

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

239 Causeway Street, Room 417A  
Boston, MA 02114

**Minutes of the Regularly Scheduled Board Meeting  
Wednesday, December 11, 2019**

**Board Members Present**

B. Levin, RN, Chairperson  
L. Keough, CNP, Vice Chairperson (Left at 2:51 p.m.)  
K.A. Barnes, JD, RPh  
K. Crowley, DNP  
D. Drew, MBA, Public Member  
J. Kaneb, MBA, Public Member  
L. Kelly, CNP  
C. LaBelle, RN  
D. Nikitas, RN  
E. Pusey-Reid, DNP  
L. Wu, RN

**Board Members Not Present**

A. Alley, RN  
G. Gravlin, EdD  
M. Keohane, RN

**Staff Present**

L. Silva, RN, DNP, Executive Director  
C. MacDonald, RN, DNP, Deputy Executive Director  
O. Atueyi, JD, Board Counsel  
B. Oldmixon, JD, Board Counsel  
A. Fein, RN, JD, Complaint Resolution Coordinator  
L. Hillson, RN, MSN, PhD, Assistant Director for  
Policy and Research  
M. Gilmore, APRN, MSN, SARP Coordinator  
A. MacDonald, RN, DNP, Nursing Education  
Coordinator  
H. Caines Robson, RN, MSN, Nursing Education  
Coordinator  
L. Nelson, BHPL Director of Policy and Regulatory  
Affairs  
K. Jones, Probation Compliance Officer  
L. Ferguson, Paralegal  
S. Gaun, Office Support Specialist I  
G. Rivera, Office Support Specialist I

**Staff Not Present**

H. Cambra, RN, JD, Interim SARP  
Coordinator  
S. Hall, SARP Monitoring Coordinator  
M. Campbell, RN, JD, Nursing  
Investigations Supervisor  
C. Andfield, Office Support Specialist I

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**TOPIC:**

Call to Order & Determination of Quorum

**DISCUSSION:**

B. Levin confirmed by roll call that a quorum of the Board members was present and announced that the meeting was being recorded. B. Levin thanked the Board members and staff for their hard work. B. Levin stated that M. Keohane is not present and this is her last Board Meeting.

**ACTION:**

At 9:05 a.m., B. Levin, Chairperson, called the December 11, 2019 Regularly Scheduled Board Meeting to order.

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**TOPIC:**

Approval of Agenda

**DISCUSSION:**

B. Levin stated the Agenda Item X A.1. and 2. a. through e. Strategic Development, Planning and Evaluation will be presented after the Approval of the Minutes.

**ACTION:**

Motion by L. Keough, seconded by K. Crowley, and voted unanimously to approve the Agenda as revised.

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**TOPIC:**

Approval of Board Minutes for the November 13, 2019 Meeting of the Regularly Scheduled Board Meeting

**DISCUSSION:**

None.

**ACTION:**

Motion by L. Keough, seconded by K. Crowley, and voted, with K.A. Barnes in abstention, and all other members present in favor, to accept the Minutes of the November 13, 2019 Regularly Scheduled Board Meeting as presented.

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

A. Presentation/Report

1. Legislative Updates
2. a. through e. Massachusetts Coalition for the Prevention of Medical Errors

**DISCUSSION:**

- A. 1. L. Nelson and L. Hillson were present. L. Nelson and L. Hillson updated the Board members on the following Bill Numbers and Titles which have been filed at the Massachusetts Legislature.
- (a) S. 716 -- An Act to Remove the Restrictions on the Licenses of Certified Registered Nurse Aestheticists as Recommended by the Institute of Medicine and the Federal Trade Commission
  - (b) H. 1868 -- An Act to Remove the Restrictions on the Licenses of Certified Registered Nurse Aestheticists
  - (c) H. 4134 -- The Governor's Omnibus Healthcare Bill (The VALUE Act)
  - (d) H. 1944 -- The Governor's Omnibus Healthcare Bill (The VALUE Act) submitted independently by Rep. K. Kahn
  - (e) H. 1863 -- An Act Relative to Fee Waivers for Registered Nurses After Retirement
  - (f) H. 3884 -- An Act Relative to Informed Consent of Opioid Based Prescriptions
  - (g) H. 1864 -- An Act to Support Access, Value and Equity in Healthcare (the SAVE Act)
  - (h) H. 1940 -- An Act Creating A Nursing Advisory Board

(i) H. 3493 -- An Act Prohibiting the Participation of Healthcare Professionals in the Torture and Abuse of Prisoners

A. 2. a. through e. There was no discussion.

**ACTION:**

A. 1. So noted.

A. 2. a. through e. None.

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**TOPIC:**

Reports, Announcements and Administrative Matters

A. Announcements

**DISCUSSION:**

A. L. Silva stated there are not any announcements.

**ACTION:**

A. None.

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**TOPIC:** SARP

Activity Report

**DISCUSSION:**

None.

**ACTION:**

None.

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**TOPIC:** Probation

Staff Action Report

**DISCUSSION:**

None.

**ACTION:**

None.

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**TOPIC:** Practice Coordinator Staff Report

**DISCUSSION:**

None.

**ACTION:**

None.

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**TOPIC:** Education

Staff Report

**DISCUSSION:**

None.

**ACTION:**

None.

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**TOPIC:** Education

244 CMR 6.04 (1)(f) Administrative Changes, Quincy College, CEO

**DISCUSSION:**

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. B. Levin stated her concerns regarding this is the college's second Interim President and the college's need for stable leadership for the program to be successful moving forward.

**ACTION:**

Motion by B. Levin, seconded by L. Keough, and voted unanimously to determine there is compliance with regulation 244 CMR 6.04 (1)(f) in the notification of the appointment of Daniel Asquino, PhD, Interim President, Chief Executive Officer, Quincy College.

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**TOPIC:** Education

244 CMR 6.06, 2020 Site Survey Schedule

**DISCUSSION:**

L. Silva stated the schedule may change if the Board staff receives any complaints from students, NCLEX performance, and this is a tentative schedule instead of actually being a set schedule. H. Caines Robson stated that only the regular scheduled surveys are included in the 2020 Site Survey Schedule.

**ACTION:**

So noted.

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**TOPIC:** Education

244 CMR 6.06, Berkshire Community College, Practical Nursing Program, Site Survey Compliance Report

**DISCUSSION:**

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. Several Board members and staff discussed the program's prior NCLEX Exam pass rates which were below 80%.

J. Berne, Vice President of Academic Affairs, was present. J. Berne thanked the Education Staff for the work it has done. J. Berne stated the Nursing Program contains 20% of the students and it is the Community College's # 1 priority, the most recent NCLEX Exam pass rate was 89%, and the program's PN and ADN Budgets were not appropriated separately but now are.

**ACTION:**

Motion by B. Levin, seconded by L. Keough, and voted unanimously 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)(b), (1)(c), (1)(d), (1)(e), (1)(f), (1)(g), (1)(h), (2)(a), (2)(b), (3)(a)1, (3)(a)2, (3)(a)3, (3)(b), (4)(a), (4)(b)(1), (4)(b)(2), (4)(b)(3), (4)(b)(4), (4)(b)(5), (5)(a), (5)(b), (5)(c), (5)(d), and(5)(f) and noncompliance with 244 CMR 6.04 (5)(e).
2. Continue full approval at this time.
3. Direct the program to provide the following due no later than June 30, 2020:
  1. budget with line items that specifically identify funding for the Practical Nursing Program including but not limited to equipment, professional development for faculty, and learning resources [ref:244 CMR 6.04(5)(e)];
4. Direct the program to provide the following to enhance program effectiveness due no later than June 30, 2020:
  1. revised admission and attendance policies published 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)(d) & (3)(a)2];
  2. a revised systematic evaluation plan to include, measurable expected levels of achievement (ELA) for every component and assessment methods that evaluate the achievement of the ELA [ref 244 CMR 6.04 (1)(e)];
  3. evidence of professional development for all full and part time faculty that are appropriate to teaching responsibilities [ref 244 CMR 6.04 (2)(b)5];
  4. develop a procedure to ensure that all foreign transcripts are evaluated in the same way [ref 244 CMR 6.04 (3)(a)(2)];
  5. revised course syllabi to include the number of quizzes to be assigned and an identified evaluation criteria for all assignments [ref 244 CMR 6.04 (3)(b)]; and
  6. revised Faculty job description to include the development of the nursing curriculum plan as a component of the role responsibilities [ref 244 CMR 6.04 (4)(a)];
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)].

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**TOPIC:** Education

244 CMR 6.06 (2) Site Survey Waiver Requests, Becker College, Baccalaureate Degree RN Program

**DISCUSSION:**

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. L. Hillson recused herself from the matter and left the room during the deliberation and vote. J. Litchfield, program administrator, was present. A. MacDonald confirmed it has been over eight (8) years since the Board conducted its last site survey of the Program.

J. Litchfield stated the program has all of the Board requirements listed within its Systematic Plan and Evaluation, and the faculty is actively involved with reviewing data, there is a new clinical laboratory, and the program has corrected other compliance issues. J. Litchfield stated it has been over eight (8) years since the Board last conducted a site survey of the program.

**ACTION:**

Motion by D. Drew, seconded by B. Levin, and voted unanimously to:

1. Accept the staff compliance report finding:
  - a. the Program has demonstrated correction of the regulatory deficiencies at 244 CMR 6.04 (3)(a)2; and
  - b. the Program has not demonstrated correction of the regulatory deficiencies at 244 CMR 6.04 (1)(d), (1)(e), (4)(b)2, and (5)(f).
2. Deny the Program Waiver Request of 244 CMR 6.06(1)(a) Site Survey of Nursing Education Programs.
3. Require the Board Education Staff to conduct the Full Site Survey.

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**TOPIC:** Education

244 CMR 6.06 (2) Site Survey Waiver Requests, Westfield State University, Baccalaureate Degree RN Program

**DISCUSSION:**

A. MacDonald summarized her previously distributed memorandum and attached exhibits to the Board. Marcia Scanlon, program administrator, was present. A. MacDonald stated the NCLEX pass rate was 93%, it has been 10 years since the Board staff conducted the site survey, and the normal time period of site surveys are every 8 to 10 years, and programs that are fully accredited can request a waiver. Several Board members and staff discussed the waiver application requirements and annual reports that are required.

M. Scanlon thanked the Board for allowing the program to submit the survey waiver request, regarding the CCNE findings, the program has always had a Systematic Evaluation Plan, and the program was following it, it was not reflected in the meeting minutes, the program was small and it was making changes but it was not doing a good job with the follow-up, so the program has put things in place to correct that action. M. Scanlon stated the program opened in 2010 and she believes the last site survey was done in 2012.

**ACTION:**

Motion by L. Keough, seconded by B. Levin, and voted unanimously 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; and
  - c. the Program has provided satisfactory evidence of compliance with the regulations at 244 CMR 6.04.
2. Approve the Program Waiver of 244 CMR 6.06(1)(a) Site Survey of Nursing Education Programs.
3. Direct the Program to provide to the Board the following for the effectiveness of the program:

Due March 31, 2020:

- a. Revised SEP with measurable ELAs, specific evaluation methods to evaluate 11 Board required policies; and clear indication of whether each ELA has been met [ref:244 CMR 6.04(1)(e)];
- b. revised attendance policy 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)(d) & (3(a)2)];
- c. Meeting minutes demonstrating that faculty use student survey data to develop and evaluate the program [ref:244 CMR 6.04(3)(a)3]; and
- d. Evidence of an internal audit to ensure that all written agreements with cooperating agencies utilized as clinical learning sites are developed and reviewed annually by both program and agency personnel; current and specific in defining parameters of activities and the responsibilities of the program, the student and the cooperating agency [ref:244 CMR 6.04(5)(f)].

Due June 30, 2020:

- a. Meeting minutes demonstrating full implementation of a written plan for the systematic evaluation of all components of the program including, but not limited to, Program outcomes as required at 244 CMR 6.01, the 11 policies required by the Board and that results of the systematic evaluation of Program components are used for Program development, maintenance and revision [ref:244 CMR 6.04(1)(e)]; and
  - b. Electronic copy of the Follow-up report due to CCNE by June 1, 2020.
4. Failure to correct these regulatory deficiencies will result in the Board's evaluation of the Program's approval status [ref 244 CMR 6.08(1)].

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**TOPIC:** Education

244 CMR 6.08 Berkshire Community College, Associate Degree Nursing Program, Site Survey Compliance Report

**DISCUSSION:**

A. MacDonald summarized her previously distributed memorandum and attached exhibits to the Board. J. Berne, PhD, Vice President of Academic Affairs and the program administrator, was present. There was no discussion.

J. Berne stated since the Board staff's site survey in 2018, the faculty and administration pulled the Nursing Program out into its own division, the Community College now has its own division that is solely devoted to nursing, and it has been a great decision.

**ACTION:**

Motion by B. Levin, seconded by L. Keough, and voted unanimously to:

1. Accept the compliance report finding that the Program has demonstrated correction of the regulatory deficiencies at 244 CMR 6.04 (1)(d), (1)(e), (1)(g), (3)(a)(2), (3)(a)(3), and (5)(b).
2. Reinstate the Program with Full Approval Status.
3. Direct the Program to provide the following, due no later than June 30, 2020, to enhance program effectiveness:
  - a. revised admission and attendance policies published 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)(d) & (3)(a)2];
  - b. a revised systematic evaluation plan that includes a date, measurable expected levels of achievement (ELA) for every component and assessment methods that evaluate the achievement of the ELA [ref: 244 CMR 6.04 (1)(e)];
  - c. the systematic evaluation plan with data and analysis on a quarterly basis to demonstrate that the results of the evaluation are being used for the development, maintenance, and revision of the program with the first report due by March 31, 2020 (then June 30, 2020, December 31, 2020, ) and the last due December 31, 2020 [ref: 244 CMR 6.04 (1)(e)]; and
  - d. a report documenting continued progress with plan for sustainability including but not limited to an update on recruitment and hiring.
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)].

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**TOPIC:** Education

244 CMR 6.08 Cape Cod Community College, Associate Degree Nursing Program, Compliance Report

**DISCUSSION:**

A. MacDonald summarized her previously distributed memorandum and attached exhibits to the Board. B. Murphy, program administrator, was present. Several Board members and staff discussed the program is currently on Warning Status, the Board policies, the program's progress in correcting the compliance issues, and the Board's options.

B. Murphy stated the program is working diligently to come into full compliance.

**ACTION:**

Motion by D. Drew, seconded by L. Wu, and voted unanimously to:

1. Accept the staff compliance report finding that the Program has not provided satisfactory evidence of compliance with the regulations at 244 CMR 6.04 (1)(d), (1)(e), or (3)(a)2.



2. Continue the Approval with Warning Status.
3. A verification site survey is not warranted at this time.
4. Direct the Program to provide to the Board the following in order to demonstrate correction of the regulatory deficiencies by March 31, 2020:
  - a. the 11 required Board policies published 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)(d) & (3(a)2)];
  - b. a revised systematic evaluation plan that includes, but not limited to, responsible person or group, operational definitions, clearly stated evaluation criteria, operational definitions, expected levels of achievement specificity (achievable and measurable) across all criterion; a calendar outlining the evaluation schedule that is aligned with the systematic evaluation plan; and review of all Board required outcomes and 11 Board required policies [ref 244 CMR 6.04 (1)(e)]; and
  - c. Continue to submit the systematic evaluation plan with data and analysis on a quarterly basis to demonstrate that the results of the evaluation are being used for the development, maintenance, and revision of the program with the next report due by December 31, 2019 (then March 31, 2020, June 30, 2020, September 30, 2020) and the last due December 31, 2020 [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)].

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**TOPIC:** Systematic Development, Planning and Evaluation  
SARP Policy 18-01: *SARP Participant's Re-Entry into Monitored Practice*

**DISCUSSION:**

M. Gilmore summarized the memorandum and attached exhibits to the Board. Several Board members and staff discussed the proposed policy, controlled substances besides narcotics that facilities' staff are monitoring and Licensees are diverting, their concerns regarding reducing the time period from 12 months to six (6) months, their concerns regarding retiring CASP Amendment 1 and allowing Licensees to enter CASP Amendment 2, having the SARP Program remain consistent among its peers, keeping CASP Amendment 1 and changing its policy language, having the SARP staff work on a staff action policy, and the Board's options.

**ACTION:**

Motion by B. Levin, seconded by L. Keough, and voted unanimously to adopt the changes that have been recommended and to change the time period of full compliance from 12 months to 6 consecutive months.

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**TOPIC:** Requests for License Reinstatement  
Rose Reveil, NUR-2017-0191, RN263890

**DISCUSSION:**

L. Ferguson summarized her previously distributed memorandum and attached exhibits to the Board. The Licensee was present. There was no discussion.

The Licensee stated the incident which led to the Probation.

**ACTION:**

Motion by K. Crowley, seconded by E. Pusey Reid, and voted unanimously to reinstate the Licensee's RN license with No Probation requirements.

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

**DISCUSSION:**

K. Crowley requested that the Board revisit the Advisory Ruling 18-01 to review and revise the tentative interpretation of the law M.G.L. c. 112, § 80B Nursing Practice, specifically in relationship to practice for nurse educators and researchers that are employed by Massachusetts entities and organizations but do not work in the Massachusetts for their practice. K. Crowley stated that she believed when the Advisory Ruling 18-01: Licensure Required to Practice Nursing was devised in April 2018, she did not think the Board was configured the same way with the Graduate Seat of Education and the Doctoral Seat of Education and she thinks they are 2 key individuals from the Board that should have put in on how the Board interprets the Advisory Ruling 18-01: Licensure Required to Practice Nursing for graduate education where the Board does not regulate graduate programs and also to look at the jurisdiction of the Massachusetts Board to have on others that are nursing who are not in Massachusetts. K. Crowley stated it is important that the Board looks at specifically the preceptors within graduate education for they are the 1-on-1 educators that are preceptive to students in clinical, they are licensed within that U.S. State and it is not the same as clinical faculty as it is in undergraduate education, and there are several pieces the Board needs to look at, and also to go back to the consistency in other U.S. States, how they consider, and what they do for both didactic and clinical positions, and what the other national taskforce of Nurse Practitioner Advanced Practice Guidelines for programs, and then the barriers that were put in for APRNs which were in an apparent crisis situation for pharmacares all across the Nation. K. Crowley stated right now for someone to get a Massachusetts APRN, they have to have a MassHealth Number, they do not work in Massachusetts, so then they have to get a MassHealth Number, and in order to do so, they have to have a DEA Number in U.S. States that allow Nurse Practitioners to prescribe and have a DEA Number, and so that is a \$730.00 Fee for the APRNs to just get a MassHealth Number.

C. MacDonald stated that is not correct, and she received a confirmation yesterday from the Massachusetts Department of Public Health Drug Control Program to clarify that specifically. D. Drew stated a point of order to add K. Crowley's recommendations to the December 11, 2019 Board Meeting Minutes to add the Topic to the Regular Session Agenda for the January 8, 2020 Board Meeting. L. Silva stated to add to D. Drew's point of order, there are certain things the Board does not have jurisdiction over, including post-graduate, and the scope is to not change the Statute but to change the regulation. L. Silva stated her suggestion for the Topic is Advisory Ruling 18-01: Licensure Required to Practice Nursing and they will add some more.

**ACTION:**

So noted.

**Break from 10:30 a.m. to 10:52 a.m.**

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**TOPIC:**

G.L. c.30A, §21 Executive Session

**DISCUSSION:**

None.

**ACTION:**

Motion by B. Levin, seconded by L. Keough, and voted unanimously by roll call to convene the Executive Session at 10:52 a.m. as per Purpose One of G.L. c.30A, §21 (a)(1).

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**G.L. c. 30A, § 21 Executive Session 10:52 a.m. to 2:51 p.m.**

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**TOPIC:**

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

**DISCUSSION:**

None.

**ACTION:**

Motion by B. Levin, seconded by L. Kelly, and voted unanimously to convene the G.L. c. 112, s. 65C Session at 2:51 p.m.

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**G.L. c. 112, s. 65C Session 2:51 p.m. to 4:25 p.m.**

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**TOPIC:**

Adjudicatory Session

**DISCUSSION:**

None.

**ACTION:**

Motion by B. Levin, seconded by K.A. Barnes, and voted unanimously to convene the Adjudicatory Session at 4:25 p.m. to deliberate on proposed final decisions and orders, and rulings on pending adjudicatory matters.

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**Adjudicatory Session 4:25 p.m. to 4:33 p.m.**

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**TOPIC:**

Adjournment

**DISCUSSION:**

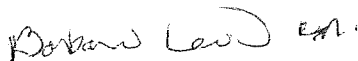
None.

December 11, 2019 Regular Session Board Meeting Minutes  
(to be Approved 01/08/2020)

**ACTION:**

Motion by B. Levin, seconded by L. Kelly, and voted unanimously to adjourn the meeting at 4:33 p.m.

Minutes of the Board's December 11, 2019, Regularly Scheduled Meeting were approved by the Board on January 8, 2020.



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Barbara Levin, 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**

239 Causeway Street  
Room 417  
Boston, Massachusetts 02114

**Wednesday, December 11, 2019**

**PRELIMINARY AGENDA AS OF 11/29/19 10:45am**

<b>Estimated Time</b>	<b>Item #</b>	<b>Item</b>	<b>Exhibit</b>	<b>Presented by</b>
9:00 a.m.	I.	<b>CALL TO ORDER &amp; DETERMINATION OF QUORUM</b>	None	
	II.	<b>APPROVAL OF AGENDA</b>	Agenda	
	III.	<b>APPROVAL OF MINUTES</b> A. Draft Minutes for the November 13, 2019 Meeting of the <i>Board of Registration in Nursing, Regular Session</i>	Minutes	
	IV.	<b>REPORTS, ANNOUNCEMENTS AND ADMINISTRATIVE MATTERS</b> A. Announcements	Oral/Memo	LS
	V.	<b>SARP</b> A. SARP Activity Report - NONE	None	
	VI.	<b>PROBATION</b> A. Probation Staff Action Report - NONE	None	
	VII.	<b>PRACTICE</b> A. Practice Coordinator Staff Report -- NONE	None	

COMMONWEALTH OF MASSACHUSETTS  
Board of Registration in Nursing

<b>VIII.</b>	<p><b>EDUCATION</b></p> <ul style="list-style-type: none"> <li>A. Nursing Education Staff Report - NONE</li> <li>B. 244 CMR 6.04 (1)(f) Administrative Changes, Quincy College, CEO</li> <li>C. 244 CMR 6.06               <ul style="list-style-type: none"> <li>1. 2020 Site Survey Schedule</li> <li>2. Berkshire Community College, Practical Nursing Program, Site Survey Compliance Report</li> </ul> </li> <li>D. 244CMR 6.06 (2) Site Survey Waiver Requests               <ul style="list-style-type: none"> <li>1. Becker College, Baccalaureate Degree RN Program</li> <li>2. Westfield State University, Baccalaureate Degree RN Program</li> </ul> </li> <li>E. 244 CMR 6.08               <ul style="list-style-type: none"> <li>1. Berkshire Community College, Associate Degree Nursing Program, Site Survey Compliance Report</li> <li>2. Cape Cod Community College, Associate Degree Nursing Program, Compliance Report</li> </ul> </li> </ul>	<p>None Memo</p> <p>Memo Compliance Report</p> <p>Compliance Report Compliance Report</p> <p>Compliance Report Compliance Report</p>	<p>HCR</p> <p>HCR HCR</p> <p>HCR AM</p> <p>AM AM</p>
<b>IX.</b>	<p><b>REQUESTS FOR LICENSE REINSTATEMENT</b></p> <ul style="list-style-type: none"> <li>A. Rose Reveil, NUR-2017-0181, RN263890</li> </ul>	<p>Memo</p>	<p>LF</p>
<b>X.</b>	<p><b>STRATEGIC DEVELOPMENT, PLANNING AND EVALUATION</b></p> <ul style="list-style-type: none"> <li>A. Presentation/Report               <ul style="list-style-type: none"> <li>1. Legislative Updates</li> <li>2. Massachusetts Coalition for the Prevention of Medical Errors:                   <ul style="list-style-type: none"> <li>a. September 2019 Coalition Meeting Minutes</li> <li>b. October 2019 Coalition Meeting Minutes</li> <li>c. October 2019 Coalition Meeting Report</li> <li>d. November 2019 Coalition Meeting Report</li> <li>e. November 2019 Coalition Meeting Presentation Handout</li> </ul> </li> <li>3. SARP Policy 18-01: SARP Participant's Re-Entry into Monitored Practice</li> </ul> </li> <li>B. Topics for Next Agenda</li> </ul>	<p>Oral</p> <p>Minutes Minutes Report Report Handout</p> <p>Policy</p>	<p>LH/LN LH</p> <p>MG</p>

COMMONWEALTH OF MASSACHUSETTS  
Board of Registration in Nursing

	<b>XI.</b>	<p><b>EXECUTIVE SESSION</b></p> <p>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"> <li>1. Specifically, the Board will discuss and evaluate the Good Moral Character as required for registration for pending applicants.</li> <li>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.</li> <li>3. Specifically, the Board will discuss and evaluate pending disciplinary complaints that involve patient records and treatment of patients.</li> <li>4. Approval of prior executive session minutes in accordance with M.G.L. c. 30A, § 22(f) for sessions held during the November 13, 2019 meeting.</li> </ol>	CLOSED SESSION	
		<b>LUNCH BREAK</b>		
	<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 Yulanda Kiner, Phone: 617-624-5848 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.*