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THE MISSISSIPPI BOARD OF NURSING
SPECIAL CALL BUSINESS MEETING

APRIL 29, 2020
VIA ZOOM TELECONFERENCE

BOARD STAFF PARTICIPATING VIA ZOOM TELECONFERENCE:

PHYLLIS POLK JOHNSON
SHAN MONTGOMERY
BRETT B. THOMPSON-MAY, ESQUIRE
W. WESTLEY MUTZIGER, ESQUIRE
VANESSA GRAY

BOARD MEMBERS PARTICIPATING VIA TELECONFERENCE:

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

ALSO PARTICIPATING VIA ZOOM TELECONFERENCE:

EDWARD WIGGINS, ESQUIRE
SPECIAL ASSISTANT ATTORNEY GENERAL

REPORTED BY: ASHLEY C. HAGG
CERTIFIED SHORTHAND REPORTER
CSR NO. 1178
NOTARY PUBLIC

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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, via Zoom Teleconference, on Wednesday, April 29, 2020, commencing at approximately 2:09 p.m.

DR. KING: We will go ahead and call this meeting to order, the Mississippi Board of Nursing Special Call Meeting for April 29th, 2020. The time is currently 2:09 p.m., and we have on the call virtually via Zoom Dr. Melissa King, Shan Montgomery, Jan Collins, Brandi Taylor, Dr. Michelle Owens, Dr. Mary Stewart, Blake Ward, Alton Shaw, Brett Thompson-May, Mr. Edward Wiggins, Laura Moore, Phyllis Johnson, Dr. Teresa Stanford, Vanessa Gray, Westley Mutziger, Sandra Culpepper, T.J. Adams. And did I miss anybody? Oh, Ms. Nancy Norris -- Nancy Johnson, sorry. You're always going to be Nancy Norris to me, I guess. Did I miss anybody else on the call?

(NO VERBAL RESPONSE)

DR. KING: And we have Ms. Ashley Hagg, court reporter. And let the record reflect that

Ms. Shirley Jackson is absent currently from today's meeting. All right. The first item up for the agenda is, Ms. Johnson, could you please give us an overview of our response, please?

MS. JOHNSON: Good afternoon, everyone and to the public that's also out there listening. Just a brief overview of what the Board of Nursing has been involved in since the Emergency Declaration by Governor Tate Reeves back in March. As a matter of fact, March 14th, I believe, it went into effect and March 17th. There have been several executive orders since that time. But based on the Emergency Declaration, the Board has been diligent in providing temporary permits to allow those nurses that wish to join our workforce under the Emergency Declaration to be able to practice.

To this date, we have been offered and given approximately 400 permits, and that's RNs, LPNs, and nurse practitioners. One of the first things that the Board did was to do a proclamation for our APRNs, to allow them to practice telehealth, because our rules and regulations state that they have to be licensed in the state in which the patient is receiving care. So, with the Emergency Declaration, that was waived, and they are available to do

telehealth without having to apply for a license in the state in which the patients are providing care.

The last check, I think we got approximately 84, I believe, nurse practitioners who had signed up and had been given permits. As you know, we are limited to the nurse licensure compact, which 33 other states have entered into the compact. So that has been very instrumental during the Emergency Declaration, in that those nurses have the mobility to go across state lines and get in those 33 states and practice without a license. So that has been very instrumental in a lot of nurses coming across state lines.

You know, those nurses are already vetted. The nurses that have signed up for temporary permits have been vetted by the Board of Nursing, and so they are ready to go and practice around the community. As far as healthcare providers out in the state that are hiring these individuals, they are ecstatic. They speak volumes about the number of nurses, even retired nurses. There was somewhat of a concern, but the primary concern -- not concern. The responsibility lies with the agency that hires those nurses to come in to work to ensure they are competent to practice. And so the facilities already had

something in place, and they have been able to do that.

Our new grads, we had some new grads to come out, and they have been allowed to come back into the workforce and practice, because that's just a phase when they're preparing for their NCLEX. We were able to waive some of the requirements as a result of that. So we have gotten good responses from the facilities that are hiring these new grads as temporary nurses. In fact, they're doing a great job. They are committed. So, kudos to you, the Board of Directors, and your leadership in allowing us as staff to do what we need to do to ensure that we have a proper workforce in place and that we have an adequate workforce in place.

In addition to that workforce, we have worked with our ESPs and our State Department of Health and MEMA in making sure, also, that we have some staffing available for that entity. Shan, I have to give kudos to her and to Brett. We have all worked very hard on that in ensuring that we have those necessary people vetted. We submitted those names to MEMA, and I think they're still -- we vetted them out. So they're good to go from our standpoint. And we will continue to do so (inaudible) under the Emergency

1 Declaration that have expressed an interest in working
2 with MEMA and the State Department of Health in
3 ensuring that in instances where we have to tier down,
4 Tier 1, Tier 2, Tier 3, that we have adequate staff to
5 staff those entities that will require skilled nursing
6 care.

7 In addition to that, I just wanted to
8 bring to your attention that we, the NCLEX testing
9 sites, you know, NCLEX was halted as a result of the
10 social distancing and the Emergency Declaration. As
11 of this week, there are two sites opening up in
12 Mississippi. One is in Tupelo. I don't have the
13 other one in front of me right now, but they were open
14 this week to go back and start allowing NCLEX testing
15 for our new grads to sit for their boards. And next
16 week, May 1st, which is Friday, I was informed by
17 NCSBN that all of Pearson Vue's testing centers have
18 agreed to reopen starting May 1st. So you should be
19 able to see more sites open up for our new grads that
20 will be taking these.

21 Of course, they will have to implement
22 certain things as far as social distancing, making
23 sure of PPE. The test has been shortened to four
24 hours now, and they have seen good results. I think
25 last week they offered a little over 2,000 tests.

1 There have been good results on that, and it has not
2 affected the integrity of the exam by reducing it to
3 four hours.

4 The other thing I want the Board to be
5 aware of is fingerprinting. Fingerprinting at the
6 Board still remains an issue. We are working
7 collaboratively with the Department of Public Safety
8 and the FBI in ensuring that we can look at
9 alternatives to get fingerprints done. We have also
10 looked at some other entities that are out there doing
11 fingerprinting that I know Shan has been looking into,
12 as well as Dwayne Jamison.

13 So, right now, because of the social
14 distancing, we don't do fingerprints. The Board is
15 still open for business, but it's closed to the public
16 until we can incorporate everything that needs to be
17 incorporated to make sure that everyone is safe. But
18 we are working diligently with everyone regarding the
19 fingerprint issue. The individuals that need
20 fingerprinting can request a fingerprinting card. We
21 will give them a fingerprinting card. They can take
22 it to their local law enforcement and attempt to get
23 fingerprints done under that office if they so desire.

24 One of the problems that we're seeing
25 across the nation is that nobody is doing

1 fingerprints. However, there are some states now
2 where law enforcement is reopening to do fingerprints.
3 So we will keep you-all posted on that. As I said,
4 the Department of Public Safety has been very cordial
5 and has worked with us very diligently in our efforts
6 to come up with some alternative means. So, more to
7 come on that.

8 We are looking at, as the executive
9 leadership portion of the staff at the Board of
10 Nursing has been looking at a safe return to work
11 initiative, and Shan has worked diligently, along with
12 our HR person/director and Brett on making sure that
13 we have everything legally in place in that initiative
14 for our staff to start to phase back in and return to
15 work once the Emergency Declaration is lifted or in
16 accordance with whatever Governor Tate Reeves
17 recommends.

18 I have been in conversation with the
19 State Department of Health officers, Dr. Dobbs, and
20 they, too, have -- he informed me that they would also
21 be sending out something on how people should return
22 to work once they get to that point. It looks like
23 it's going to be a phase-in effort. So we're going to
24 have a limited staff to begin with to go back in, and
25 then, hopefully, within the next few months or

1 whenever that is, all staff will be able to safely
2 transition back into the workplace.

3 We continue to do our telework status
4 from home. Everyone has kind of adapted to it and has
5 done a great job. The staff has been wonderful, and
6 they have been able to achieve everything, if not
7 more, than what they could have achieved if they were
8 actually in the office. So, that's all I have at this
9 point. And I do want Shan to talk about ONW and some
10 of the things that they're doing, as well, while we're
11 under this Emergency Declaration with training and
12 things on the horizon. So, Madam President, that's
13 all I have.

14 DR. KING: Thank you, Ms. Johnson. Shan,
15 we will transition to you for the ONW, and then we
16 will entertain questions from the board members to
17 Ms. Johnson and Ms. Montgomery.

18 MS. MONTGOMERY: All right. I will start
19 with ONW. We started out trying to see what the needs
20 were. We worked with the Hospital Association, the
21 other nursing associations to kind of see what was
22 going on out in the public to see what was needed that
23 ONW could provide, and one of the things that came up
24 was training. There was a need for them to get some
25 training or be brought back up to date, because, from

1 my understanding, they had not had ventilator
2 training, most of the nurses. They were for
3 respiratory nurses. So we did that training with GTI,
and it's full to capacity now. I do think that there
is a waiting list and people wanting more of it. We
are trying to identify if ONW can do that.

At this point all of the funds were
already allocated for ONW, but Gregg is checking with
some of the current contractors to see if that's an
avenue for them, that they want to change their scope
of service and provide that versus some of the other
public services that were initially offered. So there
will be more to come on that.

We have also been able to work with ONW
to purchase some PPEs. We do plan on getting those
PPEs out, but as you-all probably know, they're stuck
in China. So we do plan to have a system to where we
locate some of the hospitals that may be in desperate
need, but we also purchased PPEs for the board staff,
as it's probably going to be a recommendation that
they have PPEs, masks especially, in the building. So
those were some of the things that we've been able to
do with ONW.

Other exciting things that we're really
excited about with ONW, and I was going to share the

1 screen, but I will give you guys the high overview of
2 the two grants that we're possibly pursuing. We have
3 been able to contract out with Dr. Joffrion. Is that
4 how you pronounce her name, Ms. Johnson? Joffrion?

MS. JOHNSON: Dr. Joffrion.

MS. MONTGOMERY: Dr. Joffrion. She has
agreed to train our ONW staff and work with them to
pursue two grants. One is for telehealth, and that is
up to a million dollars on that one. We're excited
about that. She is actually 95 percent for sure that
she's not charging us unless we get the grant. Then,
the second one is from (inaudible). It's a grant that
will help nurse practitioners that own their clinic
learn how to apply for grants. And we've got a
company that's going to offer the webinar for nurses
throughout the State of Mississippi for credit. So we
have those things in the works with ONW that we're
really excited about.

If I may, I will just move to the budget.
I didn't do a full budget report. Things are just
crazy right now. We are financially sound. I have
been working with LBO almost every day. Now, there
are going to be some major budget cuts. I'm not sure
exactly what the budget cuts are going to be, but
there are going to be some budget cuts when we get

1 back into session. I have been advised by LBO to
2 ensure that we try to make as much as we can to be
3 relevant to COVID-19 for this fiscal year that we're
4 in.

I gave you-all an expense sheet earlier.
Anything that we can allocate to COVID-19, we likely
are going to be reimbursed for those things. So that
is definitely something that's high priority on our
list. And, trust me, I'm trying to find everything
that I can to be reimbursed for that we're actually
spending and able to send out to the nursing
community. So that has been a priority for us.

There was one more issue on the budget I
was going to discuss, but I can't remember it. But
basically I wanted you-all to know there are going to
be some probably budget cuts, as we are a general fund
agency, but I do think we are sufficient enough in
cash that we'll be able to get at least another two
years. We don't have any salaries that are going to
be cut. We don't have any positions that are going to
be cut. So I think we're lucky in that as an agency.

DR. KING: Thanks, Phyllis and Shan, for
those updates. And kudos to you guys for getting your
telework program and it not interrupting your daily
operations. Strong work on that. So I appreciate

1 y'all getting on to that, and that's really good about
2 the grant. I'm glad that Dr. Joffrion came through.
3 So that will be more interesting to hear more news
4 about that. Anything from the board members or
5 questions for Ms. Johnson or Ms. Montgomery?

MS. JACKSON: Good afternoon. This is
Shirley Jackson.

DR. KING: Hey, Ms. Shirley. Thanks for
joining. Ashley, will you add for the record that
Ms. Shirley has joined the meeting, please?

COURT REPORTER: Yes, ma'am.

DR. KING: Thank you.

MS. JACKSON: Thank you. I really don't
have an actual question. I just want to thank
Ms. Johnson and Ms. Montgomery and the rest of the
staff for all the superb work that they have been
doing during this crisis. My heart goes out to your
diligent work. Thank you so much.

MS. JOHNSON: Thank you.

DR. KING: Ms. Shirley, you'll be able to
give hugs again one day.

MS. JACKSON: I know.

DR. KING: I do want to just give a
brief -- we're talking about COVID-19 specifically,
just kind of an update of some of the things that I've

1 gotten. Lauderdale County, Choctaw County, around
2 that area is the hardest hit right now, and I do know
3 that some of our colleagues over there are feeling a
4 little bit more stressed than some of us in the other
5 areas of the state. With that, a lot of the nurses
6 that are at Anderson and Rush Hospital are the ones
7 that signed up for the vent training and are excited
8 about that to be able to care for the patients that
9 they're seeing on the influx of that population. So I
10 really do appreciate that being set up, too.

11 Another, it is an unprecedented time, of
12 course, and uncharted territory that we're in. And so
13 for the first time where we thought we were going to
14 be overwhelmed as a health system, we're actually
15 seeing some of our nurses and APRNs and physicians and
16 other healthcare colleagues actually furloughed or
17 laid off. So I don't want to see that continue, but I
18 am glad that maybe the pandemic has not hit us as
19 dramatically and overwhelmed the health system because
20 of the things that were put in place and the things
21 that we have done to minimize the risks but optimize
22 the care that our patients get. Phyllis, with that, I
23 guess we need a motion to approve the budget.

24 MR. ADAMS: This is T.J. I make a motion
25 to approve the budget.

1 DR. KING: Thank you, T.J. Motion made
2 by T.J. Adams. Is there a second?

3 DR. OWENS: Second, Michelle Owens.

4 DR. KING: Thanks, Dr. Owens. Seconded
5 by Dr. Owens. Any discussion or questions?

6 (NO VERBAL RESPONSE)

7 DR. KING: All right. We will go all in
8 favor by roll call. Jan Collins?

9 MS. COLLINS: Yes.

10 DR. KING: Melissa King, yes.

11 Dr. Stewart?

12 DR. STEWART: Yes.

13 DR. KING: Brandi Taylor?

14 MS. TAYLOR: Yes.

15 DR. KING: Dr. Stanford?

16 DR. STANFORD: Yes.

17 DR. KING: Alton Shaw?

18 MR. SHAW: Yes.

19 DR. KING: Blake Ward?

20 MR. WARD: Yes.

21 DR. KING: Sandra Culpepper?

22 MS. CULPEPPER: Yes.

23 DR. KING: I missed somebody. Who did I
24 miss?

25 MS. JACKSON: Shirley Jackson, yes.

1 DR. KING: And Nancy Johnson?

2 MS. NORRIS-JOHNSON: Yes.

3 DR. KING: All right. Motion passes.

4 Thank you. That will move us to approval or
5 acceptance of the Board Business Meeting Minutes from
6 February 7th of 2020. Could I have a motion to accept
7 those minutes?

8 DR. STANFORD: I make a motion.

9 DR. KING: Motion made by Dr. Stanford.

10 Is there a second?

11 DR. OWENS: Second.

12 DR. KING: Who gave the second?

13 Dr. Owens, thank you for the second. Any discussion?
14 (NO VERBAL RESPONSE)

15 DR. KING: Okay. All in favor? Melissa
16 King, yes. Jan Collins?

17 MS. COLLINS: Yes.

18 DR. KING: Dr. Owens?

19 DR. OWENS: Yes.

20 DR. KING: Dr. Stanford?

21 DR. STANFORD: Yes.

22 DR. KING: Dr. Stewart?

23 DR. STEWART: Yes.

24 DR. KING: Nancy Johnson?

25 MS. NORRIS-JOHNSON: Yes.

1 DR. KING: Shirley Jackson?

2 MS. JACKSON: Yes.

3 DR. KING: Dr. Stanford?

4 DR. STANFORD: Yes.

5 DR. KING: Blake Ward?

6 MR. WARD: Yes.

7 DR. KING: Alton Shaw?

8 MR. SHAW: Yes.

9 DR. KING: Laura Moore?

10 MS. MOORE: Yes.

11 DR. KING: And Sandra Culpepper?

12 MS. CULPEPPER: Yes.

13 DR. KING: T.J. Adams?

14 MR. ADAMS: Yes.

15 DR. KING: Motion passes. And then we

16 have, we were sent the Hearing/Agreed Settlement
17 Proposal Minutes. So I need a motion to accept those,
18 please.

19 MS. TAYLOR: I make a motion.

20 DR. KING: Motion made by Ms. Brandi

21 Taylor. Is there a second?

22 DR. STANFORD: Second.

23 DR. KING: Seconded by Dr. Teresa

24 Stanford. So we will go for a vote by roll call.

25 Melissa King, yes. Jan Collins?

1 MS. COLLINS: Yes.
 2 DR. KING: Mary Stewart?
 3 DR. STEWART: Yes.
 4 DR. KING: Teresa Stanford?
 5 DR. STANFORD: Yes.
 6 DR. KING: Dr. Owens?
 7 DR. OWENS: Yes.
 8 DR. KING: Brandi Taylor?
 9 MS. TAYLOR: Yes.
 10 DR. KING: Blake Ward?
 11 MR. WARD: Yes.
 12 DR. KING: Nancy Johnson?
 13 MS. NORRIS-JOHNSON: Yes.
 14 DR. KING: Alton Shaw?
 15 MR. SHAW: Yes.
 16 DR. KING: T.J. Adams?
 17 MR. ADAMS: Yes.
 18 DR. KING: Shirley Jackson?
 19 MS. JACKSON: Yes.
 20 DR. KING: Sandra Culpepper?
 21 MS. CULPEPPER: Yes.
 22 DR. KING: Laura Moore?
 23 MS. MOORE: Yes.
 24 DR. KING: Motion passes. Thank you. So
 25 this bring us to future meetings of the Board. With

1 us being still in a phase-in approach and not knowing
 2 exactly what is going to happen, I had some
 3 conversations with Brett and Ms. Johnson about us not
 4 getting behind. So we still need to have our business
 5 meetings. We still need to look at how we can do the
 6 agreed settlement proposals and hearings, if there is
 7 a mechanism of doing it virtually or what we need to
 8 do. And so I kind of wanted us to talk about that
 9 moving forward.
 10 Brett, do you want to chime in on this,
 11 on what the thought process is for that? Did we lose
 12 Brett? Phyllis, do you want to talk about that?
 13 MS. JOHNSON: Okay. I'm not sure where
 14 Brett is, but anyway --
 15 DR. OWENS: I can see her, but she was
 16 showing up as muted earlier.
 17 DR. KING: I can see her, too.
 18 MS. JOHNSON: Shan, text Brett right
 19 quick.
 20 DR. OWENS: And her lips are moving.
 21 DR. KING: I wonder if her computer --
 22 MS. JOHNSON: She may need to dial in,
 23 but I'll go ahead and chime in while we're waiting on
 24 Brett to get on. As you are aware, we are still in a
 25 safer-at-home or shelter-at-home condition under the

1 Emergency Declaration. We have a board meeting
 2 scheduled for June, and I wanted to discuss basically
 3 how we're going to do that. You know, a lot of
 4 entities and organizations are going to virtual board
 5 meetings. So that, also, is one of the things that we
 6 had discussed was having a virtual board meeting,
 7 probably keeping our board meeting as scheduled on
 8 that Friday, because we still need to move forward
 9 with getting some things done.
 10 The agreed settlement proposals, I think,
 11 is the one that Brett wanted to talk more about, but
 12 we still need to move forward with that, as well. And
 13 one of the things that we had talked about was having
 14 that done in a virtual component but also allowing
 15 those board members that were on the panel, if needed,
 16 to come to the Board. Hopefully, by that time, we
 17 will be transitioning back in. We'll just have to
 18 keep the number of people in the office to a certain
 19 level but also make that virtual, if at all possible.
 20 And Brett, I know, has been working on some ways to
 21 get that done and how we could schedule those
 22 individuals that have agreed settlements to present,
 23 they could come in virtually. We could allow them to
 24 do that. We would set up a system that was secure
 25 enough.

1 When we talk about Zoom, and Zoom has
 2 been having some issues, but Shan was going to
 3 investigate some other methods that we could utilize
 4 to allow a virtual board meeting. As you are aware --
 5 and I'm sure Edward is on the line -- you know, the
 6 courts now have been doing stuff virtual, as well.
 7 So, I'm not sure if Edward wants to chime in while
 8 we're waiting for Brett. But that's what we had
 9 talked about we needed to decide. We can't keep
 10 putting things off, because we don't know how long
 11 we're going to be out, but, if we can, with technology
 12 so advanced, to go ahead and set up some type of
 13 virtual means to conduct board business.
 14 DR. KING: Edward, do you want to go
 15 ahead and give us your perspective on that, please?
 16 MR. WIGGINS: Well, sure. I actually had
 17 a meeting yesterday with some of the staff at the main
 18 office, and they indicated that they would rather,
 19 especially with any kind of disciplinary hearings,
 20 that they take place if at all possible under the
 21 COVID-19 guidelines at the, I guess at your usual
 22 meeting place. Now, of course, the question arose
 23 about, Well, could you possibly do it on Zoom? A
 24 couple of issues came up in terms of, well, security
 25 that I think Ms. Johnson mentioned. I think the issue

1 as far as uploading documents, that might be one that
2 could be worked through.

3 I know some lawyers prefer to examine
4 witnesses in person. I don't know how the Board would
5 want to deal with that, if you would want to have a
6 blanket rule to address that, or if you just want to
7 try to use the -- because I think your panel would be
8 just three board members; is that right? And then you
9 would be able to have your witnesses. Then, they
10 would come in as they are needed to give whatever
11 testimony that they may give.

12 So, we've actually gotten a good bit of
13 feedback from some of the other boards. So it is
14 possible that we may actually have to look at some
15 options, but Zoom, as has been mentioned, has been the
16 big one. But we're supposed to meet again next
17 Tuesday. And so it is possible I may have some new
18 information at that point that I wouldn't have a
19 problem sharing with Brett.

20 **MS. THOMPSON-MAY:** Can y'all hear me now?
21 Am I on?

22 **DR. KING:** Hey, Brett. Thank you for
23 joining.

24 **MS. THOMPSON-MAY:** I don't know what
25 happened. It's some kind of deal. It said the

1 participant or the host was muting, and then Shan
2 called me. So, I don't know what happened. But,
3 anyway, to chime in and add to what Phyllis and Edward
4 said, I thought I would give you some hard numbers,
5 because I don't know what your thoughts are, I guess
6 even from a comfort level with COVID-19, as well as I
7 don't know your availability given your front-line
8 jobs and, you know, what you're doing now. So I don't
9 know of that availability.

10 To give you some hard numbers, so, for
11 our agreed settlement proposals, we have 18 confirmed
12 at this point, but I will tell you, 60 notices have
13 been sent out. That does not mean we will have 60,
14 but at this point I can tell you we have 18. Now, you
15 know, depending on what you-all decide, we can
16 certainly go forward and, you know, provide apps for
17 them to send back to us, that signed document, and
18 then create the work flow of steps or some
19 possibilities of work flow steps that the Board could
20 follow using technology as the means to address the
21 proposals. So that's the settlement proposal numbers.

22 The hearing numbers right now that I
23 received, and I received those -- Edward, I know I
24 said I would forward those to you.. I received those
25 about 12:30 today. I apologize for not forwarding

1 those. I had some other calls and just didn't have a
2 chance to get back on my email. But I will tell you,
3 on Wednesday, for example, I have 14 total cases
4 confirmed. On Thursday, we have a total of 10 cases
5 confirmed. So that's 24 hearings. Of those 24
6 hearings, there's a total of seven publications. Of
7 that 24, there are roughly five, it looks like six
8 summary suspensions.

9 So we will have to prioritize those, you
10 know, if you decide to go forward, of how we're going
11 to do that, if we're able to do that, as Edward said,
12 that other agencies are doing. But I would support
13 going forward the best we can depending on what you
14 decide. My thought is, we could certainly go forward
15 on the publications. Those that are no shows and they
16 don't appear, don't contact us, we could go forward on
17 our default procedure and have those.

18 Then, the ones that, you know, are
19 summary suspended, we could certainly reach out to
20 them, find out if they're even pleading guilty,
21 because if they are going to plead guilty, it could be
22 they would want to surrender, which would turn into a
23 settlement proposal, or by pleading guilty, there is
24 nothing for the State to present. It would just be on
25 the licensee to provide the defense, and we could have

1 certainly documents uploaded, but that would be up to
2 you. We would have a plan of action at least to roll
3 out. But that should give you some data of where we
4 are.

5 So, 18 confirmed agreed settlement
6 proposals, 24 total hearings with, I think I said
7 seven of those being publications, and I just want to
8 give a shout-out to my team. Westley and Rochelle and
9 Aaryan Jackson, they have all worked very diligently
10 given telework, and I'm so very proud that we've been
11 able to continue to function as if we were in the
12 office. So, being able to provide you the numbers
13 today is part of their work. So, with that, if y'all
14 have questions for me or Phyllis or Edward, that's
15 what I have today to provide you.

16 **DR. KING:** So here is my -- do we know
17 who -- does anybody have the -- sorry. Who is on the
18 June panel? Does anybody, do we have that? So,
19 Dr. Stanford?

20 **DR. STANFORD:** And I may have to see if
21 somebody can come in, because, like I say, I've been
22 furloughed. So my patients have gone without anybody,
23 and I may have to be in the clinic. I'm not sure.

24 **DR. KING:** Do we know who else is on the
25 panel for that week?

1 MS. NORRIS-JOHNSON: I'm on, Melissa.
 2 DR. KING: Who is that?
 3 MS. NORRIS-JOHNSON: Hey, it's Nancy.
 4 DR. KING: So, Nancy, Dr. Stanford. Who
 else?
 6 MS. JACKSON: Shirley Jackson.
 7 DR. KING: Shirley. Shan, do you have a
 8 list pulled up, or can you get to the hearing panel
 9 assignment?
 10 MS. GRAY: It's Blake Ward. Teresa
 11 Stanford, Blake Ward, Shirley Jackson, and Nancy
 12 Johnson.
 13 DR. KING: Okay. Of those of you guys
 14 who are assigned to the panel, what are your thoughts
 15 for June? Teresa, you may have to get coverage, and
 16 if I have to cover you in June, then I'll cover you in
 17 June, and that's fine.
 18 DR. STANFORD: I appreciate it.
 19 DR. KING: So, Nancy, Shirley, Blake,
 20 Teresa or myself. I could be on site or virtual, no
 21 problem. What about the other three?
 22 DR. STANFORD: To me, it's easier to do
 23 things on site. That's just my opinion, but I just do
 24 better on site with paper and people right in front of
 25 me than I do virtually.

1 DR. KING: Sure. Blake?
 2 MR. WARD: I would agree with
 3 Dr. Stanford, as well. And would we be able to --
 4 this is probably a question for Phyllis. Would we be
 5 able to practice social distancing with the
 6 Respondents and ourselves on the panel on site?
 7 MS. JOHNSON: Yes. We have already
 8 looked into that. We would have social distancing
 9 requirements at six feet apart. We will also supply
 10 the PPE, like, masks and things of that nature for our
 11 board members and possibly for those individuals that
 12 are required to come in. So I know we've talked about
 13 that, and so that's part of our, you know,
 14 requisition, to make sure we have the appropriate PPE
 15 available.
 16 DR. KING: Ms. Nancy?
 17 MS. NORRIS-JOHNSON: I would rather be on
 18 site.
 19 DR. KING: Okay. Ms. Shirley?
 20 MS. JACKSON: I have no problem being on
 21 site.
 22 DR. KING: Okay. Me either. Okay. So,
 23 with that, I guess the -- with the assigned panel and
 24 possible alternate of myself being okay being on site,
 25 having the social distancing protocols in place and

1 availability of PPE and the number of cases that we
 2 have already scheduled, is there a motion to proceed
 3 with the June agreed settlement proposals,
 4 disciplinary hearings, and Board Business Meeting as
 5 scheduled?
 6 DR. STANFORD: I make that motion.
 7 DR. KING: Okay. Motion made by
 8 Dr. Stanford. Is there a second?
 9 MS. MOORE: I second.
 10 DR. KING: Who was that?
 11 MS. MOORE: Laura Moore.
 12 DR. KING: Laura Moore, thank you. Any
 13 discussion, further discussion about that?
 14 MR. WIGGINS: What date is that?
 15 MS. JOHNSON: Settlements are on June
 16 16th. Hearings are on the 17th and 18th, with the
 17 business meeting on the 19th.
 18 DR. KING: Yeah. I guess, Edward, you
 19 would have been a perfect -- I needed to ask you
 20 first, huh, if you were available that week?
 21 MR. WIGGINS: Well, yeah, I kind of need
 22 to know, because I'm still trying to -- I think I
 23 have, like, 11 boards total. So I'm still kind of
 24 trying to make sure I get everything on my calendar.
 25 DR. KING: Thank you for that. So, for

1 the board members, Ms. Gloria Green has retired. I
 2 did not know that until I sent her an email and it
 3 came back to me that she had retired. And so then I
 4 called her and was, like, Wait. Where did you go?
 5 And so Edward is the one that is going to be taking
 6 her place and has been assigned to us for our Board
 7 from the AG's Office. So I would like for us to
 8 welcome him, as well. Sorry I did not do that at the
 9 beginning.
 10 MR. WIGGINS: Not a problem. Thank you
 11 so much.
 12 DR. KING: So, thank you. Thank you for
 13 agreeing to take us. Ms. Gloria must not have warned
 14 you.
 15 MR. WIGGINS: Well, she did.
 16 DR. KING: Of course, she did.
 17 (LAUGHTER)
 18 DR. KING: All right. So we have a
 19 motion and a second. Can we go to a vote by roll
 20 call, please, to keep the agreed settlement proposals,
 21 disciplinary hearings, and Board Business Meeting as
 22 scheduled for the week of June 16, 17, 18, and 19?
 23 Melissa King, yes. Jan Collins?
 24 MS. COLLINS: Yes.
 25 DR. KING: Dr. Stewart?

1 DR. STEWART: Yes.
 2 DR. KING: Brandi Taylor?
 3 MS. TAYLOR: Yes.
 DR. KING: Dr. Stanford?
 DR. STANFORD: Yes.
 6 DR. KING: Blake Ward?
 7 MR. WARD: Yes.
 8 DR. KING: Nancy Johnson?
 9 MS. NORRIS-JOHNSON: Yes.
 10 DR. KING: Shirley Jackson?
 11 MS. JACKSON: Yes.
 12 DR. KING: Sandra Culpepper?
 13 MS. CULPEPPER: Yes.
 14 DR. KING: Alton Shaw?
 15 MR. SHAW: Yes.
 16 DR. KING: Dr. Owens?
 17 DR. OWENS: Yes.
 18 DR. KING: All righty. Did I miss
 19 anybody? T.J. Adams, sorry.
 20 MR. ADAMS: Yes.
 21 DR. KING: Thank you. Motion passes.
 22 So, then, that brings us to the next thing on the
 23 agenda, which is the election of officers. So, as it
 24 stood before, we had the Nominations Committee -- if
 25 you guys are taking yourself off mute, do you mind

1 putting yourself back on mute, because I'm getting a
 2 little bit of an echo and hearing some background
 3 noise. So, if you're not on mute, if you'll just mute
 4 your phone or your video, that would be great. But we
 5 had it scheduled where it would be April, and then for
 6 the Nominating Committee to be announced in June and
 7 (inaudible) in July to go into effect in October. So
 8 we're already a little bit behind the 8-ball on that.
 9 So, I didn't know. I wanted to get the
 10 group's opinion on, do we go back for this one year of
 11 going back to the way that we had it before? We can
 12 have the Nominating Committee, and we can do that in
 13 June to proceed with the elections in July to take
 14 effect in October. So I will open up the floor for
 15 any discussion on that before we make that decision.
 16 (NO VERBAL RESPONSE)
 17 DR. KING: Okay. I'm not hearing
 18 anything about it, so I don't know if that's a good
 19 thing or a bad thing. I did ask Brett if that was
 20 okay from our bylaws since we had just voted on that,
 21 to change that around, and she has -- Brett, correct
 22 me if I'm wrong, but you have agreed that we could go
 23 back to that process for this time given the current
 24 situation and the delay in our regular operations.
 25 DR. STANFORD: I have a question.

1 DR. KING: Sure.
 2 DR. STANFORD: Why would there be a
 3 problem with proceeding like we had planned? I mean,
 4 if the Nominating Committee was already in place or if
 5 we establish that today and have those names
 6 submitted, and then by our June meeting we had that
 7 slate of nominees ready, then why could that not be
 8 voted on then?
 9 DR. KING: I don't have a problem with
 10 that. Whatever you guys want. We were just trying to
 11 make the process easier, because we didn't know what
 12 the future meetings were going to hold and if they're
 13 going to come back and say we can't meet in June and
 14 we're going to have to do this virtually. So we just
 15 didn't know what the process was going to be. So
 16 that's why we were falling back to the previous
 17 process.
 18 DR. STANFORD: Okay. All right. And
 19 that was just a question. It matters not to me.
 20 DR. KING: Anybody else?
 21 (NO VERBAL RESPONSE)
 22 DR. KING: You're going to make me call
 23 you out on it. So, Brett, am I accurate that if we do
 24 change it to go to where it was before, we do need a
 25 motion and a vote on that? No? Shan, you're shaking

1 your head. You're muted.
 2 MS. MONTGOMERY: We can't hear Brett.
 3 UNIDENTIFIED SPEAKER: Brett is talking
 4 vehemently.
 5 DR. KING: Is she just still moving her
 6 lips and we just can't hear her?
 7 MS. THOMPSON-MAY: I'm not muted. See,
 8 I'm not. There's no mute. There's no mute. Can you
 9 hear me?
 10 DR. KING: I can hear you now.
 11 MS. THOMPSON-MAY: Yay! I'm trying to
 12 tell you I'm not muted, but I am muted. So, sorry.
 13 I'm not as fluent in sign language as the governor's
 14 guy, but, you know, I do know a little bit. But,
 15 anyway, no, I was just going to point out, certainly,
 16 you have the option, Teresa, to go forward as planned,
 17 or under the COVID-19 situation, if you wanted to do a
 18 motion and vote to have that committee placed for July
 19 and then installment in October, you certainly have
 20 the authority to do that. It's just up to you.
 21 DR. KING: Thanks, Brett. So, I guess at
 22 this point I'll just ask, is there a motion from
 23 anyone either way, either to keep the process as
 24 previously defined and go forward with the Nominating
 25 Committee today, or to delay, have the Nominating

1 Committee in June for officer elections to be held in
2 July to take office in October?

3 (INAUDIBLE)

4 DR. KING: Who --

5 MS. MONTGOMERY: Sandra, was she talking?
6 We can't hear.

7 DR. KING: So, if we don't have either
8 way, Brett, what does that mean? We just keep it
9 as -- what do we do?

10 MS. THOMPSON-MAY: Well, you voted what,
11 to slate, to have the Nominating Committee voted for,
12 what, today?

13 DR. KING: So then we need to add -- we
14 need to go back and amend the agenda?

15 MS. THOMPSON-MAY: Well, you have on here
16 the Mississippi Board of Nursing Officer Elections.
17 So it is already on the agenda. I think the initial
18 intent was thought that it perhaps needed to be moved,
19 but it is on here. It's an item for discussion.

20 DR. KING: Okay. So, does everybody want
21 it to stay the way that it is?

22 UNIDENTIFIED SPEAKER: When you say "the
23 way that it is," you mean the new way or old way?
24 It's a question.

25 DR. KING: Does anybody want to select

1 the Nominating Committee for officers today?

2 (NO VERBAL RESPONSE)

3 DR. KING: Okay. We'll table that and
4 come back to it. Brett, can you go through the latest
5 executive order? It's 1471. So, can you kind of talk
6 through that executive order, what it means, and where
7 we kind of see ourselves with some of the questions
8 that have been asked at the state level?

9 MS. THOMPSON-MAY: Sure. And I also
10 welcome Edward to chime in. I know you have also been
11 looking at this order, as well. But I do have the
12 copy here in front of me, the Executive Order 1471,
13 and basically there's just two outstanding areas that
14 it covers when you read this three-page document. It
15 talks about liability of healthcare providers, and it
16 talks about basically providing them immunity for
17 civil suit, not withstanding a showing of malice or
18 reckless disregard or willful misconduct. So it
19 provides a liability during this COVID-19 period for
20 healthcare providers and facilities.

21 The last page specifically references the
22 Board of Nursing, the Board of Medical Licensure, and
23 the Board of Health and basically allows or gives the
24 authority under COVID-19 and the Emergency Declaration
25 to make, amend, and rescind orders, rules, and

1 regulations that it deems necessary for the healthcare
2 professionals who provide healthcare services during
3 this time and in response of COVID-19. So that
4 paragraph basically gives the Board of Nursing
5 authority to make, rescind, or amend a rule,
6 regulation, or order. Note that it does not include
7 statute, right? So, our law, 73-15-1, et. seq, are
8 not included in this declaration. He did not
9 specifically waive, for example, practice requirements
10 for APRNs but gives the Board of Nursing the
11 authority, should it be deemed necessary, for us to
12 make, amend, or rescind any rule that we feel is
13 necessary.

14 It just, as it relates to this, you know,
15 we certainly want to be responsible. We want to be a
16 responsible board, and we want to make the right
17 decisions given this emergency COVID-19 period. If
18 we, as a board, if you decide that, you know, it is
19 justifiable that more healthcare workers are needed,
20 specifically, you know, really any group, but, you
21 know, if we're talking about APRNs, for example, that
22 seems to be the group that would probably be a group
23 that would provide more discussion, because you have
24 right now in place the collaborative relationship that
25 is stated in the law that specifically states

1 "collaborative agreement."

2 That condition is specified in a rule and
3 regulation. So, if the Board, if it's justifiable and
4 the responsible thing to do, then you do have that
5 authority to lift the agreement of requirement should
6 the Board want to entertain that. But at this time --
7 and I don't know if there's other data that suggests
8 otherwise, but I am not aware at this time of any data
9 that would support having to utilize this authority in
10 this declaration, because as Melissa said earlier, the
11 number of physicians either being furloughed or, you
12 know, laid off, I think that's a real concern. It
13 makes you wonder what's really going on given the
14 crisis. Anyway, that's my two cents of it. Edward,
15 you might have anything -- do you have anything to add
16 that I may have missed or contribute to that?

17 MR. WIGGINS: I agree with you on that.
18 I think the only issue that I had that came up was,
19 there was a nurse who was here from out of state who
20 basically wanted to take part, I guess by way of a
21 temporary practice permit, and I was able to get in
22 touch with Brett on, you know, that, and she was able
23 to go ahead and get situated. But that has been the
24 only issue that I have had. My biggest take-away from
25 this latest executive order was that, you know, the

1 healthcare professionals would be given immunity
2 unless there was an issue with those conditions that
3 Brett mentioned previously. So I think, you know, the
4 Board is basically in a position to adjust as they see
5 fit, but, you know, I guess to Brett's point, unless
6 there is really a real need to do that, you take into
7 account those that have been furloughed, it may be
8 best to just kind of sit tight.

9 **DR. KING:** Thanks, Brett and Edward, for
10 that. Brett, do you mind touching a little bit -- I
11 know that we were contacted by the state, MEMA. Do
12 specifically you or Ms. Johnson want to talk about the
13 contingency plan? That's why we wanted to be sure
14 that we had the right resources and be able to
15 identify kind of what their questions were and what we
16 were asked to do.

17 **MS. THOMPSON-MAY:** Yeah. Phyllis, you
18 may want to touch on that, because you may be more
19 involved in that process. I know I was brought in,
20 and what I know about it is, they were trying to
21 locate, you know, areas where the contingency to the
22 contingency plan facilities, meaning Camp Shelby and I
23 believe a location in North Mississippi, so that in
24 the event we had to, you know, resort to the
25 contingency to the contingency plan, we would be able

1 to have nurses in that locale sort of on go should
2 they be willing to practice and serve to meet that
3 need. Phyllis, if I miss anything or, Shan, y'all
4 feel free to amend that answer or change or edit it.

5 **MS. JOHNSON:** Pretty much that's correct,
6 Brett. As I said before, you know, the Board of
7 Nursing is a member of the ESF8 Emergency Preparedness
8 Initiative anyway. So anything dealing with emergency
9 preparedness in the State of Mississippi, the Board of
10 Nursing has a seat at that table. And so we were
11 involved with that when they started coming up with
12 the contingency plan to look at staffing, as Brett had
13 just previously stated, to ensure that those
14 facilities, if there was a need in our immediate
15 healthcare system, that the ICUs, the hospitals became
16 overwhelmed with patients, how to move patients that
17 are less ill out to some of the outlying facilities or
18 those that may not need continued ICU and have them
19 recover to more of a convalescent type setting until
20 they're ready to be discharged.

21 That is what we have been involved in, in
22 supplying names of staff that have signed up to
23 participate in part of that if it comes to that. And
24 I know Shan is probably -- I can't remember how many
25 are on the list that we have submitted thus far to

1 MEMA for that, but those are part of the nurses. And
2 their need is RNs and LPNs primarily. That has been
3 the need to help with the contingency plan, and we
4 feel confident that we have submitted that information
5 and have that amount of nurses that are required to
6 fill that backlog.

7 **DR. KING:** Great. Thanks, guys. Any
8 questions for Brett, Edward, or Ms. Johnson about the
9 latest executive order?

10 **MR. WARD:** Dr. King, could I make a
11 comment? This is Blake.

12 **DR. KING:** Sure. Of course.

13 **MR. WARD:** Thanks. I reviewed the
14 governor's proclamation, as well as noticing that, as
15 was mentioned, we could possibly relax rules and
16 regulations. I reviewed our Administrative Code and
17 made a couple of notes on there. Obviously, as was
18 mentioned, if we can make sure that our practice rules
19 and regulations aren't any hindrance to care, that's
20 first and foremost. Other than that, I did want to
21 ask Phyllis and Brett, specifically, just to point out
22 and ask if there were any problems in these areas:
23 licensure by examination, licensure by endorsement,
24 criminal background checks. Phyllis touched on that
25 earlier, and I'm sorry. Hang on one second. I'm

1 trying to delete a call. Decline, try that. Okay.
2 Am I still on?

3 **MS. THOMPSON-MAY:** Um-hum (affirmative).

4 **MR. WARD:** Okay. Thank you. And
5 Investigations, as well as the Case Review Committee,
6 since the board staff is working off site. So I guess
7 it's for licensure by examination, licensure by
8 endorsement, criminal background checks, and
9 Investigations, including the Case Review Committee,
10 how has that impacted those areas?

11 **MS. THOMPSON-MAY:** Well, Phyllis, do you
12 want me to start, or do you want to start?

13 **MS. JOHNSON:** You can start and talk
14 about the Case Review, and then I'll chime in at the
15 end.

16 **MS. THOMPSON-MAY:** Okay. With our case
17 review process, so far it has worked well. We are
18 doing that virtually. You know, one of the things
19 that I think has helped and having the comfort level
20 with that with COVID-19 and the measures relaxing some
21 HIPAA regulations and some confidentiality
22 regulations, we were able to share some information
23 electronically and conduct -- I know Westley has been
24 the attorney that has been in that seat with Case
25 Review, but I know that it has worked. I know that

1 since we have been teleworking, Westley, you might
2 have to help me with the number, but I believe there
3 has been at least four summary suspensions, and that
4 would include a licensure denial process.

MR. MUTZIGER: That sounds about correct.

6 We are still continuing to meet. It is definitely
7 different in terms of how we review the materials, but
8 we all have access to the same material that we would
9 as if we were in person, and we are continuing to
10 protect the public by having summary suspensions. We
11 are drafting them, having them executed and entered
12 into the appropriate databases so that all states
13 around the country have access to that information, as
14 well.

MS. THOMPSON-MAY: One of the things,
16 also, Blake, to keep in mind is, with the compact, you
17 know, we are able to share information with 34 other
18 states, and so that has also been good given COVID-19.
19 So, for example, if we have nurses crossing lines to
20 work, in those lines in whatever state, we can share
21 information, have conversations. I know I've had two
22 conferences at least with other state attorneys
23 inquiring about, you know, participants. So that has
24 been more expeditious, quite frankly, than probably if
25 I had been in the office.

1 The only other thing I would add to that
2 would be -- the only caveat would be perhaps
3 facilities have been slower to respond to some of our
4 subpoenas given their focus on trying to put in place
5 COVID-19 measures for their staff, the patients, etc.
6 So, I think, if anything, we may have just seen a
7 little bit slower response from facilities, but we are
8 getting responses. I don't know that it has been
9 business as usual. I can't say there hasn't been any
10 hurdles, because I probably would not be accurate, but
11 we've been able to work and take care of business.

Phyllis, in terms of the licensure by
13 examination endorsement, I think that has probably
14 been the bigger issue or because of the criminal
15 background check and fingerprinting component, and I
16 think Phyllis addressed that earlier. And I will just
17 add to that. And, Phyllis, you add more. But I think
18 that's when the temporary permit became very viable in
19 this instance, because where a licensee by
20 endorsement, for example, that was the only thing they
21 were waiting on prior to having a license, we were
22 able to issue that temporary permit. Then, in the
23 meantime, they were given a card.

The FBI rules and regulations, because
25 we've done a lot of research on this. I know Shan,

1 Phyllis, myself, Dwayne talking to various individuals
2 and doing a lot of research, but the bottom line of
3 that, something that you need to know is that, if that
4 card is being issued, it has got to be issued by us,
5 because it has a routing number that is assigned to
6 us. And the FBI said we need those fingerprints
7 within 180 days to remain in compliance with their
8 overarching rules as it relates to fingerprinting.

So we were able to accomplish, I guess,
10 killing two birds with one stone, if you will, by
11 giving them permits to work and in the meantime
12 staying in compliance with what the FBI is requiring
13 as it relates to the fingerprinting. It's not ideal.
14 I mean, let's face it. Technology is the best way to
15 deal with fingerprinting, because our turnaround time
16 is great, but due to social distancing rules, we have
17 just not been able to do that. And Phyllis made the
18 call to take care of her staff, which I think should
19 be applauded, because she didn't want to put her staff
20 in that front line doing this process. And if I
21 missed something, Phyllis or Shan, y'all fill in.

MS. JOHNSON: I think that was pretty
23 accurate. You know, I don't have much more to add to
24 that, other than I just want everybody to understand
25 the response to the fingerprinting in Investigation's

1 aspect. However, in answer to Blake's question, it
2 has not hampered our process. Really, they've gotten
3 to work a lot quicker by being given the temporary
4 permit and being eligible for the temporary permit,
5 with the understanding that they can work up to 120
6 days under that temporary permit, and hopefully some
7 of these places will open up so we can get them
8 licensed appropriately. But that permit allows them
9 to practice.

So it has not really hampered them a lot.
11 It has kind of been an obstacle, but I think we have
12 overcome that obstacle, and we continue to work
13 through things that, you know, might be more
14 advantageous going forward. The Investigations aspect
15 of it, investigations are still taking place. We're
16 still getting allegations in. They're still being
17 assigned to us as if we were right there at the Board.

So pretty much things have been running
19 smoothly with a few bumps here and there with
20 technology maybe, but everybody has been able to do
21 their job from a telework component better than we
22 thought we would have been able to do. Westley has
23 done a great job with Case Review. As far as the
24 other Case Review teams, Tina and Dwayne, they have
25 been diligent in getting summary suspensions to me to

1 sign off on. So we are achieving our mission. We are
2 protecting the public, and we're doing everything that
3 we can to make sure that those people that want to
work are allowed to work under that temporary
component.

6 As Brett said, within 180 days, you won't
7 be complying with the feds. You know, they will have
8 to get those fingerprints done once the Emergency
9 Declaration is lifted. So that gives us a little
10 leeway, and, hopefully, within the next couple of
11 months, things will be opening up and fingerprints can
12 be obtained. That's the only really component is the
13 fingerprinting aspect of it that would have probably
14 delayed them, but the temporary permits have
15 alleviated that.

16 **MR. WARD:** Thank you--all very much. I
17 think that is an amazing thing that you guys have been
18 able to pull this off given the circumstances, and I
19 applaud everyone's efforts. If any aspect of this is
20 hindered by our rules and regulations, Phyllis, please
21 feel free to reach out to the Board of Directors.

22 **MS. JOHNSON:** Thank you. Will do. I
23 will say, I think there has been one CRNA that has
24 requested and was issued a temporary permit.

25 **DR. KING:** Very good. Thanks, guys. So

1 that will bring us to the next -- does anybody have
2 any other questions about the Executive Order 1471?

3 (NO VERBAL RESPONSE)

4 **DR. KING:** That will bring us to the next
5 item on the agenda, and just a brief intro into the
6 topic and why it was put on the agenda, I was
7 contacted by one of our legislators asking questions
8 about nurse practitioners being able to sign off on
9 health orders and was that waived. Then, so she
10 reached out to the Department of Health. The
11 Department of Health said the Board of Nursing is
12 keeping that from happening. The Board of Nursing
13 says, No, it's in the scope of practice, and so it's
14 really not that. And so the CARES Act federally
15 specifically says that APRNs can, in fact, sign home
16 health orders and initiate those.

17 With that, I will tell you, one of the
18 federal FEMA task force members that I talked to, one
19 of the committee members, that is part of the CARES
20 Act that is not anticipated to go away. It is
21 anticipated to remain in one of the regulations from
22 FEMA's perspective that will be -- stay the same and
23 that APRNs can do that. So that's kind of a brief
24 overview as to why it was even put on the agenda, just
25 for a full transparency of conversations that are

1 happening and going on. Brett and Phyllis, do you
2 guys want to add to that topic?

3 **MS. JOHNSON:** Brett, if you can chime in,
4 go ahead on that component.

5 **MS. THOMPSON-MAY:** Okay. Sure. I mean,
6 3807 is the provision of the CARES Act. It talks
7 about amending permanently the provision that will
8 allow nurse practitioners and physician assistants to
9 basically order home healthcare and sign off on home
10 health plans. I think the overarching issue, in my
11 humble opinion, has been a communication issue,
12 because when you have a licensing board regulating
13 scope of practice, you have the Board of Health that
14 regulates facilities, and then you have CMS,
15 certainly, that helps these practitioners get paid.
16 And so I think a perfect storm sort of came together,
17 and I'm not exactly sure what the message was, but I
18 can assure you that the message from the Board of
19 Nursing was consistently that it is within their scope
20 of practice. We have never had a regulation
21 prohibiting it.

22 So I have been in contact with different
23 emails to some Board of Health individuals who have
24 been very great to work with, Ms. Fair being one and
25 Ms. Melissa -- I can't remember her last name right

1 now from the Board of Health. What I was hearing was
2 that the facilities weren't hiring these practitioners
3 because of a Board of Health regulation. I think
4 it's, like, 46.3.20 of the Minimum Standards of
5 Operation from Home Health Agencies, that they were
6 looking at that regulation. At this time it has not
7 been amended or rescinded by the Board of Health. So,
8 therefore, we're not going to hire you because you
9 can't order it.

10 The Board of Health chimed in and said,
11 "Hang on a minute. We've got a blanket waiver here.
12 We have allowed it." So, my last communication with
13 Ms. Melissa with the Board of Health was that they
14 have communicated the message out that the Board of
15 Nursing -- the Board of Health is allowing nurse
16 practitioners and PAs to do this, and if there's any
17 issue, then perhaps it's a CMS issue, which they have
18 six months to implement. But, Melissa, you were just
19 saying that you heard that CMS is also allowing it, as
20 well. So, it may just be a communication issue. And
21 that's all I have, unless anyone has any questions or,
22 Phyllis, if you need to add to that.

23 **MS. JOHNSON:** No. Pretty much that's it.
24 If it's within their scope of practice, that's what
25 they asked us, and we informed them that, yes, it is.

1 MS. THOMPSON-MAY: That's it.

2 DR. KING: Great. Thanks, guys. I
3 appreciate that. Any other questions from the board
4 members on that or comments, discussions around that
5 topic?

6 DR. STANFORD: I do have one question,
7 and I don't guess it falls in that, but they have also
8 not allowed ordering of diabetic shoes with any of
9 that. That doesn't fall into any of those guidelines
10 either, does it?

11 MS. THOMPSON-MAY: No, unless it's part
12 of the plan. I think that's a separate regulation,
13 because I remember talking about the durable medical
14 equipment falling under a different federal
15 regulation. So, I don't know if that would fall into
16 a home health plan. That I'm not sure about.

17 DR. STANFORD: Okay. We'll take little
18 steps.

19 DR. KING: All right. Thanks, guys, for
20 that. Okay. The next item on the agenda is the Board
21 of Nursing contract with the Mississippi Department of
22 Education. Who is taking that topic?

23 MS. THOMPSON-MAY: I guess I will.
24 Gloria, I've got to give my kudos to Gloria that
25 helped draft this. She's not here. She and I worked

1 together on this document, but basically this is just
2 to tie up loose ends document. This should not be
3 anything new to you-all. This is just wrapping up our
4 legislative authority for the PN program. And so this
5 is just the contract that's needed to complete the
6 technicality, if you will, of that process.

7 We have been working with the Community
8 College Board, because they have been the ones
9 implementing it, but as the statute for the State, the
10 Department of Ed has retained original jurisdiction
11 over it. So this contract just gives the proper legal
12 clean-up, if you will, to make sure all of it's
13 kosher. So that's what this is that you received.
14 Questions about that?

15 (NO VERBAL RESPONSE)

16 DR. KING: All right. So, at this point,
17 then, we would need a motion to accept and approve
18 this MOA between the Board of Nursing and the
19 Department of Education. Is there a motion on the
20 floor for that?

21 MS. CULPEPPER: This is Sandra Culpepper.
22 I will make the motion.

23 DR. OWENS: Motion, Michelle Owens.

24 DR. KING: So we have Sandra Culpepper
25 that made the motion to approve and accept the MOA

1 between the Board of Nursing and the Mississippi
2 Department of Education and seconded by Dr. Michelle
3 Owens. Did I hear that correctly?

4 DR. OWENS: That will work.

5 DR. KING: Okay. All right. Perfect.
6 Any discussion?

7 (NO VERBAL RESPONSE)

8 DR. KING: All right. We will do a
9 roll-call vote. Melissa King, yes. Brandi Taylor?

10 MS. TAYLOR: Yes.

11 DR. KING: Nancy Johnson?

12 MS. NORRIS-JOHNSON: Yes.

13 DR. KING: Shirley Jackson?

14 MS. JACKSON: Yes.

15 DR. KING: Dr. Stanford?

16 DR. STANFORD: Yes.

17 DR. KING: Dr. Stewart?

18 DR. STEWART: Yes.

19 DR. KING: Blake?

20 MR. WARD: Yes.

21 DR. KING: Alton?

22 MR. SHAW: Yes.

23 DR. KING: T.J.?

24 MR. ADAMS: Yes.

25 DR. KING: Laura?

1 MS. MOORE: Yes.

2 DR. KING: Jan? Do we still have Jan on
3 the phone?

4 MS. COLLINS: Yes.

5 DR. KING: Thanks, Jan. Sandra?

6 MS. CULPEPPER: Yes.

7 DR. KING: T.J.?

8 MR. ADAMS: Yes.

9 DR. KING: All right. Thanks, guys.
10 Motion passes. And then the next item on the agenda
11 is Mississippi Administrative Code Part 2815. Brett?

12 MS. THOMPSON-MAY: Yes. I would like our
13 Administrative Code procedure expert, Mr. Westley
14 Mutziger, to address that.

15 MR. MUTZIGER: I would be happy to. So,
16 good afternoon again, everyone. So, Part 2815 is --

17 DR. KING: Hey, Westley, I'm sorry. Can
18 you turn your volume up just a little bit?

19 MR. MUTZIGER: Yeah. Let me figure out
20 how to do that.

21 DR. KING: Sorry about that.

22 MR. MUTZIGER: There it is.

23 DR. KING: Yeah, that's better. Good.

24 MR. MUTZIGER: All right. So, Part 2815
25 is the code section regarding continuing education for

1 all nurses in the state. In February, the Board voted
2 to repeal Part 2815. Part 2815 is, therefore, in the
3 process of being repealed. A repeal of a rule must go
4 through the APA, the Administrative Procedures Act for
5 the State of Mississippi, the Secretary of State, and
6 the OLRC. All of those are entities that a proposed
7 rule or an amended rule would have to go through a
8 repeal process. So we are currently in that process.

9 Now, the next thing to consider would be
10 the fact that by a repeal of Part 2815, that
11 essentially also repeals the rule that stands
12 regarding APRNs completing continuing education. As
13 you-all are aware, our statute requires that the Board
14 of Nursing prescribe rules for continuing education
15 for APRNs. So, that leaves us with a bit of a hole to
16 fill. And we can certainly fill that hole by
17 proceeding to amend Part 2840, which is our code
18 section regarding APRNs.

19 We can amend that section using language
20 that we've already developed for continuing education
21 for APRNs or, if need be, new language to be
22 developed. If the latter circumstance would be the
23 preferred method, I would say that it would be
24 appropriate to send that to the Administrative Code Ad
25 Hoc Committee to develop that language.

1 **MS. THOMPSON-MAY:** And as I understand
2 it, Westley, you're just giving information and
3 updates, right? So, the process, it's on its way,
4 2815 to go through the process of repeal, and just for
5 discussion purposes, you're letting the Board know,
6 come July, you will basically have a proposal of
7 language for 2840. And then the Board, then, in July,
8 could vote to either keep that language as it was in
9 2815, or if it's the pleasure of the Board, then, to
10 move that segment referred to, to the Administrative
11 Code Committee. Is that what I'm hearing you say?

12 **MR. MUTZIGER:** Yeah, that's correct,
13 Brett. So, ultimately, we will have language for the
14 Board to consider to amend Part 2840 in July, and
15 you'll have time to adequately review that at that
16 time. However, I did just want to bring it to the
17 Board's attention should perhaps there be a differing
18 opinion in how to approach it. That way, that would
19 allow us time prior to the July business meeting.

20 **DR. STANFORD:** I have a question. I
21 know, because we had added those 10 hours of
22 controlled substance, that is going to be difficult at
23 best if we keep tinkering with what we're requiring.
24 I mean, can we not, if we remove the continuing
25 education component for everyone, can we not just add

1 in our rules and regs or our Administrative Code that
2 your continuing education must be completed according
3 to your national guidelines, because you have to stay
4 within those guidelines anyway to be certified.

5 We're getting to a point, I mean, we're,
6 what, seven months away or six months away from
7 everybody starting to renew their licenses, and it's
8 going to get difficult, because there's nobody
9 offering any continuing education right now, with the
10 exception of a few online ones. That's my opinion.

11 **MR. MUTZIGER:** That's an interesting
12 thought, Dr. Stanford, and I would say that that is
13 certainly a consideration that could be taken up by
14 perhaps a committee, but it is within the discretion
15 of the Board to essentially determine what is
16 appropriate for APRNs. All our law states is that we
17 shall prescribe up to 40 hours biannually, or I'm
18 probably saying that incorrectly, but basically every
19 other year. So there's a maximum prescribed. There
20 is no minimum prescribed. So I could foresee
21 something like that you mentioned passing muster as us
22 fulfilling our rules regarding continuing education of
23 APRNs.

24 **MS. MOORE:** I think I will just maybe
25 clarify, as far as if we were just to defer to the

1 certifying body, like with AANP, as far as I know,
2 that's just a certain amount of hours in a 5-year
3 period. So I don't think that there is necessarily an
4 amount of hours that has to be done annually or
5 biannually. It's kind of, this is the amount. So I
6 worry that if our laws are that it has to be a maximum
7 of this, you know, if that would create confusion or
8 if that wouldn't, you know, allow, if that wouldn't, I
9 guess.

10 **DR. STANFORD:** Well, my thought on that
11 is, if you're meeting a national standard, then that
12 should be good enough for our state board, just my
13 thought.

14 **MS. MOORE:** I agree as far as the Board
15 goes. I was just thinking as far as the law states,
16 if it's so specific to be biannually.

17 **DR. KING:** So, does it say that, Westley,
18 or is there language that could be used that if we
19 went from a national perspective and our national
20 certifying body, that it would cover the biannual
21 mandate?

22 **MR. MUTZIGER:** I think that we could
23 carefully construe something to make that work. I
24 think that's an important consideration that Laura
25 brought up is that we do have to conform with the

1 statute, which requires that we have something at
 2 least every other year. That being said, I think if
 3 we carefully craft something, we can make it work. So
 4 what I'm kind of already gathering here is, we have
 5 some interesting thoughts about perhaps what it should
 6 be as opposed to what the Part 2815 had in place for
 7 APRNs. That being said, it might be best to throw
 8 this to perhaps the Administrative Code Committee. I
 9 can certainly propose options at that future meeting.

10 **MS. THOMPSON-MAY:** I was going to say
 11 that, Westley. I think what would be helpful is if
 12 you supply the Board for our July meeting, so they can
 13 see the law, because that's what we are bound to,
 14 right, that provision that states the 40 hours
 15 biannually. So we're bound to that. So, if you
 16 submit the law, what has already been approved in
 17 2815, and then the parameters that would fit within
 18 that law of suggestions that they could entertain,
 19 that might at least be for discussion, but they're not
 20 going to vote on anything today.

21 **MR. WIGGINS:** Westley, will there be some
 22 time for public comment on whatever that proposal is?

23 **MS. THOMPSON-MAY:** Absolutely, Edward.
 24 This is just discussion of what the language would be,
 25 but it certainly would have to go through the regular

1 channels to be approved.

2 **MR. WIGGINS:** Okay. Gotcha.

3 **MS. JOHNSON:** I will chime in on that.
 4 That is already in our law. The APRNs already know
 5 they have to do up to 40 hours. You know, we had put
 6 the 10 have to be controlled from the old (inaudible),
 7 per se, but we have pretty much said that even though
 8 the continuing education rule has been moved or
 9 repealed, that by law they are still, for renewal
 10 purposes, they have to show proof of at least 40,
 11 because that's what the law states. So they have been
 12 informed of that already.

13 **DR. KING:** Thanks, guys. So, I guess
 14 just to circle back to the original, Westley has given
 15 us an update, and the plan is for you to, at the June
 16 meeting, give us the -- for the June meeting, so we
 17 can review, have the law in hand and any kind of
 18 proposed language that would be acceptable?

19 **MR. MUTZIGER:** Absolutely. So what I
 20 will do, Melissa, is, I will provide some options for
 21 Part 2815 and also what we discussed today that is
 22 somewhat of a minimum standard to comply with what the
 23 law requires.

24 **DR. KING:** Thanks, Westley.

25 **MR. WARD:** Dr. King, this is Blake.

1 Thank you. I agree with all that has been said so
 2 far, and I've been thinking about it quite a bit, and
 3 I would propose that much like the CRNA national
 4 accreditation mandates 100 hours every four years,
 5 they actually have also a 2-year check-in is what they
 6 call it when you submit to that organization every two
 7 years or in between licensure cycles, for that body to
 8 access your progress, so to speak, and make sure that
 9 you're on the right track.

10 So, since our law states that it's not to
 11 exceed 40, as Westley mentioned earlier, it does not
 12 prescribe an actual number. So I think that, Westley,
 13 you know, as you're thinking about crafting language,
 14 there may be the ability to put in some sort of
 15 language like that, that our biannually board review
 16 of those continuing education hours be a check-in, so
 17 to speak, of each of the APRNs' representative
 18 national certification guidelines.

19 **MR. MUTZIGER:** I will certainly take that
 20 into consideration in working on that language, Blake.
 21 Thank you.

22 **DR. KING:** Thanks, Blake. Anything else
 23 from any of the board members regarding continuing
 24 education, 2815 or 2840?

25 **MR. WARD:** Sorry, Dr. King. I actually

1 had one more quick thought.

2 **DR. KING:** Okay. Sorry about that.

3 **MR. WARD:** I totally forgot. The only
 4 other thing that I can foresee is complying with the
 5 Governor's Opioid Task Force recommendations of five
 6 hours of controlled substance education for the
 7 licensees of the Boards of Medicine, Dentistry, and
 8 Nursing. I believe -- and, Westley, you can correct
 9 me if I'm wrong -- I believe this did away with that,
 10 as well, and I don't know if we want to readdress that
 11 while we're crafting our new language.

12 **MR. MUTZIGER:** I think that's an
 13 excellent thought, Blake. We certainly do not want to
 14 go against the grain in terms of any recommendations
 15 by that task force. Those recommendations have been
 16 instrumental in how we craft our regulations. So,
 17 again, another great consideration. So, I think that
 18 what I will do is, when I provide options, I will make
 19 appropriate reference to the recommendations that is
 20 within the task force that relates to nurse
 21 practitioners, and I will clearly call those out so
 22 that the Board can be aware of what those
 23 recommendations are and how they will be addressed by
 24 the proposed regulation.

25 **MR. WARD:** Thank you.

1 DR. KING: Thanks, guys. All right.
2 That will move us to the Fresh Start Act. Brett, is
3 that you?

4 MS. THOMPSON-MAY: Yes. Again, this is
5 just for your information. I just wanted y'all to
6 receive this two pages. Myself, Gloria, and two other
7 AG representatives met as a task force to formulate
8 sort of across the board some regulations, and Westley
9 did a beautiful job, also, being part of that and
10 formatting it and naming it. And so I just wanted to
11 submit this for your review. This is something that
12 would need to be voted on in June so that we can begin
13 the process of adopting it as a rule. So this would
14 be for information.

15 Remember, just a short recap, this is the
16 Fresh Start Act of 2019, and it's all about
17 pre-licensure determination. So it (inaudible) our
18 process. And I will have to say that we were in
19 contact with the Board of Arizona, their Board of
20 Nursing, because they had previous legislation a year
21 prior to us. So they were able to share a lot of
22 things that they had previously done and were most
23 helpful in looking at the way we would formulate our
24 process.

25 DR. KING: Great. Thanks, Brett. Any

1 questions for Brett on that, on the Fresh Start Act?
2 (NO VERBAL RESPONSE)

3 DR. KING: All right. So we'll move back
4 up to the officer elections and Nominating Committee.
5 Has anybody given any thought to what the next steps
6 are for that?

7 DR. STANFORD: I would like to make a
8 motion on that. After I thought about it, I would
9 like to move that we proceed with those elections in
10 June as they were mandated -- or not mandated, but
11 approved in our last meeting, and that we assemble a
12 nominating committee today to take those nominations
13 and bring forward to that meeting.

14 DR. KING: Okay. There is a motion on
15 the floor from Dr. Stanford to keep the most recent
16 decided process for officer elections for the
17 Nominating Committee to be formed today and the
18 elections to be held in June for officers to take
19 office in July. Is there a second on that?

20 DR. OWENS: Second, Michelle Owens.

21 DR. KING: Seconded by Dr. Owens. Is
22 there any discussion?

23 (NO VERBAL RESPONSE)

24 DR. KING: All right. We'll go for a
25 vote by roll call. Melissa King, yes. Dr. Stanford?

1 DR. STANFORD: Yes.

2 DR. KING: Dr. Owens?

3 DR. OWENS: Yes.

4 DR. KING: Brandi Taylor?

5 MS. TAYLOR: Yes.

6 DR. KING: Nancy Johnson?

7 MS. NORRIS-JOHNSON: Yes.

8 DR. KING: Shirley Jackson?

9 MS. JACKSON: Yes.

10 DR. KING: Sandra Culpepper?

11 MS. CULPEPPER: Yes.

12 DR. KING: Dr. Stewart?

13 DR. STEWART: Yes.

14 DR. KING: Blake?

15 MR. WARD: Yes.

16 DR. KING: Alton?

17 MR. SHAW: Yes.

18 DR. KING: T.J.?

19 MR. ADAMS: Yes.

20 DR. KING: And Laura?

21 MS. MOORE: Yes.

22 DR. KING: All right. So, motion passes
23 unanimously. So, with that, previously we have done a
24 nominating committee by writing it down and who got
25 the top votes. So, I think if we can kind of change

1 that, since we're having to maneuver this, do I have
2 three volunteers of board members that would be
3 willing to participate on the Nominating Committee?

4 MR. ADAMS: Melissa, this is T.J. I
5 would like to.

6 DR. KING: Thanks, T.J. All right. T.J.
7 has volunteered to be on the Nominating Committee. Is
8 there anyone else?

9 MS. TAYLOR: I will.

10 MS. JACKSON: Shirley Jackson.

11 DR. KING: Shirley Jackson and Brandi
12 Taylor. All right. So, we will -- the three board
13 members that will be on the Nominating Committee
14 consist of Mr. T.J. Adams, Ms. Shirley Jackson, and
15 Ms. Brandi Taylor. If you guys can proceed with --
16 so, does anybody have a desire, or can we -- who would
17 want to be the chair of that Nominating Committee so
18 that we can get the nominations of those officers to
19 that specific person for them to discuss?

20 MS. JACKSON: T.J. Adams.

21 DR. KING: Okay. T.J., do you accept the
22 position of chair of that committee?

23 MR. ADAMS: Yes, ma'am.

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

25 So, if you guys could think through, again, it's going

1 to be president, vice president, treasurer, secretary
2 for the board officers. If you would, send your
3 nominations to T.J. Ms. Vanessa, can you refresh our
memory of when you need to have those by? When do you
need to have those nominations for the ballot?

6 MS. GRAY: Really, as soon as he gets
7 them will be fine.

8 DR. KING: Okay. But what's your
9 deadline?

10 MS. GRAY: The deadline is two weeks
11 prior to the board hearing.

12 DR. KING: Okay. So that's two weeks
13 prior to June 19th, right?

14 MS. GRAY: Yes.

15 DR. KING: Okay. All right. So that
16 takes care of that agenda item. That brings us to
17 anything else that is left on the agenda. Have we
18 left off anything? Does anybody else need to bring
19 anything before the Board?

20 MS. COLLINS: Melissa, I have a question.
21 This is Jan.

22 DR. KING: Hey, Jan. Go ahead.

23 MS. COLLINS: Hey. I didn't get to vote
24 on the last thing. You didn't call my name out, but
25 that's okay.

1 DR. KING: I'm so sorry.

2 MS. COLLINS: That's okay. I have a
3 question about our committee.

4 DR. KING: Hold on. Did you vote yes?

5 MS. COLLINS: I did.

6 DR. KING: Okay. Thanks, Jan.

7 MS. COLLINS: What about our committee?
8 Will we be meeting any time prior to the next board
9 meeting, before our next business meeting, or on the
10 day of the business meeting?

11 DR. KING: I think we'll kind of keep
12 that time frame the same, depending on what that
13 phase-in approach is of how the state opens, and we'll
14 keep a close eye on that and give everybody plenty of
15 advance notice. But I think that we keep the business
16 meeting day kind of the same, and if we have to do it
17 virtually, then we'll set up different Zoom rooms for
18 those meetings virtually. Did I just make Shan
19 shudder?

20 MS. MONTGOMERY: No, we're good. We
21 actually talked about doing it that way for this
22 meeting, having a separate meeting room.

23 DR. KING: All right. So, then, we
24 will -- so, Jan, does that answer your question? Is
25 everybody okay with that?

1 (NO VERBAL RESPONSE)

2 DR. KING: So, right now we'll go with
3 regular operations, and then if there's still an issue
4 and we still need to do certain things with social
5 distancing or a group of people in a certain area,
6 then we can set up different Zoom rooms for the
7 different committees to meet on that same day. So,
8 with that, I want to say, number 1, Edward, thank you
9 for joining, and thank you for engaging in this
10 meeting on such short notice for us doing a special
11 call meeting. Thanks to all the board members for
12 your engagement and the good conversation and
13 everything that was from the staff. Westley, Shan,
14 Phyllis, Brett, I can't say enough gratitude to you
15 guys for working through this pandemic and making sure
16 that everything is smooth sailing and things are going
17 just like you were in person. So, thank you for all
18 the work that you've done.

19 MR. WIGGINS: Well, thank y'all, and this
20 is the only Zoom meeting I've had with no issues. So,
21 I guess that's a good sign.

22 DR. KING: That means you have a good
23 board member group.

24 (LAUGHTER)

25 MR. WIGGINS: I guess so.

1 DR. KING: All right. So, with that, do
2 I have a motion to adjourn?

3 MS. COLLINS: I make a motion to adjourn.
4 This is Jan.

5 DR. KING: Motion made by Ms. Jan
6 Collins. Is there a second?

7 MS. JACKSON: Shirley Jackson, second.

8 DR. KING: Seconded by Ms. Jackson. All
9 in favor?

10 (ALL IN FAVOR)

11 DR. KING: I assume no opposition?

12 (NO VERBAL RESPONSE)

13 DR. KING: All right, guys. Y'all have a
14 great day. Thanks again for your time and work.

15 MS. MOORE: Melissa?

16 DR. KING: Yeah.

17 MS. MOORE: There were two things that I
18 didn't get to vote on, I think. I voted yes, but I
19 don't know if I needed to go on, like, record or what.

20 DR. KING: Ashley, are you still on?

21 COURT REPORTER: I am.

22 DR. KING: Do you remember which ones
23 those were, Laura?

24 MS. MOORE: One was the budget, and I
25 can't remember what the other one was.

1 DR. KING: Was it the hearing proposal of
2 the June meeting?

3 MS. MOORE: I think so.

4 DR. KING: Because I think I forgot your
5 name --

6 MS. MOORE: I know that I voted yes on
7 everything that we voted on today.

8 DR. KING: Okay. Perfect. Sorry about
9 that. It's not because you're not important.

10 MS. MOORE: I just wanted to make sure.

11 (MEETING ADJOURNED AT APPROXIMATELY 3:39 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 _____, 2020.

ASHLEY C. HAGG, CSR
CSR NO. 1178

My Commission Expires:
July 1, 2022