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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, October 25, 2023, at 4140 Patterson Avenue, Baltimore, Maryland 21215, commencing at 9:10 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

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1 APPEARANCES:

2 MICHAEL CONTI, Assistant Attorney General

3 KATHERINE CUMMINGS, Assistant Attorney General

4 Office of the Attorney General

5 State of Maryland

6 Department of Health & Mental Hygiene

7 300 West Preston Street

8 Baltimore, Maryland 21201

9 410-767-3201

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1 ALSO PRESENT:

2 RHONDA SCOTT, Executive Director

3 SCHENEQUA BROWN, Executive Assistant

4 MICHELLE POWELL, Paralegal

5 SHEILA GREEN, Education Consultant

6 MONICA MENTZER, Practice, Manager

7 CAROLYN BAILEY, Director of Licensure

8 BRIAN STALLSMITH, IT Staff Member

9 VALENCIA JACKSON, Safe Practice

10 MORINAT KUKOYI-SAMYAOLU, Director of Operations

11 SARA TONGUE, Investigations

12 MITZI FISHMAN, Director of Legal Affairs

13 JENNAY GHORRWAL, Health Policy Analyst

14 ROSALYN JOHNSON, Investigations

15 DELLA SANDERS, Backgrounds

16 DEB BOYD, Investigations

17 DARIAN BEAN, Investigations

18 JOSHUA GREGG, Licensure, Manager

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1 BOARD MEMBER APPEARANCES:

2 GARY HICKS, RN Member, Board President

3 ANN TURNER, RN Member, Board Secretary

4 CHRISTINE LECHLITER, RN Member

5 AUDREY CASSIDY, Consumer Member

6 EMALIE GIBBONS-BAKER, APRN Member

7 M. DAWNE HAYWARD, RN Member

8 HEATHER WESTERFIELD, RN Member

9 SUSAN LYONS, APRN Member

10 ROBIN HILL, RN Member

11 SUSAN STEINBERG, Consumer Member

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1 AUDIENCE MEMBERS:

2 TIJUANA GRIFFIN, Washington Adventist University

3 HANNAH HUGHES, Stevenson University

4 NANCY NORMAN-MARZELLA, Cecil College (via telephone)

5 ROXANN RASH, Cecil College (via telephone)

6 HEATHER GABLE, McDaniel College (via telephone)

7 CATHY NEGLY, DaVita Clinical Services (via telephone)

8 GERMAINE BROUSSARD, Healthstream (via telephone)

9 EVAN MCEWING, Healthstream (via telephone)

10 CHERYL, Healthstream (via telephone)

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C O N T E N T S

SECTION	DESCRIPTION	PAGE
No. 1.....	Call to Order/Roll Call/Updates.	7
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No. 3.....	Discussion of Items Removed From the Consent Agenda.	N/A
No. 4.....	Education.	N/A
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MS. STEINBERG: Susan Steinberg, consumer member.

MS. LECHLITER: Christine Lechlitter, nurse administrator member.

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

MS. LYONS: Susan Lyons, RN member, advanced practice nursing.

MR. HICKS: We will start with Ms. Scott with any updates from the Board.

MS. SCOTT: Sure. Good morning, everyone. First update, the stakeholders workgroup for the Pathway To One Designation for Certification or the requirements for CNA, the meeting that was scheduled to take place tomorrow has been postponed just to permit Board staff to work on action items based on the feedback on the items that we received during the first two sessions with the stakeholders. As we work on the next steps, we plan to present to the stakeholders for their feedback at our next meeting what we've discovered. We will send out an update regarding our efforts to the workgroup by the end

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P R O C E E D I N G S

MR. HICKS: Good morning, everyone. We will go ahead and get started. If we could have a motion to go into Open Session.

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

MR. HICKS: Dr. Robin Hill.

MS. TURNER: Second. Turner.

MR. HICKS: Turner. All in favor?

ALL: Aye.

MR. HICKS: Opposed?

(No oppositions)

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

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

MS. CASSIDY: Good morning. Audrey Cassidy, consumer member.

MS. HAYWARD: Dawne Hayward, RN member.

MS. TURNER: Ann Turner, RN member.

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

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of this week.

For the substantial equivalency stakeholders' workgroup, during the August Board meeting we announced that we were convening a workgroup to reevaluate statutory and regulatory provisions concerning substantial equivalency and just to clarify minimum education requirements for licensure. Invitations went out to stakeholders, and the first meeting is scheduled for tomorrow afternoon. This is just in response to the many inquiries that we're getting from constituents and employers and things like that. We want to convene this workgroup just to review any provisions that may need to be made.

For the Board appointment process, so the Governor's Appointment Office and the Office of the Secretary are in the process of reviewing applications for Board appointments. So, anyone whose interested in serving on the Board, we are urging you to apply now. In accordance with Health Occupations Article Section 8-202(b), Annotated Code of Maryland: Applicants can meet the statutory requirement for nominations in one of

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1 two ways; the nominating organization can provide the
 2 Governor’s Appointment Office with nominees or the
 3 individuals who apply through the Appointment’s Office
 4 application portal and were not nominated by their
 5 professional association, may gather twenty-five
 6 signatures, and submit their petition to the Board.
 7 I am going to make the petition available on
 8 our website under the link so they can see. So, you can
 9 go there and download the petition if you need the
 10 template.
 11 And then last, in accordance with House Bill
 12 454, which was passed by the Maryland General Assembly
 13 during the 2023 Legislative Session, license and
 14 certification applicants who do not have either a tax ID
 15 number or a social security number can apply by filing a
 16 paper application with the Board by mail or in person and
 17 submit the application along with a signed affidavit
 18 attesting that they do not possess either a social
 19 security number or an ITIN. The applications, affidavit,
 20 and instructions will be updated on the Board’s website
 21 no later than week’s end. So, by Friday we will have

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1 everything updated. Initially, when we roll it out we
 2 announce that those who just have an ITIN and not a
 3 social can log on to the online portal and submit their
 4 application online just putting in the ITIN where the
 5 social is required. So for those who possess neither,
 6 this will be your option and your way to apply.
 7 That’s all I have.
 8 MR. HICKS: Any questions for Ms. Scott?
 9 (No questions posed)
 10 MR. HICKS: Thank you. If I can get a motion
 11 to approve the Consent Agenda.
 12 MS. LECHLITER: So moved. Lechliter.
 13 MR. HICKS: Lechliter.
 14 MS. GIBBONS-BAKER: Gibbons-Baker.
 15 MR. HICKS: I have Gibbons-Baker. All in
 16 favor?
 17 ALL: Aye.
 18 MR. HICKS: Opposed?
 19 (No oppositions)
 20 MR. HICKS: Motion carries. We will go down to
 21 Education. Dr. Green, are you online?

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1 MS. GREEN: Good morning. I’m here.
 2 MR. HICKS: Oh, sorry. I didn’t see you.
 3 That’s unusual.
 4 MS. GREEN: I didn’t mean to surprise you, Mr.
 5 Hicks. I decided I would come pay a visit to the Board.
 6 MR. HICKS: That’s nice. It’s good to see you.
 7 MS. GREEN: It’s good to see all of you. Let’s
 8 begin with Item Number 1 from Education. This is 4A, and
 9 this is our report for the Fiscal Year 2023 NCLEX
 10 performance for both the registered nurses and practical
 11 nursing graduates, their first-time candidacy performance
 12 report, and it’s noted in the background. You have the
 13 actual reports in front of you for each of the items for
 14 the RN and the practical nursing.
 15 Our findings from the Education Department that
 16 the following nursing education programs did not meet the
 17 Maryland required first-time passing rate on the NCLEX-RN
 18 examination for Fiscal Year 2023, and then include;
 19 Baltimore City Community College, they were below the
 20 passing rate; Coppin State University; Morgan State
 21 University; Stevenson University; and Washington

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1 Adventist. Those are our RN programs.
 2 In addition, in Item Number 2 under Findings,
 3 it was determined that the Baltimore City Community
 4 College was not successful with its passing rate for the
 5 Maryland required standard for this fiscal year for their
 6 practical nursing program.
 7 I am going to continue with the second page of
 8 this report. Subsequent to the recommendations reviewed
 9 and approved by the Practice and Education Committee on
 10 October 13, 2023, the following recommendation are
 11 submitted to the Board for final determination on today,
 12 October 25, 2023. First, to approve the Fiscal Year 2023
 13 NCLEX registered nurse and PN reports with the one
 14 amendment that was identified during the Practice and
 15 Education Committee related to Baltimore City Community
 16 College NCLEX reports. There was a correction that was
 17 necessary for the RN performance. It was a first-time
 18 below passing rate. And for the PN, the practical
 19 nursing program, it was the second time below passing
 20 rate.
 21 The second item that we are requesting a

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1 recommendation is to send written notifications of
 2 warning or conditional approval to the respective nursing
 3 education programs that did not meet the Maryland Board
 4 of Nursing pass rate requirements in accordance with
 5 COMAR 10.27.03.16(d)1, 2, 3 to be completed through the
 6 assistance with the Board’s Executive Director’s Office.
 7 The third request is to determine dates for the
 8 Board to establish ad hoc committee meetings with Coppin
 9 State University and Morgan State University, again,
 10 through the assistance of the Board Executive Director’s
 11 Office.
 12 And the last item that we request is to
 13 acknowledge that the Board’s professional staff will
 14 complete the following site visits. The first is to
 15 Baltimore City Community College. That will be a
 16 full-cycle visit in collaboration with ACEN, and that
 17 will occur -- the dates now are March 19th through the
 18 21st -- we just received that information -- in 2024.
 19 Coppin State University, the Board will follow up with
 20 the, but we will be completing a focus site visit in
 21 follow-up to their action plan progression in May of

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1 2024. Morgan State University will also be a Board focus
 2 site visit scheduled for April, 2024, is what we’re
 3 planning. Stevenson University will have a focus site
 4 visit one day on November the 6th of 2023. We are
 5 finalizing that with the program at this time. And then,
 6 Washington Adventist University was scheduled for a focus
 7 site visit that was completed October the 16th and 17th
 8 of 2023. The staff report will be pending for January,
 9 2024 regarding the actual Washington Adventist Program
 10 for two reasons; one, is to allow the education staff to
 11 receive all of the annual reports from all of our reports
 12 in the State of Maryland, which are due December 31st of
 13 this year; and the second would be to see their NCLEX
 14 performance for the second quarter of the current fiscal
 15 year for Washington Adventist. Washington Adventist, as
 16 of the first quarter of this current ’24 fiscal year, is
 17 at 80 percent, and we want to look at the trends that may
 18 be occurring with that program, specifically.
 19 The other part of what you have is noted on
 20 Page 3 are the actual programs, the designated warning
 21 that will be accomplished be it first warning or

Page 16

1 conditional approvals, and the respective COMAR
 2 requirements for the respective programs.
 3 The final attachment, of course, are the total
 4 Board findings for our first time NCLEX performance for
 5 registered nurse and PNs for the July 1, 2022 to June 30,
 6 2023 performance.
 7 If there are any questions I will be willing to
 8 answer those for the Board at this time. Thank you.
 9 MR. HICKS: Are there any questions for Dr.
 10 Green?
 11 (No questions posed)
 12 MR. HICKS: All right. So, the first is the
 13 approval for the FY23 NCLEX-RN and NCLEX-PN first-time
 14 candidate performance report.
 15 Is there a motion to approve that report?
 16 MS. ROBIN HILL: So moved. Dr. Robin Hill.
 17 MR. HICKS: Dr. Robin Hill.
 18 MS. TURNER: Second. Turner.
 19 MR. HICKS: Turner. All in favor?
 20 ALL: Aye.
 21 MR. HICKS: Opposed?

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1 (No oppositions)
 2 MR. HICKS: Motion carries. The next is to
 3 approve for the Board to send the letters to the
 4 appropriate schools in reference to their NCLEX pass
 5 rates.
 6 Is there a motion to approve?
 7 MS. LECHLITER: So moved. Lechlitter.
 8 MR. HICKS: Lechlitter.
 9 MS. GIBBONS-BAKER: Gibbons-Baker. Second.
 10 MR. HICKS: Gibbons-Baker. All in favor?
 11 ALL: Aye.
 12 MR. HICKS: Opposed?
 13 (No oppositions)
 14 MR. HICKS: Motion carries. The third is to
 15 approve the site visits that Dr. Green outlined.
 16 Is there a motion to approve?
 17 MS. CASSIDY: Cassidy.
 18 MR. HICKS: Cassidy.
 19 MS. TURNER: Turner.
 20 MR. HICKS: Turner. All in favor?
 21 ALL: Aye.

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1 MR. HICKS: Opposed?

2 (No oppositions)

3 MR. HICKS: Motion carries. Did I get

4 everything, Dr. Green?

5 MS. GREEN: Yes, you did. Is there anything

6 else that the Board would like to know about this

7 particular report?

8 (No questions posed)

9 MR. HICKS: Thank you.

10 MS. GREEN: Thank you. Our next item is 3B.

11 This is our first time providing a report of the instate

12 prelicensure nursing education programs' annual reports.

13 If you recall, the annual reports are always a year

14 behind because the one that will be do for Fiscal Year

15 2023 will be submitted to us in the Education Department

16 in the end of December of this year. So, this is the

17 report for Fiscal Year 2021-2022. The background is

18 pursuant to COMAR 10.27.03.16: Annual Review. This

19 report is the acknowledgment of the receipt of the annual

20 reports for that fiscal year for instate prelicensure

21 nursing education programs. A compliance audit was

Page 19

1 completed for each program's report. The results are

2 discussed below.

3 The findings, first of all, the following

4 prelicensure nursing education programs did not meet the

5 Maryland required passing rate, they are; Coppin State

6 University, the BSN program; Stevenson University, BSN

7 program; Morgan State University, BSN program; and

8 Washington Adventist University, BSN program. The

9 information is provided in terms of their passing scores

10 in that time period.

11 Item Number 2, all programs did not include a

12 summary statement of practices followed in safeguarding

13 the health and wellbeing of students as required in COMAR

14 10.27.03.16(a) and 5.

15 The third item finding, all programs did not

16 provide an audited fiscal report covering the previous

17 two years, including a statement of income and

18 expenditures as required per COMAR 10.27.03.16(a) and 6.

19 And this is also required for The United States

20 Department of Education. Number 4, all programs did not

21 consistently document the current licensure status of

Page 20

1 their faculty as required per COMAT 10.27.03.16(c)7. And

2 what that means is, all the reports did not necessarily

3 have that all faculty met licensure requirements for the

4 State of Maryland. That is something that we are seeking

5 clarity on. We have met with the deans and directors and

6 talked with them about the preliminary findings of the

7 annual report, and requested to them to include the items

8 that had not had clarity in terms of the licensure

9 requirements. And also, the need to have our audited

10 fiscal statement reports from them so that they will

11 include those with the report that is about to be

12 submitted at the end of December of 2023.

13 The plan of correction on Page 2 is to notify

14 in writing the three nursing education programs, which

15 the Board has now approved, regarding the NCLEX pass

16 rates for Fiscal Year 2023. We are noting that, again,

17 we completed the site visit with Washington Adventist

18 University on October 16th and 17th, which was very

19 successful. The second was the education and examination

20 director will meet with the deans and directors, which

21 has already occurred, for nursing education prelicensure

Page 21

1 programs to provide verbal notice of the findings of the

2 Fiscal Year 2021-2022 annual reports. And third, was to

3 notify in writing the deans and directors of the results

4 of the compliance audit, discuss areas of omission,

5 future expectations, and provide COMAR requirements for

6 guidance in completing future reports. This guidance is

7 to be used for the completion of annual reports for

8 Fiscal Year 2022-2023 due to the Board no later than

9 December 31, 2023 at the close of business.

10 The recommendation from Practice and Education

11 Committee that we've forwarded already to you are noted

12 here as well to accept the annual reports for the time

13 period of Fiscal 2021-2022. We are advancing that now to

14 the Board for its final consideration, and that the Board

15 would also, in addition to PEC, accept the plan of

16 correction for the concerns identified as a result of the

17 audit, and the report was moved forward as of this date.

18 The final pages show you the license practical

19 nursing education programs, the associate degree nursing

20 programs, and the baccalaureate programs, BSN completion

21 programs, and our master's entry programs that are

Page 22

1 approved in the State of Maryland and what the compliance
 2 concerns were.
 3 And we're requesting that you would approve
 4 this first-time report of annual reports, and this will
 5 become a standard part of the annual requirements from
 6 the Education Department. Thank you.
 7 I will entertain any questions you may have.
 8 MR. HICKS: Any questions for Dr. Green?
 9 (No questions posed)
 10 MR. HICKS: All right. So, the first is, is
 11 there a motion to accept the '21-'22 annual report from
 12 all instate prelicensure nursing education programs?
 13 MS. STEINBERG: So moved. Steinberg.
 14 MS. GIBBONS-BAKER: Second.
 15 MR. HICKS: Steinberg, Gibbons-Baker. All in
 16 favor?
 17 ALL: Aye.
 18 MR. HICKS: Opposed?
 19 (No oppositions)
 20 MR. HICKS: Motion carries. The next is, is
 21 there a motion to approve the audit results of the annual

Page 23

1 report?
 2 MS. LECHLITER: So moved. Lechlitter.
 3 MS. HAYWARD: So moved.
 4 MR. HICKS: Lechlitter and Hayward. All in
 5 favor?
 6 ALL: Aye.
 7 MR. HICKS: Opposed?
 8 (No oppositions)
 9 MR. HICKS: Motion carries. The third is for a
 10 motion to accept the correction report of all the
 11 documents that are missing from the previous report and
 12 have those schools submit that information in their next
 13 report.
 14 MS. GIBBONS-BAKER: So moved.
 15 MR. HICKS: Gibbons-Baker.
 16 MS. STEINBERG: Second.
 17 MR. HICKS: Steinberg. All in favor?
 18 ALL: Aye.
 19 MR. HICKS: Opposed?
 20 (No oppositions)
 21 MR. HICKS: Motion carries.

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1 MS. GREEN: Thank you very much.
 2 MR. HICKS: Thank you, Dr. Green.
 3 MS. GREEN: Our next report is 4C. This is for
 4 Cecil College Nursing Education Program. Mrs. Bonnie
 5 Oettinger and I completed a site visit on September the
 6 12th through the 14th. This was a
 7 full-cycle visit that we completed.
 8 Dr. Nancy Norman-Marzella, are you on the line?
 9 MS. NORMAN-MARZELLA: We're here.
 10 MS. GREEN: We can hear you. Who's with you
 11 today?
 12 MS. NORMAN-MARZELLA: I'm sorry?
 13 MS. GREEN: Is there anyone else from Cecil
 14 College that we should acknowledge this morning?
 15 MS. NORMAN-MARZELLA: Yes, we have Dr. Roxann
 16 Rash, our assistant director of nursing.
 17 MS. GREEN: Excellent. Good morning.
 18 MS. RASH: Good morning.
 19 MS. GREEN: We're here today to provide the
 20 information from our site visit. The background, again,
 21 Dr. Green and Mrs. Oettinger conducted an in-person site

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1 visit to assess the program's continued adherence to
 2 state regulatory requirements for the prelicensure
 3 associate degree program and licensed practical nursing
 4 education programs offered at Cecil College in accordance
 5 with COMAR 10.27.03.02 through .16: Nursing Education
 6 Programs Through Prelicensure.
 7 This was a scheduled visit and follow-up to the
 8 virtual site visit completed in October 29th and 30th in
 9 2020. That was a virtual visit. This visit was in
 10 collaboration with representatives from the Accreditation
 11 Commission in Education for Nursing, also known as ACEN.
 12 Our findings were that the program at Cecil
 13 College met the nursing education program requirements.
 14 Our recommendations to the Practice and Education
 15 Committee were approved on October 13, 2023.
 16 The recommendation to the Board today are to
 17 approve the site visit report for Cecil College, and
 18 continued program approval in accordance with ACEN
 19 accreditation recommendations to be determined in Fall of
 20 2023 in accordance with COMAR 10.27.03.15(a): Program
 21 Evaluation. The report is attached for the Board's

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1 consideration. They met all requirements and standards
 2 for COMAR 10.27.03.
 3 I will entertain any questions you may have.
 4 MR. HICKS: Are there any questions for Dr.
 5 Green?
 6 (No questions posed)
 7 MR. HICKS: All right, hearing none. Is there
 8 a motion to approve the site visit report for Cecil
 9 College?
 10 MS. GIBBONS-BAKER: So moved.
 11 MR. HICKS: Gibbons-Baker.
 12 MS. STEINBERG: Second.
 13 MR. HICKS: Steinberg. All in favor?
 14 ALL: Aye.
 15 MR. HICKS: Opposed?
 16 (No oppositions)
 17 MR. HICKS: Motion carries. The second motion
 18 is to continue program approval in accordance with ACEN's
 19 accreditation recommendation in accordance with COMAR
 20 10.27.03.15.A?
 21 MS. STEINBERG: So moved. Steinberg.

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1 MR. HICKS: Steinberg.
 2 MS. HAYWARD: Second. Hayward.
 3 MR. HICKS: Hayward. All in favor?
 4 ALL: Aye.
 5 MR. HICKS: Opposed?
 6 (No oppositions)
 7 MR. HICKS: Motion carries. Thank you so very
 8 much. Thank you, Dr. Norman-Marzella and Dr. Rash.
 9 We're glad that you're online this morning.
 10 MS. NORMAN-MARZELLA: Thank you.
 11 MS. GREEN: Take care now.
 12 MS. RASH: Thank you, Dr. Green.
 13 MS. GREEN: The next report is 4D, and this is
 14 recognition of Dr. Hannah Hughes, who is the new dean and
 15 chief nurse administrator for Sandra R. Berman School of
 16 Nursing and Health Professions at Stevenson University.
 17 First of all, Dr. Hannah Hughes, are you
 18 present by online?
 19 MS. HUGHES: I am here.
 20 MS. GREEN: Oh, you are here with us today.
 21 What a pleasure. Welcome. We're glad to have you.

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1 Dr. Hughes, completed an associate and bachelor
 2 in science nursing degrees from Norfolk State University
 3 in Norfolk, Virginia; her master of science in nursing
 4 education and doctorate of education, higher education
 5 and adult learning with specialty areas, from Walden
 6 University in Minneapolis, Minnesota; and her doctor of
 7 philosophy in chronic illness and healthcare systems from
 8 Duke University in Durham, North Carolina. Dr. Hughes is
 9 a nurse executive advanced board-certified NEA-BC, and a
 10 certified nurse educator. She has eighteen years of
 11 nursing experience, inclusive of; nursing practice,
 12 nursing education, nursing administration, hospital
 13 administration, and healthcare system-wide administration
 14 and operations. She has a current multistate compact
 15 license in the State of Virginia and is academically and
 16 experientially qualified to serve as the nursing program
 17 administrator for Sandra R. Berman School of Nursing and
 18 Health Professions at Stevenson University.
 19 The recommendation from the Practice and
 20 Education Committee was approved on October 13, 2023.
 21 Our recommendation to the Board is to approve Dr. Hannah

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1 Hughes as nursing program administrator in accordance
 2 with COMAR 10.27.03.07, identified for nursing program
 3 administrators.
 4 If you have any questions, we would love to
 5 entertain those.
 6 MR. HICKS: Any questions for Dr. Green or Dr.
 7 Hughes?
 8 (No questions posed)
 9 MR. HICK: All right, hearing none. Is there a
 10 motion to approve Dr. Hannah Hughes as the nursing
 11 program administrator in accordance with COMAR
 12 10.27.03.07 as indicated under the Nurse Program
 13 Administrator?
 14 MS. HAYWARD. So moved.
 15 MS. ROBIN HILL: So moved. Dr. Robin Hill.
 16 MR. HICKS: Hayward, Dr. Robin Hill. All in
 17 favor?
 18 ALL: Aye.
 19 MR. HICKS: Opposed?
 20 (No oppositions)
 21 MR. HICKS: Motion carries. Congratulations,

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1 Dr. Hughes.

2 MS. HUGHES: Thank you.

3 MS. GREEN: Welcome. We're glad to have you.

4 We have lots of thoughts for you. We've got to get her

5 involved with a lot of things. But anyway, welcome, we

6 know you have to get your feet wet first.

7 Item 4E. Dr. Heather Gable, are you on the

8 line?

9 (No response)

10 MS. GREEN: Star-6 to unmute. Please, be

11 there. I spoke to her a few minutes ago. Let's proceed.

12 I know she's there. I just hope she can hear us.

13 Dr. Heather Gable is also seeking approval as

14 nursing program director and nursing program

15 administrator for McDaniel College. On January 8, 2023,

16 Dr. Heather Gable was appointed as nursing program

17 director for McDaniel College. They are starting a

18 brand-new baccalaureate program, and the need of her

19 services are tremendous in terms of their start-up.

20 Our findings were that Dr. Gable completed an

21 associate of science in nursing at Allegany College of

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1 Maryland; her bachelor of science in nursing and master

2 of science in nursing and a doctorate of nursing practice

3 at the University of Maryland School of Nursing in

4 Baltimore, Maryland. Dr. Gable is a nurse executive,

5 advanced Board-certified, and certified nurse educator.

6 She has twenty-five years of nursing experience,

7 inclusive of; nursing practice, nursing education,

8 nursing administration, hospital administration,

9 long-term care administration. She has a current

10 multistate compact license for the State of Virginia, and

11 is academically and experientially qualified to serve as

12 the nursing program administrator for McDaniel College.

13 The recommendation to the Practice and

14 Education Committee was approved on October 13, 2023.

15 Our recommendation today to the Board is to approve Dr.

16 Heather Gable as nursing program administrator in

17 accordance with COMAR 10.27.03.07: Nursing Program

18 Administrator.

19 Her credentials and her cover letter from

20 McDaniel are enclosed with the packet that you have, and

21 I will entertain any questions you might have.

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1 MR. HICKS: Thank you, Dr. Green. Any

2 questions for Dr. Green?

3 (No questions posed)

4 MR. HICKS: All right, hearing none. Is there

5 a motion to approve Dr. Heather Gable as the nurse

6 program administrator for McDaniel College in accordance

7 with COMAR 10.27.03.07: Nurse Program Administrator?

8 MS. HAYWARD: So moved.

9 MS. GIBBONS-BAKER: Second.

10 MR. HICKS: Hayward, Gibbons-Baker. All in

11 favor?

12 ALL: Aye.

13 MR. HICKS: Opposed?

14 (No oppositions)

15 MR. HICKS: Motion carries.

16 MS. GREEN: Let me just share with you that Dr.

17 Gable was instrumental in establishing the RN-to-BSN

18 Program at Frostburg State University, and has a very

19 interesting and also extensive background in developing

20 new programs. We had the pleasure of also working with

21 Dr. Linda Caputi, who is internationally and nationally

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1 known for her work in terms of actually establishing the

2 program that we're going to talk about now in writing the

3 background necessary for the program. So, we're glad to

4 have Dr. Gable onboard. Thank you so much for your

5 consideration.

6 The next is 4F. This is for McDaniel College.

7 This is a new bachelor of science nursing education

8 program proposal to start Fall of 2024. The program

9 launched with enrollment of direct-entry nursing

10 students. This means that when they open the program

11 next fall, the students that will be admitted will be

12 enrolled in nursing from the freshman year. So, they are

13 having a direct-entry for that program. They may opt to

14 change that a little later, but right now that is the way

15 they are moving forward.

16 With the background with McDaniel College,

17 submitted letters of intent to the Maryland Higher

18 Education Commission in January of 2023 to initiate anew

19 bachelor of science nursing education program in Carroll

20 County to support the growing baccalaureate nursing

21 education needs in this region. There are no

<p style="text-align: right;">Page 34</p> <p>1 precicensure BSN programs offered in this region of 2 Maryland. 3 Carroll Community College is located 4 approximately four miles from McDaniel College, and 5 offers a practical nursing program and an associate 6 degree in nursing program by way of example. These 7 educational institutions work collaboratively in 8 providing the higher education needs of the county and 9 the surrounding jurisdictions. The Carroll County 10 Community College administration supports this new 11 initiative. 12 The Maryland Higher Education Commission 13 granted approval on August 23, 2023 to McDaniel College 14 to initiate the BSN program in Fall of 2024. Dr. Heather 15 Gable, which we're already introduced, and the Board has 16 graciously approved her credentials for oversight as 17 nursing program director at McDaniel College. The 18 information has been submitted and you have that 19 information in 4F.1 and 4 F.2, the entire packet that was 20 submitted from the Maryland Higher Education Commission, 21 and it also includes the curriculum and all the essential</p>	<p style="text-align: right;">Page 36</p> <p>1 evaluations that have gone forward in the time period. 2 So, those are standard procedures for us here at the 3 Board. 4 Our recommendations to the Practice and 5 Education Committee for both of these COMAR Requirements 6 were approved October 13, 2023. Our recommendation to 7 the Board is to grant initial approval for the program in 8 accordance with COMAR 10.27.01.18 for new programs, and 9 continuing approval, and COMAR 10.27.03.02.15: Nursing 10 Education Programs. 11 You have the criteria for both the .18 criteria 12 showing you what has been met so far in the requirements 13 for the program, and we are really needing to have them 14 be granted initial approval so that they can then begin 15 hiring faculty, moving forward with the development with 16 the program. That is on Page 2, under C, initial 17 approval, pending the Board's decision on today, 18 10/25/2023. 19 You also have in Part 2 the review of where 20 they are with our nursing education program requirements 21 in 10.27.03. Again, many areas have been met. Others</p>
<p style="text-align: right;">Page 35</p> <p>1 components of the nursing education program that they are 2 about to launch. 3 The findings are that we felt that we had to 4 look at two different areas in COMAR in order to address 5 the efficacy of this program. Number 1 was COMAR 6 10.27.03.18: New Programs and Continuing Approval 7 Requirements; and 2, the COMAR 10.27.03.02 through .15: 8 Nursing Education Programs. The program proposal met the 9 MBON regulatory standards to-date. And we do say "to- 10 date" because there's some outstanding issues that will 11 have to be addressed with the brand-new program that we 12 will conduct as the time moves forward. They will be 13 pursuing CCNE accreditation once the initial program is 14 completed and the first cohort graduates. That's usually 15 a requirement for CCNE, is that they have an application 16 that they will submit, but they have to have the first 17 cohort to graduate. That also coincides with the Board's 18 need to have a site visit. We will do one before they 19 admit the first class in 2024, but also one at the time 20 just before graduation because we need to make sure that 21 there is compliance with curriculum and program</p>	<p style="text-align: right;">Page 37</p> <p>1 are pending because of the need to continue development 2 in this time period. They will be adding construction of 3 a new clinical facility on the campus, and that will 4 require a two-prong review from us; one before they start 5 the program in the Fall of 2024, and then again to come 6 back to look at the program after they have completed the 7 construction so that we know that it meets the 8 requirements for simulation set-ups, laboratories, those 9 things that will be needed in the final two years of the 10 program. So there will be two visits for this program, 11 as it is articulated. 12 So, we're seeking your initial approval. The 13 MHEC letter you have, and you have all of the supporting 14 documents that they have submitted to MHEC, and it is in 15 agreement with what the requirements are for the Board of 16 Nursing. 17 MR. HICKS: Dr. Green, understanding all of 18 that, the COMAR Regs do say in 10.27.03.18(c) that there 19 needs to be -- we need to authorize the site visit by the 20 Board's professional staff and file a report of the site 21 visit by the Board's professional staff and then grant</p>

<p style="text-align: right;">Page 38</p> <p>1 initial approval, defer action, or deny the request.</p> <p>2 So, before we can grant initial approval for</p> <p>3 the program there has to be a site visit, and that report</p> <p>4 has to be provided to the Board.</p> <p>5 MS. GREEN: Then we will have to do that then.</p> <p>6 The initial report then will offer the Board the</p> <p>7 preliminary information because the program is so new</p> <p>8 with the need to bring faculty onboard and so forth. But,</p> <p>9 otherwise, it will be a site visit that will allow us to</p> <p>10 see the site at McDaniel College where classes will be</p> <p>11 held and then give a preliminary report. Is that</p> <p>12 satisfactory to the Board?</p> <p>13 MR. HICKS: That is correct.</p> <p>14 MR. CONTI: That will be great.</p> <p>15 MS. GREEN: All right. We will request that</p> <p>16 then. Thank you.</p> <p>17 MR. HICKS: So, with that being said, is there</p> <p>18 a motion by the Board to approve a site visit for that</p> <p>19 program with the report coming back to this Board for</p> <p>20 approval to move forward to grant approval of the</p> <p>21 initial?</p>	<p style="text-align: right;">Page 40</p> <p>1 equivalence.</p> <p>2 The Board has already determined that this</p> <p>3 program is not substantially equivalent, and we will</p> <p>4 request through the Board to do a follow-up review to see</p> <p>5 if anything has changed that we need to be aware of and</p> <p>6 that we can report back to the Board. So, this report</p> <p>7 serves as the backdrop to that.</p> <p>8 With Excelsior College, we told you where the</p> <p>9 location is, it's included on our website listing for</p> <p>10 non-approved out-of-state nursing education programs.</p> <p>11 The program does not offer a supervised clinical</p> <p>12 component in its nursing education curriculum. The State</p> <p>13 of Maryland requires a supervised clinical component for</p> <p>14 all nursing education programs.</p> <p>15 In 2023, Maryland Legislation was enacted for a</p> <p>16 five-year period that provided a means for applicants to</p> <p>17 apply for licensure by endorsement who did not have</p> <p>18 supervised clinicals as a component of their nursing</p> <p>19 education. This legislation ended on September 30, 2018.</p> <p>20 Starting October 1, 2018, Maryland Legislation stipulated</p> <p>21 that applicants seeking licensure by examination or</p>
<p style="text-align: right;">Page 39</p> <p>1 MS. HAYWARD: So moved. Hayward.</p> <p>2 MR. HICKS: Hayward.</p> <p>3 MS. WESTERFIELD: Westerfield.</p> <p>4 MR. HICKS: Westerfield. All in favor?</p> <p>5 ALL: Aye.</p> <p>6 MR. HICKS: Opposed?</p> <p>7 (No oppositions)</p> <p>8 MR. HICKS: Motion carries. Thank you, Dr.</p> <p>9 Green.</p> <p>10 MS. GREEN: Thank you very much. We will get</p> <p>11 that done as soon as possible with Dr. Gable. Thank you.</p> <p>12 MS. GABLE: Thank you.</p> <p>13 MS. GREEN: Oh, you're there. We're glad to</p> <p>14 have you, Dr. Gable. I will be in contact with you. We</p> <p>15 will at least get that done post haste to allow you to</p> <p>16 continue forward with development, okay?</p> <p>17 MS. GABLE: Of course. I appreciate the</p> <p>18 Board's time. Thank you.</p> <p>19 MS. GREEN: Thank you. Last but not least, 4G.</p> <p>20 This is a follow-up in terms of Excelsior College,</p> <p>21 located in Albany, New York, in review of the substantial</p>	<p style="text-align: right;">Page 41</p> <p>1 endorsement are required to demonstrate that the</p> <p>2 prelicensure nursing education program demonstrates</p> <p>3 substantially equivalent standards to those required for</p> <p>4 Maryland-based programs.</p> <p>5 Our current concerns or our current concerns</p> <p>6 that have been expressed had to do with that recently</p> <p>7 Excelsior College graduates and their families have</p> <p>8 expressed concerns related to obtaining endorsement in</p> <p>9 the State of Maryland. Dr. Forbes-Scott contacted Dr.</p> <p>10 Robin S. Goodrich, the Dean of the Excelsior College</p> <p>11 School of Nursing, to determine the current clinical</p> <p>12 education requirements established in the curriculum.</p> <p>13 Our findings were that Dr. Robin Goodrich</p> <p>14 confirmed that Excelsior College does not include a</p> <p>15 supervised clinical component in the curriculum. The</p> <p>16 program includes the Clinical Performance in Nursing</p> <p>17 Education, also known as CPNE, over one weekend. The</p> <p>18 CPNE includes four hours of skills lab on Friday; eight</p> <p>19 hours of simulation lab on Saturday and Sunday,</p> <p>20 respectively. In the one weekend period, students</p> <p>21 provide care to two medical-surgical patients, these are</p>

<p style="text-align: right;">Page 42</p> <p>1 simulated patients, and one pediatric patient, and that 2 is simulation, also. They are evaluated using a grading 3 rubric.</p> <p>4 Your supporting documentation includes the 5 communication by email that Dr. Forbes-Scott initiated 6 with Dr. Robin Goodrich to obtain documents, catalog of 7 2010, student handbook of 2010, the CPNE’s summary 8 description for 2008, and rubrics for 2010 with these 9 respective areas included. That information was provided 10 to us here in the Education Department. Dr. Robin 11 Goodrich did confirm that the CPNE experience is still in 12 effect with Excelsior College over the time period.</p> <p>13 The other information in this packet has to do 14 with the Excelsior College and their overview of what 15 they offer in the program with nursing program handbook 16 and catalog, also from 2020. You have the Excelsior 17 College information that was earmarked. This was their 18 actual college catalog that provided the Nursing 274 19 Focal Clinical Competency’s assessment. This is for a 20 credit. It outlines what is required in that clinical 21 aspect that they offer. It is all simulation. We have</p>	<p style="text-align: right;">Page 44</p> <p>1 requirement for accreditation through ACEN for their 2 prelicensure programs. They still offer the CPNE even 3 today, and it is clearly articulated on the website. So, 4 we are providing that as verification as well. The 5 historical information that we had in order to address 6 some of the pending concerns that individuals may have 7 had from a time period when they graduated from 8 Excelsior, but we also wanted to make sure that our Board 9 was very cognizant of what’s happening in today’s time at 10 Excelsior. It is approved by the State of New York, and 11 it has ACEN accreditation for its post-licensure 12 programs, not prelicensure. And that’s a critical issue 13 for us, too, because the Board recognizes accreditation 14 programs in .02 that are approved by the Board, CCNE, 15 NLNCNEA, ACEN, but they are not for their prelicensure 16 programs approved.</p> <p>17 So, we are requesting that the Board — or 18 recommendation is that the Board continue — this is 19 still a program that is not substantially equivalent, and 20 we respectfully ask the Board to give that consideration. 21 Thank you.</p>
<p style="text-align: right;">Page 43</p> <p>1 attachments about clinical performance from 2008, as well 2 all the other information that was requested.</p> <p>3 In addition to that, we also completed an 4 online current time review of the site for Excelsior 5 College in Albany, New York, and it does continue to 6 offer, even today in 2023, a simulation experience that 7 is required for students as they are completing the 8 educational requirements for that program. They have 9 mentioned for their LPN-to-RN Program, which is 10 considered prelicensure, information where they may go 11 out to a clinical site, but it is in with a person in the 12 agency but not faculty. Please, understand that this 13 program is floated on the site as ACEN accredited, but it 14 is ACEN accredited only for its RN-to-BSN Program, which 15 is post-licensure; and it’s RN-to-MSN Program, which is 16 also post-licensure. Meaning, these are registered 17 nurses who have made decisions to come and finish at 18 Excelsior, but ACEN does not recognize prelicensure in 19 the Excelsior program. That did happen over a number of 20 years where Excelsior was in other states and they were 21 prelicensure. They voluntarily withdrew their</p>	<p style="text-align: right;">Page 45</p> <p>1 MR. HICKS: All right. So, the first is to 2 accept the supporting documents that Dr. Green indicated 3 in showing that Excelsior College does not have a 4 supervised clinical component in its nursing education 5 curriculum. That would be the first motion.</p> <p>6 MS. STEINBERG: So moved. Steinberg.</p> <p>7 MR. HICKS: Steinberg.</p> <p>8 MS. HAYWARD: Second. Hayward.</p> <p>9 MR. HICKS: Hayward. All in favor?</p> <p>10 ALL: Aye.</p> <p>11 MR. HICKS: Opposed?</p> <p>12 (No oppositions)</p> <p>13 MR. HICKS: Motion carries. The second motion 14 is to review the findings approved by the Board staff 15 which verify that Excelsior College does not have a 16 supervised clinical component in the nursing education 17 curriculum. This is a requirement in the State of 18 Maryland, effective October 1, 2018, and noted as 19 follows: Any applicant for licensure by exam or 20 endorsement in Maryland shall have graduated from a 21 nursing program that Maryland recognizes it being</p>

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1 substantially equivalent to that required in Maryland at
 2 the time the applicant graduated. That's COMAR
 3 10.27.01.01(b)11, and referenced in the correspondence to
 4 Dr. Mary Lee Pollard, the Dean of the School of Nursing
 5 at Excelsior College in Albany, New York, that was dated
 6 on November 27, 2018, and it was Shirley Devaris, RN, who
 7 was the Board staff, at which we have that documented.
 8 So, is there a motion to approve that?
 9 MS. ROBIN HILL: So moved. Dr. Robin Hill.
 10 MS. WESTERFIELD: Second. Westerfield.
 11 MR. HICKS: Dr. Robin Hill and Dr. Westerfield.
 12 All in favor?
 13 ALL: Aye.
 14 MR. HICKS: Opposed?
 15 (No oppositions)
 16 MR. HICKS: Motion carries. And then the final
 17 is to get a motion to continue to recognize Excelsior
 18 College as not substantially equivalent to the nursing
 19 education requirements established in the State of
 20 Maryland, and that is on information based from 2010 and
 21 the other documentation that Dr. Green has provided to

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1 us.
 2 MS. LECHLITER: So moved. Lechlitter.
 3 MR. HICKS: Lechlitter.
 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.
 10 MS. GREEN: Thank you so much. Thank you for
 11 your time.
 12 MR. HICKS: Thank you.
 13 MS. WESTERFIELD: Dr. Green, I have one
 14 question. Thank you for everything you've done.
 15 MS. GREEN: Yes, ma'am.
 16 MS. WESTERFIELD: For 4A, the NCLEX pass rates,
 17 do you know when they will be posted online?
 18 MS. GREEN: Now that the Board has approved, we
 19 will proceed with the IT team. I will be in contact with
 20 Dr. Forbes-Scott so that we can make that happen. Thank
 21 you.

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1 MS. WESTERFIELD: Okay.
 2 MS. GREEN: We will also be working closely
 3 with Dr. Scott -- I mean, Attorney Scott. That's not a
 4 Freudian slip, by the way. With Attorney Scott's Office
 5 in order to establish the letters that need to go out to
 6 the respective programs. Thank you for your patience.
 7 MR. HICKS: Thank you, Dr. Green.
 8 MS. GREEN: Thank you.
 9 MR. HICKS: We will move down to Licensure and
 10 Advanced Practice. Ms. Bailey?
 11 MS. BAILEY: Good morning.
 12 MR. HICKS: Good morning.
 13 MS. BAILEY: This is the quarterly report for
 14 the Licensing Department. This will cover July, August,
 15 and September. If you look at your reports, each
 16 department has been broken down by months for their
 17 productivity for July, August, and September for
 18 Endorsements, Renewals, and Advanced Practice.
 19 I am going to go all the way to the summary on
 20 Page 11, unless someone has questions with what they see.
 21 The presentation is put in a pie format to show you for

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1 each period what were our barriers, what slowed our
 2 productivity time.
 3 Looking at the summary for Endorsement, for
 4 this quarter we received 965 applications. Out of that
 5 965, 480 were completed. Now the reasons why the others
 6 were not completed, the 485 are below; 55 percent were
 7 pending background clearance; 17 percent were compact
 8 licenses.
 9 We are having an increased number of nurses
 10 that are requesting endorsement to the State of Maryland
 11 that hold compact licenses. The conflict is just getting
 12 bigger and bigger with employers requiring nurses in the
 13 State of Maryland to have a Maryland license, and we are
 14 trying to re-educate as we go along, but this is
 15 something we cannot do because of the NLC ruling, and
 16 we're trying to get everyone to understand that.
 17 Also, for Endorsement we have some issues with
 18 the processing of the CGFNS, and these are out of our
 19 control. Our Education Department is doing what they
 20 can, when they can, and just our school approvals.
 21 For Renewals, our issues are more of

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1 backgrounds, again, and its incomplete applications. We
 2 are having a lot of nurses who are just not signing.
 3 Some were refusing to give social security numbers before
 4 the ruling where they don't need a social security
 5 number. It's just a lot of little things. Some were
 6 even forgetting their birthdates and social security
 7 numbers. So we will not process them.

8 The we go to Advanced Practice, and with
 9 advanced practice our issues have been transcripts.
 10 That's our biggest thing. So, for each area we are
 11 beginning to address our issues. For backgrounds, we
 12 have a meeting with the Background Department coming up
 13 this Friday where we're going to bring both the
 14 departments together so that we can understand what is
 15 needed on both ends so we can find a way to help
 16 Backgrounds, and Backgrounds can help find a way to help
 17 us. So, we are trying to work internally to fix our
 18 processing issues, or at least make them better. Because
 19 I'm hoping for the next quarter when I tell you that we
 20 have received a total of 3,521 applications through all
 21 three areas, and we've completed 2,686 applications,

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1 which leave 835 that we are still working on. We are
 2 still waiting for constituents to turn in requested
 3 documents, and we're waiting for processing of
 4 backgrounds.

5 Any questions?

6 MR. HICKS: Ms. Bailey, when you speak of
 7 waiting on background checks, is there a way we can drill
 8 this down a little bit further into, "We're waiting on
 9 background checks because." It may be difficult so I'm
 10 just kind of speaking out loud.

11 So, is there a way we can say, "We've received
 12 the background check on Gary Hicks, however, we have no
 13 application for Gary Hicks, so we can't marry those two
 14 together." Or, "We have an application for Gary Hicks,
 15 but we still have a pending background check." Because I
 16 think a lot of folks get frustrated or don't understand
 17 that that application needs to be in place first before
 18 the background comes in. So, I don't know if there's a
 19 way we can express the number of backgrounds we get
 20 without applications.

21 MS. BAILEY: From my department, I don't know.

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1 But this will be part of our discussion on Friday with
 2 the Director of Backgrounds to see what we can do.
 3 Because that happens, Background will be done and we have
 4 no application to match with that. The others might be a
 5 positive background, and then we automatically have to
 6 hold and send to Investigations or wherever it needs to
 7 go to be processed.

8 I will have a clearer and hopefully more in
 9 depth answer for you after our meeting on Friday.

10 MR. HICKS: I think it's important that we
 11 communicate the number of backgrounds that we're getting
 12 without applications because that's what people need to
 13 hear. Because they say, "Well, I did my background.
 14 You've gotten my background." But, "Yeah, we've gotten
 15 your background, however, we have no application for
 16 you."

17 MS. BAILEY: Exactly.

18 MR. HICKS: So, we have to essentially have to
 19 throw the background away until you do your application,
 20 and then you, as the applicant, need to resubmit for the
 21 background check to be submitted, or we, on your behalf,

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1 will go to CGIS and get it.

2 But I think there's a big number of backgrounds
 3 that are just, you know, we can't do anything with them
 4 because of the delay in getting the application. We've
 5 communicated that many times with the deans and
 6 directors, but I think they, themselves, need to hear
 7 that as well. Like, "Yeah, you're right, we've got your
 8 students, however, your students — 90 percent of the
 9 students have submitted their background and we've gotten
 10 the background, which we can't do anything about.

11 So, I think we need to start communicating that
 12 number a little bit more.

13 MS. BAILEY: And I don't want to just throw the
 14 Background Department. Because we are working together.
 15 They have increased their staffing. We're going to come
 16 together.

17 MR. HICKS: I think it's not throwing anyone
 18 under the bus, I think it's a number that we need to
 19 start to publicize because we haven't been publicizing
 20 that number or indicating that that is a variance that
 21 creates these backlogs of sorts for the applicants. So,

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1 I think we need to start communicating that information.
 2 MS. BAILEY: Thank you.
 3 MR. HICKS: Dr. Hill?
 4 MS. ROBIN HILL: If the student gives a
 5 background check and they have the application, but for
 6 some reason they're not eligible to take the boards.
 7 They haven't completed an educational requirement. How
 8 long is that background good for?
 9 MS. BAILEY: I would have to refer to the
 10 Investigation Department to answer that.
 11 MS. TONGUE: One year.
 12 MS. BAILEY: One year.
 13 MS. ROBIN HILL: One year, okay. Thank you.
 14 MS. SCOTT: But it's my understanding, Dr.
 15 Hill, that the background report itself doesn't have to
 16 be back for them to take the board. As long as we seen
 17 that they have done it and we've got it. They may be
 18 cleared and still just haven't taken the boards yet.
 19 Does that make sense? So, the background piece is
 20 settled.
 21 MS. ROBIN HILL: It does. I've had student who

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1 have — they didn't pass that final exam that they needed
 2 to pass. So, it's been, like, maybe three months until
 3 they get that. Then the director signed off their
 4 picture, and then they're not getting their ATT. And
 5 when they come down there is no background, but they did
 6 the background check, it's just that it's been, like,
 7 three months since they did. So, then they end up
 8 calling CGIS to say to resend it, and once it's resent
 9 then everything is there. That's why I was wondering in
 10 their timeframe that that background would stick and
 11 stay, or should they just automatically call CGIS and say
 12 to resend it.
 13 MS. SCOTT: It's after 90 days that it needs
 14 to be resent if they have not been cleared already. Once
 15 it's cleared they're good, and it expires after one year.
 16 MS. ROBIN SCOTT: Okay. Thank you.
 17 MS. BAILEY: Anything else?
 18 MR. HICKS: Any other questions for Ms. Bailey?
 19 (No questions posed)
 20 MR. BAILEY: So, is there a motion to accept
 21 and approve the Licensing Department's quarterly report?

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1 MS. ROBIN HILL: So moved.
 2 MR. HICKS: Dr. Robin Hill.
 3 MS. LECHLITER: Second.
 4 MR. HICKS: Lechlitter. All in favor?
 5 ALL: All.
 6 MR. HICKS: Opposed?
 7 (No oppositions)
 8 MR. HICKS: Motion carries. Thank you, Ms.
 9 Bailey.
 10 MS. BAILEY: Thank you.
 11 MR. HICKS: All right. We will move down to
 12 Legislative Affairs.
 13 MS. GHOWRWAL: Good morning, everyone.
 14 ALL: Good morning.
 15 MS. GHOWRWAL: Under Legislative Affairs, 4A,
 16 the Board submits the following one-time processing time
 17 report for Fiscal Year 2023 as required by Senate Bill
 18 960 and House Bill 611 for 2023. All numbers are average
 19 processing times for; 1, issuing initial licenses,
 20 certifications and renewals as measured from the date of
 21 the initial application was submitted; 2, the issuance of

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1 authorization to test; and 3, the approval of proposed
 2 nursing curriculum revisions, new nursing, and certified
 3 nursing assistant education programs, new faculty, and
 4 new clinical sites.
 5 As you can see in the report, Table 1 reflects
 6 the average processing time in days for initial licenses
 7 and certifications. Table 2 reflects the average
 8 processing time for renewal times for licenses and
 9 certificates. Table 3 shows the average processing time
 10 to issue an authorization to test. And then, Table 4
 11 shows the average processing times for the approval of
 12 nursing programs, faculty, sites, and curriculum
 13 revisions.
 14 Were there any questions?
 15 MR. HICKS: Any questions?
 16 (No questions posed)
 17 MR. HICKS: Is there a motion to approve the
 18 FY23 Processing Times Report?
 19 MS. CASSIDY: Cassidy.
 20 MR. HICKS: Cassidy.
 21 MS. HAYWARD: Hayward.

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1 MR. HICKS: Hayward. All in favor?
 2 ALL: Aye.
 3 MR. HICKS: Opposed?
 4 (No oppositions)
 5 MR. HICKS: Motion carries.
 6 MS. GHOWRWAL: Thank you. Moving on to Item
 7 7B.1. It's just an update to the CDT regulations
 8 package.
 9 Before I begin, I understand that we might have
 10 some of our CDT stakeholders on the line, and if so,
 11 could you please introduce yourselves?
 12 MS. NEGLEY: Good morning. This is Cathy
 13 Negley, Director of Clinical Services from DaVita.
 14 MS. GHOWRWAL: Anyone else?
 15 (No responses)
 16 MS. GHOWRWAL: Thank you, Cathy. So, during
 17 last month's Board meeting we presented the CDT
 18 regulations package draft but delayed approval as the
 19 stakeholders were requesting to incorporate CDT preceptor
 20 language within the draft.
 21 The Board requested to review examples of CDT

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1 preceptor curriculum, which have been uploaded into the
 2 legislative folder. I am hoping that the Board was able
 3 to review the examples, and would like to know if anyone
 4 has any questions.
 5 MR. HICKS: Are there any questions from the
 6 Board members?
 7 (No questions posed)
 8 MS. SCOTT: So, I think the ask at this time
 9 then is, what the Board had asked for. The stakeholders
 10 wanted to know if the Board would be willing to approve
 11 the regulations with the preceptor language incorporated,
 12 meaning, they're using preceptors during the clinical
 13 experience for the program, and that's when the Board
 14 requested this information.
 15 So, I think they're asking if you're going to
 16 approve it as-is, without the preceptor language. That's
 17 the draft you have. Or, do we want to incorporate at the
 18 request of the stakeholders permitting them to utilize
 19 preceptors during the clinical portion of the DT
 20 training? Does that make sense?
 21 MS. LECHLITER: My question is: What is the

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1 role of the nurse if we approve the DTs to be the
 2 preceptors for DTs? Is there any role for the RN in
 3 oversight?
 4 MS. SCOTT: Cathy, did you want to respond to
 5 that question? Did you hear the question?
 6 MS. NEGLEY: Yeah, I will comment. I am
 7 speaking for DaVita, and I think from the various
 8 stakeholders' groups, I mean, this is pretty much with
 9 most of the other providers too, is that the nurses
 10 absolutely have oversight. And in many cases, at least
 11 in our case, I mean, they are validating skills and part
 12 of signing them off, too. This doesn't include the
 13 theory or the didactic portion of it. This is actually,
 14 like, 100 percent done by a nurse. A lot of the skills
 15 are actually introduced by a nurse. So, this is just,
 16 you know, reinforcement, day-to-day reinforcement of the
 17 various skills. I mean, they are typically paired up
 18 with a preceptor, and that preceptor might still have an
 19 assignment, like they are doing things together.
 20 I would also comment that in a lot of states,
 21 and I think the majority of states, there is not -- I

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1 mean, preceptors are able to do this and there is no,
 2 like, evidence of, like, any, you know, larger cases they
 3 see concerns or anything like that, like, with preceptors
 4 helping with the training.
 5 MR. HICKS: So, when you say that the nurse is
 6 going to sign off the skill, does that mean that there's
 7 a direct partnership between the individual and the
 8 nurse, or is there a student dialysis tech and that
 9 dialysis tech does the preceptor then takes the paperwork
 10 to the nurse and the nurse just signs off on it?
 11 MS. NEGLEY: It's just, I don't know, for
 12 example, like, if someone is learning cannulation, that
 13 skill might initially be introduced. I mean, one, it's
 14 probably introduced during a theory or a didactic portion
 15 first by a nurse going through the very details like the
 16 how-tos and all of the cannulation and all the aspects to
 17 the components. And then, you know, that very first time
 18 might be with the preceptor and the trainee, but then,
 19 like, a final check-off, I mean, the nurse is there. The
 20 nurse is in charge. It could be a CT there actually
 21 there watching and making sure the cannulation is being

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1 done properly, and they would have that final sign-off.

2 MR. HICKS: Have you developed what the actual

3 orientation checklist looks like?

4 MS. NEGLEY: I'm sorry?

5 MR. HICKS: Have you developed what that

6 orientation tool or the orientation checklist looks like?

7 MS. NEGLEY: We have one, yes. I'm pretty sure

8 every provider has a checklist. That's part of the

9 initial training is that every single skill is validated

10 and signed off on.

11 MR. HICKS: I, personally, would like to see

12 that before we move forward on this just so that I can

13 understand who truly is doing the sign-offs on these,

14 whether it's the dialysis tech or the nurse.

15 So, is there a way we can get that sample of

16 that to look at that before we move forward with any

17 vote?

18 MS. NEGLEY: Sure.

19 MR. HICKS: Dr. Hill?

20 MS. ROBIN HILL: Who is actually precepting the

21 person? Is it actually a dialysis tech precepting the

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1 person or is it an RN?

2 MS. NEGLEY: It's a dialysis tech, yeah.

3 That's the issue, I mean, we don't have enough nurses.

4 That's kind of where this conversation started to happen.

5 I mean, this is not a new issue. This has been going on

6 for years. It's just with the regulation change and the

7 verbiage, this came up in a workgroup and it was a

8 consensus among all providers that this has definitely

9 been a challenge and an issue. So, you know, we didn't

10 want to pass this to Board with language with what wasn't

11 actually happening in the facility. It's not feasible to

12 have one nurse preceptor that isn't the charge nurse

13 and/or the clinical coordinator that will just be doing

14 training with that. I mean, just in DaVita alone we're

15 got 80-plus facilities, and that would be, like, 80 more

16 nurses that we would need to have in order to accomplish.

17 So, it's just not something that we have the ability to

18 do.

19 MR. HICKS: And what specific training is the

20 dialysis tech preceptor going through to be able to

21 really show that they're an effective preceptor?

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1 MS. NEGLEY: I mean, that was sent by the

2 various providers. I sent mine in late, so that's not

3 part of what you guys have. I have it and I'm happy to

4 send ours, but I know that you guys have seen some of

5 them. That's in the material that you guys have to

6 review. I can speak for DaVita, I mean, some of it is,

7 like, on Adult Learning and things like that. There's a

8 whole list of curriculum and courses that I can't speak

9 to what the other providers are training.

10 MR. HICKS: But, I guess that's my question,

11 right? Are we looking at standardizing the curriculum so

12 that we don't have so many variations of a dialysis tech

13 preceptor course where DaVita is teaching one way, but

14 another dialysis company is teaching another way? At

15 least within the State of Maryland, are we looking to

16 standardize what that preceptor course looks like across

17 the state?

18 MS. NEGLEY: I mean, our course is, and I think

19 this is true in other providers, this isn't a course

20 that's just taught to Maryland preceptors, this is taught

21 across our entire company. And so, you know, if we were

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1 to standardize it, I mean, it's not something that, like,

2 I'm teaching or anyone on my team is teaching. It's

3 taught at a higher level, and I think that's the case in

4 other providers, too. So, I mean, I guess we could come

5 up with that, it just might be a little bit more

6 difficult in who's going to be teaching that because,

7 like, ours is taught by educators who are, like, nurse

8 educators.

9 MR. HICKS: So, the other questions that I had

10 for you is, are you using a dialysis tech as like faculty

11 for the clinical portion?

12 MS. NEGLEY: No.

13 MR. HICKS: Okay.

14 MS. NEGLEY: We haven't up to this point. Our

15 faculty is the nurses who we have submitted and approved

16 through you guys. They teach the didactic portion and

17 they also, like, introduce the skills.

18 MR. HICKS: All right. So, I think I am going

19 to table any vote for now until we can get a sample of

20 what that evaluation tool looks like, the competency

21 evaluation tool.

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1 So, I think there's a lot more that the Board
 2 is really trying to understand what this program looks
 3 like and who's doing what and how type of thing. So, if
 4 you can get your sample of the competency evaluation
 5 tool, that would be one more piece that we can look at.
 6 Is there anything else that the Board members
 7 would like to see as they are gathering this information?
 8 MS. HAYWARD: So, if we're not familiar with
 9 the dialysis process. So, these techs, are they
 10 certified? Do they have some kind of certification? Who
 11 is ultimately responsible for their practice?
 12 MS. NEGLEY: They all hold a license, A
 13 CNA-DT license, or a license in the future here. And it
 14 will be the charge nurse or the clinical coordinator who
 15 ultimately oversees what's happening in the dialysis
 16 facility on patient care. There's always a charge nurse
 17 in the building in charge of the CDTs and patients.
 18 MS. HAYWARD: Is there a difference between
 19 overseeing and being responsible for their practice?
 20 MS. NEGLEY: I mean, they're responsible for
 21 what happens. They are the charge nurse for the day.

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1 MS. WESTERFIELD: So, the nurse is delegating
 2 to the DT now, not the CNA-DT, now just the DT? So, the
 3 nurse is ultimately responsible for delegating this task,
 4 and the nurse is signing off on the preceptorship; is
 5 that correct?
 6 MS. NEGLEY: I mean, the nurse isn't signing
 7 off on the preceptorship. That was done at a higher
 8 level. So, signing off is a skill validation for a new
 9 teammate. So, they are signing off on that, but that's
 10 been approved.
 11 MS. WESTERFIELD: So, if the nurse is
 12 ultimately responsible, but the DT is training the DT,
 13 who is verifying that that is being done correctly?
 14 Because it will still fall under the nurse's delegation,
 15 correct?
 16 MS. NEGLEY: Say that again. So, the DT is
 17 responsible for training the new DT. They don't have a
 18 DT at that point.
 19 MS. WESTERFIELD: Right.
 20 MS. NEGLEY: And then, what was the second
 21 part?

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1 MS. WESTERFIELD: So, the nurse is ultimately
 2 responsible, right? Because they're delegating these
 3 skills to the DT. So, who's verifying that the DT is
 4 training the new person correctly?
 5 MS. NEGLEY: I mean, that's part of, like, I
 6 mean, I don't know. The went to the preceptor class,
 7 they're signed off, and have validated that. I mean,
 8 this is part of -- dialysis takes twelve weeks to learn.
 9 So, it's an ongoing process. You're watching them set up
 10 machines. I mean, it's the same thing that the nurse
 11 that's in charge just for that day that they're watching
 12 their teammates and making sure that they are following
 13 the policies and procedures for us. I mean, there's a
 14 certain way to cannulate, and there's alarms for all of
 15 that. So, that is part of the day-to-day operations of
 16 being a charge nurse in overseeing the treatments and you
 17 are making sure that everybody is following policies and
 18 procedures.
 19 MS. LECHLITER: I understand a DT teaching new
 20 skills to a new trainee, but the actual sign-off and
 21 validation of that skill, if the nurse is delegating then

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1 the nurse should really be the one that says they are
 2 competent outside of the skills training part.
 3 MS. NEGLEY: They are. The final skills
 4 validation is signed off ultimately by the nurse. Is
 5 that's what you're asking for is a sample of that, and
 6 that is ultimately signed off by the nurse.
 7 MS. HAYWARD: But observed and signed off, or
 8 signed off?
 9 MS. NEGLEY: Correct.
 10 MS. WESTERFIELD: So, the nurse is taking the
 11 responsibility when they sign that saying that they are
 12 verifying that that DT did it. They are taking that
 13 responsibility on. I guess that just has to be clear so
 14 that they understand that.
 15 MS. HAYWARD: Is there a number of persons that
 16 they are overseeing at one time, this nurse that is
 17 delegating all these things?
 18 MS. NEGLEY: There's typically, I mean, only
 19 maybe one person in training in a facility. One or two
 20 at a time. I mean, it's not like there's twenty people
 21 that are being trained at one time. It's based off the

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1 need and turnover. And a lot of facilities might not
 2 have any, but some might have one going on at a time.
 3 MS. HAYWARD: But you stated that the RN is
 4 watching all of these things going on at one time.
 5 MS. NEGLEY: At some point they would, yeah,
 6 but they're not watching every single thing that they're
 7 doing. Yeah, I mean, it takes time to, like -- I mean,
 8 it might take them a few times until they get comfortable
 9 with setting up a machine. They are under the
 10 supervision of that preceptor. The preceptor is helping
 11 them or teaching them with the training, and then the
 12 final sign-off is the nurse.
 13 MS. HAYWARD: And the preceptor has a ratio or
 14 a group of persons they're overseeing as well that is
 15 already being treated while they are also precepting,
 16 correct?
 17 MS. NEGLEY: No. A group of other DTs, do you
 18 mean?
 19 MS. HAYWARD: No, persons that are being
 20 treated, patients.
 21 MS. NEGLEY: Oh, patients, yeah. I mean, and a

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1 lot of times what is happening is they are precepting
 2 somebody and there's like a patient that doesn't show, so
 3 they might only have two patients then for the day
 4 instead of, like, the normal three, so that they will
 5 have more time to be able to spend with them.
 6 MS. TURNER: Are there any more questions?
 7 (No questions posed)
 8 MS. TURNER: So, I think where we are is we
 9 need more examples. If you could, provide us with more
 10 documents that other states are using so that we can
 11 create a draft and then maybe present it to the Board
 12 with more finality and specifics.
 13 MS. NEGLEY: What do you mean by documents that
 14 other states are using? That there's differences in
 15 other states? I mean, there's a few that require
 16 licenses for the preceptor, but some don't. That's how
 17 it's done in other states is what I'm describing to you.
 18 MS. TURNER: So, examples of how the PCT is
 19 used as a preceptor in other states.
 20 MS. NEGLEY: That's my point that there's a few
 21 states that require DT, but that's up to you. I mean, I

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1 can reach out to another state. I don't know, maybe the
 2 higher-ups in my company can figure that out because I
 3 don't have the connections. But there's only a handful
 4 of states that require a DT license. They are considered
 5 a technician without a license in other states in the
 6 country.
 7 MS. TURNER: I think, for us, at this moment
 8 it's a very conceptual thing. I think before we can
 9 approve or disapprove we kind of need more information
 10 and be clear on how this process is occurring.
 11 MS. SCOTT: We can reach out to the others.
 12 Right now, Cathy is just representing DaVita, so she
 13 can't really speak for all of the others. We can reach
 14 out to the others that are on the workgroup so that they
 15 can help Cathy provide that information.
 16 MS. TURNER: Okay.
 17 MS. NEGLEY: And I think we have more if they
 18 are able to join. I mean, I know I joined on my own.
 19 So, maybe we could request that some of them, if they are
 20 able to join, to speak from the other providers'
 21 perspectives.

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1 MS. SCOTT: Yeah, we did. We sent out notice
 2 that when the Board meeting was. We will reiterate that
 3 for the next meeting.
 4 MS. NEGLEY: Okay. I appreciate that.
 5 MS. TURNER: Thank you.
 6 MS. NEGLEY: And I can, in the meantime, get to
 7 you what you are requesting, the checklist of what we're
 8 using, and then I can see what I can come up with what's
 9 for other states that you asked about.
 10 MS. TURNER: Thank you, Cathy, for
 11 participating and providing us with the information this
 12 morning. We appreciate it.
 13 MS. NEGLEY: Absolutely.
 14 MR. HICKS: I think because of the questions
 15 that we have and we need to kind of just need to
 16 understand it. I would like to bring it back to the
 17 December Board meeting versus the November Board meeting
 18 to give the Board enough time to really look at the
 19 content that is being presented and to get you all the
 20 folks that are involved together to make sure that they
 21 can come to the Board and help to answer the questions

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1 that we may have as a collaborative effort versus just
 2 DaVita being represented at the table.

3 MS. SCOTT: I think it would be helpful for the
 4 Board to know exactly how what you are calling preceptors
 5 are being used. Are they being used to sign off the
 6 competency for saying that this person is competent in
 7 the clinical component? Because then, if that's the
 8 case, then they would be being used as faculty, and then
 9 the whole definition of faculty would need to change in
 10 the regs. So, there would be a lot more to that piece
 11 depending on how they are actually being used.

12 MS. NEGLEY: Yeah, I don't think it falls under
 13 that. We can certainly ask the other providers, but I
 14 think it falls under delegation.

15 MR. HICKS: And I would really like you guys to
 16 consider, if this is something we're going to do, I would
 17 like for there to be a consensus among, hopefully, all
 18 the DaVitas centers in the state that have one
 19 standardized curriculum for dialysis tech preceptors, or
 20 whatever we're going to call these folks. That way
 21 there's no variation between different sites or different

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1 facilities. So, if I have a DaVita tech that comes into
 2 my organization, I know exactly what that preceptor has
 3 been trained to do, and I don't have to question it
 4 because they followed the standard curriculum. Or, to
 5 make the ruling that if there hasn't been a standard
 6 curriculum followed then perhaps that does not occur
 7 within my organization, type of thing. So, I would
 8 really like to see is you guys working as collaborative
 9 group here to make this happen. How do we make it
 10 standardized across the state, DT preceptor program, that
 11 we know that there's consistency and there's no
 12 variations that are occurring?

13 MS. NEGLEY: That's going to be more difficult
 14 with our preceptor curriculum. Each person's preceptor
 15 curriculum is -- well, I don't think we have all of them.
 16 They are more than likely very similar but not 100
 17 percent the same. They probably have similar objectives.
 18 I mean, I think we all agree that, like, the curriculum
 19 will be the thing if they know what they're learning.
 20 We're teaching a new thing that's similar but yet might
 21 have slightly different objectives.

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1 MR. HICKS: Understanding that there may be
 2 some slight variations, I think that there is the
 3 opportunity to at least have the overarching criteria.
 4 You know, what are the basics of that preceptor? What
 5 does the basics of that preceptor program look like?
 6 Understanding that DaVita may throw something in a little
 7 bit different because DaVita does something a little bit
 8 different into it, but there should be overarching
 9 concepts of what does a DT preceptor program look like.
 10 That's what I'm looking for.

11 MS. NEGLEY: And we did that with the DT
 12 curriculum. That was part of the workgroup to come up
 13 with what that looks like, and we were able to figure
 14 that out. So, I am going to suggest that maybe the
 15 workgroup needs to get back together to come up with that
 16 for the preceptor curriculum. And then, obviously,
 17 whatever we're submitting to you as part of our DT
 18 program, we may submit the preceptor program at the same
 19 time, but you would already have the outline that's not
 20 in the draft proposal. Maybe we can just add the part of
 21 what the preceptor program.

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1 MR. HICKS: Yeah, and I would also include in
 2 that defining terms of what is preceptor, what is the
 3 role of the registered nurse, what are those components,
 4 what is the definition of faculty, and make sure that it
 5 matches the COMAR Regs as we have them outlined so
 6 there's no question about what truly is going to be the
 7 role of the DT as they preceptor, what is the role of the
 8 nurse, you know, and all of those things. I think that
 9 needs to be clearly defined as well as you bring that
 10 document back to us.

11 MS. NEGLEY: We're definitely going to need to
 12 come up with the best words to defining that.

13 MS. SCOTT: Okay. We'll do that. We will
 14 reach out and schedule another meeting.

15 MR. HICKS: And if you're not ready by December
 16 that's fine. I mean, you can coordinate when you've
 17 gotten all that information. I may take more than one
 18 meeting for you to really get all these documents
 19 together. So, you know, if it's not by December, we
 20 understand that and we can definitely put you on the
 21 agenda when you're ready to present all that information.

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1 MS. NEGLEY: Makes sense.

2 MR. HICKS: Thank you for your time.

3 MS. NEGLEY: Absolutely. Thank you for

4 including me.

5 MS. GHORWAL: We had one additional item, a

6 regulatory update on COMAR 10.27.01.05: English Language

7 Proficiency Exams under 7B.2

8 In August, 2023 the Maryland Board of Nursing

9 submitted a proposal to revise the English Language

10 Proficiency Exams accepted within the state and to

11 outline overall minimum passing sections course. These

12 exams include the test of English as a foreign language

13 internet-based test; TOEFL IBT; the International English

14 Language Testing System, or IELTS; the Michigan English

15 Test, or MET; the Pearson Test of English, or PTE; and

16 the Occupation English Test, or OET.

17 The proposal to amend COMAR 10.27.01.05 was

18 published in the October 6th issue of the Maryland

19 Register with a comment period ending on November 6,

20 2023. The Board recently received a comment from

21 Maryland Hospital Association questioning the accuracy of

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1 the published TOEFL IBT scores, which vary from the TOEFL

2 scores adopted by the Board on May 26, 2021.

3 If you can recall, the Board approved TOEFL IBT

4 scores during the July 27, 2022 Board meeting. These

5 scores reflect an overall score of 84; speaking score of

6 26; listening score of 21; writing score of 19; and

7 reading score of 19. However, on May 26, 2021 the Board

8 adopted the following scores for TOEFL IBT: Overall

9 score 84; listening, 20; reading, 20; speaking, 26; and

10 writing, 18.

11 The recommendation is to adopt the TOEFL IBT

12 scores that were previously approved by the Board on May

13 26, 2021, aligning with the recommendations from the

14 Commission on Graduates of Foreign Nursing Schools, or

15 CGFNS, and the National Council of State Boards of

16 Nursing, NCSBN.

17 MR. HICKS: What was actually MHA's concern?

18 MS. FISHMAN: There question is that they were

19 questioning the TOEFL scores, and that the scores that

20 were in the proposal weren't adding up to an overall

21 score of 84.

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

2 for the Board to adopt the TOEFL IBT scores that was

3 previously approved by the Board on May 26, 2021 that

4 aligns with the recommendations of CGFNS and the National

5 Council for State Boards of Nursing? And the scores

6 would be an overall score of 84; with a listening score

7 of 20; a reading score of 20; speaking score of 26; and

8 the writing score of 18.

9 MS. ROBIN HILL: This was brought to Practice

10 and Education in 2022 to change these scores to what they

11 are in 2022. I can't remember what they all were, but I

12 do remember it was brought to us asking us to change

13 them. So, now we're being asked to change them back to

14 what they were previously when we were asked to change

15 them to what they currently are?

16 MS. SCOTT: Yeah, so what happened, with the

17 multiple comments that we received it caused us to

18 research when we realized back in May of '21 the scores

19 that the Board approved at that time, they were approved,

20 but we never had the opportunity to submit them into

21 regulation. So, they never were officially adopted into

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1 regulation. And then, the Welcome Back Center approached

2 the Board in '22 with the scores that you all approved at

3 that time. The scores that were originally approved in

4 '21 are consistent with the industry standard. It's

5 similar to or consistent with the surrounding states that

6 we found. It still has an overall score of 84 and

7 speaking of 26. So, we just wanted to once and for all

8 get a score that the Board can approve that is consistent

9 with the recommendations from CGFNS as well as NCSBN.

10 MS. WESTERFIELD: So, just to be clear, we're

11 going back to what we decided on in 2021 that was never

12 put into place?

13 MS. SCOTT: Correct.

14 MS. WESTERFIELD: Okay. There's really only a

15 one number difference. I really don't know what that

16 means to be one number different from three different

17 places, but I don't know if that one number makes that

18 much of a difference or not from what we decided in 2022.

19 MS. ROBIN HILL: One adds up to 85, and the

20 other adds up to 84.

21 MS. WESTERFIELD: No, I mean, like, the

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1 listening score was 20 in 2021, but we made it 21 in
 2 2022. Does that make sense?
 3 MS. ROBIN HILL: I sat on the committee. I
 4 totally know what you're saying. I think what Maryland
 5 Hospital Association is saying that it doesn't add up.
 6 MS. SCOTT: Right, that's what they were
 7 saying. It actually added up to the 85 instead of 84.
 8 But then we got other comments about the actual
 9 individual scores.
 10 MS. ROBIN HILL: We should align with what
 11 NCSBN and CGFNS says.
 12 I move that we go back to the May 26, 2021
 13 scores.
 14 MS. LECHLITER: I will second. Lechliter.
 15 MR. HICKS: Dr. Robin Hill, Lechliter. All in
 16 favor?
 17 ALL: Aye.
 18 MR. HICKS: Opposed?
 19 (No oppositions)
 20 MR. HICKS: Motion carries. Thank you.
 21 MS. GHORWAL: Thank you.

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1 MR. HICKS: Because of the time, we're going to
 2 go through the Direct-Entry Midwife and the Electrology
 3 section, however, we will be deferring the Quarterly
 4 Reports till the November Board meeting.
 5 MS. MENTZER: Good morning, everyone. We are
 6 going to start with the direct-entry midwife requests for
 7 approval by the Board for applications for renewal.
 8 These applications have been reviewed by the Direct-Entry
 9 Midwifery Advisory Committee with recommendations to the
 10 Board for approval to renew their licenses that expire on
 11 October 28, 2023.
 12 8A.1 is Morgan A. Hughes, LDEM, DEM00035. The
 13 committee reviewed the application for renewal at its
 14 October 6th meeting, and is recommending the applicant
 15 meets the minimum requirements for renewal of a license
 16 to practice direct-entry midwifery in Maryland according
 17 to the Annotated Code of Maryland, Section
 18 8-6(c)-18, and COMAR Regulation 10.64.01.17.
 19 MR. HICKS: Is there a motion to approve the
 20 renewal application for license to practice direct-entry
 21 midwifery for Morgan A. Hughes, LDEM, DEM00035?

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1 MS. LYONS: So moved. Lyons.
 2 MR. HICKS: Lyons.
 3 MS. TURNER: Turner.
 4 MR. HICKS: Turner. All in favor?
 5 ALL: Aye.
 6 MR. HICKS: Opposed?
 7 (No oppositions)
 8 MR. HICKS: Motion carries.
 9 MS. MENTZER: 8A.2 is Marilee L. Pinkleton,
 10 LDEM, License Number DEM00009. The committee reviewed
 11 Ms. Pinkleton's application for renewal of a license to
 12 practice direct-entry midwifery on October 6th at its
 13 committee meeting, and determined the applicant meets
 14 minimum requirements for renewal to practice as a direct-
 15 entry midwifery licensee in Maryland pursuant to Maryland
 16 Code Annotated Health Occupations 8-6(c)-18 and COMAR
 17 10.64.01.17.
 18 MR. HICKS: Is there a motion to approve the
 19 renewal of license to practice direct-entry midwifery for
 20 Marilee Pinkleton, DEM00009?
 21 MS. STEINBERG: So moved. Steinberg.

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1 MR. HICKS: Steinberg.
 2 MS. HAYWARD: Hayward.
 3 MR. HICKS: All in favor?
 4 ALL: Aye.
 5 MR. HICKS: Opposed?
 6 (No oppositions)
 7 MR. HICKS: Motion carries.
 8 MS. MENTZER: 8A.3 is application for renewal
 9 of a license to practice direct-entry midwifery submitted
 10 by Rachel Cipryk, LDEM, DEM License Number DEM00022. The
 11 committee reviewed the application submitted by Ms.
 12 Cipryk at its October 6th Open Session Committee Meeting
 13 and determined that the applicant meets minimum
 14 requirements for renewal of license to practice direct-
 15 entry midwifery in Maryland according to Maryland Code
 16 Health Occupations 8-6(c)-18 and COMAR 10.64.01.17.
 17 MR. HICKS: Motion to approve the renewal of
 18 license to practice direct-entry midwifery for Rachel
 19 Cipryk, DEM00022?
 20 MS. ROBIN HILL: So moved. Dr. Robin Hill.
 21 MR. HICKS: Dr. Robin Hill.

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1 MS. CASSIDY: Cassidy.
 2 MR. HICKS: Cassidy. All in favor?
 3 ALL: Aye.
 4 MR. HICKS: Opposed?
 5 (No oppositions)
 6 MR. HICKS: Motion carries.
 7 MS. MENTZER: 8A.4 is a request for renewal of
 8 a license to practice direct-entry midwifery application
 9 submitted to the Board by Tess Brody, LDEM, License
 10 Number DEM00029. The committee reviewed this applicant's
 11 submitted application at our October 6th Open Session
 12 Committee Meeting and has determined that the applicant
 13 meets minimum requirements pursuant to Annotated Code of
 14 Maryland Health Occupations Section
 15 8-6(c)-18 and COMAR Regulation 10.64.01.17.
 16 MR. HICKS: Motion to approve the renewal of
 17 license to practice direct-entry midwifery for Tess
 18 Brody, DEM00029?
 19 MS. STEINBERG: So moved. Steinberg.
 20 MR. HICKS: Steinberg.
 21 MS. HAYWARD: Second.

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1 MR. HICKS: Hayward. All in favor?
 2 ALL: Aye.
 3 MR. HICKS: Opposed?
 4 (No oppositions)
 5 MR. HICKS: Motion carries.
 6 MS. MENTZER: 8A.5 is an application submitted
 7 for renewal of a license to practice
 8 direct-entry midwifery for Paige Barocca, LDEM, License
 9 Number DEM00021. The committee reviewed Ms. Paige
 10 Barocca's application for renewal at its October 6th Open
 11 Session meeting and has determined Ms. Barocca meets the
 12 minimum requirements in COMAR 10.64.01.17 and pursuant to
 13 Maryland Code Annotated Health Occupation Section 8-6(c)-
 14 18.
 15 MR. HICKS: Is there a motion to approve the
 16 renewal of license to practice direct-entry midwifery for
 17 Paige Barocca, DEM00021?
 18 MS. ROBIN HILL: So moved. Dr. Robin Hill.
 19 MR. HICKS: Dr. Robin Hill.
 20 MS. CASSIDY: Cassidy.
 21 MR. HICKS: Cassidy. All in favor?

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1 ALL: Aye.
 2 MR. HICKS: Opposed?
 3 (No oppositions)
 4 MR. HICKS: Motion carries.
 5 MS. MENTZER: 8A.6 is an application submitted
 6 by Amy E. Miller, LDEM. License Number DEM00013 for
 7 renewal of a license to practice
 8 direct-entry midwifery. The committee reviewed Ms. Amy
 9 Miller's application at its October 6th committee meeting
 10 in open session and determined the applicant meets
 11 minimum requirements for renewal of a license pursuant to
 12 COMAR 10.64.01.17 and Maryland Code Annotated Health
 13 Occupation Section 8-6(c)-18.
 14 MR. HICKS: Is there a motion to approve the
 15 renewal of license to practice direct-entry midwifery for
 16 Amy E. Miller, DEM00013?
 17 MS. HAYWARD: So moved.
 18 MR. HICKS: Hayward.
 19 MS. GIBBONS-BAKER: Gibbons-Baker.
 20 MR. HICKS: Gibbons-Baker. All in favor?
 21 ALL: Aye.

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1 MR. HICKS: Opposed?
 2 (No oppositions)
 3 MR. HICKS: Motion carries.
 4 MS. MENTZER: 8A.7 is application submitted by
 5 Deanna Kopf, LDEM, License Number DEM00002. The
 6 committee reviewed this application at its October 6th
 7 Open Session Committee Meeting and found the applicant
 8 meets the minimum requirements for renewal of a license
 9 to practice direct-entry midwifery pursuant to Maryland
 10 Code Annotated Health Occupations Section 8-6(c)-18 and
 11 COMAR 10.64.01.17.
 12 MR. HICKS: Is there a motion to approve the
 13 renewal of license to practice direct-entry midwifery for
 14 Deanna Kopf, LDEM, DEM00002?
 15 MS. STEINBERG: Steinberg.
 16 MR. HICKS: Steinberg.
 17 MS. HAYWARD: Hayward.
 18 MR. HICKS: Hayward. All in favor?
 19 ALL: Aye.
 20 MR. HICKS: Opposed?
 21 (No oppositions)

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1 MR. HICKS: Motion carries.

2 MS. MENTZER: Moving on to 8A.8, this is an

3 application received from Brittany Coffman, License

4 Number DEM00019. The committee reviewed this application

5 for renewal at its October 6th Open Session Committee

6 Meeting and determined the applicant meets minimum

7 requirements for renewal of a license to practice direct-

8 entry midwifery in Maryland according to Maryland Code

9 Annotated Health Occupations Section

10 8-6(c)-18 and COMAR 10.64.01.17.

11 MR. HICKS: Is there a motion to accept the

12 renewal of license to practice direct-entry midwifery for

13 Brittany Coffman, DEM00019?

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

15 MR. HICKS: Dr. Robin Hill.

16 MS. STEINBERG: Steinberg.

17 MR. HICKS: Steinberg. All in favor?

18 ALL: Aye.

19 MR. HICKS: Opposed?

20 (No oppositions)

21 MR. HICKS: Motion carries.

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1 MS. MENTZER: 8A.9 is Elizabeth O’Shea’s

2 application for renewal of a license to practice

3 direct-entry midwifery, License Number DEM00006. The

4 committee reviewed this application at its October 6th

5 Open Session Committee Meeting and found the applicant

6 meets minimum requirements for renewal of a license to

7 practice direct-entry midwifery pursuant to Maryland Code

8 Annotated Health Occupations Section 8-6(c)-18 and COMAR

9 10.64.01.17.

10 MR. HICKS: Motion to approve the renewal of

11 license to practice direct-entry midwifery for Elizabeth

12 O’Shea, DEM00006?

13 MS. HAYWARD: Hayward.

14 MS. STEINBERG: So moved. Steinberg.

15 MR. HICKS: Hayward, Steinberg. All in favor?

16

17 ALL: Aye.

18 MR. HICKS: Opposed?

19 (No oppositions)

20 MR. HICKS: Motion carries.

21 MS. MENTZER: 8A.10 is application received

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1 from Grace Mueller, LDEM, License Number DEM00016. The

2 committee reviewed this application for renewal at its

3 October 6, 2023 Open Session Committee Meeting and found

4 the applicant meets minimum requirements for renewal of a

5 license to practice direct-entry midwifery in Maryland

6 pursuant to Maryland Code Annotated Health Occupations

7 Section 8-6(c)-18 and COMAR 10.64.01.17.

8 MS. TURNER: Do I have approval for Grace L.

9 Mueller?

10 MS. ROBIN HILL: So moved. Dr. Robin Hill.

11 MS. CASSIDY: Cassidy.

12 MS. TURNER: Thank you. All in favor?

13 ALL: Aye.

14 MS. TURNER: Opposed?

15 (No oppositions)

16 MS. TURNER: Motion carries.

17 MS. MENTZER: 8A.11 is Rebecca Banks’

18 application for renewal of a license to practice

19 direct-entry midwifery, License Number DEM00018. The

20 committee reviewed this applicant’s renewal application

21 at its October 6th Open Session Committee Meeting and

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1 found the applicant meets minimum requirements for

2 renewal of a license to practice direct-entry midwifery

3 in Maryland pursuant to Maryland Code Annotated Health

4 Occupations Section 8-6(c)-18 and COMAR 10.64.01.17.

5 MS. TURNER: Do I have approval for Rebecca

6 Banks?

7 MS. STEINBERG: So moved. Steinberg.

8 MS. CASSIDY: Cassidy.

9 MS. TURNER: All in favor?

10 ALL: Aye.

11 MS. TURNER: Opposed?

12 (No oppositions)

13 MS. TURNER: Motion carries.

14 MS. MENTZER: Moving on to 8A.12. This is an

15 application for renewal of a license to practice direct-

16 entry midwifery submitted by Caitlin Manela, License

17 Number DEM00039. This application was reviewed by the

18 committee at its October 6th Open Session Committee

19 Meeting and found the applicant meets minimum

20 requirements for licensure renewal to practice direct-

21 entry midwifery in Maryland pursuant to Maryland Code

<p style="text-align: right;">Page 94</p> <p>1 Annotated Health Occupation Section 8-6(c)-18 and COMAR 2 10.64.01.17. 3 MS. TURNER: Do I have approval for Caitlin 4 Manela? 5 MS. GIBBONS-BAKER: So moved. 6 MS. TURNER: Gibbons-Baker. 7 MS. CASSIDY: Cassidy. 8 MS. TURNER: Cassidy. All in favor? 9 ALL: Aye. 10 MS. TURNER: Opposed? 11 (No oppositions) 12 MS. TURNER: Motion passes. 13 MS. MENTZER: 8A.13 is application for renewal 14 of a license to practice direct-entry midwifery received 15 from Karen Webster, LDEM, License Number DEM00008. The 16 committee reviewed this application initially at its 17 October 6, 2023, and again at its October 20, 2023 Open 18 Session Committee Meetings, and has determined the 19 applicant meets minimum requirements for license renewal 20 to practice direct-entry midwifery in Maryland pursuant 21 to Maryland Code Annotated Health Occupation Section 8-</p>	<p style="text-align: right;">Page 96</p> <p>1 MS. STEINBERG: So moved. Steinberg. 2 MS. TURNER: Steinberg. 3 MS. ROBIN HILL: Dr. Robin Hill. 4 MS. TURNER: Dr. Hill. All in favor? 5 ALL: Aye. 6 MS. TURNER: Opposed? 7 (No oppositions) 8 MS. TURNER: Motion passes. 9 MS. MENTZER: 8A.15 is Luisely Melecio 10 Zambrano. Her license number is DEM00038. The committee 11 reviewed this applicant's renewal application to practice 12 direct-entry midwifery in Maryland, and found the 13 applicant meets minimum requirements for renewal pursuant 14 to requirements in Maryland Code Annotated Health 15 Occupation Section 8-6(c)-18 and COMAR 10.64.01.17. 16 MS. ROBIN HILL: Could you check the license 17 number because our paper says 37, she said 38. 18 MS. MENTZER: Her license number is DEM00037. 19 MS. TURNER: Thank you, Dr. Hill. 20 MS. ROBIN HILL: So moved. Dr. Robin Hill. 21 MS. CASSIDY: Cassidy.</p>
<p style="text-align: right;">Page 95</p> <p>1 6(c)-18 and COMAR 10.64.01.17. 2 MS. TURNER: Do I have approval for Karen 3 Webster? 4 MS. HAYWARD: Hayward. 5 MS. TURNER: Hayward. 6 MS. STEINBERG: Steinberg. 7 MS. TURNER: Steinberg. All in favor? 8 ALL: Aye. 9 MR. TURNER: Opposed? 10 (No oppositions) 11 MS. TURNER: Motion passes. 12 MS. MENTZER: 8A.14 is Felicia McMullen, 13 License Number DEM00038, submitted a renewal application 14 to practice direct-entry midwifery at its October 20, 15 2023 meeting. The committee determined that the 16 applicant meets minimum requirements for a license to 17 practice direct-entry midwifery in Maryland pursuant to 18 Maryland Code Annotated Health Occupation Section 19 n 8-6(c)-18 and COMAR 10.64.01.17. 20 MS. TURNER: Do I have approval for renewal for 21 Felicia McMullen?</p>	<p style="text-align: right;">Page 97</p> <p>1 MS. TURNER: Dr. Hill, Cassidy. All in favor? 2 ALL: Aye. 3 MS. TURNER: Opposed? 4 (No oppositions) 5 MS. TURNER: Motion passes. 6 MS. MENTZER: 8A.16 is Elizabeth Reiner's 7 application submitted to the Direct-Entry Midwifery 8 Advisory Committee for renewal at its October 20, 2023 9 Open Session Committee Meeting. The committee found this 10 application for Elizabeth Reiner, License Number 11 DEM00007, to be in compliance with meeting minimum 12 requirements for renewal of a license to practice direct- 13 entry midwifery in Maryland according to COMAR 14 10.64.01.17 and Maryland Code Annotated Health Occupation 15 Section 8-6(c)-18. 16 MR. HICKS: Is there a motion to approve the 17 renewal of license to practice direct-entry midwifery for 18 Elizabeth Reiner, DEM00007? 19 MS. ROBIN HILL: So moved. Dr. Robin Hill. 20 MR. HICKS: Dr. Robin Hill. 21 MS. HAYWARD: Second. Hayward.</p>

<p style="text-align: right;">Page 98</p> <p>1 MR. HICKS: Hayward. All in favor?</p> <p>2 ALL: Aye.</p> <p>3 MR. HICKS: Opposed?</p> <p>4 (No oppositions)</p> <p>5 MR. HICKS: Motion carries.</p> <p>6 MS. MENTZER: 8A.17 is Chloe French, License</p> <p>7 Number DEM00032. The committee reviewed Ms. Chloe</p> <p>8 French’s application for renewal of license to practice</p> <p>9 direct-entry midwifery in Maryland at its October 20,</p> <p>10 2023 Open Session Committee Meeting, and found the</p> <p>11 applicant meets minimum requirements for renewal of a</p> <p>12 license to practice direct-entry midwifery in Maryland</p> <p>13 pursuant to Maryland Code Annotated Health Occupation</p> <p>14 Section 8-6(c)-8 and COMAR 10.64.01.17.</p> <p>15 MR. HICKS: Motion to accept the application</p> <p>16 for renewal of license to practice direct-entry midwifery</p> <p>17 for Chloe French, DEM00032?</p> <p>18 MS. LECHLITER: Lechlitter.</p> <p>19 MR. HICKS: Lechlitter.</p> <p>20 MS. TURNER: Turner.</p> <p>21 MR. HICKS: Turner. All in favor?</p>	<p style="text-align: right;">Page 100</p> <p>1 (No oppositions)</p> <p>2 MR. HICKS: Motion carries.</p> <p>3 MS. MENTZER: Moving on to Item B, a request</p> <p>4 for approval of application of renewal of a license to</p> <p>5 practice electrology.</p> <p>6 Starting with 8B.1 is Mary Della Davis, License</p> <p>7 Number E01228. The committee reviewed this application</p> <p>8 at its September 13th and October 11th Open Session</p> <p>9 Committee Meetings, and determined the applicant meets</p> <p>10 minimum requirements according to Maryland Code Annotated</p> <p>11 Health Occupation Section 8-6(b)-14 and COMAR 10.53.02.05</p> <p>12 and COMAR 10.53.04 and 10.53.12.</p> <p>13 MR. HICKS: Motion to accept the application</p> <p>14 for renewal of a license to practice electrology for Mary</p> <p>15 Della Davis, E01228?</p> <p>16 MS. STEINBERG: So moved. Steinberg.</p> <p>17 MR. HICKS: Steinberg.</p> <p>18 MS. TURNER: Turner.</p> <p>19 MR. HICKS: Turner. All in favor?</p> <p>20 ALL: Aye.</p> <p>21 MR. HICKS: Opposed?</p>
<p style="text-align: right;">Page 99</p> <p>1 ALL: Aye.</p> <p>2 MR. HICKS: Opposed?</p> <p>3 (No oppositions)</p> <p>4 MR. HICKS: Motion carries.</p> <p>5 MS. MENTZER: 8A.18 is Anne Monson, License</p> <p>6 Number DEM00040. The committee reviewed this application</p> <p>7 for renewal of a license at its October 20, 2023 Open</p> <p>8 Session Meeting, and found that the applicant meets</p> <p>9 minimum requirements for renewal of a license to practice</p> <p>10 direct-entry midwifery in Maryland per Maryland Code</p> <p>11 Annotated Health Occupation Section 8-6(c)-18 and COMAR</p> <p>12 10.64.01.17.</p> <p>13 MR. HICKS: Motion to approve the application</p> <p>14 of renewal of license to practice</p> <p>15 direct-entry midwifery for Anne Monson, DEM00040?</p> <p>16 MS. ROBIN HILL: So moved. Dr. Robin Hill.</p> <p>17 MR. HICKS: Dr. Robin Hill.</p> <p>18 MS. HAYWARD: Second. Hayward.</p> <p>19 MR. HICKS: Hayward. All in favor?</p> <p>20 ALL: Aye.</p> <p>21 MR. HICKS: Opposed?</p>	<p style="text-align: right;">Page 101</p> <p>1 (No oppositions)</p> <p>2 MR. HICKS: Motion carries.</p> <p>3 MS. MENTZER: 8B.2 is Maria Moreira, licensed</p> <p>4 electrologist, License Number E01381. The committee</p> <p>5 reviewed this application on its September</p> <p>6 13th and October 11th Open Session Committee Meeting and</p> <p>7 found the applicant to be in compliance with meeting</p> <p>8 minimum requirements for renewal of a license to practice</p> <p>9 as a licensed electrologist in Maryland per Maryland Code</p> <p>10 Annotated Health Occupation Section 8-6(b)-14 and all</p> <p>11 COMAR Regulations 10.53.02.05, COMAR 10.53.04, and COMAR</p> <p>12 10.53.12.</p> <p>13 MR. HICKS: Motion to approve the application</p> <p>14 of renewal for electrology for Maria Moreira, E01381?</p> <p>15 MS. ROBIN HILL: So moved. Dr. Robin Hill.</p> <p>16 MR. HICKS: Dr. Robin Hill.</p> <p>17 MS. TURNER: Turner.</p> <p>18 MR. HICKS: Turner. All in favor?</p> <p>19 ALL: Aye.</p> <p>20 MR. HICKS: Opposed?</p> <p>21 (No oppositions)</p>

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1 MR. HICKS: Motion carries.

2 MS. MENTZER: 8B.3 is Houri Khloud, licensed

3 electrologist, License Number E01462. The committee

4 reviewed this application at it Electrology Practice

5 Committee Open Session Meeting on October 11th, and found

6 the applicant meets minimum requirements for renewal of a

7 license to practice as a licensed electrologist in

8 Maryland according Maryland Code Annotated Health

9 Occupation Section 8-6(b)-14 and COMAR Regulations

10 10.53.02.05, 10.53.04, and 10.53.12.

11 MR. HICKS: Motion to accept the renewal

12 application for electrology for Houri Khloud, E01462?

13 MS. STEINBERG: So moved. Steinberg.

14 MR. HICKS: Steinberg.

15 MS. LYONS: Second. Lyons.

16 MR. HICKS: Lyons. All in favor?

17 ALL: Aye.

18 MR. HICKS: Opposed?

19 (No oppositions)

20 MR. HICKS: Motion carries.

21 MS. MENTZER: 8B.4 is Donna Yaglom, licensed

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1 electrologist, License Number E01134. The request to the

2 Board accept the committee’s recommendation for review of

3 this application of its October 11th committee meeting as

4 meeting minimum requirements for renewal of a license to

5 practice as a licensed electrologist in Maryland per

6 Maryland Code Annotated 8-6(b)-14 and COMAR Regulations

7 10.53.02.05, 10.53.04, and 10.53.12.

8 MR. HICKS: Motion to accept the renewal

9 application for electrology for Donna Yaglom, E01134?

10 MS. STEINBERG: So moved. Steinberg.

11 MR. HICKS: Steinberg.

12 MS. LYONS: Lyons.

13 MR. HICKS: Lyons. All in favor?

14 ALL: Aye.

15 MR. HICKS: Opposed?

16 (No oppositions)

17 MR. HICKS: Motion carries.

18 MS. MENTZER: 8B.5 is Chablis Lakes, License

19 Number E01472. The committee reviewed this application

20 for renewal of a license to practice electrology at its

21 October 11th Open Session Committee Meeting, and found

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1 the applicant meets the minimum requirements to practice

2 as a licensed electrologist in Maryland per Maryland

3 Annotated Health Occupation Section 8-6(b)-14 and COMAR

4 Regulations 10.53.02.05, 10.53.04, and 10.53.12.

5 MR. HICKS: Motion to accept the renewal

6 application for electrology for Chablis Lakes, E01472?

7 MS. GIBBONS-BAKER: So moved.

8 MR. HICKS: Gibbons-Baker.

9 MS. CASSIDY: Cassidy. All in favor?

10 ALL: Aye.

11 MR. HICKS: Opposed?

12 (No oppositions)

13 MR. HICKS: Motion carries.

14 MS. MENTZER: 8B.6 is Leora Sonnenberg, License

15 Number E01469, requests to the Board to accept

16 Electrology Practice Committee’s recommendation per its

17 review on October 11th of the renewal application that

18 the applicant meets the minimum requirements for renewal

19 of license to practice as a licensed electrologist in

20 Maryland per Maryland Code Annotated Health Occupation

21 Section 8-6(b)-14 and COMAR Regulations 10.53.02.05.

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1 10.52.04, and 10.53.12.

2 MR. HICKS: Motion to approve the renewal of

3 application for electrology for Leora Sonnenberg, E01469?

4 MS. GIBBONS-BAKER: So moved.

5 MR. HICKS: Gibbons-Baker.

6 MS. TURNER: Turner.

7 MR. HICKS: Turner. All in favor?

8 ALL: Aye.

9 MR. HICKS: Opposed?

10 (No oppositions)

11 MR. HICKS: Motion carries.

12 MS. MENTZER: 8B.7, application for renewal of

13 license to practice electrology received to the Board

14 from Regina Chase, licensed electrologist, License Number

15 E01397. The committee reviewed this renewal application

16 at its October 11th Open Session Meeting, and determined

17 the applicant meets minimum requirements for renewal of

18 license to practice as an electrologist per Maryland Code

19 Annotated Health Occupation Section

20 8-6(b)-14 and COMAR Regulations 10.53.02.05, 10.53.04,

21 and 10.53.12.

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1 MR. HICKS: Motion to approve the renewal
 2 application for electrology for Regina Chase, E01397?
 3 MS. LECHLITER: So moved. Lechlitter.
 4 MR. HICKS: Lechlitter.
 5 MS. GIBBONS-BAKER: Second.
 6 MR. HICKS: Gibbons-Baker. All in favor?
 7 ALL: Aye.
 8 MR. HICKS: Opposed?
 9 (No oppositions)
 10 MR. HICKS: Motion carries.
 11 MS. MENTZER: 8B.8, application received for
 12 renewal of a license to practice electrology for Eileen
 13 Collins. She is a licensed electrologist, License Number
 14 E01343; and she's also renewing her license electrology
 15 instructor license, License Number e01476. The committee
 16 reviewed the applicant's renewal application at its
 17 October 11th Open Session Committee Meeting, and found
 18 the applicant meets minimum requirements for Maryland
 19 Code Annotated Health Occupation Section 8-6(b)-14 and
 20 COMAR 10.53.02.05, 10.53.04, and COMAR 10.53.12.
 21 MR. HICKS: Motion to approve the electrology

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1 renewal application for Eileen Collins, E01343 and
 2 E01476?
 3 MS. LECHLITER: So moved. Lechlitter.
 4 MR. HICKS: Lechlitter.
 5 MS. STEINBERG: Steinberg.
 6 MR. HICKS: Steinberg. All in favor?
 7 ALL: Aye.
 8 MR. HICKS: Opposed?
 9 (No oppositions)
 10 MR. HICKS: Motion carries.
 11 MS. MENTZER: 8B.9 is Ms. Nancy Willis'
 12 application, License Number E01062, to renew her
 13 electrology license. The committee met on October
 14 11th and reviewed the applicant's renewal application and
 15 found that the applicant to be meeting minimum
 16 requirements for license to practice as a licensed
 17 electrologist per Maryland Code Annotated Health
 18 Occupation Section 8-6(b)-14 and COMAR Regulations
 19 10.53.02.05, 10.53.04, and 10.53.12.
 20 MR. HICKS: Motion to approve the renewal
 21 application for electrology for Nancy Willis, E01062?

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1 MS. TURNER: So moved. Turner.
 2 MR. HICKS: Turner.
 3 MS. CASSIDY: Cassidy.
 4 MR. HICKS: Cassidy. All in favor?
 5 ALL: Aye.
 6 MR. HICKS: Opposed?
 7 (No oppositions)
 8 MR. HICKS: Motion carries.
 9 MS. MENTZER: 8B.10 is Mary Ellen Ebersole's
 10 application to renew her license, License Number E01074,
 11 to practice as a licensed electrologist. The committee
 12 reviewed this application at its October 11th committee
 13 meeting, and determined the renewal application for Mary
 14 Ellen Ebersole meets the minimum requirements pursuant to
 15 Maryland Code Annotated Health Occupation 8-6(b)-14 and
 16 COMAR Regulations 10.53.02.05, 10.53.04, and 10.53.12.
 17 MR. HICKS: Motion to approve the renewal
 18 application for Mary Ellen Ebersole, E01074?
 19 MR. TURNER: So moved. Turner.
 20 MR. HICKS: Turner.
 21 MS. HAYWARD: Hayward.

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1 MR. HICKS: Hayward. All in favor?
 2 ALL: Aye.
 3 MR. HICKS: Opposed?
 4 (No oppositions)
 5 MR. HICKS: Motion carries.
 6 MS. MENTZER: 8B.11, Stacy Easton, License
 7 Number E01215. The committee reviewed this application
 8 for renewal of its license to practice electrology at its
 9 October 11, 2023 Open Session Committee Meeting, and
 10 found that the application meets minimum requirements in
 11 Maryland Code Annotated Health Occupations Section
 12 8-6(b)-14 and COMAR Regulations 10.53.02.05, 10.53.04,
 13 and 10.53.12.
 14 MR. HICKS: Motion to approve the renewal
 15 application for Stacey Easton, E01215?
 16 MS. LECHLIER: So moved. Lechlitter.
 17 MR. HICKS: Lechlitter.
 18 MS. STEINBERG: Steinberg. All in favor?
 19 ALL: Aye.
 20 MR. HICKS: Opposed?
 21 (No oppositions)

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1 MR. HICKS: Motion carries.

2 MS. MENTZER: Debra Larson, 8B.12, License

3 Number E01003. The committee reviewed Ms. Debra Larson's

4 application for renewal to practice electrology at its

5 October 11th Open Session Committee Meeting, and found

6 the applicant meets minimum requirements for renewal of

7 license to practice electrology per Maryland Code

8 Annotated Health Occupation Section 9-6(b)-14 and COMAR

9 Regulations 10.53.02.05, 10.53.04, and 10.53.12.

10 MR. HICKS: Motion to approve the renewal

11 application for Debra Larson, E01003?

12 MS. HAYWARD: Hayward.

13 MR. HICKS: Hayward.

14 MS. CASSIDY: Cassidy.

15 MR. HICKS: Cassidy. All in favor?

16 ALL: Aye.

17 MR. HICKS: Opposed?

18 (No oppositions)

19 MR. HICKS: Motion carries.

20 MS. MENTZER: 8B.13, application received to

21 the Board from Angelina Waight, licensed electrologist,

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1 License Number E01096. The committee reviewed this

2 application at its October 11th Open Session Committee

3 Meeting, and determined the applicant meets minimum

4 requirements for renewal of license to practice as a

5 licensed electrologist in Maryland Code Annotated Health

6 Occupation Section 8-6(b)-14 and COMAR Regulations

7 10.53.02.05, 10.53.04, and 10.53.12.

8 MR. HICKS: Motion to accept the renewal

9 application for Angelina Waight, E01096?

10 MS. LECHLITER: Lechliter.

11 MR. HICKS: Lechliter.

12 MS. STEINBERG: Steinberg.

13 MR. HICKS: Steinberg. All in favor?

14 ALL: Aye.

15 MR. HICKS: Opposed?

16 (No oppositions)

17 MR. HICKS: Motion carries.

18 MS. MENTZER: 8B.14, application received from

19 renewal of license to practice as a licensed

20 electrologist received from Jacklynn Tadros, licensed

21 electrologist, License Number E01478. The committee

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1 reviewed this application at its October 11th Open

2 Session Committee Meeting, and determined the applicant

3 meets minimum requirements for renewal of a license to

4 practice as an electrologist per Maryland Code Annotated

5 Health Occupation Section 8-6(b)-14 and COMAR Regulations

6 10.53.02.05, 10.53.04, and 10.53.12.

7 MR. HICKS: Motion to approve the renewal

8 application for Jacklynn Tadros, E01478?

9 MS. GIBBONS-BAKER: So moved.

10 MS. HAYWARD: Second.

11 MR. HICKS: Gibbons-Baker, Hayward. All in

12 favor?

13 ALL: Aye.

14 MR. HICKS: Opposed?

15 (No oppositions)

16 MR. HICKS: Motion carries.

17 MS. MENTZER: 8B.15, Fatima Wachuku, License

18 Number E01479. The committee reviewed this application

19 at its October 11th Open Session Committee Meeting, and

20 found the applicant meets minimum requirements to renew

21 her license as a licensed electrologist per Maryland Code

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1 Annotated Health Occupation Section 8-6(b)-14 and COMAR

2 Regulations 10.53.02.05, 10.53.04, 10.53.12.

3 MR. HICKS: Motion to approve the renewal

4 application for Fatima Wachuku, E01479?

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

6 MR. HICKS: Dr. Hill.

7 MS. LECHLITER: Lechliter.

8 MR. HICKS: Lechliter. All in favor?

9 ALL: Aye.

10 MR. HICKS: Opposed?

11 (No oppositions)

12 MR. HICKS: Motion carries.

13 MS. MENTZER: 8B.16, this application is

14 received from Maria Denmark, License Number E01217. The

15 committee reviewed this application at its October 11,

16 2023 Open Session Committee Meeting, and determined the

17 applicant meets minimum requirements to renew the license

18 to practice as a licensed electrologist in Maryland per

19 Maryland Code Annotated Health Occupation Section 8-6(b)-

20 14 and COMAR Regulations 10.53.02.05, 10.53.04, and

21 10.53.12.

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1 MR. HICKS: Motion to approve the renewal
 2 application for Maria Denmark, E01217?
 3 MS. HAYWARD: Hayward.
 4 MR. HICKS: Hayward.
 5 MS. LYONS: Lyons.
 6 MR. HICKS: Lyons. All in favor?
 7 ALL: Aye.
 8 MR. HICKS: Opposed?
 9 (No oppositions)
 10 MR. HICKS: Motion carries.
 11 MS. MENTZER: 8B.17, Ismet Haq, licensed
 12 electrologist, License Number E01304. The committee
 13 reviewed this application at its October 11th Open
 14 Session Committee Meeting, and determined the applicant
 15 meets minimum requirements for renewal of license to
 16 practice electrology in Maryland pursuant to Maryland
 17 Code Annotated Health Occupation Section 8-6(b)-14 and
 18 COMAR Regulations 10.53.02.05, 10.53.04, and 10.53.12.
 19 MR. HICKS: Motion to approve renewal
 20 application for Ismet Haq, E01304?
 21 MS. ROBIN HILL: Dr. Robin Hill.

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1 MR. HICKS: Dr. Hill.
 2 MS. TURNER: Turner.
 3 MR. HICKS: Turner. All in favor?
 4 ALL: Aye.
 5 MR. HICKS: Opposed?
 6 (No oppositions)
 7 MR. HICKS: Motion carries.
 8 MS. MENTZER: 8B.18, Elizabeth Spagnolo,
 9 License Number E01366, licensed electrologist. Renewal
 10 application reviewed by the committee at its October
 11 11th committee meeting, and determined that the applicant
 12 meets minimum requirements for renewal of license to
 13 practice as a licensed electrologist in Maryland pursuant
 14 to Maryland Code Annotated Health Occupation Section 8-
 15 6(b)-14 and COMAR Regulations 10.53.02.05, 10.53.04, and
 16 10.53.12.
 17 MR. HICKS: Motion to approve the renewal
 18 application for Elizabeth Spagnolo, E01366?
 19 MS. STEINBERG: Steinberg.
 20 MS. CASSIDY: Cassidy.
 21 MR. HICKS: Steinberg, Cassidy. All in favor?

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1 ALL: Aye.
 2 MR. HICKS: Opposed?
 3 (No oppositions)
 4 MR. HICKS: Motion carries.
 5 MS. MENTZER: 8B.19, Baila Engelsberg, licensed
 6 electrologist, License Number E01471. The committee
 7 reviewed this application for renewal at its October 11th
 8 Open Session Meeting, and found the applicant meets the
 9 minimum requirements pursuant to Maryland Code Annotated
 10 Health Occupation Section
 11 8-6(b)-14 and COMAR Regulations 10.53.02.05, 10.53.04,
 12 and COMAR 10.53.12.
 13 MR. HICKS: Motion to approve the renewal
 14 application for Baila Engelsberg, E01471?
 15 MS. LYONS: Lyons.
 16 MR. HICKS: Lyons.
 17 MS. TURNER: Turner.
 18 MR. HICKS: Turner. All in favor?
 19 ALL: Aye.
 20 MR. HICKS: Opposed?
 21 (No oppositions)

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1 MR. HICKS: Motion carries.
 2 MS. MENTZER: 8B.20, Deborah Olson, application
 3 for renewal of a license to practice electrology, License
 4 Number E01303. This was reviewed at its October 11th
 5 Open Session Committee Meeting, and determined the
 6 applicant meets minimum requirements for renewal of
 7 license to practice as an electrologist in Maryland per
 8 Maryland Code Annotated Health Occupation Section 8-6(b)-
 9 14 and COMAR Regulations 10.53.02.05, 10.53.04, and
 10 10.53.12.
 11 MR. HICKS: Motion to approve the renewal
 12 application for Deborah Olson, E01303?
 13 MS. GIBBONS-BAKER: So moved.
 14 MR. HICKS: Gibbons-Baker.
 15 MS. CASSIDY: Cassidy.
 16 MR. HICKS: Cassidy. All in favor?
 17 ALL: Aye.
 18 MR. HICKS: Opposed?
 19 (No oppositions)
 20 MR. HICKS: Motion carries.
 21 MS. MENTZER: 8B.21, Pamela Croghan, licensed

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1 electrologist, License Number E01257. The committee
 2 reviewed this application at its October 11th committee
 3 meeting, and found that the applicant meets minimum
 4 requirements for renewal of license to practice
 5 electrology in Maryland pursuant to Maryland Code
 6 Annotated Health Occupation Section 8-6(b)-14 and COMAR
 7 Regulations 10.53.02.05, 10.53.04, and 10.53.12.
 8 MR. HICKS: Motion to approve the renewal
 9 application for Pamela Croghan, E01257?
 10 MS. ROBIN HILL: So moved. Dr. Robin Hill.
 11 MR. HICKS: Dr. Hill.
 12 MS. TURNER: 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: 8B.22, Rhenatta Kohlhaus,
 19 licensed electrologist, License Number E01473. The
 20 committee reviewed this application for renewal of
 21 license to practice electrology at its October 11th and

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1 October 18th committee meetings Open Session, and found
 2 that the applicant meets minimum requirements pursuant to
 3 Maryland Code Annotated Health Occupation Section
 4 8-6(b)-14 and COMAR Regulations 10.53.02.05, 10.53.04,
 5 and 10.53.12.
 6 MR. HICKS: Approval for renewal for Rhenatta
 7 Kohlhaus, E01473?
 8 MS. ROBIN HILL: So moved. Dr. Robin Hill.
 9 MR. HICKS: Dr. Robin Hill.
 10 MS. STEINBERG: Steinberg.
 11 MR. HICKS: Steinberg. All in favor?
 12 ALL: Aye.
 13 MR. HICKS: Opposed?
 14 (No oppositions)
 15 MR. HICKS: Motion carries.
 16 MS. MENTZER: 8B.23 is application received for
 17 renewal of a license to practice electrology from Barbara
 18 Baker, licensed electrologist, License Number E01300.
 19 The committee reviewed the application at its October
 20 11th and again at its October 18, 2023 Open Session
 21 Committee Meetings, and found the application meets

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1 minimum requirements for renewal of a license to practice
 2 as a licensed electrologist for renewal pursuant to COMAR
 3 10.53.02.05, 10.53.04, and 10.53.12 and Annotated Code of
 4 Maryland Health Occupation Section 8-6(b)-14.
 5 MR. HICKS: Motion to approve the renewal
 6 application for Barbara Baker, E01300?
 7 MS. TURNER: So moved. Turner.
 8 MR. HICKS: Turner.
 9 MS. HAYWARD: Hayward.
 10 MR. HICKS: Hayward. All in favor?
 11 ALL: Aye.
 12 MR. HICKS: Opposed?
 13 (No oppositions)
 14 MR. HICKS: Motion carries.
 15 MS. MENTZER: 8B.24 is Divya Dhokai, licensed
 16 electrologist, License Number E01216. The committee
 17 reviewed this application for renewal at its October 11th
 18 and October 18th committee meetings, and found the
 19 applicant meets minimum requirements to renew the license
 20 to practice as a licensed electrologist in Maryland per
 21 Maryland Code Annotated Health Occupation Section 8-6(b)-

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1 14 and COMAR Regulations 10.53.02.05, 10.53.04, and
 2 10.53.12.
 3 MR. HICKS: Motion to approve the renewal
 4 application for Divya Dhokai, E01216?
 5 MS. LECHLITER: Lechliter.
 6 MR. HICKS: Lechliter.
 7 MS. CASSIDY: CASSIDY.
 8 MR. HICKS: Cassidy. All in favor?
 9 ALL: Aye.
 10 MR. HICKS: Opposed?
 11 (No oppositions)
 12 MR. HICKS: Motion carries.
 13 MS. MENTZER: 8B.25 is an application received
 14 by the Board from Sally McAleer. She is a licensed
 15 electrologist, License Number E01290. She is also a
 16 licensed electrology instructor. So she is renewing
 17 both. It's under the same license number for the
 18 instructor, LEI, E01290, also. The committee reviewed
 19 this application at its October 18th Open Session
 20 Committee Meeting, and found the applicant meets the
 21 minimum requirements for renewal of a license to practice

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1 electrology and a licensed instructor of electrology
 2 pursuant to Health Occupation Section
 3 8-6(b)-14 and COMAR Regulations 10.53.02.05, 10.53.04,
 4 and 10.53.12.
 5 MR. HICKS: Motion to approve the renewal
 6 application for Sally McAleer for the electrology as well
 7 as the electrology instructor, E01290?
 8 MS. GIBBONS-BAKER: So moved.
 9 MR. HICKS: Gibbons-Baker.
 10 MS. HAYWARD: Hayward.
 11 MR. HICKS: Hayward. All in favor?
 12 ALL: Aye.
 13 MR. HICKS: Opposed?
 14 (No oppositions)
 15 MR. HICKS: Motion carries.
 16 MS. MENTZER: 8B.26 is Ellen Johnson, License
 17 Number E01475. The committee reviewed the application
 18 for renewal of license to practice electrology at its
 19 October 11th and October 18th Open Session Committee
 20 Meetings, and has determined that the applicant meets
 21 minimum requirements for renewal of a license to practice

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1 electrology pursuant to Maryland Code Annotated Health
 2 Occupation Section 8-6(b)-14 and COMAR Regulations
 3 10.53.02.05, 10.53.04, and 10.53.12.
 4 MR. HICKS: Motion to approve the renewal
 5 application for electrology for Ellen Johnson, E01475?
 6 MS. TURNER: Turner.
 7 MR. HICKS: Turner.
 8 MS. LECHLITER: Lechlitter.
 9 MR. HICKS: Lechlitter. All in favor?
 10 ALL: Aye.
 11 MR. HICKS: Opposed?
 12 (No oppositions)
 13 MR. HICKS: Motion carries.
 14 MS. MENTZER: 8B.27, application for renewal of
 15 electrology license received from Rebecca Simenowitz,
 16 licensed electrologist, License Number E01467. The
 17 committee reviewed this application at its October 11th
 18 and October 18th committee meetings open session, and
 19 determined the applicant meets minimum requirements
 20 pursuant to Maryland Code Annotated Health Occupation
 21 Section 8-6(b)-14 for license renewal, and all COMAR

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1 Regulations 10.53.02.05, 10.53.04, and 10.53.12.
 2 MR. HICKS: Motion to approve the renewal
 3 application for Rebecca Simenowitz, E01467?
 4 MS. ROBIN HILL: So moved. Dr. Robin Hill.
 5 MR. HICKS: Dr. Robin Hill.
 6 MS. CASSIDY: Cassidy.
 7 MR. HICKS: Cassidy. All in favor?
 8 ALL: Aye.
 9 MR. HICKS: Opposed?
 10 (No oppositions)
 11 MR. HICKS: Motion carries.
 12 MS. MENTZER: We have one additional
 13 application. It was a paper application that was
 14 provided to you today. It was received this morning.
 15 This individual submitted the original
 16 application for renewal of a license to practice
 17 electrology on September 7th. The committee reviewed
 18 this application at least at two of their committee
 19 meetings in October, and found that the application was
 20 missing a home address as well as contact information by
 21 email. So, I had to send a second application out via

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1 the U.S. Postal Service on October 12th, and it was just
 2 received back today. It has met all the minimum
 3 requirements. What was missing was a home address. So
 4 this is an example of an incomplete application, which
 5 many of these applications initially reviewed had to have
 6 a follow-up review with a submitted second application if
 7 anything was missing as far as the documents go. She did
 8 not include her home address, only her business address.
 9 After a phone conversation and explaining to her the
 10 necessity of having a home address on file, she did
 11 submit a second application with her home address. So
 12 now it is a complete application, and the committee
 13 believes she met all her minimum requirements for her
 14 renewal according to the regulations and the statute.
 15 So, the request is also to approve Sandra
 16 Wilson, License Number E01438, as meeting all the minimum
 17 requirements in Annotated Code of Maryland Section Health
 18 Occupation 8-6(b)-14 and COMAR Regulations 10.53.02.05,
 19 10.53.04, and 10.53.12.
 20 MR. HICKS: What was the last name?
 21 MS. MENTZER: Wilson, Sandra. License Number

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1 E01438.

2 MR. HICKS: Motion to approve the renewal

3 application for Sandra Wilson, E01438?

4 MS. ROBIN HILL: So moved. Dr. Robin Hill.

5 MR. HICKS: Dr. Robin Hill.

6 MS. TURNER: Turner.

7 MR. HICKS: Turner. All in favor?

8 ALL: Aye.

9 MR. HICKS: Opposed?

10 (No oppositions)

11 MR. HICKS: Motion carries.

12 MS. MENTZER: Moving on to 8C. 8C is a request

13 from the Electrology Practice Committee pursuant to

14 Annotated Code of Maryland Health Occupation Article

15 Title 8, Subtitle 6B, Section 8-6(b)-06-8. Review of the

16 application for approval of a Maryland electrology

17 education program submitted to the Board on September 27,

18 2023 by Ms. Eileen Collins, licensed electrologist and a

19 licensed electrology instructor, at its October

20 11th Open Session Committee Meeting with a recommendation

21 to the Board to accept and approve this application for

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1 approval of a Maryland electrology education program

2 identified as The Maryland Electrolysis Education Center,

3 Incorporated located at 300 Thomas Drive, Unit 3 and Unit

4 4, Laurel, Maryland 21707.

5 The Board's Practice and Education Committee

6 reviewed this same application submitted to the Board at

7 its October 13, 2023 with a recommendation to the Board

8 to accept and approve this application for approval to

9 the Maryland electrology education program identified as

10 The Maryland Electrolysis Education Center, Incorporated

11 located at 300 Thomas Drive, Unit 2 and Unit 3, Laurel

12 Maryland, 20707.

13 The Electrology Practice Committee and the

14 Board's Practice and Education Committee finds the

15 application meets the minimum regulatory requirements

16 pursuant to the Code of Maryland Health Occupation Title

17 8, Subtitle 8-6(b)-16, Electrology Education Program,

18 and all COMAR Regulations in COMAR Title 10, Subtitle

19 53, Chapter 06: Electrology Program, specifically COMAR

20 Regulations 10.53.06.01 through COMAR 10.53.06.

21 MR. HICKS: Motion to approve The Maryland

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1 Electrolysis Education Center, Incorporated, 300 Thomas

2 Drive, Unit 2 and Unit 3, Laurel, Maryland 20707 as a

3 Maryland electrology education program?

4 MS. STEINBERG: Steinberg.

5 MR. HICKS: Steinberg.

6 MS. HAYWARD: Hayward.

7 MR. HICKS: Hayward. All in favor?

8 ALL: Aye.

9 MR. HICKS: Opposed?

10 (No oppositions)

11 MR. HICKS: Motion carries.

12 MS. MENTZER: Moving on to 8D. As you may

13 recall, there was a request from the Board to have the

14 Electrology Practice Committee members conduct an onsite

15 visit to an electrology practice office located at

16 Phenix Salon Suites, 8661 Colesville Road, Number 129,

17 Silver Spring, Maryland 20912. It was the practice

18 office of Ms. Fatima Wachuku, licensed electrologist,

19 License Number E01479.

20 The report of the findings are attached to

21 this memo for your review if you have any questions.

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1 There were no negative findings from the September 19,

2 2023 site visit to Ms. Fatima Wachuku's office for

3 inspection of meeting all the requirements in the COMAR

4 regulations.

5 MR. HICKS: Is there a motion to accept the

6 Electrology Practice Committee's electrology office

7 inspection report for Fatima Wachuku, Phenix Salon

8 Suites, 8661 Colesville Road, Number 129, Silver Spring,

9 Maryland?

10 MS. ROBIN HILL: So moved. Dr. Robin Hill.

11 MR. HICKS: Dr. Robin Hill.

12 MS. HAYWARD: Second. Hayward.

13 MR. HICKS: Hayward. All in favor?

14 ALL: Aye.

15 MR. HICKS: Opposed?

16 (No oppositions)

17 MR. HICKS: Motion carries.

18 MS. MENTZER: And then, moving on to 8E.1.

19 8E.1 is a request from the Direct-Entry Midwifery to the

20 Board to consider whether they would accept the

21 committee's recommendation for approval of the National

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1 Ayurvedic Medical Association as a Board-approved
 2 provider for continuing education units for licensed
 3 direct-entry midwife to submit documentation of any CEU
 4 received from this organization with their application
 5 for renewal of a license to practice direct-entry
 6 midwifery. Attached is a flyer that explains what this
 7 organization is identified as, and there was an
 8 application that was submitted with CEUs from this
 9 organization.

10 The committee wanted to take this to the
 11 Board with a recommendation to see whether the Board
 12 would approve this organization as an approved provider.

13 MR. HICKS: Is there a motion from the Board
 14 to approve the Kerala Ayurveda Academy as a provider of
 15 continuing education units?

16 MS. GIBBONS-BAKER: So moved.
 17 MR. HICKS: Gibbons-Baker.
 18 MS. HAYWARD: Second. Hayward.
 19 MR. HICKS: All in favor?
 20 ALL: Aye.
 21 MR. HICKS: Opposed?

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1 (No oppositions)
 2 MR. HICKS: Motion carries.
 3 MS. MENTZER: Following that, we had an
 4 application where the applicant did submit documentation
 5 of CEUs from the organization that was just approved,
 6 the Kerala Ayurveda Academy. This application was
 7 reviewed by the Direct-Entry Midwifery Advisory
 8 Committee on October 6th and October 20th, submitted by
 9 Maureen McIver, licensed direct-entry midwife, License
 10 Number LDEM00031.

11 So, the committee is requesting that this
 12 applicant meets minimum requirements for the renewal of
 13 a license only if the Maryland Board of Nursing
 14 recognized them as a Board-approved continuing education
 15 provider pursuant to Annotated Code of Maryland Health
 16 Occupation Section 8-6(c)-18 and COMAR Regulations
 17 10.64.01.17. The applicant did submit an additional set
 18 of CEUs. I guess she was concerned maybe it wouldn't be
 19 approved, so she did submit an additional nine CEUs.
 20 This was just in my email this morning from a Board-
 21 approved provider of continuing education units for

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1 licensed direct-entry midwives. She does meet the
 2 minimum requirements for renewal for licensure.
 3 MR. HICKS: This is just for a renewal
 4 application, right?
 5 MS. MENTZER: A renewal application.
 6 MR. HICKS: Motion to approve the renewal
 7 application for license to practice direct-entry
 8 midwifery for Maureen McIver, DEM00031?
 9 MS. GIBBONS-BAKER: So moved.
 10 MR. HICKS: Gibbons-Baker.
 11 MS. TURNER: Turner.
 12 MR. HICKS: Turner. All in favor?
 13 ALL: Aye.
 14 MR. HICKS: Opposed?
 15 (No oppositions)
 16 MR. HICKS: Motion carries. Thank you,
 17 Monica. That was a lot.
 18 MS. MENTZER: Yes. And it is very difficult
 19 when they submit an incomplete application. It requires
 20 additional follow-up and additional review and
 21 additional time commitment for that to happen.

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1 MR. HICKS: Thank you for your work on that.
 2 We will move down to 10: Implicit Bias Training Program
 3 Recognition Request.
 4 MS. SCOTT: So, Healthstream is requesting
 5 the Board to recognize its implicit bias training
 6 program, entitled, "Implicit Bias in Healthcare."
 7 Is Germaine Broussard on the line?
 8 MS. BROUSSARD: Hi, Rhonda. Germaine is
 9 here, and I also have four other customers on the line
 10 with me.
 11 MS. SCOTT: Awesome. Can you give the Board
 12 just a brief overview of your program?
 13 MS. BROUSSARD: Yes. Thank you so much,
 14 Rhonda and Board, for allowing us to present our
 15 implicit bias course.
 16 There are four points that we will get to.
 17 I will discuss and introduce you to what Healthstream
 18 is, what our learn product is, and we will let you know
 19 about our Healthstream Foundation Department, and then
 20 we will discuss the "Implicit Bias in Healthcare"
 21 course, and the goals of that course.

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1 So, Healthstream was founded in 1990, and we
 2 are a public training company. We have over 1,000
 3 employees and are working with over 4,000 healthcare
 4 organizations. We are within their healthcare system.
 5 One of our flagship products is the Healthstream
 6 learning management system. We have a learning
 7 management system, and the name of that product is the
 8 Healthstream Learning Center, the HLC.
 9 So, as we develop and deliver clinical
 10 content as additional educational content we hope to
 11 distribute that via our HLC. So, the course that we
 12 have developed is a two-hour course on implicit bias
 13 training for healthcare professionals. That course will
 14 be posted and distributed via our HLC. Part of that
 15 with the HLC is that customers -- there's a variety of
 16 ways for customers to make access to the training, which
 17 is more than just the "Implicit Bias in Healthcare"
 18 training. One of the products that we do is Nurse Grid
 19 Learn, and within Nurse Grid Learn the learner can do an
 20 annual subscription, and they will get access to the
 21 thousands of our courses that help with their licensure

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1 renewal.
 2 And so, right now this course does have ACPM
 3 credit on it, but we did a thorough review of the
 4 content and it does also meet ACPME guidelines. And so,
 5 we are in the process of getting a ACPME national credit
 6 added to that course as well.
 7 And so, I will let Evan and Amanda chime in
 8 on the accreditation, their mission statement, and where
 9 Healthstream is an approved provider.
 10 MR. MCEWING: Thanks, Germaine. Hi,
 11 everyone. My name is Evan McEwing. I'm the Director of
 12 the Content Developing Team, and I'm also the
 13 Accreditation Approved Program Provider, basically. The
 14 Healthstream Accreditation Department, our mission
 15 statement is closely aligned with the Healthstream
 16 mission of developing the people who deliver care. And
 17 so, in our world our mission is to really to promote
 18 continuing ed through active learning through a course
 19 where we're also very focused on principles of
 20 diversity, equity, and inclusion. That's part of our
 21 mission. We address practice gaps and inspire

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1 evidence-based practice change for our learners.
 2 And so, as Germaine mentioned, Healthstream
 3 is an approved provider, and we have several statuses.
 4 So, we have approved provider status with BANCC for
 5 Nursing; also with the American Association of Nurse
 6 Anesthetists; we have provider status with ACCME; and
 7 then a bunch of other allied health professions, like;
 8 respiratory care, social work, et cetera. And so, that
 9 is part of our offerings currently for accreditation.
 10 MS. BROUSSARD: Awesome. Cheryl, will you
 11 guys discuss and introduce "Implicit Bias in Healthcare"
 12 course, and what it covers in the goals of that
 13 training?
 14 (The telephonic audio quality was very poor
 15 for this caller.)
 16 CALLER: This is Cheryl (inaudible). I'm
 17 actually a nurse who has a part in actually writing this
 18 course. So, the "Implicit Bias in Healthcare" course is
 19 focused on how implicit bias in healthcare actions and
 20 how that translates into the various (inaudible). So,
 21 there is external and internal (inaudible) healthcare

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1 professionals. So, this course is really going to
 2 present all those aspects with a focus on how implicit
 3 bias does affect healthcare.
 4 As Germaine mentioned, this is a two-hour
 5 course. It's combined with (inaudible) and (inaudible).
 6 Our main objectives are to define implicit bias. There
 7 are many definitions that are related to implicit bias
 8 as well. It's also to identify the impact on implicit
 9 bias on health outcome, to recognize factors of implicit
 10 bias, and (inaudible) in individual setting and large
 11 scale settings.
 12 I think you have a copy of it, and you can
 13 see how implicit bias affects (inaudible), disparity,
 14 and cultural impacts. We did cover, also, a section of
 15 diversity, equity, and inclusion. There's a specific
 16 section on (inaudible). We also have a timeline
 17 (inaudible), and also the importance implicit bias in
 18 healthcare, and best practices (inaudible).
 19 If you have any questions (inaudible).
 20 MS. BROUSSARD: Thank you, Cheryl. Rhonda
 21 and Board, I will also say that we provided the

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1 references that we usually create this course. The
 2 learners will also complete an evaluation. And then,
 3 once they complete the course, the post-test, passing
 4 that post-test with 80 percent or higher, and completing
 5 the educational evaluation, they will either obtain
 6 their CE certificate if they have their credentials and
 7 their license information, or if they're not licensed
 8 they will receive a completion certificate. And again,
 9 the course is accessed via our HLC learning management
 10 system.

11 So, we will stop there to see if you,
 12 Rhonda, or the Board have any additional questions, or
 13 if there's anything else we can do to kind of discuss
 14 and describe the goals of the training.

15 MR. HICKS: Are there any questions from the
 16 Board members?

17 MS. SCOTT: So, they're just requesting that
 18 the Board recognized the course to be forwarded then to
 19 the Office of Minority Health and Health Disparities for
 20 approval.

21 MR. HICKS: Okay. Is there a motion to

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1 approve the implicit bias training program that
 2 Healthstream has outlined?

3 MR. CONTI: This is to recognize the
 4 provider?

5 MR. HICKS: Yeah. There seems to be an
 6 upload issue that the Board has not had the opportunity
 7 to review. So, we're going to table the vote until the
 8 next meeting so that the Board members have an
 9 opportunity to review this, and we will bring it back at
 10 the November meeting for a vote.

11 MS. BROUSSARD: Okay, thank you. So,
 12 Rhonda, I will follow up with you with what all is
 13 needed and what else I can provide to you.

14 MS. SCOTT: I apologize. It was my error.
 15 I thought I uploaded it to the appropriate link. I
 16 guess I did not. I will make sure that the Board
 17 members have everything that you sent me, including the
 18 link to the actual course for them to review.

19 MS. BROUSSARD: Okay, great. We put a
 20 presentation together for today. Would you like me to
 21 send you anything? Would that kind of help to explain

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1 some of this? Or, do you think this is sufficient and
 2 just review what we have sent?

3 MS. SCOTT: I think the Board just wants to
 4 have the opportunity to look at the program itself and
 5 the course content. That should be sufficient.

6 MS. BROUSSARD: Okay, great.

7 MS. SCOTT: Again, my apologies. I will
 8 touch base with you, okay?

9 MS. BROUSSARD: Sounds good. No worries,
 10 Rhonda.

11 MS. SCOTT: Thank you and your team for
 12 joining.

13 MS. BROUSSARD: Thank you.

14 MR. HICKS: I will open up the floor for
 15 anyone that would like to address the Board.

16 (No comments posed)

17 MR. HICKS: All right, hearing none. In a
 18 moment I am going to ask if there is a motion to close
 19 the Open Session, but first I am going to walk us
 20 through the written statement that is required by the
 21 Open Meetings Act to ensure that all Board members agree

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1 with its contents.

2 As documented in written statement, the
 3 statutory authority to close this Open Session and meet
 4 in Closed Session is General Provisions 3-305(b)13, which
 5 gives the Board the authority to close an Open Session to
 6 comply with a specific constitutional, statutory, or
 7 judicially imposed requirement that prevents public
 8 disclosures about a particular matter or proceeding.

9 The topic to be discussed during Closed Session
 10 is applications for licensure and/or certifications. The
 11 reason for discussing this topic in Closed Session is to
 12 discuss confidential matters that are prohibited from
 13 public disclosure by the Annotated Code of Maryland,
 14 Health Occupations Article 8-303(f); Health Occupations
 15 Article 8-320(a); and Health Occupations Article 1-401,
 16 and General Provisions Article 4-333. In addition, the
 17 Board may also perform quasi-judicial and administrative
 18 functions involving disciplinary matters during the
 19 Closed Session.

20 Is there a motion to close this Open Session
 21 pursuant to the statutory authority and the reasons cited

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1 in the written statement or any discussion thereof?

2 MS. GIBBONS-BAKER: So moved.

3 MR. HICKS: Gibbons-Baker.

4 MS. STEINBERG: Second. Steinberg.

5 MR. HICKS: Steinberg. All in favor?

6 ALL: Aye.

7 MR. HICKS: Opposed?

8 (No oppositions)

9 MR. HICKS: Motion carries. Thank you.

10 (Whereupon, at 11:50 a.m. the Open Session was

11 adjourned.)

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1 CERTIFICATE OF NOTARY

2 I, EDWARD BULLOCK, a Notary Public of the State of

3 Maryland, do hereby certify that the proceedings were

4 recorded via audio by me and that this transcript is a

5 true record of the proceedings. I am not responsible for

6 inaudible portions of the proceedings.

7 I further certify I am not of counsel to any of

8 the parties, nor an employee of counsel, nor related to

9 any of the parties, nor in any way interested in the

10 outcome of this action as witness my hand and notarial

11 seal this 25th day of October, 2023.

12

13

14 _____

15 Edward Bullock, Notary Public

16 in and for the State of Maryland

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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: 10/25/23 Time: 11:49 am
Location: Maryland Board of Nursing, 4140 Patterson Avenue, Baltimore, MD
Motion to close meeting made by: Gibbons-Baker Seconded by Steinberg
Members in favor: Gibbons-Baker, Cassidy, Hayward, Turner, Hicks, Westerfield, Steinberg,
Opposed: None Abstaining: None
Absent: Owumana, J. Hill

Lechler,
R. Hill,
Lyons

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."

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.