



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

March 25, 2025

Via First Class and Certified Mail No.
Return Receipt Requested and via Email

Rebecca Selent
129 Farm Street
Bellingham, MA 02019

RE: In the Matter of Rebecca Selent
Docket No. NUR-2018-0183
License No. LN57949

FINAL NOTICE: SUSPENSION

Dear Ms. Selent:

On April 3, 2024, you entered into a Post-Revocation 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.

On February 4, 2025, I sent you a Notice of Violation and Intent to Suspend ("Notice"). A copy of the Notice is enclosed with this letter. The Notice informed you that you are in violation of the Order and listed the facts supporting the determination that you are in violation. The Notice also informed you that the Board voted to suspend your license. The Notice informed you that you had a right to a hearing on the limited issue of whether you are in compliance with, or in violation of, the terms of the Order. Lastly, the Notice informed you that to claim your right to a hearing, you needed to submit a written statement of facts and request for a hearing to Board Counsel within seven (7) days.

As of the date of this letter, Board Counsel has not received from you a written statement of facts and request for a hearing. Accordingly, you have waived your right to a hearing.

Effective today, March 25, 2025, the Board **SUSPENDS your license to practice nursing indefinitely. You may not practice as a Registered Nurse in Massachusetts until the Board provides you written notice that it has reinstated your license.**

This notice constitutes a final agency action. You are hereby notified that you have a right to appeal this *Final Notice: Suspension* within thirty (30) days of your receipt of this notice, either to the Superior Court for Suffolk County or the county where you reside pursuant to M.G.L. ch. 30A, § 14, or to the Supreme Judicial Court pursuant to M.G.L. ch. 112, §64.

You may petition the Board to reinstate your license in accordance with Board's policy 17-01. Please review the attached reinstatement policy for guidance on information and documents that you will need to include with your petition. You may also contact reinstatement@mass.gov if you have any questions regarding license reinstatement.

Sincerely,

Patricia McNamara on behalf of:
Heather Cambra
Executive Director, BSN, RN, JD
Board of Registration in Nursing



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February 4, 2025

Via First Class and Certified Mail No.: 9589 0710 5270 0876 5520 68
Return Receipt Requested and via Email

Rebecca Selent
129 Farm Street
Bellingham, MA 02019

RE: In the Matter of Rebecca Selent
Docket No. NUR-2018-0183
License No. LN57949

NOTICE OF VIOLATION AND INTENT TO SUSPEND

Dear Ms. Selent:

On April 3, 2024, you entered into a Post-Revocation 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 8 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 January 8, 2025, 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:

- I. Per Paragraph 4(n) of the Agreement, you are required to "Demonstrate either absence of, or successful, sustained recovery from, substance abuse, by:
 - i. Abstaining from the use of alcohol and all substances of abuse or substances with potential for abuse.
 - ii. Complying with random observed toxicology screening, including but not limited to testing of urine, blood or hair as determined necessary by Board staff, for a *minimum* of fifteen tests annually. Compliance requires that the Licensee enroll with and maintain a current account with the Board's Drug Testing Management

Company (DTMC) identified in Attachment A of this Agreement, and that the Licensee meet the conditions and procedures outlined in Attachment A, including but not limited to:

- a. Calling the DTMC daily, during hours set by the DTMC to determine whether the Licensee has been selected to test on that day;
- b. When selected to test, appearing at a lab identified by the DTMC as appropriate for collecting observed toxicology samples for the type of test that has been scheduled, during the hours of collection, and provide a sample; and
- c. Agreeing that the DTMC shall provide the results of random toxicology screening to the Board.

The Licensee agrees that positive toxicology screening results that are not supported by a valid prescription provided to Board staff prior to the toxicology test date are a violation of this Agreement.”

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2. Paragraph 4(h) of the Agreement requires you to submit quarterly Supervision Reports attesting to the quality of your nursing practice, including any errors or incidents. The Board may take action pursuant to Paragraph 8 in the event that any quarterly report reveals a practice issue the Board deems significant.

- *On 10/16/2024, you did not perform a narcotic count at the change of shift and did not document that Ativan was administered. The narcotic count was incorrect during your shift.*
- *On 10/31/2024, you completed the wrong treatment for a resident (used Calcium Alginate instead of Xeroform.)*
- *On 11/1/2024, you did not run IV Vancomycin for a resident. You held the medication without a doctor's order.*
- *You received a final written warning for all three incidents.*

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,

Patricia McNamara on behalf of:

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



The Commonwealth of Massachusetts
Executive Office of Health and Human Service
Department of Public Health
250 Washington Street, Boston, MA 02108-4610

Attachment 1

MAURA T. HEALEY
Governor

KIMBERLEY DRISCOLL
Lieutenant Governor

KATHLEEN E. WALSH
Secretary

ROBERT GOLDSTEIN, MD, PhD
Commissioner

Tel: 617-624-4000
www.mass.gov/dph

April 9, 2024

Via First Class Mail & Certified Mail No. 7020 0090 0000 1273 3695,

Return Receipt Requested

Rebecca Selent
129 Farm Street
Bellingham, MA 02019

Re: In the Matter of Rebecca Selent; License No. LN57949
Docket No. NUR-2018-0183

Dear Ms. Selent:

This letter acknowledges receipt by the Board of Registration in Nursing (Board) of a signed original Post-Revocation Consent Agreement for Probation (Probation Agreement) between you and the Board in resolution of the above-referenced complaint. The Board has now signed the original Agreement, a copy is enclosed for your records. Please note the Board no longer issues paper licenses.

Enclosed are the following two (2) required probation forms that each of your nursing supervisors must complete and submit to the Board in accordance with the terms of your probation: "Supervisor Verification Form" (Form 1) and "Supervision Report Form" (Form 2). Additional copies may be made of these blank forms as needed or can be obtained from the Board's website, www.mass.gov/dph/boards/rn, through the Complaint Resolution topic link.

Please note carefully that the effective date of the Probation Agreement is April 3, 2024, as is stated on the signature page of the Agreement. As of the effective date your nursing license is on probation and you must comply with all of the requirements of the Probation Agreement. It is your responsibility to ensure that the Board receives all required documentation and information by the due dates specified in the Probation Agreement. The Probation Agreement will remain in effect until you fulfill all of its conditions and the Board gives you written confirmation that your license probation has ended.

COMMONWEALTH OF MASSACHUSETTS

SUFFOLK COUNTY

**BOARD OF REGISTRATION
IN NURSING**

**In the Matter of
Rebecca Selent
License No. LN57949**

Docket No. NUR-2018-0183

POST-REVOCATION CONSENT AGREEMENT FOR PROBATION

The Massachusetts Board of Registration in Nursing (Board) and Rebecca Selent (Licensee), a Licensed Practical Nurse (LN) licensed by the Board, License No. LN57949, 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 agrees that this Post-Revocation Consent Agreement for Probation ("Agreement") will supersede any and all previous agreements that she has entered into with the Board. Further, the Licensee agrees that this Agreement has been executed as a result of the Board's:
 - a. receipt and investigation of a complaint filed against her, Docket No. NUR-2018-0183, which resulted in the revocation of her nursing license, pursuant to a Final Decision and Order by Default issued by the Board, effective September 25, 2021 in resolution of the complaint; and
 - b. consideration of the Licensee's request for license reinstatement and documentation she submitted pursuant to the requirements of the Final Decision and Order by Default referenced in the subparagraph immediately above.
2. The Licensee admits that while employed as a Licensed Practical Nurse at Brookside Rehabilitation and Nursing Center in Webster, MA, on or about August 3, 2018, she gave a patient Coumadin without an order. In addition, she

administered the Coumadin without verifying patients medical order or reviewing patient's PT/INR test results.

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. Respond to inquiries from Board staff in a timely manner.
 - e. Disclose the terms of this Agreement to the Program Administrator of any Nursing Education Program at which she is enrolled during the Probationary Period.
 - f. Maintain active employment (Active Practice Requirements) in a position that requires a nursing license, in a facility setting where the Licensee receives consistent, on-site supervision by a qualified licensed nurse¹ for a minimum average of twenty (20) hours per week throughout the Probationary Period.
 - i. The Licensee agrees that a qualified licensed nurse is defined as a nurse who 1) possesses a Massachusetts nursing license in good standing or authority to practice under federal law, or both; 2) is employed in a supervisory role; 3) possesses a minimum of one year full-time experience in nursing, or its equivalent, within the last five years; 4) is educationally prepared at or above the level of the Licensee; and 5) has no open complaints with the Board and no open criminal matters.
 - g. Refrain from the practice of nursing in any of the following employment settings during the Probationary Period:

¹ The Licensee must receive direct supervision from a qualified licensed nurse who is employed in a supervisory role and is physically located at all times in each facility in which the Licensee practices nursing.

- i. Settings where structured, consistent on-site supervision is not in place including but not limited to, home care agencies or private home care;
 - ii. Travel nurse agencies; or
 - iii. Temporary staffing agencies.
- h. Review this Agreement with each of her nursing supervisors, and arrange for each nursing supervisor to submit directly to the Board:
 - 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 reports², 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 proper medication administration and patient assessment skills including any errors and incidents. The Board may take action pursuant to paragraph 8 in the event that any quarterly report reveals a practice issue the Board deems significant.
- i. Within 30 days of the Effective Date, notify the Board in writing if the Licensee is not employed in accordance with paragraph 4f.
- j. If not employed in accordance with paragraph 4f within 30 days of the Effective Date:
 - i. On a weekly basis: actively search for nursing employment.
 - ii. On a monthly basis: submit to the Board a detailed description of her nursing job search activities and the status of her nursing employment.
- k. Complete the Active Practice Requirements within a period up to a maximum of double the length of the Probationary Period.³

² 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.

³ The Probationary Period is defined in Paragraph 3.

- l. Notify the Board in writing within seven (7) 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.
- m. Notify the Board in writing within seven (7) days of any complaint filed against her nursing license in any jurisdiction in which she holds such a license.
- n. Demonstrate either absence of, or successful, sustained recovery from, substance abuse, by:
 - i. Abstaining from the use of alcohol and all substances of abuse or substances with potential for abuse.
 - ii. Complying with random observed toxicology screening, including but not limited to testing of urine, blood or hair as determined necessary by Board staff, for a *minimum* of fifteen tests annually. Compliance requires that the Licensee enroll⁴ with and maintain a current account with the Board's Drug Testing Management Company (DTMC) identified in Attachment A of this Agreement, and that the Licensee meet the conditions and procedures outlined in Attachment A, including but not limited to:
 - a. Calling the DTMC daily, during hours set by the DTMC to determine whether the Licensee has been selected to test on that day;
 - b. When selected to test, appearing at a lab identified by the DTMC as appropriate for collecting observed toxicology samples for the type of test that has been scheduled, during the hours of collection, and provide a sample; and
 - c. Agreeing that the DTMC shall provide the results of random toxicology screening to the Board.

The Licensee agrees that positive toxicology screening results that are not supported by a valid prescription provided to Board staff prior to the toxicology test date are a violation of this Agreement.

- iii. Identifying all treatment providers, including primary care physicians, prescribers, therapist(s) and counselor(s), as of the Effective Date and reporting any change of existing treatment providers or addition of new treatment or new treatment providers within ten (10) days. After the Effective Date and upon request

⁴ The Licensee must enroll with the DTMC within seven (7) days of the Effective Date.

thereafter, providing an Authorization for Release of Information for each current treatment provider. Providing documentation from each treatment provider in which the provider verifies that she is aware of Licensee's Probation status.

- iv. Providing authorization, upon request, for Board staff to obtain the Licensee's Prescription Monitoring Program (PMP) report. Identifying all pharmacies where the Licensee has filled prescriptions within the last year and reporting any new pharmacies where the Licensee fills prescriptions during Probation. After the Effective Date and upon request thereafter, providing an Authorization for Release of Information for each pharmacy.

- 5. The Licensee agrees that Board staff may, pending review by the Board, take immediate action to restrict nursing practice privileges following:

- a. A report from an out of state employer that the Licensee is under investigation for a practice issue which violates Board regulations at 244 CMR 9.00 *et seq.*

Immediate action that Board staff may take includes notifying the Licensee and any employer where the Licensee may be engaged in nursing practice, that the Licensee's nursing practice privileges have been restricted by the Board. Board staff shall inform the Licensee of the factual basis for taking immediate action. In the event that the Licensee disputes the factual basis, the Licensee agrees to refrain from the practice of nursing pursuant to her Massachusetts license until such time as the Board either determines that there is no violation, or takes action pursuant to paragraph 8.

- 6. 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.
- 7. 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 Board⁵.
- 8. If the Licensee does not comply with each requirement of this Agreement, or if the Board opens a Subsequent Complaint⁶ during the Probationary Period, the Licensee agrees to the following:

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

- 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
 - iii. IMMEDIATELY SUSPEND the Licensee's nursing license.
 - b. If the Board suspends the Licensee's nursing license pursuant to Paragraph 8(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.
9. The Licensee agrees that if the Board suspends her nursing license in accordance with Paragraph 8, she will immediately return her current Massachusetts license to practice as a Licensed Practical 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 Licensed Practical Nurse until such time as the Board reinstates her nursing license or right to renew such license⁷.
 10. The Licensee understands that the Board has granted her petition for reinstatement on the condition that her nursing license is placed on probation for one (1) year. She further understands and agrees that in executing this Post-Revocation Consent Agreement for Probation, she is knowingly and voluntarily waiving any rights she has to a formal adjudication concerning the Board's action on her petition for reinstatement of her nursing license.
 11. The Licensee acknowledges that she has been at all times free to seek and use legal counsel in connection with the Complaint and this Agreement.
 12. The Licensee acknowledges that after the Effective Date, the Agreement constitutes a public record of disciplinary action by the Board. The Board may

substantiated by evidence, as determined following the complaint investigation during which the Licensee shall have an opportunity to respond.

⁷ Any evidence of unlicensed practice or misrepresentation as a Licensed Practical 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 80A.

forward a copy of this Agreement to other licensing boards, law enforcement entities, and other individuals or entities as required or permitted by law.

13. 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.

Rebecca Solent 3/5/2024

Rebecca Solent
Licensee (sign and date)

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

April 3, 2024

Effective Date of Agreement

Fully Signed Agreement Sent to Licensee on 4/9/2024 by Certified
Mail No. 7020 0090 0000 1273 3695