COMMONWEALTH OF MASSACHUSETTS BOARD OF REGISTRATION IN NURSING

239 Causeway Street, Room 417A Boston, MA 02114

Minutes of the Regularly Scheduled Board Meeting

Wednesday, November 14, 2018

Board Members Present

- B. Levin RN, Chairperson
- L. Keough, CNP, Vice Chairperson (Left at 2:51 p.m.)
- K. Barnes, JD, RPh
- D. Drew, Public Member
- J. Fantes, MD (Left at 2:51 p.m.)
- G. Gravlin, EdD (Left at 5:35 p.m.)
- L. Kelly, CNP
- M. Keohane, RN
- C. LaBelle, RN
- N. Murphy, LPN
- D. Nikitas, RN
- E. Pusey-Reid, DNP

Board Members Not Present

- A. Alley, RN
- G. Dufault, LPN

Staff Present

- L. Silva, RN, DNP, Executive Director
- C. MacDonald, RN, DNP, Deputy Executive Director
- O. Atueyi, JD, Board Counsel
- B. Oldmixon, JD, Board Counsel
- H. Cambra, RN, JD, Complaint Resolution Coordinator
- A. Fein, RN, JD, Complaint Resolution Coordinator
- A. MacDonald, RN, DNP Nursing Education

Coordinator

F. Medaglia, RN/CNP, PhD, Assistant Director for

Policy and Research

- L. Talarico, RN/CNP, Nursing Practice Coordinator
- M. Campbell, RN, JD, Nurse Investigation Supervisor
- V. Berg, JD, Chief Board Counsel
- S. Gaun, Office Support Specialist I
- K. Jones, Probation Compliance Officer
- L. Ferguson, Paralegal
- L. Woodward, Nurse Investigator
- L. Harrison, Senior Assistant for Nursing Education
- N. Tahoun, Temporary SARP Administrative Assistant

Staff Not Present

- M. Gilmore, RN, SARP Coordinator
- S. Hall, SARP Administrative Assistant

TOPIC:

Call to Order & Determination of Quorum

DISCUSSION:

- B. Levin confirmed by roll call that a quorum of the Board members was present and announced that the meeting was being recorded.
- B. Levin introduced the three (3) New Board members and the seats they were appointed to: G. Gravlin (RN Education, Post Graduate Level), M. Keohane (RN Direct Care, not advanced practiced) and D. Nikitas (RN Direct Care, to patients living with chronic pain).

ACTION:

At 9:02 a.m., B. Levin, Chairperson, called the November 14, 2018 Regularly Scheduled Board Meeting to order.

TOPIC:

Approval of Agenda

DISCUSSION:

None.

ACTION:

Motion by L. Keough, seconded by D. Drew, and voted unanimously to approve the Agenda as presented.

TOPIC:

Approval of Board Minutes for the October 10, 2018 Meeting of the Regularly Scheduled Board Meeting

DISCUSSION:

None.

ACTION:

Motion by L. Keough, seconded by D. Drew, and voted unanimously to approve the Minutes of the October 10, 2018 Regularly Scheduled Board Meeting as presented.

TOPIC:

Reports, Announcements and Administrative Matters

- A. Executive Director's Report
- B. Announcements

DISCUSSION:

- A. Executive Director's Report: L. Silva stated she does not have a report. She requested that the Board Members access and check their e-mail accounts more often. L. Silva stated that since the Board has grown, the staff will reconfigure the seating at the conference table, so the Board members maybe sitting in a different seat at the next Board meeting.
- B. L. Silva requested the Board members to sign up for the Complaint Committee.

ACTION:

- A. So noted.
- B. So noted.

TOPIC: SARP

Activity Report

DISCUSSION:

None.

ACTION:

None.

TOPIC: Probation Staff Action Report

DISCUSSION:

K. Jones was available for questions. K. Jones stated there was an error on the report. K. Jones stated the correct number for the probation monitoring successfully completed should be two (2) and not four (4).

ACTION:

So noted.

TOPIC: Probation

Request for Termination of Probation in the matter of D. Rost, LN55429, NUR-2016-0214

DISCUSSION:

K. Jones summarized her previously distributed memorandum and attached exhibits to the Board.

ACTION:

Motion by L. Keough, seconded by D. Drew, and voted unanimously to approve the Licensee's request to terminate the probation.

TOPIC: Practice Coordinator Staff Report

DISCUSSION:

None.

ACTION:

None.

TOPIC: Education

244 CMR 6.04(1)(c) & (1)(f) Administrative Changes, Lawrence Memorial Regis, CEO

DISCUSSION:

A. MacDonald summarized her previously distributed memorandum and attached exhibits to the Board.

ACTION:

Motion by B. Levin, seconded by L. Kelly, and voted unanimously to find compliance with regulation 244 CMR 6.04 (1)(c) in the notification of the appointment of S. Sandberg, President and Chief Executive Officer (Chief Executive Officer), Lawrence Memorial Hospital / Regis College of Nursing, Medford.

TOPIC: Education

244 CMR 6.04(1)(c) & (1)(f) Administrative Changes, Roxbury Community College, Program Administrator

DISCUSSION:

C. MacDonald summarized her previously distributed memorandum and attached exhibits to the Board. K. Lundsten and V. Roberson of the program were present. K. Lundsten and V. Roberson addressed the Board regarding K. Lundsten's qualifications as interim program administrator. V. Roberson stated the position is full-time interim and the college is searching for the full-time director of the nursing program.

ACTION:

Motion by D. Drew, seconded by K.A. Barnes, and voted unanimously that:

1. The appointment of K. Lundsten as the Program Administrator of Roxbury Community College meets the required qualifications under 244 CMR 6.04 (2)(a)3: possess a minimum of five (5) years full-time nursing experience, or its equivalent, within the last eight years, with at least three (3) years' experience in nursing education.

TOPIC: Education

244 CMR 6.05, Assumption College, Initial Approval Application

DISCUSSION:

RECUSAL: L. Keough recused herself from the matter and left the room during the deliberation and vote. A. MacDonald summarized her previously distributed memorandum and attached exhibits to the Board. K. Stover was present. K. Stover did not speak to the Board.

ACTION:

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

- 1. Find Assumption College has provided satisfactory evidence of its ability to achieve compliance with 244 CMR 6.04: Standards for Nursing Education Program Approval,
- 2. Grant Assumption College Initial Approval status in the further establishment of the Registered Nurse Baccalaureate education program.

TOPIC: Education

244 CMR 6.08, Roxbury Community College Associate Degree Nursing Program

DISCUSSION:

K. Lundsten and V. Robinson were present for questions. C. MacDonald summarized her previously distributed memorandum and attached exhibits to the Board also noting two items that were not provided in those documents: 1. The current Program NCLEX pass rate was 83.64% and as of September 2018 Accreditation Commission for Education in Nursing (ACEN) had changed the program accreditation status to warning with good cause. V. Robinson stated that the program made substantial changes to the curriculum, syllabi, and other items and that is why ACEN came for the site visit. In response to B. Levin, V. Robinson provided a copy of the ACEN notification which was distributed to the Board. The

notification summarized the deliberations and recommendations of the ACEN evaluation review panel (Spring 2018) demonstrating that the program is non-compliant with two accreditation standards and that the evaluation review panel did not accept the program's follow-up report.

Board members discussed concerns about continued lack of compliance and V. Roberson described the student demographics of the program and stated that prospective students have been admitted for January 2019.

L. Silva asked V. Robinson to submit the ACEN Reports it has received by 11/30/18.

ACTION:

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

- 1. Freeze the admissions process and re-evaluate it in March 2019;
- 2. Continue the Approval with Warning Status;
- 3. Permit the program to allow the students already admitted for January 2019 to proceed with admission;
- 4. Require the program to provide to the Board the full ACEN report,
- 5. Accept the compliance report finding that the Program has failed to demonstrate correction of the regulatory deficiencies at 244 CMR 6.04 (1)(c), (1)(e), (3)(a)1, (4)(b)3, (4)(b)5 within the designated time period and current non-compliance with 2(b).
- 6. Direct the program to provide to the Board the following in order to demonstrative correction of the regulatory deficiencies with a verification site survey to be scheduled:
 - A. Due by December 31, 2018:
 - 1. Provide link to the published updated student nursing handbook [244 CMR 6.04(1)(a)];
 - 2. Provide schedule of meeting dates for formalized mentoring plan and list of topics discussed [244 CMR 6.04(1)(c)];
 - 3. Evidence of an internal audit of student immunization records to ensure compliance with updated immunization policy [244 CMR 6.04(1)(c)];
 - 4. Review and revise course outcomes and clinical evaluation tools to demonstrate integration of curriculum concepts in all courses, and evidence of student progression of nursing competencies [ref 244 CMR 6.04(4)(b)3 and (4)(b)5];
 - 5. Provide a table demonstrating the course student learning outcomes demonstrating progression to the program learning outcomes [ref 244 CMR 6.04(4)(b)3 and (4)(b)5];
 - 6. Provide a table of credits hours and clock hours for each course demonstrating congruence with the published curriculum map and in accordance with generally accepted academic standards and hours/ credit hours for practical nurse programs [244 CMR 6.04(4)(b)4];
 - 7. Provide a table demonstrating correlation between the didactic and clinical components of a course with the course and program student learning outcomes [244 CMR 6.04(4)(b)2];
 - 8. Provide revised clinical evaluation tools demonstrating congruence with course description and course and clinical student learning outcomes [244 CMR 6.04(4)(b)2];

9. Submit the systematic evaluation plan with data and analysis on a quarterly basis to demonstrate that the results of the evaluation are being used for the development, maintenance, and revision of the program with the first report due by December 31, 2018 (then March 31, 2019, June 30, 2019) and the last due December 31, 2019 [ref: 244 CMR 6.04 (1)(e)].

TOPIC: Education

244 CMR 6.08, Roxbury Community College Practical Nursing Program

DISCUSSION:

C. MacDonald summarized her previously distributed memorandum and attached exhibits to the Board. K. Lundsten and V. Robinson were present. There was no discussion.

ACTION:

Motion by L. Keough, seconded by C. LaBelle, and voted unanimously to:

- 1. Accept the compliance report finding that the Program has failed to demonstrate correction of the regulatory deficiencies at 244 CMR 6.04 (1)(c), (1)(e), (3)(a)1, (4)(b)3, (4)(b)5 within the designated time period,
- 2. The admissions process will be put on hold until the re-evaluation process in March 2019,
- 3. Continue the Approval with Warning Status,
- 4. Direct the program to provide to the Board the following in order to demonstrate correction of the regulatory deficiencies with a verification site survey to be scheduled:
 - A. Due by Due by December 31, 2018:
 - 1. Provide link to the published updated student nursing handbook [244 CMR 6.04(1)(a)];
 - 2. Provide schedule of meeting dates for formalized mentoring plan and list of topics discussed [244 CMR 6.04(1)(c)];
 - 3. Evidence of an internal audit of student immunization records to ensure compliance with updated immunization policy [244 CMR 6.04(1)(c)];
 - 4. Review and revise course outcomes and clinical evaluation tools to demonstrate integration of curriculum concepts in all courses, and evidence of student progression of nursing competencies [ref 244 CMR 6.04(4)(b)3 and (4)(b)5];
 - 5. Provide a table demonstrating the course student learning outcomes demonstrating progression to the program learning outcomes [ref 244 CMR 6.04(4)(b)3 and (4)(b)5];
 - 6. Provide a table of credits hours and clock hours for each course demonstrating congruence with the published curriculum map and in accordance with generally accepted academic standards and hours/ credit hours for practical nurse programs [244 CMR 6.04(4)(b)4];
 - 7. Provide a table demonstrating correlation between the didactic and clinical components of a course with the course and program student learning outcomes [244 CMR 6.04(4)(b)2];
 - 8. Provide revised clinical evaluation tools demonstrating congruence with course description and course and clinical student learning outcomes [244 CMR 6.04(4)(b)2];
 - 9. Submit the systematic evaluation plan with data and analysis on a quarterly basis to demonstrate that the results of the evaluation are being used for the development, maintenance,

and revision of the program with the first report due by Dec 27, 2018 (then March 31, 2019, June 30, 2019) and the last due December 31, 2019 [ref: 244 CMR 6.04 (1)(e)].

5. Motion by B. Levin, seconded by L. Keough, and voted unanimously to require the Associate Degree Nursing Program and Practical Nursing Programs to have a full-time program administrator by March 2019.

TOPIC: Requests for License Reinstatement

Request for Reinstatement; In the matter of Nancy Pitt, LN49394, Docket No. 20080908-LN-020

DISCUSSION:

L. Ferguson summarized her previously distributed memorandum and attached exhibits to the Board. N. Pitt was present. In response to K.A. Barnes, L. Ferguson stated the Licensee submitted the continuing education requirements.

ACTION:

Motion by K.A. Barnes, seconded by L. Keough, and voted unanimously to reinstate the Licensee's license conditioned upon the following:

- 1. The Licensee will enter into a superseding STANDARD POST-SUPSENSION CONSENT AGREEMENT FOR PROBATION FOR ONE (1) YEAR, as required by the original Agreement, with requirements to include timely renewal of her LN license and monitored practice;
- 2. The Licensee will submit a valid CORI Authorization Form;
- 3. The Licensee will have a negative CORI result;
- 4. The Licensee will submit proof of her successful completion of one (1) contact hour in Critical Thinking and Nursing Judgment to complete her remedial continuing education requirement pursuant to the Suspension followed by Probation Agreement;

TOPIC: Strategic Development, Planning and Evaluation

DISCUSSION:

- A. Systematic Policy Evaluation: None.
- B. Presentation/Report: None.
- C. 1. SARP Proposed Policy: 18-XX: *SARP Eligibility Criteria for Initial Admission:*H. Cambra summarized her previously distributed memorandum and attached exhibits to the Board. In response to C. LaBelle, H. Cambra stated the Board had proxies in SARP Policy 13-01. In response to K.A. Barnes, H. Cambra stated the changes have been made in SARP Policy 13-01.
- C. 2. Consent Agreement for SARP Participation (CASP):
 V. Berg summarized the memorandum and exhibits she distributed to the Board at the meeting. In response to J. Fantes, V. Berg stated that the PMP Release is required every time. In response to D. Drew, V. Berg stated the number of hours of timely response by the Licensee has not enforced by the Board. In response to D. Drew, V. Berg stated the Licensee has to use the Board approved drug testing management company. In response to G. Gravlin, V. Berg stated the low creatinine level is listed in Attachment A. In response to L. Silva, V. Berg stated CBD oil will come back as a THC. In response to C. LaBelle and J. Fantes, V. Berg will add the three (3) drugs that they stated in

Attachment X in the CASP. In response to K.A. Barnes, V. Berg will make several corrections in the CASP. In response to L. Kelly, V. Berg and L. Silva stated that if the Licensee fails to take a toxicology screening on the day he or she is selected and takes the toxicology screening the next day, it is a violation of the CASP.

D. Topics for Next Agenda: None.

ACTION:

- A. None.
- B. None.
- C. 1. Motion by L. Keough, seconded by B. Levin, and voted unanimously to accept the SARP Proposed Policy 18-XX: *SARP Eligibility Criteria for Initial Admission*.
- C. 2. Motion by K.A. Barnes, seconded by L. Kelly, and voted unanimously to accept the changes to the CASP as outlined by the counsel discussed here with the changes to the IRP as well as the urine exam.
- D. None.

Break from 10:45 a.m. to 10:57 a.m.

TOPIC:

G.L. c.30A, §21 Executive Session

DISCUSSION:

None.

ACTION:

Motion by L. Keough, seconded by D. Drew, and voted unanimously to convene the Executive Session at 10:57 a.m. as per Purpose One of G.L. c.30A, §21 (a)(1).

G.L. c. 30A, § 21 Executive Session 10:57 a.m. to 1:52 p.m.

TOPIC:

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

DISCUSSION:

None.

ACTION:

Motion by L. Keough, seconded by D. Drew, and voted unanimously to convene the G.L. c. 112, s. 65C Session at 1:52 p.m.

G.L. c. 112, s. 65C Session 1:52 p.m. to 2:40 p.m.

TOPIC:

G.L. c.30A, §21 Executive Session

November 14, 2018 Regular Session Board Meeting Minutes (to be Approved 12/12/2018)

DISCUSSION: None.
ACTION: Motion by L. Keough, seconded by D. Drew, and voted unanimously to reconvene the Executive Session at 2:40 p.m. as per Purpose One of G.L. c.30A, §21 (a)(1).
G.L. c. 30A, § 21 Executive Session 2:40 p.m. to 3:39 p.m.
TOPIC: G.L. c. 112, s. 65C Session
DISCUSSION: None.
ACTION: Motion by B. Levin, seconded by K.A. Barnes, and voted unanimously to reconvene the G.L. c. 112, s. 65C Session at 3:39 p.m.
G.L. c. 112, s. 65C Session 3:39 p.m. to 5:57 p.m.
TOPIC: Adjudicatory Session
DISCUSSION: Deferred.
ACTION: None.
Adjudicatory Session DEFERRED
TOPIC: Adjournment
DISCUSSION: None.
ACTION: Motion by B. Levin, seconded by K.A. Barnes, and voted unanimously to adjourn the meeting at 5:58 p.m.

Minutes of the Board's November 14, 2018, Regularly Scheduled Meeting were approved by the Board on December 12, 2018.

Barbara Levin, RN

Chairperson

Board of Registration in Nursing

Agenda with exhibits list attached.

COMMONWEALTH OF MASSACHUSETTS Board of Registration in Nursing

Notice of the Regularly Scheduled Meeting Regular Session

239 Causeway Street Room 417 Boston, Massachusetts 02114

Wednesday, November 14, 2018

UPDATED AGENDA AS OF 11/7/18 at 4:15pm

KEY: Item materials distributed for 10/10/18 Board meeting, but DEFERRED d/t time constraints

Estimated Time	Item #	Item	Exhibit	Presented by
9:00 a.m.	I.	CALL TO ORDER & DETERMINATION OF QUORUM	None	
	11.	APPROVAL OF AGENDA	Agenda	
	III.	APPROVAL OF MINUTES A. Draft Minutes for the October 10, 2018 Meeting of the Board of Registration in Nursing, Regular Session	Minutes	
	IV.	REPORTS, ANNOUNCEMENTS AND ADMINISTRATIVE MATTERS A. Executive Director's Report B. Announcements/Administrative Matters 1. Access to state mail account 2. 2019 CC meeting date schedule	Oral/Memo Notice Sign-up log	LS ASF ASF
	V.	SARP A. SARP Activity Report: NONE	None	
	VI.	PROBATION A. Probation Staff Action Report: NONE B. Termination of Probation 1. D. Rost, LN55429, NUR-2016-0214	None Memo	KJ
	VII.	PRACTICE A. Practice Coordinator Staff Report: NONE	None	

COMMONWEALTH OF MASSACHUSETTS Board of Registration in Nursing

KEY: Item materials distributed for 10/10/18 Board meeting, but DEFERRED d/t time constraints

	VIII.	EDUCATION		
		A. Nursing Education Staff Report: None B. 244 CMR 6.04(1)(c) & (1)(f) Administrative Changes 1. Lawrence Memorial Regis, CEO 2. Roxbury Community College, Program Administrator C. 244 CMR 6.05	None Reports	AM CM
		Assumption College, Initial Approval Application	Compliance Report	AM
		D. 244 CMR 6.08 1. Roxbury Community College Associate Degree Nursing Program	Compliance Report	СМ
		Roxbury Community College Practical Nursing Program	Compliance Report	СМ
	IX.	REQUESTS FOR LICENSE REINSTATEMENT A. Request for Reinstatement; In the matter of Nancy Pitt; LN49394; Docket No. 20080908-LN-020	Memo	LF
,	X.	STRATEGIC DEVELOPMENT, PLANNING AND EVALUATION A. Systematic Policy Evaluation: NONE	None	
		B. Presentation/Report - NONE	None	
	•	C. SARP Matters: 1. 18-XX: SARP Eligibility Criteria for Initial Admission	Proposed Policy and Attachment	HC
		Consent Agreement for SARP Participation (CASP)	Draft	VPB
		D. Topics for Next Agenda		

COMMONWEALTH OF MASSACHUSETTS Board of Registration in Nursing

KEY: Item materials distributed for 10/10/18 Board meeting, but DEFERRED d/t time constraints

	XI.	EXECUTIVE SESSION		
		The Board will meet in Executive Session as authorized pursuant to M.G.L. c.30A, § 21(a)(1)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, or as authorized pursuant to M.G.L. c.30A, § 21(a)(1)3. for the purpose of discussing strategy with respect to litigation as a public discussion may have a detrimental effect on the Board's position.		
		Specifically, the Board will discuss and evaluate the Good Moral Character as required for registration for pending applicants.		
		 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. 	CLOSED SESSION	
		 Specifically, the Board will discuss and evaluate a request by a licensee for a waiver of licensure renewal requirements due to ongoing medical issues. 		
		 Specifically, the Board will discuss pending litigation: Jane Doe v. BORN, Suffolk Superior Court, C.A. 1884-CV-03082. 		
		 Approval of prior executive session minutes in accordance with M.G.L. c. 30A, § 22(f) for sessions held during the October 10, 2018 meeting. 		
	•	LUNCH BREAK		
	XII.	M.G.L. c. 112, § 65C SESSION	CLOSED SESSION	
1 10 10 10 10 10 10 10 10 10 10 10 10 10	XIII.	M.G.L. c. 30A, § 18 ADJUDICATORY SESSION	CLOSED SESSION	
6:00 p.m.	XIV.	ADJOURNMENT		

If you need reasonable accommodations in order to participate in the meeting, contact the DPH ADA Coordinator Beth Rabasco, Phone: 617-624-5291 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.