUATION A. Topics For Next Agenda		

5:00 p.m.	XIV.	ADJOURNMENT		
	XIII.	M.G.L. c. 30A, § 18 ADJUDICATORY SESSION	CLOSED SESSION	
	XII.	M.G.L. c. 112, § 65C SESSION	CLOSED SESSION	
	Wil	<ol> <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 September 10, 2025 meeting.</li> </ol>	CLOSED SESSION	
	XI.	EXECUTIVE SESSION  The Board will meet in Executive Session as authorized pursuant to M.G.L. c.30A, § 21(a)(1) for the purpose of discussing the reputation, character, physical condition or mental health, rather than professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual.		
		LUNCH BREAK		

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.