

**COMMONWEALTH OF MASSACHUSETTS
BOARD OF REGISTRATION IN NURSING**
239 Causeway Street, Room 417A
Boston, MA 02114

And Via WebEx

Wednesday, December 9, 2020 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=e824058a4149b6e1f30bed12c3c528f24>

Join by Phone:

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Access code: 178 663 9545

Minutes of the Regularly Scheduled Board Meeting

Wednesday, December 9, 2020

Board Members Present In Room 417

L. Kelly, DNP, Chairperson

Board Members Not Present

A. Alley, RN

Board Members Present Via Audio Or Video

L. Keough, CNP, Vice Chairperson (Left at 4:00 p.m.)

K.A. Barnes, JD, RPh

K. Crowley, DNP (Left at 4:25 p.m.)

D. Drew, MBA, Public Member

G. Gravlin, EdD

J. Kaneb, MBA, Public Member

C. LaBelle, RN

D. Nikitas, RN

E. Pusey-Reid, DNP

L. Wu, RN

Staff Present In Room 417

C. MacDonald, RN, DNP, Deputy Executive Director

P. McNamee, RN, MS, Nursing Practice Coordinator

H. Caines Robson, RN, MSN, Nursing Education
Coordinator

S. Waite, RN, DNP, Nursing Education Coordinator

K. Jones, Probation Compliance Officer

L. McKenzie, Temporary Paralegal

P. Scott, Licensing Coordinator

S. Gaun, Office Support Specialist I

G. Rivera, MBA, Office Support Specialist I

Staff Not Present

M. Campbell, RN, JD, Nursing
Investigations Supervisor

Staff Present Via Audio Or Video

L. Silva, RN, DNP, Executive Director
L. Hillson, RN, MSN, PhD, Assistant Director for
Policy and Research
P. McNamee, RN, MS, Nursing Practice Coordinator
C. DeSpirito, RN, JD, Complaint Resolution Coordinator
O. Atueyi, JD, Board Counsel
B. Oldmixon, JD, Board Counsel
H. Cambra, RN, JD, Interim SARP Coordinator
S. Hall, SARP Monitoring Coordinator
L. Ferguson, Paralegal
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 9:05 a.m., L. Kelly, Chairperson, called the December 9, 2020 Regularly Scheduled Board Meeting to order.

TOPIC:

Approval of REVISED Agenda

DISCUSSION:

None.

ACTION:

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

TOPIC:

Approval of Board Minutes for the October 30, 2020 Meeting of the Regularly Scheduled Board Meeting

DISCUSSION:

None.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with K.A. Barnes, K. Crowley, D. Drew, G. Gravlin, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu unanimously in favor to accept the Minutes of the October 30, 2020 Regularly Scheduled Board Meeting as presented.

TOPIC:

December 9, 2020 Regular Session Board Meeting Minutes
(to be Approved 01/13/2021)

Approval of Board Minutes for the REVISED November 9, 2020 Meeting of the Regularly Scheduled Board Meeting

DISCUSSION:

None.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with K.A. Barnes, K. Crowley, D. Drew, G. Gravlin, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu unanimously in favor to accept the Minutes of the REVISED November 9, 2020 Regularly Scheduled Board Meeting as presented.

TOPIC:

Reports, Announcements and Administrative Matters

A. Announcements

DISCUSSION:

A. C. MacDonald stated Stacey Waite, RN, is the New Nursing Education Coordinator.

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

Review of Nursing Position, T. Tang, NUR-2012-0237, RN227534

DISCUSSION:

K. Jones summarized her previously distributed memorandum and attached exhibits to the Board. Several Board members and staff discussed the Revised 10/20/2020 Job Description, the discrepancies, their concerns, the 11/9/2020 Letter from the Program Director and the Board's options.

ACTION:

Motion by K.A. Barnes, seconded by L. Keough, and voted by roll call with K.A. Barnes, K. Crowley, D. Drew, G. Gravlin, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu unanimously in favor to approve Staff Action for the Probation Compliance Officer to approve an Amended Job Description striking the “Due to COVID-19” language and adding the language from the Amendment.

TOPIC: Practice Coordinator Staff Report

DISCUSSION:

None.

ACTION:

None.

TOPIC: Education

Nursing Education Staff Report

DISCUSSION:

None.

ACTION:

None.

TOPIC: Education

244 CMR 6.04 (1)(c) & (1)(f) Administrative Changes, Upper Cape Cod Regional Technical School PN Program

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. There was no discussion. H. Caines Robson confirmed the matter is regarding 244 CMR 6.04 (1)(f) only and not 244 CMR 6.04 (1)(c).

J. Pelletier, Director of Practical Nursing Program, was present via video. J. Pelletier apologized for forwarding the notification to H. Caines Robson at a later date.

ACTION:

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with K.A. Barnes, K. Crowley, D. Drew, G. Gravlin, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu unanimously in favor to find compliance with regulation 244 CMR 6.04(1)(f) in the notification of the appointment of Roger Dollard Forget, JR, BS, MEd, CEO (Superintendent).

TOPIC: Education

244 CMR 6.06 (2) Site Survey Waiver, Anna Maria College Baccalaureate Degree RN Program

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. Several Board members discussed the Program completion rates which were below 70%, the program's retention rates, and the ACEN requirements.

L. Esper, program administrator, was present via video. L. Esper stated the program is working on improving its compliance with the regulations and the retention rates. L. Esper stated the program has been reviewing the Program completion rates, looking at the admissions, offering the academic enrichments to the students, offering academic sessions for the classes and reinforcing the NCLEX content within the lectures.

ACTION:

Motion by K. Crowley, seconded by L. Keough, and voted by roll call with K.A. Barnes, K. Crowley, D. Drew, G. Gravlin, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu 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), (2)(a), (2)(b), (3)(a)1, (3)(a)2, (3)(a)3, (3)(b), (4)a, (4)b, (5)(a), (5)(b), (5)(d), (5)(e) and noncompliance with 244 CMR 6.04 (5)(f).
2. Accept the Program's 244 CMR 6.07 (3) Program Change report for low completion rate and that the program has provided an acceptable plan to address.
3. Continue Full Approval status at this time.
4. The Program qualifies for a Waiver of 244 CMR 6.06 (2)(a) Site Survey of Nursing Education Programs.
5. Direct the Program to provide to the Board the following in order to demonstrate correction of the regulatory deficiencies:

Due March 31, 2021:

- a. revised written agreements with cooperating agencies utilized as clinical learning sites specifying that they are developed and reviewed annually by both program and agency personnel; with defined parameters of activities and the responsibilities of the program, the student and the cooperating agency, including but not limited to, that patient safety is the responsibility of the agency and student evaluation is the responsibility of the Program faculty [ref: 244 CMR 6.04 (5)(f)].

6. For the Effectiveness of the program:

Due March 31, 2021:

- a. revised Systematic Evaluation Plan to include measurable expected levels of achievement for all component of the regulation.

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)].

TOPIC: Education

244 CMR 6.06 (2) Site Survey Waiver, College of Our Lady of the Elms Baccalaureate Degree RN Program

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. The program administrator was not present. H. Caines Robson stated the Last Board Site Visit was in 2017. H. Caines Robson confirmed the program administrator received the Notice of the 12/9/2020 Board of Registration in Nursing Board Meeting and this Agenda Item will be presented. Several Board members and staff discussed their concerns, the program did not submit the 2020 Annual Report for review as part of the waiver application. The program completion rate was 80% for 2017 for the traditional program. The current Systematic Evaluation Plan does not have any data for 2018 and 2019, the Site Survey Waiver is not appropriate at this time, due to the incomplete data in the SEP and the failure to have the 11 Board required policies.

ACTION:

Motion by D. Drew, seconded by L. Keough, and voted by roll call with K.A. Barnes, K. Crowley, D. Drew, G. Gravlin, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu 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), (2)(a), (2)(b), (3)(a)3, (3)(b), (4)a, (4)b, (5)(a), (5)(b), (5)(d), (5)(e) and noncompliance with 244 CMR 6.04 (1)(e), (3)(a)1, (3)(a)2, (5)(f).
2. Accept the Program's 244 CMR 6.07 (3) Program Change report for low completion rate and that the program has provided an acceptable plan to address.
3. Continue Full Approval status at this time.
4. Deny the Waiver of 244 CMR 6.06 (2)(a) Site Survey of Nursing Education Programs.
5. Direct the Program to provide to the Board the following in order to demonstrate correction of the regulatory deficiencies:

Due March 31, 2021:

- a. revised written agreements with cooperating agencies utilized as clinical learning sites specifying that they are developed and reviewed annually by both program and agency personnel; with defined parameters of activities and the responsibilities of the program, the student and the cooperating agency, including but not limited to,

that patient safety is the responsibility of the agency and student evaluation is the responsibility of the Program faculty [ref: 244 CMR 6.04 (5)(f)].

6. For the Effectiveness of the program:

Due March 31, 2021:

- a. Revised Systematic Evaluation Plan to include all component of the regulation 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 11 Board required 11 policies [ref 244 CMR 6.04 (1)(e)].
- c. published admission policy requiring all candidates for admission to provide satisfactory evidence of secondary school graduation, or its equivalent, and compliance with the immunization requirements specified by the Massachusetts Department of Public Health [ref 244 CMR 6.04 (3)(a)1].
- d. revised published policies for the 11 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)(d) & (3)(a)2].
- e. revised written agreements with cooperating agencies utilized as clinical learning sites specifying that they are developed and reviewed annually by both program and agency personnel; with defined parameters of activities and the responsibilities of the program, the student and the cooperating agency, including but not limited to, that patient safety is the responsibility of the agency and student evaluation is the responsibility of the Program faculty [ref: 244 CMR 6.04 (5)(f)].

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)].

TOPIC: Education

244 CMR 6.07 Board Approval of Specific Nursing Education Program Changes, Assumption University, Baccalaureate Degree RN Program

DISCUSSION:

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. There was no discussion.

C. Stover, Dean of Nursing, stated the college has provided additional resources for the program. Faculty contracts will increase from nine (9) months to 12 months to support the Summer Term with full time faculty. In addition, the Health Science Building where the Baccalaureate Degree Nursing Program is located in is now complete and have dedicated space for nursing students. The credit load will increase with the change of faculty contracts. The admissions of the traditional programs will stay the same and the accelerated program admissions will increase.

ACTION:

Motion by L. Kelly, seconded by K. Crowley, and voted by roll call with K.A. Barnes, K. Crowley,

D. Drew, G. Gravlin, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu unanimously in favor to:

1. Find the program is in compliance with regulation 244 CMR 6.07 with the written request for Board approval of program changes in accordance with current Board guidelines.
2. Find the Assumption University Baccalaureate Degree Nursing Program's proposed addition of a 18 month advance BSN is in compliance with Board regulations, 244 CMR 6.04.
3. Find the proposed program changes warrant approval.
4. Continue with Full Approval Status.

TOPIC: Education

2020 Q3 NCLEX Report, Explanation of NCLEX Data Reports, 2020 Q3 MA Graduates Regardless of State of Licensure and 2020 Q3 MA Licenses Regardless of State of Education

DISCUSSION:

H. Caines Robson was available for questions. Several Board members stated they were pleased with the results considering the students were pulled out of clinicals due to the Coronavirus Pandemic for the last two (2) semesters.

ACTION:

So noted.

TOPIC: Requests for License Reinstatement

K. Baez, NUR-2019-0075, RN2262145

DISCUSSION:

B. Oldmixon summarized her previously distributed memorandum and attached exhibits to the Board. K. Crowley asked about the remedial Continuing Education Units. B. Oldmixon confirmed the Licensee completed them. There was no discussion.

The Licensee was present via video. The Licensee stated there was a misunderstanding on her end regarding the number of Continuing Education Units she needed to complete. The Licensee stated she completed the 15 Continuing Education Units for Massachusetts.

ACTION:

Motion by L. Keough, seconded by L. Kelly, and voted by roll call with K.A. Barnes, K. Crowley, D. Drew, G. Gravlin, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu unanimously in favor to reinstate the Licensee's RN License with the STANDARD POST-SURRENDER PROBATION without the medical evaluation for a minimum of one (1) year upon Board staff's verification that the Licensee has complied with the reinternment requirements.

TOPIC: Strategic Development, Planning and Evaluation

Massachusetts Coalition for the Prevention of Medical Errors, October 2020 Report

DISCUSSION:

L. Hillson was available for questions.

ACTION:

So noted.

TOPIC: Strategic Development, Planning and Evaluation

Toxicology 101 Presentation By Barry Lubin, MD, Medical Review Officer, Affinity eHealth

DISCUSSION:

B. Lubin summarized his previously distributed PowerPoint Presentation to the Board. B. Lubin stated the Forensic Drug Screening procedures, the various types of illegal urine specimens that he has seen, Chain of Custody procedures, there is no room for false positives, the laboratory has conclusive evidence in the specimen that certain drugs are present, the various pH levels of 3.5 (acidic) to 11 (normal), the temperature of the specimen is important, the types of invalid urine samples, and the various creatinine levels. C. LaBelle asked B. Lubin about the low creatinine levels the Board members have seen in Licensees' Random Toxicology Screenings. In response, B. Lubin stated the average creatinine level of the average individual in the average day is 100 to 150. B. Lubin stated if the Licensee has a low creatinine level, the Licensee has to do certain things, and the Licensee cannot drink more than 32 ounces of a full liquid before the Random Toxicology Screening. B. Lubin stated about the abnormal and diluted specimens.

B. Lubin stated the laboratory tests for ethyl glucuronide (EtG) and ethyl sulfate (EtS), which are metabolites of alcohol, in the urine sample, they can be detected in the system for up to 72 hours after the individual has ingested alcohol, and this is a valuable test for monitoring. B. Lubin stated that phosphatidylethanol (PEth), another metabolite of alcohol, is found in the blood of an individual who ingested alcohol. B. Lubin stated that one (1) ounce of alcohol equals one (1) five (5) ounce glass of wine, and / or one (1) 12 ounce can of beer, and / or one (1) and one-half (1/2) shots of spirits. B. Lubin stated that EtG and EtS can be elevated, not from alcohol ingestion, but from incidental environmental exposure. B. Lubin stated they have only been proven to be elevated if someone has ingested alcohol, and not from incidental environmental exposure.

B. Lubin stated the alcohol-based hand sanitizer issue. B. Lubin stated that regarding the ease of production and the cost of production, the two (2) types of alcohol which are available in hand sanitizers, which can be found in hospitals and supermarkets, are a combination of ethyl alcohol and isopropol (rubbing) alcohol. B. Lubin stated the isopropol (rubbing) alcohol will not influence any drug screening, and people will not drink isopropol (rubbing) alcohol because it is poisonous. B. Lubin stated the first solution for the hand sanitizer problem is nurses on abstinence agreements need to be responsible and get isopropol (rubbing) alcohol only in hand sanitizers. B. Lubin stated that if the nurses use isopropol (rubbing) alcohol only in the hand sanitizers, they will not have a problem with the hand sanitizer argument, and soap and water still work. B. Lubin stated the PEth Test will differentiate incidental environmental exposure from alcohol ingestion and it is critical in separating them.

D. Drew asked B. Lubin about the Licensees' incidental use of alcohol-based hand sanitizers, and reconciling the alcohol-based hand sanitizer issue. In response, B. Lubin stated regarding the data that D. Drew presented, with an EtG of 800, 900, 1000 or 1100 and with a negative PEth Test, there is no evidence of significant alcohol ingestion, there is a possibility of incidental environmental exposure, and he would recommend very close monitoring. B. Lubin stated the Positive PEth Test will prove the

Licensee ingested alcohol. The Negative PEth Test will prove there is no evidence of significant alcohol ingestion, but keep the radar on that Licensee.

D. Drew stated there are Licensees who are in recovery and who are trying to succeed, and she is in a dilemma regarding the incidental environmental exposure and the alcohol ingestion drug screening results. B. Lubin stated there is no black and white and he cannot definitively state the Licensee ingested alcohol. B. Lubin stated he recommends closer monitoring going forward. K. Crowley asked B. Lubin if the blood alcohol level accesses true alcohol and not incidental environmental exposure. In response, B. Lubin stated the problem with blood alcohol is the amount of time it takes to vanish. B. Lubin stated the Licensees will wait to the afternoon to go into to take the drug screening if they ingested alcohol the evening before. B. Lubin stated the Negative Hair and Nail Drug Screening Results never prove abstinence, they are not primary methods of monitoring and they can be adulterated. B. Lubin stated the Positive Hair and Nail Drug Screening Results are significant. K. Crowley asked B. Lubin why the Board would require Hair and Nail Drug Screenings if the Negative Hair and Nail Drug Screening Results are not significant and do not prove anything. In response, B. Lubin stated the Hair and Nail Drug Screenings can be valuable and have a window of three (3) to six (6) months. B. Lubin stated the only way the Positive Urine Drug Screening Result will go away is to have it tested again and prove the Laboratory made an error. K.A. Barnes stated the alternative testing is offered because of the low creatinine levels. C. LaBelle asked B. Lubin if there is a document the Board Staff can send to the Licensees regarding alerting them that they need to be more cautious. B. Lubin stated that is a great idea and he can help work on that document with H. Cambra. H. Cambra stated the SARP Staff has communicated with the SARP Participants through the Affinity Accounts regarding hand washing, the ethanol-based hand sanitizers, and the instructional digital videos which B. Lubin made. B. Lubin spoke about informing the Licensees about the use of Kambucha, CBD, Hemp and Poppy Seeds.

ACTION:

So noted.

TOPIC: Strategic Development, Planning and Evaluation

Topics for Next Agenda

DISCUSSION:

D. Drew spoke about balancing religious freedoms versus medical practice regarding LGBTQI patients. L. Kelly stated D. Drew should have received an e-mail message regarding what specific questions she has. D. Drew stated she does not know what specifically the Board needs to know. C. MacDonald asked D. Drew to respond to the e-mail message and that she and L. Kelly will respond to her offline regarding this matter. D. Drew stated the Board has five (5) Board Meetings between now and June 2021 when the United States Supreme Court will make its decision for the Board to decide how it will handle the matter.

ACTION:

So noted.

Break from 11:27 a.m. to 11:44 a.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 K.A. Barnes, K. Crowley, D. Drew, G. Gravlin, J. Kaneb, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu unanimously in favor to convene the Executive Session at 11:44 a.m. as per Purpose One of G.L. c.30A, §21 (a)(1).

G.L. c. 30A, § 21 Executive Session 11:44 a.m. to 4:48 p.m.

TOPIC:

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

DISCUSSION:

None.

ACTION:

Motion by L. Kelly, seconded by K.A. Barnes, and voted by roll call with K.A. Barnes, D. Drew, G. Gravlin, J. Kaneb, L. Kelly, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu unanimously in favor to convene the G.L. c. 112, s. 65C Session at 4:48 p.m.

G.L. c. 112, s. 65C Session 4:48 p.m. to 4:52 p.m.

TOPIC:

Adjudicatory Session

DISCUSSION:

None.

ACTION:

Motion by L. Kelly, seconded by K.A. Barnes, and voted by roll call with K.A. Barnes, D. Drew, G. Gravlin, J. Kaneb, L. Kelly, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu unanimously in favor to convene the Adjudicatory Session at 4:52 p.m. to deliberate on proposed final decisions and orders, and rulings on pending adjudicatory matters.

Adjudicatory Session 4:52 p.m. to 5:10 p.m.

TOPIC:

Adjournment

DISCUSSION:

December 9, 2020 Regular Session Board Meeting Minutes
(to be Approved 01/13/2021)

None.

ACTION:

Motion by L. Kelly, seconded by K.A. Barnes, and voted by roll call with K.A. Barnes, D. Drew, G. Gravlin, J. Kaneb, L. Kelly, C. LaBelle, D. Nikitas, E. Pusey-Reid and L. Wu unanimously in favor to adjourn the meeting at 5:10 p.m.

Minutes of the Board's December 9, 2020, Regularly Scheduled Meeting were approved by the Board on January 13, 2021.

Linda Kelly, DNP

Linda Kelly, DNP

Chairperson

Board of Registration in Nursing

Agenda with exhibits list attached.

**COMMONWEALTH OF MASSACHUSETTS
Board of Registration in Nursing**

REVISED Notice of the Regularly Scheduled Meeting

Regular Session

239 Causeway Street
Room 417
Boston, Massachusetts 02114

And Via WebEx

Wednesday, December 9, 2020 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=e824058a4149b6e1f30bed12c3c528f24>

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Access code: 178 663 9545

Wednesday, December 9, 2020

PRELIMINARY AGENDA AS OF 12/1/20 1:30pm

Estimated Time	Item #	Item	Exhibit	Presented by
9:00 a.m.	I.	CALL TO ORDER & DETERMINATION OF QUORUM	None	
	II.	APPROVAL OF REVISED AGENDA	Agenda	
	III.	APPROVAL OF MINUTES A. Draft Minutes for the October 30, 2020 Meeting of the <i>Board of Registration in Nursing, Regular Session Via WebEx</i> B. Draft REVISED Minutes for the November 9, 2020 Meeting of the <i>Board of Registration in Nursing, Regular Session Via WebEx</i>	Minutes Minutes	
	IV.	REPORTS, ANNOUNCEMENTS AND ADMINISTRATIVE MATTERS A. Announcements	Oral/Memo	LS
	V.	SARP A. SARP Activity Report - NONE	None	

COMMONWEALTH OF MASSACHUSETTS
Board of Registration in Nursing

VI.	PROBATION A. Probation Staff Action Report B. Review of Nursing Position, in the Matter of 1. T. Tang, NUR-2012-0237, RN227534	Report Memo	KJ KJ
VII.	PRACTICE A. Practice Coordinator Staff Report - NONE	None	
VIII.	EDUCATION A. Nursing Education Staff Report - NONE B. 244 CMR 6.04 (1)(c) & (1)(f) Administrative Changes 1. Upper Cape Cod Regional Technical School PN Program C. 244 CMR 6.06 (2) Site Survey Waiver 1. Anna Maria College Baccalaureate Degree RN Program 2. College of Our Lady of the Elms Baccalaureate Degree RN Program D. 244 CMR 6.07 Board Approval of Specific Nursing Education Program Changes 1. Assumption University Baccalaureate Degree RN Program E. 2020 Q3 NCLEX Report 1. Explanation of NCLEX Data Reports a. 2020 Q3 MA Graduates Regardless of State of Licensure b. 2020 Q3 MA Licenses Regardless of State of Education	None Report Report Report Report Report Report Report	HCR HCR HCR HCR HCR HCR HCR HCR
IX.	REQUESTS FOR LICENSE REINSTATEMENT A. K. Baez, NUR-2019-0075, RN2262145	Memo	BAO
X.	STRATEGIC DEVELOPMENT, PLANNING AND EVALUATION A. Massachusetts Coalition for the Prevention of Medical Errors: 1. October 2020 Report B. Toxicology 101 Presentation by Barry Lubin, MD, Medical Review Officer, Affinity eHealth C. Topics for Next Agenda	Report Presentation	LH BL

COMMONWEALTH OF MASSACHUSETTS
Board of Registration in Nursing

<>		LUNCH BREAK	
	XI.	<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 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 October 30, 2020 and November 9, 2020 meetings. 	CLOSED SESSION
	XII.	M.G.L. c. 112, § 65C SESSION	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 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.