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1	COMMONWEALTH OF PENNSYLVANIA	
2	DEPARTMENT OF STATE	
3	BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS	
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5	FINAL MINUTES	
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7	MEETING OF:	
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9	STATE BOARD OF NURSING	
10	VIA VIDEOCONFERENCE	
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12	TIME: 9:00 A.M.	
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14	December 9, 2021	
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1 State Board of Nursing 2 December 9, 2021 3 4 5 BOARD MEMBERS: 6 7 Kristin Malady, BSN, RN, Chair 8 K. Kalonji Johnson, Commissioner, Bureau of Professional and Occupational Affairs 9 10 Linda L. Kmetz, PhD, RN, Vice Chair 11 Ann Michele Coughlin, DNP, MBA, RN 12 Sue E. Hertzler, LPN 13 Linda A. Kerns, Esquire, Public Member - Absent 14 Kessey J. Kieselhorst, MPA, RD, LDN, CPHQ Sherri Luchs, RN 15 16 Bridget E. Vincent, MSN, CRNP, APN-BC, CCRN 17 18 19 COMMONWEALTH ATTORNEYS: 20 21 Judith Pachter Schulder, Esquire, Board Counsel 22 Carole Clarke Smith, Esquire, Senior Board Counsel 23 Ariel O'Malley, Esquire, Board Counsel 24 Todd Kriner, Esquire, Board Counsel 25 Megan E. Castor, Esquire, Board Counsel 26 Carolyn DeLaurentis, Deputy Chief Counsel, 27 Prosecution Division 28 William Newport, Esquire, Senior Board Prosecution 29 Liaison 30 T'rese Evancho, Esquire, Board Prosecution Liaison 31 David J. Schertz, Esquire, Board Prosecutor 32 Trista Boyd, Esquire, Board Prosecutor 33 Lindsay Szymanski, Esquire, Board Prosecutor 34 Matthew T. Sniscak, Esquire, Board Prosecutor 35 Madison Hales, Esquire, Board Prosecutor Kathryn E. Bellfy, Esquire, Board Prosecutor 36 37 Codi M. Tucker, Esquire, Board Prosecutor William McClain, Legal Analyst, Department of State 38 39 40 41 BOARD STAFF: 42 43 Wendy Miller, MSN, RN, Executive Secretary 44 Cynthia K. Miller, Board Administrator 45 Kelly Hoffman, Nursing Education Advisor 46 Leslie House, MSN, RN, Nursing Practice Advisor 47 Sue Petula, PhD, MSN, RN, NEA-BC, FRE, Nursing 48 Education Advisor Annuitant 49 Peggy Witmer, MSN, RN-BC, MPA, Nursing Practice 50 Advisor Annuitant

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3 1 State Board of Nursing 2 December 9, 2021 3 4 5 BOARD STAFF: (Cont.) 6 7 Carol Scipioni, RN, Nursing Consultant Annuitant 8 MaryAnn Strawser, RN, Nursing Consultant Annuitant 9 10 11 DEPARTMENT OF STATE STAFF: 12 13 Marc Farrell, Deputy Policy Director, Department of 14 State 15 Kevin Knipe, MSW, LSW, CCDP Diplomate Program Manager, 16 Professional Health Monitoring Program 17 Julie Droddy, Assistant Program Manager, Professional 18 Health Monitoring Program 19 20 21 ALSO PRESENT: 22 23 Katie Spehar, Deputy Secretary for Policy & Planning, 24 Governor's Office of Policy 25 Charles Hartwell, Esquire, Dethlefs-Pykosh Law Group 26 Adele Caruso, DNP, CRNP, FAANP, Immediate Past 27 President, Pennsylvania Coalition of Nurse 28 Practitioners 29 Andrea Wandling, Human Resources Manager, Pennsylvania 30 Association of Community Health Centers 31 Deborah Little, EdD, RN, CNE, Corporate Assistant Dean of Nursing, Lincoln Technical Institute 32 33 Frances Bietsch, RN, President, York County School of 34 Technology 35 Jen Smeltz, Republican Executive Director, Senate 36 Consumer Protection & Professional Licensure 37 Committee 38 Joann Megon, RN, Executive Director, Pennsylvania 39 Nurse Peer Assistance Program 40 Kassidy Lax, RN, Director, Falcon Institute-PN 41 Program Katrina Claghorn, MS, RN, LDN, Pennsylvania Academy of 42 43 Nutrition & Dietetics 44 Laura Waters, PhD, RN, Associate Professor of 45 Nursing, East Stroudsburg University 46 Margaret Johnson, RN, Director, Northern Tier Career 47 Center-PN Program Mary Marshall, Director, Workforce & Professional 48 49 Development, The Hospital and Healthsystem 50 Association of Pennsylvania

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1	State Board of Nursing	
2	December 9, 2021	
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4 5 6	ALSO PRESENT: (Cont.)	
6789012345678901234567890123456789012345678901234567890	Michelle Davis, RN, MSN, Director of Nursing, Lincoln Technical Institute-Allentown Noah Logan, Government Affairs Specialist, Pennsylvania State Nurses Association Pam Hughes, MSN, CRNP, FNP-C, Practical Nursing Director, United Career Institute Tyler Burke, Milliron & Goodman, LLC Valerie Myers, EdD, MSN, RN, Assistant Dean of Nursing, Pennsylvania College of Technology Wesley J. Rish, Esquire, Rish Law Office, LLC Kara Davenport, RN, Director of Jefferson County DuBois AVTS-PN Program Ann Phalen, PhD, CRNP, NNP-BC, Dean and Professor, Proposed Program Director, Frances M. Maguire School of Nursing and Health Professions, Gwynedd Mercy University Jim Trusdell, MBA, Vice President for Finance and Administration, Gwynedd Mercy University Mary Van Brunt, PhD, Provost and Vice President for Academic Affairs, Gwynedd Mercy University Peggy Pearl, Executive Director, Pennsylvania Coalition of Nurse Practitioners Michelle Wallace, Director of Nursing Programs, Reading Area Community College Lindsay Jones, RN, MSN, Assistant Director of Practical Nursing, Lancaster County Career & Technology Center	

5 * * * 1 2 State Board of Nursing 3 December 9, 2021 * * * 4 5 The regularly scheduled meeting of the State Board of Nursing was held by videoconference pursuant 6 7 to Act 73 of 2021 that extended the waiver of the "physical presence" requirement in section 2.1(c) of 8 9 the Professional Nursing Law (63 P.S. § 212.1(c) on 10 September 30, 2021. 11 Kristin Malady, BSN, RN, Chair, called the meeting to order at 9:00 a.m. 12 13 K. Kalonji Johnson, Commissioner, Bureau of 14 Professional and Occupational Affairs, was not present 15 at the commencement of the meeting. * * * 16 17 Roll Call of Board Members 18 [Kristin Malady, BSN, RN, Chair, took roll call of 19 Board members.] 20 * * * 21 Introduction of Board Counsel 22 [Carole Clarke Smith, Esquire, Senior Board Counsel, 23 introduced members of Board counsel.] * * * 24 25 Introduction of Board Prosecution

[William A. Newport, Esquire, Senior Prosecution 1 2 Liaison, identified members of Prosecution.] * * * 3 Introduction of Board Staff 4 5 [Wendy Miller, MSN, RN, Executive Secretary, 6 introduced Board staff.] * * * 7 8 [Kristin Malady, BSN, RN, Chair, reminded everyone 9 that the meeting was being recorded, and those who 10 continued to participate were giving their consent to 11 be recorded.] * * * 12 Introduction of Audience Members 13 14 [Cynthia K. Miller, Board Administrator, introduced 15 audience members. 16 Chair Malady reminded attendees to email Cindy 17 Miller their name and organization affiliation.] * * * 18 19 Adoption of the Agenda 20 CHAIR MALADY: 21 We have in front of us the December 22 meeting agenda. 23 Are there any changes to that 24 agenda? I'm seeing none. 25 Do I have a motion to adopt the

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1 December 9 meeting agenda? 2 DR. COUGHLIN: 3 So moved. 4 DR. KMETZ: 5 Second. 6 CHAIR MALADY: 7 All those in favor? Any opposed? Any 8 abstentions? The agenda passes. 9 [The motion carried unanimously.] * * * 10 11 Adoption of Minutes 12 [Kristin Malady, BSN, RN, Chair, noted the minutes 13 will be on the next meeting agenda.] * * * 14 15 Report of Prosecutorial Division 16 [Chair Malady noted VRP Consent Agreement items 2 17 through 8.] * * * 18 19 [Chair Malady noted Ms. Bellfy's cases 9 and 10.] * * * 20 21 [Chair Malady noted Ms. Boyd's cases 11 and 12.] 22 * * * 23 [Chair Malady noted Ms. Evancho's cases 13 through 24 19.] * * * 25

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[Chair Malady noted Mr. Sniscak's cases 20 through 1 2 22.1 * * * 3 4 [Chair Malady noted Ms. Szymanski's cases 23 through 5 25.1 * * * 6 7 [Chair Malady noted Ms. Tucker's cases 26 through 29. 8 Wesley J. Rish, Esquire, Rish Law Office, LLC, 9 counsel for the respondent, was present and 10 participated in the discussion regarding item 26.] * * * 11 12 [Chair Malady noted Mr. Schertz's cases 108 through 13 110.1 * * * 14 15 Regulation Update 16 [Judith Pachter Schulder, Esquire, Board Counsel, 17 referred to 16A-5139 regarding the Volunteer License, 18 noting it to be a group regulation that has not been 19 prepared. 20 Ms. Pachter Schulder stated 16A-5140 regarding 21 the Child Abuse Reporting Requirements is a final 22 regulation and would inform the Board whether it is 23 one of the regulations currently being reviewed by the 24 Independent Regulatory Review Commission (IRRC) later 25 in the meeting.

Ms. Pachter Schulder addressed 16A-5141 regarding 1 2 Nursing Education Programs, noting a discussion will 3 take place during the RN/PN Committee meeting to specifically discuss recommended changes from the 4 5 Deans of the Nursing Programs at the University of 6 Pennsylvania, University of Pittsburgh and Penn State 7 University who provided comments to those regulations with the hope of adopting those at the January 8 9 Ms. Pachter Schulder referred to 16A-5143 meeting. 10 regarding Continued Competency and Licensure by 11 Endorsement under 63 P.S. § 6311, noting the package 12 has been forwarded to regulatory counsel for review. Ms. Pachter Schulder informed the Board that 16A-13 14 5144 regarding the CRNP Statement of Policy is still 15 pending.

Ms. Pachter Schulder referred to 16A-5145 regarding CRNA Licensure. She mentioned receiving proposed fees earlier in the week and that the Draft Annex previously on the Board's agenda in July or September would be back on the agenda for next month with those fees for the Board to adopt and an exposure draft to be distributed for draft input.

Ms. Pachter Schulder informed the Board that 16A-5146 regarding Additional Continuing Education dealing with opioids and organ donation went out for predraft

1 input, and she is awaiting comments.

2	Ms. Pachter Schulder noted there is nothing
3	further to report on 16A-5147 regarding the Nurse
4	Licensure Compact (NLC) because the Board still has
5	not received a letter from the Federal Bureau of
6	Investigation (FBI) but have been assured that the FBI
7	is still in opposition to language in the statute
8	regarding criminal background checks. She commented
9	that if other states have implemented the Compact,
10	according to the Pennsylvania State Police, it was
11	without having the FBI's approval.

12 Ms. Pachter Schulder noted the Pennsylvania State 13 Police went to the FBI because that is the process by 14 which the criminal background check was going to be 15 transferred and were told the language is not 16 acceptable. She is waiting on the FBI letter to 17 provide more information, noting it is likely another 18 legislative change will be needed in order to fix that 19 part.

20 Ms. Pachter Schulder noted that staff is working 21 on determining proposed fees as well as addressing 22 technological issues regarding transitioning from the 23 Pennsylvania Licensing System (PALS) to something 24 else. She mentioned that it may not make sense for 25 the Board to apply for and receive a grant from NCSBN

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1 since this licensure system may or may not continue, 2 especially if there is only one opportunity for the 3 grant.

Ms. Pachter Schulder referred to the Bureau of 4 5 Professional and Occupational Affairs (BPOA) regulation regarding Crimes Directly Related to the 6 7 Profession. She stated Deputy Chief Counsel Cynthia Montgomery is preparing that regulation on behalf of 8 9 Commissioner Johnson. She noted the lists of crimes 10 are on the Board's website. She reminded licensees, 11 associations, and Board members to review those lists 12 because the crimes on those lists tell everyone where 13 the Board has the presumption and does not have the 14 presumption that a crime is directly related to the 15 profession. She noted the crimes of violence and 16 sexual offenses are specifically set out in the 17 statute.1

19 Appointment - Discussion with the Professional Health 20 Monitoring Program (PHMP) Regarding Suboxone 21 Treatment 22 [Kevin Knipe, MSW, LSW, CCDP Diplomate, Program 23 Manager, Professional Health Monitoring Program, 24 stated PHMP's opioid policy not only includes the 25 medication-assisted therapy but also those who are

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* * *

1 prescribed opioids for treatment of chronic pain. He 2 commented that PHMP does not prohibit licensees from 3 being on either medication-assisted therapy or being 4 prescribed opioids for treatment of chronic pain 5 conditions.

6 Mr. Knipe stated PHMP relies on the approved 7 evaluator and/or their approved treatment provider to determine the appropriateness of prescribed 8 medications and beyond that to establish an 9 10 appropriate treatment plan. He mentioned that PHMP 11 wants to ensure licensees comply with those recommendations because they are treatment-based and 12 13 covered in the agreement that they must follow along with treatment recommendations. 14

Mr. Knipe stated individuals must undergo a neuropsychological examination and exhibit no cognitive types of issues related to their opioid use before they receive PHMP's permission to return to licensed practice.

20 Mr. Knipe stated PHMP will not support a 21 dismissal from PHMP until the individual is 22 successfully weaned off their prescribed opioid and 23 remain free from opioids for a period of at least one 24 year.

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Mr. Knipe addressed the PHMP policy, where there

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1 are no national standards that govern the state 2 monitoring programs, and it is up to each state to 3 determine what they believe is appropriate as it 4 relates to their licensees for programs that are 5 similar to their program.

6 Mr. Knipe commented that cases PHMP has had 7 relative to individuals who have been with them longer 8 than the three-year agreement, because they are on 9 opioids, specifically tend to be Suboxone cases. He 10 noted having some individuals who have been very 11 successful and compliant and have remained abstinent 12 from the use of prohibited substances.

13 Mr. Knipe noted referencing what the National 14 Council of State Boards of Nursing (NCSBN) previously 15 recommended in a resource manual that they published years ago relative to alternative discipline programs. 16 17 He noted that a lot of protocols are already being 18 done by PHMP, including neuropsychological testing, 19 drug testing, and practice restrictions. He commented 20 that PHMP does not follow NCSBN to a T but follows the 21 Board's expectation.

Mr. Knipe mentioned that the one thing PHMP has not been doing is the idea of agreeing to support someone's petition. He believed that it is worth considering, moving forward, changes to PHMP's

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1 existing opioid policy and to accept NCSBN's 2 designation of opioid cases being defined as a special 3 population and to move in a direction where they 4 embrace the concept of monitoring individuals for a 5 period of no less than five years as NCSBN indicated 6 in the manual.

7 Mr. Knipe believed it is also prudent to require licensees who are on opioids to undergo a current 8 evaluation by one of PHMP's approved evaluators if 9 10 they are not currently in treatment as a way of 11 verifying the stability of their recovery and get an expert in the field of addiction to agree that the 12 13 individual appears safe to practice unmonitored in 14 terms of protecting the interest of PHMP and the 15 Board.

16 Mr. Knipe noted the process will begin once those 17 pieces are in place like in other cases when somebody 18 serves the minimum period of probation as outlined in 19 their agreement and order, where PHMP would move 20 forward and support their petition. 21 Mr. Knipe further explained that 22 neuropsychological testing is specific to practice and 23 is a component PHMP only requires of participants who 24 wish to return to practice and typically happens 25 within the first year of their enrollment in the

1 program. He stated PHMP does not require any repeat 2 neuropsychological testing unless there are issues or 3 concerns that arise during the course of monitoring 4 that could indicate an impairment with someone's 5 cognition and judgment.

Mr. Knipe explained that the evaluation would be 6 7 an additional feature of the monitoring as a safety 8 check to establish that the individual meets directly 9 with someone who is certified in addiction to sit down 10 and meet with the licensee face to face and do an 11 assessment and interview of how the licensee is doing, 12 just to document that the licensee seems to be in 13 stable recovery and there should be no concerns about 14 the licensee practicing unmonitored. He noted PHMP 15 has the authority to do that in all of their cases but 16 did not want to make it appear that it is a typical 17 requirement.

18 Mr. Knipe addressed the monitoring period, where PHMP is currently using standard three-year consent 19 20 agreements for the Voluntary Recovery Program (VRP) 21 cases. He is suggesting that instead of the VRP 22 requesting the prosecuting attorney who develops their 23 agreements to use a three-year agreement that they 24 develop monitoring for no less than five years for an 25 individual who is referred to the VRP and is on

1 opioid-replacement therapy or on opioids for chronic 2 pain.

3 Ms. Pachter Schulder asked what that means to the one year after dealing with Suboxone or opioid and 4 5 whether Mr. Knipe is recommending that be removed. 6 Mr. Knipe explained that it would be dropped from 7 their existing policy, that if a person chooses to remain on opioids for the duration of that period of 8 monitoring, so long as the evaluation occurs and there 9 10 are no concerns with them practicing unmonitored based 11 on that current evaluation, PHMP would support the 12 petition. 13 Chair Malady noted the importance of supporting 14 nurses who require the treatment but allowing them to 15 still work safely. 16 Ms. Pachter Schulder asked whether only drug and 17 alcohol counselors would be evaluating the licensees 18 and whether psychiatrists or psychiatric nurse 19 practitioners or physician assistants would be 20 excluded. Mr. Knipe noted that the staff makes referrals 21 22 for evaluations on a case-by-case basis and 23 psychiatrists, psychiatric nurse practitioners, and

25 doing the assessment if that was felt to be more

physician assistants would not be restricted from

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appropriate.] 1 2 MS. PACHTER SCHULDER: 3 The motion would be to endorse the changes recommended by PHMP regarding 4 5 licensees who are in their program who are still using opioids or opioid 6 7 replacement. 8 CHAIR MALADY: 9 Do I have such a motion? 10 DR. KMETZ: 11 So moved. 12 CHAIR MALADY: Do I have a second? 13 MS. KIESELHORST: 14 15 Second. 16 CHAIR MALADY: 17 All those in favor? Opposed? Abstentions? 18 19 [The motion carried unanimously.] * * * 20 [Joann Megon, RN, Executive Director, Pennsylvania 21 22 Nurse Peer Assistance Program, noted being in support 23 of PHMP's changes.] * * * 24 [K. Kalonji Johnson, Commissioner, Bureau of 25

Professional and Occupational Affairs, entered the 1 2 meeting at 9:50 a.m.] 3 Appointment - Frances M. Maguire School of Nursing and 4 5 Health Professions at Gwynedd Mercy University Proposal for the Establishment of a Prelicensure 6 7 (RN-Direct-Entry) Master of Science Degree in Nursing (MSN) Program 8 9 [Ann Phalen, PhD, CRNP, NNP-BC, Dean and Professor, 10 Frances M. Maguire School of Nursing and Health 11 Professions at Gwynedd Mercy University, presented to 12 the Board seeking approval for Gwynedd Mercy's 13 proposal of a direct-entry MSN program. She provided 14 a brief description, noting the program to be a 15 prelicensure full-time 22-month program for students 16 who have another bachelor's degree in another area. 17 She noted the program is designed for students who are 18 seeking a master's degree but are not interested in an 19 advanced practice role, such as a nurse practitioner. 20 Dr. Phalen noted that students earn 79 credits 21 and upon successfully completing the program are 22 eligible and qualified to sit for the National Council 23 Licensure Examination (NCLEX) as well as sit for the 24 Clinical Nurse Leader Examination. 25 Dr. Phalen explained that a clinical nurse leader

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1 is a master's-educated nurse who is prepared to 2 practice across the continuum and across multiple 3 settings in the health care area and was developed in 4 conjunction with the American Association of Colleges 5 of Nursing (AACN) and other health care leaders and 6 hospitals.

7 Dr. Phalen provided a summary of CNL program She stated the program addresses the 8 topics. 9 workforce need for more nurses and preparing nurses to 10 enter the field in 22 months rather than the 11 traditional 4 years. She also addressed meeting the 12 needs of students with accelerated programs, programs 13 that have hybrid options, programs to be cost 14 effective, and at the end be gainfully employed.

Dr. Phalen mentioned that the students coming in at the master's level will be able to tap into their graduate federal dollars and other avenues and reduce some of their financial hardship upon graduation.

Dr. Phalen stated the students will enter the workforce and work as a point-of-care nurse and will be equipped with leadership skills as well.

22 Dr. Phalen addressed recruitment and starting the 23 program within a two-cohort setting based on clinical 24 opportunities and experiences. She believed that 25 after the first couple of years, seeing the NCLEX

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20 results, and results of the CNL Examination, they may 1 have to increase it to a third cohort. 2 3 Dr. Phalen stated the students have to start and 4 finish the program before they sit for the NCLEX and 5 will be eligible to sit for the CNL Examination. She 6 noted that both BSN and MSN faculty will be shared but 7 will also have dedicated faculty and a dedicated program director for the program. 8 9 Chair Malady thanked Dr. Phalen for her 10 presentation. 11 Dr. Phalen thanked Dr. Petula for being a 12 wonderful resource for her as she developed the 13 program and proposal for the state.] 14 * * * 15 Pennsylvania Legislative Update 16 [Judith Pachter Schulder, Esquire, Board Counsel, 17 referred to House Bill 1741 that allows off-label use 18 of medications to treat COVID; House Bill 1948 19 regarding medical cannabis being administered by 20 school nurses; House Bill 1956 regarding certified 21 anesthesiologist assistants, noting it to be different 2.2 than the CRNA legislation that went into effect; and 23 Senate Bill 603 regarding Lyme Disease education for 2.4 parents and establishing protocols for tick bites.] 25 * * *

1 Report of Board Chairperson

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2	[Kristin Malady, BSN, RN, Chair, thanked all of the
3	health care providers, especially nurses, who have
4	given their all to the citizens of the Commonwealth of
5	Pennsylvania and to this country. She asked for
6	continued support from experienced nurses and extra
7	support for the new graduates during the COVID crisis.
8	Chair Malady thanked Commissioner Johnson, Board
9	staff, and the Prosecutorial and Counsel teams for all
10	their hard work.
11	Chair Malady stated that it was an honor to serve
12	as Chair but that she is turning her Chair duties over
13	to Dr. Kmetz, who is highly qualified and will do a
14	great job. She thanked everyone for the honor and
15	wished everyone a happy holiday.]
16	* * *
17	Report of Committees - Probable Cause Screening
18	Committee
19	[Sue E. Hertzler, LPN, reported moving on 11 Petitions
20	for Appropriate Relief, 22 Petitions for Mental and
21	Physical Examinations, and no Immediate Temporary
22	Suspensions.]
23	* * *
24	Application Review Committee
25	[Kristin Malady, BSN, RN, Chair, noted that she and

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Dr. Kmetz reviewed and moved many applications forward 1 2 in the process.] * * * 3 4 Advanced Practice - Education, Regulation, & 5 Application Committee - No Report * * * 6 7 RN/PN Practice, Education, & Regulation Committee [Kristin Malady, BSN, RN, Chair, noted the Committee 8 will be meeting at 10:15 a.m.] 9 10 * * * Dietitian-Nutritionist Committee - No Report 11 * * * 12 IT & Communication Issues Committee 13 14 [Ann Michele Coughlin, DNP, MBA, RN, asked whether 15 there has been any movement in the new platform for 16 the agenda, noting the current platform is not user-17 friendly. She thanked Ms. Wendy Miller for keeping 18 everyone up to date. 19 Ms. Miller stated the administration is looking 20 at getting proposals to replace multiple systems and 21 is being actively worked, noting Commissioner Johnson 22 would have more information as far as where it is at 23 in the process.] 24 * * * 25 Report of Board Members Who Attended a Meeting on

Behalf of the Board - No Report 1 * * * 2 3 Report of Executive Secretary 4 [Wendy J. Miller, MSN, RN, Executive Secretary, 5 referred to a Policy Statement received from NCSBN, 6 and endorsed by numerous national nursing 7 organizations, which communicated opposition to the 8 dissemination of non-scientific and misleading COVID-9 19 information by nurses. 10 Ms. Miller thanked the Nursing Practice Advisors 11 and Nursing Education Advisors for their hard work 12 this past year on proposals, curriculum changes, and 13 communication with nursing education programs. Ms. Miller informed the Board that two new 14 15 Nursing Practice Advisors have been selected and are 16 in the human resources process.] * * * 17 18 [The Board recessed from 10:13 a.m. until 10:20 a.m.] * * * 19 20 Committee Meeting 21 [Judith Pachter Schulder, Esquire, Board Counsel, 2.2 referred the Board to 16A-5141 regarding Nursing 23 Education Programs. She noted the Board received 2.4 additional comments from deans regarding amendments to 25 the regulations. She mentioned that the

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recommendations were reviewed by Dr. Petula, Ms. 1 2 House, Ms. Hoffman, Ms. Miller, and herself, and 3 provided, for the Board's consideration, a line out 4 document with the changes for the Board's 5 consideration. She addressed the deans' first 6 recommendation to expand the definition of 7 "comprehensive nurse assessment" in § 21.1 (relating 8 to definitions) to include the analysis and synthesis 9 of "physiological, psychosocial, demographic, 10 developmental, and historical" data. The Board agreed 11 to the inclusion.

Ms. Pachter Schulder referred to § 21.901 12 13 (relating to definitions) where the definition of 14 controlling institution currently refers to "regional 15 accreditation." She reminded the Board that after 16 these proposed regulations were adopted, the Board 17 suspended enforcement of the regional accreditation 18 requirement based upon Federal law. The Board agreed 19 to remove the reference to "regional" accreditation in 20 the RN and CRNP provisions, replacing it with "accredited by a body that is approved." 21 22 Ms. Pachter Schulder directed the Board to § 23 21.921 regarding requirements of the Board in order to 24 establish a new program. The deans requested that the 25 Board eliminate the requirement in subsection (b)(1)

that the Program advise the Board about the need for 1 2 the Program in the geographical area because the 3 Programs attract students throughout the country. The 4 Board concurs with this recommendation and struck that 5 clause from 21.921(b)(1). In addition, at the 6 suggestion of the deans, the Board agreed to strike 7 the requirement that the Program provide documentation evidencing compliance with federal and state 8 9 requirements.

10 Ms. Pachter Schulder directed the Board to § 11 21.923(g) regarding organizational requirements for 12 nursing education programs. As drafted, the nursing 13 faculty organization is tasked with conducting a 14 planned periodic evaluation of the program, develop, 15 review, and revise policies and rules of procedure governing the faculty organization, and maintain 16 17 reports of the faculty organization and faculty actions. She asked the Board whether another 18 19 provision should be added tasking the faculty 20 organization with reviewing the curriculum, developing 21 a process to identify and measure gaps in the 22 curriculum, and recommend changes to the curriculum. 23 She noted that the Advisors recommend adding this task 24 to the faculty organization; however, the deans 25 commented that in some controlling institutions,

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1 curriculum review and change recommendations may not 2 be done by the faculty organization. Chair Malady 3 commented that nursing faculty needs to be the people 4 who are looking at the curriculum because it is a 5 nursing faculty function. The other Board members 6 agreed.

7 Ms. Pachter Schulder referred to § 21.925(a) and (b) (relating to changes to nursing education programs 8 following approval) and the comments from the deans 9 10 that it is duplicative to reproduce the establishment 11 documents in § 21.921(b) (relating to establishment) if 12 a program is already approved. They recommended that 13 some of the requested information can be reported as 14 part of the Annual Report rather than before the 15 changes occur. As currently drafted, subsection (a) 16 would require the program to report certain changes to 17 the Board within 30 days prior to the changes, 18 subsection (b) would require the program to obtain 19 approval from the Board within 90 days of any planned 20 changes.

First, the Board agreed that unless a program is on initial or provisional status, programs can report changes to ownership or administrative structure, student capacity that increases by more than 15% annually, changes in accreditation status and the

addition of cohorts as part of the program's Annual 1 2 Report in § 21.972(a). The Board reasoned that the 3 programs on initial and provisional status must continue to provide the additional information because 4 5 they are subject to heightened scrutiny either because 6 they have not graduated a class of students or because 7 they failed to meet the standards set out in § 21.915. 8

9 Second, in connection with subsection (e), 10 relating to the addition of a degree type or a new 11 CRNP specialty, the Board agreed that it can accept less documentation in areas where there is no change 12 13 from when the program was approved. The Board 14 discussed that adding a degree type includes adding a 15 PN associate degree to an existing PN certificate 16 program, an RN associate degree to an existing RN 17 diploma program, an RN-MSN to an existing RN-BSN, or a 18 CRNP-DNP to an existing CRNP-MSN program. Adding a CRNP specialty type includes adding psychiatric mental 19 20 health to an existing adult health across the lifespan 21 The Board agreed that when adding a degree program. 22 type or certification specialty, unless there are 23 changes in these areas, the program would not need to 24 provide a sample job description for the administrator 25 and the faculty, copies of policies and procedures,

the systematic evaluation plan, or a process to 1 2 evaluate the resources. Rather than providing a 3 statement about the program's congruence with the controlling institution's mission, goals and learning 4 5 outcomes, the program would only need to provide a 6 statement regarding the congruence of the new 7 program's learning outcomes. In addition, instead of providing clinical agency agreements and descriptions 8 9 of facilities and resources, the program would only 10 need to provide a statement that the new program can 11 accommodate the additional students. Chair Malady thanked everyone for taking the time to go 12 13 through those comments that the deans made, noting she 14 agreed with everything so far, stating that if their 15 program is fully approved, they do not need to start 16 over. 17 Ms. Pachter Schulder commented that the addition

18 of a new degree type of certification specialty is 19 still considered a new program because a new program 20 code would be assigned. Additionally, while the 21 programs would not have to provide the duplicate 22 information with their application for approval, it is 23 still something that will need to be reviewed by the 24 Advisors.

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Ms. Pachter Schulder referred the Board to $\ensuremath{\$}$

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1 21.933 regarding administrator qualifications, noting 2 the deans' recommendation that the nursing program 3 administrators have expertise in nursing research as 4 well as nursing practice, nursing education and 5 administration. The Board agreed to the addition.

6 Ms. Pachter Schulder directed the Board to 7 faculty qualifications in § 21.934(a). She noted that 8 the deans questioned whether faculty members needed to 9 maintain expertise in the area of instruction in 10 subsection (a)(1)(iii), (2)(iii) and (3)(iii). The 11 Board decided that they do.

12 Ms. Pachter Schulder directed the Board to § 13 21.934(d)'s prohibition against interprofessional faculty teaching clinical courses. Interprofessional 14 15 faculty is defined in § 21.901 as a faculty member 16 other than a licensed nurse who has specialized knowledge, skills, and abilities in the areas being 17 18 taught and holds at least a graduate degree in that 19 She questioned, based upon an inquiry from the area. 20 deans, whether teaching public health can be done by 21 interprofessional faculty or does it have to be done 22 by a nurse. The Board discussed tying clinical 23 interprofessional faculty to students' scope of 2.4 practice.

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Chair Malady commented that when you are in an

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1 RN/PN program, you should be taught to your scope of 2 practice, but it is different for CRNPs. Dr. Coughlin 3 agreed that it makes sense with practicing in the 4 scope and having interprofessional support. Ms. 5 Vincent agreed that this makes sense for CRNPs as 6 well.

Ms. Pachter Schulder asked whether there are any 7 8 clinical courses that a CRNP would take that would 9 only require a CRNP or a DNP or a nurse to provide 10 that education. Dr. Coughlin commented that the 11 student would be rounding with the interprofessional teams that would usually consist of the doctor and 12 13 nurse. Ms. Vincent noted being a preceptor for CRNP 14 students and watching everything they do under her 15 The Board decided to tie the courses supervision. that can be taught by interprofessional faculty to the 16 17 scope of practice so that if it is more of a nursing-18 related course, even for CRNPs, it may require a nurse 19 CRNP rather than require a physician, but in the 20 general courses, like cardiology or pulmonology, could 21 be taught by a physician and pharmacology by a 2.2 pharmacist.

Ms. Pachter Schulder directed the Board to §
24 21.941 regarding curriculum development and the deans'
25 request that the information required on each syllabus

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be shortened in order to allow programs to make 1 2 changes quickly. Upon a review of subsection (a) (5), 3 the Board concurred with the Advisors' recommendation that the name of the instructor, course schedule by 4 5 time and day, attendance requirements, make-up work 6 and outline by week be removed from syllabi. 7 Information about the attendance requirements, and make-up work can be included within the Student 8 9 Handbook.

10 Ms. Pachter Schulder directed the Board to § 21.946(b) (relating to curriculum changes requiring 11 Board approval) and noted prior discussion at the 12 13 October meeting based upon the deans' request for 14 provisional or conditional approval while the Board 15 reviews a curriculum change for an approved program so 16 that the program can implement the change prior to the 17 Board's approval. Although the Board was not willing 18 to grant provisional or conditional approval, in part 19 out of concern over confusion with provisional status, 20 the Board reiterated that a program does not need to 21 obtain Board approval prior to implementing changes to 22 the curriculum so long as the program: (1)possesses 23 full approval status, (2) holds accreditation from a Board-recognized nursing accreditation agency, (3) has 24 25 an active faculty organization, (4) has an

institutional review committee, and (5) actively 1 2 engages in a review of the systematic evaluation plan. 3 Prior to implementing those changes, the program must notify the Board at least 90 days prior to its planned 4 5 implementation. Under proposed (d), if revisions are 6 required to be made to curriculum changes that were 7 already implemented, those revisions must be made 8 prior to the next academic year. The dean's supported 9 this implementation timeframe for revisions.

10 Unless a program meets the five criteria in (b), 11 21.946(a) requires programs to notify the Board prior 12 to the curriculum change and receive approval prior to 13 being able to make the change. Based upon discussion, 14 the Board agreed to shorten the list of curriculum 15 changes that require pre-approval to include only: changes to program purposes and outcomes, didactic and 16 17 clinical hours, credits and units, course content or 18 instruction, teaching methodology, course placement, 19 or course additions or deletions. The Board discussed 20 whether all course content or instruction changes 21 require notice. The Board decided that only content 22 or instruction changes "that affects the integration 23 of material into the total curriculum" requires pre-24 approval. By adding this clause, the Board noted that 25 it does not intend for any little change to be pre-

1 approved or to prohibit programs from being innovative 2 and nimble.

For programs that meet the requirements of subsection (b), instead of providing the documentation in subsection (a)(1)-(7), the programs must provide notification about the items in (c)(1)-(7).

7 Ms. Pachter Schulder referred the Board to § 21.972 regarding the annual report and records filed 8 9 with the Board. As originally drafted, subsection (a) 10 reiterated the current regulations that require 11 programs show compliance with the Act and the regulations. In light of the change made to 12 13 21.925(a), for all programs other than those on 14 initial or provisional status, the Board decided to 15 amend subsection (a) to include a list of items that 16 must be covered by the annual report: administration, faculty, curriculum, enrollment, accreditation, 17 18 clinical agencies, attrition, student services, and 19 examination or certification results. These items are 20 currently asked for in the Annual Reports filed by the 21 programs in eppiccNurse.

Ms. Pachter Schulder requested that the Board members review all of the changes for discussion at the January meeting. Chair Malady thanked everyone for their hard work and advised that the Board may

1 review and approve the Annex again at the January 2 meeting.] * * * 3 4 [Linda L. Kmetz, PhD, RN, Vice Chair, exited the 5 meeting at 11:04 a.m. for recusal purposes.] * * * 6 7 New Business - NCLEX Pass Rates 8 [Kelly Hoffman, Nursing Education Advisor, addressed 9 the 2020-2021 NCLEX pass rates and advised that 10 Pennsylvania RN first-time test takers ranked at 11 88.21% and 83.22% nationally. She stated that Pennsylvania ranked at 81.48% for practical nursing 12 13 and 79.77% nationally. She reported a downward trend 14 of 3% from the previous year but that Pennsylvania's 15 pass rates continue to be above the national average. 16 Ms. Hoffman reported 22 PN programs and 16 RN 17 programs that did not meet the minimum of an 80% 18 benchmark. She also reported 9 PN programs and 6 RN 19 programs were on provisional status in 2019-2020 with 20 first-time test takers scoring less than 80%. 21 Dr. Petula noted 2 RN programs still remain on 22 provisional status of the 16 and 22 PN programs 23 currently on provisional status with several programs 24 that will be extended. 25 Ms. Hoffman addressed causative factors for the

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1	3% decrease in the pass rate. She stated the NCLEX-PN
2	passing standard increased 0.03 logits, program
3	director turnover of 20%, and a faculty turnover rate
4	of 15% based on the 2019-2020 Annual Reports submitted
5	by the programs, and COVID's impact on the programs
6	were possible factors. She noted that the test center
7	shutdown was not a causative factor for this
8	examination year because most of those test centers
9	were up and running, albeit at limited capacity but
10	with extended hours. She mentioned that the increase
11	in simulation and the decrease in direct patient care
12	could have affected the test takers, along with the
13	fact that nursing programs did have to pivot quickly
14	to online didactic teaching and learning.
15	Ms. Hoffman noted that another causative factor
16	may have been on the student and where not only did

16 may have been on the student end, where not only did 17 the education get disrupted as far as a nursing 18 education program, but their family, children, and 19 work-life balance also impacted their education 20 because of COVID.

Ms. Pachter Schulder commented that the Board has been asked to consider not putting any programs on provisional status this year because of COVID and a myriad of other factors. An alternative would be keeping the schools on provisional status but allowing

1 them to put in letters to their students and 2 anticipated students that COVID could have had an 3 implication on the pass rates, whether on the student 4 side, on the difference in direct patient care, or on 5 the school side.

Laura Waters, PhD, RN, Associate Professor of 6 7 Nursing, East Stroudsburg University, and a member of 8 the Pennsylvania Higher Education Nursing Schools 9 Association's (PHENSA) Policy Committee, stated PHENSA 10 approached the state Board regarding their concerns as 11 soon as going online during COVID about their drop in pass rates in addition to attrition within their 12 13 programs because of the pandemic and going to an 14 online format.

15 Dr. Waters suggested using a three-year aggregate 16 of pass rates similar to what is done with 17 accreditation bodies before a whole program is put on 18 probation. She noted the pandemic brought 19 unprecedented situations to everyone, and even getting 20 students back into the rigor of being in class in 21 clinical after the pandemic has been a challenge this 2.2 semester. She commented that being on probation on 23 top of a pandemic and on top of lowering enrollments 24 is impacting them on many avenues.

25

Ms. Pachter Schulder reminded the Board that in

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drafting its proposed nursing education program 1 2 regulations, the Board the request to move from a one-3 year to three-year aggregate pass rate. Dr. Petula addressed a three-year program compared to a one-year 4 5 program. She noted there were concerns that three 6 years could result in a program sliding into a 7 situation where it is not able to be reversed easily. She referred to the Delphi study published in July 8 9 2020 Journal of Nursing Education and Regulation that 10 identified quality indicators for programs, warning 11 signs, and specific program out measures.

12 Lindsay Jones, RN, MSN, Assistant Director of Practical Nursing, Lancaster County Career & 13 14 Technology Center/Vice President, Pennsylvania 15 Association of Practical Nursing Administrators 16 (PAPNA), commented that her school is not on provisional status, but their scores have dropped 17 18 significantly from the mid-90s to 82%. She addressed 19 the gap in testing sites and loss of a knowledge base 20 being a big factor.

Ms. Jones noted many schools are on probation this year that have never been on probation before and mentioned looking at whether a school has a track record of being on provisional status where they should not be put on provisional status if the first

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1 year was during COVID unless there is a significant 2 pattern.

Michelle Wallace, Director of Nursing Programs, Reading Area Community College, noted also continuing to struggle with declining enrollment in the practical nursing programs as well as a 70% attrition rate from the class of 2020. She addressed the impact on her program because of the delay in testing with students.

9 Ms. Wendy Miller commented that the 2020-2021 10 exam year would have started October 1, 2020, noting 11 test centers were at 100 percent prior to then. She 12 noted there may have been less seats available than 13 previous, but they also had extended hours which made 14 up for the fewer seats per administration.

Dr. Petula reported that both RN and LPN nursing programs had a significant increase by almost 10 percent of testers, and it is interesting that happened during COVID.

Dr. Petula offered to share an article published by Peter Buerhaus, PhD, RN, FAAN, nurse and healthcare economist, talking about nursing shortages and the consequences of COVID from a different perspective. He found that although many nurses were walking away from practice, there are other non-nurses gravitating to this profession.

Dr. Petula commented that there was a gap in the test centers for about three weeks when COVID hit but very quickly pivoted to open with extending times, adding testing, and shortening the exam to turnover testing seats more quickly.

6 Dr. Petula commented that pass rates nationally 7 are at about a 3.4 percent decline. She noted 8 Pennsylvania still ranks in the top six by candidates 9 testing and also in pass rates. She reported Florida 10 had close to 19,000 candidates, Texas 14,000, and 11 California 12,000 this past testing year for practical 12 nurses.

13 Dr. Petula addressed pass rates in 2013-2014 for 14 RNs at almost 8 percent and PNs the following year in 15 2014-2015, where the test plan changed, and the logits 16 went up causing a subsequent decline in the PN pass 17 rate. She noted the new test plan for practical 18 nurses came out on April 1, 2020, and the level of difficulty increased by about 3 percent, which might 19 20 contribute to some of the decline for this past exam 21 year but is something the programs are aware of and 22 must make sure the curriculum is current. 23 Dr. Petula addressed the July 2020 Delphi study,

23 Dr. Petula addressed the July 2020 Delphi study, 24 noting that the curriculum did not really appear 25 within that list of warning signs, only for programs

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1 that are truly just teaching to the test and not 2 necessarily to the depth and breadth of nursing. She 3 noted other factors that came into play were faculty 4 turnover and director turnover.

5 Dr. Petula reported retirements are occurring, 6 where one-fifth of the nursing population is going to 7 retire in the next five years. She also reported that 8 there are currently 4.1 million RNs and approximately 9 950,000 practical nurses, noting the retirement impact 10 on the nursing workforce is significant.

11 Ms. Pachter Schulder reminded the Board that if 12 it chooses to suspend the requirement that programs 13 who fail to maintain the required pass rate be placed 14 on provisional status, that suspension would apply to 15 all programs, including those that were on provisional 16 status for the past year. Another option would be to 17 put the applicable programs on provisional status but 18 allow the programs to explain the COVID impact on that 19 program's pass rates.

20 Chair Malady noted being inclined to put programs 21 on provisional status and have them be able to say 22 that COVID factors apply, and the Board agreed.

Ms. Pachter Schulder explained that programs on provisional status, in addition to providing performance improvement plans to the Board, are

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required to send the Board a copy of the letter that 1 2 they send to their current students and to their 3 students they are recruiting, letting them know about 4 the provisional status, and, this year, an explanation 5 of COVID's impact, as warranted. She noted the 6 programs will receive a letter from the Board noting 7 they are on provisional status.] * * * 8 9 [Linda L. Kmetz, PhD, RN, Vice Chair, reentered the 10 meeting at 11:37 a.m.] * * * 11 12 New Business - Election of Officers 13 CHAIR MALADY: I would like to nominate Linda Kmetz as 14 15 Chair for the upcoming year. MS. PACHTER SCHULDER: 16 17 Is there a second? DR. COUGHLIN: 18 19 Second. 20 CHAIR MALADY: All those in favor? Opposed? 21 22 Abstentions? 23 [The motion carried unanimously.] * * * 24 25 DR. KMETZ:

42 I would like to nominate Dr. Coughlin as 1 2 Vice Chair. 3 CHAIR MALADY: 4 Do we have a second? 5 MS. VINCENT: I second it. 6 7 CHAIR MALADY: 8 Anymore nominations? Seeing none. 9 All those in favor? Opposed? 10 Abstentions? 11 [The motion carried unanimously.] * * * 12 13 [In response to an inquiry about whether there is any 14 change to the requirement for programmatic 15 accreditation for practical nurse programs, Judith Pachter Schulder, Esquire, Board Counsel, noted the 16 17 section did not change and that the new regulations 18 would require programmatic accreditation for PNs. She 19 stated the only sections of the regulations that were 20 previously approved by the Board in January 2020 that 21 changed would be the ones outlined in this meeting.] * * * 2.2 23 New Business - English Language Proficiency (ELP) 24 Testing 25 [Leslie House, MSN, RN, Nursing Practice Advisor,

1 referred to a question to the Board about the 2 acceptance of at-home English language proficiency 3 exams, in general, and the addition of the Test of 4 English as a Foreign Language (TOEFL) Essentials or 5 the Occupational English Test (OET) to the list of the 6 Board-accepted ELPs.

7 Ms. House mentioned that she, Dr. Petula, and Ms. Hoffman researched ELP options currently available, 8 9 noting the at-home examinations are being offered by 10 most of the testing services. She provided a summary 11 of the pass rates, whether there is an at-home 12 version, and the security of the platform for the 13 TOEFL iBT, TOEFL iBT Home Edition, TOEFL PBT (Paper), TOEFL Essentials, IELTS Academic, PTE, MELAB with 14 15 Speaking Test and the OET. She also discussed the 16 difference between academic tests like the OET and 17 generalized language tests like TOEFL. Additionally, 18 she informed the Board that NCSBN had provided the 19 Boards with recommendations for standard setting 20 related to speaking, writing, reading, and listening. 21 NCSBN has convened a work group to review the tests 22 and the platforms.

The Board discussed its concern about the security of those tests even where ProctorU or other artificial intelligence security services are used.

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The Board also expressed concern about making a
 decision until it receives information from NCSBN
 about its review of the platforms, as they include
 psychometricians in the discussion. The Board agreed
 to keep things the way they are until they have
 additional data to support adding those additional
 options to their list.

8 Ms. House stated that the Advisors would follow 9 NCSBN's and any other discussions about changes to ELP 10 examinations and their security and report back to the 11 Board.

Following Board discussion, Chair Malady stated it is a matter of people being able to ensure the tests are secure and is something the Board will be looking at again in the future but will keep it at the test centers for now.]

18 Report of Commissioner

19 [K. Kalonji Johnson, Commissioner, Bureau of 20 Professional and Occupational Affairs, wished everyone 21 a restful and peaceful holiday. He also thanked 22 everyone and expressed his gratitude for all their 23 hard work over the last 21 months. 24 Commissioner Johnson reminded everyone that the 25 virtual platform will continue through March 31, 2022.

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He mentioned there is legislation currently pending in the General Assembly regarding the use of technology to provide hybrid meetings and the use of virtual presence to account for quorums as it relates to Board requirements.

6 Commissioner Johnson reminded the Board of a new 7 process for regional and national travel requests through the Commonwealth Out-of-State Travel 8 9 Application (COSTA) portal that requires their 10 username and password for administrative approval. He 11 noted to continue to reach out to Ms. Miller for the appropriate paperwork for any in-state travel. 12 Не 13 also encouraged everyone to exercise virtual 14 participation options if available. He asked everyone 15 to notify Wendy Miller, Cindy Miller, or Board Counsel 16 of any travel requests to be placed on the agenda for 17 formal Board approval due to the Sunshine Act.

18 Chair Malady requested an update regarding vacant 19 Board positions. Commissioner Johnson noted that the 20 administration reached out to the Department regarding 21 potential candidates across all boards and is 22 preparing a package for the Senate.

Ms. Wendy Miller asked Commissioner Johnson to provide information on a question asked earlier concerning a replacement for eAgenda. Commissioner

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1	Johnson informed the Board that they released a				
2	Request for Information regarding a number of				
3	application replacements, noting that many of the				
4	existing contracts on licensing applications and other				
5	related applications are coming due. He also noted a				
6	plan regarding issuing a Request for Proposal (RFP)				
7	for new application replacements. He stated				
8	eppiccNurse is on the list of applications they are				
9	looking to either integrate into the new application				
10	system or as a standalone product and will keep the				
11	Board apprised.]				
12	* * *				
13	For the Board's Information				
14	[Judith Pachter Schulder, Esquire, Board Counsel,				
15	commented that at the October 21, 2021, meeting, the				
16	Board voted to grant a blanket extension of time to				
17	Temporary Practice Permit holders until March 31,				
18	2022, in light of COVID. As part of that vote, the				
19	Board directed that a notice be sent to all affected				
20	Temporary Practice Permit holders as well as				
21	stakeholders and health systems informing them of the				
22	expiration date and that in order to have their				
23	licensure applications reviewed so that there will be				
24	no lapse in practice, any applications that are still				
25	pending must be received by January 3. A copy of the				

1 notice was attached to the Agenda.

Ms. Pachter Schulder directed the Board's attention to the Policy Statement by NCSBN and other organizations on dissemination of non-scientific and misleading COVID-19 information by nurses for the Board's review.

Ms. Pachter Schulder informed the Board that the 7 Pennsylvania Student Loan Relief for Nurses, part of 8 9 the Coronavirus State and Local Fiscal Recovery Funds, 10 is open for application to the Pennsylvania Higher 11 Education Assistance Agency from January 1 to March 12 31. To qualify, the nurse must have been licensed in 13 Pennsylvania and worked at a qualified facility within 14 Pennsylvania before December 31, 2021.

15 Chair Malady addressed the 2022 NCSBN Advanced 16 Practice Registered Nurse (APRN) Roundtable on April 17 12. She mentioned that it looks like Roundtable will 18 be hybrid and encouraged Board members to contact 19 Cindy Miller if they wished to attend.] * * * 20 [Pursuant to Section 708(a)(5) of the Sunshine Act, at 21 22 12:00 p.m., the Board entered into Executive Session

23 with Judith Pachter Schulder, Esquire, Board Counsel;
24 Carole Clarke Smith, Esquire, Board Counsel; Ariel
25 O'Malley, Esquire, Board Counsel; Todd Kriner,

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1	Esquire, Board Counsel; and Megan E. Castor, Esquire,			
2	Board Counsel, for the purpose of conducting quasi-			
3	judicial deliberations on the matters identified under			
4	the Report of Board Counsel, Report of Prosecutorial			
5	Division, and requests for approval under the			
6	Appointments. The Board returned to Open Session at			
7	1:04 p.m.]			
8	* * *			
9	MOTIONS:			
10	MS. PACHTER SCHULDER:			
11	During Executive Session, the Board			
12	engaged in quasi-judicial deliberations			
13	on the matters listed on the agenda			
14	under the Report of Prosecutorial			
15	Division, Report of Board Counsel, and			
16	the Application for approval of a			
17	program for Gwynedd Mercy for an RN			
18	Direct-Entry Program.			
19	Board members who recuse themselves			
20	will identify themselves with the			
21	appropriate motions.			
22	Is there a motion to grant approval			
23	to Frances M. Maguire School of Nursing			
24	and Health Professions at Gwynedd Mercy			
25	University their Proposal for			

49 Establishment of a Prelicensure RN 1 2 Direct-Entry Master of Science Degree? 3 DR. KMETZ: So moved. 4 5 DR. COUGHLIN: Second. 6 7 CHAIR MALADY: 8 All those in favor? Opposed? 9 Abstentions? 10 [The motion carried unanimously.] * * * 11 MS. PACHTER SCHULDER: 12 13 Is there a motion to approve all of the 14 VRP Consent Agreements at items 2 15 through 8? 16 MS. LUCHS: 17 So moved. DR. KMETZ: 18 Second. 19 20 CHAIR MALADY: 21 All those in favor? Opposed? 22 Abstentions? 23 [The motion carried unanimously.] * * * 24 25 MS. PACHTER SCHULDER:

Is there a motion to approve the two 1 2 Consent Agreements, for which members 3 Hertzler, Kerns, and Luchs are recused, at Case No. 21-51-002438 and Case No. 4 5 21 - 51 - 012305? 6 DR. KMETZ: 7 So moved. 8 DR. COUGHLIN: 9 Second. 10 CHAIR MALADY: 11 All those in favor? Opposed? 12 Abstentions? [The motion carried. Members Hertzler and Luchs 13 recused themselves from deliberations and voting on 14 15 the motion; Member Kerns was absent from the meeting. 16 The Respondent's name in Case No. 21-51-002438 is 17 Joseph Gregory McFarland Jr., CRNP, and Case No. 21-18 51-012305 is Tracy Lynn Nutt, RN.] * * * 19 20 MS. PACHTER SCHULDER: 21 Is there a motion to adopt the Consent 22 Agreement in Case No. 19-51-004529, for 23 which member Luchs is recused? DR. COUGHLIN: 24 25 So moved.

1 DR. KMETZ: 2 Second. 3 CHAIR MALADY: 4 All those in favor? Opposed? 5 Abstentions? 6 [The motion carried. Member Luchs recused herself 7 from deliberations and voting on the motion. The 8 Respondent's name in Case No. 19-51-004529 is 9 Christina Viola Ackerman, RN.] * * * 10 11 MS. PACHTER SCHULDER: 12 Is there a motion to adopt the Consent Agreement, for which members Hertzler 13 and Luchs are recused, at Case No. 19-14 15 51-016511? 16 MS. VINCENT: 17 So moved. CHAIR MALADY: 18 19 Do I have a second? 20 DR. KMETZ: 21 Second. 22 CHAIR MALADY: 23 All those in favor? Opposed? 24 Abstentions? 25 [The motion carried. Members Hertzler and Luchs

recused themselves from deliberations and voting on 1 2 the motion. The Respondent's name in Case No. 19-51-3 016511 is Sonia M. May, RN.] * * * 4 5 MS. PACHTER SCHULDER: 6 Is there a motion to adopt the Consent 7 Agreements for which there are no recusals in Case No. 19-51-010628, Case 8 9 No. 20-51-011372, Case No. 19-51-002876, 10 Case No. 17-51-03616, Case Nos. 18-51-11 04186 & 20-51-012710, Case No. 19-51-12 000633, Case No. 20-51-013562, Case No. 21-51-014822, Case No. 21-51-015526, 13 Case No. 19-51-008842, Case No. 19-51-14 15 016814, Case No. 20-51-008407, Case No. 16 21-51-006081, Case No. 18-51-008297, 17 Case No. 20-51-010677, Case No. 20-51-18 012096, Case No. 20-51-012775, Case No. 19 21-51-016112, Case No. 20-51-009922, and 20 Case No. 21-51-016709? 21 CHAIR MALADY: 22 Do I have a motion? 23 DR. COUGHLIN: 24 So moved. 25 MS. LUCHS:

53 Second. 1 2 CHAIR MALADY: 3 All those in favor? Opposed? Abstentions? 4 5 [The motion carried unanimously. The Respondent's 6 name at Case No. 19-51-010628 is Shirley Marie Owens, 7 RN, LPN; Case No. 20-51-011372, Theresa Uhlendorf, RN; Case No. 19-51-002876, Shannon Beaver, RN; Case No. 8 9 17-51-03616, Kristin Joy Ewing, RN; Case Nos. 18-51-10 04186 & 20-51-012710, Justin Edward Gorman, RN; Case 11 No. 19-51-000633, Jeordi Montana Howard, RN; Case No. 20-51-013562, Robert Nuss, RN; Case No. 21-51-014822, 12 Patricia Foder Coleman, RN; Case No. 21-51-015526, 13 14 Nichole Ensworth, RN, LPN; Case No. 19-51-008842, 15 Carolyn T. Green, RN; Case No. 19-51-016814, Tammi Lee 16 Smith, RN; Case No. 20-51-008407, Jessica Kamerer, 17 LPN; Case No. 21-51-006081, Terri Jean Fitzpatrick, 18 RN; Case No. 18-51-008297, Rita Horton Forbes, RN; 19 Case No. 20-51-010677, Abby Monczewski, LPN; Case No. 20 20-51-012096, Tory Allen Slayton, LPN; Case No. 20-51-21 012775, Jessica M. Taylor, RN; Case No. 21-51-016112, 22 Kathryn Sue Baird, RN; Case No. 20-51-009922, Savin 23 Sun, LPN, RN; and Case No. 21-51-016709, Shelley Lyn 24 Lych, RN.] 25 * * *

54 [Kessey J. Kieselhorst, MPA, RD, LDN, CPHQ, left the 1 2 meeting at 1:00 p.m.] 3 4 [Judith Pachter Schulder, Esquire, Board Counsel, 5 noted stakeholders did receive a copy of the updated 6 Agenda table of contents for the last three consent 7 agreements, and the corrected Agenda table of contents 8 will also be placed on the Board's website.] 9 * * * 10 MS. PACHTER SCHULDER: 11 Is there a motion to grant the Request 12 for Reinstatement from Jeanne Thompson 13 Clair, RN, Case No. 15-51-06473, and 14 Shatoina Miller, RN, Case No. 19-51-15 012478? 16 DR. KMETZ: 17 So moved. DR. COUGHLIN: 18 19 Second. 20 CHAIR MALADY: All those in favor? Opposed? 21 22 Abstentions? 23 [The motion carried unanimously.] * * * 24 25 MS. PACHTER SCHULDER:

Is there a motion to adopt the 1 2 Adjudication and Order of the Hearing 3 Examiner upon further deliberation in the matter of Lisa A. Pritchard, LPN, 4 Case No. 21-51-001830? 5 6 MS. LUCHS: 7 So moved. 8 DR. KMETZ: 9 Second. 10 CHAIR MALADY: 11 All those in favor? Opposed? 12 Abstentions? 13 [The motion carried unanimously.] * * * 14 15 MS. PACHTER SCHULDER: 16 Is there a motion to authorize Counsel to settle in the matter of Stanley C. 17 Martin, RN, Docket No. 701 CD 2021? 18 19 MS. LUCHS: 20 So moved. 21 DR. KMETZ: 22 Second. 23 CHAIR MALADY: 24 All those in favor? Opposed? 25 Abstentions?

[The motion carried unanimously.] 1 * * * 2 3 MS. PACHTER SCHULDER: There is no motion needed for item 51 4 5 because the Board previously authorized 6 the writing of an Adjudication and 7 Order. * * * 8 9 [K. Kalonji Johnson, Commissioner, Bureau of 10 Professional and Occupational Affairs, exited the 11 meeting at 1:12 p.m.] * * * 12 13 MS. PACHTER SCHULDER: Is there a motion to enter default, to 14 15 deem facts admitted, and to authorize 16 Counsel to prepare Adjudications and 17 Orders in the matter of Robin Hall, LPN, 18 Case No. 19-51-016054; Rena Koch, LPN, 19 Case No. 20-51-001470; Erik Alexander 20 Johnson, RN, Case No. 19-51-002908; 21 Sierraashley Brandi Lucas, LPN, Case No. 2.2 21-51-000938; Amanda Ann Ferdinand, LPN, 23 Case No. 19-51-009911; Thomas Stephen 24 Regrut, LPN, Case No. 20-51-006337; 25 Kathleen Claire Rickert, RN, Case No.

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20-51-003060; Karen Merritt Skwara, 1 2 CRNP, RN, Case No. 19-51-018271; Tammy 3 Lynn Wells, RN, Case No. 21-51-002786; 4 Mary Lou Morley, RN, LPN, Case No. 19-5 51-06228; and Patty Jo Olson, RN, Case No. 20-51-009663? 6 7 MS. HERTZLER: 8 So moved. 9 MS. LUCHS: 10 Second. 11 CHAIR MALADY: 12 All those in favor? Opposed? Abstentions? 13 14 [The motion carried unanimously.] * * * 15 16 MS. PACHTER SCHULDER: 17 Is there a motion to enter default, to 18 deem facts admitted, and to authorize 19 Counsel to prepare an Adjudication and 20 Order in the matter of Peter Fitzgerald, 21 LPN, Case No. 21-51-006809, for which 22 member Luchs is recused? 23 DR. KMETZ: 24 So moved. 25 DR. COUGHLIN:

	58
1	Second.
2	CHAIR MALADY:
3	All those in favor? Opposed?
4	Abstentions?
5	[The motion carried. Member Luchs recused herself
6	from deliberations and voting on the motion.]
7	* * *
8	MS. PACHTER SCHULDER:
9	Is there a motion to adopt the Hearing
10	Examiner's Proposals, for which there
11	are no recusals, for Vicki Lynn
12	Balchikonis, LPN, Case No. 19-51-012498;
13	Michelle Janson, LPN, Case No. 20-51-
14	007177; Dianna M. Sheehan, RN, Case No.
15	20-51-002005 and Case No. 21-51-008631;
16	Melissa Barbrajane Swank, LPN, Case No.
17	21-51-009347; Sarah Thanhauser, LPN,
18	Case No. 18-51-012112; Michelle Ann
19	Mennecke, RN, LPN, Case No. 18-51-00947;
20	and Jennifer Ann Mathabel, RN, Case No.
21	18-51-004812?]
22	DR. KMETZ:
23	So moved.
24	MS. LUCHS:
25	Second.

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1 CHAIR MALADY: 2 All those in favor? Opposed? 3 Abstentions? 4 [The motion carried unanimously.] * * * 5 6 MS. PACHTER SCHULDER: 7 Is there a motion to authorize Counsel 8 to prepare an Adjudication and Order in 9 the matter of Janelle M. Gan, RN, Case 10 No. 21-51-004988? 11 DR. COUGHLIN: 12 So moved. DR. KMETZ: 13 Second. 14 15 CHAIR MALADY: 16 All those in favor? Opposed? 17 Abstentions? 18 [The motion carried unanimously.] * * * 19 20 MS. PACHTER SCHULDER: 21 Is there a motion to adopt the Draft 22 Adjudications and Orders, for which 23 there are no recusals, for Carmen Michelle Alaofin, RN, Case No. 19-51-24 25 013769; Brandi Michelle Dunn, RN, Case

60 No. 19-51-004538; Portia Hamilton, RN, 1 2 Case No. 19-51-016461; Lori Ann 3 Humphrey, LPN, Case No. 20-51-007050; 4 Talita Shantez Prunty, LPN, Case No. 19-5 51-014398; Kelly Ann Spicer, RN, Case 6 No. 19-51-014446; Tracy Lynn Stanton, 7 RN, Case No. 19-51-011974; Robert Allen Stockton, RN, Case No. 20-51-001211; 8 9 Lisa Angeline Peck, RN, LPN, Case No. 10 15-51-03768; Michael Edward Nelson, RN, 11 Case No. 19-51-005478; and Courtney S. 12 Newman, RN, Case No. 19-51-013890? DR. KMETZ: 13 14 So moved. 15 MS. LUCHS: 16 Second. 17 CHAIR MALADY: 18 All those in favor? Opposed? 19 Abstentions? 20 [The motion carried unanimously.] 21 * * * 22 MS. PACHTER SCHULDER: 23 Is there a motion to adopt the Draft 24 Adjudications and Orders, for which 25 members Hertzler, Kerns, and Luchs are

recused, in the matters of Paige Leann 1 2 Carbaugh, LPN, Case No. 20-51-011746; 3 Margaret Elizabeth Fabo, LPN, Case No. 4 19-51-007223; Marianna Levshin, RN, Case 5 No. 21-51-002069; Kelly Ann Goulden, RN, 6 LPN, Case No. 21-51-006286; Cindee L. 7 Hartman, LPN, Case No. 19-51-012190; 8 Tonya Helen Straughn, LPN, Case No. 20-9 51-003935; and Deanna M. Waldron, LPN, 10 Case No. 20-51-007122? 11 DR. KMETZ: 12 So moved. DR. COUGHLIN: 13 14 Second. 15 CHAIR MALADY: All those in favor? Opposed? 16 17 Abstentions? [The motion carried. Members Hertzler and Luchs 18 19 recused themselves from deliberations and voting on 20 the motion; Member Kerns was absent from the meeting.] * * * 21 2.2 MS. PACHTER SCHULDER: 23 Is there a motion to adopt the Draft 24 Adjudication and Order in the matter of 25 Keith C. Keough, RN, Case No. 18-51-

62 1 006727, for which member Kerns is 2 recused? 3 DR. KMETZ: 4 So moved. 5 MS. LUCHS: 6 Second. 7 CHAIR MALADY: 8 All those in favor? Opposed? 9 Abstentions? 10 [The motion carried. Member Kerns was absent from the 11 meeting. * * * 12 MS. PACHTER SCHULDER: 13 14 Is there a motion to adopt the Draft 15 Adjudication and Order for Nicole S. Robinson, RN, Case No. 19-51-018052, for 16 17 which members Kerns and Luchs are 18 recused? 19 DR. KMETZ: 20 So moved. 21 DR. COUGHLIN: 22 Second. 23 CHAIR MALADY: 24 All those in favor? Opposed? 25 Abstentions?

[The motion carried. Member Luchs recused herself 1 2 from deliberations and voting on the motion. Member 3 Kerns was absent from the meeting.] * * * 4 5 MS. PACHTER SCHULDER: 6 Is there a motion to adopt the Draft 7 Adjudication and Order for Kimberly Bryan, RN, Case No. 18-51-009199? 8 9 MS. HERTZLER: 10 So moved. 11 MS. KIESELHORST: 12 Second. CHAIR MALADY: 13 All those in favor? Opposed? 14 15 Abstentions? 16 [The motion carried unanimously.] * * * 17 MS. PACHTER SCHULDER: 18 19 Ashley Marie Butler, RN, Case No. 18-51-20 010632; Melissa Reber, LPN, Case No. 19-21 51-008089; Dana Watterson Miller, RN, 22 Case No. 19-51-016930; and Lynne Menei, 23 RN, Case No. 19-51-018227, were 24 withdrawn, and we'll likely see all of 25 those on the January agenda.

64 * * * 1 2 Adjournment 3 CHAIR MALADY: 4 Do I have a motion to adjourn the 5 meeting? 6 MS. HERTZLER: 7 So moved. 8 DR. KMETZ: 9 Second. 10 CHAIR MALADY: 11 All those in favor, aye? 12 [The motion carried unanimously.] 13 * * * 14 [There being no further business, the State Board of 15 Nursing Meeting adjourned at 1:20 p.m.] * * * 16 17 18 19 20 21 22 23 24 25 26

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2	CERTIFICATE			
3				
4	I hereby certify that the foregoing summary			
5	minutes of the State Board of Nursing meeting, was			
6	reduced to writing by me or under my supervision, and			
7	that the minutes accurately summarize the substance of			
8	the State Board of Nursing meeting.			
9				
10	Samutha Sal 11			
11	Sormautha Sabatini			
12	Samantha Sabatini,			
13	Minute Clerk			
14	Sargent's Court Reporting			
15	Service, Inc.			
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1 2 3 4 5 6 7 8		STATE BOARD OF NURSING REFERENCE INDEX
		December 9, 2021
	TIME	AGENDA
。 9 10	9:00	Official Call to Order
$\begin{array}{c} 11\\ 12\\ 13\\ 14\\ 15\\ 16\\ 17\\ 18\\ 20\\ 22\\ 23\\ 25\\ 27\\ 29\\ 29\end{array}$	9:00	Roll Call of Board Members
	9:01	Introduction of Attendees
	9 : 05	Adoption of Agenda
	9:06	Report of Prosecutorial Division
	9:25	Regulation Update
	9:29	Appointment – Kevin Knipe, Program Manager, Professional Health Monitoring Program
	9:51	Appointment - Frances M. Maguire School of Nursing and Health Professions at Gwynedd Mercy University
	10:02	Pennsylvania Legislative Update
30 31	10:04	Report of Chairperson
32 33	10:06	Report of Committees
34 35	10:11	Report of Executive Secretary
36 37	10:13	Recess
38 39	10:20	Return to Open Session
40 41	10:20	Committee Meeting
42 43	11:04	New Business - Annual NCLEX Pass Rates
44 45 46 47 48 49 50	11:39	Report of Commissioner
	11:56	For the Board's Information
	12:00	Executive Session

Sargent's Court Reporting Service, Inc. (814) 536-8908

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1 2 3 4 5 6 7 8 9		STATE BOARD OF NURSING REFERENCE INDEX (Cont.)	
4 5 6		December 9, 2021	
7 8	TIME	AGENDA	
	1:04	Return to Open Session	
	1:04	Motions	
	1:20	Adjournment	
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