

**COMMONWEALTH OF MASSACHUSETTS
BOARD OF REGISTRATION IN NURSING**
239 Causeway Street, Room 417
Boston, MA 02108

And Via WebEx

Wednesday, December 8, 2021 9:00 am | 1 hour | (UTC-04:00) Eastern Time (US & Canada)

Event address for attendees:

<https://statema.webex.com/statema/onstage/g.php?MTID=ef6ec6e0898a22152552155cff254e966>

Join by Phone:

+1-203-607-0564 US Toll

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Access code: 2432 033 9890

Minutes of the Regularly Scheduled Board Meeting
Wednesday, December 8, 2021

Board Members Present In Room 417

L. Kelly, DNP, Chairperson

Board Members Not Present

D. Drew, MBA, Public Member

J. Yeh, MD

Board Members Present Via Audio Or Video

L. Keough, CNP, Vice Chairperson

A. Alley, RN

K.A. Barnes, JD, RPh (Arrived at 9:29 a.m.)

K. Crowley, DNP

J. Kaneb, MBA, Public Member

C. LaBelle, RN

D. Nikitas, RN

V. Percy, MSN

E. Pusey-Reid, DNP

L. Wu, RN

Staff Present In Room 417

C. MacDonald, RN, DNP, Acting Executive Director

K. Jones, Probation Compliance Officer

P. Scott, Licensing Coordinator

S. Gaun, Office Support Specialist I

Staff Not Present

Staff Present Via Audio Or Video

H. Cambra, RN, JD, Acting Deputy Executive Director

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

O. Atueyi, JD, Board Counsel

M. Jardonnet, JD, Board Counsel

M. Campbell, RN, JD, Nursing Investigations Supervisor

S. Waite, RN, DNP, Nursing Education Coordinator
H. Caines Robson, RN, MSN, Nursing Education
Coordinator
P. McNamee, RN, MS, Nursing Practice Coordinator
C. DeSpirito, RN, JD, Complaint Resolution Coordinator
M. Waksmonski, RN, MSN, SARP Coordinator
S. Hall, SARP Monitoring Coordinator
L. Ferguson, Paralegal
S. Buckley, Office Support Specialist I
R. Dumas, Office Support Specialist I

TOPIC:

Call to Order & Determination of Quorum

DISCUSSION:

L. Kelly 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., L. Kelly, Chairperson, called the December 8, 2021 Regularly Scheduled Board Meeting to order.

TOPIC:

Approval of Agenda

DISCUSSION:

None.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and L. Wu unanimously in favor to approve the Agenda as presented.

TOPIC:

Approval of Board Minutes for the November 10, 2021 Meeting of the Regularly Scheduled Board Meeting

DISCUSSION:

None.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with J. Kaneb and L. Wu in abstention, and A. Alley, K. Crowley, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy and E. Pusey-Reid all in favor to accept the Minutes of the November 10, 2021 Regularly Scheduled Board Meeting as presented.

TOPIC:

Reports, Announcements and Administrative Matters
Announcements

DISCUSSION:

C. MacDonald stated the Board Staff will be moving this week to 250 Washington Street, Third Floor, Boston, MA 02108, an Announcement has been sent out and the Board Website has been updated to reflect the address change.

H. Cambra stated that regarding the Board members' discussion about the Massachusetts Department of Children and Families Cases (DCF) at the November 10, 2021 Board Meeting, she added language to the Board of Registration in Nursing's Website to make it clearer to the applicants the expectation to have the DCF Background Check done prior to being granted licensure in Massachusetts. In response to H. Cambra, L. Kelly stated she went online and saw that. H. Cambra stated she will have the information in a Memorandum for the January 12, 2022 Board Meeting.

ACTION:

So noted.

TOPIC: SARP

Activity Report

DISCUSSION:

None.

ACTION:

None.

TOPIC: Probation

Staff Action Report

DISCUSSION:

K. Jones was available for questions.

ACTION:

So noted.

TOPIC: Probation

Request for Termination of Probation/Stayed Probation

DISCUSSION:

None.

ACTION:

None.

TOPIC: Probation

DISCUSSION:

K. Jones summarized her previously distributed memorandum and attached exhibits to the Board. In response to the Licensee, K. Jones stated she did not receive the Physician's Report from the Licensee and the Licensee sent K. Jones and E-Mail Message on 11/22/2021 and stated she left her last Employer due to her work injury. L. Kelly stated the Does Not Meet Report contains significant issues.

C. LaBelle stated other people filed Complaints against the Licensee and if K. Jones received the documentation that reported those Complaints. In response to C. LaBelle, K. Jones stated that she does not have those documents yet. K. Crowley stated there are three (3) reports in the documents the Board members received. L. Kelly stated the Employees filed Complaints against the Licensee with the Employer and not the Board. L. Kelly stated the Board has already granted EXTENSIONS OF THE PROBATION AGREEMENT to the Licensee in 2015, 2017 and 2018. L. Kelly stated her concerns regarding the Licensee's practice issues.

The Licensee was present via audio. The Licensee stated she would like the Board to consider the work she did for another Supervisor, and she has not worked with the Complainant before. The Licensee stated she did submit the Injury Report and Physician's Report to K. Jones, the issues she had with the Complainant, the information the Complainant provided was inaccurate, and she injured herself while working and was terminated after she was on leave due to her injury.

After the Motion, O. Atueyi asked L. Kelly how long are the SUSPENSION term and if there are any reinstatement requirements. K. Jones asked L. Kelly if the Licensee can be credited for the work she did. In response to O. Atueyi, L. Kelly confirmed the SUSPENSION term is INDEFINITE with the standard reinstatement terms.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and L. Wu unanimously in favor to INDEFINITELY SUSPEND the Licensee's RN license and right to renew her license with the standard reinstatement terms.

TOPIC: Probation

Request for Notice of Violation and Further Discipline, L. Plumley, NUR-2020-0027, RN2294846

DISCUSSION:

K. Jones summarized her previously distributed memorandum and attached exhibits to the Board. The Licensee was not present. Several Board members and staff discussed the matter and the Board's options.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and L. Wu unanimously in favor to INDEFINITELY SUSPEND the Licensee's RN license and right to renew her license with the standard reinstatement requirements and require the Licensee to fulfill the terms and conditions, including the completion of the required Continuing Education Units, of the CONSENT AGREEMENT FOR PROBATION for no less than one (1) year effective 5/18/2021.

TOPIC: Probation

Request for Notice of Violation and Further Discipline, P. Brandoli, NUR-2019-0164, RN2261761

DISCUSSION:

K.A. Barnes arrived at 9:29 A.M. K. Jones summarized her previously distributed memorandum and attached exhibits to the Board. The Licensee was not present. There was no discussion.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with K.A. Barnes in abstention, and A. Alley, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and L. Wu all in favor to INDEFINITELY SUSPEND the Licensee's RN license and right to renew his license with the standard reinstatement requirements and require the Licensee to fulfill the terms and conditions, including the completion of the required Continuing Education Units, which are stated in the CONSENT AGREEMENT FOR SURRENDER FOLLOWED BY PROBATION for no less than one (1) year effective 5/26/2021.

TOPIC: Practice Coordinator Staff Report

DISCUSSION:

P. McNamee was available for questions.

ACTION:

So noted.

TOPIC: Education

Nursing Education Staff Report Monthly

DISCUSSION:

None.

ACTION:

None.

TOPIC: Education

244 CMR 6.06 (1)(a) Regularly Scheduled Site Survey, Simmons University Baccalaureate Degree Nursing Program

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. K. Crowley asked L. Kelly if the Board needs to approve the program administrator is working in two (2) programs and if the program administrator is in compliance. In response to K. Crowley, C. MacDonald stated the Board staff is working on that compliance issue and the regulations state now that the program administrators have to have the resources to be able to administer the program and there are updated policies that will better guide the Board and the program administrators to comply with the regulations. C. MacDonald stated the regulations are online and they have not been changed.

C. MacDonald stated the nursing schools are vastly different, they provide multiple options, the programs and the Board currently struggle with the interpretations and understanding of the regulations, does the program have the human and physical resources. C. MacDonald stated the program has to be in compliance with the current regulations. S. Waite stated the program administrator is responsible for two (2) distinct programs. K.A. Barnes asked C. MacDonald if the Board staff can make sure that by 3/9/2022, the program administrator is in compliance with the regulations.

H. Shlosser, Associate Dean of School of Nursing, was present via video. H. Shlosser stated that and J. Pallay, Chairperson of School of Nursing, and D. Duran, Executive Assistant with the School of Nursing, were also present via video. H. Shlosser stated she did not have anything to add at this time.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and L. Wu and 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)(a), (1)(f), (1)(h), (2)(a), (2)(b), (2)(c), (3)(a)3, (3)(b), (4)(a), (4)(b)(1-5), (5)(a), (5)(b), (5)(c), (5)(d), (5)(e) and non-compliance with 244 CMR 6.04 (1)(b), (1)(c), (1)(d), (1)(e), (1)(g), (3)(a)1, (3)(a)2 and (5)(f).
2. Continue full approval at this time.
3. The Program Administrator will need to demonstrate that her role is in compliance with the regulations by March 9, 2022.
4. Direct the Program to correct the regulatory deficiencies by the listed due dates.

A. Due by March 9, 2022:

1. Evidence demonstrating that student participate in governance of the parent institution and the program [ref 244 CMR 6.04 (1)(b)];
2. A revised systematic evaluation plan that includes, but not limited to, expected levels of achievement (achievable and measurable) across all criterion; a calendar outlining the evaluation schedule; and review of all program components, all Board required outcomes, and 11 Board required policies [ref 244 CMR 6.04 (1)(e)];
3. Revised published policies with specific non-discriminatory criteria for the admissions and attendance policies and faculty meeting minutes demonstrating the use of data by faculty to develop, implement, and evaluate all 11 Board required policies [ref 244 CMR 6.04 (3)(a)2];
4. Revised written agreements with cooperating agencies utilized as clinical learning sites are current and specific in defining parameters of activities and the responsibilities of the program, the student and the cooperating agency including faculty evaluation of student achievement of nursing competencies and patient safety [ref 244 CMR 6.04 (5)(f)].

B. Due by June 8, 2022:

1. 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

[ref 244 CMR 6.04 (1)(e)].

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)].

TOPIC: Education

244 CMR 6.06 (1)(a) Regularly Scheduled Site Survey, Simmons University Direct Entry Master of Science Degree Nursing Program

DISCUSSION:

S. Waite summarized her previously distributed memorandum and attached exhibits to the Board.

L. Keough stated she wanted to comment on the fiscal sustainability and the Board can consider that in its discretion and deliberations regarding pass rates and outcome measures, because the Board needs to go with what its mission is to ensure safety for the public. L. Kelly stated she agreed with L. Keough.

H. Shlosser, Associate Dean of School of Nursing, was present via video. H. Shlosser stated that and J. Pallay, Chairperson of School of Nursing, and D. Duran, Executive Assistant with the School of Nursing, were also present via video. H. Shlosser stated she is happy to hear the Board is reviewing the program administrator piece, because to expect a full-time program administrator for a tiny program is just not reasonable for sustainability, so she will be on the lookout for that updated policies to put the program into compliance.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and L. Wu 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)(a), (1)(f), (1)(h), (2)(a), (2)(b), (2)(c), (3)(a)3, (3)(b), (4)(a), (4)(b)(1-5), (5)(a), (5)(b), (5)(c), (5)(d), (5)(e) and non-compliance with 244 CMR 6.04 (1)(b), (1)(c), (1)(d), (1)(e), (1)(g), (3)(a)1, (3)(a)2 and (5)(f).
2. Continue full approval at this time.
3. The Program Administrator will need to demonstrate that her role is in compliance with the regulations by March 9, 2022.
4. Direct the Program to correct the regulatory deficiencies by the listed due dates.
 - A. Due by March 9, 2022:
 1. Evidence demonstrating that student participate in governance of the parent institution and the program [ref 244 CMR 6.04 (1)(b)];
 2. A revised systematic evaluation plan that includes, but not limited to, expected levels of achievement (achievable and measurable) across all criterion; a calendar outlining the evaluation schedule; and review of all program components, all Board required outcomes, and 11 Board required policies [ref 244 CMR 6.04 (1)(e)];
 3. Revised published policies with specific non-discriminatory criteria for the admissions and attendance policies and faculty meeting minutes demonstrating the use of data by

faculty to develop, implement, and evaluate all 11 Board required policies [ref 244 CMR 6.04 (3)(a)2];

4. Revised written agreements with cooperating agencies utilized as clinical learning sites are current and specific in defining parameters of activities and the responsibilities of the program, the student and the cooperating agency including faculty evaluation of student achievement of nursing competencies and patient safety [ref 244 CMR 6.04 (5)(f)].

B. Due by June 8, 2022:

1. 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 [ref 244 CMR 6.04 (1)(e)].
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)].

TOPIC: Education

244 CMR 6.10 Notification of Change of Nursing Education Program Name, Assumption University Baccalaureate Degree Nursing Program

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. L. Kelly asked H. Caines Robson what is the effective date of the Program Name Change. In response to L. Kelly, H. Caines Robson stated the effective date of the Program Name Change was 10/30/2021. K. Crowley stated the request for change came in three (3) weeks after the implemented date of change which is outside the parameter of the regulation. L. Kelly stated the Program is in non-compliance there.

K. Stover, Dean of School of Nursing, was present via audio. K. Stover did not make a statement.

ACTION:

Motion by K. Crowley, seconded by K.A. Barnes, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid, L. Wu and J. Yeh unanimously in favor to find the Program is non-compliance with regulation 244 CMR 6.10 Notification of Change of Nursing Education Program Name, the Board will not take any action on the non-compliance at this time, and the Board will accept the program name change to the Froelich School of Nursing.

TOPIC: Requests for License Reinstatement

DISCUSSION:

None.

ACTION:

None.

TOPIC: Strategic Development, Planning and Evaluation

Presentation/Report, Proposed Board Policy 21-XX: 244 CMR 6.10 Notification of Change of Nursing Education Program Name for Determination of Nursing Education Program Compliance by Board Staff

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. L. Keough asked the Board members if there could be a leeway outside the thirty (30) day window. In response to L. Keough, H. Caines Robson stated the Board staff is updating the Change Report to reflect if the programs can meet the thirty (30) day requirements, however, the information will not be presented until the nursing education program has received permission from their Board of Trustees to move forward, but it means the notification would have come in within the thirty (30) day window. In response to H. Caines Robson, L. Kelly stated the programs have been listening to the Board's conversations in previous Board Meetings, the discussions have been great when the public has been listening, the programs' hands have been tied regarding philanthropic entities, name changes, and confidentiality. K. Crowley asked H. Caines Robson if the Nursing Education Staff will send a Second Notification to the Board members when the Program's Name Change will become effective. In response to K. Crowley, H. Caines Robson stated when the Nursing Education Staff receives a Notification from the Program that there is a Pending Name Change, the Revised Name Change Report will have the follow-up response date and the Program will need to follow-up by that date.

ACTION:

Motion by L. Keough, seconded by K. Crowley, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and L. Wu unanimously in favor to accept the Proposed Board Policy 21-XX as written.

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

DISCUSSION:

None.

ACTION:

None.

Break from 10:11 a.m. to 10:20 a.m.

TOPIC:

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

DISCUSSION:

None.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and L. Wu unanimously in favor to convene the G.L. c. 112, s. 65C Session at 10:20 a.m.

G.L. c. 112, s. 65C Session 10:20 a.m. to 11:55 a.m.

TOPIC:

Adjudicatory Session

DISCUSSION:

None.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and L. Wu unanimously in favor to convene the Adjudicatory Session at 11:55 a.m. to deliberate on proposed final decisions and orders, and rulings on pending adjudicatory matters.

Adjudicatory Session 11:55 a.m. to 12:12 p.m.

Break from 12:12 p.m. to 12:40 p.m.

TOPIC:

G.L. c.30A, §21 Executive Session

DISCUSSION:

None.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and L. Wu unanimously in favor to convene the Executive Session at 12:40 p.m. as per Purpose One of G.L. c.30A, §21 (a)(1).

G.L. c. 30A, § 21 Executive Session 12:40 p.m. to 5:05 p.m.

TOPIC:

Adjournment

DISCUSSION:

None.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and L. Wu unanimously in favor to adjourn the meeting at 5:05 p.m.

Minutes of the Board's December 8, 2021, Regularly Scheduled Meeting were approved by the Board on January 12, 2022.

Linda Kelly, DNP
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

239 Causeway Street
Room 417
Boston, Massachusetts 02114

And Via WebEx

Wednesday, December 8, 2021 9:00 am | 1 hour | (UTC-04:00) Eastern Time (US & Canada)

Event address for attendees:

<https://statema.webex.com/statema/onstage/g.php?MTID=ef6ec6e0898a22152552155cff254e966>

Join by Phone:

+1-203-607-0564 US Toll

+1-866-692-3580 US Toll Free

Access code: 2432 033 9890

Wednesday, December 8, 2021

PRELIMINARY AGENDA AS OF 11/26/21 3:15pm

Estimated Time	Item #	A. 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 November 10, 2021 Meeting of the Board of Registration in Nursing, Regular Session Via WebEx	Minutes	
	IV.	REPORTS, ANNOUNCEMENTS AND ADMINISTRATIVE MATTERS A. Announcements	Oral/Memo	CM
	V.	SARP A. SARP Activity Report - NONE	None	

COMMONWEALTH OF MASSACHUSETTS
Board of Registration in Nursing

	VI.	PROBATION A. Probation Staff Action Report B. Termination of Probation/Stayed Probation - NONE C. Request for Notice of Violation and Further Discipline in the matter of: 1. L. MacLean, RN-07-050, RN228325 2. L. Plumley, NUR-2020-0027, RN2294846 3. P. Brandoli, NUR-2019-0164, RN2261761	Report None Memo Memo Memo	KJ KJ KJ KJ
	VII.	PRACTICE A. Practice Coordinator Staff Report	Report	PM
	VIII.	EDUCATION A. Nursing Education Staff Report 1. Nursing Education Staff Report Monthly - NONE B. 244 CMR 6.06 (1)(a) Regularly Scheduled Site Survey 1. Simmons University Baccalaureate Degree Nursing Program 2. Simmons University Direct Entry Master of Science Degree Nursing Program C. 244 CMR 6.10 Notification of Change of Nursing Education Program Name 1. Assumption University Baccalaureate Degree Nursing Program	None Report Report Memo	 HCR SW HCR
	IX.	REQUESTS FOR LICENSE REINSTATEMENT - NONE	None	
	X.	STRATEGIC DEVELOPMENT, PLANNING AND EVALUATION A. Presentation/Report 1. Proposed Board Policy 21-XX: 244 CMR 6.10 Notification of Change of Nursing Education Program Name for Determination of Nursing Education Program Compliance by Board Staff B. Topics for Next Agenda	Proposed Policy	HCR

COMMONWEALTH OF MASSACHUSETTS
Board of Registration in Nursing

<>		LUNCH BREAK	
	XI.	M.G.L. c. 112, § 65C SESSION	CLOSED SESSION
	XII.	<p>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.</p> <ol style="list-style-type: none"> 1. 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. 2. 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. 3. 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 Abuse Rehabilitation Program. 4. Approval of prior executive session minutes in accordance with M.G.L. c. 30A, § 22(f) for sessions held during the November 10, 2021 meeting. 	CLOSED SESSION
	XIII.	M.G.L. c. 30A, § 18 ADJUDICATORY SESSION	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 Kevin Lovaincy at kevin.p.lovaincy@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.

