## COMMONWEALTH OF MASSACHUSETTS BOARD OF REGISTRATION IN NURSING

239 Causeway Street, Room 417A Boston, MA 02114

And Via WebEx

Wednesday, November 10, 2021 9:00 am | 2 hours | (UTC-04:00) Eastern Time (US & Canada)

Event address for attendees:

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## Minutes of the Regularly Scheduled Board Meeting

Wednesday, November 10, 2021

## **Board Members Present In Room 417**

L. Kelly, DNP, Chairperson

## **Board Members Not Present**

J. Kaneb, MBA, Public Member

L. Wu, RN

## Board Members Present Via Audio Or Video

L. Keough, CNP, Vice Chairperson

A. Alley, RN (Left at 10:53 a.m.)

(Arrived at 12:00 p.m.)

K.A. Barnes, JD, RPh (Left at 12:00 p.m.)

(Arrived at 1:10 p.m.)

K. Crowley, DNP (Left at 1:10 p.m.)

(Did not return)

D. Drew, MBA, Public Member

C. LaBelle, RN

D. Nikitas, RN

V. Percy, MSN

E. Pusey-Reid, DNP (Left at 12:00 p.m.)

(Did not return)

J. Yeh, MD

## Staff Present In Room 417 Staff Not Present

- C. MacDonald, RN, DNP, Acting Executive Director
- P. McNamee, RN, MS, Nursing Practice Coordinator
- M. Waksmonski, RN, MSN, SARP Coordinator
- J. Scranton, LPN, Compliance Officer
- K. Jones, Probation Compliance Officer
- P. Scott, Licensing Coordinator
- S. Gaun, Office Support Specialist I

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## 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
- H. Engman, JD, Chief Board Counsel
- C. DeSpirito, RN, JD, Complaint Resolution Coordinator
- M. Campbell, RN, JD, Nursing Investigations Supervisor
- S. Waite, RN, DNP, Nursing Education Coordinator
- H. Caines Robson, RN, MSN, Nursing Education

Coordinator

- L. Ferguson, Paralegal
- S. Hall, SARP Monitoring Coordinator
- 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 9:07 a.m., L. Kelly, Chairperson, called the November 10, 2021 Regularly Scheduled Board Meeting to order.

#### TOPIC:

Approval of Agenda

#### **DISCUSSION:**

K. Jones stated that Agenda Item VI.C.1. Probation, Request for Notice of Violation and Further Discipline, L. MacLean, RN-07050, RN228325 will be deferred.

P. McNamee stated that regarding Agenda Item X.A.2. Strategic Development, Planning and Evaluation, Proposed Revisions to Operational Policy 21-01: Nursing Practice Advisory Panel is actually Operational Policy 21-02.

#### **ACTION:**

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

#### **TOPIC:**

Approval of Board Minutes for the October 13, 2021 Meeting of the Regularly Scheduled Board Meeting

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## **DISCUSSION**:

None.

#### **ACTION:**

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with K. Crowley and J. Yeh in abstention, and A. Alley, K.A. Barnes, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy and E. Pusey-Reid all in favor to accept the Minutes of the October 13, 2021 Regularly Scheduled Board Meeting as presented.

#### TOPIC:

Reports, Announcements and Administrative Matters Announcements

## **DISCUSSION:**

L. Kelly asked the Board members to sign up for the 2022 Complaint Committee Meetings.

C. MacDonald introduced S. Buckley as the New Office Support Specialist I who will be the Complaint Resolution Department. C. MacDonald encouraged the Board Members to sign up for the 2022 Complaint Committee Meetings, they should have received the E-Mail Message from S. Buckley, and their participation would be greatly appreciated.

#### **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.

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## **ACTION:**

None.

**TOPIC:** Probation

Request for Notice of Violation and Further Discipline, L. MacLean, RN-07050, RN228325

#### **DISCUSSION:**

Deferred.

#### **ACTION:**

Deferred.

**TOPIC:** Practice Coordinator Staff Report

#### **DISCUSSION:**

L. Kelly asked P. McNamee about the prescriptive practices and there were quite a few inquiries, a jump of almost double. In response to L. Kelly, P. McNamee stated it was due to the regulations approved in August 2021 regarding independent prescriptive practice, and the questions referred to how to go about signing attestations, amending the Massachusetts Controlled Substances Registration (MCSR), and things of that nature. Prescriptive Practice inquiries dropped down to a more usual number in October 2021.

#### **ACTION:**

So noted.

**TOPIC:** Education

Nursing Education Staff Report Annual Report to the Board CY 2020

## **DISCUSSION:**

S. Waite and H. Caines Robson were available for questions.

J. Yeh asked L. Kelly if he should recuse himself from the discussion and voting in the University of Massachusetts Worcester Education Matters because he works at the University of Massachusetts Medical Center which is based in Worcester. L. Kelly referred the question to O. Atueyi to answer his question. In response to L. Kelly and J. Yeh, O. Atueyi stated that the answer is "yes" and suggested that because the Board has a quorum, J. Yeh should recuse himself from all of the University of Massachusetts Education Matters.

#### **ACTION**:

So noted.

**TOPIC:** Education

244 CMR 6.08 (1)(a) Regularly Scheduled Site Survey, Greater Lowell Technical School Practical Nursing Program

#### **DISCUSSION**:

H. Caïnes Robson summarized her previously distributed memorandum and attached exhibits to the Board. L. Kelly stated the program is not alone or unique in some of the recommendations that H. Caines Robson has put in her report, and the program can make the improvements so it can be in compliance. D. Drew asked C. Messina if she is working on the plan to hire the full-time program administrator. K. Crowley asked C. Messina if the Board can have a percentage delineation of currently what is the role of the program administrator of the Nursing Program is compared to the program administrator of the Continuing Education Program.

- D. Drew asked L. Kelly if the Motion would involve what was verbally presented or what was written in the recommendations listed in the Staff Compliance Report. In response to D. Drew, H. Caines Robson stated determine compliance with the program administrator role. D. Drew stated what H. Caines Robson verbally stated regarding Recommendations to the Board Item Number 3 was different than what is written in the Staff Compliance Report. H. Caines Robson asked D. Drew to read what she saw that was written. In response to H. Caines Robson, D. Drew stated "Determine compliance direct the program to provide the following" and that was what was in the written document that she received. In response to D. Drew, H. Caines Robson stated in overall, determine compliance with the program, and ask the program to provide the directive as outlined in the report. In response to H. Caines Robson, D. Drew stated there should have been a Number 4.
- C. Messina, Director of the Practical Nursing Program, was present via video. A. Champa, a Staffperson, was also present via video. C. Messina stated it is overwhelming, but she does not have anything to add at this moment. In response to D. Drew, C. Messina stated she has spoken with her union representative, the union representative and the superintendent have to see something in writing, so they can bring the union lawyer and have a meeting and split her job. In response to K. Crowley, C. Messina stated she is probably working with the Nursing Program 80% of her time and with the Continuing Education Program 20% of her time.

#### **ACTION:**

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and J. Yeh 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)(g) (1)(h), (2)(a), (2)(b), (3)(a)1, (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)(e) and noncompliance with 244 CMR 6.04 (1)(b), (1)(c), (1)(d), (1)(e), (3)(a)2 and (5)(f).
- 2. Continue full approval at this time.
- 3. Determine compliance with the Program Administrator's role.
- 4. Direct the program to provide the following:
  - A. Due no later than February 10, 2022:
    - 1. revised Faculty job description to include the faculty participation in governance as a component of the role responsibilities [ref 244 CMR 6.04 (1)(b)];
    - 2. revised Program administrator's job description to include participation in governance

as a component of the role responsibilities [ref 244 CMR 6.04 (1)(c)];

3. evidence that the Program administrator's administers the Program on a full-time basis [ref 244 CMR 6.04 (1)(c)];

4. 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)];

5. revised published 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]; and

6. revised written agreements with cooperating agencies utilized as clinical learning sites that are current and specific in defining parameters of activities and the responsibilities of the program, the student and the cooperating agency including primary responsibility for patient care and safety and evaluation of student achievement of nursing competencies [ref: 244 CMR 6.04 (5)(f)].

B. Due no later than May 10, 2022:

- 1. 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 related to NCLEX performance; admission, retention and graduation rates; graduate satisfaction; and employment rates and patterns 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)].
- 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 (2) Survey Waiver Request, Endicott College Baccalaureate Degree Nursing Program

## **DISCUSSION:**

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. D. Drew stated she was concerned with the two (2) areas the program has deficiencies in and she is not sure if she would approve the Site Survey Waiver for those two (2) critical areas.

In response to D. Drew, H. Caines Robson stated the program included the Systematic Evaluation Plan, because the program requested the Site Survey Waiver in lieu of a Regularly Scheduled Site Survey, the report did not include the meeting minutes which would provide additional evidence, and H. Caines Robson requested the additional information. In response to H. Caines Robson, D. Drew stated she would prefer to defer the Site Survey Waiver until the Board Education Staff received the additional information.

- K. Crowley asked N. Meedzan about the agreements she used that are different, if they are standard agreements the College uses and are reconciled with different entities.
- K. Crowley asked N. Meedzan what was the rationale regarding having the three (3) year accreditation versus the five (5) year accreditation from the Commission on Collegiate Nursing Education (CCNE).
- D. Drew stated the reasons she is still hesitant about approving the Site Survey Waiver until all of the documentation is available for review. K. Crowley stated the Site Survey Waiver would be contingent

upon the program submitting in February 2022 reconciliation of the five (5) outstanding contracts and fixing the Systematic Evaluation Plan.

- L. Keough asked H. Caines Robson if she can get the documentation she needs in an electronic format or if she thinks it will be necessary to be on-site to get the documentation. In response to L. Keough, H. Caines Robson stated she can receive the documentation in electronic format.
- K. Crowley stated the problems with the contracts is that Endicott College is not the only party which is involved, and the College needs to go back and forth between the institutions and the legal departments.
- D. Drew asked H. Caines Robson if the Site Survey Waiver could be granted if one (1) of the recommendations could be changed to the Site Survey Waiver would be granted after the documentation has been provided. D. Drew stated that if that could be done, then she could move forward.
- D. Nikitas asked H. Caines Robson about the length of time the Surveys are done. In response to D. Drew and D. Nikitas, H. Caines Robson stated the regulations allow for the Nursing Education Programs that meet all of the requirements and maintain full Board approval to submit the Site Survey Waiver. H. Caines Robson stated it appears the program has met the requirements from that point until now, therefore Site Survey Waivers have been granted.
- C. MacDonald stated the Nursing Education Programs have to submit the Annual Reports to the Board, and the Annual Reports are reviewed by the Nursing Education Coordinators.
- N. Meedzan, Dean of the School of Nursing, was present via video. N. Meedzan stated H. Caines Robson provided a good summary of the report. In response to K. Crowley, N. Meedzan stated that E. Tagliareni helped her with re-vamping the contracts in the last year so they were in compliance with BORN Standards, the process is difficult regarding having entities sign new contracts, and 85% of the contracts are in compliance.

In response to K. Crowley, N. Meedzan stated that CCNE had a compliance concern about the RN to BSN Degree Program and the clinical peer hours and that is outside the Board's jurisdiction, the CCNE put that in their report but did not put it in their accreditation letter, and that is why the program received the three (3) year accreditation and not the five (5) year accreditation.

## **ACTION:**

Motion by K. Crowley, seconded by L. Keough, and voted by roll call with K.A. Barnes and D. Drew in opposition, and A. Alley, K. Crowley, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusev-Reid and J. Yeh all 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 (1)(e) and (5)(f).

- 2. Continue Full Approval status at this time.
- 3. Grant the Waiver of 244 CMR 6.06 (2)(a) Site Survey of Nursing Education Programs.
- 4. Direct the Program to provide to the Board the following in order to demonstrate correction of the regulatory deficiencies:

## A. Due February 10, 2022:

- 1. 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 criteria; a calendar outlining the evaluation schedule; and review of all Board required outcomes and 11 Board required policies [ref 244 CMR 6.04 (1)(e)];
- 2. 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)].

## B. Due no later than May 10. 2022:

- 1. 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 related to NCLEX performance; admission, retention and graduation rates; graduate satisfaction; and employment rates and patterns 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)].
- 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 (2) Survey Waiver Request, University of Massachusetts Worcester Graduate Direct Entry Pathway Nursing Program

#### **DISCUSSION:**

RECUSAL: J. Yeh recused himself from the matter and remained in the Regular Session via Webex. S. Waite summarized her previously distributed memorandum and attached exhibits to the Board. S. Waite stated in the recommendations to grant the Site Survey Waiver. D. Drew asked L. Kelly a clarifying question if something has changed regarding Recommendation Item 3 which stated to determine if the Program qualifies for a Waiver of 244 CMR 6.06 (2)(a) Site Survey of Nursing Education Programs. In response to D. Drew, S. Waite stated at the time of the review, it was determined the Site Survey Waiver should be granted. D. Drew stated she was concerned about approving the Site Survey Waiver. K. Crowley stated the issues regarding the relationship with the total program outcomes and the lack of assessment, the documentation of the program outcomes was more informal, the completion rates, pass rates and job employment rates which were required by the Massachusetts Department of Education were not evidenced in S. Waite's report, and the Systematic Evaluation Plan

lacked significant information. L. Keough asked S. Waite if the deficiencies were not corrected, the program would come back to the Board. In response to L. Keough, S. Waite stated that is correct. K.A. Barnes stated she agreed with D. Drew that the Site Survey Waiver should not be granted if there is outstanding information. K. Crowley stated the program is not in compliance, the Site Survey Waiver should not be granted, and the Site Visit should be scheduled. D. Nikitas stated the NCLEX Pass Rates have fallen. In response to D. Nikitas, S. Waite stated that 89% of the students passed the 2021 NCLEX and 87% passed it in 2020 down from 93% in 2019.

- J. Fain, Associate Dean for Academic Affairs at the Graduate School of Nursing, was present via video.
- J. Fain stated S. Waite presented a fair review.

**ACTION:** 

Motion by K. Crowley, seconded by D. Drew, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy and E. Pusey-Reid unanimously in favor to:

- 1. Do not accept the recommendations for the Site Survey Waiver.
- 2. Initiate a Site Visit.
- 3. Continue with Full Approval Status.

**TOPIC:** Education

244 CMR 6.10 Change of Nursing Education Program Name, Endicott College Baccalaureate Degree Nursing Program

**DISCUSSION**:

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

N. Meedzan, Dean of School of Nursing, was present via video. N. Meedzan did not make a statement.

**ACTION:** 

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and J. Yeh unanimously in favor to:

1. Accept the change report notifying of the change in the nursing education program's name.

2. Find compliance with regulation 244 CMR 6.10 in the notification of the Program's name change to the Endicott College Cummings School of Nursing and Health Sciences.

**TOPIC:** Education

244 CMR 6.10 Change of Nursing Education Program Name, University of Massachusetts Amherst Baccalaureate Degree Nursing Program

**DISCUSSION:** 

RECUSAL: J. Yeh recused himself from the matter and remained in the Regular Session via Webex.

H. Caines Robson summarized her previously distributed memorandum and attached exhibits to the Board. D. Drew asked H. Caines Robson if the effective date of the Name Change is September 2021 or

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September 2022. In response to D. Drew, H. Caines Robson stated the effective date is September 2021. D. Drew asked the Board members if they could approve the Name Change but find the program is not in compliance. In response to D. Drew, L. Kelly stated there are mitigating issues. H. Caines Robson stated that the Board has taken in the past consideration regarding all of the logistics that need to happen, and as long as the notification has been received in a timely manner, the Board has found compliance in the past with notification. C. MacDonald stated there was some confidentiality regarding the Name Change due to the school wanting to make an announcement before information came before the Board. L. Kelly stated she understood the philanthropic gift issues.

A. Vorderstrasse, Dean of College of Nursing, was present via video. In response to D. Drew, A. Vorderstrasse stated that the University of Massachusetts Amherst Board of Trustees approved the Name Change at its meeting at the end of September 2021, but there was a lag in documentation from the Board of Trustees, so the program could not submit the Name Change Request to the Board of Registration in Nursing until after the program had the documentation.

## **ACTION:**

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with K.A. Barnes and D. Drew in opposition, and A. Alley, K. Crowley, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy and E. Pusey-Reid all in favor to:

- 1. Accept the change report notifying of the change in the nursing education program's name.
- 2. Find compliance with regulation 244 CMR 6.10 in the notification of the Program's name change to the Elaine Marieb College of Nursing.

## **TOPIC:** Education

244 CMR 6.10 Change of Nursing Education Program Name, University of Massachusetts Boston Baccalaureate Degree Nursing Program

#### DISCUSSION:

**RECUSAL:** J. Yeh recused himself from the matter and remained in the Regular Session via Webex. S. Waite summarized his or her previously distributed memorandum and attached exhibits to the Board. There was no discussion.

R. DeMarco, Interim Dean of Department of Nursing and Exercise Health Sciences, was present via video. R. DeMarco did not make a statement.

## **ACTION:**

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K.A. Barnes K. Crowley, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy and E. Pusey-Reid unanimously in favor to:

- 1. Accept the change report notifying of the change in the nursing education program's name.
- 2. Find compliance with regulation 244 CMR 6.10 in the notification of the Program's name change to the Robert and Donna Manning College of Nursing and Health Sciences.

## **TOPIC:** Education

'244 CMR 6.10 Change of Nursing Education Program Name, University of Massachusetts Worcester Graduate Direct Entry Pathway Nursing Program

#### **DISCUSSION:**

RECUSAL: J. Yeh recused himself from the matter and remained in the Regular Session via Webex.

- S. Waite summarized her previously distributed memorandum and attached exhibits to the Board.
- D. Drew stated she is in disagreement with the program's compliance with the notification time period.
- J. Fain, Associate Dean for Academic Affairs at the Graduate School of Nursing, was present via video. In response to D. Drew, J. Fain stated the program was in a similar situation with the University of Massachusetts and that the major transfer gift had to be approved by the Board of Trustees, and the program was bound to silence until the actual announcement came from the Board of Trustees.

#### **ACTION:**

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with K.A. Barnes and D. Drew in opposition, and A. Alley, K. Crowley, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy and E. Pusey-Reid all in favor to:

- 1. Accept the change report notifying of the change in the nursing education program's name.
- 2. Find compliance with regulation 244 CMR 6.10 in the notification of the Program's name change to the Tan Chingfen Graduate School of Nursing at UMass Chan Medical School.

**TOPIC:** Requests for License Reinstatement

## **DISCUSSION**:

None.

#### **ACTION:**

None.

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

Presentation/Report, Proposed Revisions to SARP Policy 18-01: SARP Participant's Re-Entry Into Monitored Practice

#### **DISCUSSION:**

M. Waksmonski summarized his previously distributed memorandum and attached exhibits to the Board. L. Kelly asked M. Waksmonski if the first changes were listed on Page 2 of the Proposed Revisions Document under the Medical Privileges. In response to L. Kelly, M. Waksmonski stated "yes". M. Waksmonski stated that in the Employment Approval Section of the Proposed Revisions Document, language was included with stated the SARP Participant will work with the Employer to have his or her CASP Amendment language physically in his or her Job Description, because sometimes the communication between the two (2) parties is different, and that language will be embedded in the Job Description to keep the communication clear. L. Kelly stated she agreed with having that language included in the Proposed Revisions Document based on the discussions the Board members have had regarding Job Descriptions.

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Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and J. Yeh unanimously in favor to accept the Proposed Revisions to the SARP Policy 18-01: SARP Participant's Re-Entry into Monitored Practice as documented in the Draft Policy and which M. Waksmonski discussed.

TOPIC: Strategic Development, Planning and Evaluation

Presentation/Report, Proposed Revisions to Operational Policy 21-02: Nursing Practice Advisory Panel

#### **DISCUSSION:**

P. McNamee summarized her previously distributed memorandum and attached exhibits to the Board. L. Kelly suggested to add to the policy "other nursing specialties as needed" so that Board staff does not have to receive Board approval every time another practice domain is needed. P. McNamee stated she will add this language to the Policy. C. MacDonald clarified that "other nursing specialties as needed" language will be added to the Policy. H. Cambra asked L. Kelly if the person the Board staff will be contacting will need to have certification in that specialty. In response to H. Cambra, P. McNamee stated that criteria are already listed in the policy. L. Keough stated she thinks that more general language will be better and she can rely on the Nursing Practice Coordinator to make the determination as to whether the person meets the criteria, and the Board members can give some latitude to the Board staff to make those decisions, so the panel will not be so restricted. L. Kelly stated that she agreed with L. Keough.

#### **ACTION:**

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and J. Yeh unanimously in favor to accept the Additions as discussed in the Memorandum that P. McNamee provided for Proposed Revisions to Operational Policy 21-02: Nursing Practice Advisory Panel.

TOPIC: Strategic Development, Planning and Evaluation

Presentation/Report, Proposed Revisions to Licensure Policy 17-01: Board Delegation to Board Staff to Make Final Determination of Good Moral Character Compliance

#### **DISCUSSION:**

H. Cambra summarized her previously distributed memorandum and attached exhibits to the Board. K. Crowley asked H. Cambra about 3 (d) and 3 (e) listed in the Proposed Revisions Document and if the Board will be placing a longer restriction on the physical abuse issue than the neglect issue, and both of them can be several offenses. In response to K. Crowley, H. Cambra stated it was intentional to make the neglect cases shorter than the physical abuse cases, she wanted to give the Board members a feel for what the Board staff was contemplating as far as what constitutes minor offenses, anything that is considered serious would come to the Board, and that would not be something that would be in the context of a Staff Action.

K. Crowley asked H. Cambra if the ten (10) year extension would follow the DCGIS Extension and the DCGIS Extension does not have a similar regulation for the neglect cases. In response to K. Crowley, H. Cambra stated she tried to mirror the Massachusetts Department of Children and Families (Massachusetts DCF) Policy as much as possible in the fact that felonies were a longer period than the misdemeanors, and there were certain offenses that cannot be petitioned for at all. K. Crowley asked

- H. Cambra that regarding criminal convictions, does the Board have stipulations for longer closure of case period for the different types of criminal offenses. In response to K. Crowley, H. Cambra stated the Board does not have that at this time.
- H. Cambra stated she could bring the Proposed Revisions Document back to the Board if the Board members wanted to add GMC (Good Moral Character) criminal conviction cases. H. Cambra stated that right now the cooling off period is one (1) year from the closure of all court ordered requirements, but the Board does have the five (5) year mandatory temporary exclusion period.
- L. Kelly stated the Proposed Revisions Document had to do with the Massachusetts DCF Cases which are new to the Board, and the Proposed Revisions Document was a great attempt to help identify some of the issues, the Board may revise the Policy moving forward, and the Massachusetts DCF Cases are a new component to what the Board has an obligation to review. D. Nikitas stated about the different standards between Massachusetts DCF Cases and other cases. H. Cambra stated the Board staff has been working hard to streamline this into the GMC context, and to have the Board review the Massachusetts DCF Cases in the same manner as the GMC Cases.
- D. Drew asked K. Crowley if the amount of time should be increased to ten (10) years for the neglect cases and after the ten (10) years the Board staff would be able to do a Staff Action Report, and if the physical abuse cases' amount of time should be reduced to five (5) years. In response to D. Drew, K. Crowley stated the outlier is the physical abuse cases, and the neglect cases should not be ten (10) years. In response to D. Drew, O. Atueyi stated this Policy is for the Board staff to take action and will not come to the Board. O. Atueyi stated that other cases that do not fall within these parameters will come to the Board for the Board to have a discussion.
- H. Cambra stated that part of policy improvement, the Board needs to watch out for precedence in how the Board is deliberating and what the Board is deciding, and use that information to continually revise the Policy. D. Nikitas stated the children are a vulnerable population to the ten (10) year guidance that comes into play. D. Drew stated she agreed with D. Nikitas, the Staff Action can be approved, and the Board should have some input if the physical abuse was within ten (10) years. H. Cambra stated she left out the criminal cases that involve sexual issues out of the Proposed Revisions Document. L. Kelly asked H. Cambra if the Board accepts the Proposed Revisions Document, given the discussions around the ten (10) year time period, how would a motion work for her. L. Kelly stated the Board would need to have this Policy, it is fluid and it will be changed, moving forward based on cases as the Board sees them, the Board will need to be able to move the Massachusetts DCF Cases through the system, and the Proposed Revisions will help guide the Board. C. MacDonald stated the Policy will come back to the Board as needed for any changes in the Policy.

After the Motion, C. LaBelle asked H. Cambra how is the public finding out about this after the students complete Nursing School. In response to C. LaBelle, C. MacDonald stated the Nursing Programs are aware that the Massachusetts DCF Requirement is a requirement for licensure, and it is listed on the Licensure Applications in the GMC Section. C. MacDonald stated the Board staff can make a formal announcement on the Board of Registration in Nursing Website if the Board members feel that would be the best approach. A. Alley stated he agreed with C. LaBelle and the Massachusetts DCF Requirement should be listed on the Board of Registration in Nursing Website. C. LaBelle stated there is a nursing shortage and this could prevent more students from applying.

H. Cambra stated it is important to have a comprehensive policy that is listed Board of Registration in Nursing on the Website, the Applicants have to learn to conduct criminal background checks on themselves, they need to remember any convictions that they had and be ready to answer the questions on the applications. L. Kelly stated the underlining mandate is not driven by the Board of Registration in Nursing. In response to L. Kelly, H. Cambra stated the Board is operationalizing a directive that was given to the Board of Registration in Nursing to conduct these background checks on the applications, and the Board staff is trying its very best to operationalize that in an efficient and effective way to get the Applicants reviewed, so the Applicants that can progress can do so quickly, this is a new process, and there are a lot of moving parts.

L. Keough asked H. Cambra what the other Board of Nursing in the United States and other Boards in Massachusetts are doing this. In response to L. Keough, H. Cambra stated she can survey the other Boards and find out. O. Atueyi stated the Massachusetts DCF Requirement is not limited to the Board of Registration in Nursing, and the other Licensing Boards will eventually do it as well. H. Cambra asked the Board members if this should be put on a future Regular Session Agenda Item. In response to H. Cambra, L. Kelly stated "yes" and H. Cambra could do that.

K. Crowley stated what does the Board staff have in place to get the Nursing Programs to help the students identify areas of concern on admission requirements so the students can get through the GMC process for licensure. In response to K. Crowley, C. MacDonald stated the Board members can speak about this issue at another time. K. Crowley stated the reasons she disagreed with C. MacDonald. In response to K. Crowley, H. Cambra stated she can add information about the reasons. O. Atueyi stated the students can be informed via the Board of Registration in Nursing Website about the Massachusetts DCF Requirement and the nursing program students can be put on notice. H. Cambra stated she will work on what the Board members suggested and will put this issue on a Board Meeting Regular Session Agenda very soon.

## **ACTION:**

Motion by D. Drew, seconded by L. Kelly, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and J. Yeh unanimously in favor to accept the Proposed Revisions to Licensure Policy 17-01: Board Delegation to Board Staff to Make Final Determination of Good Moral Character Compliance as presented.

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

Presentation/Report, Proposed Further Revisions to 244 CMR 6.0: Approval of Nursing Education Programs

#### **DISCUSSION:**

A. Alley stated that he left the Board Meeting Regular Session via Webex at 10:53 a.m. and he will return later.

C. MacDonald summarized her and H. Engman's previously distributed memorandum and attached exhibits to the Board. D. Drew asked C. MacDonald if the Board staff has a list of the Board recognized certifiying organizations. In response to D. Drew, C. MacDonald stated the Board recognizes the nationally certifying organizations, and the Board staff can provide the list, but that the list changes. L. Kelly stated she agreed with C. MacDonald, the list does change, and the global statement is appropriate. C. MacDonald stated this is the exact same language that is used in the regulation 244 CMR 4.00 in relation to Advanced Practicing Registered Nurse certification so there will be consistency.

D. Drew asked L. Kelly about the minimum degree the faculty member can have is a Baccalaureate Degree in Nursing. C. MacDonald stated the Baccalaureate Degree with the provisions of being metrically certified is required regarding clinical faculty positions. D. Drew asked C. MacDonald about 2 (c) (ii) (iv) regarding "an earned Baccalaureate Degree in Nursing and also meet at least one of the following possesses a minimum of five (5) years full-time Registered Nurse experience within the last eight (8) years, be mentored by faculty who possess a graduate degree in nursing, and". In response to D. Drew, C. MacDonald stated the person would have to possess a minimum of five (5) years full-time Registered Nurse experience within the last eight (8) years, and be mentored by faculty who possess a graduate degree in nursing. C. MacDonald read (a), (b) and (c). D. Drew asked C. MacDonald if the word "or" which is listed after (iv) (a) should be removed. C. MacDonald stated she will make the revision and will remove the word "or".

**ACTION:** 

Motion by L. Kelly, seconded by D. Drew, and voted by roll call with A. Alley, K.A. Barnes, K. Crowley, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and J. Yeh unanimously in favor to accept the Proposed Further Revisions to 244 CMR 6.0: Approval of Nursing Education Programs with the changes as discussed.

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

#### **DISCUSSION:**

None.

## **ACTION**:

None.

Break from 11:06 a.m. to 11:23 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 K.A. Barnes, K. Crowley, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy, E. Pusey-Reid and J. Yeh unanimously in favor to convene the G.L. c. 112, s. 65C Session at 11:23 a.m.

G.L. c. 112, s. 65C Session 11:23 a.m. to 12:25 p.m.

## TOPIC:

Adjudicatory Session

November 10, 2021 Regular Session Board Meeting Minutes (to be Approved 12/08/2021)

#### DISCUSSION:

None.

#### **ACTION:**

Motion by L. Kelly, seconded by L. Keough, and voted by roll call with A. Alley, K. Crowley, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy and J. Yeh unanimously in favor to convene the Adjudicatory Session at 12:25 p.m. to deliberate on proposed final decisions and orders, and rulings on pending adjudicatory matters.

## Adjudicatory Session 12:25 p.m. to 12:33 p.m.

## Break from 12:33 p.m. to 1:02 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. Crowley, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy and J. Yeh unanimously in favor to convene the Executive Session at 1:02 p.m. as per Purpose One of G.L. c.30A, §21 (a)(1).

## G.L. c. 30A, § 21 Executive Session 1:02 p.m. to 4:10 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, D. Drew, L. Kelly, L. Keough, C. LaBelle, D. Nikitas, V. Percy and J. Yeh unanimously in favor to adjourn the meeting at 4:10 p.m.

Minutes of the Board's November 10, 2021, Regularly Scheduled Meeting were approved by the Board on December 8, 2021.

Linda Kelly, DNP

Chairperson

Board of Registration in Nursing

Agenda with exhibits list attached.

## Notice of the Regularly Scheduled Meeting

## **Regular Session**

239 Causeway Street Room 417 Boston, Massachusetts 02114

And Via WebEx

Wednesday, November 10, 2021 9:00 am | 2 hours | (UTC-04:00) Eastern Time (US & Canada)

Event address for attendees:

https://statema.webex.com/statema/onstage/q.php?MTID=e72c4c81e62a58ed40e52faf99be29948

Join by Phone:

+1-203-607-0564 US Toll

+1-866-692-3580 US Toll Free

Access code: 2428 733 6425

## Wednesday, November 10, 2021

#### PRELIMINARY AGENDA AS OF 10/29/21 11:40am

Estimated Time	Item #	A. Item	Exhibit	Presented by
9:00 a.m.	l.	B. CALL TO ORDER & DETERMINATION OF QUORUM	None	
	II.	APPROVAL OF AGENDA	Agenda	
	111.	APPROVAL OF MINUTES  A. Draft Minutes for the October 13, 2021 Meeting of the Board of Registration in Nursing, Regular Session Via WebEx	Minutes	
	IV.	REPORTS, ANNOUNCEMENTS AND ADMINISTRATIVE MATTERS  A. Announcements	Oral/Memo	СМ
	V.	SARP A. SARP Activity Report - NONE	None	

1 25	DRODATION		
VI.	A. Probation Staff Action Report	Report	KJ
	B. Termination of Probation/Stayed Probation - NONE C. Request for Notice of Violation and Further Discipline,	None	
, constant	In the matter of L. MacLean, RN-07050, RN228325	Memo	KJ
VII	PRACTICE  A. Practice Coordinator Staff Report	Report	PM ´
VII	1		
	A. Nursing Education Staff Report  1. Nursing Education Staff Report Annual Report to the	Report	HCR
	Board CY 2020		
	B. 244 CMR 6.06 (1)(a) Regularly Scheduled Site Survey	•	
3	Greater Lowell Technical School Practical Nursing     Program	Report	HCR
	C. 244 CMR 6.06 (2) Survey Waiver Request		
	Endicott College Baccalaureate Degree Nursing  Program	Report	HCR
	Program  2. University of Massachusetts Worcester Graduate	Report	SW
	Direct Entry Pathway Nursing Program		
	D. 244 CMR 6.10 Change of Nursing Education Program		
·	Name		
	Endicott College Baccalaureate Degree Nursing     Program	Memo	HCR
	University of Massachusetts Amherst Baccalaureate	Memo	HCR
	Degree Nursing Program	Memo	sw
	University of Massachusetts Boston Baccalaureate	, wichio	
	Degree Nursing Program  4. University of Massachusetts Worcester Graduate	N 4'	sw
	Direct Entry Pathway Nursing Program	Memo	200
ıx	REQUESTS FOR LICENSE REINSTATEMENT - NONE	None	

Report Revisions to SARP Policy 18-01: SARP Proposed Revised MW st's Re-Entry Into Monitored Practice Policy
t's Ral-htty into Monitored Practice : Policy
Revisions to Operational Policy 21-01: Proposed Revised PM Policy and Memo
Revisions to Licensure Policy 17-01: Proposed Revised HC legation to Board Staff to Make Final Policy ation of Good Moral Character Compliance
Further Revisions to 244 CMR 6.0: Proposed HE/CM of Nursing Education Programs Revisions xt Agenda
Pdendd

<b>&lt;&gt;</b>		LUNCH BREAK	
	XI.	M.G.L. c. 112, § 65C SESSION	CLOSED SESSION
	XII.	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.  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 October 13, 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.