

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

Minutes of the Regularly Scheduled Board Meeting
Wednesday, October 11, 2017

Board Members Present

B. Levin RN, Chair
L. Keough, CNP, Vice Chair
J. Killion, LPN
C. LaBelle, RN
J. Fantes, MD
G. Dufault, LPN
D. Zucker, RN
P. Noonan, RN
N. Murphy, LPN

Board Members Not Present

D. Drew, Public Member
L. Kelly, CNP
P. Collins, RN

Staff Present

L. Silva, RN, DNP, Executive Director
C. MacDonald, RN, DNP, Deputy Executive Director
A. MacDonald, DNP, RN, Nursing Education Coordinator
K. Ashe, RN, Nursing Education Coordinator
O. Atueyi, JD, Board Counsel
D. M. DeVaux, RN, SARP Coordinator
M. Gilmore, RN, SARP Coordinator
A. Fein, RN, JD, Complaint Resolution Coordinator
K. Keenan, Licensing Coordinator
L. Talarico, CNP, Nursing Practice Coordinator
B. Oldmixon, Board Counsel
K. Fishman, Probation Monitor
L. Ferguson, Paralegal
K. Jones, Probation Monitor
A. Dylis, RN, PhD, Assistant Director for Policy and Research

Staff Not Present

H. Cambra, RN, JD, Complaint Resolution Coordinator

TOPIC:

Call to Order & Determination of Quorum

DISCUSSION:

A quorum of the Board was present.

ACTION:

At 9:09 a.m., B. Levin, Chairperson, called the October 11, 2017 Regularly Scheduled Board Meeting to order.

TOPIC:

Approval of Agenda

DISCUSSION:

L. Silva stated that X A 1 SARP Policy 05-001: SARP Eligibility Criteria and Admission Process was deferred.

ACTION:

Motion by L. Keough, seconded by J. Killion, and unanimously passed to approve the agenda as revised.

TOPIC:

Approval of Board Minutes for the September 13, 2017 Meeting of the Regularly Scheduled Board Meeting

DISCUSSION:

None.

ACTION:

Motion by J. Killion, seconded by C. LaBelle, and unanimously passed to accept the Minutes of the September 13, 2017, Regularly Scheduled Board Meeting.

TOPIC:

Reports, Announcements and Administrative Matters

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

DISCUSSION:

- A. Executive Director's Report: L. Silva introduced A. Dylis to the Board.
- B. None.

ACTION:

So noted.

TOPIC: SARP Activity Report

DISCUSSION:

D. DeVaux was available for questions.

ACTION:

So noted.

TOPIC: Probation
Staff Action Report

DISCUSSION:

K. Fishman was available for questions.

ACTION:

So noted.

TOPIC: Probation

Request for Notice of Violation and Further Discipline J. M O’Leary, LN92050, NUR-2016-007

DISCUSSION:

K. Jones presented the case to the Board. The licensee failed to disclose that she was on probation to her workplace. The licensee terminated her employment after her workplace filed a complaint with the Board. The licensee stated that she submitted the required CEUs and submitted the appropriate forms for her new workplace, but that she did not receive her consent agreement from her attorney for some period of time after the effective date. G. Dufault asked about the dates on the shipping form. B. Oldmixon stated that the licensee did sign the probation agreement on May 15th and the agreement went into effect June 15th. O. Atueyi presented the options available to the Board. G. Dufault asked if the licensee failed to disclose willfully or not.

ACTION:

Motion by P. Noonan, seconded by G. Dufault, and unanimously passed to extend the active practice requirement for the probation by six months but leave the requirements of the probation unchanged.

TOPIC: Practice Coordinator Staff Report**DISCUSSION:**

L. Talarico was available for questions. L. Talarico stated that the Board would no longer be issuing license cards.

ACTION:

So noted.

TOPIC: Education

1. Nursing Education Staff Report
2. 244 CMR 6.04(1)(c) & (1)(f) Administrative Changes
 1. Curry College RN BSN, Program Administrator
 2. Roxbury CC, Associate Degree RN and PN Certificate, Program Administrator
3. 2017 Q2 NCLEX Reports
 1. MA Graduates Regardless of State of Licensure
 2. MA Licensure Candidates Regardless of State of Education
4. 244CMR 6.06(2) Site Survey Waiver Request: Blackstone Valley Regional Technical High School Practical Nursing Program.
5. 244CMR 6.08(1)(h) Elms College Baccalaureate Registered Nursing Program Verification Survey
6. 244 CMR 6.08(1)(h) Laboure College ADN RN Verification Survey

DISCUSSION:

A. None.

B. RECUSAL A. MacDonald recused herself from this matter and left the room during the deliberation and vote. K. Ashe presented the administrative changes the Board. Board members reviewed the notification and credentials provided by Curry College for D. Hensel, Dean of the School of Nursing. Board members reviewed the notification and credentials provided by Roxbury Community College for K. Lundsten, Director of Nursing for the ADN RN and PN programs. K. Ashe stated that the Roxbury Community College appointed administrator did not meet the qualifications for program administrator at

244 CMR 6.04(2)(a) as the appointed administrator does not hold a current MA RN license and evidence of three years nursing education experience was not established in the resume provided by the College.

K. Ashe recommended the Board find compliance with the Curry College Program Administrator but find non-compliance with the Roxbury Community College Program Administrator. B. Oldmixon stated that the agenda should reflect that K. Ashe presented the two items.

C. A. MacDonald presented the Q2 NCLEX Reports to the Board. P. Noonan stated that there were issues with graduates signing up to take the NCLEX.

D. A. MacDonald presented the Site Survey Waiver Request to the Board. Blackstone had already received a site survey from ACEN and had already addressed all of the deficiencies already found. ACEN had granted full accreditation to the school until 2024. A. MacDonald recommended the Board accept the compliance report, grant the school full accreditation, and direct the school to submit evidence they had corrected the deficiencies by December 2017 and submit and progress reports that would go to ACEN also go to the Board.

E. A. MacDonald introduced the Dean of Nursing from Elms College and presented the survey to the Board. The Dean addressed the Board and spoke of the issues the college faced and the steps they were taking to fix their deficiencies.

F. K. Ashe introduced the Program Administrator, Dr. Karen Manning Division Chair, Laboure College and presented the report to the Board. K. Ashe recommended the Board accept the staff compliance report and continue the approval with warning status until full compliance has been established. B. Levin pointed to an incorrect date, stating NCLEX survey was conducted in 2016, not 2017 as the report. B. Levin asked Dr. Manning if she wished to comment. The Program Administrator spoke of the issues that the college had faced and the work that they are continuing to do to improve NCLEX first time pass rates. B. Levin stated that due to the issues the school still faced that continuation of approval with warning status is warranted.

ACTION:

B. Motion by D. Zucker, seconded by L. Keough, and unanimously passed to:

1. Find compliance with regulation 244 CMR 6.04(1)(c) & (1)(f) in the notification of the appointment of:

Desiree Hensel, PhD, RN, PNCS-BC, CNE, Dean (*Program Administrator*), Curry College, Milton, MA.

2. Find non-compliance with regulations 244 CMR 6.04(1)(c) & (1)(f) in the notification of the appointment of: Kristin Lundsten, MSN, RN Director of Nursing, Director of Nursing (*Program Administrator*) for Roxbury Community College, Associate Degree RN and Practical Nursing Certificate Program (Program).

a. Ms. Lundsten does not, at this time, hold a MA RN license in good standing and nursing experience does not clearly identify three years of nursing education experience required at for appointment as the Program Administrator [ref: 244 CMR 6.04(2)(a)1 and 2.

b. Until Ms. Lundsten is able to document a MA RN license in good standing, and submits evidence of 3 years full time nursing education experience according to MA regulation, she is not approved to perform the duties of a registered nurse, as is required of a qualification for program administrator.

B. Motion by G. Dufault, seconded by J. Killion, and unanimously passed to direct the Roxbury Community College to demonstrate compliance with 244 CMR 6.04(1)(c) and (1)(f) effective no later than October 20, 2017, by submitting a written notice to the Board of the appointment of either an interim

or permanent administrator qualified under 244 CMR 6.04(2)(a). Such notification is to be received by the Board by no later than October 23, 2017.

C. Motion by J. Killion, seconded by L. Keough, and unanimously passed to accept the 2017 Q2 NCLEX Reports.

D. Motion by L. Keough, seconded by P. Noonan, and unanimously passed to:

1. Accept the staff compliance report.
2. Grant waiver of 244 CMR 6.06(1)(a) finding:
 - a. written evidence of the program's full accreditation; and
 - b. the program's report evaluating its compliance with the accreditation standards of the Accreditation Commission for Education in Nursing (ACEN).
3. Direct the program to submit to the Board no later than December 31, 2017:
 - a. evidence the Program has completed an audit of faculty files to ensure that faculty MA RN licenses are verified upon hire and according to the written policy for the maintenance and retirement of school, faculty, student and graduate records and a plan to operationalize the policy in the future [ref: 244 CMR 6.04 (2)(b)1];
 - b. a revised admission policy and rubric [ref: 244 CMR 6.04 (3)(a)2]; and
 - c. a published and current policy which describe the specific nondiscriminatory criteria for advanced placement [ref: 244 CMR 6.04 (3)(a)2];
4. Direct the Program to submit to the Board any progress reports to ACEN in response to the recommendation(s) of the accrediting agency within 30 days of submission.
5. Failure to correct these regulatory deficiencies by the established due date may result in a follow-up onsite survey in conjunction with the Board's evaluation of the Program's approval status [ref: 244 CMR 6.08(1)].

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

1. Accept staff compliance report.
1. Find that the Program has provided satisfactory evidence of compliance with the regulations at 244 CMR 6.04; therefore, based on a preponderance of evidence, reinstate Full Approval status.
2. Direct the Program to submit:
 - a. 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, 2017 and the last due by December 31, 2018 [ref: 244 CMR 6.04 (1)(e)];
 - b. a revised admission policy that defines how candidates are selected if they do not meet all of the minimum admission criteria by November 16, 2017 [ref: 244 CMR 6.04 (3)(a)2];
 - c. a revised testing policy that defines how items are handled based on the metrics collected through item analysis by November 16, 2017 [ref: 244 CMR 6.04 (4)(b)5]; and
 - d. Demonstrate that the faculty have participated in professional development related to item writing by December 31, 2017 [ref: 244 CMR 6.04 (4)(b)5].
3. Failure to submit the required information by the established due date will result in the Board's evaluation of the Program's approval status [ref: 244 CMR 6.08(1)].

F. Motion by B. Levin, seconded by J. Killion, and unanimously passed to:

1. Accept staff compliance report.
2. Find that the Program has provided satisfactory evidence of compliance with the regulations at 244 CMR 6.04; except 244 CMR 6.04(1)(b), (1)(d), (3)(a)2, (4)(b)(3), (4)(b)5 and therefore, based on a preponderance of evidence, continuation of Approval with Warning status until full compliance with regulations demonstrated, and the Program can demonstrate a full academic year first time NCLEX -RN pass rate 80%.
3. Direct the Program to submit:

- a. Students participate in the governance of the parent institution and the program, as appropriate, for the accomplishment of the goals of the parent institution and program, including methods to communicate student participation in governance to their peers [ref: 244 CMR.6.04(1)(b)];
 - b. the updated systematic evaluation plan with data and analysis of the graduates for the 2017 academic year, demonstrating the results of the evaluation are being used for the development, maintenance, and revision of the program with a report due by November 16, 2017, and the second report due by January 2018. [ref: 244 CMR 6.04 (1)(e)];
 - c. Review and revised faculty job descriptions to ensure that role and responsibilities include regulations at 244 CMR 6.04(1)(b), (1)(d) and (1)(e) due November 16, 2017;
 - d. Demonstrative full implementation and adherence to admission policy, for the incoming August and December 2017 cohorts, including evidence outlining the non-discriminatory published criteria for the acceptance of applicants that do not meet all admission criteria [ref: 244 CMR 6.04 (3)(a)2]; due November 16, 2017;
 - e. Implementation of the NCLEX 2016 Detailed test Plan with correlation with nursing courses using organizational patterns consistent with principles of learning and educational practice [ref: 244 CMR 6.04(4)(b)2] due November 16, 2017 and,
 - f. clinical learning outcomes are complete and the evaluation stools demonstrate correlation with the revised curriculum [ref: 244 CMR 6.04(4)(b)5] due January 2018;
4. Failure to submit the required information by the established due date will result in the Board's evaluation of the Program's approval status [ref: 244 CMR 6.08(1)].

TOPIC:

- A. Systematic Policy Evaluation
 - 1.SARP Policy 05-001: SARP Eligibility Criteria and Admission Process
 - 2.SARP Policy 07-001: SARP Bridge Agreement
- B. Presentation/Report
 - 1.Conflict of Interest Review
 - 2.Massachusetts Coalition for the Prevention of Medical Errors:
 - a. 7/13/17 Coalition Meeting Minutes
 - b. 9/2017 Coalition Report
- C. Topics for Next Agenda

DISCUSSION:

- A. 1. None.
- A. 2. O. Atueyi presented the SARP Bridge Agreement to the Board and explained the SARP process.
- B. 1. V. Berg presented the Conflict of Interest Review.
- B. 2. A. Fein stated that the items were distributed.
- C. None.

ACTION:

- A. 1. Deferred.
- A. 2. Motion by L. Keough, seconded by C. LaBelle, and unanimously passed to accept the SARP Policy 07-001: SARP Bridge Agreement.

TOPIC:

G.L. c.30A, §21 Executive Session

DISCUSSION:

None.

ACTION:

Motion by L. Keough, seconded by G. Dufault, and unanimously passed by roll call vote to go into Executive Session at 10:33 a.m. as per Purpose One of G.L. c.30A, §21 (a)(1).

G.L. c. 30A, § 21 Executive Session 10:33 a.m. to 12:15 p.m.

TOPIC:

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

DISCUSSION:

None.

ACTION:

Motion by L. Keough, seconded by J. Killion, and unanimously passed to go into G.L. c. 112, s. 65C Session at 12:39 p.m.

G.L. c. 112, s. 65C Session 12:39 p.m. to 1:29 p.m.

TOPIC:

Adjudicatory Session

DISCUSSION:

None.

ACTION:

Motion by L. Keough, seconded by J. Killion, and unanimously passed to go into Adjudicatory Session at 1:29 p.m. to discuss decisions in pending adjudicatory matters.

Adjudicatory Session 1:29 p.m. to 1:40 p.m.

TOPIC:

Adjournment

DISCUSSION:

None.

ACTION:

Motion by L. Koeugh, seconded by J. Killion, and unanimously passed to adjourn the meeting at 1:40 p.m.

Minutes of the Board's October 11, 2017, Regularly Scheduled Meeting were approved by the Board on November 8, 2017.

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

October 11, 2017

PRELIMINARY AGENDA AS OF 10/5/17 9:00 am

Estimated Time	Item #	A. Item	Exhibit	Presented by
9:00 a.m.	I.	B. CALL TO ORDER & DETERMINATION OF QUORUM	None	
	II.	APPROVAL OF AGENDA	Agenda	
	III.	APPROVAL OF MINUTES A. Draft Minutes for the <i>September 13, 2017</i> Meeting of the Board of Registration in Nursing, Regular Session	Minutes	
	IV.	REPORTS, ANNOUNCEMENTS AND ADMINISTRATIVE MATTERS A. Executive Director's Report B. Announcements	Oral/Memo	LS
	V.	SARP A. SARP Activity Report	Memo	MG/DMD
	VI.	PROBATION A. Probation Staff Action Report B. Request for Notice of Violation and Further Discipline 1. J.M O'Leary , LN92050, NUR-2016-007	Report Memo	KF/KJ KF/KJ
	VII.	PRACTICE A. Practice Coordinator Staff Report	Memo	LT

	VIII.	EDUCATION 5. Nursing Education Staff Report 6. 244 CMR 6.04(1)(c) & (1)(f) Administrative Changes a. Curry College RN BSN, Program Administrator b. Roxbury CC, Associate Degree RN and PN Certificate, Program Administrator 7. 2017 Q2 NCLEX Reports 1. MA Graduates Regardless of State of Licensure 2. MA Licensure Candidates Regardless of State of Education 8. 244CMR 6.06(2) Site Survey Waiver Request: Blackstone Valley Regional Technical High School Practical Nursing Program. 9. 244CMR 6.08(1)(h) Elms College Baccalaureate Registered Nursing Program Verification Survey 10. 244 CMR 6.08(1)(h) Laboure College ADN RN Verification Survey	Memo Report Report Report Compliance Report Compliance Report Compliance Report	None AM AM AM AM AM KA
	IX.	REQUESTS FOR LICENSE REINSTATEMENT A. None		
	X.	STRATEGIC DEVELOPMENT, PLANNING AND EVALUATION A. Systematic Policy Evaluation 1.SARP Policy 05-001: SARP Eligibility Criteria and Admission Process 2.SARP Policy 07-001: SARP Bridge Agreement B. Presentation/Report 3.Conflict of Interest Review 4.Massachusetts Coalition for the Prevention of Medical Errors: a. 7/13/17 Coalition Meeting Minutes b. 9/2017 Coalition Report C. Topics for Next Agenda	Policy Policy PowerPoint Reports	LS VPB ASF
<>		LUNCH		

	XI.	<p>EXECUTIVE SESSION</p> <p>The Board will meet in Executive Session as authorized pursuant to M.G.L. c.30A, § 21(a)(1) for the purpose of discussing the reputation, character, physical condition or mental health, rather than professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual.</p> <ol style="list-style-type: none"> 1. Specifically, the Board will discuss and evaluate the Good Moral Character as required for registration for pending applicants. 2. Specifically, the Board will discuss and evaluate the reputation, character, physical condition or mental health, rather than professional competence, of licensees relevant to their petitions for license status change. 3. Approval of prior executive session minutes in accordance with M.G.L. c. 30A, § 22(f) for sessions held during the September 13, 2017 meeting. 	CLOSED SESSION	
	XII.	M.G.L. c. 112, § 65C SESSION	CLOSED SESSION	
	XIII.	M.G.L. c. 30A, § 18 ADJUDICATORY SESSION	CLOSED SESSION	
3:00 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.