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THE MISSISSIPPI BOARD OF NURSING
BUSINESS MEETING

JULY 26, 2019

- BOARD MEMBERS IN ATTENDANCE:
 DR. MELISSA KING, DNP, FNP-BC, ENP-BC (PRESIDENT)
 ALTON SHAW, MSN, FNP-C (TREASURER)
 NANCY NORRIS-JOHNSON, LPN II, CPT (SECRETARY)
 BLAKE WARD, MSN, CRNA
 DR. TERESA STANFORD, DNP, FNP-BC
 SHIRLEY JACKSON, LPN
 SANDRA CULPEPPER, LPN
 BRANDI TAYLOR, LPN
 DR. MICHELLE OWENS, MD
 DR. MARY STEWART, PhD, RN
 LAURA MOORE, MSN, NP-C
 T.J. ADAMS, RN, BSN, MSHA
 JAN COLLINS, CONSUMER

REPORTED BY: ASHLEY C. HAGG
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The following meeting was held at the Mississippi Board of Nursing, 713 South Pear Orchard Road, Plaza II, Suite 300, in the City of Ridgeland, State of Mississippi, on Friday, July 26, 2019, commencing at approximately 11:09 a.m.

DR. KING: We will go ahead and call the Mississippi Board of Nursing, July 26, 2019, Business Meeting to order. It is 11:09, and I'm going to ask Ms. Jan Collins to open us up with a word of prayer, please.

MS. COLLINS: Thank you. Please join me in prayer.

(PRAYER)

DR. KING: Thank you, Jan. The next item on the agenda that we have now is swearing in of new members. So, with that, I will ask Dr. Mary Stewart, so everybody can see who you are and welcome you. We're excited to have these two new members. All right. If you will, repeat after me. I, Dr. Mary Stewart.

DR. STEWART: I, Dr. Mary Stewart.

DR. KING: Do solemnly swear or affirm.

DR. STEWART: Do solemnly swear or affirm.

DR. KING: That I will faithfully support the Constitution of the United States.

DR. STEWART: That I will faithfully support the Constitution of the United States.

DR. KING: And the Constitution of the State of Mississippi.

DR. STEWART: And the Constitution of the State of Mississippi.

DR. KING: And obey the laws thereof.

DR. STEWART: And obey the laws thereof.

DR. KING: That I am not disqualified from holding the office.

DR. STEWART: That I am not disqualified from holding the office.

DR. KING: Of member of the Mississippi Board of Nursing.

DR. STEWART: Of member of the Mississippi Board of Nursing.

DR. KING: And I will faithfully discharge the duties of the office.

DR. STEWART: And I will faithfully discharge the duties of the office.

DR. KING: Upon which I'm about to enter.

DR. STEWART: Upon which I'm about to enter.

DR. KING: So help me God.

DR. STEWART: So help me God.

(APPLAUSE)

DR. KING: All right. Ms. Laura Moore, raise your right hand. I, Laura Moore.

MS. MOORE: I, Laura Moore.

DR. KING: Do solemnly swear or affirm.

MS. MOORE: Do solemnly swear or affirm.

DR. KING: That I will faithfully support the Constitution of the United States.

MS. MOORE: That I will faithfully support the Constitution of the United States.

DR. KING: And the Constitution of the State of Mississippi.

MS. MOORE: And the Constitution of the State of Mississippi.

DR. KING: And obey the laws thereof.

MS. MOORE: And obey the laws thereof.

DR. KING: That I am not disqualified from holding the office.

MS. MOORE: That I am not disqualified from holding the office.

DR. KING: Of member of the Mississippi

Board of Nursing.

MS. MOORE: Of member of the Mississippi Board of Nursing.

DR. KING: That I will faithfully discharge the duties of the office.

MS. MOORE: That I will faithfully discharge the duties of the office.

DR. KING: Which I'm about to enter.

MS. MOORE: Which I'm about to enter.

DR. KING: So help me God.

MS. MOORE: So help me God.

(APPLAUSE)

(PHOTOS TAKEN)

DR. KING: With that, we are super excited to have you guys, by the way, so welcome. And we do have a quorum, actually. All of our members are here today, and so I would need a motion for approval of the agenda before you.

MS. COLLINS: I so move.

DR. OWENS: Second.

DR. KING: Moved by Jan Collins. Seconded by Dr. Owens. Any discussion?

(NO VERBAL RESPONSE)

DR. KING: All in favor?

(ALL IN FAVOR)

1 DR. KING: Any opposed?
 2 (NO VERBAL RESPONSE)
 3 DR. KING: Any abstainers?
 4 (NO VERBAL RESPONSE)
 5 DR. KING: Motion passes. So we will go
 6 to open forum of the public.

7 DR. MCCRORY: Janette McCrory, Director
 8 of Nursing Education for the Mississippi Institutions
 9 of Higher Learning. You have before you our annual
 10 report, a printed report. Then you have a brief
 11 summary, and then you should have a copy of the
 12 accreditation status of the schools of nursing that
 13 the board, the IHL Board approved in May. I'm going
 14 to just briefly talk about the actual report, but the
 15 details are in the printed report.

16 The accreditation status includes links
 17 to the state nursing education accreditation standards
 18 in the procedure manual, and it also has a list, as
 19 far as the report I gave to you, a list of all the
 20 schools that we are visiting this fall and this
 21 spring. We do joint visits with the national
 22 accrediting bodies since we do require national
 23 accreditation, and there are three of them now.
 24 However, only two are -- only two of the accrediting
 25 bodies are utilized by our schools of nursing. They

1 select the ones they want to use.
 2 One is ACEN, the Accreditation Commission
 3 for Education in Nursing; CCNE, the Commission on
 4 Collegiate Nursing Education; and CNEA, which is the
 5 new one in about 2016, the Commission on Nursing
 6 Education Accreditation. The actual annual report,
 7 all of the annual reports we have on our IHL website
 8 from 2005 to the most current one. So anyone can
 9 access that electronically, and you have, of course,
 10 the printed report today.

11 In Mississippi, we have 23 schools of
 12 nursing. Our law states registered nursing programs,
 13 which includes our associate, baccalaureate, and our
 14 graduate programs. So we have 23 schools of nursing,
 15 and among the 23 schools of nursing, they offer 40
 16 types of degrees with multiple entry points. So it's
 17 like a web when you look at all the schools and all
 18 the things that they offer, which we are very
 19 appreciative of what they do.

20 We have two new degree options that have
 21 been approved by IHL for the fall. Mississippi
 22 College, they will be offering a Master of Science in
 23 Nursing with a Clinical Nurse Leader Focus, and their
 24 first, again, admission cohort will be this fall. And
 25 Alcorn State University, they will be offering a

1 Doctor of Nursing Practice this fall, and their track
 2 is the post-master's for those that already hold FNP
 3 certification.

4 Now I'm going to point you to the actual
 5 data that's on your brief report, and if you want
 6 details that I'm going to mention, they're inside
 7 within the report. But the date for admissions,
 8 enrollment, and graduates have changed very slightly
 9 in the last five years, from 2013/14 academic year to
 10 2017/18 academic year. And any increases have been
 11 mainly in the baccalaureate and the doctoral programs.

12 Over the past five years, again,
 13 admissions have increased by less than 1 percent. The
 14 associate degree programs have declined by 5.7
 15 percent, and our master's programs have seen a steady
 16 decline in the last three years with the five-year
 17 change of a decline of 21.5.

18 Enrollment has, again, just remained
 19 steady over the past five years with less than a 1
 20 percent increase. Again, our master's programs have
 21 seen a steady decline in the past five years with a
 22 five-year change of almost 34 percent decline.

23 Graduates, overall, graduates have
 24 increased by 5 percent. However, the associate degree
 25 programs have declined by almost 7 percent, and the

1 master's programs have seen a decrease in the last
 2 year, the 2017/18 academic year of almost 100 within
 3 that period of time. And, again, all this information
 4 is in the actual full report.

5 Overall, one variable that we think may
 6 be associated with the decline of the master's degree
 7 program, admissions, enrollment, and graduates is lac
 8 of funding by the legislature for forgivable loan
 9 programs, which state nursing education programs are
 10 included in this category. Insufficient and lack of
 11 funding has been ongoing for the past three to five
 12 years. The reason I wanted to bring this to your
 13 attention, all nursing faculty must have a masters in
 14 nursing, all faculty, associate, baccalaureate, and
 15 higher degrees. And then the faculty teaching and
 16 graduate programs must also have -- must also be
 17 doctorally prepared.

18 Schools of nursing supply the graduate to
 19 meet the demand for nurses in all types of healthcare
 20 settings. So we have to have the faculty to teach th
 21 students to have the graduates to supply the state
 22 with nurses. Just so you know, in our standards,
 23 there is a 15 to 1 total enrollment standard. So we
 24 can only admit students, number of students based on
 25 the number of faculty that are available in our

1 schools of nursing.
 2 Looking back at the Board of Nursing data
 3 for May, just to call your attention to that, over 30
 4 percent of Mississippi nurses are 50 years or older.
 5 Some of this information I presented to our board back
 6 in May. The majority of nurses in Mississippi work in
 7 hospitals, which is very similar across the U.S. In
 8 Mississippi, 18 percent of nurses hold master's
 9 degrees, and 2 percent of nurses are doctorally
 10 prepared.

11 Additional data that you might be
 12 interested in, in 2017, 17 percent of Mississippi
 13 nursing faculty anticipate retirement in five years.
 14 Remember, that was 2017. And 39 percent of nursing
 15 deans and directors of schools of nursing plan to
 16 retire in the next three years, which again, that was
 17 2017. And we do see the same trend across the U.S.,
 18 with a third of the U.S. nursing faculty plan to
 19 retire by 2025. So that's a trend of not only
 20 Mississippi, but across the U.S.

21 I have already mentioned about the
 22 nursing scholarships. For this upcoming academic
 23 year, again, there are no scholarship awards due to
 24 lack of funding by the legislature. During the years
 25 when the program was fully funded, just an example of

1 one year, we gave 600 awards at a cost of a little
 2 over \$2 million when we were being fully funded.
 3 Award recipients, we pay their loan scholarship
 4 through service obligation to the state for a specific
 5 period of years.

6 So, when we were providing awards, there
 7 was a commitment back to stay in the state for a
 8 period of years. The Mississippi Office of Student
 9 Financial Aid oversees 30 types of grants, loans, and
 10 scholarships, which includes nursing, and they manage
 11 that from the time of the application process through
 12 the completion of service obligation. It's a very
 13 secure system that we have.

14 Lastly, I would like to share some
 15 changes in nursing deans and directors for two schools
 16 of nursing. Hinds Community College, Dr. Libby
 17 Mahaffey retired last month. Kathy Elliott has been
 18 named the District Dean of Healthcare. Some of the
 19 titles may change, because they reorganized titles,
 20 but basically she's functioning in Dr. Mahaffey's
 21 role. And then Dr. Priscilla Burks is Dean of
 22 Nursing, and Dr. Audrey Murray is District Director of
 23 Associate Degree Nursing for all of the areas. And
 24 then the University of Mississippi Medical Center,
 25 Dr. Kim Hoover, as you know, retired from the state in

1 December. Dr. Mary Stewart has been serving as
 2 interim. Effective July 29th, Dr. Julie Sanford will
 3 be the new dean of nursing at the Medical Center. Do
 4 y'all have any questions for me today about the annual
 5 report or any other information?

6 MS. COLLINS: I do. I have a question.

7 DR. MCCRORY: Okay.

8 MS. COLLINS: The trends that you were
 9 stating about the decline, is that consistent with
 10 what's going on in the rest of the country?

11 DR. MCCRORY: I don't have that
 12 information on me.

13 MS. COLLINS: I couldn't find it in the
 14 book, and I didn't know if you had that data
 15 available.

16 DR. MCCRORY: No, I don't, because I
 17 don't put national data in the actual report that goes
 18 to our board. But I can sure look that up and get
 19 back with you on that.

20 MS. COLLINS: Okay.

21 DR. MCCRORY: We did have -- excuse me --
 22 we did have, looking back in some historical
 23 information at IHL, this type of thing occurred back
 24 in -- right before I came, right before I came in
 25 2009, then, but there was scholarship money that was

1 available, and things turned around. But now we're
 2 back to where we were several years ago, yes, ma'am.

3 DR. OWENS: So when you mentioned the
 4 service obligation that is tied to scholarships, it
 5 seems like that created something of a pipeline that
 6 helped to stabilize the workforce. When you look at
 7 the workforce challenges that exist right now within
 8 nursing, how much of that do you feel like is due to
 9 the fact that you don't have the ability to offer
 10 these scholarships that in turn might enable people to
 11 be incentivized to stay in Mississippi?

12 DR. MCCRORY: I think it's one of many
 13 variables and probably a very important variable,
 14 because when you look at the numbers, if you wanted to
 15 go to your report, on page -- I tabbed it in case
 16 someone had a question -- on page 7, the full report,
 17 this is the enrollment for graduates, and you can
 18 see -- for the graduate programs, and you can see, if
 19 you look at the grey area at the bottom, it gives you
 20 information from 2014 to 2018.

21 If you go across, you can see, for 2014,
 22 for particularly the masters, there were 662 enrolled
 23 And then you see for the 2018, last fall, there were
 24 438. So you can see that trend shifting. And, you
 25 know, now that we have not had funding for almost five

1 years, full funding -- we had some funding, you know,
2 probably four years ago for renewals that people were
3 already in the system. But we have not had any
4 funding since the three years. Service obligation is
5 for nurses, and then we had a special stipend for
6 nursing faculty both at the master's and the doctoral
7 level, and it was very nice. So, between the two, it
8 was very utilized. So they had to teach in the School
9 of Nursing.

10 DR. OWENS: It seems like that would be
11 (inaudible) for a way to reinvest into the workforce
12 where you get immediate return on that investment
13 essentially just by having people who are now employed
14 dedicated to Mississippi, applying healthcare to the
15 members of the state. That's one of those things for
16 that money, if it's generated in Mississippi and stays
17 in Mississippi and benefits Mississippi all at the
18 same time, it seems like that would be a win.

19 DR. MCCRORY: Well, all of our money at
20 IHL is like any other state entity. We depend on the
21 legislative funding. And our Office of Student
22 Financial Aid, I already mentioned they oversee about
23 30 types of scholarships. Some of those scholarships
24 have to be funded, MTAG, Eminent Scholars, help for
25 the needy students. I can't tell you all of them.

1 And then, whatever is left for forgivable loans are,
2 you know, given out, and we have not had that luxury
3 in the last several years for that money. But, yes, I
4 totally agree with what you said.

5 DR. STEWART: In terms of national
6 trends, I can speak to terms to the baccalaureate and
7 higher. The national association that guides higher
8 education for nursing has set the goal of 50 percent
9 baccalaureate-prepared nurses by 2020. And so there
10 are places in the country that are investing to
11 streamline to baccalaureate and higher. In fact, it's
12 very consistent with what the IOM at the National
13 Academy of Medical Science Initiatives said. We need
14 to get nurses, you know, prepared at their highest
15 levels of education possible and out in practice. So,
16 in Mississippi, we have funding issues. We have some
17 other things that we could possibly address, but in
18 terms of national, we see a move to accelerate the
19 baccalaureate and higher, inconsistent with what we're
20 seeing in Mississippi.

21 MS. COLLINS: Well, I know at our
22 county's economic development level, with all of the
23 statistics and things that we've had that I have
24 shared with the ONW Committee, that the field of
25 nursing is the most needed occupation career for us

1 locally.

2 DR. MCCRORY: I will share one more thing
3 that's not in my report, but the IHL Office of Student
4 Financial Aid went through a review by a work group
5 from the legislature, and it's on -- if you want the
6 full information, it's available through our IHL
7 Financial Aid Office where all of the documents are in
8 there regarding the meeting, but that was, like,
9 October, in the fall, and then one meeting in January.
10 And I was able to meet with that work group and
11 provide information on nursing.

12 In the first meeting -- and my report is
13 in there too, if you're interested in that. In the
14 first meeting, I talked about all the scholarships and
15 all the needs. And then they gave some more
16 questions, because they felt like the precicensure
17 students were -- the demand for getting into school
18 were available. So they wanted me to come back and
19 talk about the graduate programs.

20 So I met with the Deans and Directors
21 prior to that meeting, and we put some recommendations
22 together about what we would like to see change with
23 our IHL Scholarship Program, if they were going to
24 make some changes. And we had hoped in the spring
25 that there would be some changes, there would be a

1 bill to come forward, but that didn't happen this
2 year.

3 But it wasn't just about nursing. It was
4 about teachers and all the others. But the two
5 targets of need that several people had to come and
6 speak to that group was on teachers, regular teachers
7 and then nursing. So I do want you to know there is
8 that ongoing conversation. I'm not sure if it's going
9 to get picked back up again this year or not.

10 DR. KING: Anything else from Board
11 members for Dr. McCrory?

12 DR. MCCRORY: Thank you.

13 MR. SHAW: I would just like to say one
14 thing, not a question. I was just kind of looking on
15 here.

16 DR. MCCRORY: Okay.

17 MR. SHAW: For all the instructors in
18 schools of Mississippi, great job, because when you
19 look on page 12, it talks about our state average,
20 first pass rates versus national first pass rates.
21 We're, like, 9 or 10 percent higher in our state. So
22 I think that's something to be congratulated on.

23 DR. MCCRORY: Thank you.

24 DR. KING: Thanks, Dr. McCrory. Teresa
25 Malone, Mississippi Nurses' Association. Good

1 morning.

2 MS. MALONE: Good morning. Thank you,
3 Madam President, members of the Board. If I could
4 just add a little bit to the discussion that was just
5 held, the Mississippi Nurses' Association probably
6 receives at least five calls a week, sometimes more,
7 from nurses that are wanting to go back to school, and
8 they are seeking funds to assist them in that
9 endeavor.

10 Now, we are very fortunate that we have
11 the Foundation, but the Foundation has not been able
12 to make up the loss of those funds that y'all
13 discussed. So it is definitely of interest to the
14 nurses in our state. They are looking at every
15 resource out there, and I can tell you that I've had
16 follow-up conversations with some of those
17 individuals. And because they have been able to
18 identify resources and funds in sister states, they
19 have made the decision to actually move to that state.
20 I'm not saying there is a mass exodus of nurses as a
21 result of that, but I can tell you that some have
22 elected to go to those states because the resources
23 were there for those scholarships, for those stipends.
24 So I did want to add that to that discussion.

25 I think that also is a great segue for my

1 next point, which is, this is an incredibly important
2 year for the nursing profession. And I'm not going to
3 steal any of Trey's thunder, but it's an election
4 year, and the individuals that are elected will make
5 the decisions not only on those scholarship funds that
6 were being discussed earlier, but on so many other
7 issues that impact the nursing profession and the
8 patients in our state.

9 Hopefully, all of you read the article
10 that was included by Dr. Alena Lester in our quarterly
11 MS RN. We have actively been encouraging nurses to
12 vote. We have actively been encouraging them to get
13 to know the candidates, to know a candidate's stance
14 on nursing issues, to have those conversations with
15 them, and most importantly to vote in this upcoming
16 election. We are also aware that there are so many
17 public health issues and community issues that are
18 facing our state and that these individuals that are
19 elected will impact those as well.

20 The Mississippi Nurses' Association has
21 been actively promoting and educating nurses on a
22 number of those over the past several years. Those
23 include human trafficking, child abuse, the Opioid
24 Epidemic. We are actually hosting and providing the
25 continuing education for the Mississippi Opioid Summit

1 which is taking place, the final day is today in
2 Madison. And there are other issues that nurses are
3 facing, and part of that is the shift work.

4 I think it was just discussed that we
5 have such a large percentage of nurses that actually
6 work in a hospital setting, and many of those are
7 shift work, and there's a challenge with that, a
8 family life balance, a healthcare balance, you name
9 it. And so we are actually kicking off -- it was
10 kicked off this last issue in the MS RN by our
11 president, Debbie Allen. There's an article in there
12 that's the first in a series of articles addressing
13 some of those challenges of shift work and hopefully
14 providing additional resources to the nurses in our
15 state.

16 We are looking forward to our upcoming
17 convention, which is scheduled for October the 22nd
18 through the 25th. We will be announcing some new
19 initiatives at that House of Delegates. We hope all
20 of you can attend that and will be a part of that.
21 But the nursing profession in Mississippi and across
22 the country is facing so many challenges right now,
23 and it's so important that all of us work together to
24 address those challenges and make sure that our
25 elected officials understand the background and the

1 rationale behind some of our requests.

2 I want to thank the Mississippi Board of
3 Nursing for their support, for their being at the
4 legislature, for their being very active in those
5 discussions, because it takes everybody at the table
6 to make this a success. And, hopefully, in this next
7 legislative session, we will see some of those
8 successes come to fruition. Thank y'all. Do y'all
9 have any questions?

10 DR. KING: Thank you, Teresa. Thanks for
11 all you do. Anybody else?

12 (NO VERBAL RESPONSE)

13 DR. KING: That will move us to the
14 Office of Nursing Workforce.

15 MS. JOHNSON: Good morning. If I may,
16 Madam Chair, I would like to take this opportunity to
17 introduce to you-all our new director of the Office o
18 Nursing Workforce, Ronnie Gregg Taylor. Gregg
19 started, I think, July 1, and he has hit the ground
20 running. If he has not contacted you, he will be
21 contacting you. JaBria, if you're in the room, we
22 will give the Deans and Directors, the LPN Council al
23 of those things. So I will let Gregg come forward.
24 He has a report and some additional stuff that I thin
25 many of you are here for today.

1 MR. TAYLOR: Good morning. I just want
 2 to say thank you for selecting me and allowing me to
 3 be here today. I look forward to working with this
 4 board and with everyone in this room, this excellent
 5 staff, ancillary organizations, community advocacy
 6 groups. And I think there are a lot of things, to
 7 echo what you've just said, Teresa, that we can do
 8 together, working together, and that's the intent
 9 here. So, thank you again.

10 I would like just to do a quick aside and
 11 say that our job is to obviously fulfill a position of
 12 the Board, and we intend on doing that and exceeding
 13 your expectations every step of the way. I just want
 14 to give a nod to the people who work here, the staff.
 15 They have exceeded my expectations of professionalism
 16 and kindness. They have been so welcoming, and it has
 17 really eased my transition.

18 (INTERRUPTION)

19 MR. TAYLOR: As mentioned before, there
 20 is obviously a lot of statistics we discussed. We are
 21 going to be modeling our program around maybe some
 22 other programs in the country. I have been in contact
 23 with Indiana specifically, and I have set up a
 24 mentoring relationship with their director, CEO, and
 25 they have about two and a half times as many

1 licensees. And I think that I can learn from someone
 2 like that. And so we're going to condition the good
 3 work that has been in place and is ongoing, but we're
 4 going to try to embellish that a bit and up the
 5 standard. So the next meeting you'll have a different
 6 quality of report from me, but I just wanted to say
 7 that. So we're working on that foundation.

8 There are some people here in the room
 9 today that I want to acknowledge. They are
 10 representatives of 15 of our schools of nursing, and
 11 this is the good thing about this job. People don't
 12 seem to mind you giving them checks. So, before I
 13 start handing those checks out, I also want to
 14 recognize the fact that I've done absolutely nothing
 15 to facilitate this. This work was done and carried
 16 out by Tywanda Jones, and I was going to give her a
 17 nod if she's in the room. She deserves recognition
 18 for that, as does JaBria Fogg who has been a wonderful
 19 assistant to my transition, and I appreciate it.

20 So, without any further delay, we may as
 21 well start handing out these checks. So, in
 22 alphabetical order, if one person from each school, if
 23 you don't mind, would come up, and we will hand you a
 24 check. Shan will take a picture, and so here we go.
 25 Oh, I might say that the amount of the check doesn't

1 necessarily indicate the entire amount, but it's just
 2 an amount for the purposes of the photograph.

3 (LAUGHTER)

4 MR. TAYLOR: We just made them up. So
 5 you can take this check with you. I wouldn't try to
 6 cash it, but I have the actual checks here I'm going
 7 to give you at the same time. So, if Alcorn State
 8 could come forward, please.

9 (CHECK PRESENTED)

10 (APPLAUSE)

11 MR. TAYLOR: If you don't mind signing.
 12 Next, Antonelli.

13 (CHECK PRESENTED)

14 MR. TAYLOR: Belhaven University.

15 (CHECK PRESENTED)

16 MR. TAYLOR: Delta State University.

17 (CHECK PRESENTED)

18 MR. TAYLOR: East Central Community
 19 College.

20 (CHECK PRESENTED)

21 MR. TAYLOR: East Mississippi Community
 22 College.

23 (CHECK PRESENTED)

24 MR. TAYLOR: Hinds Community College.

25 (CHECK PRESENTED)

1 MR. TAYLOR: Holmes Community College.

2 (CHECK PRESENTED)

3 MR. TAYLOR: Itawamba Community College.

4 (CHECK PRESENTED)

5 MR. TAYLOR: MUW.

6 MS. JOHNSON: My alma mater.

7 (LAUGHTER)

8 (CHECK PRESENTED)

9 MR. TAYLOR: Northeast Community College.

10 (CHECK PRESENTED)

11 MR. TAYLOR: Northwest Community College.

12 We had someone down from Northwest, but I think they
 13 were -- oh, sorry. I didn't see you stand up.

14 (CHECK PRESENTED)

15 MR. TAYLOR: UMC.

16 (CHECK PRESENTED)

17 MR. TAYLOR: USM.

18 (CHECK PRESENTED)

19 MR. TAYLOR: William Carey.

20 (CHECK PRESENTED)

21 MR. TAYLOR: That really concludes what I
 22 have today. And, again, thanks to all of you, and I
 23 look forward to some great things in the future.

24 Appreciate you.

25 (APPLAUSE)

1 DR. KING: So I will reiterate, we are
 2 happy to have you, Gregg. So we look forward to
 3 working with you as well. And it's very nice to see
 4 all the smiles in the Board of Nursing room during
 5 that time. We don't get to see smiles like that all
 6 the time. So it's very nice to see happiness in the
 7 room. That will bring us to Board Business, and I
 8 would like a motion to accept the minutes from the
 9 June 7, 2019, meeting.

10 MS. JACKSON: Madam Chair, I make a
 11 motion.

12 DR. KING: Motion made by Ms. Shirley
 13 Jackson. Is there a second?

14 DR. STANFORD: I second.

15 DR. KING: Second by Dr. Teresa Stanford.
 16 Any discussion?

17 (NO VERBAL RESPONSE)

18 DR. KING: All in favor?
 19 (ALL IN FAVOR)

20 DR. KING: Any opposed?
 21 (NO VERBAL RESPONSE)

22 DR. KING: Any abstainers?
 23 (NO VERBAL RESPONSE)

24 DR. KING: Motion passes. The Board
 25 Hearing Panel minutes, we need a motion to accept

1 those from October 2018 and December 2018.

2 MS. NORRIS-JOHNSON: Motion.

3 DR. KING: Motion made by Ms. Nancy
 4 Norris.

5 MR. SHAW: Second.

6 DR. KING: Seconded by Mr. Alton Shaw.
 7 Any discussion?

8 (NO VERBAL RESPONSE)

9 DR. KING: All those in favor?
 10 (ALL IN FAVOR)

11 DR. KING: Opposed?
 12 (NO VERBAL RESPONSE)

13 DR. KING: Abstainers?
 14 (NO VERBAL RESPONSE)

15 DR. KING: Motion passes. Agreed
 16 Settlement Proposal minutes to be accepted, a motion
 17 for June 2019.

18 MS. NORRIS-JOHNSON: Motion.

19 DR. KING: Motion made by Ms. Nancy
 20 Norris.

21 DR. STANFORD: I second.

22 DR. KING: Seconded by Dr. Teresa
 23 Stanford. Any discussion?
 24 (NO VERBAL RESPONSE)

25 DR. KING: All in favor?

1 (ALL IN FAVOR)

2 DR. KING: Any opposed?
 3 (NO VERBAL RESPONSE)

4 DR. KING: Any abstainers?
 5 (NO VERBAL RESPONSE)

6 DR. KING: Motion passes. I need a
 7 motion to waive the reading of names from motions.

8 MR. ADAMS: I make a motion.

9 DR. OWENS: Second.

10 DR. KING: Motion made by Mr. T.J. Adams.
 11 Seconded by Dr. Michelle Owens. Any discussion?
 12 (NO VERBAL RESPONSE)

13 DR. KING: All in favor?
 14 (ALL IN FAVOR)

15 DR. KING: Any opposed?
 16 (NO VERBAL RESPONSE)

17 DR. KING: Any abstainers?
 18 (NO VERBAL RESPONSE)

19 DR. KING: Motion passes. Future
 20 meetings, we will have Agreed Settlement Proposals
 21 October 8th, 2019; disciplinary hearings, October 9
 22 and 10, 2019, beginning at 8:30 a.m.; business
 23 meeting, October 11th, 2019, at 11:05 a.m. That panel
 24 will consist of Ms. Shirley Jackson, Ms. Nancy
 25 Norris -- I'm so sorry -- Johnson. Ms. Nancy Norris

1 has a new last name, and it's Johnson, and I keep
 2 referring to her as Nancy Norris. Dr. Michelle Owens
 3 and Mr. Blake Ward. And now that brings us to our
 4 legislative update, Mr. Trey Bobinger.

5 MR. BOBINGER: Good afternoon, morning,
 6 I'm not sure. I got confused watching all those
 7 checks go by.

8 DR. KING: And you didn't get one.

9 MR. BOBINGER: I know. I was going to
 10 say, I think there was a mistake made in printing.
 11 But, seriously, it's good to be here, and I wanted to
 12 say welcome to our new Board members, Dr. Stewart and
 13 Laura. I look forward to working with you on
 14 legislative matters, as well as the Board and the
 15 staff as always. But what I would like to point out
 16 to our new Board members is, this board's leadership
 17 and our director and staff, a few years ago there was
 18 some uncertainties around ONW and some issues, real
 19 issues, and we went to the legislature and pled our
 20 case. They responded, and you can see now the fruit
 21 that that's bearing. It's an example of how we can
 22 work policy through the legislature and improve what
 23 we're doing and help, in this case, our universities
 24 do things positive for our profession. That's an
 25 example.

1 I wanted to kind of echo something
 2 Ms. Malone had said earlier about we're in the
 3 political season. I don't think I have to tell you.
 4 Look at Facebook or your favorite social media
 5 platform or television. You're inundated with ads.
 6 But it is very important for the nursing profession,
 7 this agency, this board, because August the 6th, on a
 8 Tuesday, less than two weeks, we'll have our first
 9 primary election, both Republican and Democratic
 10 primaries.

11 You have got everybody from the governor
 12 to legislators to supervisors, sheriffs. And I would
 13 just encourage along the lines that Teresa said, for
 14 people when you're out, these folks are asking you to
 15 vote for them and support them. Don't be shy about
 16 asking them where they stand on positions that are
 17 important, particularly to you, to this profession, to
 18 this board, because now is the time, because they're
 19 asking for your help. They're seeking your help.

20 So I would just encourage everybody to do
 21 that, because particularly these legislators in the
 22 executive branch have such an impact on the ability of
 23 this agency to implement policy and make positive
 24 changes in our profession. So I just want to
 25 emphasize that. I'm going to repeat this again,

1 because we really want a big turnout this year, and I
 2 know Phyllis and the staff have really emphasized our
 3 Nurses' Capitol Day. It's January the 14th, 2020. I
 4 know that's a little ways off, but I know you guys get
 5 busy. I just want to make sure everybody has that on
 6 their calendar.

7 We will be on the first floor rotunda of
 8 the State Capitol. Of course, all the Board members,
 9 staff, people in the audience, it's open. That's
 10 where we go and provide information and interact with
 11 legislators, more so you. I'm over there every single
 12 day, but it's good for them to hear from you and from
 13 people that are practicing across the state. So I
 14 urge you to put that on your calendar.

15 We're talking about the political time of
 16 the year. The Neshoba County Fair is next week. You
 17 have speeches from all your statewide officials next
 18 Wednesday and Thursday, which would be July 31st,
 19 August 1st. If you have never been, beyond the
 20 politics, it's just worth going. It's kind of a
 21 Mississippi institution, and it's very interesting.
 22 Of course, bring plenty of water and dress very cooly,
 23 because it's hot. There may be some hot speeches over
 24 there. All candidates get to speak, and I plan on, of
 25 course, being there. But it's part of this political

1 season that we're in.

2 I mentioned ONW. Very quickly, I just
 3 want to commend the staff and Brett Thompson
 4 particularly about our new program. We were able to
 5 secure the passage of House Bill 1519, which is our --
 6 we began calling it Alternative-to-Discipline, but
 7 that didn't sound right. So we're calling it
 8 Mississippi Nurse Voluntary Program, MnVP. This is
 9 another example of the Board and staff collaborating,
 10 coming up with something good.

11 This addresses specific issues at the
 12 discretion of the Board, for our new Board members, to
 13 allow, if you will, a diversion or an opportunity that
 14 may be granted, not mandated, for people with
 15 substance abuse and mental health disorders. And
 16 something, Mr. Ward, I was thinking about was, the
 17 State is in some serious litigation right not with the
 18 Federal Government on inadequate funding and treatment
 19 of the mentally ill. It's a very serious lawsuit,
 20 and, you know, it's going to be tough for the State.
 21 And I thought this was our little piece of the pie,
 22 what this board, what we were able to do with the
 23 legislature's help. You know, we're doing something
 24 to try to -- this not only covers substance abuse
 25 disorders, but mental disorders can be covered under

1 this as well. So I thought it was important to link
 2 that together, because the State is in some major
 3 litigation now, facing some serious challenges.

4 Finally, I would say, you know, with the
 5 election going on, things are kind of uncertain. But
 6 as we start to move through the primaries, we can get
 7 a clear idea who is going to be in some of these
 8 important positions, and we can really work even more
 9 to develop our legislative agenda for the 2020
 10 session.

11 You heard the talk about need for
 12 additional funding for scholarships. We all know how
 13 important that was. It was great watching what ONW
 14 was doing with that money. Obviously, anything
 15 related to access, to improve access to healthcare,
 16 and, of course, the ability of our advanced practice
 17 nursing professionals to practice fully within their
 18 scope. Full practice authority is something that we
 19 continue to discuss and gather information and data.
 20 We will continue to do that. At this time I will
 21 answer any questions if anybody has one. If not,
 22 thank you for your time. I will be around for the
 23 conclusion of the meeting. Thank you.

24 DR. KING: Thank you, Trey. Thanks for
 25 everything that you do. And I will echo the

1 congratulations to Ms. Brett Thompson-May for all the
2 work that she did for the MnVP program and the
3 Administrative Code, Mr. Ward, for the work that y'all
4 put in to get that up and running so quickly and out.
5 So, thank you for everything that you guys did. All
6 right. That brings us to the Executive Director
7 Report.

8 MS. JOHNSON: Good morning. And let me
9 take this opportunity to also welcome our newest Board
10 members, Dr. Mary Stewart and Ms. Laura Moore. We are
11 excited about having you on board, and the staff
12 stands ready to assist you in whichever way that you
13 need. So don't hesitate to reach out to us to be here
14 for you, and I think you have got all of our contact
15 information. If not, you will have it. So we're
16 excited about having you and the expertise you bring
17 to the Board of Nursing.

18 With that being said, just a couple of
19 updates. First of all, I would like to give kudos to
20 the best staff in the State of Mississippi. That's
21 the Mississippi Board of Nursing staff. And if any of
22 my staff is in the room, I would like for them to
23 stand so that you-all will know who they are. Don't
24 be ashamed.

25 (APPLAUSE)

1 MS. JOHNSON: I could not do what I do
2 without their support. They work hard, and I am very
3 proud of the staff. And, again, I always tell
4 you-all, Board of Directors, kudos to you-all, because
5 you're being watched at the national level, and you're
6 being emulated at the national level. I get reports
7 all the time and responses from other boards about
8 what the Board of Nursing in Mississippi is doing, how
9 we're involved in the community. And they are even
10 changing some of the things they do to emulate what
11 we're doing, our social media. So that speaks volumes
12 for your leadership, and we appreciate your leadership
13 and allowing us to be the staff that we are. So thank
14 you so much, and thank you to the staff.

15 Moving on, on updates, we have Annual
16 Meeting coming up in August, and we have a large
17 contingent of our board going, and hopefully
18 everything -- you have resolved all of your travel
19 accommodation issues. If you have not, you need to do
20 that as soon as possible. And if you have any
21 pertinent issues that need to be brought to our
22 attention, please let Vanessa or myself know right
23 away. That's August 21st through August the 23rd.

24 PN Nurse Educator PIN, this is first and
25 foremost priority on my list, because, as you know, we

1 have assumed the LPN -- well, the Practical Nursing
2 Educational Program as of July 1, and right now I'm
3 it. I'm your point of contact. I'm your point of
4 contact, public, PN educators, until this position is
5 secured. Right now that position is posted on the
6 State Personnel Board. And so if you know of anybody
7 that's interested, have them to go ahead and apply for
8 this position. This is priority on my list.

9 I have done a little bit of education
10 with the VA. It has been a while. And right now I'm
11 getting well versed in the standards, because I'm the
12 one that's going to have to answer questions until we
13 get this person in place. So I wanted to let you-all
14 know, this is priority. We will be doing a thorough,
15 thorough, thorough interview process and going through
16 whatever with the MSPB. So it's to us for review, and
17 we're going to get back and start that ball rolling as
18 soon as the position closes. So I just wanted to put
19 that out there today.

20 You can see on the other things that we
21 have, I do want to bring your attention to our
22 Families First Workforce Employability Skills
23 Training, which is a soft skills training that the
24 staff had the privilege to participate in, and they
25 have been talking the language since that training.

1 It is ideal. We hope to also have this for the Board
2 of Directors. We're looking at that maybe at our
3 retreat. We're going to be looking into that issue to
4 see what color you are, whether you're gold, blue,
5 green, or orange. We found out we have a lot of
6 orange people in the staff. That's their color, which
7 means they play too much.

8 (LAUGHTER)

9 MS. JOHNSON: So it has been a great
10 experience for the staff. They are able to
11 communicate with each other a lot better because they
12 know what their personality or their attitude is, and
13 it explains why they behave the way they do, why they
14 make decisions the way they do. Quite naturally, I'm
15 a gold, so enough said. And it was spot on, that
16 military component and structure and focus. So, but
17 they now know how to deal with me, and I know how to
18 deal with all the people that like to have fun. We
19 have quite a few oranges and quite a few blues.

20 You have got to have this training if you
21 have not had it. I would like to commend our Board
22 member, Jan Collins, who brought that to our
23 attention. I think we were attending something that
24 Jan was doing, and that came up, and Jan was
25 instrumental in introducing us to this concept and t

1 people that do this training. So thank you for that.
2 We had our Mississippi Supreme Court
3 Appeal. That was one of the appeals that came up. I
4 must say Brett Thompson-May did an outstanding job.
5 We're still waiting, so I won't say any more on that.
6 But that did transpire, I think, last week, if I'm not
7 mistaken.

8 I would also like to give kudos to one of
9 our other staff members, and that's Ms. Sandra
10 Culpepper who is an LPN on our Board. Sandra was
11 selected to serve on the NCLEX Item Review
12 Subcommittee by the National Council of State Boards
13 of Nursing.

14 (APPLAUSE)

15 MS. JOHNSON: She has also been very
16 participatory when I have reached out and say, "Any
17 Board members want to serve on a committee?" So,
18 okay, she's the gold standard. So you know where I'm
19 going with this, right? So I have already talked with
20 Laura and Dr. Stewart about how they can get involved
21 with NCSBN. So, a great opportunity, great learning,
22 and national recognition for the Board. So thank you
23 for that.

24 Board Visibility, I won't go over all of
25 these things. These are some of the things that we've

1 been involved in. The Coahoma Community College
2 Pinning Ceremony, Ms. Tywanda Jones spoke on behalf of
3 the Board and did a great job with that. I think I
4 happened to be out. I had surgery on my knee, and
5 Tywanda stepped in and did a great job with going to
6 speak at the pinning ceremony.

7 The National Workforce Forum, we had Shan
8 and Tywanda attended that last month as well. The EO
9 Summit, I attended that. The SHRM Conference, we had
10 training in our human resource component. Shan was
11 able to participate in that. All of the staff --
12 well, the majority of the staff attended some training
13 at the NADDI State Conference here at Eagle Ridge, I
14 believe, and that was well attended, and they did a
15 great job. Brett presented, as well as myself, at
16 that conference as well.

17 Then, we had several to attend the
18 Discipline Case Management Conference, several staff,
19 and Tina Highfill and Floyd Wiley think they're police
20 now. They attended a NADDI Police Academy Training in
21 Virginia, and I think they had a good time learning.
22 I'm just glad they came back. And I think Tina has
23 been wearing a badge ever since. It's a great
24 training for the staff. It enhances what they do here
25 at the Board in their investigatory skills and their

1 ability to perform their job.

2 Next, Upcoming Board Visibility, we have
3 the MANP Conference next week. We are slated to speak
4 at that conference as well. We have Brett and Shan
5 attending the EEOC Conference, which is one I highly
6 recommend so that we are kept abreast of the Equal
7 Employment Opportunity Commission and the rules and
8 regulations and laws that affect our staff and our
9 practice here.

10 Also, the NCSBN NCLEX Conference is in
11 September. We have two of our licensure staff,
12 Talisha Greenlaw and Alena Williams, that will be
13 attending that. I have been asked, and I appreciate
14 the Mississippi University for Women reaching out to
15 me and asking me to speak at their commencement
16 exercises on August the 9th. So, thank you, MUW, if
17 you're still in the room. I'm not sure who is
18 responsible for that, but I am excited and honored to
19 have been asked to speak at my alma mater. So those
20 things I have coming up.

21 Next, one thing before we go to the
22 budget, and that's the Strategic Plan for the Board of
23 Nursing which was submitted to you. I think we sent
24 it out electronically for your review, and I just need
25 a motion to approve the Strategic Plan so that we can

1 move forward with that. I know it has to be
2 submitted, like, today.

3 DR. KING: With that, I would like a
4 motion to approve the Five-Year Strategic Plan.

5 DR. STANFORD: I make a motion.

6 DR. KING: Motion made by Dr. Teresa
7 Stanford.

8 MS. JACKSON: Second.

9 DR. KING: Seconded by Ms. Shirley
10 Jackson. Is there any discussion or questions?

11 (NO VERBAL RESPONSE)

12 DR. KING: Okay. All in favor?

13 (ALL IN FAVOR)

14 DR. KING: Any opposed?

15 (NO VERBAL RESPONSE)

16 DR. KING: Any abstainers?

17 (NO VERBAL RESPONSE)

18 DR. KING: Motion passes.

19 MS. JOHNSON: Thank you. And now Shan
20 Montgomery will give the budget report.

21 MS. MONTGOMERY: Hello, everyone.
22 You-all should have received a more detailed budget,
23 so I will give you a high overview. As you-all know,
24 it has been three budgets working at one time. So I'
25 happy to have some of them come to a close. Fiscal

1 Year '19, revenue increased by \$421,311 or 6 percent
2 over Fiscal Year '17 RN Renewal. We're still
3 processing Fiscal Year '19 invoices, and I will report
4 that final balance once we have received all the
5 receipts and made payments to all the invoices. This
6 includes the 320,000 that we appropriated for the
7 simulation projects. So, once we complete that, we
8 will have the final Fiscal Year '19 Budget Report.

9 Fiscal Year '20, we previously reported
10 that the legislature added \$34,473 to the original
11 appropriation for salary increases. All employees
12 received that salary, with the exception of two of the
13 positions. Also, we had the nurse educator position
14 appropriated, which Ms. Johnson covered earlier. We
15 have worked with the LPN Transition Committee -- thank
16 you, Sandra Culpepper -- to develop that job
17 description. We got it through SPB. We got it
18 posted. The salary range was 95,000 for that
19 particular position, and it is currently on
20 recruitment, and it closes on the 15th of -- what
21 month are we in?

22 MS. CULPEPPER: It's going to be August.

23 MS. MONTGOMERY: August. So it has been
24 crazy. We are also actively recruiting for other
25 nursing, vacant nursing PINs and HR position PINs. We

1 do hope to seek some better efforts in recruiting for
2 those positions because the salaries were increased
3 statewide for a lot of those positions. So we're
4 looking forward to filling those positions.

5 An analysis was taken of the contracts.
6 I do foresee some cost savings on some of the
7 contracts that we have reviewed for this fiscal year
8 versus last fiscal year, and I will have a detailed
9 report on some of those savings on cost analysis. One
10 I can tell you in particular is our fingerprinting
11 contract. I'm excited about the cost we're going to
12 save on that particular contract.

13 Last, for Fiscal Year '20, we have
14 sufficient funds to support the operating budget of
15 \$5,041,671. That's what we were appropriated for
16 Fiscal Year '20. We currently have cash, 5,424,000.
17 So that will sufficiently support our Fiscal Year '20
18 Budget -- the last fiscal year's budget, Fiscal Year
19 '21. Okay.

20 What we decided, as an internal analysis,
21 we asked for an in-house court reporter position.
22 While we paid \$47,000 out for that contract last year,
23 we do feel that it would benefit us more to have that
24 person internally. So that's one of the additions to
25 the Fiscal Year '21's Budget.

1 The only other increase in the Fiscal
2 Year '21's Budget is \$5,634. We pay the Department of
3 Finance and Administration for certain services that
4 they provide, and they have increased their fees by
5 \$5,634. Our Fiscal Year '21 Budget Request is
6 \$5,103,562. Any questions, comments, concerns about
7 Fiscal Year '19, '20, or '21? I'm tired.

8 (NO VERBAL RESPONSE)

9 DR. KING: Do I have a motion to approve
10 the budget?

11 MS. COLLINS: Motion.

12 MS. TAYLOR: Second.

13 DR. KING: Motion made by Ms. Jan
14 Collins, seconded by Ms. Brandi Taylor. Any
15 discussion?

16 (NO VERBAL RESPONSE)

17 DR. KING: All in favor?

18 (ALL IN FAVOR)

19 DR. KING: Any opposed?

20 (NO VERBAL RESPONSE)

21 DR. KING: Any abstainers?

22 (NO VERBAL RESPONSE)

23 DR. KING: Motion passes.

24 MS. JOHNSON: One other thing, Madam
25 Chair, if I may, I would like to recognize -- I

1 introduced additional new staff. You have already met
2 Ronnie Gregg Taylor. He likes to be called Gregg, who
3 is the director of ONW. But we also have additional
4 staff, and I would like Ms. Brett Thompson-May to
5 introduce her new staff.

6 MS. THOMPSON-MAY: Yes. We have a
7 wonderful addition to our Compliance and Legal
8 Departments, Charla Gigi Blackwell. Ms. Blackwell
9 comes to us from a facility in the area, and we are
10 just very pleased to have her. She is a nurse, and s
11 her expertise will be utilized in so many areas. So,
12 please stand and be recognized.

13 (APPLAUSE)

14 MS. JOHNSON: And that concludes my
15 report, Madam Chair.

16 DR. KING: Thank you, Phyllis. So that
17 brings us to committee reports. Executive Committee,
18 we have two administrative denials coming out, Case
19 No. -- one was a denial for a reinstatement of
20 application, Case No. RICH-BSS3QX, and the other one
21 was LPN Endorsement Application, Case No. 2019-0520.
22 I will need a motion to accept those administrative
23 denials.

24 MR. WARD: Motion.

25 DR. KING: Motion made by Mr. Blake Ward.

1 Is there a second?
 2 DR. STANFORD: Second.
 3 DR. KING: Second by Dr. Teresa Stanford.
 4 Any discussion?
 5 (NO VERBAL RESPONSE)
 6 DR. KING: All in favor?
 7 (ALL IN FAVOR)
 8 DR. KING: Any opposed?
 9 (NO VERBAL RESPONSE)
 10 DR. KING: Abstainers?
 11 (NO VERBAL RESPONSE)
 12 DR. KING: Motion passes. The second
 13 motion that we have coming out of Executive Committee
 14 is, we would like for our bylaws to be reviewed and
 15 possibly amended to include a vice president or
 16 president-elect and refer that to the Administrative
 17 Code Committee, which would be filed as an emergency
 18 rule with the Secretary of State, if approved. And we
 19 can talk through that more if we need to. Is there
 20 any question about that?
 21 MR. WARD: Madam Chair, I would like to
 22 add to that. As chair of the Administrative Code
 23 Committee and past president, I do think that that is
 24 very much needed, and as Ms. Gloria Green, the AG
 25 representative appointed to us --

1 (INTERRUPTION BY COURT REPORTER)
 2 MR. WARD: I feel that that is very much
 3 needed. And we have received guidance from our AG
 4 representative that the bylaws themselves aren't as
 5 powerful as we need in our rules and regulations. So
 6 I do support both arms of the motion, one that the
 7 president-elect or something of that nature, as well
 8 as reviewing those bylaws in the Administrative Code.
 9 I think that is very much needed.
 10 DR. KING: So the motion was on the
 11 table. I will take that as a second by Mr. Blake
 12 Ward. Any other discussion about that?
 13 (NO VERBAL RESPONSE)
 14 DR. KING: All in favor?
 15 (ALL IN FAVOR)
 16 DR. KING: Any opposed?
 17 (NO VERBAL RESPONSE)
 18 DR. KING: Any abstainers?
 19 (NO VERBAL RESPONSE)
 20 DR. KING: Motion passes. Thank you.
 21 That will bring us to the Compliance Committee
 22 business, Mr. T.J. Adams.
 23 MR. ADAMS: Just a few motions here.
 24 "I move that the Board adopt the Compliance
 25 Committee's recommendation that the following

1 affidavits/formal reprimands be accepted for
 2 ratification: License No. R-871016, License No.
 3 R-891921.
 4 "I move that the Board adopt the
 5 Compliance Committee's recommendation that Adderall be
 6 deemed medically necessary for License No. R-893714,
 7 that use of said drug as prescribed by the physician
 8 shall be permissible and not in conflict with the
 9 February 12, 2019, Board Order."
 10 DR. KING: So we have two motions coming.
 11 Do you have more?
 12 MR. ADAMS: Yes.
 13 DR. KING: Sorry.
 14 MR. ADAMS: That's all right. I said a
 15 couple, didn't I? All right. "I move that the Board
 16 adopt the Compliance Committee's recommendation to
 17 approve a 90-calendar-day extension to License No.
 18 P-329388 on her Final Order requirement to complete a
 19 Board-approved Refresher Course.
 20 "I move that the Board adopt the
 21 Compliance Committee's recommendation to approve a
 22 180-calendar-day extension on License No. P-292731 on
 23 her Final Order requirement to complete a
 24 Board-approved Legal Aspects of Nursing Course.
 25 "I move that the Board adopt the

1 Compliance Committee's recommendation to modify the
 2 Final Order of License No. R-887036 dated and signed
 3 June 6, 2019, to allow the Respondent to attend six
 4 (6) AA/NA meetings every other week as an alternative
 5 to AA/NA schedule to accommodate childcare scheduling
 6 conflicts. The alternative AA/NA meeting schedule
 7 does not affect her total number of required monthly
 8 meetings."
 9 DR. KING: Y'all were busy this morning.
 10 MR. ADAMS: Yes.
 11 DR. KING: So that is, we have five
 12 motions that are stated on the record from the
 13 Compliance Committee. Is there a second?
 14 MS. CULPEPPER: I'll second it.
 15 DR. KING: Seconded by Ms. Sandra
 16 Culpepper. Any discussions about any of those?
 17 Questions?
 18 (NO VERBAL RESPONSE)
 19 DR. KING: Okay. All in favor?
 20 (ALL IN FAVOR)
 21 DR. KING: Any opposed?
 22 (NO VERBAL RESPONSE)
 23 DR. KING: Abstainers?
 24 (NO VERBAL RESPONSE)
 25 DR. KING: Motion passes. Anything else

1 out of Compliance, T.J.?

2 MR. ADAMS: That's all.

3 DR. KING: All right. Thank you very
4 much. Our next item is Advanced Practice Committee,
5 Dr. Teresa Stanford.

6 DR. STANFORD: We actually had two
7 motions to come from Advanced Practice Committee
8 today. The first is, "I move that performing PDO
9 threads is not within the scope of practice of
10 Advanced Practice Registered Nurses."

11 DR. KING: Okay. We have a motion on the
12 table that PDO threads are not within the scope of
13 practice of Advanced Practice Registered Nurses. Is
14 there a second on that one?

15 MR. ADAMS: Second.

16 DR. KING: Seconded by Mr. T.J. Adams.
17 Is there any discussion or questions?

18 (NO VERBAL RESPONSE)

19 DR. KING: All in favor?

20 (ALL IN FAVOR)

21 DR. KING: Any opposed?

22 (NO VERBAL RESPONSE)

23 DR. KING: Abstainers?

24 (NO VERBAL RESPONSE)

25 DR. KING: Motion passes.

1 DR. STANFORD: The second is, "I move
2 that performing ultrasounded-guided thyroid biopsies
3 is not within the scope of practice of Advanced
4 Practice Registered Nurses."

5 DR. KING: We have a motion on the table
6 that it is not within the scope of practice of an
7 Advanced Practice Registered Nurse to perform
8 ultrasound-guided thyroid biopsies. Is there a
9 second?

10 MR. WARD: Second.

11 DR. KING: Seconded by Mr. Blake Ward.

12 Any discussion or questions?

13 (NO VERBAL RESPONSE)

14 DR. KING: All in favor?

15 (ALL IN FAVOR)

16 DR. KING: Any opposed?

17 (NO VERBAL RESPONSE)

18 DR. KING: Any abstainers?

19 (NO VERBAL RESPONSE)

20 DR. KING: All right. Ms. Shirley
21 Jackson, that brings us to the Practice Committee.

22 MS. JACKSON: Yes, Madam Chair. I have
23 one motion, and I have documents to back these
24 motions -- this motion. "I move that the Board adopt
25 the Practice Committee's recommendation: The Practice

1 Committee, in consultation with the Emergency Setting
2 Practice and Standards Advisory Committee, reviewed
3 the current position statement entitled
4 'Administration and Management of Intravenous Moderate
5 sedation.' Rather than amend the current position
6 statement, the Practice Committee recommends the Board
7 adopt an additional position statement entitled
8 'Administration and Management of Intravenous Moderate
9 Sedation in the Emergency Setting.'"

10 DR. KING: So, just a little background,
11 if anybody wants some background on that. We met on
12 the 19th of June in the Emergency Practice and
13 Standards Committee and discovered that this IV
14 Sedation position statement was a little bit confusing
15 and cumbersome for the staff to answer questions and
16 go through, because the emergency setting is a little
17 bit different after we have gone through all the
18 position statements and how those are in conflict.

19 So, it was initially thought to amend the
20 current sedation position statement, but then we
21 realized that may be a little bit more confusing. So
22 the Practice Committee decided and is now recommending
23 that we carve out emergency setting so it is very
24 clear on when this type of sedation can happen and how
25 it can be monitored. So that is what is on the table

1 and what this position statement, how it now reads.
2 It's strictly for the emergency setting.

3 DR. STANFORD: Will that be specified as
4 to what just the term "emergency setting" encompasses,
5 because there are multiple things that can be
6 emergency settings.

7 DR. KING: They aren't place specific.
8 So we did define that, and it is on page 2 right under
9 "Scope of Practice." And it says, "Emergency is
10 defined as the threat of loss of life, limb, or
11 vision."

12 DR. STANFORD: So you didn't change the
13 definition?

14 DR. KING: So that's not changing the
15 definition. That is the definition of emergency, and
16 so then this would encompass the emergency setting
17 portion of that.

18 DR. STANFORD: I'm a word person, I'm
19 sorry. Should it say "in an emergency" instead of
20 just in an emergency setting, because that, to me,
21 adding "setting" to it warrants that definition as
22 opposed to just having it in an emergency.

23 DR. KING: So you are asking for this to
24 be amended at the title to say "Administration and
25 Management of IV Moderate Sedation in an Emergency"?

1 DR. STANFORD: I would.
 2 MR. WARD: Madam Chair, if I could
 3 respond in regards to that question on how I would
 4 probably not recommend that particular wording simply
 5 because CMS defines the emergency setting, which
 6 includes departments. It includes transport. All of
 7 these settings are defined as license unique, and they
 8 are allowed to have their own standards based on the
 9 National Standards of Care, National Guidelines, so on
 10 and so forth. So, I believe if we say "in an
 11 emergency," that would continue confusion, after much
 12 debate, and we thought, I believe, "setting" would be
 13 able to encompass all of those potential areas that
 14 are defined as an emergency setting, settings in which
 15 emergencies can take place.

16 DR. STANFORD: Then may I withdraw my
 17 request?

18 DR. KING: You may. So, then, it's back
 19 on the table of the motion from the Practice Committee
 20 to accept this position statement from the Practice
 21 Committee of "Administration and Management of IV
 22 Moderate Sedation in the Emergency Setting."

23 DR. STANFORD: I second the motion.

24 DR. KING: Now there is a second by
 25 Dr. Teresa Stanford. Any more discussion? Take your

1 time. No, take your time.

2 DR. OWENS: I'm trying to be engaged in
 3 conversation and also read at the same time.

4 DR. KING: Take your time.

5 DR. OWENS: Now I do have a question.
 6 Can you just very succinctly summarize for me, having
 7 not been privy to the preceding confusing document,
 8 like, if you can summarize really quickly. So I know
 9 that this sets out specifically the emergency setting,
 10 so it's a carve-out. But is there anything
 11 fundamentally from what is described here that is
 12 different from the former parent document?

13 MR. WARD: Madam Chair?

14 DR. KING: Yes.

15 MR. WARD: Thank you. The present
 16 document is essentially the same document minus some
 17 references and redundant wording that was present in
 18 the current document which makes it confusing when the
 19 reader reads it to determine what is appropriate and
 20 is not appropriate in the emergency setting. While
 21 those things are appropriate outside of the emergency
 22 setting, it's extremely confusing in the emergency
 23 setting when you read the current document. So it is
 24 the same content, just minus the confusing language
 25 which is more pertinent for other areas.

1 DR. KING: Make sense?

2 DR. OWENS: I got it.

3 DR. KING: Perfect. All right. So we
 4 have a motion and a second. Any more discussion?
 5 (NO VERBAL RESPONSE)

6 DR. KING: All in favor?

7 (ALL IN FAVOR)

8 DR. KING: Any opposed?

9 (NO VERBAL RESPONSE)

10 DR. KING: Abstainers?

11 (NO VERBAL RESPONSE)

12 DR. KING: Motion passes. Okay. Next
 13 order of business is Administrative Code, Mr. Blake
 14 Ward.

15 MR. WARD: Thank you, Madam Chair. I do
 16 feel like I'm talking way too much or at least more
 17 than I usually do, but thank you. I do not have a
 18 motion from the Administrative Code Committee, but I
 19 would like to provide an update on some of the
 20 committee's activity. I would like to and am very
 21 proud to announce that on June 21st of 2019, we were
 22 finally put on the docket. The Board of Nursing was
 23 put on the docket by the Occupational Licensing Review
 24 Commission to hear the rule updates that the
 25 Administrative Code Committee proposed some 18 months

1 ago. So we were very excited to finally get on that
 2 docket. As the Board went to the committee meeting,
 3 we were addressed by the Governor, the Secretary of
 4 State, and the Attorney General's Office regarding
 5 four sections of our rules.

6 Part 2830, just to recap, was one of the
 7 four sections proposed. That is the Practice of
 8 Nursing. And as a recap in this section, the only
 9 change that was made was to strike the term "on the
 10 premises" regarding LPN charge nurses and their role
 11 and now remove "on the premises" for Registered Nurse
 12 in a supervisory fashion. It allows LPNs to assume
 13 this charge nurse responsibility if an RN is simply
 14 unavailable for consultation at all times, not
 15 specifically having to be on the premises at all
 16 times. This was actually a correction or referred to
 17 the original, so to speak. We have never required a
 18 RN to be present at all times, but that was one of the
 19 proposals to correct.

20 The second section that we discussed was
 21 Part 2825, Rules of Procedure. This is a brand-new
 22 section of the Administrative Code, and it clearly
 23 identifies how the Board of Nursing handles
 24 allegations, including informal and formal
 25 allegations, which wind up being hearings. It also

1 describes our investigatory process and our process of
2 resolution of these matters and the appeals process.
3 This is a clearer section that now both the Board
4 staff can adhere to and provides that information
5 currently to the public.

6 The third section that we covered was the
7 Advanced Practice, Part 2820. There were only two
8 major changes to that. I reiterate, these changes
9 were made by this board a year and a half ago, so this
10 has been discussed for quite some time. But, again,
11 just to recap, in this section, we clarified the term
12 "monitored practice hours" and the compatibility of a
13 preceptor where a preceptor can precept those advanced
14 practice nurses.

15 The other major change, much more
16 substantially, is the controlled substance prescribing
17 rules of advanced practice providers. Those
18 controlled substance prescribing rules worked hand in
19 hand within the confines of the Medical Board and in
20 consultation with the Governor's Opioid Taskforce.

21 The fourth and last part that was brought
22 forward to the OLRC is Part 2815, Continuing Education
23 Requirements. This, again, is a brand-new section,
24 and substantially it creates mandated continuing
25 education for both LPNs and RNs. That number of

1 continuing education was 20 hours per licensure cycle,
2 which, as we know, is every two years. The APRNs
3 continue at the present rate of 40 hours every
4 licensure period.

5 The other item that we included in this
6 section is the addition of the carry-over hour in the
7 definition section of Part 2815. We defined
8 "carry-over hour" as accepted continuing education
9 completed in the prior renewed licensure period that
10 is in excess of the requirements prescribed by these
11 rules. These hours which are in excess of your 20 or
12 40, respectively, those hours can be carried over into
13 your next licensure cycle so the hours that you are
14 paying for that are in excess of the requirement are
15 not lost anymore. You can count those hours still
16 towards your next licensure cycle.

17 So this was well accepted by the
18 committee. I am extremely pleased to announce that
19 the OLRC approved all of our sections as presented,
20 and I do have to commend this committee headed by
21 Mr. Westley Mutziger who is an absolute treasure to
22 this committee. He knows all of these rules inside
23 and out, backwards and forward. He has absolutely
24 bent over backwards to make this happen. He is
25 invaluable.

1 I also give kudos to our Administrative
2 Code Committee. I have said earlier, I have been the
3 chair of the committee for three years now. Also, on
4 the committee is Dr. Teresa Stanford, Alton Shaw,
5 Sandra Culpepper, Cathy Williamson, a former Board of
6 Nursing member, Teresa Malone from MNA, Sandy Weathers
7 from MANA, Linda Shows from the LPNA, and Dr. King.
8 These members of this committee have worked very hard,
9 and more important, efficient, and I am extremely
10 proud of the efficiency the Administrative Code
11 Committee has made to turn out these rules. As you
12 mentioned earlier, Dr. King, the new MnVP program, we
13 went through that entire section in two meetings, and
14 this board approved that. So I would like to, once
15 again, thank Mr. Mutziger for his direction, and we
16 could not do this without him.

17 (APPLAUSE)

18 DR. KING: Thank you, Blake. Although
19 you didn't have any motions to come forward, I'm sure
20 in our next meeting you will have several, I hope. So
21 that will bring us to the LPN Transition, Ms. Sandra
22 Culpepper.

23 MS. CULPEPPER: I am pleased to say that
24 we had our last meeting on July 3rd, which we produced
25 the job description that was submitted and accepted

1 with a minor change in the description as far as the
2 LPN was concerned. However, we have moved forward.
3 It has been accepted. Shan, as she has said, has
4 posted it on the website as of two days ago. I'm
5 expecting a lot of response to this. So I feel
6 like -- and like she said, we're going to do this
7 until August the 15th, correct, Shan?

8 MS. MONTGOMERY: That's correct.

9 MS. CULPEPPER: So I know that we will
10 not have our next Board Meeting until October. So I
11 expect for us to have a special meeting to make that
12 decision as to who that is, because it's like Phyllis
13 said, I don't -- I want to get somebody in place. And
14 so that's kind of where we are right now. Our next
15 meeting will be on August the 9th, because
16 Mr. Mutziger is getting our Administrative Code
17 section ready for Blake, to turn it over to him. So
18 that review will happen on August 9th. And when we
19 meet again, I will turn it over to him.

20 DR. KING: Thank you very much.

21 MS. CULPEPPER: You're welcome.

22 DR. KING: I'm excited about that. That
23 brings us to the Emergency Practice and Standards
24 Advisory Committee. You guys heard the motion that
25 got referred to -- we met on June the 19th, got it

1 referred to Practice Committee. Another thing that
2 was approved and we had already gone through, the
3 Board was looking through the ASTNA and ENA guidelines
4 of transport nursing and go ahead and following those
5 guidelines. As we reviewed this, there was no
6 changes. So we accepted them as is, and they will
7 continue.

8 Something else that is in the works is
9 the American Academy of Emergency Nurse Practitioners
10 and ENA have submitted two different documents that
11 they are calling one a competency from the ENA side of
12 advanced practice nurses in the Emergency Department,
13 and then the American Academy of Emergency Nurse
14 Practitioners are calling principles of practice or
15 standards of practice. So we are in the middle of
16 reviewing those. The next time we meet we will vote
17 on which one of those we would like to send to
18 Administrative Code for review to consider a
19 subspecialty type Administrative Code variation. So
20 we're working on that.

21 We also met -- the Telehealth Taskforce
22 also met on June 19th, and going with national
23 standards, they also -- ANA has recently released, it
24 was hot off the press that day, actually, the
25 Principles to Practice for Telehealth across all

1 spectrums of nursing and medicine. So we are in the
2 process of reviewing those, getting another meeting
3 together, and we will at that point, after reviewing
4 those, make some recommendations to the Administrative
5 Code, to Blake, to also get some rules and regs in
6 place for telehealth specific practice. Any questions
7 on those two items?

8 (NO VERBAL RESPONSE)

9 DR. KING: Then, so the Office of Nursing
10 Workforce, I have assumed the interim chair position
11 until we can get a chair of that committee. So I'm
12 sure that I won't have as much to say and do as
13 Darlene had. She did a really good job by chairing
14 that committee, but I will tell you what did come out
15 of the last ONW meeting are the members to the
16 Advisory Committee. And that will be Dr. Robert Ware,
17 Ms. Carol Hurt, Dr. Rosemary Franklin, Dr. Sheryl
18 Allen, and Dr. Arlene Jones, in addition to the
19 current members. Those members will serve two-year
20 terms. Any question on that?

21 MS. COLLINS: Do we know when the next
22 meeting is going to be yet?

23 DR. KING: Gregg will be helping us get
24 that together, and I have no -- I am completely -- I
25 know he will get that together for us and keep us in

1 mind. So I don't think there is a date set just yet.
2 So, actually, I think we need to vote, and I need a
3 motion to approve these members for the ONW Advisory
4 Committee.

5 DR. OWENS: Motion to approve.

6 DR. KING: Motion made by Dr. Michelle
7 Owens.

8 MS. CULPEPPER: I second it.

9 DR. KING: Second by Sandra Culpepper.
10 Any discussion?

11 (NO VERBAL RESPONSE)

12 DR. KING: All in favor?

13 (ALL IN FAVOR)

14 DR. KING: Any opposed?

15 (NO VERBAL RESPONSE)

16 DR. KING: Any abstainers?

17 (NO VERBAL RESPONSE)

18 DR. KING: Motion passes. The last thing
19 on our agenda, it is coming up that time of year that
20 we will be having election of officers. So we would
21 need to have -- we need to appoint and elect the
22 Nominating Committee. So I'm told that I have to read
23 this. All right. So the ballot for election of the
24 Nominating Committee, the Board of Nursing Bylaws
25 specify the composition and purpose of the Nominating

1 Committee as follows:

2 Membership: Three Board members elected
3 by ballot two months prior to the annual meeting. The
4 individual receiving the highest number of votes shall
5 function as chair. Vacancies occurring on the
6 committee will be filled by a special election. The
7 purpose is to prepare and submit a slate of nominees
8 for the offices of president, secretary, and treasurer
9 to be filled at Annual Meeting and as other vacancies
10 occur. Consent to serve must be obtained from each
11 individual prior to the Election Meeting.

12 Said slate shall be consistent with
13 Mississippi Nursing Practice Law, Section 73-15-11(1)
14 which states the members of the Mississippi Board of
15 Nursing shall meet annually and organize for the
16 ensuing year by election of one of its members as
17 President, one as Secretary, and one as Treasurer.
18 physician member and a representative of the consumer
19 of health services may discuss and nominate but shall
20 not vote for officers, nor hold office on such
21 elections.

22 So everybody has this in their packet, I
23 believe. If you would vote for three members to be
24 the Nominating Committee.

25 (OFF THE RECORD)

1 DR. KING: Is there any other business
2 that needs to be discussed while we're waiting on
3 these copies?
4 (NO VERBAL RESPONSE)
5 (OFF THE RECORD)
6 DR. KING: Just so everyone knows, this
7 is the last item on the agenda. So, unless you want
8 to stay around and hear who the Nominating Committee
9 is, we will adjourn after this part of the meeting is
10 done.

11 MS. JOHNSON: Could I ask, Blake, a
12 question on the continuing education requirement? Did
13 they not increase the APRN controlled substance?
14

15 MR. WARD: Yes. I'm sorry, yes. I
16 should have added that to my review as well. The
17 other change -- yes, the APRNs did stay at 40. The
18 former rule was 40 hours per licensure cycle and 5
19 hours of controlled substance education. We did
20 increase that to 10 hours of controlled substance
21 education. That was the only change to the APRN
22 requirement.

23 MS. JOHNSON: And then I have one other
24 question, because I know we've been working on this
25 for two years, and they finally approved it. We're
getting ready to start the LPN renewal cycle, and we

1 have had some discussion, I know, with the
2 Administrative Code in the past that depending on when
3 OLRC approved this, we would not penalize the LPN
4 licensees if it occurred in a short period of time.
5 And their renewal will start in September.

6 So I know that I didn't get a chance to
7 call you and talk to you about that, but if the
8 Administrative Code Committee could kind of review
9 that and maybe defer the LPN renewal, that would be my
10 recommendation, because some of them may not have
11 started, and it was just approved. I don't think we
12 want to put them in that bind of trying to get
13 everything done in that short period of time.

14 DR. STANFORD: If we do that, similar
15 ones we have been talking to going along were going
16 into those hours for their IV certification if they
17 have not done that. How will we handle that?

18 MS. JOHNSON: I'm not sure. I'm
19 referring it for the Code to discuss and review it,
20 because I know that's going to come up. There are
21 quite a few that have been out there getting hours
22 assuming that it was already going to be approved, but
23 I don't know. I just want the committee to consider
24 that and maybe look at maybe prorating or something.
25 I don't know how you're going to do it. I just wanted

1 to bring it to your attention.

2 MR. WARD: And I will touch on that.
3 Just in reviewing past conversations, since we all
4 were aware that there is no way for us to predict when
5 the OLRC would pick up our case, years, half a year,
6 there's no way for us to predict that. So, therefore,
7 the licensees were very nervous, like Ms. Johnson
8 said. If it's approved in July, I have to get all
9 those hours in by September. That could be very
10 nerve-racking.

11 So the feeling, or at least the
12 conversation, and people who knew these conversations
13 that we had contributed as well, but my understanding
14 is that the thought is that none of the committees
15 were interested in or the Board members that I had
16 spoken to were interested in trying to make a licensee
17 rush to get them in after OLRC but before their
18 licensure cycle. And we would just start anew at the
19 beginning of whatever licensure cycle that wound up
20 being. So, simply everyone would start with their
21 requirement for the LPN in September, and then they
22 would have two license years to do those.

23 The question was, was there a limitation
24 established for the carry-over hours? And, yes, the
25 carry-over hour is limited to half of whatever your

1 required hours are. So, for LPN and RN who require
2 20, they can carry over a maximum of 10 to the next
3 licensure cycle. So only for the subsequent licensure
4 cycle, the very next license cycle. And for the APRN
5 you are required 40 hours. They would be allowed to
6 carry over a maximum of 20, and that controlled
7 substances were not included in the carry-over.
8 Thanks to everyone for helping me complete that
9 statement.

10 (OFF THE RECORD)

11 DR. KING: So we have a tie, so we're
12 going to have to have a run-off of who is going to be
13 the chair. But the three with the highest numbers are
14 T.J. Adams, Jan Collins, and Shirley Jackson.

15 MS. COLLINS: Me?

16 (LAUGHTER)

17 DR. KING: But T.J. and Ms. Shirley have
18 nine a piece. So we have to have -- so T.J. has
19 agreed to be chair of the Nominating Committee. We
20 let him have his first year free. Going into the
21 second year, he's on everything. So, do you really
22 accept it?

23 MR. ADAMS: I'll accept it.

24 DR. KING: Okay. Thank you very much.

25 So the Nominating Committee will be T.J. Adams as

1 chair. All of your nominations will be sent to him.
2 He will then reach out to you, the Board member, to
3 make sure they accept the position and then
4 communicate with Ms. Vanessa to make sure that the
5 ballot is appropriately ready for October. And so
6 that will be T.J. Adams, again, Ms. Jan Collins, and
7 Ms. Shirley Jackson. With that, I would ask for a
8 motion to adjourn.

9 DR. STANFORD: Motion.

10 MS. CULPEPPER: I will second.

11 DR. KING: All in favor?

12 (ALL IN FAVOR)

13 DR. KING: Thanks, everyone.

14 (MEETING ADJOURNED AT APPROXIMATELY 12:46 P.M.)

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CERTIFICATE OF COURT REPORTER

I, ASHLEY C. HAGG, Certified Shorthand Reporter and Notary Public in and for the State of Mississippi at large, hereby certify that the foregoing pages contain a full, true, and correct transcript of the proceedings as taken by me at the time and place heretofore stated in the aforementioned matter and later reduced to typewritten form by me to the best of my skill and ability.

I further certify that I am not in the employ or related to any counsel or party in this matter and have no interest, monetary or otherwise, as to the final outcome of this proceeding.

WITNESS MY SIGNATURE AND SEAL, this the ___ day of _____, 2019.

ASHLEY C. HAGG, CSR
CSR NO. 1178

My Commission Expires:
July 1, 2022