

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21

MARYLAND BOARD OF NURSING

* * * * *

OPEN SESSION

* * * * *

The Maryland Board of Nursing board meeting was held on Wednesday, February 23, 2022, at 4140 Patterson Avenue, Baltimore, Maryland 21215, commencing at 9:08 a.m. before Edward Bullock, Notary Public in and for the State of Maryland.

REPORTED BY: Edward Bullock, Notary Public

AUDIO RECORDING TRANSCRIBED BY: Edward Bullock, DCR

1 APPEARANCES:

2

3 MICHAEL CONTI, Assistant Attorney General

4 MARGARET LANKFORD, Assistant Attorney General

5 KATHERINE CUMMINGS, Assistant Attorney General

6 Office of the Attorney General

7 State of Maryland

8 Department of Health & Mental Hygiene

9 300 West Preston Street

10 Baltimore, Maryland 21201

11 410-767-3201

12

13

14

15

16

17

18

19

20

21

1 BOARD MEMBER APPEARANCES:

2

3 GARY HICKS, RN Member, Board President

4 EMALIE GIBBONS-BAKER, APRN Member

5 M. DAWNE HAYWARD, RN Member

6 ANN TURNER, RN Member

7 ROBIN L. HILL, Practical Nurse Educator Member

8 AUDREY CASSIDY, Consumer Member

9 JACQUELINE HILL, RN Member

10 GREGORY RAYMOND, RN Member

11 NICOLE BEESON, Nurse Administrator Member

12 SUSAN STEINBERG, Consumer Member

13 SUSAN LYONS, APRN Member

14 CHARLENE HARROD-OWUAMANA, LPN Member

15

16

17

18

19

20

21

1 ALSO PRESENT:

2

3 KAREN E.B. EVANS, Executive Director

4 JOYCE CLEARY, CNA Training Programs

5 SHEILA GREEN, Education Consultant (via telephone)

6 IMAN FARID, Health Policy Analyst (via telephone)

7 RHONDA SCOTT, Deputy Director

8 MONICA MENTZER, Manager, Practice

9 LESLIE JOHNSON, Executive Assistant

10 KAREN BROWN, PIA Director

11

12

13

14

15

16

17

18

19

20

21

1 AUDIENCE MEMBERS: (via telephone)

2

3 KEVIN HEFFNER, Beacon University

4 JUDITH FEUSTLE, Stevenson University

5 KATHLEEN WISSER, Notre Dame of Maryland University

6

7 AUDIENCE MEMBERS: (in-person attendance)

8 TIJUANA GRIFFIN, Washington Adventist University

9

10

11

12

13

14

15

16

17

18

19

20

21

C O N T E N T S		
SECTION	DESCRIPTION	PAGE
No. 1.....	Call to Order/Roll Call.	
	Board of Nursing Updates.	7
No. 2.....	Approval of Consent Agenda.	20
No. 3.....	Discussion of Items Removed	
	From the Consent Agenda.	21
No. 4.....	Education.	29
No. 5.....	Certifications.	N/A
No. 6.....	Licensure and Advanced Practice.	N/A
No. 7.....	Legislative Affairs.	54
No. 8.....	Direct Entry Midwives and	
	Electrology.	77
No. 9.....	Quarterly Reports.	N/A
No. 10.....	Other Matters.	N/A
16		
17		
18		
19		
20		
21		

1 P R O C E E D I N G S

2 MR. HICKS: Good morning, everyone. Sorry for the
3 delay, we had some technical issues. We are going to go
4 ahead and get started with Open Session. If I can get a
5 motion to go into Open Session?

6 MS. CASSIDY: So moved, Cassidy.

7 MR. HICKS: Cassidy.

8 MS. TURNER: Second, Turner.

9 MR. HICKS: Turner. All in favor?

10 ALL: Aye.

11 MR. HICKS: Opposed?

12 (No oppositions)

13 MR. HICKS: Motion carries. We will start with roll
14 call.

15 MS. BEESON: Nicole Beeson.

16 MR. HICKS: And your title?

17 MS. BEESON: Nurse administrator member.

18 MS. GIBBONS-BAKER: Good morning. Emalie Gibbons-Baker,
19 RN board member, advanced practice.

20 MS. TURNER: Ann Turner, RN member.

21 MS. HAYWARD: Dawne Hayward, RN member.

1 MR. RAYMOND: Greg Raymond, RN member, Board
2 Secretary.

3 MS. JACQUELINE HILL: Dr. Jacqueline Hill, RN
4 educator member.

5 MS. CASSIDY: Audrey Cassidy, consumer member.

6 MS. WESTERFIELD: Heather Westerfield, RN member,
7 associate degree programs.

8 MS. ROBIN HILL: Dr. Robin Hill, RN member,
9 practical nursing educator member.

10 MS. LYONS: Susan Lyons, RN member, advanced
11 practice.

12 MS. STEINBERG: Susan Steinberg, consumer member.

13 MR. HICKS: Thank you, everyone. So, we will go
14 ahead and get started with any Board updates by Ms. Evans.

15 MS. EVANS: Good morning, everyone.

16 ALL: Good morning.

17 MS. EVANS: A couple of things. We've had, both
18 Rhonda Scott, Gary Hicks, Ann Turner, and I have been
19 testifying over the last week and have met with several
20 legislators. The Bill 899, which Iman Farid will speak
21 about later, we did go to yesterday afternoon to provide

1 our response to that bill, which is the bill with the
2 Secretary of Health overseeing all of the health boards as
3 well as making - being able to choose the Board chair as
4 well as the executive director. So, Ms. Farid will give
5 you more information, I'm certain of that.

6 Also, since the last time that we met, I met with
7 several groups. I've met with DaVita; I've met with the CNO's
8 a couple of times; I've met with IT Works; and Maryland
9 Hospital Association, I meet with weekly; and the National
10 Counsel of State Boards of Nursing. For the National Counsel
11 of State Boards of Nursing, for NCLEX, everything is on time
12 so there's no delays for students having to test in this arena.
13 They did close a couple of sites out in Iowa and Ohio, but as
14 far as our area we are good. They have onboarded at the
15 testing centers a total of 764 new proctors since May 25th of
16 last year.

17 And the good news, I haven't even told the team this
18 yet, the good news is that California is joining NURSYS. It was
19 supposed to be at the end of January, but it will be March. So,
20 that is really exciting for us because that is one of the boards
21 that takes forever to get a verification, anywhere from six

1 months to a year and a half just to receive the verification.
2 So, they are joining NURSYS, so we are just so excited about
3 that. As soon as Pennsylvania comes onboard with the compact,
4 as far as being implemented, they will be in NURSYS as well,
5 which is another one that takes a long time to get verifications
6 from. So, we are super excited about that. I know the team - I
7 guess I need to give them that news. The team will be excited
8 as well for that.

9 I've also have met with a group of the chief nursing
10 officers and some of their education teams. They have concerns
11 about the assistive personnel for both the CNA and GNA. So, I
12 did speak to them to assist them with making a clear distinction
13 between the CNA and GNA because there is two clear distinctions
14 between them. So, they have submitted to us - and thank you
15 last time for having us have the stakeholders meeting. So, I
16 appreciate the Board letting the board staff to move forward
17 with that. So, they submitted their information, and I will be
18 holding another meeting with them. So, that will be to finalize
19 things to bring to the Board.

20 Additionally, last week I met with the forensic
21 nurse examiners, and their major concern was having a program

1 that's both adult and pediatric.

2 MS. GREEN: Ms. Evans, good morning. This is Dr.
3 Green. You are fading in and out with your discussion. Thank
4 you.

5 MS. EVANS: That has to be the wi-fi. Thank you,
6 Dr. Green.

7 I met with the forensic nurse examiners last Friday.
8 They want to have an adult/pediatric course instead of it being
9 separate in adult and pediatric, just to add. So, it will be a
10 total of three different training programs. It would be the
11 adult/pediatric, and the adult and pediatric course. So,
12 they're going to be working on the curriculum, and we're going
13 to be meeting once they finalize. They're the experts, so they
14 will be utilizing the national curriculum for that and then they
15 will bring that to us. Once they bring it to us, we will
16 approve it and move forward from there. The other curriculum
17 that they're working on first is the refresher course
18 curriculum, which is needed for those individuals who have been
19 out of FNE for a while and are coming back. So, they will be
20 working on that particular project first. And we will be
21 meeting quarterly for the FNE meetings. I think everything is

1 going well with our outreach to the community. I also met with
2 the deans and directors as well to speak with them. So, that's
3 what we've been up to.

4 MR. HICKS: Did you want to talk about mid-year next month?

5 MS. EVANS: Oh, yes. Both Gary and I will attending
6 the mid-year with the National Counsel of State Boards of
7 Nursing next month. We will bring you back all of the
8 interesting things that will be going on there. So, Gary
9 usually meets with all of the other presidents across The United
10 States, and I meet with all of the other executive directors to
11 discuss some of the concerns that are going on in our particular
12 area. It's always similar to us. I can say that all of the
13 executive directors, since we've had this cyber incident, have
14 been super supportive.

15 MS. GREEN: You're fading again. You're fading again.

16 MS. EVANS: All right. Sorry, Dr. Green. All of
17 the executive directors across the country have been very
18 supportive of this Board in offering help and suggestions of
19 things that we can do. So, this is really a great team, and
20 it's so nice that I am able to reach out to others for some
21 support. So, I just wanted to let you know that. As soon as we

1 get back from the mid-year, Gary and I will provide you with an
2 update on what was discussed and how it affects our Board.

3 MR. HICKS: And then, I just want to make mention of
4 one thing that Karen talked about, and that is NCLEX testing,
5 and that there's no delay in NCLEX testing. I received an email
6 yesterday, I believe it was or the day before, that there's a
7 constituent that was perhaps upset that they have to wait until
8 April to do their testing. What they need to understand is that
9 when we say there's no delay in testing, they may not have sites
10 necessarily available here in Maryland, but they can go to D.C.,
11 Pennsylvania, Virginia, you know, wherever they're located.
12 They may have to travel to get to a site but, you know, they can
13 get testing done sooner than April, is the point. It just may
14 not necessarily be in Maryland that they can do the testing.
15 So, I had reached back out to the person that had emailed me to
16 tell them to just contact the testing center and ask, you know,
17 based off of where they're located in the state wherever they're
18 closest to, whether that's Delaware or Pennsylvania or D.C. or
19 wherever, what's their earliest testing date that they could
20 move up their test date from April to perhaps next week even.

21 MS. EVANS: The other item they can do, whatever

1 test center that they're at, there are a couple of test centers,
2 they can reach out to them and say, "If there's an opening
3 coming up soon then please contact me." And the test centers do
4 contact them as well.

5 I forgot one thing. I also attended the National
6 Advisory Counsel on Nursing Education and Practice. That was
7 really an eye opener for me. It was very interesting. And
8 again, the focus of that is workforce in the nursing arena.
9 What was interesting was that, we're getting ready to pull a
10 workforce paper together for congress. When we look back at
11 other papers that were done back in 2009 - 2009, they stated
12 that we should be preparing for a pandemic. Isn't that
13 interesting? And also, for the Boards of Nursing, the
14 regulating agencies as a whole, to really look at what they can
15 do if such a thing happens, and go ahead and set those
16 regulations. Congress didn't move with that particular
17 recommendation, but I wish they had at the time. But I just
18 thought it was interesting for us.

19 Also, at that meeting was the National Counsel of
20 State Boards of Nursing, and they talked about the workforce
21 shortage for advanced practice nurses, LPNs, and RNs. I can

1 send you that presentation because it was public information.
2 So, it's a great work group. They really want to improve the
3 image of nursing as a whole, and how nursing is viewed by
4 others, and working on making it better for all of us. So, as
5 soon as we have something more or as soon as I obtain something
6 more tangible, I will definitely send it out to everyone.

7 MR. HICKS: Any questions for Ms. Evans?

8 MS. WESTERFIELD: I have a question. Do you have
9 eyes on the data from time for requests for test dates? Is
10 anyone tracking what the average time is for the requests made?

11 MR. HICKS: NCSBN does that, absolutely.

12 MS. EVANS: I can ask.

13 MS. WESTERFIELD: I'm just curious to know what it
14 is. I am happy that there's no delay, but I don't understand
15 the context of what that actually means.

16 MR. HICKS: I'll look, because I get a lot of those
17 statistics being on the committee. So, I will look in my email
18 and see if I've gotten any updates about that.

19 MS. WESTERFIELD: Okay.

20 MR. HICKS: Interesting enough, and I will send this
21 to all of the Board members, but we did get some statistical

1 data on success rates of NCLEX for last year. I believe it was
2 - so, we just got fourth quarter data. So, it was calendar
3 year, not fiscal year. And it's very interesting to see that
4 data because you can truly tell that there was a pandemic and
5 that it impacted the success rate of students and the number of
6 failures that occurred. So, I will pull that together and share
7 that because it is an interesting snapshot of what the year
8 looks like. Because it gives you first-time test takers, the
9 number of first-time test takers, and then the repeaters. At
10 least for us, first-time repeaters, they calculate it, but they
11 don't - and they manage it, but they don't kind of distribute
12 the second and third, you know, testing. So, they only do
13 whoever repeated the test the second time, essentially. So, I
14 will send that out to the Board members. Any maybe we could
15 even look at publishing that on the site. It's public
16 knowledge. I think that's important information for folks to be
17 able to see.

18 So, it was alarming for me to see that at the same
19 time where we're hearing about, you know, possibly having
20 students decrease their clinical practicum times and those type
21 of things. This truly shows that we really should not have that

1 conversation because theoretically their concepts are not out
2 there, which we know they need that strong theoretical
3 foundation in order to perform clinically. So, I will share
4 that information.

5 MS. EVANS: I also want to let you know, although
6 NCSBN doesn't track second, third, fourth, or fifth, but we do
7 all the way up to fifteen, I think is the longest one we've had.
8 We do track that. And that's also a concern nationwide with
9 the committee that I just spoke to you about, is not shortening
10 nursing education at all.

11 MS. WESTERFIELD: And I don't know if that is going
12 to change just because we're getting back into the swing of
13 things. Because the students that we're currently teaching are
14 students that have done all of their pre-requisite courses in
15 the same manner in which these students have just tested and
16 took their nursing courses. So, there's a backlog of students
17 that have passed courses in a certain way because they had to
18 get them through, in other words. But now they are in nursing
19 school and now there's - so, I'm not sure if this is going to
20 automatically change in this next year or so. We're still
21 having - their retention rates are certainly not going to be the

1 same, for sure, because the student with their pre-requisite
2 courses are just not at the same level. Not all of them, but
3 some of them, as they were before.

4 MR. HICKS: In this report that I will be sending,
5 also, interesting enough they also give you some details about
6 the top five international countries that are using NCLEX and
7 taking NCLEX and what their success rates are. Which I thought
8 was really interesting because we look at our nursing shortage
9 here in the U.S. and we start tapping into those international
10 nurses. These are most likely the countries that will start to
11 come over to offer support. It's an interesting report. It's
12 the first time I've probably ever really looked at the report
13 because I had a vested interest to look at it, but yeah, it's
14 interesting.

15 MS. EVANS: And from that, I can say to you that we
16 are getting approached from different agencies about lowering
17 our scores and our IELTS scores. And I had a conversation with
18 someone the other day, and that was the reason why they're there
19 is for them to be successful on NCLEX. So, the scores that we
20 use are what NCSBN uses. They've done plenty of studies as to
21 why they have chosen those particular scores that we have to

1 have. So, Gary and I - he doesn't know it yet, but Gary and I
2 will be meeting with one of the agencies soon, as soon as we get
3 our schedules to match somehow, but just to let you know what's
4 going on out there.

5 MR. HICKS: Thank you. So, we will move on. If I
6 can get a motion to approve the Consent Agenda?

7 MR. RAYMOND: So moved, Raymond.

8 MR. HICKS: Dr. Raymond.

9 MS. JACQUELINE HILL: Second, Dr. Jacqueline Hill.

10 MR. HICKS: Dr. Jacqueline Hill. All in favor?

11 ALL: Aye.

12 MR. HICKS: Opposed?

13 (No oppositions)

14 MR. HICKS: Motion carries. We will move down to 3,
15 Beacon Institute. Ms. Evans?

16 MS. EVANS: Yes. Last month I brought you Beacon
17 Institute, hopefully everyone has had the chance to review the
18 documents. The question was - everything was fine with the
19 Board, except for one particular area, and that was how they
20 were doing the quizzes.

21 So, if you look in the program catalog on Page 34.

1 So, I did go back to them and I wrote them a letter and shared
2 with them the concerns that the Board had, and asked them to
3 review it and then also to see if they can make any adjustments
4 to the program so it can be approved.

5 And before I forget, is Mr. Heffner on the call?

6 MR. HEFFNER: I am here.

7 MS. EVANS: Hi, Mr. Heffner. How are you today?

8 MR. HEFFNER: I am just fine. How are you, Ms. Evans?

9 MS. EVANS: I'm good, thank you. So, Mr. Heffner is
10 part of Lifespan who oversees Beacon, and so I asked him to come
11 on the call today.

12 So, if you look on Page 34, what they decided to do
13 was to take four quizzes out of the quizzes, and they will be
14 done in person on the same day as the lab. And those will be
15 the ones that will be counted as well as the final exam. So,
16 that was the concern about the testing piece.

17 Do you have any questions for me?

18 (No questions posed)

19 MR. HICKS: No questions. Thank you.

20 MS. EVANS: Okay.

21 MR. HICKS: If we can get a motion to approve - do

1 we have to go through each one of those, Mike?

2 MR. CONTI: Let's just get a motion to approve.

3 MR. HICKS: So, first of all, we will do a motion to
4 approve Beacon Institute's changes that Ms. Evans just
5 presented.

6 MS. GIBBONS-BAKER: So moved, Gibbons-Baker.

7 MR. HICKS: Gibbons-Baker.

8 MS. ROBIN HILL: Second, Dr. Robin Hill.

9 MR. HICKS: Dr. Robin Hill. All in favor?

10 ALL: Aye.

11 MR. HICKS: Opposed?

12 (No oppositions)

13 MR. HICKS: Motion carries. Joyce? Joyce, if you
14 wouldn't mind, can you make sure that you speak up so that we
15 can hear you in the front of the room.

16 MS. EVANS: Gary, before Joyce starts.

17 MR. HICKS: Sorry.

18 MR. CONTI: This wasn't just to approve the changes,
19 it's approving the program as well. Is it a CNA/GNA program?

20 MS. EVANS: CNA/GNA, yes.

21 MR. CONTI: Okay.

1 MR. HICKS: So, Emalie and Dr. Hill approved the
2 changes to the Beacon Institute's program, but we need to
3 actually approve the program. So, is there a motion to approve
4 the program with those changes that were mentioned?

5 MS. BEESON: So moved, Beeson.

6 MR. HICKS: Beeson.

7 MS. HAYWARD: Second, Hayward.

8 MR. HICKS: Hayward. All in favor?

9 ALL: Aye.

10 MR. HICKS: Opposed?

11 (No oppositions)

12 MR. HICKS: Motion carries.

13 MS. EVANS: Mr. Heffner, do you have any questions?

14 MR. HEFFNER: No, ma'am. I would just thank the
15 Board for its support and assistance during this process.
16 It's really appreciated.

17 MS. EVANS: Thank you, Mr. Heffner.

18 MR. HICKS: Sorry about that. You can go on, Joyce.

19 MS. CLEARY: We're talking about the site changes.
20 Heritage Care, Incorporated, I want to add two clinical
21 sites; Cadia Healthcare-Springbrook and Cadia

1 Healthcare-Wheaton.

2 They have signed agreements. The facilities are for
3 all of the different types of clients they need for training
4 purposes, and they meet the COMAR 10.39.02.06(c).

5 We are seeking approval from the Board to add these
6 two sites for Heritage Healthcare.

7 MR. HICKS: All right. Motion to approve Heritage
8 Care to add Cadia Healthcare-Springbrook in Silver Spring,
9 Maryland and Cadia Healthcare-Wheaton in Silver Spring,
10 Maryland?

11 MS. WESTERFIELD: So moved, Westerfield.

12 MR. HICKS: Westerfield.

13 MS. CASSIDY: Second, Cassidy.

14 MR. HICKS: Cassidy. All in favor?

15 ALL: Aye.

16 MR. HICKS: Opposed?

17 (No oppositions)

18 MR. HICKS: Motion carries.

19 MS. CLEARY: The next one is IT Works Learning
20 Center. They want to add Crescent Cities Nursing and
21 Rehabilitation Center in Riverdale, Maryland.

1 They meet all of the COMAR 10.39.02.06(c). They
2 have the written agreement. They have the variety of
3 clients for training purposes.

4 Seeking approval from the Board for IT Works to add
5 Crescent Cities Nursing and Rehabilitation Center.

6 MR. HICKS: Motion to approve IT Works Learning
7 Center to add Crescent Cities Nursing and Rehabilitation
8 Center in Riverdale, Maryland?

9 MS. GIBBONS-BAKER: So moved, Gibbons-Baker.

10 MR. HICKS: Gibbons-Baker.

11 MS. BEESON: Second, Beeson.

12 MR. HICKS: Beeson. All in favor?

13 ALL: Aye.

14 MR. HICKS: Opposed?

15 (No oppositions)

16 MR. HICKS: Motion carries.

17 MS. CLEARY: Montgomery College is adding two sites.
18 I know there are three on here, but Manor Care-Potomac was
19 approved in October. So, that was a mistake to add that to
20 the agenda. Okay?

21 So, Holy Cross Hospital in German Town, Maryland,

1 they want to add that as a clinical site, and the hospital
2 does meet the COMAR 10.39.02.06(c), and they do have a signed
3 agreement with both parties signing.

4 MR. HICKS: Motion to approve Montgomery College to
5 add Holy Cross Hospital in German Town, Maryland and Friend's
6 House Retirement Community in Sandy Spring, Maryland?

7 MS. JACQUELINE HILL: Motion to approve, Dr.
8 Jacqueline Hill.

9 MR. HICKS: Dr. Hill.

10 MS. BEESON: Second, Beeson.

11 MR. HICKS: Beeson. All in favor?

12 ALL: Aye.

13 MR. HICKS: Opposed?

14 (No oppositions)

15 MR. HICKS: Motion carries.

16 MS. CLEARY: The final one is Parkside High School.
17 They want to add Atlantis [sic] General Hospital in Berlin,
18 Maryland as a clinical site. And they said it was because of
19 COVID because the long-term care facilities in that area were
20 not allowing them in.

21 So, I am presenting for approval from the Board to

1 add Atlantic General Hospital as a clinical site for Parkside
2 High School.

3 MR. HICKS: I apologize. I need to go back, Joyce.

4 MS. CLEARY: Okay.

5 MR. HICKS: Manor Care-Potomac in Potomac, Maryland
6 is added to Montgomery College?

7 MS. CLEARY: No, that was a mistake. They were
8 approved in October.

9 MR. HICKS: All right. I apologize.

10 MS. CLEARY: Okay.

11 MR. HICKS: So, motion to approve Parkside High
12 School adding Atlantic General Hospital in Berlin, Maryland?
13 Is there a motion to approve?

14 MS. ROBIN HILL: So moved, Dr. Hill.

15 MR. HICKS: Dr. Robin Hill.

16 MS. HAYWARD: Second, Hayward.

17 MR. HICKS: Hayward. All in favor?

18 ALL: Aye.

19 MR. HICKS: Opposed?

20 (No oppositions)

21 MR. HICKS: Motion carries. Thank you, Joyce.

1 MS. CLEARY: You're welcome.

2 MR. HICKS: We will move down to Education. Do you
3 have anything else, Joyce?

4 MS. CLEARY: No, that's it.

5 MR. HICKS: I will move down to Education. Dr.
6 Green, are you online?

7 MS. GREEN: Good morning. This is Dr. Sheila Green.
8 Can you hear me?

9 MR. HICKS: Yep. Good morning.

10 MS. GREEN: Good morning. I am here to present the
11 information from the Education Department. The first one is 4A.
12 This is Bowie State University's Action Plan Progress Report
13 that was submitted to the Board in December of 2021. This is a
14 follow-up requirement that was stipulated as a result after the
15 virtual site visit that was completed back in March 9th and 10th
16 of 2021. Dr. Jacqueline Hill, as a requirement, has provided me
17 the information that was required by December 15, 2021.

18 I would like to ask if there are any attendees from
19 Bowie State University that would like to be acknowledged,
20 please.

21 (No responses)

1 MS. GREEN: I know that Dr. Hill has made everyone
2 in administration aware of the presentation this morning. Dr.
3 Hill will be recusing herself from this report.

4 MR. HICKS: So, for the record, Dr. Jaqueline Hill
5 will recuse herself from voting on this particular issue.

6 MS. GREEN: Thank you. The findings from the Bowie
7 State University action plan report are summarized on your cover
8 information. They have met all of the requirements that have
9 been necessary to the Board of Nursing. We've included the
10 information related to the action plan from the consultant
11 report from Jacquelyn Jordan in 2017. They also had completion
12 of the Board consultation - the Board-approved consultant
13 services in 2020, April 2020, with Dr. Kathy Ogle and Dr. Janice
14 Hoffman. They assisted them with the reconstruction and they
15 redesigned their program. Dr. Hill, also, in addition to the
16 consulting that they had already provided to the Bowie State
17 University, the nursing program, she also secured additional
18 consulting from Dr. Bienemy in September of 2021 regarding
19 quantitative programmatic requirements and restructure of
20 departmental policies governing student admissions, program
21 progression, grievances, and the faculty governance policies,

1 and faculty handbooks.

2 The final finding, Number 7 on the cover sheet, she
3 recognizes that there is NCLEX improvement noted here in the
4 current fiscal year of 2022-to-date. The first quarter they've
5 identified them having 85.19 percent; 23 of 27 graduates in that
6 first quarter from July 1 through September 30 of 2021 were
7 successful at the 85.19 percent. In the second quarter, seven
8 of nine graduates that passed with NCLEX success, which brought
9 them off of the 77.78 percent.

10 I would like to bring to the Board's attention that
11 that second quarter score is what the overall requirement was
12 for educational programs in the State of Maryland during the
13 fiscal year 2021. The reports by Dr. Bienemy are giving
14 quantitative data that may establish the ability for Bowie to
15 show the data from the time of ten years ago moving forward in
16 the program. It will look at the trends over time in the ways
17 to improve the program.

18 The recommendation to the Board is to approve the
19 Bowie State University's Action Plan Progress Report that was
20 submitted December 15, 2021 in accordance with the
21 recommendations from our Practice and Education Committee, and

1 to accept the consultant report concluded by Dr. Cynthia
2 Bienemy. And that information is attached in your packet on
3 behalf of Bowie State University Nursing Program.

4 We also request that Dr. Jacqueline Hill submit the
5 Bowie State University Nursing Education program curriculum
6 revisions to the Board for staff review once the approvals are
7 completed with Bowie State University, and in preparation for
8 Fall of 2022 implementation of the revised curriculum.

9 The fourth request to the Board is that staff
10 present submitted curriculum revisions to the Practice and
11 Education Committee once they are provided to us. And then
12 lastly, that we advance the revised curriculum to the Board in
13 accordance with recommendations from the Practice and Education
14 Committee for final determination.

15 Included in your packet is the actual Progress
16 Report, Attachment A; and Attachment B is the Consult Report of
17 September 29, 2021 from Dr. Cynthia Bienemy.

18 Are there any questions that we may be able to
19 entertain at this time?

20 MR. HICKS: Are there any questions for Dr. Green?

21 (No questions posed)

1 MR. HICKS: Hearing none. Is there a motion to
2 approve the recommendations set forth by the Practice and
3 Education Committee that Dr. Green has outlined?

4 MR. RAYMOND: So moved, Raymond.

5 MR. HICKS: Dr. Raymond.

6 MS. WESTERFIELD: Second, Westerfield.

7 MR. HICKS: Westerfield. All in favor?

8 ALL: Aye.

9 MR. HICKS: Opposed?

10 (No oppositions)

11 MR. HICKS: Motion carries.

12 MS. GREEN: Thank you very much. May I move to the
13 second item, please?

14 MR. HICKS: Yep.

15 MS. GREEN: The second item is 4B. This is from
16 Morgan State University-Action Plan Report of unacceptable
17 performance on the licensure exam for the first time. Dr. Maija
18 Anderson is the director of the nursing program at Morgan State
19 University. She submitted the action plan report in accordance
20 with our COMAR requirement. The action plan provided
21 preliminary information related to unacceptable NCLEX-RN

1 examination performance. It would help if you look at the 2022
2 annual report for Morgan State University in addition to this
3 current action plan submission to give us a full picture of the
4 staff in our education department to see where they are, both in
5 the annual report as well what had been submitted to us.

6 The findings from our team in the Education
7 Department of the Board is that they we are requesting that
8 Morgan provide some additional information based on the findings
9 that we had from the actual action plan report as well the
10 annual report.

11 The first one has to do with COMAR 10.27.03.07 A and
12 B, which is Nursing Program Administrator, and the issue of a
13 minimal teaching load. Dr. Forbes-Scott and I had a preliminary
14 meeting by conference call yesterday with Dr. Anderson who had
15 indicated that they are in compliance with her workload, but we
16 needed further documentation from her regarding this particular
17 finding. In accordance with what our findings were within the
18 annual report, it seemed as though she might be in a greater
19 than minimum teaching load.

20 The second area that we are requesting additional
21 information is for the Faculty Development and Evaluation. In

1 2019, the Board approved the revised curriculum in association
2 with an increase in student enrollment. The enrollment
3 increases have occurred. New faculty development began in
4 fiscal year 2020 and 2021, however we need additional insight on
5 their onboarding, mentoring, development, and evaluation of new
6 faculty. They did issue a follow-up - they required a workshop.

7 The third item has to do with COMAR 10.27.03.12
8 regarding Resources, Facilities, and Services. We are
9 particularly concerned about the facility they're using, Jenkins
10 Hall. Jenkins Hall is the site where they are currently
11 operating the nursing program. This is a building that will be
12 scheduled for demolition once the new building is completed in
13 2024, but there are some concerns about the building itself, and
14 whether or not it continues to be problematic, or how they will
15 address that until the new building is finished in 2024. There
16 are issues there with mold in the building. There has been a
17 mitigation of mold already in the building, so we do have some
18 concerns about that.

19 And then, on the second page there is 10.27.03.13,
20 Curriculum. I will make you aware that they have revised the
21 Essentials for Baccalaureate and Graduate Nursing Education.

1 This has been identified by Morgan State that there would be a
2 need for further revisions in their curriculum. It is something
3 that we need to have some additional insight because these are
4 paramount concerns about how students can be progressing to meet
5 NCLEX next year.

6 The last one is the review of the well-being of the
7 students in accordance with COMAR 10.27.03.14. This concerns
8 the well-being of students and stress levels related to COVID,
9 and that is also well documented by Nursing Counsel of State
10 Boards of Nursing across the United States. The main things the
11 students were coping with were not only the challenges of the
12 nursing program, but also the socioeconomic standards and
13 challenges in their homelives and also their mental health
14 support group meetings. They are there for students who are
15 going through with the COVID war that we are in at the present
16 time. There are some other things that are being reviewed
17 related to academic integrity related to students that the Board
18 is very much involved in.

19 The recommendations were accepted by PEC Committee
20 on February 11th of 2022, and our requests to the Board is to
21 request that Dr. Maija Anderson revise the submitted action plan

1 to address, at a minimum, the inclusion of the items that are
2 stated in the cover information that was provided to the Board.
3 We are requesting an opportunity to move that date from February
4 28, 2022 to Tuesday, March 8, 2022. Dr. Forbes-Scott said
5 yesterday that she would need that time for her to be able to
6 review the report in the areas that are major concerns to the
7 Board.

8 We are suggesting a few considerations. We ask you
9 respectfully that we had Step One, (indiscernible) but we are
10 concerned about the areas that have been stipulated for the
11 Board to review the consideration of an establishment of board
12 Ad Hoc Committee to either revise the action plan based on staff
13 review and presentation to the Practice and Education Committee,
14 and request presentation from Morgan State should the Board
15 determine it is necessary.

16 And thirdly, that the Board may determine the need
17 for a site visit to the program. We are scheduled to have a
18 site visit with them in September in accordance with CCNE. But
19 given some of the concerns that are prevalent, the Board may be
20 conducting a site visit prior to that time in accordance with
21 what our findings are with the progress report that Dr. Anderson

1 would provide to us.

2 If I can answer any questions, I would be happy to
3 at this time. Thank you.

4 MR. HICKS: Dr. Green, just for clarification. You
5 were a little muffled so I want to make sure I heard this
6 correctly. You plan to meet with - is it the dean on March the
7 8th to set a timeline for this to be completed? Is that what I
8 heard?

9 MS. GREEN: No, that Dr. Forbes-Scott and I had a
10 conference call with Dr. Anderson yesterday, and she
11 recommended the March 8th date for her to resubmit the action
12 plan.

13 MR. HICKS: All right. Sorry about that.

14 MS. GREEN: That's okay.

15 MR. HICKS: Any other questions for Dr. Green?

16 (No questions posed)

17 MR. HICKS: All right. Is there a motion to approve
18 the action plan that Dr. Green has explained, and has been
19 recommended by the Practice and Education Committee?

20 MS. GIBBONS-BAKER: So moved, Gibbons-Baker.

21 MR. CONTI: I don't think it is to approve the

1 action plan. I think it is to approve their recommendation to
2 require Morgan State to provide additional information.

3 MR. HICKS: Okay.

4 MR. CONTI: And then I think she asked at the end
5 for the Board to consider a site visit, schedule a site visit.

6 MR. HICKS: Okay. I need to clarify that. So, is
7 there a motion to approve the plan that's been outlined Dr.
8 Green for additional documentation from Morgan State, and to
9 authorize the Board to perhaps make a site visit to Morgan
10 State? Is there a motion?

11 MS. GIBBONS-BAKER: So moved, Gibbons-Baker.

12 MR. HICKS: Gibbons-Baker.

13 MS. HAYWARD: Second, Hayward.

14 MR. HICKS: Hayward. All in favor?

15 ALL: Aye.

16 MR. HICKS: Opposed?

17 (No oppositions)

18 MR. HICKS: Motion carries. Dr. Green, go onto C.

19 MS. GREEN: Yes, thank you. Good morning, again,
20 this is 4C. This is Notre Dame of Maryland University action
21 plan submission for the second successive year of unacceptable

1 licensure examination.

2 I would first like to bring to the attention of the
3 Board that there are two parts to this report regarding the
4 actual action plan, and then 4C.1 regarding the request for
5 approval of enlisting a consultant to assist the Notre Dame, and
6 to review materials. That person's name is Dr. Karen Thacker.

7 Dr. Wisser, are you present?

8 MS. WISSER: Yes, I'm here.

9 MS. GREEN: Thank you. I would like to present to
10 the Board on behalf of our education team, 4C. This is the
11 2021, which is the second successive year of unacceptable
12 licensure examination performance. In accordance with the COMAR
13 stipulations, the request is that the action plan that has been
14 identified, Dr. Wisser in her findings has provided that
15 information. She is looking in several different areas with the
16 admission standards, student success resources and tools,
17 student remediation, curriculum review, curriculum
18 standardization across pre-licensure and post-licensure programs
19 as identified in their annual report. Also, looking at
20 curriculum mapping and test item analyses. They have also
21 identified the need to look at faculty recruitment and

1 retention. There has been some turnover in this past year
2 related to retirements and others seeking to pursue other
3 avenues in nursing. That has been identified in their annual
4 report of 2022. We have the information regarding NCLEX for
5 consultants for this program.

6 So, our recommendation for 4C is to approve the
7 Notre Dame of Maryland University action plan report as a
8 guiding blueprint to the review of the nursing education
9 program, and to review 4C.1, which I will provide to you
10 momentarily, regarding Dr. Karen Thacker, who is the nurse
11 consultant who has been recommended to the Board in accordance
12 with COMAR 10.27.03.16 D through ii.

13 Are there any questions from the Board of the
14 components from the action plan from Notre Dame?

15 MR. HICKS: Are there any questions for Dr. Green in
16 reference to the action plan?

17 (No questions posed)

18 MR. HICKS: Hearing none. You can continue, Dr.
19 Green.

20 MS. GREEN: Thank you. 4C.1 is the request from Dr.
21 Kathleen Wisser, the dean of the school of nursing at Notre Dame

1 of Maryland University, to have Dr. Karen Thacker serve as the
2 consultant, and she is in accordance with all of the COMAR
3 requirements. Dr. Thacker earned her associates of science
4 degree in nursing from the University of Charleston, formally
5 known as Morris Harvey College in Charleston, West Virginia.
6 She completed her bachelors of science degree from Marshall
7 University in Huntington, West Virginia; her masters of science
8 of nursing from West Virginia University in Morgantown, West
9 Virginia; and her doctorate in philosophy and nursing from
10 Widener University in Chester, PA. Dr. Thacker has forty-seven
11 years of experience in nursing and professional practice,
12 collectively. She has contributed to the development of nursing
13 practice and has provided leadership in nursing education and
14 administration during her tenure at Alvernia University in
15 Reading, Pennsylvania, and Marshall University in Huntington,
16 West Virginia as well. She has made major contributions to
17 (indiscernible) in nursing and nursing education. She has been
18 (indiscernible) professionally qualified to serve as consultant.
19 (Indiscernible) working with Middle States Accreditation with
20 Alvernia University (indiscernible) and other accrediting bodies
21 as well.

1 Our request to the Board is to approve the
2 recommendation for Dr. Karen Thacker to serve as consultant to
3 Notre Dame of Maryland University, and I will entertain any
4 questions that you may have, regarding 4C.1. Thank you.

5 MR. HICKS: Are there any questions for Dr. Green?

6 (No questions posed)

7 MR. HICKS: Hearing none. Is there a motion to
8 approve the action plan for the Notre Dame of Maryland
9 University that Dr. Green outlined and recommended by the
10 Practice and Education Committee?

11 MS. HAYWARD: So moved, Hayward.

12 MR. HICKS: Hayward.

13 MS. BEESON: Second, Beeson.

14 MR. HICKS: Beeson. All in favor?

15 ALL: Aye.

16 MR. HICKS: Opposed?

17 (No oppositions)

18 MR. HICKS: Motion carries. The second is, is there
19 a motion to approve the education consultant, Karen S. Thacker,
20 to work with the Notre Dame of Maryland University on their
21 action plan?

1 MS. GIBBONS-BAKER: So moved, Gibbons-Baker.

2 MR. HICKS: Gibbons-Baker.

3 MS. HAYWARD: Second, Hayward.

4 MR. HICKS: Hayward. All in favor?

5 ALL: Aye.

6 MR. HICKS: Opposed?

7 (No oppositions)

8 MR. HICKS: Motion carries. Dr. Green, you can go
9 on down to D.

10 MS. GREEN: Thank you. Dr. Wisser, are there any
11 comments that you would like to make before we move forward?

12 MS. WISSER: No, thank you.

13 MS. GREEN: Thank you very much. Moving forward now
14 to 4D, Notification of Change in Nursing Program Administrator
15 from Stevenson University.

16 Dr. Judy Feustle informed us that Dr. Laura Petri
17 has resigned from Stevenson University, effective January 28,
18 2022, and that Dr. Feustle will be serving and has accepted the
19 interim capacity role of department chair and nurse program
20 administrator. That was effective on January 28, 2022. A
21 search has been initiated, and candidate are being interviewed.

1 That began January 31, 2022.

2 The recommendation to the Board is for the interim
3 chair of Judy Feustle's role be provided on behalf of Stevenson
4 University. We have a copy of her curriculum vitae in our Board
5 file, and she meets all the requirements in this capacity.

6 Dr. Feustle, is there anything else you would like
7 to add?

8 MS. FEUSTLE: I am present. I would like to thank
9 the Board for considering this. We do have our search in
10 progress. Actually, we do have a candidate, but it's not
11 official yet, but as soon as we finalize that, I will let the
12 Board know.

13 MS. GREEN: Thank you.

14 MS. FEUSTLE: They wouldn't start, obviously, until
15 after the spring semester.

16 MS. GREEN: Thank you, Dr. Feustle. I will ask the
17 Board if the Board if there are any questions that you may have
18 at this time.

19 MR. HICKS: Dr. Green, I'm sorry, it was muffled.
20 Can you just repeat for me the candidate for the interim
21 department chair, the name.

1 MS. GREEN: Dr. Judith Feustle. She is the interim
2 chair serving, and will continue to serve until the position is
3 filled, probably by the Fall of 2022.

4 MR. HICKS: All right. Is there a motion to approve
5 Dr. Judith Feustle as the interim department chair administrator
6 for Stevenson University's nursing program?

7 MS. BEESON: So moved, Beeson.

8 MR. HICKS: Beeson.

9 MS. WESTERFIELD: Second, Westerfield.

10 MR. HICKS: Dr. Westerfield. All in favor?

11 ALL: Aye.

12 MR. HICKS: Opposed?

13 (No oppositions)

14 MR. HICKS: Motion carries.

15 MS. GREEN: Thank you, Dr. Feustle.

16 MS. FEUSTLE: Thank you.

17 MS. GREEN: My final presentation is 4E. This is a
18 notification of change for the nursing program administrator at
19 Frostburg State University.

20 Dr. Kara Platt, are you present on the line?

21 (No response)

1 MS. GREEN: Okay. Dr. Kara Platt was appointed as
2 chairperson for the Department of Nursing at Frostburg State
3 University on January 1, 2021. She completed her bachelor's
4 degree in nursing from Shenandoah University; her master's
5 degree in nursing and health services leadership and management
6 from the University of Maryland; and her doctorate in nursing
7 practice from the Johns Hopkins University School of Nursing.
8 She has fifteen years of experience in nursing, nursing
9 education, as well as administration, collectively. She has an
10 active Maryland nursing license.

11 Dr. Platt meets the requirements to serve as nursing
12 program administrator in accordance with COMAR 10.27.03.07 A and
13 B.

14 The recommendation was accepted by the Practice and
15 Education Committee on February 11, 2022, and our recommendation
16 to the Board is that you approve the request of Dr. Kara Platt
17 as the department chair of nursing at Frostburg State University
18 as program administrator in accordance with the COMAR
19 requirements.

20 I will entertain any questions that you may have.
21 Thank you.

1 MR. HICKS: Are there any questions for Dr. Green?

2 (No questions posed)

3 MR. HICKS: All right, hearing none. Is there a
4 motion to approve Dr. Platt for the Frostburg University nursing
5 administration?

6 MS. GIBBONS-BAKER: So moved, Gibbons-Baker.

7 MR. HICKS: Gibbons-Baker.

8 MS. BEESON: Second, Beeson.

9 MR. HICKS: Beeson. All in favor?

10 ALL: Aye.

11 MR. HICKS: Opposed?

12 (No oppositions)

13 MR. HICKS: Motion carries.

14 MS. GREEN: Thank you.

15 MR. HICKS: Thank you, Dr. Green.

16 MS. GREEN: Thank you.

17 MR. HICKS: I'm not on your agenda, but I'm going to
18 turn it over to Ms. Evans to give us an update on the USDOE
19 report.

20 MS. EVANS: Thank you. I just wanted to publicly
21 thank Dr. Green, Dr. Forbes-Scott, and Mr. Michael Conti for all

1 of their hard work with the USDOE report. They have worked
2 tirelessly over the year, and we were able to submit our
3 compliance report on time, as we submitted all of our others on
4 time. They worked so hard over this last month. I just wanted
5 to publicly say thank you. I know they did an awesome job.
6 They always do, so I never worry. So, I just wanted to thank
7 you all.

8 MR. HICKS: Any questions about the USDOE report?

9 (No questions posed)

10 MS. EVANS: Oh, and one more thing. Once we submit
11 the report, just so you know what the process is because we have
12 a lot of new Board members, once we submit the report then they
13 assign to readers. Then the readers will read it and see if
14 there's anything that we need to update, add, et cetera. If
15 not, then we actually go back February of 2023. We thought we
16 were going this year, but it's okay, 2023. But, all the
17 documents, everyone has worked hard on to get those compliance
18 reports in and quarterly reports. So, that's when we will be
19 going back. So, we will definitely need full support from the
20 Board and have some members there from the Board when we go.
21 And if I can ask a legislative to go, we will do that as well so

1 we have all the support. But we've done everything they've
2 asked us to do, so.

3 MR. HICKS: It's a lot of work there.

4 MS. EVANS: A lot of work, mm-hmm.

5 MR. HICKS: Thank you, Karen.

6 MS. EVANS: You're welcome.

7 MS. CASSIDY: Can I interrupt a moment? I'm sorry.
8 I'm having an administrative problem. I can't connect to the
9 internet on my tablet. So, I can barely see - I can see the
10 first page of something, but nothing else.

11 MS. EVANS: Let me share with you that we are not on
12 a network. We are on wi-fi. So, I've disconnected and
13 reconnected as well. So, I apologize for that, but
14 unfortunately with the cyber incident that's all we have. So,
15 Leslie is going to pursue with that. But, USDOE was not part of
16 it. So, you didn't miss anything there. I wanted to make sure
17 that I brought that to everyone's attention where we were with
18 USDOE.

19 MS. CASSIDY: Thank you.

20 MR. HICKS: Thanks, Karen. We will move onto Number
21 7, Legislative Affairs. Iman, are you online?

1 MS. FARID: Hi, I am here. Can you hear me all
2 right?

3 MR. HICKS: Yes, uh-huh.

4 MS. FARID: Perfect. Good morning, everyone, and
5 happy Wednesday. We have two legislative items to discuss this
6 morning. So, we are going to start with Item 7A, which I
7 believe is not in your paper packet, but it can be found online
8 on the shared drive in the folder that's labeled as Legislative
9 Affairs. This document is a legislative memo that provides a
10 list of bills that were assigned to the Board from the week of
11 January 24th through the week of February 28th.

12 So, starting with House Bill 218: Health
13 Occupations Nursing Dialysis Technicians. This bill repeals
14 the requirement that a dialysis technician be certified as a
15 certified nursing assistant. This bill additionally establishes
16 a separate category for certified dialysis technicians, and
17 authorizes the Board to conduct site visits of certified
18 dialysis technician training programs.

19 The Board submitted a Letter of Support with Amendments.

20 House Bill 235: Open Meetings Definition
21 Administrative Function. This bill excludes certain terms from

1 the definition of "administration function" in the Open Meetings
2 Act.

3 The Board took no position.

4 House Bill 246: Opening Meetings Act Notices,
5 Closed Sessions, and Minutes Retention Periods, Online Posting,
6 and Public Inspection. This bill alters the period of time the
7 Board is required to retain a certain notice and written closing
8 statement, and requires the Board to post a written closing
9 statement online, or provide minutes or recordings to a
10 requester in a certain manner and within a certain period of
11 time.

12 The Board took no position.

13 House Bill 276; cross-filed with Senate Bill 513:
14 Health Occupations Clinical Nurse Specialist Prescribing
15 Authority. This bill authorizes clinical nurse specialists to
16 prescribe drugs and durable medical equipment.

17 The Board submitted a Letter of Support with
18 Amendments.

19 House Bill 219; cross-filed with Senate Bill 555:
20 Occupational Licensing Boards and Commissions on Judicial
21 Disabilities Reporting Disciplinary Activities. This bill

1 would require the Board to collect certain demographic
2 information related to disciplinary activities.

3 The Board submitted a Letter of Concern.

4 House Bill 219; cross-filed with Senate Bill 306:
5 Dental Hygienists Consultation Requirements Health Care
6 Practitioners. This bill would require a dental hygienist to
7 consult with certain types of healthcare practitioners before
8 providing treatment to a patient.

9 The Board submitted no position.

10 House Bill 375; cross-filed with Senate Bill 269:
11 Open Meetings Act Application and Enhanced Requirements. This
12 bill repeals exemptions from the Open Meetings Act for
13 independent and regional development units. It is established
14 enhanced requirements for certain public bodies.

15 The Board took no position.

16 House Bill 407, cross-filed with Senate Bill 407:
17 Health Occupations Health Care Staffing Shortage Emergency
18 Declaration and Licensing and Practice Requirements. This bill
19 authorizes the Secretary of Health to declare a healthcare
20 staffing shortage emergency. It requires the Secretary to
21 consider certain elements before declaring an emergency. This

1 bill additionally requires the Board to establish processes for
2 the issuance of initial or temporary licenses on an expedited
3 basis.

4 The Board submitted a Letter of Support with
5 Amendments.

6 House Bill 462; cross-filed with Senate Bill 159:
7 Health Occupations Authorized Prescribers Reporting of
8 Financial Gratuities or Incentives. This bill would require an
9 authorized prescriber who receives a financial incentive from a
10 pharmaceutical entity to file a financial disclosure form with
11 the Board.

12 The Board submitted a Letter of Information with
13 Amendments.

14 House Bill 533; cross-filed with Senate Bill 523:
15 Occupations and Professions Licenses, Certificate and
16 Registration Immigrants. This bill prohibits the Board from
17 denying licensure or certification to an immigrant if the
18 individual meets certain requirements.

19 The Board submitted a Letter of Information.

20 House Bill 618: Maryland Parental Rights Act. This
21 bill prohibits an employee of a school district from withholding

1 information related to a child's health and wellbeing from their
2 parent, and requires a healthcare practitioner to obtain the
3 consent of a parent before providing service or prescribing
4 medication.

5 The Board took no position.

6 House Bill 623: Income Tax Subtraction
7 Modification Essential Health Care Workers. This bill allows
8 essential healthcare workers to receive a subtraction
9 modification of \$2000.

10 The Board submitted a Letter of Support.

11 House Bill 625; cross-filed with Senate Bill 440:
12 Commission to Study the Health Care Workforce Crisis in Maryland
13 Establishment. This bill establishes a commission to study the
14 healthcare workforce crisis in Maryland to be charged with
15 examining certain topic areas.

16 The Board submitted a Letter of Support with
17 Amendments.

18 House Bill 643; cross-filed with Senate Bill 385:
19 Health Disclosure of Medical Records Penalty. This bill
20 alters the definition of "medical record" to include certain
21 electronic data or information, and alters the penalty for a

1 healthcare provider that knowingly refuses to disclose a medical
2 record within a certain period of time.

3 The Board submitted no position.

4 House Bill 669; cross-filed with Senate Bill 503:
5 Maryland Medical Assistance Program Doula Services Coverage.
6 This bill requires an individual to meet certain requirements
7 before providing doula services, and requires the Maryland
8 Medical Assistance Program to cover doula services.

9 The Board submitted no position.

10 House Bill 676: Handgun Permits Qualifications
11 High Risk Occupation. This bill requires the Secretary of State
12 Police to issue a certain permit to carry, wear, or transport a
13 handgun to a person who is employed in a certain profession.

14 The Board submitted a Letter of Information with
15 Amendments.

16 House Bill 821; cross-filed with Senate Bill 518.
17 Career Pathways for Health Care Workers Program. This bill
18 establishes the Career Pathways for Health Care Workers Program
19 for the purpose of providing matching grants to eligible
20 employers for training programs attended by healthcare workers.

21 The Board submitted a Letter of Support with

1 Amendments.

2 House Bill 845; cross-filed with Senate Bill 623:
3 Income Tax Subtraction Modification Income of Healthcare
4 Workers. This bill allows certain healthcare workers to receive
5 a subtraction modification of \$25,000.

6 The Board submitted a Letter of Support with
7 Amendments.

8 House Bill 937; cross-filed with Senate Bill 890:
9 Abortion Care Access Act. This bill establishes the Abortion
10 Clinical Care Training Program in the Department of Health. It
11 alters certain requirements regarding abortion services,
12 including requirements related to who may perform abortions in
13 the State.

14 The Board submitted no position.

15 House Bill 975; cross-filed with Senate Bill 696:
16 Maryland Loan Assistance Repayment Program for Nurses and
17 Nursing Workers Program Establishment and Funding. This bill
18 establishes a loan assistance repayment program and funding
19 source to assist certain nurses and nursing workers with the
20 repayment of education loans.

21 The Board submitted a Letter of Concern.

1 Senate Bill 355: HIV Prevention Drugs Prescribing
2 and Dispensing by Pharmacists and Insurance Requirements. This
3 bill authorizes pharmacists to prescribe and dispense
4 pre-exposure and post-exposure prophylaxis medication for the
5 HIV prevention under certain circumstances.

6 The Board submitted a Letter of Information.

7 Senate Bill 435: Family Law Preventing or
8 Interfering with a Report of Suspected Sexual Abuse of a Child
9 State of Limitations. This bill establishes that an individual
10 may be prosecuted at any time for intentionally preventing a
11 mandatory reporter for making a report of abuse.

12 The Board took no position.

13 Senate Bill 865: Controlled Dangerous Substances
14 and Treatment of Chronic, Pain, and Long-Term Oxygen Use
15 Patients. This bill requires a provider to make an effort to
16 maintain a previous dosage and regimen for a controlled
17 dangerous substance, and make certain referrals. This bill also
18 establishes requirements for prescribers who treat patients who
19 experience chronic pain or experience long-term oxygen therapy.

20 The Board took no position.

21 And the last bill for today is Senate Bill 899,

1 which was previously alluded to by Ms. Evans, titled: Health
2 Occupation Boards Authority Over Staffing and Infrastructure
3 Operations. This bill would authorize the Secretary of Health
4 to have power or authority over the Board's infrastructure
5 operations, and it additionally authorizes the Governor to
6 appoint the Board's president.

7 The Board submitted a Joint Letter of Opposition
8 with sixteen other boards and commissions and provided oral
9 testimony that was unfavorable.

10 With that, I would be happy to take any questions
11 that pertain to this legislative memo.

12 MR. HICKS: Iman, do you want to just speak to the
13 recommendation by Senator Kagan about after all the testimony
14 yesterday so the folks know what our next steps are?

15 MS. FARID: Yes, I can. So, this hearing for Senate
16 Bill 899 was scheduled for yesterday afternoon. After hearing
17 both commissions in favor, but particularly in opposition,
18 should have posed a question to the Board to deliberate on. Let
19 me just see. So, she had asked the Board that if there were
20 changes made to Senate Bill 899 that it would be narrowed to
21 only administrative authorities being transferred to the

1 Secretary, what the Board thoughts would be on the narrowing of
2 the scope. However, she has not provided the definition of what
3 administrative functions or authorities would include.

4 MR. EVANS: Thank you, Iman. So, for those who have
5 not seen the bill, we had met with Senator Kagan's office last
6 Friday and they sent us an amendment bill. They softened the
7 language for the executive director and board presidents, and
8 they added the administrative functions that they would cover.
9 Those administrative functions that they would cover would be
10 HR, Procurement, Budget. So, all of the boards, we spoke
11 yesterday, and we've been sending emails today about making sure
12 that we are, you know, together as a whole and group. And so,
13 we had one opinion yesterday, we rethought it overnight, all of
14 us, and I've reached out this morning to a few. And so, we will
15 be sending our response back to Senator Kagan with the notes.

16 The concerns that all of us had as a whole is that
17 the administrative powers and general management of the boards
18 are so intertwined that separating them will result in
19 insufficient operations because we didn't know what the
20 Secretary was taking over, and what the boards have. We did
21 have a speaker yesterday. Iman is going to find out his name

1 for us. He went back as far as Paula Hollinger, who decided why
2 the boards should be separated to begin with. Because at that
3 time he stated that the Secretary was moving staff here and
4 there, so no one really had a permanent staff, the money was not
5 being used for the appropriate things, according to this
6 gentleman, and it was a lot of political influence at the time.

7 So, I've asked Iman to do some homework on that. I
8 shouldn't say "homework." Sorry, Iman, you're not in school.
9 Do some research on that and see if we can find out some more
10 information just so that we will have it ourselves as to the
11 initial reason why they decided to split. I think that's
12 critical for us just to know in general as to why it is. So, we
13 will be sending a response back today just stating similar to
14 what I just stated there, and just to say that our original
15 response is the same, opposed to the bill.

16 MS. TURNER: Karen, I think it was Dr. James Goldsmith.

17 MS. EVANS: Thank you, Ann.

18 MS. TURNER: I'm not a hundred percent sure, but I
19 think that's who it was, but he was impressive.

20 MS. EVANS: Very.

21 MR. HICKS: Senator Kagan only gave us twenty-four

1 hours to respond. So, you know, we were done yesterday about
2 3:00 o'clock by the time we got out of there. So, I mean, it's
3 not a whole lot of time for the executive directors, presidents,
4 and board counsels, and whoever else is involved to really be
5 able to turn this around, especially when we don't have
6 definitions.

7 MS. STEINBERG: I read the bill. It sounded very
8 vague and very confusing as to what the roles would be. It was
9 interesting that it was not a departmental bill. It's not
10 brought by the Governor's office. It was just one lone senator,
11 which I then thought was a little sign that it's going to dive.
12 But then again, you never know. But I thought it was a very
13 poorly worded bill.

14 MS. BEESON: I do have just a point of clarity,
15 because in here it says that the Secretary with the advice and
16 consent of the Board may designate. And so, what's the circuit
17 breaker there if there's not consent from the Board? What would
18 that next step be? Because it's also so vague, it's not
19 mentioned here. Was that part of the conversation?

20 MS. EVANS: That was part of the conversation
21 yesterday by several of the different boards.

1 MS. BEESON: I mean, it's not magically going to
2 have consent if we can't agree. Typically, the provisions
3 would be stated, and I don't see anything.

4 MR. HICKS: Several of the chairs and presidents and
5 EDs that were there yesterday, I mean, one of the folks that
6 spoke from the Board of Chiropractic Medicine, I think it was,
7 you know, when he spoke, I think a light went off in all of our
8 heads because we really didn't think about it. Maybe it was in
9 the back of our minds that, you know, with the Secretary or the
10 Governor appointing the ED as well as the president, what if
11 they don't get along? You know, if they have totally different
12 views. You know, the president or chair, what if they don't get
13 along well with the board members and that type of thing. So,
14 you know, the importance of the board members being able to
15 select who they want as their chair or president, the board
16 being able to select who they want as their executive director
17 really is important. And I think we thought that, but didn't
18 really think deep because we were looking at some other things.
19 So, when he said that we're like, "Yeah, that doesn't make any
20 sense. If the executive director and chair or president doesn't
21 have a working relationship because they have one agenda, the

1 president or the board may have another agenda." You know,
2 nothing is going to get done. So, yeah, it was interesting.

3 Are there any questions for Iman?

4 MS. GREEN: This is Dr. Green. May I just ask one
5 question, please?

6 MR. HICKS: Sure.

7 MS. GREEN: You mentioned something about a former
8 Paula Hollinger and the political influence of someone. Who
9 was that someone, please?

10 MS. EVANS: We think it's James Goldsmith, but Iman
11 is going to double-check on that for us.

12 During which time? I'm sorry, Dr. Green, could you
13 clarify. Are you speaking about now, as far as this bill is
14 concerned?

15 MS. GREEN: No, I'm talking about the history. You
16 mentioned Paula Hollinger.

17 MS. EVANS: Yes.

18 MS. GREEN: And the political influence of Jay who?

19 MS. EVANS: No, it's not the political of Jay who,
20 it's just the political influence of whoever was in office at
21 that time.

1 MS. GREEN: I see.

2 MS. EVANS: Yes, so actually they did the split
3 sometime in the early-80s, according to Mr. Goldsmith.

4 MS. GREEN: Okay, thank you.

5 MS. EVANS: Okay, no problem.

6 MR. HICKS: Are there any other questions?

7 (No questions posed)

8 MR. HICKS: All right. So, is there a motion to
9 approve and ratify -

10 MS. EVANS: Hold on. There's one more thing I need
11 to talk about.

12 MR. HICKS: Okay.

13 MS. EVANS: Iman, do you have anything else?

14 MS. FARID: I think I just need approval. But for
15 our next item, I will let you present, Karen.

16 MS. EVANS: Okay, thank you. Go ahead.

17 MR. HICKS: So, we will move to a motion to approve
18 and ratify the positions taken by the Legislative Committee.

19 Is there a motion?

20 MS. STEINBERG: So moved, Steinberg.

21 MR. HICKS: Steinberg.

1 MS. GIBBONS-BAKER: Second, Gibbons-Baker.

2 MR. HICKS: Gibbons-Baker. All in favor?

3 ALL: Aye.

4 MR. HICKS: Opposed?

5 (No oppositions)

6 MR. HICKS: Motion carries. Now you can go ahead,
7 Karen.

8 MS. EVANS: Thank you. So, I wanted to bring back
9 to everyone, we have spoken about the temporary nursing
10 assistants that have been assisting long-term care facilities
11 over the pandemic. As you know, the pandemic has been - well,
12 next month it will be two full years. It's been going on for
13 two years, and these individuals have put in quite amount of
14 time. So, the HFAM and Lifespan have come to the Board, as well
15 as Leading Age, for some assistance in this matter. So, we have
16 reviewed several models, and so far, our conceptual framework
17 for the temporary nursing assistant's recognition. There's also
18 a bill - Iman, what's Delegate Kelly's bill number?

19 MS. FARID: It is House Bill 1208.

20 MS. EVANS: House Bill 1208, and that has -- a
21 portion of that bill has for the boards to recognize the work

1 time that they've already had in the building. So, what our
2 conceptual framework is - with, of course, Board approval, is
3 completion of an 8-hour initial online temporary nursing
4 assistant training course, which all of them had to take prior
5 to working on the unit. Submission of a joint attestation by
6 the temporary nursing assistant and their employer, which
7 attests that the temporary nursing assistant worked a minimal
8 number of hours as a temporary nursing assistant during the
9 COVID-19 pandemic and completed a minimal of number of hours of
10 on-the-job training that meets all of the curriculum and
11 instructor requirements under Federal Regulations for the Nurse
12 Aide Training Incompetency Evaluations Program. And lastly,
13 they are to pass the Geriatric Nursing Assistant Competency
14 Evaluation administered by Credentia, which is the new agency
15 instead of Pearson VUE. So, that's the conceptual framework
16 that we have come up with.

17 Do you have anything to add, Mike?

18 MR. CONTI: Just to add a little bit, provided that
19 the bill passes and becomes law and the Board is obligated and
20 authorized to address the temporary nursing assistant
21 recognition, this was just the conceptual framework at this

1 point. If the bill passes, we would bring this back in a more
2 formal way with proposed regulations that would govern this
3 process for recognizing the temporary nursing assistants and
4 getting them certified as geriatric nursing assistants.

5 So, this is just kind of an FYI conceptual framework
6 at this point.

7 MR. HICKS: Are there any questions?

8 MS. WESTERFIELD: Just to clarify, so what would be
9 different is the education and the way they get the
10 certification. They will still have to become certified by the
11 Board in order to continue to practice?

12 MS. EVANS: Correct.

13 MS. WESTERFIELD: Okay.

14 MS. EVANS: The CMS waiver, when it ends, they have
15 four months to either get education or training or some other
16 type of whatever the Board of that particular state or
17 education, because not all CNAs are under the board, will
18 determine what those steps would be.

19 MR. HICKS: This is a one-and-done. So, it won't be
20 something that's ongoing.

21 Dr. Raymond?

1 MR. RAYMOND: So, I have two questions for
2 clarification. This is specific only for the geriatric nursing
3 assistant, right? So, this isn't related to a certified nursing
4 assistant? It's just for the geriatric nursing assistant?

5 MS. EVANS: It's specific to the temporary nursing
6 assistant to become a geriatric nursing assistant, correct.

7 MR. RAYMOND: Right. And then can you expound upon
8 - I think I heard you say within the conceptual framework that
9 there will be a requirement that at some level they met the
10 instructor requirements, and that there was an instructor
11 requirement within the conceptual framework. Can you explain
12 that portion and what the expectation would be for that
13 documentation?

14 MR. CONTI: So, the model is based on Pennsylvania's
15 framework for recognizing temporary nursing assistants that
16 involved an attestation form that is jointly filled out by the
17 temporary nursing assistant and their employer, and they both
18 attest to the fact that the individual received on-the-job
19 training in all of the curricular areas that are required under
20 Federal Regulations by an individual who meets the instructor
21 requirements under the Federal Regulations, but it is an

1 attestation form.

2 MR. RAYMOND: I would like to go over those
3 requirements of the instructor at some point. Those are Federal
4 Requirements for the instructor, correct?

5 MR. CONTI: Yep. And those will be spelled out in
6 the attestation form and the regulations.

7 MR. RAYMOND: Okay.

8 MS. HAYWARD: So, these nursing assistants have
9 already had training, they're just not meeting the geriatric
10 nursing assistant qualifications when they are on loan to these
11 people?

12 MR. CONTI: Well, they haven't taken any formal
13 training for it.

14 MS. HAYWARD: Being CNAs working on and being on one
15 and two, and that means they're certified already, but I assume
16 they're not certified.

17 MR. CONTI: These are uncertified individuals.

18 MS. HAYWARD: Okay. But they have had some training
19 before?

20 MS. EVANS: Eight hours.

21 MS. HAYWARD: Eight hours?

1 MS. EVANS: Yeah, I know. So, with the Governor's
2 Executive Order and with the CMS waiver, opened the door for the
3 temporary nursing assistants, and it did not have to be a
4 certified nursing assistant or geriatric nursing assistant in
5 our state. So, it's an uncertified person that they brought in
6 from -

7 MS. HAYWARD: Off the street?

8 MS. EVANS: From around, that can come in. And they
9 gave them an 8-hour course, and they probably had on-the-unit
10 training for the skills portion.

11 MR. CONTI: And the CMS is essentially urging states
12 to find a way to credit the on-the-job training that they have
13 given against the hours required for certification. So, while
14 it wasn't gained in a formal approved training program, they'd
15 like to have boards recognize these folks and get them
16 certified.

17 MR. HICKS: Any other questions?

18 (No questions posed)

19 MR. HICKS: All right. So, we will bring this back
20 once -

21 MR. CONTI: If or when the bill passes.

1 MR. HICKS: Yeah. Thank you. Moving onto 8,
2 Direct-Entry Midwifery and Electrology. Monica?

3 MS. MENTZER: Yes. Good morning, everyone. We are
4 going start with 8A. This is an application for reinstatement
5 of a license to practice electrology.

6 At its meeting on February 9, 2022 the Electrology
7 Practice Committee reviewed the application for reinstatement of
8 license to practice electrology received to the Maryland Board
9 of Nursing from Angelina Waight, License Number E01096, and
10 finds the reinstatement application and the supporting
11 documentation for a minimum of 20 approved continuing education
12 units, CEUs, for reinstatement of a
13 non-renewed electrology license for Angelina Waight, E01096 to
14 meet the requirements set forth in the Annotated Code of
15 Maryland, Health Occupations Article, Title 8, Subtitle 6B,
16 Section 8-6b-14i.

17 The committee therefore requests to the Board to
18 approve the reinstatement application for an electrology license
19 for Angelina Waight.

20 MR. HICKS: Is there a motion to approve the
21 recommendation by the Electrology Practice Committee to approve

1 reinstatement to practice as a licensed electrologist for
2 Angelina Waight?

3 MS. ROBIN HILL: So moved, Dr. Robin Hill.

4 MS. TURNER: Second, Turner.

5 MR. HICKS: Dr. Robin Hill, Turner. All in favor?

6 ALL: Aye.

7 MR. HICKS: Opposed?

8 (No oppositions)

9 MR. HICKS: Motion carries.

10 MS. MENTZER: Thank you. Moving onto 8B,
11 application for reinstatement of a license to practice
12 electrology.

13 At its meeting on February 9, 2022 the Electrology
14 Practice Committee reviewed the application for reinstatement of
15 license to practice electrology received to the Maryland Board
16 of Nursing from Ann Marie Coscia, License Number E01385, and
17 finds the reinstatement application and supporting documentation
18 from a minimum of 20 approved continuing education units for
19 reinstatement of a non-renewed electrology license for Ann Marie
20 Coscia, E01385 to be deficient in meeting the requirements set
21 forth in the Annotated Code of Maryland, Health Occupations

1 Article, Title 8, Subtitle 6b, Section 8-6b-14i.

2 The committee therefore requests to the Board to
3 disapprove or deny the reinstatement application for an
4 electrology license for Ann Marie Coscia, License Number
5 E01385.

6 MR. HICKS: Is there a motion to approve the
7 recommendation from the Electrology Practice Committee to deny
8 the reinstatement application for electrology for Ann Marie
9 Coscia?

10 MS. HAYWARD: So moved, Hayward.

11 MR. HICKS: Hayward.

12 MS. TURNER: Second, Turner.

13 MR. HICKS: Turner. All in favor?

14 ALL: Aye.

15 MR. HICKS: Opposed?

16 (No oppositions)

17 MR. HICKS: Motion carries.

18 MS. MENTZER: Moving onto 8C. This is an
19 application for initial licensure to practice direct-entry
20 midwifery.

21 At it's meeting on February 4, 2022 the Direct-Entry

1 Midwifery Advisory Committee reviewed the application for
2 initial licensure to practice
3 direct-entry midwifery received to the Maryland Board of
4 Nursing and finds that the applicant Luisely Melecio-Zambrano
5 meets the minimum regulatory requirements set forth in the
6 Code of Maryland Regulations Title 10, Subtitle 64, Chapter 1;
7 specifically, COMAR regulation 10.64.01.16 and 10.64.01.16 for
8 licensure to practice as a direct-entry midwife in Maryland.

9 The committee therefore requests to the Board to
10 approve the application for Luisely
11 Melecio-Zambrano for initial licensure to practice as a
12 direct-entry midwife in Maryland.

13 MR. HICKS: Is there a motion to approve the
14 recommendation from the Direct-Entry Midwifery Advisory
15 Committee to approve the initial license for Luisely
16 Melecio-Zambrano?

17 MS. GIBBONS-BAKER: So moved, Gibbons-Baker.

18 MR. HICKS: Gibbons-Baker.

19 MS ROBIN HILL: Second, Dr. Robin Hill.

20 MR. HICKS: Dr. Robin Hill. All in favor?

21 ALL: Aye.

1 MR. HICKS: Opposed?

2 (No oppositions)

3 MR. HICKS: Motion carries.

4 MS. MENTZER: Thank you. Moving onto 8D,
5 application for initial licensure to practice
6 direct-entry midwifery.

7 At its meeting on February 4, 2022 the Direct-Entry
8 Midwifery Advisory Committee reviewed the application for
9 initial licensure to practice
10 direct-entry midwifery received to the Maryland Board of
11 Nursing and finds that the applicant Felicia Renee McMullen
12 meets the minimum regulatory requirements set forth in
13 the Maryland Code of Regulations, Title 10, Subtitle 64,
14 Chapter 1; specifically, Regulations 10.64.01.15 and
15 10.64.01.16 for licensure to practice as a direct-entry
16 midwife in Maryland.

17 The committee therefore requests to the Board to
18 approve the application for Felicia Renee McMullen for
19 initial licensure to practice as a direct-entry midwife
20 in Maryland.

21 MR. HICKS: Is there a motion to approve the

1 recommendation from the Direct-Entry Midwifery Advisory
2 Committee to approve the initial licensure for Felicia
3 Renee McMullen?

4 MS. WESTERFIELD: So moved, Westerfield.

5 MR. HICKS: Westerfield.

6 MS. GIBBONS-BAKER: Second, Gibbons-Baker.

7 MR. HICKS: Gibbons-Baker. All in favor?

8 ALL: Aye.

9 MR. HICKS: Opposed?

10 (No oppositions)

11 MR. HICKS: Motion carries. Thank you, Monica.

12 Monica, you can stay. Do you want to talk about the
13 minimum data set?

14 MS. MENTZER: Yes, I do have a question for the
15 Board. I received a phone call on Thursday, February 17th
16 from Mary Tarenyika.

17 Mary, are you on the call?

18 (No response)

19 MS. MENTZER: Okay. Mary is an employee of the
20 Department of Health, Office of Health Care Quality, Long
21 Term Care Unit. She identifies herself as the State

1 Minimum Data Set, the MDS, Coordinator, as well as the
2 State Resident Assessment Instrument, RAI, Coordinator, and
3 she had a question for the Board.

4 She had been contacted by an RN, who's licensed in
5 Pennsylvania, and was planning to work as a consultant at a
6 long-term care facility in Maryland. The purpose of her
7 being hired as a consultant was to assist the facility. More
8 information was gathered from Ms. Tarenyika, and we asked what
9 specifically she was referring to in the Code of Maryland
10 Regulations. And its Federal Regulations in 42CFR, Section
11 483.20(i)1, states a registered nurse my sign and certify that
12 the assessment is completed.

13 So, the question came in because the nurse in
14 Pennsylvania whose licensed consultant nurse, RN, was asking
15 to assist a facility in citing Section Z0500 of the MDS so that
16 they are compliant in their timely completion and submission of
17 MDS assessments to the Center for Medicare and Medicaid
18 Services, CMS. She indicated that the facility was experiencing
19 a staffing shortage with MDS coordinators due to the pandemic.
20 Multiple state MDS coordinators from other states have received
21 similar questions, and CMS gave guidance for the state MDS

1 coordinators to consult with their State Board of Nursing.
2 There is no form that the licensing board would be required to
3 complete and submit to CMS.

4 The RN assessment coordinator who signs Section
5 Z0500 of the MDS assessment is not certifying the accuracy of
6 portions of the assessment that were completed by other
7 healthcare professionals. They are signing that it is a
8 complete assessment.

9 So, the question came from Office of Health Care
10 Quality to consult with the Board of Nursing via the advice of
11 the Centers of Medicare and Medicaid. So, I am bringing it to
12 the Board. If there are any further questions, I can try to
13 answer them.

14 I did refer the individual to the Public Health
15 Emergency Declaration, the federal that's in effect on our
16 website under, Communications from the Board, regarding if they
17 have an active RN license or LPN license in another state, that
18 during the Federal State of Emergency that does give them
19 permission to practice.

20 MR. HICKS: Monica, we're going to take this
21 offline. We can answer this outside of the board meeting.

1 MS. MENTZER: Okay.

2 MR. HICKS: This doesn't need to be Board involved.

3 So, we will take care of that.

4 MS. MENTZER: Okay.

5 MR. HICKS: Thank you, Monica.

6 MS. MENTZER: You're welcome.

7 MR. HICKS: I will turn it over now to the floor.

8 If anyone would like to address the Board, now is the time to
9 do so.

10 (No comments posed)

11 MR. HICKS: All right, hearing none.

12 In a moment I am going to ask if there's a motion to close the
13 Open Session, but first I'm going walk us through the written
14 statement that is required by the Open Meetings Act to ensure
15 that Board members agree with its contents.

16 As documented in the written statement, the
17 statutory authority to close this Open Session and meet in
18 Closed Session is Annotated Code of Maryland, General Provisions
19 Article 3-305(b)13, which gives the Board the authority to close
20 an Open Session, to comply with the specific constitutional,
21 statutory, and judicial imposed requirement that prevents public

1 disclosures about a particular matter or proceeding. The topic
2 to be discussed during Closed Session pursuant to this statutory
3 authority is applications for licensure and/or certification.
4 The reason for discussing the topic in Closed Session is to
5 discuss confidential matters that are prohibited from public
6 disclosures by the Annotated Code of Maryland, Health
7 Occupations Article 8-303(f), Health Occupations Article
8 8-320(a), and Health Occupations Article 1-401, and General
9 Provisions Article 4-333. In addition, the Board may also
10 perform Quasi Judicial and administrative functions involving
11 disciplinary matters during the Closed Session.

12 Is there a motion to close this Open Session
13 pursuant to the statutory authority and reasons cited in the
14 written statement, or any discussion thereof?

15 MS. JACQUELINE HILL: Motion to approve, Dr.
16 Jacqueline Hill.

17 MR. HICKS: Dr. Jacqueline Hill.

18 MS. CASSIDY: Second, Cassidy.

19 MR. HICKS: Cassidy. All those in favor?

20 ALL: Aye.

21 MR. HICKS: Opposed?

1 (No oppositions)

2 MR. HICKS: Motion carries. Thank you, everyone.

3 Have a great day.

4 (Whereupon, at 10:46 a.m. the Open Session was
5 concluded.)

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

1 CERTIFICATE OF NOTARY

2 I, EDWARD BULLOCK, a Notary Public of the State of
3 Maryland, do hereby certify that the proceedings were recorded
4 via audio by me and that this transcript is a true record of the
5 proceedings. I am not responsible for inaudible portions of the
6 proceedings.

7 I further certify I am not of counsel to any of the
8 parties, nor an employee of counsel, nor related to any of the
9 parties, nor in any way interested in the outcome of this action
10 as witness my hand and notarial seal this 23rd day of February,
11 2022

12

13

14

15

16

Edward Bullock, Notary Public

17

in and for the State of Maryland

18

19

20

21 My commission expires: May, 13, 2023

Script for Closing Open Session
February, 2022

In a moment, I am going to ask if there is a motion to close the open session, but first I am going to walk us through the written statement that is required by the Open Meetings Act to ensure that all Board members agree with its contents.

As documented in the written statement, the statutory authority to close this open session and meet in closed session is Annotated Code of Maryland, General Provisions Article § 3-305(b)(13), which gives the Board the authority to close an open session "to comply with a specific constitutional, statutory, or judicially imposed requirement that prevents public disclosures about a particular matter or proceeding." The topic to be discussed during closed session pursuant to this statutory authority is applications for licensure and/or certification. The reason for discussing this topic in closed session is to discuss confidential matters that are prohibited from public disclosure by the Annotated Code of Maryland, Health Occupations Article § 8-303(f), Health Occupations Article § 8-320(a), Health Occupations Article § 1-401 *et seq.*, and General Provisions Article § 4-333. In addition, the Board may also perform quasi-judicial and administrative functions involving disciplinary matters during the closed session.

Is there a motion to close this open session pursuant to the statutory authority and reasons cited in the written statement or any discussion thereof?

MARYLAND BOARD OF NURSING

Presiding Officer's Written Statement for Closing a Meeting
under the Open Meetings Act (General Provisions Article § 3-305)

1. Recorded vote to close the meeting: Date: 2/23/22 Time: 10:45 am
Location: Md. Board of Nursing office; conference call line
Motion to close meeting made by: J. Hill Seconded by Cassidy
Members in favor: Beeson, Gibbons-Baker, Turner, Hayward, Raymond, Houts, J. Hill,
Opposed: None Abstaining: None
Absent: ~~Westerfield~~, Vickers

2. Statutory authority to close session. This meeting will be closed under General Provisions § 3-305(b) only:

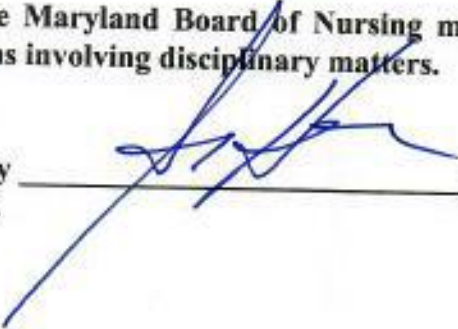
(1)___ "To discuss the appointment, employment, assignment, promotion, discipline, demotion, compensation, removal, resignation, or performance evaluation of appointees, employees, or officials over whom this public body has jurisdiction; any other personnel matter that affects one or more specific individuals"; (2)___ "To protect the privacy or reputation of individuals concerning a matter not related to public business"; (3)___ "To consider the acquisition of real property for a public purpose and matters directly related thereto"; (4)___ "To consider a matter that concerns the proposal for a business or industrial organization to locate, expand, or remain in the State"; (5)___ "To consider the investment of public funds"; (6)___ "To consider the marketing of public securities"; (7)___ "To consult with counsel to obtain legal advice"; (8)___ "To consult with staff, consultants, or other individuals about pending or potential litigation"; (9)___ "To conduct collective bargaining negotiations or consider matters that relate to the negotiations"; (10)___ "To discuss public security, if the public body determines that public discussion would constitute a risk to the public or to public security, including: (i) the deployment of fire and police services and staff; and (ii) the development and implementation of emergency plans"; (11)___ "To prepare, administer, or grade a scholastic, licensing, or qualifying examination"; (12)___ "To conduct or discuss an investigative proceeding on actual or possible criminal conduct"; (13) X "To comply with a specific constitutional, statutory, or judicially imposed requirement that prevents public disclosures about a particular proceeding or matter"; (14)___ "Before a contract is awarded or bids are opened, to discuss a matter directly related to a negotiating strategy or the contents of a bid or proposal, if public discussion or disclosure would adversely impact the ability of the public body to participate in the competitive bidding or proposal process." (15)___ "To discuss cybersecurity, if the public body determines that public discussion would constitute a risk to: (i) security assessments or deployments relating to information resources technology; (ii) network security information . . . or (iii) deployments or implementation of security personnel, critical infrastructure, or security devices."

J. Hill,
Cassidy,
Westerfield,
R. Hill,
Lyons,
Steinberg,
Owvama

3. For each provision checked above, disclosure of the topic to be discussed and the Maryland Board of Nursing's reason for discussing that topic in closed session.

Citation	Topic	Reason for closed-session discussion of topic
§ 3-305(b) (13)	Applicants for licensure and certification	To discuss confidential information that is prohibited from public disclosure pursuant to Md. Code Ann., Health Occ. §§ 8-303(f), 8-320(a), and 1-401 et seq., and Gen. Prov. § 4-333.
§ 3-305(b) ()		
§ 3-305(b) ()		

NOTE: During the Closed Session, the Maryland Board of Nursing may also perform quasi-judicial and administrative functions involving disciplinary matters.

4. This statement is made or adopted by , Presiding Officer, Maryland Board of Nursing.