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MARYLAND BOARD OF NURSING

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OPEN SESSION

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The Maryland Board of Nursing board meeting was held on Wednesday, January 25, 2023, at 4140 Patterson Avenue, Baltimore, Maryland 21215, commencing at 9:10 a.m. before Sabrina Boyd, Notary Public in and for the State of Maryland.

AUDIO RECORDING BY: Sabrina Boyd, Notary Public

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1 APPEARANCES:

2

3 BOARD MEMBER APPEARANCES:

4 GARY HICKS, RN Member, Board President

5 ANN TURNER, RN Member, Board Secretary

6 M. DAWNE HAYWARD, RN Member

7 EMALIE GIBBONS-BAKER, APRN Member (via telephone)

8 AUDREY CASSIDY, Consumer Member

9 SUSAN STEINBERG, Consumer Member

10 ROBIN HILL, RN Member, LPN Educator

11 HEATHER WESTERFIELD, RN Member

12 CHRISTINE LECHLITER, RN Member

13 SUSAN LYONS, APRN Member

14 NICOLE BEESON, RN, Administrator Member

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1 CONTENTS

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3 SECTION DESCRIPTION PAGE

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1 ALSO PRESENT:

2

3 IMAN FARID, Health Policy Analyst (via telephone)

4 PAIGE BAROCCA, LDEM

5 CHANTE (phonetic)

6 MAXINE TRANUM (phonetic)

7 NIKKI WILLIAMS

8 KAITLYN McDONALD (phonetic)

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1 PROCEEDINGS

2 MR. HICKS: All right. So, is there a motion

3 to approve the on-site report for Wor-Wic Community

4 College?

5 MS. ROBIN HILL: So moved. Dr. Robin.

6 MR. HICKS: Dr. Robin Hill.

7 MS. TURNER: Second. Ann Turner.

8 MR. HICKS: Turner. All in favor?

9 ALL: Aye.

10 MR. HICKS: Opposed?

11 (No oppositions)

12 MR. HICKS: Motion carries.

13 DR. GREEN: Thank you. Our final item before

14 (indiscernible) are (indiscernible) follow up

15 (indiscernible) determine the findings of our board

16 visit to (indiscernible) in December. Oh, I'm sorry. I

17 forgot to acknowledge you and thank you for being here.

18 I apologize for that. So, anyway, let me move down. The

19 fourth thing, Bowie State University, we did complete on-

20 site visit (indiscernible) licensure and myself on

21 September 13 through the 15th of 2022. We have already

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1 presented those findings in our December 2022 report to
 2 the board, which the board approved in terms of Bowie
 3 State University being in full compliance with all
 4 aspects from services with the board. But we wanted to
 5 just come back. Although we mentioned in our documents
 6 that we did discuss and had a preliminary ethical policy
 7 while we were present. We completed and we wanted to
 8 verify with the board that we do complete a follow up
 9 just to indicate that we are in compliance with COMAR
 10 10.27.02.14(d)10 regarding ethical policies also in
 11 compliance, of course, with Maryland Higher Education
 12 Commission. We (indiscernible) admissions at Middle
 13 States Commission on Higher Education Standard II, Ethics
 14 and Integrity. We verified information through nursing
 15 student handbooks and Bowie State University through
 16 discussions with the administrative team, nursing
 17 education team at Bowie State in recognizing the policy
 18 for identifying (indiscernible). We just wanted to have
 19 that for the board's record and for our compliance with
 20 the particular standard of, in terms of ethical practices
 21 within the university. The recognition that we wanted to

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1 bring forward to the board just so we have that on the
 2 record. Thank you.
 3 MR. HICKS: And thank you, Dr. Green. Is there
 4 any questions for Dr. Green? All right. Thank you, Dr.
 5 Green.
 6 DR. GREEN: You're welcome.
 7 MR. HICKS: I'm sorry. We do need approval for
 8 that. So, is there a motion to approve?
 9 MS. HAYWARD: Submitted.
 10 MR. HICKS: Hayward.
 11 MS. GIBBONS-BAKER: Second.
 12 MR. HICKS: Gibbons-Baker. All in favor?
 13 ALL: Aye.
 14 MR. HICKS: Opposed?
 15 DR. JACQUELINE: And I recuse myself.
 16 MR. HICKS: Okay. Dr. Jacqueline now recuses
 17 herself. I'm sorry. All in favor?
 18 ALL: Aye.
 19 MR. HICKS: Opposed?
 20 (No oppositions)
 21 MR. HICKS: The motion carries.

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1 DR. GREEN: Thank you.
 2 MR. HICKS: Thank you. All right. We'll move
 3 down to legislative affairs. Iman, are you online?
 4 MS. FARID: Yes. I am online. Can you hear
 5 me?
 6 MR. HICKS: Yes, ma'am.
 7 MS. FARID: Good morning, everyone, and happy
 8 Wednesday. We have two legislative items for this
 9 morning. We're going to start with legislative item 7A.
 10 This is a very brief presentation introducing the 2023
 11 legislative action. First, the board has a legislative
 12 committee. Currently, the committees meets weekly on
 13 Tuesday afternoon from 4:00 to 6:00 p.m. The committee
 14 is comprised of three board members, three to five board
 15 staff, and two to three board council. The committee's
 16 primary responsibility is to identify issues that are
 17 suitable for legislative review, gather and evaluate
 18 information, and then recommend a course of action. Some
 19 additional duties of the committee include staying
 20 informed of bills that are introduced during a legislate
 21 session that impact the board's mission, its

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1 constituents, and the safe practice of nursing, propose
 2 amendments to statutes and regulations as necessary, to
 3 request best practices, and to determine it fills in for
 4 any physical, operational, or legal impact for the Board
 5 of Nursing. The next slide I have is a brief timeline of
 6 the legislative session. Really, the two things I would
 7 like for you to note is that on January 11, the
 8 legislative session began. And April 10 the current sine
 9 die or adjournment of the legislative session. In
 10 between those two dates, the board will be active in
 11 providing testimony, written and oral, to the legislators
 12 in general assembly as well as participating in
 13 subcommittee work groups. The next slide I have is a
 14 schematic of the life cycle of a bill. At the shortest,
 15 a bill can be assigned to the board within one day of
 16 being introduced and at the latest, a week after being
 17 introduced. Essentially, a bill would be introduced to
 18 the Maryland General Assembly. It will be reviewed by
 19 MGA staff, which will then send over the bill if it's
 20 related to public health, healthcare, or health
 21 occupations to the Department of Health, specifically the

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1 Office of Governmental Affairs, for further review. Once
 2 the office within MDH determines that the issues is
 3 related to health, public health, or healthcare, it will
 4 be assigned to the appropriate administration. If it's,
 5 for example, related to nursing, it will be assigned to
 6 the Board of Nursing for further review. The Legislative
 7 Committee will review the bill on a weekly basis and will
 8 determine whether a position is needed to be taken. I,
 9 as the legislative liaison, will present the board's
 10 position back to the Office of General Assembly and
 11 submit any written testimony if appropriate. And
 12 finally, the last slide is just a brief review of the
 13 different positions the board can take. I won't read the
 14 descriptions, but I did want to note that there are three
 15 main categories: positions that are neutral, positions
 16 that are in favor, and positions that are in opposition.
 17 I wanted to bring some historical data from the 2022
 18 legislative session last year. The legislative committee
 19 reviewed a total of 86 bills and submitted 49 letters, 36
 20 of which of those bills the Board of Nursing has no
 21 position on. So, the committee between the months of

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1 January and April does review a large volume of bills and
 2 elects to take positions when appropriate. And with
 3 that, I will be happy to answer any questions you may
 4 have.
 5 MR. HICKS: All right. Are there any questions
 6 for Iman?
 7 MR. HICKS: Okay. All right. Okay, Iman. No
 8 questions. We can move on to B.
 9 MS. FARID: Yes. The next item is 76,
 10 memorandum provides a list of bills that were assigned to
 11 the board between the week of January 11 through the week
 12 of January 23. The legislative committee requests the
 13 board to ratify the positions that I will be reading.
 14 First, we have House Bill 25, titled Public Health,
 15 Healthy Maryland Program - Establishment. This bill
 16 establishes the Healthy Maryland Program as a public
 17 corporation and a unit of state government to provide
 18 comprehensive, universal, single payer healthcare
 19 services to residents of the State of Maryland. The
 20 board took no position. House Bill 28, titled Income Tax
 21 Credit for Caregivers of Senior Family Members. This

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1 bill allows a credit against the state income tax for
 2 qualified expenses paid or incurred by a taxpayer during
 3 the taxable year in caring for a qualified senior family
 4 member. The board presented a letter of information with
 5 amendments. House Bill 121, cross-filed with Senate Bill
 6 8, Mental Health Treatment Plans for Individuals in
 7 Facilities Requirements. This bill requires that a plan
 8 of treatment for an individual with a mental disorder
 9 include a certain discharge goal and an estimate of the
 10 length of inpatient stay. This bill also requires that
 11 facility staff review and (indiscernible) a treatment
 12 plan within certain time periods and establishes certain
 13 rights relating to the participation of family members
 14 and the development, review, and reassessment of a plan
 15 of treatment. And finally, this bill establishes an
 16 appeals process relating to the review and reassessment
 17 of a plan of treatment. The board took no position.
 18 House Bill 136, Child Support Enforcement, Occupational
 19 and Recreational Licenses, Taxpayer Identification
 20 Numbers. This bill requires an applicant for a license
 21 to disclose the Social Security number or taxpayer

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1 identification number on their license and also the
 2 duties of certain licensing authorities relating to the
 3 suspension or denial of licenses for child support
 4 arrearages. The board submitted a letter of information.
 5 Senate Bill 64, HIV Prevention Drugs, Prescribing and
 6 Dispensing by Pharmacists and Insurance Requirements.
 7 This bill authorizes pharmacists to prescribe and
 8 dispense post-exposure prophylactics for HIV prevention
 9 to patients under certain circumstances and requires the
 10 Maryland Medical Assistance Program to provide drugs that
 11 are approved by the FDA for HIV prevention. And,
 12 finally, this bill prohibits certain agencies from
 13 requiring prior authorization for certain drugs and/or
 14 therapies. The board submitted a letter of concern.
 15 Senate Bill 78, titled Health Occupations, Service
 16 Members, Veterans, and Military Spouses Temporary
 17 Licensure Certification, Registration, and Permitting.
 18 This bill requires health occupation boards to issue an
 19 expedited temporary license certificate or permit to a
 20 service member, veteran, or military spouse who meets
 21 certain requirements and requires that each health

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1 occupation form include a checkoff box prominently on an
 2 application form. Finally, this bill requires NEH to
 3 publish information on its website. The board submitted
 4 a letter of information with amendments. And finally,
 5 Senate Bill 104, Labor and Employment Apprenticeship and
 6 Documentation on the Apprenticeship and Training Counsel.
 7 This bill requires that the apprenticeship and training
 8 counsel include representation by individuals who are
 9 black and Latino and establishes apprenticeship 2030
 10 commission to examine and make recommendations to expand
 11 access to apprenticeship to reduce field shortages in
 12 high demand occupations. And finally, this bill requires
 13 the governors include an appropriation in the
 14 (indiscernible).
 15 (Crosstalk)
 16 I'm sorry. Someone is speaking. Can you
 17 please mute your phones? Thank you. And with that, I
 18 would be happy to answer any questions.
 19 MR. HICKS: Any questions for Iman? All right.
 20 Hearing none, thank you, Iman. So, we'll take a vote to
 21 approve the recommendations by the legislative committee

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1 as Iman outlined. Is there a motion to approve?
 2 DR. HILL: So moved. Robin Hill.
 3 MR. HICKS: Dr. Robin Hill, Gibbons-Baker. All
 4 in favor?
 5 ALL: Aye
 6 MR. HICKS: Opposed?
 7 (No oppositions)
 8 MR. HICKS: The motion carries. All right.
 9 Thank you, Iman.
 10 MS. FARID: Thank you.
 11 MR. HICKS: All right. We'll go down to direct
 12 into midwifery wives and electrology. Monica?
 13 MS. MENTZER: Yes. Good morning, everyone.
 14 ALL: Good morning.
 15 MS. MENTZER: How are you? Happy New Year.
 16 Okay. So, we're going to start with 8A. This
 17 is a request to the board for an appointment. The
 18 Maryland Board of Nursing direction to Midwifery Advisory
 19 Committee Annotated Code of Maryland Health Occupations
 20 Article Title VIII, Subtitle 16, Section 8-6B-11 provides
 21 for membership. The committee consists of seven members

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1 appointed by the board. The following Direct Entry
 2 Midwifery Advisory Committee member has completed
 3 appointment terms to the committee on December 31, 2022.
 4 That was Ms. Jan Krebs, Certified Nurse Midwife, CNM
 5 member. The following committee member is unable to
 6 attend the committee meetings and has notified the
 7 committee that she will need to resign her duties from
 8 the committee, Dr. Monica Buche, M.D. an H.N.
 9 representative. The committee therefore requests to the
 10 board consideration of the board to provide for
 11 appointments for the above open positions to the
 12 committee. I should also have information on this --
 13 Nothing for Dr. Monica Boucher, but for Ms. Jan Krebs,
 14 one of the individuals that has contacted the Board of
 15 Nursing to consider the board appointing her. Do you
 16 have any questions?
 17 MR. HICKS: Any questions for Monica? All
 18 right. So, is there a motion to approve Dr. Mairi Breen
 19 Rothman for the Direct-Entry Midwifery Advisory
 20 Committee?
 21 MS. GIBBONS-BAKER: So moved. Gibbons.

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1 MR. HICKS: Gibbons-Baker.
 2 MS. LYONS: Second, Lyons.
 3 MR. HICKS: Lyons. All in favor?
 4 ALL: Aye
 5 MR. HICKS: Opposed?
 6 (No opposition)
 7 MR. HICKS: Motion carries. All right.
 8 Monica, while you're there, do you want to do your
 9 quarterly report?
 10 MS. MENTZER: Yes. We're going to move down to
 11 9D, this is the Direct-Entry Midwifery Advisory
 12 Committee, second quarter fiscal year 2023 report to the
 13 board. Meetings: The committee holds scheduled meetings
 14 monthly on the first Friday of each month. The committee
 15 meets as necessary to conduct committee business.
 16 Meetings are held when there are sufficient agenda items
 17 or when the board receives applications for initial
 18 licensure or renewal of licensure as a direct-entry
 19 midwife. During the second quarter of FY 2023 from
 20 October 1 through December 31, 2022, the committee met
 21 three times; October 14, November 4, and December 2.

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|---|--|
| <p style="text-align: right;">Page 18</p> <p>1 Licensees during the FY '23 second quarter, there were 32 2 active direct-entry midwives licensed in Maryland. 3 Status of work completed: Pursuant to in accordance with 4 Maryland Code Health Occupations 8-6B-10, LDEMs are 5 required to complete and submit an annual data collection 6 form approved by the Maryland Board of Nursing on an 7 annual basis by October 1 of each year. The annual data 8 collection form requires LDEMs to report certain data to 9 the board regarding their clients and practice between 10 July 1 and June 30 of each year of the reporting period. 11 At its October 14, 2022, the committee reviewed and 12 aggregated the data from the reporting period submitted 13 by the LDEMs and discussed the committee's 14 recommendations regarding the following at its November 15 4, 2022 committee meeting: The continuation and 16 improvement of the licensure of licensed direct-entry 17 midwives in the state, any recommendations regarding 18 expanding the scope of practice of licensed direct-entry 19 midwives, and any recommendations including 20 recommendations for legislation regarding the scope of 21 practice of licensed direct-entry midwives to include</p> | <p style="text-align: right;">Page 20</p> <p>1 have previously provided such a document. The committee 2 reviewed a prior copy of the document at its meetings on 3 November 4 and December 2, 2022 for any necessary changes 4 or updates, specifically to be consistent with current 5 law and applicable community standards. The committee 6 will further review the proposed changes at its committee 7 meeting on January 6, 2023. Membership on the committee: 8 The third appointment to the board by the board is a 9 member on the committee representing the Maryland 10 Hospital Association is Dr. Monic Buche, M.D. At the 11 board's meeting on December 14, 2022, the committee 12 notified that board that Dr. Buche has resigned and the 13 board will need to make an appointment for the position 14 vacated by Dr. Buche's resignation to represent the MHA 15 on the committee. At its board's open session meeting on 16 December 14, 2022, the board appointed Ms. Tess Brody, 17 LDEM, license number DEM00029 to the committee, effective 18 date January 1, 2023, to replace Ms. Karen Webster, LDEM, 19 whose term expired on December 31, 2022. At the board's 20 open session meeting on December 14, 2022, the committee 21 requested that the board appoint an advanced practice</p> |
| <p style="text-align: right;">Page 19</p> <p>1 vaginal birth after cesarean. The committee reported the 2 results of the aggregated data from 35 annual data 3 collection forms received by the board and the committee 4 recommendations approved by the committee members on 5 November 4, 2022 to the Maryland Board of Nursing at its 6 November 16, 2022 open session board meeting. The board 7 reviewed the committee's report and recommendations and 8 submitted the board's required direct-entry midwives' 9 annual report to the legislature by December 1 of 2022. 10 Work in progress: The committee received a request from 11 Ms. Nikki Williams, LDEM, on behalf of the Association of 12 Independent Midwives of Maryland on October 14, 2022 for 13 the committee to review. A copy of this letter is 14 attached to this report. The committee reviewed the 15 letter at its meeting on November 4, 2022. Additional 16 information will be presented to the board at an open 17 session meeting later today. At the request of Ms. Paige 18 Barocca, LDEM and member of the committee, the committee 19 was asked to provide a template for an individual 20 transfer care plan as guidance for LDEMs on the Maryland 21 Board of Nursing website. The committee and the board</p> | <p style="text-align: right;">Page 21</p> <p>1 registered nurse/Certified Nurse-Midwife licensed in 2 Maryland to the committee to replace Ms. Jan Krebs, 3 Certified Nurse-Midwife whose second term expired on 4 December 31, 2022. The next meetings of the Direct-Entry 5 Midwifery Advisory Committee occurred on January 6 and 6 are scheduled for February 3 and March 3, 2022. Do you 7 have any questions about the quarterly report for the 8 Direct-Entry Midwifery Advisory Committee? 9 MR. HICKS: Any questions? All right. Hearing 10 none, is there a motion to approve quarterly report for 11 the Direct-Entry Midwifery Advisory Committee? 12 MS. HAYWARD: So moved Hayward. 13 MR. HICKS: Ms. Hayward. 14 MS. WESTERFIELD: Westerfield. 15 MR. HICKS: Westerfield. All in favor? 16 ALL: Aye. 17 MR. HICKS: Opposed? 18 (No opposition) 19 MR. HICKS: Motion carries. 20 MS. MENTZER: Okay. And then moving down to 21 9E, this is the quarterly report to the Board of Nursing</p> |

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|---|--|
| <p style="text-align: right;">Page 22</p> <p>1 from the Electrology Practice Committee for the second 2 quarter FY 2023. Meetings: The Electrology Practice 3 Committee meets as necessary to conduct committee 4 business. The meetings were held when there is 5 sufficient agenda items or when the Maryland Board of 6 Nursing receives initial or renewal applications for 7 licensure as an electrologist or electrology instructor. 8 The committee met three times during the second quarter 9 of FY 2023 on October 5, November 2, and December 7, 10 2022. Currently, there are 50 active electrologists and 11 two active electrology instructors licensed in Maryland. 12 Status of work completed: The committee conducted a 13 final review for two applicants for initial licensure to 14 practice electrology on December 7, 2022 and were able to 15 recommend to the board to approve the two applicants, Ms. 16 Jacqueline Tedros (phonetic) and Ms. Ahuba Boken 17 (phonetic) as meeting all of the minimum requirements for 18 initial licensure to practice electrology in Maryland. 19 At its open session board meeting on December 14, 2022, 20 the board accepted the committee’s recommendation for 21 approval to license Ms. Jacqueline Tedros and Ms. Ahuba</p> | <p style="text-align: right;">Page 24</p> <p>1 progress: At its December 7, 2022 meeting, the committee 2 members requested that the committee review the current 3 approved clinical examination form and the Maryland Law 4 Examination Exam to update the documents. The committee 5 began the process of updating both documents and will 6 continue to review both documents at its next scheduled 7 committee meeting. Membership: Ms. Debra Larsen, LE, 8 chair of the committee, has completed her second four- 9 year term as a committee member on June 30, 2021. The 10 committee has posted a notice on its website requesting 11 interested electrologists who are licensed and meet all 12 of the requirements for an appointment on a committee to 13 submit a letter of interest with resume to the board. To 14 date, the board has not received any potential candidate 15 interested in being considered for an appointment to 16 replace Ms. Larsen. Ms. Larsen is able to continue to 17 serve unless and until a successor is appointed and 18 qualifies in accordance with Maryland Code Annotated 19 Health Occupations Section 8-6B-05(f)(3). Meetings: The 20 next meetings of the committee occurred on January 11 and 21 are scheduled for February 8, 2023 and March 8, 2023.</p> |
| <p style="text-align: right;">Page 23</p> <p>1 Boken to practice electrology in the State of Maryland. 2 On December 27, 2022, pursuant to the board’s approval, 3 the board issued licenses to practice electrology in the 4 State of Maryland to Ms. Jacqueline Tedros, license 5 number E01478 and Ms. Ahuba Boken, license number E01477. 6 The board also sent a letter of notification of licensure 7 to each of the newly licensed electrologists by US Postal 8 Service on December 27, 2022. Review of reinstatement 9 and reinstatement applications for licensure as 10 electrologists and/or electrology instructor: The 11 committee received and reviewed one application for 12 reactivation of an electrology license that the board 13 placed on inactive status. The committee reviewed and 14 completed its review of the completed application at its 15 meeting on December 7, 2022 and recommended to the board 16 that the board approve the reactivation of the 17 electrology license of Ms. Deborah Winter (phonetic), 18 license number E01457. And on December 14, 2022, at its 19 open session board meeting, the board approved the 20 reactivation of the electrology license of Deborah 21 Winter, license number E01457. Status of work in</p> | <p style="text-align: right;">Page 25</p> <p>1 Are there any questions about the Electrology Practice 2 Committee second quarter FY ’23 quarterly report to the 3 board? 4 MR. HICKS: All right. Hearing none, is there 5 a motion to approve the Electrology Practice Committee’s 6 Quarterly Report? Steinberg. 7 MR. HICKS: Ms. Steinberg. Lechliter? 8 MR. HICKS: Lechliter. All in favor? 9 ALL: Aye. 10 MR. HICKS: Opposed? 11 (No opposition) 12 MR. HICKS: Motion carries. Thank you, Monica. 13 MS. MENTZER: Yes. Thank you. 14 MR. HICKS: And we’ll go back up to A under 9, 15 that’s disciplining Lions (phonetic) program. Amber. 16 MS. BERNAL: Good morning. I’m Amber Havens 17 Bernal with the Discipline Program of the board’s 18 Enforcement Division. I have the last quarter of 2022 19 report for the Discipline Program and the Compliance 20 Program. During the last quarter, there were 22 cases 21 voted for charges and transferred to the Office of the</p> |

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1 Attorney General for handling. A total of nine summary
 2 suspension orders were issued. This includes orders
 3 continuing summary suspensions. Three cases were
 4 scheduled for case resolution conference. Two consent
 5 orders were executed. One voluntary surrender. Once
 6 case was voted to rescind and desist. Two default cases
 7 were sanctioned and the board held 11 hearings. That's
 8 both evidentiary and show cause. Now, compliance, there
 9 was one probation order initiated. No reprimands with
 10 conditions initiated. One case was scheduled to the
 11 program case manager. One probation order was
 12 terminated. One case was presented to the board for
 13 violation of probation and there are a total of 61 cases
 14 on probation with the board. Are there any questions?
 15 MR. HICKS: Any questions for Amber? Hearing
 16 none, is there a motion to approve the disciplinary
 17 findings? All in favor?
 18 ALL: Aye.
 19 MR. HICKS: Opposed?
 20 (No oppositions)
 21 MR. HICKS: Motion carries. Thank you, Amber.

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1 MS. BERNAL: Thank you.
 2 MR. HICKS: We'll go down to State Practice.
 3 Valencia?
 4 MS. JACKSON: Good morning, everyone. My name
 5 is Valencia Jackson. I'm the State Practice coordinator
 6 here at the board. Today's staff was October through
 7 December of 2022. A meeting scheduled, and held two per
 8 month for a total of six. Scheduled for committee
 9 meetings October 24, November 15, December 13 for a
 10 quarter total of 52. New agreements given October, 3,
 11 November, 3, December, zero, for a quarter total of six.
 12 Expelled, October, one, November, three, December, one,
 13 for a quarter total of five. Successfully discharged
 14 from the program October, one, November, zero, December,
 15 zero, for a quarter total of one. And active
 16 participants, October, 65, November, 65, and December, 64
 17 for a current total of 64 positions. Anyone have any
 18 questions?
 19 MR. HICKS: Anyone have any questions? And
 20 hearing none, is there a motion to accept the quarterly
 21 report for the State Practice Committee?

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1 MR. HICKS: Gibbons-Baker.
 2 MS. HAYWARD: Second.
 3 MR. HICKS: Hayward. All in favor?
 4 ALL: Aye.
 5 MR. HICKS: Opposed?
 6 (No oppositions)
 7 MR. HICKS: Motion carries. Thank you,
 8 Valencia. We'll go down to Investigation Status Reports.
 9 Chante (phonetic)?
 10 CHANTE: Good morning.
 11 So, for CID, complaints received for October,
 12 63, November, 75, and December, 69 for a quarter total of
 13 207. I just want to remind everyone for October,
 14 November, December we only have one triage meeting each
 15 month due to holidays. Complaints closed by take no
 16 action. October, 21, November, 44, December, 30, for a
 17 quarter total of 95. Complaints closed by charges.
 18 October, seven, November, four, December, two, for a
 19 quarter total of 13. Cold cases, complaints closed by
 20 state no action backlog review. October, 18, November,
 21 46, and December, zero, for a quarter total of 164.

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1 Complaints, cold case complaints closed administratively.
 2 October, eight, November, five, December, eight, for a
 3 quarter total of 21. Average number of days between
 4 receipt of complaint and report of investigation
 5 submission. October, 287, November, 79, December, 118
 6 for a quarter average of 161 days. Our total open
 7 complaints. Cold case, which is 2018 and further -- that
 8 -- between that time, 3,931. Our current case total is
 9 2,937. Any questions?
 10 MR. HICKS: Any questions?? Thank you, Chante.
 11 CHANTE: You're welcome.
 12 MR. HICKS: Oh, I'm sorry. Is there a motion
 13 to approve the quarterly report for the investigations?
 14 MR. HICKS: Steinberg.
 15 MS. LECHLITER: Second.
 16 MR. HICKS: Lechlitter. All in favor?
 17 ALL: Aye.
 18 MR. HICKS: Opposed?
 19 (No opposition)
 20 MR. HICKS: Motion carries. Thank you. All
 21 right. Moving down to Fiscal Management and Maxine.

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1 MS. TRANUM: Good morning, everyone. My name
 2 is Maxine Tranum (phonetic) and I'm the agency fiscal
 3 officer. Just wanted to prepare you a quick overview of
 4 the quarter two FY '23 budget and how we ended. Year to
 5 date quarter two adjustment net for FY '23 ending in a
 6 deficit. FY '23 quarter two gross net profit at the end
 7 of the quarter was in the black, however, as we deducted
 8 out our fees and as our expenses continue to grow, that
 9 left us with a deficit. Expenses continue to increase
 10 across the fiscal years. If you look from 2021 to 2023
 11 they increased as everything else continues to increase.
 12 The adjusted net for FY '23 quarter two compared to FY
 13 '22 quarter two showed a significant decline from
 14 \$383,390.00 to negative \$42,215.00. In summary, we have
 15 to find ways to generate revenue.

16 MR. HICKS: Maxine, you talk about deficit. In
 17 terms of dollars, what does that look like?

18 MS. TRANUM: Not good at all. As we progress
 19 through the rest of the FY '23 fiscal year, it's just
 20 going to get worse, because we have a lot of unallocated
 21 expenses for IT, there's always something coming up.

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1 When we did the upgrade on the boardroom, we really --
 2 That really wasn't budgeted as well. I mean, we're just
 3 -- It's, like, everything is just increasing in terms of
 4 expenses and we just have no revenue coming in other than
 5 what, you know, what we're allotted at the beginning of
 6 the FY year.

7 MR. HICKS: What I meant by that was, do you
 8 have a dollar amount that is -- overall that's a number.

9 MR. TRANUM: I don't. Other than when I do the
 10 quarterly and right now it's negative \$43,000.00. I
 11 mean, I could try and do an estimate of the complete year
 12 because basically how it works is that when we have
 13 unallocated expenses come in, I have to factor all that
 14 in in terms of hiring positions as well.

15 MR. HICKS: Is there a specific -- And I'm not
 16 sure how you do your budgeting, but is there a specific
 17 cost center or a specific line item that you're finding
 18 is the most significant deficit?

19 MS. TRANUM: Not necessarily. For the most
 20 part, most things are pretty much on target. IT is
 21 really going to just obliterate us because of the fact

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1 that, you know, with the network problem and we're going
 2 with the Dewey (phonetic). That's going to be a huge
 3 expense. Yeah, that's going to be a huge expense.

4 MR. HICKS: Thank you for that.

5 MS. TRANUM: Mm-hmm.

6 MR. HICKS: (Indiscernible) wanted you to
 7 address how we're dealing with the deficit in terms of
 8 (indiscernible) legislators.

9 MS. TRANUM: Yes.

10 MR. HICKS: Just so the people understand that
 11 we're just not listening. That there is the deficit and
 12 it is what it is but we're trying to take action over
 13 what we're doing in terms of (indiscernible) deficit that
 14 we already have..

15 MS. TRANUM: It basically, it boils down to we
 16 need to raise fees significantly. I heard about the
 17 really good program that the University of Maryland St.
 18 Joseph has with Baltimore County. That would be a great
 19 opportunity to market and if we could increase our fees.
 20 Because that's a lifechanging experience. And if more
 21 people knew about that, I'm sure that would garner some

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1 interest and if we could increase our fees that would
 2 probably be a game changer.

3 MR. HICKS: So --

4 UNIDENTIFIED SPEAKER: I agree with the fees.
 5 We have not raised our fees since 2008. The reason for
 6 that, a 2016 email went out from Governor Hogan's office
 7 stating that we were unable to raise our fees. Not just
 8 this quarter, but --

9 MS. TRANUM: Is there any particular reason?

10 UNIDENTIFIED SPEAKER: I'm sorry?

11 MS. TRANUM: Did he give any particular reason?

12 UNIDENTIFIED SPEAKER: I don't (indiscernible).

13 MS. TRANUM: I mean because everything keeps
 14 increasing. I don't understand how they feel like we
 15 shouldn't increase our fees if everything else is
 16 increasing.

17 MR. HICKS: I think it was kind of in line with
 18 his -- yeah. His position is that, you know, he wanted
 19 to kind of keep things under containment in terms of cost
 20 for the citizens in the State of Maryland.

21 UNIDENTIFIED SPEAKER: (Indiscernible) costs?

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1 MS. TRANUM: Nobody else seems to be taking
 2 that into consideration. I mean, well, everything is
 3 just so expensive now.
 4 UNIDENTIFIED SPEAKER: I take it into
 5 consideration because I have a son (indiscernible). For
 6 the whole time I've been here for five years, I've been
 7 asking for an increase.
 8 MS. TRANUM: It's desperately needed for our
 9 fees. It's desperately needed.
 10 UNIDENTIFIED SPEAKER: Correct. Because
 11 nothing -- I mean, with the renovation, our rent went up
 12 about \$10,000.00. Excuse me. That was before you came
 13 on board, Maxine. And then for the renovations, there
 14 were extra things added on and it also hit at the time of
 15 COVID. So, with COVID, all the prices went sky high.
 16 So, we can pay for something that probably wasn't as
 17 high, but we had to pay for the high. And then we were -
 18 - Also during COVID, we had to, of course, put it on the
 19 COVID item so the staff could (indiscernible) you know,
 20 (indiscernible) and all of those other things. So, that
 21 really took a big chunk, both those things took a big

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1 chunk on top of our rent in 2020 and 2021. The rent is
 2 still the same for right now. But other things happened.
 3 Like, when we had to send things out of hearing here into
 4 another agency, that cost (indiscernible). It cost a
 5 pretty significant amount of money.
 6 MS. TRANUM: No. That line item is done in
 7 terms of (indiscernible).
 8 UNIDENTIFIED SPEAKER: I understand.
 9 MS. TRANUM: Yeah.
 10 UNIDENTIFIED SPEAKER: I understand. Yes.
 11 MS. TRANUM: That line item is done.
 12 UNIDENTIFIED SPEAKER: But there's still
 13 things, you know, for us to proceed as a board there's
 14 still things we have to do fiscally.
 15 MS. TRANUM: Sure.
 16 UNIDENTIFIED SPEAKER: One of the areas that I
 17 am asking for is that currently, we cannot accept any
 18 funds from anyplace else. And that's a statute we're
 19 under. Statutory laws. So, I'm asking to open that up so
 20 that we can apply for emergency.
 21 MS. TRANUM: Very good.

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1 UNIDENTIFIED SPEAKER: In other items.
 2 MS. TRANUM: Very good.
 3 UNIDENTIFIED SPEAKER: I sat on one person's
 4 committee, the National Advisory Committee of the Nursing
 5 Education Practice. They have lots of ways that I would
 6 love for us to participate in. So, that's one avenue.
 7 MS. TRANUM: Would be very helpful.
 8 UNIDENTIFIED SPEAKER: Yeah. The basic one is
 9 increasing our fees. Do you know how many cost of living
 10 has happened since --
 11 MS. TRANUM: Exactly.
 12 UNIDENTIFIED SPEAKER: 2008?
 13 MS. TRANUM: Exactly.
 14 UNIDENTIFIED SPEAKER: We've all changed our
 15 cell phone probably about five times since 2008. So,
 16 potentially, today and tomorrow, Ms. Scott and I have a
 17 list of things tomorrow where we're going to the
 18 legislators. We go to the Finance Committee today. We
 19 go to the Health and Government Committee tomorrow to
 20 review with them the challenges that we have on both
 21 days. Now, I have not been quiet on the challenges.

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1 Every meeting we go to I'm sure I'm like a broken record
 2 by now. I speak about the board's plight. I've met with
 3 several legislators. In the interim last year and this
 4 year about our concerns and additionally, we need staff.
 5 If you look at the numbers that we have for cases.
 6 MS. TRANUM: Yeah.
 7 UNIDENTIFIED SPEAKER: It's not that we don't
 8 want to get them done.
 9 MS. TRANUM: Mm-hmm.
 10 UNIDENTIFIED SPEAKER: We definitely want to
 11 get them done but we can't afford investigators.
 12 MS. TRANUM: Yeah.
 13 UNIDENTIFIED SPEAKER: We have a lot of high
 14 priority cases right now. Seems to have slowed down
 15 during COVID and of course that was an interesting time.
 16 And now picking it back up. And that's putting a major
 17 strain. And I don't want to lose any (indiscernible) we
 18 have. They're doing a great job.
 19 MS. TRANUM: Mm-hmm.
 20 UNIDENTIFIED SPEAKER: But they're tapped out.
 21 The rest of the staff is tapped out because I'm given an

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1 overtime (indiscernible). Whatever I can do. They're
 2 coming in on Saturdays just to see what we can do to
 3 catch up. It's still not enough.
 4 All I can say is since 2010, 2013, there were
 5 two legislative reports. No action on those. All those
 6 were two legislators on (indiscernible). In 2021, we had
 7 another chairman's report. All three of them say the
 8 same thing. We recently had a DLS report saying that our
 9 two major areas are finance, IT, and the reports. Those
 10 are the three major areas.
 11 MS. TRANUM: Well, what is it that they're not
 12 understanding about the challenges that we have? I mean,
 13 we can't process more if we have no staff.
 14 UNIDENTIFIED SPEAKER: That -- See, I just love
 15 the enthusiasm.
 16 MS. TRANUM: I mean, yeah. I don't understand
 17 it.
 18 UNIDENTIFIED SPEAKER: -- answer all of these
 19 questions. But I can't get into the minds of others.
 20 All I can do is continue to do what I do. And that
 21 is to request help, okay. So, I don't have all the

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1 answers. That's why I'm going today and tomorrow to
 2 plead our case.
 3 MS. TRANUM: I hope you can make an impact. I
 4 do.
 5 UNIDENTIFIED SPEAKER: Yeah. I mean, it -- We
 6 could always write a letter to your legislators About
 7 the plight of the board. So, I mean, we're doing great
 8 work. We've made a lot of major changes here as a board
 9 for the good of our procedures and most importantly, for
 10 the good of the patients. You know, public safety.
 11 We'll increase that tremendously. But, it's still
 12 putting a hold on us right now because we don't have
 13 enough staff and money to do the things we want to do.
 14 Because we want to hire --
 15 MS. TRANUM: Yes.
 16 UNIDENTIFIED SPEAKER: We don't want to hire
 17 anyone. We want to hire individuals that come with
 18 skills to help us move this along, right? So --
 19 MS. TRANUM: And I do think for the manpower we
 20 do have that we're doing a great job. I mean, I know
 21 there are complaints. But I just think everybody works

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1 hard and I think everybody is doing the best that they
 2 can.
 3 UNIDENTIFIED SPEAKER: Yes. And, you know,
 4 like our phone system. You know, we just got a notice
 5 (that, you know, we only have six weeks to change our
 6 phones. Right now it's four weeks to change our phone
 7 system because we (indiscernible). So, and that's what
 8 we will do. Because we want to continue. So, we're
 9 working on that. So, working the best we can with what
 10 we --
 11 MS. TRANUM: Okay. Okay.
 12 MR. HICKS: So, two things. One, is there a
 13 motion to approve the fiscal management quarterly report?
 14 MS. HAYWARD: Hayward.
 15 MR. HICKS: Gibbons-Baker -- or, Hayward.
 16 All in favor?
 17 MR. HICKS: Opposed?
 18 (No opposition)
 19 MR. HICKS: Motion carries. Understanding
 20 where we are from a fiscal perspective and where Maxine
 21 in terms of raising rates as one avenue to help get us

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1 out of this deficit. I'm going to propose or ask the
 2 board if somebody would like to make a motion to develop
 3 a change in our fee structure that we could utilize to
 4 take to legislators or fiscal or the secretary or whoever
 5 will hear it with proposals of what those changes would
 6 look like for all of our licensees and certificate
 7 holders. So, understanding that it would just be simply
 8 a proposal that we could draw up and then obviously
 9 present to you all as a board before we present it to
 10 anyone else. You know, we'll see what happens to try to
 11 move forward.
 12 UNIDENTIFIED SPEAKER: Yeah, you can propose
 13 amendments to the regulations and the fees. And I -- You
 14 know, the worst that will happen is that the secretary
 15 and AELR will deny it. But, I mean, you have the
 16 authority to move forward with developing amendments to
 17 your regulations and submitting.
 18 UNIDENTIFIED SPEAKER: (Indiscernible). So,
 19 just asking for it.
 20 UNIDENTIFIED SPEAKER: Right.
 21 UNIDENTIFIED SPEAKER: Present something

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1 (indiscernible).

2 UNIDENTIFIED SPEAKER: Right.

3 MR. HICKS: Being almost a formal request.

4 So if someone wants to make the motion?

5 UNIDENTIFIED SPEAKER: I'll make the motion.

6 MR. HICKS: Alma.

7 UNIDENTIFIED SPEAKER: I'll second.

8 MR. HICKS: All in favor?

9 ALL: Aye.

10 MR. HICKS: Opposed?

11 (No opposition)

12 MR. HICKS: Motion carries. So, we'll work on

13 what that fee structure would look like and bring it back

14 to the board for review. All right. Thank you.

15 MS. TRANUM: Thank you.

16 MR. HICKS: Hang in there.

17 MS. TRANUM: Okay.

18 MR. HICKS: All right. We're going to move

19 down to Item 10. Heather, is Ms. McDonald or Ms. Paige

20 Barocca here? Or online?

21 MS. McDONALD: Yes, sir. This is Kaitlyn

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1 McDonald. I'm here. I am not sure Paige is, because I

2 can't see everybody's names.

3 MR. HICKS: Okay. I understand that you wanted

4 to address the board this morning?

5 MS. McDONALD: Sure. And let me introduce

6 myself again. My name is Kaitlyn McDonald. I'm grateful

7 to you and to the board for letting me address you today.

8 I represent two organizations that have an interest in

9 the function of like (indiscernible) direct-entry

10 midwives here in Maryland. One actually mentioned

11 earlier is the Association of Independent Midwives of

12 Maryland, which is the professional association for

13 Maryland's (indiscernible) institution midwives. Our

14 membership includes both Limes and Nurse-Midwives who

15 primarily provide services in a home birth or out of

16 institution setting.

17 MR. HICKS: Ms. McDonald?

18 MS. McDONALD: I also represent a patient to

19 (indiscernible) group for Maternal Health Services,

20 Maryland Families for Safe Birth. And this is going to

21 be kind of like our consumers for the home birth

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1 community.

2 MR. HICKS: Ms. McDonald?

3 MS. McDONALD: I'm sorry.

4 MR. HICKS: I'm sorry. Can you hold on one

5 second?

6 MS. McDONALD: Sure. No problem. There's

7 someone in the room, so we're just trying to understand.

8 MS. WILLIAMS: I'm Nikki Williams. I'm the

9 president of AIM that she mentioned, so.

10 UNIDENTIFIED SPEAKER: Okay.

11 MR. HICKS: I'm sorry.

12 MS. WILLIAMS: I will be addressing

13 (indiscernible).

14 MR. HICKS: Speak up a little bit louder.

15 MS. WILLIAMS: Nikki Williams, the president of

16 the Association of Independent Maryland Midwives.

17 MR. HICKS: All right. So, Ms. McDonald, just

18 so you know, Ms. Williams is in the room.

19 MS. McDONALD: Great. Thank you. Hi, Nikki.

20 So, and I'm happy because there's two issues we just

21 wanted to raise to the board's attention for your

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1 consideration and hopefully, you know, work on going

2 forward for some clarification on these two points.

3 (Indiscernible) and then since we do have Nikki and

4 Paige, some of our actual practicing LDMS, they would be

5 able to speak in a little bit more detail. But, so, the

6 first has to deal with our midwifery students, primarily

7 LDEM midwifery students and seeking some clarification

8 around the exemption in how the DEM Practice Act where a

9 student can, you know, has been exempted from needing a

10 license to practice midwifery when there in an approved

11 educational program and provided services under the

12 supervision of a licensed midwife. So, you know, a

13 couple things have happened since our initial licensure

14 legislation passed in 2015. A subsequent bill was passed

15 in 2018 that updated the different educational paths that

16 a CPM or an LDEM can take for licensure in Maryland to

17 include the Bridge Program through our certifying body,

18 NARM, the North American Midwifery Registry if I have

19 that right. So, here's our issue. For licensure

20 purposes, all our education programs, whether it be a

21 unique accredited school or either the Bridge Program

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1 through NARM, you know, all about the paths that we have
 2 had LDEMs successfully teach licensure in the state.
 3 Where we're seeing a little bit of a disconnect is when
 4 we have students working with our licensed midwives as
 5 part of their training. We've had some issues where
 6 they've been seen as practicing midwifery without a
 7 license. So, all we're really seeking is a clarification
 8 that all of those educational programs that are listed in
 9 the statute and all their components are viewed as valid
 10 educational programs for that exemption. You know, we
 11 did discuss this in the LDEM Advisory Committee as Monica
 12 mentioned at the November meeting. And we though, you
 13 know, one proposal that the board may want to consider to
 14 help clarify this is to update the underlying regulations
 15 to reflect the same language that's currently included in
 16 the statute. It was my understanding from the board that
 17 that's something that's been under consideration, it just
 18 hand, you know, gone through the, you know, the full
 19 regulatory processes in the Department of Health. AIMS,
 20 MSSB as interested parties are happy to work with the
 21 board to kind of develop that language or pull it from

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1 statute or whatever we can do to help whatever either the
 2 full board or community advisory sitting. So, that's the
 3 first issue. Just seeking clarification on that so our
 4 students know what they can and can't be doing when
 5 they're in an educational program in Maryland.
 6 And, you know, the second issue is somewhat related,
 7 but also has to do with, you know, members of our
 8 midwifery community who are not necessarily full midwives
 9 yet. And that has to deal with our birth assistants.
 10 So, again, going back to our original Practice Act passed
 11 in 2015, at the time, language was included that requires
 12 an LDM at that time of delivery to have a second
 13 individual there. So, you know, it just says a second
 14 individual who -- And the only requirement is that they
 15 are trained and able to perform a neonatal resuscitation.
 16 And it doesn't really, you know, have much detail beyond
 17 that. And it's my understanding this is pretty standard
 18 practice not only for our direct-entry midwives but for
 19 Nurse-Midwives as well. And all our midwives are
 20 practicing in the state. And, you know, there was some
 21 discussion at the time the bill was passed about whether

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1 we should require two midwives or we just have a midwife
 2 and an assistant. Ultimately, it was decided that just a
 3 second individual in that assistant role would be
 4 appropriate. But partially because we were concerned we
 5 wouldn't have sufficient direct-entry midwives that they
 6 would have two at every birth. So, you know, that's
 7 obviously something that our (indiscernible) is not
 8 exactly complying with since licensure began in 2015.
 9 What has happened is there's been some recent cases where
 10 the (indiscernible) practice or (indiscernible) or
 11 services those assistants can provide during delivery and
 12 birth have come into question. And, again, we're just
 13 coming to the board to kind of raise that as an issue for
 14 discussion and hopefully seek some clarification because
 15 what is happening is because the individuals who often
 16 have been assistants, if they are unclear on what they
 17 can and can't do at a delivery, one, they may not want to
 18 act as assistants, which makes it difficult for us to
 19 comply with the law since we have to have them present
 20 or, alternatively, they are acting as assistants but then
 21 they hesitate or be unclear about what they're allowed to

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1 do, you know, in a healthcare situation. And obviously,
 2 that can lead to some public health issues. So, again,
 3 whatever the board thinks is appropriate, whether we kind
 4 of discuss clarifications with the board or through the
 5 Advisory Committee, we did just want to flag these two
 6 issues because they are having an impact on how our
 7 midwives are practicing in Maryland and our ability to
 8 retain assistants and, you know, and our ability to
 9 practice. So, that's kind of a broad overview. Again, I
 10 know we have some of our LDM present here today who may
 11 be able to provide a little more detail as actual
 12 practitioners. So, I'm happy to answer any questions
 13 and, again, appreciate your time this morning.
 14 MS. WILLIAMS: That is an accurate overview of
 15 what's going on, those two separate issues, a discrepancy
 16 between what was revised in 2018 and what is actually,
 17 like, codified law. And then, of course, if you would
 18 like to add some clarifying language. It could be as
 19 simple as one sentence that clarifies what the second
 20 person that is required at a birth can do. And I don't
 21 know, especially following the whole fiscal discussion,

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1 if we want to go down the road of licensing birth
 2 assistants and all that goes with that or if we want to
 3 just add a sentence that will then guide midwives and
 4 regulators as to what a second person, second trained
 5 person at a birth, whether it's with a Certified Nurse-
 6 Midwife or a Certified Midwife or a Certified
 7 Professional Midwife or for an LDEM, what they are
 8 expected to do and cannot do.

9 MR. HICKS: Thank you. All right. So, thank
 10 you both for presenting this morning. We'll take that
 11 information that you provided into consideration and, you
 12 know, we'll work through the committee to make sure that
 13 they can look into your concerns. All right. Thank you.
 14 All right.

15 MS. McDONALD: Thank you.

16 MR. HICKS: I will -- All right. I will now
 17 open up the floor to anyone else that may want to address
 18 the board. All right. Hearing none, I'm going to -- In
 19 a moment, I'm going to ask if there is a motion to close
 20 the open session. But first, I'm going to walk us
 21 through the written statement that is required by the

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1 Open Meetings Act to ensure that all board members agree
 2 that (indiscernible). As documented in the written
 3 statement, the statutory authority to close this Open
 4 Session and meet in Closed Session is General Provision
 5 Article 3-305(b)13, which gives the Board the authority
 6 to close the Open Session, to comply with the specific
 7 constitutional statutory or judicial imposed requirement
 8 that prevents public disclosures about a particular
 9 matter or proceeding. The topic to be discussed during a
 10 closed session is applications for licensure and/or
 11 certification. The reason for discussing this topic in
 12 closed session is to discuss confidential matters that
 13 are prohibited from public disclosures by the Annotated
 14 Code of Maryland, Health Occupations Article Sections 8-
 15 303(f), Health Occupations Article 8-320(a), Health
 16 Occupations Article 1-401, and General Provisions Article
 17 4-333. In addition, the board may also perform quasi-
 18 judicial and administrative functions involving
 19 disciplinary matters during the closed session. Is there
 20 a motion to close this open session pursuant to the
 21 statutory authority and the reasons cited in the written

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1 statement, or any discussion thereof?
 2 MS. STENBERG: Steinberg.
 3 MR. HICKS: Steinberg.
 4 MS. HAYWARD: Second, Hayward.
 5 MR. HICKS: Hayward. All in favor?
 6 ALL: Aye.
 7 MR. HICKS: Opposed?
 8 (No oppositions)
 9 MR. HICKS: Motion carries. Thank you,
 10 everyone. Have a great day. Board members, we will be
 11 convened at 10:30.
 12 (Whereupon, at 10:30 a.m. the open session was
 13 adjourned.)
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CERTIFICATE OF NOTARY

I, SABRINA BOYD, a Notary Public of the State of
 Maryland, do hereby certify that the proceedings were
 recorded via audio by me and that this transcript is a
 true record of the proceedings. I am not responsible for
 inaudible portions of the proceedings.

I further certify I am not of counsel to any of
 the parties, nor an employee of counsel, nor related to
 any of the parties, nor in any way interested in the
 outcome of this action as witness my hand and notarial
 seal this 25th day of January, 2023.

 Sabrina Boyd, Notary Public
 in and for the State of Maryland

My commission expires: July 21, 2024

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Script for Closing Open Session

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 General Provisions § 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 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 STATE BOARD OF NURSING

Presiding Officer's Written Statement for Closing a Meeting
under the Open Meetings Act (Md. Code Ann., Gen. Prov. § 3-305)

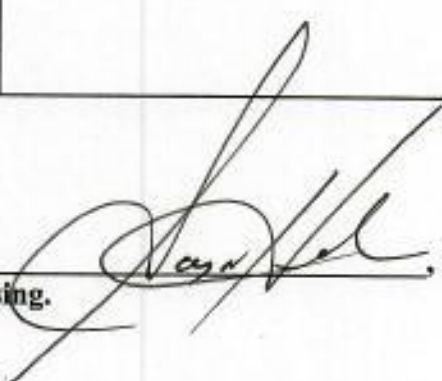
1. **Recorded vote to close the meeting:** Date: 1/25/23 Time: 10:12 am
Location: **Maryland Board of Nursing, 4140 Patterson Avenue, Baltimore, MD**
Motion to close meeting made by: Steinberg Seconded by Hayward
Members in favor: Cassidy, Lechliter, Gibbons-Baker, Turner, Hayward, Hicks, Steinberg, J. Hill,
Opposed: None Abstaining: None
Absent: Vickers Lyons, Westerfield, R. Hill, Oweumore.
2. **Statutory authority to close session.** This meeting will be closed under Md. Code Ann., Gen. Prov. § 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."

Date: 1/25/23

3. For each provision checked above, disclosure of the topic to be discussed and the Maryland State 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) | Applications for licensure and/or certification | To discuss confidential matters prohibited from public disclosure by Md. Code Ann., Health Occ. sections 8-303(f), 8-320(a), 1-401 <i>et seq.</i> and General Provisions section 4-333. |
| § 3-305(b) () | | |
| § 3-305(b) () | | |

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