The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
250 Washington Street, Boston, MA 02108-4619

MAURA T. HEALEY
Governor

KIMBERLEY DRISCOLL
Lieutenant Governor

KATHLEEN E. WALSH
Secretary

ROBERT GOLDSTEIN, MD, PhD Commissioner

Tel: 617-624-6000
www.mass.gov/dph

August 6, 2024

Via First Class and Certified Mail No. 9589 0710 5270 1788 9276 23
Return Receipt Requested

Michelle DeMange
36 Tobey Road, Unit 27
Dracut, MA 01826

RE: In the Matter of Michelle DeMange
Docket No. NUR-2016-0210
License No. RN168918 (Exp.)

Dear Ms. DeMange:

Enclosed please find the *Final Decision and Order on Probation Compliance ("Final Decision")* issued by the Board of Registration in Nursing on August 6, 2024 and **effective August 16, 2024**. Your appeal rights are noted on page .

Please note that as of the effective date, your license status will change to **Suspended**. It will remain in this status until the Board notifies you of a change in license status in accordance with the terms of the order.

Please direct all questions, correspondence and documentation relating to licensure reinstatement to the attention of Lisa Ferguson at the address above. You may also contact Ms. Ferguson at lisa.ferguson@mass.gov.

You may contact Meghan Bresnahan, Board Counsel at Meghan.bresnahan@mass.gov with any questions that you may have concerning this matter.

Sincerely,

Heather Cambra BSN, RN, JD

Heather Cambra, BSN, RN, JD
Executive Director
Board of Registration in Nursing
Enclosures

cc: Kim Jones, Probation Compliance Officer

COMMONWEALTH OF MASSACHUSETTS

SUFFOLK, COUNTY

BOARD OF REGISTRATION IN NURSING

In the Matter of
Michelle DeMange
License No. RN168918 (Exp.)
License Expired 04/01/2024

Docket No. NUR-2016-0210

FINAL DECISION AND ORDER ON PROBATION COMPLIANCE

I. PROCEEDINGS

On February 29, 2024, the Board of Registration in Nursing ("Board") issued and duly served Michelle DeMange ("Respondent") a *Notice of Violation and Intent to Suspend* ("Notice") related to her non-compliance with her Consent Agreement for Probation ("Agreement"), effective March 4, 2019. The Notice set forth that Respondent was in violation of the Agreement and informed her of her right to request a hearing on the issue of whether or not she was in violation. Respondent submitted a timely request for a hearing.

On June 27, 2024 , a *Hearing Notice (rescheduled)* was issued to Respondent informing her that a hearing would be held before the Board on Wednesday, July 10, 2024.[1] The *Hearing Notice* included a list and copies of documents that the Board would consider during the hearing. It also notified Respondent of her opportunity to submit documents and present witnesses.

On July 10, 2024, the Board held a hearing, in executive session, via Zoom during its regularly scheduled meeting and received evidence on the issue of Respondent's compliance with the terms of the Agreement. Respondent participated via Zoom.

At the hearing, the Board reviewed the following documents:

1. Consent Agreement for Probation effective April 24, 2021
2. Notice of Violation and Intent to Suspend dated February 29, 2024
3. Written Statement by Respondent received March 14, 2024
4. Compliance Summary Report

[1] Hearing Notices were also sent to Respondent on April 24, 2024, and May 9, 2024, but the hearing was deferred to July 10, 2024.

During the hearing, the Board heard from Board Counsel and the Probation Compliance Officer ("PCO"), Kim Jones. The summary included the following:

1. Respondent entered into a Consent Agreement for Probation for no less than one-year, effective March 4, 2019.

2. A Notice of Violation and Intent to Suspend was issued to Respondent on February 29, 2024, indicating that the Board would exercise its discretion under the Agreement and suspend Respondent's license due to violations of the Agreement. Respondent was informed of her right to a hearing.

3. On March 14, 2024, Respondent submitted a request for hearing and written statement.

4. The Agreement contained standard probation requirements, including active practice requirements (paragraph 4(d)) and maintaining contact with the Board (paragraph 4(f)). Respondent had the following violations:

    - *On September 9, 2020, the Board granted the Respondent's request for an extension for her to complete the active practice requirement of her Consent Agreement. The PCO had already granted the Respondent four separate three-month extensions. The Respondent had not contacted the Board/PCO since June 2021. The PCO attempted to contact the Respondent via us mail (not returned) and via email (no response).*

The Board heard from Respondent. She stated that she was caring for [redacted] and lapsed on submitting her work searches due to [redacted]. Respondent acknowledged her lack of communication with the Board and stated she is not the person she was when she entered into the Agreement in 2016. Respondent stated she is not currently working in a nursing position. Board Chair clarified the extensions granted to Respondent and the timeline of Respondent's non-communication (PCO had not heard from Respondent since June 2021). The next communication was in February 2024 when Respondent was brought before Board for the violations. Board Chair asked the members if there is a reason to change the vote from February 14, 2024. Board members asked Respondent why she had not submitted job searches and Respondent stated it was due to [redacted] Respondent stated she was not allowed to fax or email the documents. Board members clarified with PCO if Respondent could have emailed the documents and PCO confirmed the documents could have been emailed.

II. FINDINGS

The Board makes the following finding:

1. Respondent violated Paragraph 4(d) and 4(f) of the Agreement. The Board upheld their vote of February 14, 2024, which was to suspend Respondent's license.

III. ORDER

Pursuant to Paragraph 7 of the Agreement, the Board orders the following:

1. The Respondent's Registered Nurse license, RN168918, is **SUSPENDED** for an indefinite period.

2. Respondent shall not practice as a Registered Nurse in Massachusetts on or after the Effective Date of this Order. "Practice as a Registered Nurse" includes, but is not limited to, seeking and accepting a paid or voluntary position as a Registered Nurse or in any way representing herself as a Registered Nurse in Massachusetts. The Board shall refer any evidence of unlicensed practice to appropriate law enforcement authorities for prosecution as provided by G.L. c. 112, §§ 65 and 80.

3. The Board may choose to reinstate Respondent's license if the Board determines in its sole discretion that reinstatement is in the best interests of the public health, safety and welfare. Respondent may petition the Board in writing for relicensure when she can provide documentation satisfactory to the Board demonstrating her ability to practice nursing in a safe and competent manner. With any petition for relicensure, the Respondent shall have submitted directly to the Board:

    a. reports from Respondent's primary care provider and any specialist(s) whom Respondent may have consulted verifying that Respondent is medically able to resume the safe and competent practice of nursing, which meets the requirements set forth in **Attachment B 1;**

    b. if employed during the year immediately preceding Respondent's petition for relicensure, have each employer from said year submit on official letterhead an evaluation reviewing Respondent's attendance, general reliability, and overall job performance;[2]

    c. certified Court and/or Agency documentation that there are no pending actions or obligations, criminal or administrative, against the Respondent before any court or Administrative Agency including, but not limited

        i. Documentation that *at least one (1) year prior to any petition for reinstatement* the Respondent satisfactorily completed all court requirements (including probation) imposed on her/him in connection with any criminal matter and a description of those completed requirements and/or the disposition of such matters;[3] and

[2] If Respondent was not employed during this period, submit an affidavit so attesting.

[3] The Respondent shall also provide, if requested, an authorization for the Board to obtain a Criminal Offender Record Information (CORI) Report of the Respondent conducted by the Massachusetts Criminal History Systems Board and a sworn written statement that there are no pending actions or obligations, criminal or administrative, against the Respondent before any court or administrative body in any other jurisdiction.

ii. Certified documentation from the state board of nursing of each jurisdiction in which the Respondent has ever been licensed to practice as a nurse, sent directly to the Massachusetts Board identifying her license status and discipline history, and verifying that her nursing license is, or is eligible to be, in good standing and free of any restrictions or conditions.

4. Documentation satisfactory to the Board of Respondent's successful completion of all continuing education equivalent to the continuing education required by Board regulations for the two (2) license renewal cycles immediately preceding any petition for relicensure.

The Board may choose to reinstate the Respondent's license if the Board determines that reinstatement is in the best interests of the public at large. Any reinstatement of the Respondent's license may be conditioned upon the Respondent entering into a Consent Agreement for the Probation of her license including other requirements that the Board determines at the time of relicensure to be reasonably necessary in the best interests of the public health, safety and welfare.

The Board voted to issue this Final Decision and Order on Probation Compliance at its meeting held on July 10, 2024, by the following vote:

In favor: *A. Alley, MSN, RN, A. Joseph, MD, L. Kelly, DNP, RN, CNP, L .Keough, PhD, RN, CNP, M. McAuliffe, DNP, RN, J. Monagle, PhD, RN, D. Nikitas, BSN, RN, R. Reynolds, PhD, MSN, RN, V. Percy, MSN, RN*

Abstained: *None*

Recused: *None*

Opposed: *None*

Absent: *K.A. Barnes, JD, RPh, K. Crowley, DNP, RN, A. Sprague, BS, RN*

EFFECTIVE DATE OF ORDER

This *Final Decision and Order on Probation Compliance* becomes effective upon the tenth (10^{th}) day from the date issued (see "Date Issued" below).

RIGHT TO APPEAL

Respondent is hereby notified of the right to appeal this *Final Decision and Order on Probation Compliance* to the Supreme Judicial Court within thirty (30) days of receipt of notice of this *Final Decision and Order on Probation Compliance* pursuant to M.G.L. c. 112, § 64 or

by filing a claim for judicial review in Superior Court within thirty (30) days of receipt of notice of this *Final Decision and Order on Probation Compliance* pursuant to M.G.L. c. 30A, § 14.

Board of Registration in Nursing,

Heather Cambra, BSN, RN, JD
Executive Director
Board of Registration in Nursing

Date Issued : August 6, 2024

Notified:

VIA FIRST CLASS AND CERTIFIED MAIL NO. 9589 0710 5270 1788 9276 23 RETURN RECEIPT REQUESTED

Michelle DeMange
36 Tobey Road, Unit 27
Dracut, MA 01826

BY INTER-OFFICE MAIL
Kimberly Jones, Probation Compliance Officer
250 Washington Street
Boston, MA 02108

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
250 Washington Street, Boston, MA 02108-4619

MAURA T. HEALEY
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Lieutenant Governor

KATHLEEN E. WALSH
Secretary

ROBERT GOLDSTEIN, MD,
PhD Commissioner

Tel: 617-624-6000
www.mass.gov/dph

February 29, 2024

Via First Class and Certified Mail No. 9589 0710 5270 0876 5999 71
Return Receipt Requested

Michelle DeMange
36 Tobey Road, Unit 27
Dracut, MA 01826

RE: In the Matter of Michelle DeMange
Docket No. NUR-2016-0210
License No. RN168918

NOTICE OF VIOLATION AND INTENT TO SUSPEND

Dear Ms. DeMange:

Effective March 4, 2019, you entered into a Consent Agreement for Probation ("Agreement") with the Board of Registration in Nursing ("Board"). The Agreement obligates you to comply with specified licensure conditions during the period of time while your license is on probation. A copy of the Agreement is enclosed with this letter for your review.

You are in violation of the Agreement . Under Paragraph 7 of the Agreement, the Board may impose further discipline against your license in the event that you violate any provision of the Probation Agreement. At its meeting on February 14, 2024, the Board voted to **SUSPEND your nursing license, effective in 10 days.**

The basis for the Board's contention that you are in violation of the Agreement is as follows:

1. On September 9, 2020, the Board granted the Licensee's request for an extension in order for her to complete the active practice requirement of her Consent Agreement. The Probation Compliance Officer had already granted Licensee four separate three-month extensions. The Licensee has not had contact with the Board since June 2021. The Probation Compliance Officer has attempted to contact the Licensee via mail and email with no response from Licensee.

You have a right to a hearing on the limited issue of whether you are in compliance with, or in violation of, the terms of the Agreement. You may claim your right to a hearing by submitting a written statement to the Board within seven (7) days of receipt of this letter. Your written statement must include specific facts which support the determination that you are in compliance, and not in violation, with the provisions of the Agreement identified above. Your written statement must also include a request for a hearing. Please send your written statement to:

Meghan Bresnahan, Esq.
Board Counsel for the Board of Registration of Nursing
Office of General Counsel
250 Washington Street- 2nd Floor
Boston, MA 02108
Meghan.bresnahan@mass.gov

Your failure to submit a written statement of facts and request for a hearing within seven (7) days shall constitute a waiver of your right to a hearing on the issue of your violation of the Agreement.

Sincerely,

Heather Cambra BSN, RN, JD

Heather Cambra, BSN, RN, JD
Executive Director
Board of Registration in Nursing

The Commonwealth of Massachu
Executive Office of Health and Human Ser
Department of Public Health
250 Washington Street, Boston, MA 02108

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

MARYLOU SUDDERS
Secretary

MONICA BHAREL, MD, MPH
Commissioner

Tel: 617-624-6000
www.mass.gov/dph

Attachment 1

March 11, 2019

By First Class and Certified Mail
No. *7017 0530 0000 3482 7654*

Michelle DeMange
187 No. Llewellyn Street
Lowell, MA 01850-2278

Re: In the matter of Michelle DeMange
RN Lic. No. 168918
Board of Registration in Nursing, Docket No. NUR-2016-0210

Dear Ms. DeMange:

The *Consent Agreement for Probation* ("*Agreement*") that you signed and recently returned to the Board of Registration in Nursing has been signed by an authorized representative of the Board and is now in effect (please note the effective date of March 4, 2019 on the last page of the *Agreement*). A copy of the executed *Agreement* is enclosed with this letter. Please retain this copy for your records.

Please direct any questions regarding your probation to Ms. Kimberly Jones, Probation Coordinator, at (617) 973-0863.

Thank you for your cooperation in resolving this matter.

Sincerely,

Richard L. Banks, Jr.
Prosecuting Counsel
Department of Public Health
Office of the General Counsel
(617) 624-5236

Encl: Consent Agreement for Probation
cc: Janet Michael, Esq.
Kimberly Jones, Probation Coordinator

COMMONWEALTH OF MASSACHUSETTS

SUFFOLK COUNTY

BOARD OF REGISTRATION
IN NURSING

BOARD OF REGISTRATION IN NURSING Petitioner v. MICHELLE DEMANGE RN License No. 168918 RN License expires 04/01/20 Respondent		Docket No. NUR-2016-0210

CONSENT AGREEMENT FOR PROBATION

The Massachusetts Board of Registration in Nursing (Board) and MICHELLE DEMANGE (Licensee), a **Registered Nurse (RN)** licensed by the Board, License No. 168918, do hereby stipulate and agree that the following information shall be entered into and become a permanent part of the Licensee's record maintained by the Board:

1. The Licensee acknowledges that a complaint has been filed with the Board against her Massachusetts Registered Nurse license (license[1]) related to the conduct set forth in paragraph 2, identified as Docket No. NUR-2016-0210 (the Complaint).

[1] The term "license" applies to both a current license and the right to renew an expired license.

2. The Licensee admits that while employed as a Registered Nurse at Brigham and Women's Hospital in Boston, Massachusetts, in October of 2016, the Asst. Director of Nursing observed her sleeping at the nursing station. She was unresponsive to the telemetry alarm behind her and call lights. During or about June 2016 through October 2016, she removed controlled substances from the Omnicell system without documenting the disposition of the withdrawn drugs. The Licensee acknowledges that her conduct constitutes failure to comply with the Board's Standards of Conduct at 244 Code of Massachusetts Regulations (CMR) 9.03(5), (35), and (47) and warrants disciplinary action by the Board under Massachusetts General Laws (G.L.) Chapter 112, section 61 and case law ground including unprofessional conduct and conduct which undermines public confidence in the integrity of the profession.

3. The Licensee agrees that her nursing license shall be placed on **PROBATION** for no less than one **(1) year** (Probationary Period), commencing with the date on which the Board signs this Agreement (Effective Date).

4. During the Probationary Period, the Licensee further agrees that she shall comply with all of the following requirements to the Board's satisfaction:

   a. Comply with all laws and regulations governing the practice of nursing, and not engage in any continued or further conduct such as that set forth in Paragraph 2.

   b. Notify the Board in writing within ten (10) days of each change in her name and/or address.

   c. Timely renew her license to practice nursing.

   d. Maintain active employment in a position that requires a nursing license, in a setting where the Licensee receives consistent, on-site supervision by a qualified licensed nurse[2], for a minimum average of twenty (20) hours per week throughout the Probationary Period. The Licensee may not accept any home care, travel or temporary staffing assignment, or other practice assignment where consistent, on-site supervision is not in place.

      i. Within 30 days of the Effective Date, the Licensee shall notify the Board's Probation Monitor in writing if the Licensee is not employed in accordance with paragraph 4d.

   e. Review this Agreement with each of her nursing supervisors, and arrange for each nursing supervisor to submit directly to the Board:

[2] The Licensee must receive direct supervision from a licensed nurse who must have at least one (1) year of clinical nursing practice experience, no open complaints, no past discipline of the nurse's license, and who is physically located at all times in each facility in which the Licensee practices nursing.

i. a completed and signed "Supervisor Verification Form" (Form 1), provided with this Agreement, within thirty (30) days of

(1) the Effective Date *and*

(2) any subsequent employment commenced during the Probationary Period

ii. *quarterly* written reports[3], using the "Supervision Report Form" (Form 2) provided with this Agreement attesting to the quality of the Licensee's nursing practice, reliability and attendance and specifically addressing Licensee's alertness and controlled substance documentation practices including any errors and incidents[4].

f. Notify the Board's Probation Monitor in writing within ten (10) days of any change in the Licensee's employment status, including each change in Employer, each resignation or termination, and the name, address and telephone number of each new Employer.

5. The Board agrees that in return for the Licensee's execution and successful compliance with all the requirements of this Agreement it will not prosecute the Complaint.

6. If the Licensee has complied to the Board's satisfaction with all the requirements contained in this Agreement, the Probationary Period will terminate one (1) year after the Effective Date upon written notice to the Licensee from the Board[5].

7. If the Licensee does not comply with each requirement of this Agreement, or if the Board opens a Subsequent Complaint[6] during the Probationary Period, the Licensee agrees to the following:

a. The Board may upon written notice to the Licensee, as warranted to protect the public health, safety, or welfare:

i. EXTEND the Probationary Period; and/or

ii. MODIFY the Probation Agreement requirements; and/or

---

[3] The Licensee is responsible for ensuring that these reports on the required form are received by the Board commencing ninety (90) days after the Effective Date and on the first day of every third month thereafter.
[4] The Board may take action under paragraph 7 in the event that the reports reveal a practice issue which the Board deems significant.
[5] In all instances where this Agreement specifies written notice to the Licensee from the Board, such notice shall be sent to the Licensee's address of record.
[6] The term "Subsequent Complaint" applies to a complaint opened after the Effective Date, which (1) alleges that the Licensee engaged in conduct that violates Board statutes or regulations, and (2) is substantiated by evidence, as determined following the complaint investigation during which the Licensee shall have an opportunity to respond.

iii. IMMEDIATELY SUSPEND the Licensee's nursing license.

b. If the Board suspends the Licensee's nursing license pursuant to Paragraph 7(a)(iii), the suspension shall remain in effect until:

i. the Board gives the Licensee written notice that the Probationary Period is to be resumed and under what terms; or

ii. the Board and the Licensee sign a subsequent agreement; or

iii. the Board issues a written final decision and order following adjudication of the allegations (1) of noncompliance with this Agreement, and/ or (2) contained in the Subsequent Complaint.

8. The Licensee agrees that if the Board suspends her nursing license in accordance with Paragraph 7, she will immediately return her current Massachusetts license to practice as a Registered Nurse to the Board, by hand or certified mail. The Licensee further agrees that upon said suspension, she will no longer be authorized to engage in the practice of nursing in the Commonwealth of Massachusetts and shall not in any way represent herself as a Registered Nurse until such time as the Board reinstates her nursing license or right to renew such license[7].

9. The Licensee understands that she has a right to formal adjudicatory hearing concerning the Complaint and that during said adjudication she would possess the right to confront and cross-examine witnesses, to call witnesses, to present evidence, to testify on her own behalf, to contest the allegations, to present oral argument, to appeal to the courts, and all other rights as set forth in the Massachusetts Administrative Procedures Act, G. L. c. 30A, and the Standard Adjudicatory Rules of Practice and Procedure, 801 CMR 1.01 *et seq.* The Licensee further understands that by executing this Agreement she is knowingly and voluntarily waiving her right to a formal adjudication of the Complaints.

10. The Licensee acknowledges that she has been represented by legal counsel in connection with the Complaint and this Agreement.

11. The Licensee acknowledges that after the Effective Date, the Agreement constitutes a public record of disciplinary action by the Board. The Board may forward a copy of this Agreement to other licensing boards, law enforcement entities, and other individuals or entities as required or permitted by law.

[7] Any evidence of unlicensed practice or misrepresentation as a Registered Nurse after the Board has notified the Licensee of her license suspension shall be grounds for further disciplinary action by the Board and the Board's referral of the matter to the appropriate law enforcement authorities for prosecution, as set forth in G.L. c. 112, §§ 65 and 80.

12. The Licensee certifies that she has read this Agreement. The Licensee understands and agrees that entering into this Agreement is a voluntary and final act and not subject to reconsideration, appeal or judicial review.

Witness (sign and date)

MICHELLE DEMANGE (Licensee)
(sign and date)

Deborah J. Watson
Witness (print name)

Lorena Silva, MSN-L, MBA, DNP, RN
Executive Director
Board of Registration in Nursing

March 4th, 2019
Effective Date of Probation Agreement

Fully Signed Agreement Sent to Licensee on March 11, 2019 **by Certified Mail No.** 7017 0530 0000 3482 7654

Commonwealth of Massachusetts
Department of Public Health
Bureau of Health Professions Licensure
Board of Registration in Nursing
250 Washington Street • Boston, Massachusetts 02108

SUPERVISOR VERIFICATION, AND AGREEMENT TO MONITOR PRACTICE AND PROVIDE PERIODIC REPORTS TO THE BOARD OF REGISTRATION IN NURSING

Name of Nurse on Probation _____

License Type and No. _____ Docket No(s). _____

Effective Date of the Probation Agreement or Order: _____

Length of Probation (specified in Agreement or Order): _____

Nurse's Date of Employment: _____ Nurse's Job Title: _____

Employer Name and Address: _____

_____

I, _____ (print supervisor's full name) on _____ (insert date) reviewed a signed copy of the Probation Agreement (Agreement) or Order between _____ (insert nurse's name) and the Board of Registration in Nursing (Board). I hereby agree that I will monitor and evaluate this nurse's practice as specified in the Agreement or Order, and will provide written reports to the Board on the Supervision Report form provided by the Board at the intervals required by the Agreement or Order.

I also agree to promptly notify the Board's Probation Compliance Officer if the nurse resigns or is terminated from employment.

I further certify that I am a RN / LPN (circle one), have completed at least one (1) year of clinical nursing practice, and that I do not have any open administrative or criminal complaint by any Board of Nursing.

SUPERVISOR'S SIGNATURE _____ Date: _____

_____

(Print/Type: Name and Title of Supervisor completing this form)

Supervisor's License Type and No.: _____ Supervisor Phone No.: _____

PLEASE NOTE CAREFULLY: This completed form must be mailed *with* the supervisor's signed cover letter written on the facility's letterhead directly to: Probation Compliance Officer
DPH – BHPL, Board of Registration in Nursing
250 Washington Street, 3rd Floor, Boston, MA 02108

FORM 1- Manual Version
Final 6/14/07
Revised 8/14/017, 05/09/18
Corrected 9/5/2019

Commonwealth of Massachusetts
Department of Public Health
Bureau of Health Professions Licensure
Board of Registration in Nursing
250 Washington Street • Boston, Massachusetts 02108

SUPERVISION REPORT FOR NURSES ON PROBATION WITH THE BOARD OF REGISTRATION IN NURSING

(Please review the nurse's Probation Agreement or Order and complete this evaluation of the nurse's practice)

Nurse's Name: _____ Docket No.: _____

License Type and No.: _____ Expiration Date _____

Nurse's Job Title: _____

Employer Name and Address: _____

Time period covered by this supervision report: Start Date: _____ to End Date: _____

Rate the following and explain any "Does Not Meet" ratings (use the "Comments" column and if needed the back of this form or include on supervisor's signed cover letter on facility letterhead).

Quality being rated	Does Not Meet	Meets	Comments
Organizes and plans work effectively	☐	☐	
Completes assignments	☐	☐	
Works as a team member	☐	☐	
Communicates effectively	☐	☐	
Seeks guidance and supervision appropriately	☐	☐	
Interacts with patients in a therapeutic manner	☐	☐	
Demonstrates problem solving ability	☐	☐	
Manages stressful situations appropriately	☐	☐	
Makes timely and appropriate nursing assessments	☐	☐	
Makes appropriate nursing interventions	☐	☐	
Delegates nursing care activities appropriately	☐	☐	
Removes, handles, wastes, and accounts for the whereabouts of, medications appropriately	☐	☐	
Documents controlled substances and medication administrations accurately and completely	☐	☐	
Documents nursing care and interventions accurately and completely	☐	☐	
Other practice skill(s) specified by Probation Agreement or Order	☐	☐	

SUPERVISION REPORT FOR NURSES ON PROBATION WITH THE BOARD OF REGISTRATION IN NURSING (continued)

The nurse HAS ☐ HAS NOT ☐ (**please choose one and do not leave any blanks**) worked an average of at least twenty (20) hours per week during the time period covered by this report.

SUPERVISION

How frequently is the nurse supervised?_____

How is supervision provided?_____

Have there been any incidents involving the nurse requiring counseling, conference, oral/written warnings since last report? If yes, please explain and attach copies of all relevant documents.

_____

_____

How often are the nurse's patient records reviewed?_____

Does this nurse have any other nursing practice issues? Explain._____

_____

ADDITIONAL COMMENTS are appreciated

(If needed, please use the back of this form or include on supervisor's signed cover letter on facility letterhead)

****

Please call the Probation Compliance Officer at (617) 973-0863 to discuss any concerns or for clarification regarding the nurse's probation.

SUPERVISOR'S SIGNATURE: _____DATE SIGNED_____

_____

(Print/Type: Name and Title of Supervisor completing this form)

Supervisor's License Type and No.:_____ Supervisor Phone No.:_____

PLEASE NOTE CAREFULLY:

This fully completed form must be mailed *with* the supervisor's signed cover letter written on the facility's letterhead directly to: Probation Compliance Officer

DPH – DBPL, Board of Registration in Nursing
250 Washington Street, 3rd Floor
Boston, MA 02108