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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, September 28, 2022, 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.

AUDIO RECORDING TRANSCRIBED BY: Edward Bullock, DCR  
REPORTED BY: Edward Bullock, Notary Public

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 BOARD MEMBER APPEARANCES:  
2 GARY HICKS, RN Member, Board President  
3 ANN TURNER, RN Member, Board Secretary  
4 M. DAWNE HAYWARD, RN Member  
5 EMALIE GIBBONS-BAKER, APRN Member (via telephone)  
6 AUDREY CASSIDY, Consumer Member  
7 SUSAN STEINBERG, Consumer Member  
8 ROBIN HILL, RN Member, LPN Educator  
9 HEATHER WESTERFIELD, RN Member  
10 CHRISTINE LECHLITER, RN Member  
11 SUSAN LYONS, APRN Member  
12 NICOLE BEESON, RN, Administrator Member  
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1 ALSO PRESENT:

2 KAREN E.B. EVANS, Executive Director (via telephone)

3 RHONDA SCOTT, Deputy Director

4 KAREN BROWN, PIA Coordinator

5 BRIAN STALLSMITH, MBON, IT Technician

6 MONICA MENTZER, Manager, Practice

7 IMAN FARID, Health Policy Analyst (via telephone)

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1 AUDIENCE MEMBERS:

2 TIJUANA GRIFFIN, Washington Adventist University

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1	C O N T E N T S		
2			
3	SECTION	DESCRIPTION	PAGE
4			
5	No. 1.....	Call to Order/Roll Call/Updates.	7
6	No. 2.....	Approval of Consent Agenda.	N/A
7	No. 3.....	Discussion of Items Removed	
8		From the Consent Agenda.	10
9	No. 4.....	Education.	30
10	No. 5.....	Certifications.	N/A
11	No. 6.....	Licensure and Advanced Practice.	N/A
12	No. 7.....	Legislative Affairs.	41
13	No. 8.....	Direct Entry Midwives and Electrology.	N/A
14	No. 9.....	Quarterly Reports.	N/A
15	No. 10.....	Other Matters.	35 & 47
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## 1 P R O C E E D I N G S

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

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

6 MR. HICKS: Dr. Robin Hill.

7 MS. HAYWARD: Second. Hayward.

8 MR. HICKS: Hayward. All in favor?

9 ALL: Aye.

10 MR. HICKS: Opposed?

11 (No oppositions)

12 MR. HICKS: Motion carries. We will start with  
13 roll call in the room.

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

16 MS. LECHLITER: Good morning. Chrissy  
17 Lechlitter, nurse administrator member.

18 MS. TURNER: Ann Turner, RN member.

19 MS. HAYWARD: Dawne Hayward, RN member.

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

1 MS. STEINBERG: Susan Steinberg, consumer  
2 member.

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

5 MS. WESTERFIELD: Dr. Heather Westerfield, RN  
6 member, associates degree programs.

7 MR. HICKS: All right. Do I have any Board  
8 members online?

9 (No response)

10 MS. CASSIDY: She was on.

11 MS. SCOTT: They said they don't hear anything.  
12 Karen, they're not able to hear us.

13 MR. HICKS: Is anyone able to hear us online?

14 (No response)

15 (Whereupon, a connection was established on the  
16 telephone.)

17 MR. HICKS: Can anyone hear me?

18 MS. GIBBONS-BAKER: Yes.

19 MR. HICKS: Sorry, we had a little technical  
20 glitch there. Do I have any Board members online?

21 MS. GIBBONS-BAKER: Yes, this is Emalie



1 Gibbons-Baker.

2 MR. HICKS: Good morning. Anyone else?

3 (No responses)

4 MR. HICKS: Okay. So, we will start with Ms.

5 Evans. Are you online?

6 MS. EVANS: I am. Thank you.

7 MR. HICKS: Good morning.

8 MS. EVANS: Good morning, everyone. I just  
9 wanted to give everyone some updates from the Board.  
10 What I just heard the latest from was that temporary  
11 nursing assistant emergency bill has just been passed,  
12 and the Board will be providing information to all of the  
13 skilled and long-term care.

14 The other item is that we are going to give you  
15 an update on the connection. Currently, the connections  
16 will be, as far as being on the network instead of us  
17 being on MiFi, will be in January of 2023. Again, I ask  
18 for everyone's patience as we are working diligently as  
19 we can with the limited staff situation that we have to  
20 license and approve programs as we go along. So, we  
21 appreciate in advance everyone's patience with us. And

1 that's the updates for right now, Mr. Hicks.

2 MR. HICKS: Thank you so much. Any questions  
3 for Ms. Evans?

4 (No questions posed)

5 MR. HICKS: All right. Moving on, is there a  
6 motion to approve the Consent Agenda? I apologize, there  
7 is no Consent Agenda.

8 Ms. Evans, are you going to discuss the items  
9 that were removed from the Consent Agenda?

10 MS. EVANS: Yes, I am. Mr. Hicks, can I add  
11 one? I asked for it to be uploaded for the Board members  
12 this morning. This is a person for the CNA Advisory  
13 Committee, Kathy Archer. I will do her at the end, but I  
14 would like to add her at this time.

15 MR. HICKS: Okay.

16 MS. EVANS: Thank you. The first is, we have  
17 renewal of approved CNA training program. And all of  
18 these programs have gone through the Practice and  
19 Education Committee, and have been moved forward to the  
20 Board.

21 First is Anne Arundel County School Health

1 Services CNA-School Health Program. They meet all of the  
2 requirements of the 10.39.02, and the recommendation is  
3 to renew this program from the Practice and Education  
4 Committee.

5 MR. HICKS: Is there a motion to approve the  
6 renewal for Anne Arundel County School Health Services  
7 CNA Program?

8 MS. HAYWARD: So moved. Hayward.

9 MR. HICKS: Hayward.

10 MS. STEINBERG: Second. 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. EVANS: Thank you. The next one is  
17 Baltimore City Community College CNA Program. It meets  
18 all of the requirements of the 10.39.02, and the Practice  
19 and Education Committee's recommendation was to move this  
20 to the Board for final approval.

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

1 recommendation to approve Baltimore City Community  
2 College's CNA Program?

3 MS. STEINBERG: So moved. Steinberg.

4 MR. HICKS: Steinberg.

5 MS. TURNER: Second.

6 MR. HICKS: Turner. All in favor?

7 ALL: Aye.

8 MR. HICKS: Opposed?

9 (No oppositions)

10 MR. HICKS: Motion carries.

11 MS. EVANS: Thank you. The next is Baltimore  
12 City Community College's CMA Program. It has met all of  
13 the requirements in COMAR. The Practice and Education  
14 Committee's recommendation was to move this forward to  
15 the Board for final approval.

16 MR. HICKS: Motion to approve Baltimore City  
17 Community College's CMA Program.

18 MS. LYONS: So moved. Lyons.

19 MR. HICKS: Lyons.

20 MS. HAYWARD: Second. Hayward.

21 MR. HICKS: Hayward. All in favor?

1 ALL: Aye.

2 MR. HICKS: Opposed?

3 (No oppositions)

4 MR. HICKS: Motion carries.

5 MS. EVANS: The next one is Crossland High

6 School's CNA Program. It has met all the requirements

7 under COMAR under 10.39.02. The Practice and Education

8 Committee has made a recommendation to move this forward

9 to the Board for approval.

10 MR. HICKS: Motion to approve Crossland High

11 School's CNA Program.

12 MS. STEINBERG: So moved. Steinberg.

13 MR. HICKS: Steinberg.

14 MS. CASSIDY: Second. 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. EVANS: The last one of the programs is

21 Dorchester County School of Career and Technology CNA

1 Program. They have met all of the COMAR requirements in  
2 10.39.02. The Practice and Education Committee has  
3 recommended to move this program forward to the Board for  
4 final approval.

5 MR. HICKS: Is there a motion to approve  
6 Dorchester County School of Career and Technology's CNA  
7 Program?

8 MS. HAYWARD: So moved. Hayward.

9 MR. HICKS: Hayward.

10 MS. TURNER: Second. Turner.

11 MR. HICKS: Turner. All in favor?

12 ALL: Aye.

13 MR. HICKS: Opposed?

14 (No oppositions)

15 MR. HICKS: Motion carries.

16 MS. EVANS: "C" is the Approval for Faculty for  
17 Certified Nursing Assistant Training Programs. The first  
18 one was pulled.

19 The second one is Myrtis Pope, RN-R136957, ELH  
20 Nursing Solutions. Ms. Pope has met all of the  
21 requirements under 10.39.02.05 as far as having two

1 years' experience; one year caring for the elderly; and  
2 has met the two-year requirement for teaching.

3           If it's okay with everyone, I just wanted to  
4 give what the approval content is, and then I'm just  
5 going to go down the line with everyone because everyone  
6 has met the requirements. If that's okay.

7           MR. HICKS: That's fine.

8           MS. EVANS: Okay. So, the Practice and  
9 Education Committee recommends to approve Ms. Pope as a  
10 clinical instructor for ELH Nursing Solutions for final  
11 approval from the Board.

12           MR. HICKS: Motion to approve Myrtis Pope, RN-  
13 R136957 for ELH's Nursing Solutions program?

14           MS. STEINBERG: So moved. Steinberg.

15           MR. HICKS: Steinberg.

16           MS. LECHLITER: Lechliter.

17           MR. HICKS: Lechliter. All in favor?

18           ALL: Aye.

19           MR. HICKS: Opposed?

20                           (No oppositions)

21           MR. HICKS: Motion carries.

1 MS. EVANS: The next person is Michelle Powell,  
2 RN-R181454 for ELH Nursing Solutions. She has met all of  
3 the requirements of the 10.39.02.05. The Practice and  
4 Education Committee has made a recommendation for final  
5 approval from the Board.

6 MR. HICKS: Motion to approve Michelle Powell,  
7 RN-R181454 for ELH Nursing Solution's program?

8 MS. STEINBERG: So moved. Steinberg.

9 MR. HICKS: Steinberg.

10 MS. WESTERFIELD: Westerfield.

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

12 ALL: Aye.

13 MR. HICKS: Opposed?

14 (No oppositions)

15 MR. HICKS: Motion carries.

16 MS. EVANS: The next is Patricia Clark,  
17 RN-R026439, also from ELH Nursing Solutions. She has met  
18 all the requirements of 10.39.02.05. The Practice and  
19 Education Committee recommends to move her for final  
20 approval of this instructor.

21 MR. HICKS: Motion to approve Patricia Clark,



1 RN-R026439 for the ELH Nursing Solutions program?

2 MS. HAYWARD: So moved. Hayward.

3 MR. HICKS: Hayward.

4 MS. TURNER: Turner.

5 MR. HICKS: Turner. All in favor?

6 ALL: Aye.

7 MR. HICKS: Opposed?

8 (No oppositions)

9 MR. HICKS: Motion carries.

10 MS. EVANS: The next one is Cassandra Taylor,

11 RN-R197184, ELH Nursing Solutions. She has met all of

12 the requirements of 10.39.02.05. The Practice and

13 Education Committee's recommendation is to move this

14 forward to the Board for final approval.

15 MR. HICKS: Motion to approve Cassandra Taylor,

16 RN-R197184 for ELH Nursing Solution program?

17 MS. LYONS: So moved. Lyons.

18 MR. HICKS: Lyons.

19 MS. CASSIDY: Cassidy.

20 MR. HICKS: Cassidy. All in favor?

21 ALL: Aye.

1 MR. HICKS: Opposed?

2 (No oppositions)

3 MR. HICKS: Motion carries.

4 MS. EVANS: Next is Elizabeth Money, RN. She  
5 has a Delaware license, L1-0014460, for Cecil County  
6 School of Technology. The Practice and Education  
7 Committee's recommendation was to move this forward to  
8 the Board for final approval, and has met all of the  
9 requirements under 10.39.02.05.

10 MR. HICKS: Motion to approve Elizabeth Money,  
11 RN, with Delaware License L1-0014460 for Cecil County  
12 School of Technology?

13 MS. HAYWARD: So moved. Hayward.

14 MR. HICKS: Hayward.

15 MS. CASSIDY: Second. 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. EVANS: The next is Rebecca Fazenbaker, RN-

1 241911. She has met all the requirements under  
2 10.30.02.05 for Egle Nursing and Rehabilitation. The  
3 Practice and Education Committee has made a  
4 recommendation to move this person to the Board for final  
5 approval.

6 MR. HICKS: Motion to approve Rebecca  
7 Fazenbaker, RN-R421991 for Egle Nursing and Rehab CNA  
8 program?

9 MS. BEESON: So moved. Beeson.

10 MR. HICKS: Beeson.

11 MS. LECHLITER: Lechliter.

12 MR. HICKS: Lechliter. All in favor?

13 ALL: Aye.

14 MR. HICKS: Opposed?

15 (No oppositions)

16 MR. HICKS: Motion carries.

17 MS. EVANS: The next person is under the  
18 University of Maryland Medical Center for DTC as well as  
19 Midtown Campus. She is Amanda Fabian, R200689. She has  
20 met all the requirements under 10.39.02.05. The Practice  
21 and Education Committee has made a recommendation for the

1 Board to approve for Ms. Fabian for both as an  
2 instructor.

3 MR. HICKS: Motion to approve Amanda Fabian,  
4 RN-R200689 for the University of Maryland Medical  
5 Center's Downtown Campus?

6 MS. BEESON: So moved. Beeson.

7 MR. HICKS: Beeson.

8 MS. TURNER: Second. Turner.

9 MR. HICKS: Turner. All in favor?

10 ALL: Aye.

11 MR. HICKS: Opposed?

12 (No oppositions)

13 MR. HICKS: Motion carries. Also, motion to  
14 approve Amanda Fabian, R200689 for the University of  
15 Maryland Medical Center's Midtown Campus?

16 MS. LYONS: So moved. Lyons.

17 MR. HICKS: Lyons.

18 MS. HAYWARD: Second. Hayward.

19 MR. HICKS: Hayward. All in favor?

20 ALL: Aye.

21 MR. HICKS: Opposed?

1 (No oppositions)

2 MR. HICKS: Motion carries.

3 MS. EVANS: Norma Schultz, RN-R121566, has met  
4 all the requirements under 10.39.02.05. This would be  
5 for both the Caroline Career and Technical Center as well  
6 as the Academy of Health Professionals. The Practice and  
7 Education Committee has made a recommendation to approve  
8 Ms. Schultz.

9 MR. HICKS: Is there a motion to approve Norma  
10 Schultz, RN-R121566 for the Caroline Career and Technical  
11 Center's CNA program?

12 MS. BEESON: So moved. Beeson.

13 MR. HICKS: Beeson.

14 MS. STEINBERG: Second. Steinberg.

15 MR. HICKS: Steinberg. All in favor?

16 ALL: Aye.

17 MR. HICKS: Opposed?

18 (No oppositions)

19 MR. HICKS: Motion carries. Is there a motion  
20 to approve Norma Schultz, RN-R121566 for the Academy of  
21 Health Professionals' CNA Program?

1 MS. TURNER: So moved. Turner.  
2 MR. HICKS: Turner.  
3 MS. HAYWARD: Second. Hayward.  
4 MR. HICKS: Hayward. All in favor?  
5 ALL: Aye.  
6 MR. HICKS: Opposed?  
7 (No oppositions)  
8 MR. HICKS: Motion carries.  
9 MS. EVANS: The next is Ashley Pope,  
10 RN-R206753. She has met all of the requirements of the  
11 10.39.02.05 for Carroll Community College. The Practice  
12 and Education Committee has made a recommendation for  
13 final approval from the Board.  
14 MR. HICKS: Motion to approve Ashley Pope, RN-  
15 R206753 for Carroll Community College?  
16 MS. ROBIN HILL: So moved. Dr. Robin Hill.  
17 MR. HICKS: Dr. Robin Hill.  
18 MS. LECHLITER: Second. Lechlitter.  
19 MR. HICKS: Lechlitter. All in favor?  
20 ALL: Aye.  
21 MR. HICKS: Opposed?

1 (No oppositions)

2 MR. HICKS: Motion carries.

3 MS. EVANS: The next person is Carol Marks, RN-  
4 R192040. She has met all of the requirements under  
5 10.39.02.05 for Future Care-Irvington. The Practice and  
6 Education has made a recommendation to move this forward  
7 to the Board for final approval.

8 MR. HICKS: Motion to approve Carol Marks, RN-  
9 R192040 for Future Care-Irvington CNA program?

10 MS. HAYWARD: So moved. Hayward.

11 MR. HICKS: Hayward.

12 MS. BEESON: Second. Beeson.

13 MR. HICKS: Beeson. All in favor?

14 ALL: Aye.

15 MR. HICKS: Opposed?

16 (No oppositions)

17 MR. HICKS: Motion carries.

18 MS. EVANS: Michelle DelValle, RN-R138306, has  
19 met all of the requirements under 10.30.02.05 for Future  
20 Care-Irvington. The Practice and Education Committee has  
21 made the recommendation to move MS. DelValle forward for

1 final approval from the Board.

2 MR. HICKS: Motion to approve Michelle  
3 DelValle, RN-R138306 for Future Care-Irvington CNA  
4 Program?

5 MS. BEESON: So moved. Beeson.

6 MR. HICKS: Beeson.

7 MS. ROBIN HILL: Second. Dr. Robin Hill.

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

9 ALL: Aye.

10 MR. HICKS: Opposed?

11 (No oppositions)

12 MR. HICKS: Motion carries.

13 MS. EVANS: Donna Algarin, RN-R157664, has met  
14 all of the requirements under 10.39.02.05 for Future  
15 Care-Irvington and Future Care-Homewood. The Practice  
16 and Education Committee has made a recommendation for  
17 Board's final approval.

18 MR. HICKS: Motion to approve Donne Algarin,  
19 RN-R157664 for Future Care-Irvington CNA Program?

20 MS. BEESON: So moved. Beeson.

21 MR. HICKS: Beeson.



1 MS. TURNER: Second. Turner.

2 MR. HICKS: Turner. All in favor?

3 ALL: All.

4 MR. HICKS: Opposed?

5 (No oppositions)

6 MR. HICKS: Motion carries. Also, Donna

7 Algarin, RN-R157664 for Future Care-Homewood CNA Program?

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

9 MR. HICKS: Dr. Robin Hill.

10 MS. BEESON: Second. Beeson.

11 MR. HICKS: Beeson. All in favor?

12 ALL: Aye.

13 MR. HICKS: Opposed?

14 (No oppositions)

15 MR. HICKS: Motion carries.

16 MS. EVANS: I would like to make a request to

17 the Board concerning the instructors. I would like to

18 set up a new process for the instructors to make it more

19 user-friendly, and I just need approval from the Board

20 members to do that, please.

21 MR. HICKS: Do you want to elaborate a little

1 bit more, Karen, what that might be, the process?

2 MS. EVANS: Sure. We have a lot of instructors  
3 that come through this method right now, and they're  
4 instructors who have repeated. So, they have been  
5 approved before and have met all of the requirements  
6 before, and we take them through the same process. What  
7 I want to do to make it easier is to be a little bit more  
8 quicker for the facilities is to make sure that our list  
9 is always up-to-date, but I just want to change the  
10 process so that if the person has been before the Board  
11 before and has already been approved, then the only thing  
12 that will really only need approval is for them if they  
13 are moving to a new site.

14 MR. HICKS: Okay. Are there any questions for  
15 Ms. Evans on that process?

16 (No questions posed)

17 MR. HICKS: So, basically, what will happen is  
18 if they've already been approved for one program and they  
19 are going to another program then we would only have to  
20 approve them for that program instead of going through  
21 the whole reintroduction of the person and asking for

1 approval.

2 MS. EVANS: Yes.

3 MR. HICKS: So, is there a motion to approve  
4 that process?

5 MS. WESTERFIELD: Motion to approve.

6 Westerfield.

7 MR. HICKS: Westerfield.

8 MS. LECHLITER: Second. Lechliter.

9 MR. HICKS: Lechliter. All in favor?

10 ALL: Aye.

11 MR. HICKS: Opposed?

12 (No oppositions)

13 MR. HICKS: Motion carries.

14 MS. EVANS: Thank you, all. The next is IT  
15 Works Learning Center, they would like to add four  
16 additional sites, which are: Complete Care-Heritage;  
17 Complete Care-Multi Medical Center; Levindale Hebrew  
18 Geriatric Center and Hospital, Inc.; Sinai Hospital of  
19 Greater Baltimore.

20 They have met all of the requirements under  
21 COMAR for the clinical sites. The Practice and Education

1 Committee would like to move this forward to the Board  
2 for final approval.

3 MR. HICKS: All right. Is there a motion to  
4 approve adding Complete Care-Heritage to the IT Works  
5 Learning Center's clinical site?

6 MS. BEESON: So moved. Beeson.

7 MR. HICKS: Beeson.

8 MS. TURNER: Turner.

9 MR. HICKS: Turner. All in favor?

10 ALL: Aye.

11 MR. HICKS: Opposed?

12 (No oppositions)

13 MR. HICKS: Motion carries. Is there a motion  
14 to approve adding Complete Care-Multi Medical Center's to  
15 the IT Works Learning Center's clinical site?

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

17 MR. HICKS: Dr. Robin Hill.

18 MS. BEESON: Beeson.

19 MR. HICKS: Beeson. All in favor?

20 ALL: Aye.

21 MR. HICKS: Opposed?

1 (No oppositions)

2 MR. HICKS: Motion carries. Is there a motion  
3 to approve Levindale Hebrew Geriatric Center and  
4 Hospital, Inc. to IT Works Learning Center's clinical  
5 site?

6 MS. LYONS: So moved. Lyons.

7 MR. HICKS: Lyons.

8 MS. HAYWARD: Second. Hayward.

9 MR. HICKS: Hayward. All in favor?

10 ALL: Aye.

11 MR. HICKS: Opposed?

12 (No oppositions)

13 MR. HICKS: Motion carries. Is there a motion  
14 to approve Sinai Hospital Greater Baltimore to IT Works  
15 Learning Center's clinical site rotation?

16 MS. HAYWARD: So moved. Hayward.

17 MS. BEESON: Second. Beeson.

18 MR. HICKS: Hayward, Beeson. All in favor?

19 ALL: Aye.

20 MR. HICKS: Opposed?

21 (No oppositions)

1                   MR. HICKS: Motion carries. Will move down to  
2 Education, Ms. Evans.

3                   MS. EVANS: For the Education, can I add Kathy  
4 Archer for the CNA Advisory Committee?

5                   MR. HICKS: Okay.

6                   MS. EVANS: So, Ms. Archer will fill the seat  
7 as the educator for the CNA Advisory Committee. Ms.  
8 Archer has extensive experience with CNA programs. She  
9 also teaches the "Train the Trainer" program for CNA  
10 instructors. She has been adjunct faculty for continuing  
11 education and training at Harford Community College, and  
12 also for multiple long-term care centers. She is  
13 currently the education program director at Sterling  
14 Senior Care. She has staff developer manager; has been  
15 GNA testing evaluator; has taught in the practical nurse  
16 programs; and in the past has also been a consultant for  
17 the NMAAP testing. She would go out and make  
18 recommendations that the GNAs will have to take on the  
19 written exam.

20                   So, I would like to make recommendation to add  
21 Ms. Kathy Archer -- I'm sorry, I forgot to get her

1 license number, but as the educator position on the CNA  
2 Advisory Committee.

3 MR. HICKS: Is there a motion to approve Kathy  
4 Archer for the education position on the CNA Advisory  
5 Committee?

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

7 MR. HICKS: Dr. Robin Hill.

8 MS. WESTERFIELD: Second. Westerfield.

9 MR. HICKS: Westerfield. All in favor?

10 ALL: Aye.

11 MR. HICKS: Opposed?

12 (No oppositions)

13 MR. HICKS: Motion carries.

14 MS. EVANS: Thank you. The next is for  
15 Education, and nursing program administrator, Dr.  
16 Jennifer Cooper, Chair, Hood College. As far as the  
17 background, Dr. Linda Kennedy retired as chair of the  
18 nursing department at Hood College in June of 2022. Dr.  
19 Deborah D. Ricker, Provost and Vice President of Academic  
20 Affairs, appointed Dr. Jennifer Cooper, associate  
21 professor of nursing, as the chair for the department

1 effective July of 2022.

2 Dr. Cooper completed her bachelor's of science  
3 in nursing degree from Stevenson University. She has her  
4 master's of science in nursing degree from Rush  
5 University, Chicago, Illinois; and her doctorate of  
6 nursing practice from the George Washington University,  
7 Washington, D.C. Dr. Cooper has had twenty-seven years  
8 of nursing experience, including; nursing practice,  
9 nursing education, and nursing administration. She has a  
10 current registered nursing license in the State of  
11 Maryland, and is academically qualified to serve as the  
12 nursing program administrator for Hood College. She has  
13 met all of the requirements of the 10.27.03.07 as a  
14 nursing program administrator.

15 The Practice and Education Committee would like  
16 to make recommendation to approve Dr. Cooper as the  
17 nursing program administrator for Hood College.

18 MR. HICKS: Is there a motion to approve Dr.  
19 Jennifer Cooper, associate professor of nursing, as the  
20 chair for the Department of Nursing for Hood College?

21 MS. HAYWARD: So moved. Hayward.



1 MR. HICKS: Hayward.

2 MS. BEESON: Beeson.

3 MR. HICKS: Beeson. All in favor?

4 ALL: Aye.

5 MR. HICKS: Opposed?

6 (No oppositions)

7 MR. HICKS: Motion carries.

8 MS. EVANS: The next is a change in a nursing  
9 program administrator for Dr. Lori A. Edwards, assistant  
10 professor interim, associate dean of the master's of  
11 nursing program at the University of Maryland.

12 Dr. Lori A. Edwards, assistant professor, was  
13 made interim associate dean for the master's of science  
14 in nursing program effective July 1st of 2022. In this  
15 role, Dr. Edwards will be responsible for the leadership  
16 and continued development of the nursing program at the  
17 University of Maryland School of Nursing. Dr. Lori A.  
18 Edwards received her bachelor's degree in nursing from  
19 the University of Maryland School of Nursing; her  
20 master's of public health degree from the Johns Hopkins  
21 University School of Hygiene and Public Health, now the

1 dean for the school of public health, and her doctor of  
2 public of health degree from Johns Hopkins University-  
3 Greenville School of Public Health. She has twenty-eight  
4 years of nursing experience inclusive of nursing  
5 practice, nursing education, nursing administration. She  
6 has a current registered nursing license in the State of  
7 Maryland, and is academically qualified to serve as the  
8 nursing program administrator for the masters of science  
9 program at the University of Maryland School of Nursing.  
10 She met COMAR 10.27.03.07, requirements for this role as  
11 nursing program administrator.

12 The Practice and Education Committee has made a  
13 recommendation to move this forward to the Board for  
14 their final approval.

15 MR. HICKS: Is there a motion to approve Dr.  
16 Lori A. Edwards as the interim associate dean for the MSN  
17 program for the University of Maryland School of Nursing?

18 MS. CASSIDY: So moved. Cassidy.

19 MS. STEINBERG: Steinberg.

20 MR. HICKS: Cassidy, Steinberg. All in favor?

21 ALL: Aye.

1 MR. HICKS: Opposed?

2 (No oppositions)

3 MR. HICKS: Motion carries. Ms. Evans, do you  
4 want to do 10, the APRN Advisory Committee, while we have  
5 you?

6 MS. EVANS: Sure. The APRN Advisory Committee,  
7 I would like to ask the Board if we can convene an APRN  
8 Advisory Committee to make sure we our what the current  
9 standards for all of the APRNs. I would like to have a  
10 representative from each CNRA as well CMS to participate  
11 on this committee, that's the purpose of it, and for  
12 whatever other guidance the Board may need from the  
13 APRNs. So, I am asking if we can convene, a particular  
14 committee.

15 MR. HICKS: So, to actually set up the advisory  
16 committee?

17 MS. EVANS: Yes.

18 MR. HICKS: Okay. Are there any questions for  
19 Ms. Evans before I call for the motion?

20 (No questions posed)

21 MR. HICKS: The whole purpose of this committee

1 is really to work with the APRN groups within the state.  
2 Some of that work, and correct me if I'm wrong, Ms.  
3 Evans, but part of that work group is also to work  
4 through the issue related the compact for APRN so that we  
5 can kind of all be on the same page in terms of that. Is  
6 that accurate, Ms. Evans?

7 MS. EVANS: Yes.

8 MR. HICKS: That's part of the focus of the  
9 APRN Advisory Committee. It's really just to try to have  
10 that relationship with that APRN groups so that we can  
11 help them continue to move their practice forward?

12 MS. EVANS: Yes, as well as updating our  
13 regulations.

14 MR. HICKS: Any questions for Ms. Evans on  
15 that?

16 (No questions posed)

17 MR. HICKS: All right. Is there a motion to  
18 approve setting up an APRN Advisory Committee?

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

21 MR. HICKS: Gibbons-Baker.

1 MS. LECHLITER: Lechliter.

2 MR. HICKS: Lechliter. All in favor?

3 ALL: Aye.

4 MR. HICKS: Opposed?

5 (No oppositions)

6 MR. HICKS: Motion carries.

7 MS. EVANS: The last advisory committee I would  
8 like to set up is the Delegating Nurse Case Manager  
9 Committee. Those regulations haven't been reviewed in a  
10 very long time, and we want to make sure that we're  
11 current with everything that goes on with the delegating  
12 nurse case manager. So, I would like to set up an  
13 advisory committee to review all of those regulations,  
14 and to make sure they are up-to-date and that all of us  
15 are on the same page.

16 So, I will ask for some delegating nurses to  
17 participate from the variety of settings the delegating  
18 nurses are located. And I would also like to ask -- and  
19 I have not asked -- I would also like to ask if Dawne,  
20 from the Board members, would participate in this  
21 committee as well. I have not asked her though. She

1 knows nothing about this.

2 (Laughter)

3 MR. HICKS: Surprise. We won't put her on the  
4 spot right now.

5 MS. WESTERFIELD: This is Heather Westerfield.  
6 I just have a question. Would this also be the  
7 delegating nurse for school systems? Is that what you're  
8 referring to?

9 MS. EVANS: I didn't hear the question.

10 MR. HICKS: The question was: Is this also  
11 going to include the delegating nurse for the school  
12 systems?

13 MS. EVANS: Yes, for every aspect. So, I would  
14 like to have for where every delegating nurses are, one  
15 from each sector.

16 MR. HICKS: Okay. Are there any other  
17 questions for Ms. Evans?

18 (No questions posed)

19 MR. HICKS: All right. Is there a motion to  
20 establish a delegating nursing case manager committee as  
21 outline by Ms. Evans?

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

2 MS. WESTERFIELD: Dr. Westerfield.

3 MR. HICKS: Dr. Robin Hill, Dr Westerfield.

4 All In favor?

5 ALL: Aye.

6 MR. HICKS: Opposed?

7 (No oppositions)

8 MR. HICKS: Motion carries. Those are really  
9 important as a Board that we don't lose sight of all of  
10 those folks that we are responsible for, keeping that  
11 engagement with them, making sure that the regulations  
12 are up-to-date. That's going to be really important. We  
13 may see more of these committees develop over time just  
14 so that we can maintain where we need to be.

15 Thank you, Ms. Evans. Are there are questions  
16 for Ms. Evans before we let her go? Because she does is  
17 at a conference, and I know that she has to get back to  
18 that.

19 MS. WESTERFIELD: Ms. Evans, this is Heather  
20 Westerfield, I will be happy to be on that delegating  
21 nurse committee as well.

1 MS. EVANS: I didn't hear. I'm sorry.

2 MR. HICKS: Dr. Westerfield has volunteered to  
3 be on that delegating committee.

4 MS. EVANS: Thank you, Dr. Westerfield.

5 MR. HICKS: And I will let you talk to Ms.  
6 Hayward offline.

7 MS. EVANS: We will.

8 MR. HICKS: Thank you, Ms. Evans. Have a good  
9 day.

10 MR. EVANS: You, too, all of you. Bye-bye.

11 MR. HICKS: Bye-bye. All right, we will move  
12 down to Legislative Affairs. Iman, are you online?

13 MS. FARID: Yes, I am here. Can you hear me?

14 MR. HICKS: Yep, good morning.

15 MS. FARID: Good morning, everyone, and happy  
16 Wednesday. First, I would like to present Item 7A, which  
17 is outlined on the meeting agenda. In the Spring of  
18 2022, the Board submitted emergency regulations to amend  
19 COMAR 10.28.01, which governs the practice and during of  
20 practice for nursing graduates. The Board recently  
21 received an update. The regulations were approved by the



1 AELR Committee on September 7th of 2022. The last step  
2 at the door currently awaiting is to have these  
3 regulations published in the Maryland Register. I think  
4 the earliest -- the next edition of the Maryland Register  
5 is to be published on October  
6 7th, so we're hoping to find the amended language in that  
7 particular volume.

8           The next emergency regulation that I will  
9 discuss was submitted in June, early June of 2022. These  
10 regulations were to amend COMAR 10.39.01 to outline the  
11 practice and certification standards for temporary  
12 nursing assistants. The Board also received an update.  
13 The regulations were approved by the AELR Committee  
14 yesterday on September 27th of 2022, and the Board is  
15 also currently awaiting these regulations to be published  
16 in the Maryland Register. So, I just wanted to provide  
17 this very quick FYI once the emergency regulations for  
18 the TNAs have been published, and then that will allow  
19 the Board to start the process of certifying these  
20 individuals so that they can be certified as a CNA/GNA  
21 and continue to practice in the State of Maryland if they

1 have met the requirements.

2 Are there any questions?

3 MR. HICKS: Are there any questions for Iman?

4 (No questions posed)

5 MR. HICKS: All right. I will let Ms. Scott  
6 update where we are in terms of notification on the  
7 website.

8 MS. SCOTT: Yes. So, where the information,  
9 application, guidance to the TNAs and the facilities will  
10 be posted on the website by close of business today.  
11 We're also working on mailing out applications and  
12 packets to all of the facilities as well, all  
13 long-term care facilities, and we're going to be  
14 notifying the facility administrators for all the  
15 long-term care facilities about the updates.

16 MR. HICKS: Any questions for Iman or Ms.  
17 Scott?

18 (No questions posed)

19 MR. HICKS: Okay. So, that's just an update so  
20 no motion is needed.

21 Do you have something else, Iman?

1 MS. FARID: Yes, I do. The second item, and I  
2 apologize, it is not on the meeting agenda, but I will be  
3 presenting Item 7B, which introduces amendments to COMAR  
4 10.27.27 for the practice of clinical nurse specialist.

5 I did send these regulations to the Board  
6 members yesterday afternoon around 5:00 p.m. So, I  
7 believe I you may all have it in your email inbox. But I  
8 did want to provide brief historical background on these  
9 regulations and what these new amendments hope to do.

10 So, these particular regulations governing the  
11 practice of clinical nurse specialists were approved by  
12 the Board last year on May 26th of 2021. Subsequent to  
13 their approval, the regulations were then submitted to  
14 the Department of Health to undergo their internal review  
15 process. On October 22nd of 2021 the regulations were  
16 published in the Maryland Register for public comments,  
17 and do to that the Board did receive two public comments  
18 which had let to the amendments that are before your  
19 consideration right now.

20 I would like to explain amendments for the  
21 regulations. So, in 2004, the open standards of

1 practice, you will see that there are two amendments in  
2 blue text. Line 5 originally read: Order of the  
3 practice of a clinical nurse specialist includes creating  
4 therapeutic environments, mentoring, and keeping changes  
5 to ordering, performing, and interpreting diagnostic  
6 tests. The particular amendment that has been introduced  
7 is changing diagnostics to laboratory tests. And there's  
8 also an additional line underneath, Line 6, ordering  
9 diagnostics tests and using their findings or results in  
10 the care of patients.

11           The Board received public comments related the  
12 original language around diagnostic tests. The nursing  
13 stakeholders, who had the original drafted regulations,  
14 reviewed that public comment and in turn have proactively  
15 amended the language to find a middle ground so that the  
16 regulations could continue to move forward.

17           The second amendment you will see is for Line 9  
18 and 10 in blue text. The amendment is to actually remove  
19 these two lines. This amendment is in response to a  
20 separate public comment that the Board had received, and  
21 the nursing stakeholders were comfortable with removing

1 this particular language. These amendments are before  
2 the Board for approval. These are COMAR 10.27.27 and its  
3 entirety is at the very last stage of being approved. It  
4 will go before the Secretary of Health for his signature,  
5 and then it will be published in the Maryland Register,  
6 and then it will be promulgated in COMAR.

7 Are there any questions related to the  
8 regulations and the amendments that I have just  
9 explained? And, Mike or Rhonda, if I have missed  
10 anything important, please feel free to jump in as  
11 necessary.

12 MR. HICKS: Neither one have anything to add.  
13 Are there any questions for Iman?

14 (No questions posed)

15 MR. HICKS: Is there a motion to approve the  
16 amendments that Iman outlined for the regulations?

17 MS. STEINBERG: So moved. Steinberg.

18 MR. HICKS: Steinberg.

19 MS. CASSIDY: Second. Cassidy.

20 MR. HICKS: Cassidy. All in favor?

21 ALL: Aye.

1 MR. HICKS: Opposed?

2 (No oppositions)

3 MR. HICKS: Motion carries. Anything else,  
4 Iman?

5 MS. FARID: No. Thank you so much for your  
6 time.

7 MR. HICKS: Thank you. All right, that  
8 concludes our agenda for Open Session. At this point I  
9 will turn it over to the floor if there is anyone in the  
10 audience or online that would like to address the Board.

11 MS. WESTERFIELD: This is Dr. Heather  
12 Westerfield. I would like to address the Board from the  
13 deans and directors group. We have a question that we  
14 would like the Board to review in 10.27.01: Examination  
15 and Licensure. 10.27.01.05 talks about qualified  
16 applications for examination. The on-nurse licensure,  
17 there is nothing in there for high school requirements,  
18 where in B, the application for a licensed practical  
19 nurse shall meet all requirements for a high school  
20 diploma or its equivalent.

21 So, the question is: Obviously, there's

1 history with LPNs getting their degree in high school,  
2 therefore they needed a high school diploma to get the  
3 LPN, but now the question is, should it be equivalent for  
4 RNs? Should they require a high school diploma or  
5 equivalent?

6           That was kind of the question from the deans  
7 and directors. We're having a lot of students coming now  
8 with alternative methods of high schools. So, do we, as  
9 a Board, want to set a standard like we do for the LPN,  
10 or are we okay with the LPN having a different  
11 requirement as it has for, obviously, many years? But it  
12 is coming up in lots of discussions with what is  
13 equivalent these days with lots of different high school  
14 degrees being issued with homeschooling and just lots of  
15 different things with all of these different ways people  
16 are going to school now.

17           MR. HICKS: So, I guess the question I would  
18 raise there is, "What is currently the practice that's  
19 occurring from the college themselves? What is their  
20 requirement, or do they set the baseline of the  
21 requirement versus the Board having to dictate what that

1 requirement is?"

2 MS. WESTERFIELD: They do, and that's kind of  
3 the question that's being raised is that every school has  
4 its own guidelines for what that is. So, is that okay?  
5 Do we, as a Board, want the schools to have that leeway,  
6 or is that something that we should -- since we do it for  
7 an LPN, which is, you know, LPN then RN, do we feel we  
8 should set that same regulation for RN? Because some  
9 schools are saying, "Well, this is fine," and the nursing  
10 programs are saying, "Well, is it, because are the  
11 students really qualified?"

12 So, that's really where this is stemming from  
13 because there is such a variety in what different schools  
14 are allowing. And maybe we're okay with the schools  
15 making the decision, they're the ones educating the  
16 individuals. But the question came up because it was  
17 noticed that there was a difference in our Practice Act  
18 for what we want from and LPN versus what we want from an  
19 RN.

20 MR. HICKS: So, the concern is more around  
21 those that are in the nursing program, right, that are



1 applying for the nursing program, getting into the  
2 nursing program, and what is that core requirement, and  
3 should it be a high school graduate or whatever?

4 MS. WESTERFIELD: Yes, because there are some  
5 that get in right from high school, whatever that may be,  
6 and go right into the nursing program from there.

7 MR. HICKS: So, I guess the other question that  
8 I would raise is, you know, I don't know that -- well,  
9 two things, comment and then, I guess, question. One, I  
10 don't know that the Board should be that descriptive or  
11 that constraining to really dictate that it has to be a  
12 high school graduate. And the other question, and maybe  
13 some of you can help me here with this, but is it my  
14 understanding that -- probably not all, I don't want to  
15 say "all" because you know what does But, the majority  
16 of schools, in order for a student to get into a nursing  
17 program requires some  
18 pre-assessment such as a tease test or some entry level  
19 testing to determine where they stand and their potential  
20 success within the nursing program before going into that  
21 nursing program. So, it really wouldn't matter whether I

1 graduated from high school, homeschooling, or any other  
2 program. If I am successfully competent enough to meet  
3 the school's requirement on a pre-assessment test to get  
4 into the nursing program, is that sufficient?

5 MS. WESTERFIELD: No. Well, I would have to  
6 say it depends. Go ahead.

7 MS. ROBIN HILL: From an LPN's standpoint, LPN  
8 students cannot be admitted into an LPN program without  
9 providing a high school diploma or GED. They cannot sit  
10 for boards because it is part of the Nurse Practice Act.  
11 Whereas, an RN student, it's not part of their admission  
12 process, it's not part of the Nurse Practice Act, and  
13 they don't have to prove that they have done anything to  
14 sit for boards. And, yes, at our college we do use the  
15 tease test, and they both take the tease test, but it is  
16 still a requirement that the LPN students have to provide  
17 a high school transcript, whereas the RN students don't.

18 So, I totally see what Dr. Westerfield is  
19 saying, because it is not a quality across the board.

20 MS. WESTERFIELD: And I think that's more the  
21 question, it's more of the discrepancy between what we

1     require an LPN for licensure versus what we require an  
2     RN. That's really the question because every school is  
3     going to make their decision as far as admission  
4     requirements. I can say that you can study for a tease  
5     test, that still does not mean you have the basic skills  
6     that you would need from a high school.

7             I don't know, but that's the question, I guess.  
8     There is a discrepancy between what we require. Are we  
9     okay with that? Do we want to look at that?

10            MR. HICKS: Monica?

11            MS. MENTZER: Yes, I just wanted to comment on  
12     that. It does go back to the statute as well in  
13     8-302. So, I don't know, would it need a statutory  
14     change? 8-302 the Education: Registered Nurses versus  
15     (c)Education, License Practical Nursing.

16            So, it is in the statute that the LPNs are  
17     required when they apply for a license to practice  
18     licensed practical nursing to have a high school diploma.  
19     Whereas, when the RNs apply for a license to practice  
20     registered nursing it does not state that they have to  
21     have all the requirements of a high school diploma or its

1 equivalent.

2 MR. HICKS: Right, thank you.

3 MS. BEESON: We're interested in the terminal  
4 degree, mostly, for the RN, right? They're going to end  
5 up with either an associate's or a bachelor's for  
6 entering into practice. LPN, what is the terminal if  
7 there's not --

8 MS. ROBIN HILL: Unless the LPN goes through  
9 school, ends up in an RN program.

10 MS. BEESON: Certainly, but when they're  
11 applying for their licensure, you have to fall back to  
12 their highest level of education, which for the LPN to be  
13 consistent would be the high school.

14 MS. ROBIN HILL: But about an RN that comes  
15 directly out of high school?

16 MS. BEESON: But when they do, when they are a  
17 terminal degree, they'll have an associate's degree to  
18 apply for.

19 MS. ROBIN HILL: Because the LPN is only a  
20 certificate.

21 MS. BEESON: That's what I'm saying. If you

1 fall back to your last highest degree should be -- I  
2 believe you should be responsible to present whatever  
3 that is. If it's high school, then for an LPN that's  
4 fine. High school is what we agree is enough. But for  
5 an RN they need to present an associate. It seems like a  
6 discrepancy, but it feels appropriate to me.

7 MR. HICKS: So, does an LPN -- so, we're  
8 looking at the Regulations, and it does say -- or,  
9 statutes, sorry. It does say that the LPN needs to  
10 complete satisfactorily and meet all requirements for a  
11 diploma from a licensed practical nursing education  
12 program or its equivalent approved by the Board, or an  
13 education program and licensed practical nursing in any  
14 other state or country that the Board finds substantially  
15 equivalent to the education program in this state at the  
16 time of the applicant's graduation.

17 MR. CONTI: Yeah, so LPNs do need a terminal  
18 degree beyond a high school level.

19 MS. BEESON: They're not getting a terminal  
20 degree. They are getting a certificate.

21 MR. CONTI: Is that equivalent of a diploma

1 from an LPN education program? I mean, that's what the  
2 statute requires.

3 MS. ROBIN HILL: It's a diploma, yes. They get  
4 a diploma because it's more than 29 credits.

5 MR. CONTI: Well, then they are meeting the  
6 statutory requirement for that diploma from the LPN  
7 education programs. Wouldn't that arguably be the next  
8 level beyond the high school diploma?

9 MS. BEESON: I don't think it's relevant to add  
10 high school diploma to the RN because their terminal is a  
11 two-year college degree. It's a degree, not a diploma.

12 MS. WESTERFIELD: I think the educators that  
13 educate them see it differently. Understandably, and  
14 that's why they have the rules, right? Our hands are  
15 tied for how many people we can accept and who we can  
16 accept and that kind of thing. So, I guess that was  
17 really the question. There were schools that were having  
18 to accept students that they felt may not be qualified,  
19 and they didn't have anything to fall back on, where the  
20 LPN had required the high school.

21 MS. BEESON: I don't think the Board should

1 play a role in that element of the process. Is that our  
2 role?

3 MS. ROBIN HILL: But if it's part of the Nurse  
4 Practice Act then the Board has the requirement to say  
5 one way or the other because we are the governing body of  
6 the Nurse Practice Act.

7 MR. HICKS: I kind of agree with Nicole on  
8 this. I think that if it's truly an issue that the  
9 school are facing, then I believe it should be up to the  
10 school themselves to change their admission criteria into  
11 those programs versus the Board dictating that a high  
12 school diploma is the equivalency. I mean, if truly the  
13 schools are seeing the challenges with these different  
14 variations, I think it really falls back on the school,  
15 at the end of the day, to say, you know what, maybe the  
16 statistically they find that those that are being  
17 homeschooled are really the challenge, or those that went  
18 to another program. I don't know all the ones, you  
19 know, online or whatever those things are. So, I think  
20 in the admission criteria, or the school's policy and  
21 regulations, that's where this would fall. I would not

1 want to see the Board -- because I think some people  
2 would see us changing this to a high school diploma  
3 restricting workforce and some regulations around who can  
4 and can't be in the nursing program.

5 MS. ROBIN HILL: But you're restricting it for  
6 LPNs.

7 MS. WESTERFIELD: So, I guess that's the  
8 question. When I go back, how do I explain? Is it up to  
9 the schools to determine, however we require the high  
10 school for LPNs, but not RNs? I guess maybe then the  
11 question is why?

12 MR. HICKS: I think the answer to that is, you  
13 know, it's already existing in the statutory regulations,  
14 right? How it got there? Who knows when it was written.  
15 I mean, we can remove that from the requirement, but I  
16 don't -- from an answer perspective, I think, again, it's  
17 not the Board's place to make that mandate of having high  
18 school diploma as the baseline for the RN. It is up to  
19 the school to make those changes if they feel it's  
20 necessary to do so because I think, you know, Cecil  
21 Community College may say, "We have no problems, and



1 we'll let anyone that graduated or has some form of high  
2 school completion in," whereas, University of Maryland  
3 may say, "You know what, nope, we definitely only want  
4 high school." I think that's where we leave it is, "What  
5 is the school's requirement to get into that program?"  
6 And then, it's up to the constituent to decide, "Okay, do  
7 I go back to school and get a GED or do I pick a program  
8 that is willing to accept me where I currently stand in  
9 terms of a graduate from high school?".

10 MS. WESTERFIELD: So, we will accept the  
11 statutes as they are because that's how they are written?  
12 I have to figure out how I'm going to go back to this  
13 group and say that this is dead in the water, or is this  
14 something we're going to look at? It sounds like it's  
15 something we really don't need to look at.

16 MR. HICKS: It's up to the Board, I mean, where  
17 we want to go with that, whether we want to make a  
18 statutory change in the regulations to add that, or do we  
19 leave it up to the schools themselves to make those  
20 decisions and change their admission criteria based on  
21 whatever they say is adequate for their program. It's

1 their program at the end of the day.

2 MS. LECHLITER: I don't understand why we make  
3 it for an LPN and not an RN. Is it just because the LPN  
4 is a diploma program?

5 MS. WESTERFIELD: That's the question.

6 MS. ROBIN HILL: But there are some RN programs  
7 that are still diploma programs that don't give an  
8 associate degree.

9 MR. CONTI: I think you'd have to trace it  
10 historically. I don't think we have the information why  
11 it was included in one and not the other. I mean, I  
12 suspect it goes back a very, very long way. I personally  
13 don't know the history of LPN education versus RN  
14 education, but I suspect the LPN education way back was  
15 much less than the RN education, so perhaps that's why.  
16 I'm just guessing. Perhaps that's why they included a  
17 high school diploma requirement at the time the statute  
18 was passed. If that requirement has outlived its  
19 usefulness, and it's better for the schools to determine  
20 their admissions policies, then that's something you  
21 could look to. I mean, so, for the licensed practical

1 nurses, that's in the statute, so we would need find a  
2 sponsor. If the Board is inclined to say, "We don't  
3 really thing that's a necessary requirement --

4 MS. WESTERFIELD: That's not the suggestion. I  
5 just want to be clear. The question is not to remove it  
6 from the LPN, it was to also to add it to the RN. I just  
7 want to be clear that that's not what the recommendation  
8 is.

9 MR. CONTI: I get it.

10 MS. BEESON: I don't see any benefit in doing  
11 that. I think if anything we should say, "Is it  
12 necessary?"

13 MR. HICKS: For either one, the LPN or the RN.

14 MR. CONTI: Yeah, I mean, at the end of the  
15 day, in order for an individual to be licensed as either  
16 an RN or LPN that individual is going to have to, first,  
17 successfully pass the program, and second, successfully  
18 pass the examination.

19 So, I mean, you've got barriers in place to  
20 ensure that the individuals who are licensed are  
21 confident to do so.

1                   MS. HAYWARD: And I've seen that a lot of  
2 schools have had more regress admission policies than  
3 others. They choose to do that, but you still have to  
4 meet the criteria for it. They can be more restrictive.

5                   MR. HICKS: So, given the information that  
6 we've heard today, I will talk to Ms. Evans and see if we  
7 can find somewhere maybe historically where this came  
8 from. And then also, just do a little bit of, I guess,  
9 research around the whole, you know, is it really  
10 something that we should consider under the LPN statute  
11 or have that removed. You know, I think, to Dr.  
12 Westerfield's point, having that conversation with the  
13 deans and directors to understand where they're coming  
14 from in this, that being also those that have LPN  
15 programs to understand what their take is on this, and  
16 then perhaps we can bring that back to next month's  
17 meeting and tell you what we found from an investigation  
18 and communications perspective and then maybe be able to  
19 come to a decision now that the Board members kind of  
20 have heard it and can kind of digest that a little bit  
21 before we actually make a decision on that. Monica?

1           MS. MENTZER: Yes, I just have two comments.  
2     The first one is the statute, we're speaking to the  
3     applicants for licensure versus the applicants for  
4     entering an education level. When we're speaking about  
5     the LPNs, I have the history of remembering them years  
6     ago, the vo-tech schools at the high schools, that's  
7     where the root was for many of the education diploma  
8     programs for LPN many years ago before they were moved to  
9     the community colleges in Maryland. I don't know how  
10    long ago it was, but maybe some of it comes from that  
11    where our statute was regulated by the applicants for  
12    licensure as opposed to the individuals being admitted to  
13    an education program.

14           MR. HICKS: Right.

15           MS. WESTERFIELD: And I can see why it's in  
16    there for the LPN because you wouldn't want your LPN to  
17    graduate from the vocational program -- well, graduate  
18    the program but not finish English-12. So, they didn't  
19    graduate high school, but they finished the LPN program,  
20    right? So, I understand why it's there for that, for  
21    sure.



1 Act to ensure that all Board members agree with its  
2 content.

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

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

1 the written statement, or any discussion thereof?

2 MS. CASSIDY: So moved, Cassidy.

3 MR. HICKS: Cassidy.

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 (Whereupon, at 10:19 a.m. the Open Session was  
11 adjourned.)

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CERTIFICATE OF NOTARY

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

I further certify I am not of counsel to any of the parties, nor an employee of counsel, nor related to any of the parties, nor in any way interested in the outcome of this action as witness my hand and notarial seal this 28th day of September, 2022

\_\_\_\_\_

Edward Bullock, Notary Public  
in and for the State of Maryland

My commission expires: May, 13, 2023



### **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: 9/28/22 Time: 10:15 am  
Location: Maryland Board of Nursing, 4140 Patterson Avenue, Baltimore, MD  
Motion to close meeting made by: Cassidy Seconded by Hayward  
Members in favor: Cassidy, Lechliter, Turner, Hayward, Hicks, Lyons, Steinberg, R. Hill, Westhof  
Opposed: None Abstaining: None  
Absent: J. Hill, Owojuma, Vickers  
*Gibbs-Dea  
Beeson*

2. **Statutory authority to close session.** This meeting will be closed under Md. Code Ann., Gen. Prov. § 3-305(b) only:

(1) ~~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.

