

BUSINESS MEETING

THE MISSISSIPPI BOARD OF NURSING
BUSINESS MEETING

DECEMBER 9, 2022

PROCEEDINGS

taken on Friday, December 9, 2022,
commencing at approximately 11:11 A.M.
at the Mississippi Board of Nursing
713 South Pear Orchard Road
Plaza II, Suite 300
Ridgeland, Mississippi

REPORTED BY: CYNTHIA HARRIS, RPR, CCR, #1828
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APPEARANCES

BOARD MEMBERS IN ATTENDANCE IN PERSON:

- T.J. ADAMS, RN, BSN, MSHA (PRESIDENT)
- SANDRA CULPEPPER, LPN (VICE PRESIDENT)
- JEREMY L. CUMMINS, LPN, LNHA (TREASURER)
- JANIE CLANTON, RN (SECRETARY)
- MARY STEWART, PhD, RN
- NANCY NORRIS-JOHNSON, LPN, II, CPT
- ALTON SHAW, MSN, FNP-C
- LAURA MOORE, MSN, NP-C

BOARD MEMBERS IN ATTENDANCE VIA ZOOM:

- MELISSA KING, DNP, FNP-C
- LACEY T. GENTRY, MSN, RN

ALSO PRESENT:

- EDWARD WIGGINS, JR., ESQUIRE
- SPECIAL ASSISTANT ATTORNEY GENERAL

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PROCEEDING

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MR. ADAMS: All right. Good morning, everyone. Welcome to the Board of Nursing. I would like to call the meeting to order. It is 11:11. I would like to begin with Mr. Jeremy opening us up in a word of prayer.

MR. CUMMINS: Let's pray.

(Prayer.)

MR. ADAMS: I would also like to note we have a declaration of a quorum, and that we have two members joining us via Zoom: Dr. Melissa King and Lacey Gentry.

You have the agenda in front of you. Can I get a motion to approve the agenda?

MR. CUMMINS: Make a motion to approve the agenda.

MR. ADAMS: Got a motion by Jeremy.

MS. NORRIS-JOHNSON: I'll second.

MR. ADAMS: Second by Ms. Nancy.

All in favor?

BOARD MEMBERS: Aye.

MR. ADAMS: Any opposed?

(No verbal response.)

MR. ADAMS: Open forum: Legislation,

1 Mr. Trey.

2 MR. BOBINGER: All right. Good morning.

3 DR. JOHNSON: Could we back up?

4 MR. ADAMS: Yeah, sure.

5 MR. BOBINGER: Oh, yeah. We've got a
6 guest.

7 DR. JOHNSON: Mr. Chair.

8 MR. ADAMS: Yes, ma'am.

9 DR. JOHNSON: We do have an open forum.
10 A guest from the Hospital Association is here.

11 MR. ADAMS: Okay.

12 DR. JOHNSON: So --

13 MR. ADAMS: Mr. Roberson.

14 MR. ROBERSON: Actually, I'll gladly
15 yield my time.

16 MR. BOBINGER: I told him I was going to
17 echo what he says.

18 MR. ADAMS: Okay, let's go. Mr. Richard
19 Roberson.

20 MR. ROBERSON: Well, good morning,
21 everyone. And first of all, let me say thank you
22 for everything that y'all are doing and continue to
23 do as we go through some pretty unprecedented
24 challenges still in healthcare in Mississippi and
25 around the country.

1 I'm Richard Roberson; I'm general counsel
2 and vice president for policy and state advocacy
3 with the Mississippi Hospital Association.

4 And just to -- you know, just here to say
5 thank you. Also to give you guys just an update on
6 a few things that we're working on as it relates to
7 the nursing profession.

8 We know there's a huge crisis right now
9 within the nursing profession on workforce. We're
10 engaged on some various initiatives for increasing
11 the supply of nurses and also helping the nurses
12 that are working their tails off right now.

13 And we're looking at tax credits,
14 scholarships, forgivable loans, all those types of
15 things that we've talked about over the last couple
16 of years.

17 We're looking at things to make the
18 workplace safer. We hear all the time from our
19 hospitals, challenges that their nurses have with
20 just safety issues in the hospitals and not just in
21 the hospitals but in clinics and other settings as
22 well.

23 But we're going to be talking about some
24 things from a legislative standpoint that we can do.
25 A few years ago we were able to get some increased

1 punishment on offenders who assault nurses and other
2 healthcare workers and got that raised to a felony
3 offense instead of a misdemeanor.

4 But we know there are challenges around the
5 state with law enforcement not always being as
6 supportive as perhaps they could be for helping our
7 healthcare workers and our nurses in some very
8 difficult situations.

9 We've had instances over the last few months
10 and weeks of some potentially very bad situations
11 that thankfully have been avoided.

12 But we're looking at things such as, you
13 know, what to do about firearms being brought onto
14 campus, particularly with our public hospitals.

15 We want to make sure that folks, patients in
16 the hospitals, visitors, family members but also our
17 healthcare workers and our nurses are as safe as
18 they can be. And those stories that we've heard
19 over the last several months have been pretty
20 heartbreaking in some cases.

21 We've been working with the Mississippi
22 Nurses Association over the last couple of weeks,
23 and it will continue over the next week to engage
24 legislators and chief nursing officers and their
25 staff in conversations, kind of a town-hall

1 discussion about what is going on with the nurses.

2 We think it's important for legislators to
3 hear how the impact of their policy decisions
4 regarding and how they approach healthcare from a
5 policy perspective impacts the nurses and impacts
6 their ability to care for patients at bedside.

7 And we've heard stories over the last couple
8 of weeks that are pretty -- pretty powerful stories.
9 We've heard the importance of, first of all, having
10 a hospital to go to. We've heard of a case up in
11 the Delta where if that hospital had not been there,
12 one of the nurse's best friend's son would be dead
13 because he would not have been someone that could
14 have ridden in an ambulance 45 minutes past that
15 town to get care.

16 So we hear all the time about how maybe
17 certain parts of the state don't need healthcare;
18 maybe they don't need a hospital; maybe it needs to
19 look like something else. Well, I think there are a
20 lot of stories out there that would tell you
21 otherwise.

22 So we're firmly engaged on that issue and
23 trying to make sure that legislators hear it
24 directly from those who are most impacted by their
25 decisions, and those are our nurses, to be quite

1 honest.

2 So administrators in hospitals have a
3 different set of stress level. They're trying to
4 make sure the business operations and the patients
5 are taken care of and all the trains are running on
6 time, but it's the nurses that feel those different
7 stress levels, and they feel the pressures -- the
8 downward pressures of revenue and the impact that
9 that has as they take care of patients.

10 And the stories that I've heard that
11 resonate the most with me over the last couple of
12 years have been those stories of nurses and their
13 frustrations in what they've been faced with through
14 COVID and now as we're into post-COVID. And that
15 is -- you know, certainly ratios are a challenge and
16 frustrating. Money has been an issue. Work-life
17 balance has always been an issue, but it's even been
18 more acutely an issue the last few years.

19 But the primary thing that comes through to
20 me is when I've heard nurses say, "What really has
21 impacted me and frustrated me the most and is
22 affecting me personally is that I cannot take care
23 of the patients in the way I have been trained to
24 take care of them and in the way that I know is the
25 best way to take care of them." And that is

1 depressing to me; it is frustrating to me. And we
2 need to get that fixed.

3 So those are the things from the Mississippi
4 Hospital Association's perspective that we're
5 working on, and we appreciate the board's support.
6 We look forward to continuing to work with the
7 Nurses Association and with this board and with
8 Phyllis on different things that we can do to help
9 our nurses. And we appreciate being here. So thank
10 you for what you're doing.

11 MR. ADAMS: Any questions for Richard?

12 DR. STEWART: Can I say something?

13 MR. ADAMS: Go ahead.

14 DR. STEWART: First, thank you for
15 coming and those words of encouragement.

16 We were just talking right before the board
17 meeting. You know, one of the things with the
18 nurses in absorbing so much of this stress, and our
19 Board of Nursing staff does a tremendous job of
20 helping in terms of those that have substance-use
21 disorders. We just see that more and more. And I
22 know nursing is not the only profession that's
23 affected by that, but in some respects, it's an
24 occupational hazard, I mean, because of the stress
25 and the demands and the ratios that you're talking

1 about.

2 So, you know, we see that when we see people
3 come in who have this disease, and they need help.
4 And that then, of course, you know, distresses the
5 system even further when they are absent and are
6 able to get help, hopefully.

7 So I know you guys are thinking about that
8 and talking about that. But I just wanted to
9 mention it so it doesn't get forgotten.

10 MR. ROBERSON: No. I appreciate that.
11 In every one of these meetings we've had over the
12 last week and a half, we've talked about the mental
13 health impacts and the mental behavior health impact
14 on the nursing workforce of what they're having to
15 go -- what they've been through with COVID.

16 You know -- and you know as well as I do the
17 stories where nurses became family members during
18 COVID, and they had to be with that patient during
19 times at the end of life and provide that
20 end-of-life care from a clinical standpoint but also
21 from a personal, emotional, and spiritual
22 standpoint. And that takes what's already a
23 difficult professional job into a whole different
24 level. Then it becomes much, much more personal.

25 My sister is a nurse, and so, you know, I

1 know some of the challenges that nurses face and
2 going home every night to a different part of your
3 house to get out of the PPE, to shower before you
4 hug your kid. Those are real stories that not all
5 of us have to face.

6 And so the mental health issues and the
7 challenges have come up and have rang true and we've
8 kind of, I think, felt like it's kind of a -- it's a
9 -- these meetings have been part legislative
10 advocacy work and part group therapy for everybody.
11 And those are certainly challenges the hospitals are
12 looking at as well. And from an advocacy
13 standpoint, we need to do better as a state and
14 getting that addressed.

15 DR. STEWART: Thank you.

16 MR. ADAMS: Questions for Richard?

17 Ms. Johnson.

18 DR. JOHNSON: Mr. Chairman, thank you.

19 And, Richard, thank you for being here, and thanks
20 to the Hospital Association for their efforts in
21 including nursing in everything because nursing is
22 so important and all that they've done legislatively
23 thus far.

24 I had a question about the hospital
25 closures. The criticality of the impact it has on

1 the overall healthcare system in Mississippi and
2 nationally.

3 So what efforts are being undertaken to
4 address this issue in Mississippi, if you could
5 speak briefly on that?

6 MR. ROBERSON: Sure. So, you know, so
7 many challenges for hospitals right now is driven by
8 revenue.

9 Mississippi hospitals are the lowest cost
10 inpatient hospitals, for inpatient expenses in the
11 country. I mean, and it's not even close. The next
12 closest state is Wyoming, and they're almost \$200
13 more per day more expensive than Mississippi.

14 So our problem in Mississippi is not cost;
15 it's revenue. We don't have the revenue; we don't
16 have the payer mix and the volume that supports
17 healthy hospitals, healthy healthcare systems across
18 the state.

19 And, you know, you look at some hospitals,
20 and Greenwood has been one that has very publicly
21 been out front. Their payer mix is less than 10
22 percent commercial, and some of that includes the
23 federal marketplace plans which aren't, you know,
24 true commercial, employer-sponsored coverage
25 insurance companies.

1 So the challenge in a place like Greenwood
2 is when, you know, less than 10 percent of your
3 revenue is coming from employer-sponsored healthcare
4 coverage and the rest is coming from combinations of
5 Medicare, which has been hit by sequestration;
6 market basket rate decreases through the Affordable
7 Care Act that have resulted in tens of millions of
8 dollars in Greenwood being lost over the last few
9 years; and then the rest of their population is
10 Medicaid and self-pay, which is really uninsured, no
11 pay, it makes it extremely challenging.

12 And we see those hospitals that have that
13 type of payer mix are going to be the ones at the
14 tip of the spear that are going to be, you know, in
15 a really, really bad place and already are.

16 And so, you know, we continue to talk about
17 things like Medicaid expansion because it's just
18 kind of the obvious thing.

19 And, you know, when the federal government
20 set up the Affordable Care Act, they kind of robbed
21 from Peter on the Medicare side to pay for Paul on
22 the Medicaid side. And we've had all the cuts from
23 Medicare from 2012 through 2027 that will add up to
24 almost four billion dollars across the state in
25 reductions on the Medicare side, but we've not been

1 able to make any of that up on Medicaid.

2 And, you know, I don't think that anyone
3 will tell you right now that expansion is the single
4 solution or getting more covered lines is the
5 single-bullet solution. It probably would have been
6 10 years ago.

7 But, you know, we've got deferred
8 maintenance on the healthcare house, and so now it's
9 not just fixing the leak in the roof. It's fixing
10 the leak in the roof that has caused damage to the
11 walls in the house and the flooring in the house and
12 everything else. So you've got to fix all of that.

13 So we are very concerned about the state of
14 our hospitals in Greenwood.

15 In calendar year 2021, there were over 200
16 babies born in Greenwood at that hospital. They've
17 eliminated labor and delivery services in Greenwood.
18 So now those 200 babies are going to have to go
19 somewhere else this year.

20 So, you know, mom's in labor, driving, you
21 know, either up Highway 7 to Grenada or maybe 82
22 over to Greenville or Indianolia, 30 miles, 50
23 miles, maybe up to Oxford, down to Jackson. Those
24 are going to be your nearest labor and delivery
25 units -- or over to Cleveland, 45 minutes.

1 If you're in labor, that's a scary drive.
2 So that's -- those are the types of things that keep
3 us up at night worried about our hospitals is,
4 obviously, impact on the hospital, but it's the
5 impact on those communities and on those patients
6 that need those services, and they need them
7 locally.

8 DR. JOHNSON: Thank you.

9 MR. ROBERSON: Thanks, Phyllis.

10 MR. ADAMS: Any questions?

11 Again, thank you, Richard, for coming.

12 MR. ROBERSON: Thank you.

13 MR. ADAMS: Thank you to the Hospital
14 Association.

15 MR. ROBERSON: Appreciate y'all. Thank
16 you.

17 MR. ADAMS: Others while we're in open
18 forum? I did notice Ms. Malone on via Zoom.
19 Teresa, do you have anything?

20 MS. MALONE: Can y'all hear me okay?

21 MR. ADAMS: Yes.

22 MS. MALONE: Yes. And I will be very
23 brief. I'm driving. I apologize if there's
24 background noise.

25 First, I want to say a very special thank

1 you to Dr. Cagle for presenting at our October
2 convention. We were a little nervous because we
3 know that it is very difficult for nurses to take
4 off at this point in time, so we were delighted at
5 the turnout that we had, and she did an excellent
6 job in responding to questions, both from registered
7 nurses as well as advanced practice registered
8 nurses and providing an update to everyone. So,
9 again, we appreciate that.

10 I do want to remind everyone about our RN
11 and APRN day at the capitol. It is scheduled for
12 January the 25th.

13 And our nursing legislative summit is
14 scheduled for February the 28th. We would love for
15 all of the Board of Nursing members to be able to
16 attend both of those events.

17 And then I'm not going to spend a lot of
18 time, but I want to reiterate what Richard had
19 mentioned about the meetings that we have been
20 hosting throughout the state.

21 And all of you know, because you hear from
22 nurses and you are nurses, about the challenges that
23 they are facing. But he is exactly right. When you
24 hear it from so many individuals telling a different
25 story but yet the same story of exhaustion, burnout,

1 being worried about their patients, being worried
2 about their families, being worried about their
3 colleagues and themselves. Because as we know, the
4 stress levels that you mentioned, suicides are going
5 up when it comes to nurses. All of these factors
6 are impacting our nursing workforce, and it's
7 impacting the entire state and, of course, the care
8 that is being provided to the patients in
9 Mississippi.

10 So we want to publicly thank all of the
11 nurses and all of the legislators who have attended
12 those meetings.

13 And that is all I have today. Again, I
14 apologize for any background noise.

15 MR. ADAMS: Any questions for Teresa?
16 Thank you, Ms. Malone.

17 MS. MALONE: Thank you.

18 MR. ADAMS: Anyone else?

19 Trey, you're up.

20 MR. BOBINGER: We'll try it again. Good
21 morning. I just wanted to reiterate I appreciate
22 Richard appearing today and speaking on behalf of
23 the hospitals.

24 There was a hearing recently that we were
25 extended an invitation to by Senator Hob Bryan,

1 chairman of the Senate Public Health. Ms. Johnson,
2 Ms. Montgomery attended, as well as I. We knew a
3 lot of these things, but just to hear it in concrete
4 very candid terms, it really concerns you about the
5 future of our healthcare system in the state. And I
6 just wanted to echo Richard's comments.

7 I know the mayor of Greenwood is a personal
8 friend of mine that I've worked with over the years,
9 and I know how concerned they are about the status
10 of their hospital. It's not just theirs; it's
11 others.

12 There's been talk of everything from ARPA
13 funding, to possible Medicaid expansion. That's
14 going to be a policy question for the legislature to
15 decide. But, obviously, there is a revenue issue
16 there, as Richard pointed out, and I know we all
17 care about that issue, and, obviously, we're
18 intertwined together with the hospitals. So we will
19 continue to try to be supportive in any way we can.

20 Ms. Malone mentioned capitol day for the
21 Nursing Association. The Board of Nursing's capitol
22 day is January the 11, 2023, 1:30 to 4:30 P.M.
23 Phyllis, we have a 1:00 P.M. setup, but it goes from
24 1:30 to 4:30.

25 I think this is going to work very well,

1 Shan, because I think our retreat, correct, board
2 retreat is in that same time frame. And it's early
3 in the session. I think there will be a lot of
4 activity, and I would encourage all of our board
5 members to try to be there. It's a great time to
6 interact with both senators and representatives, and
7 we can kind of express our views.

8 I can tell you -- we're talking about
9 hospitals. I've got three or four other things I'm
10 going to quickly mention.

11 It looks like it's going to be an active
12 session. I feel like we've kind of already been in
13 session the last couple of months, actually. We've
14 had several meetings. We also had a meeting that
15 Ms. Johnson, Ms. Montgomery, and I attended with
16 Senator Blackwell to talk about full practice
17 authority legislation with all the stakeholders
18 there from the nursing profession.

19 I thought it was a very productive meeting -
20 candid but productive. I think we're going to have
21 a good bill to work together on with these other
22 parties. I appreciate Senator Blackwell for
23 including us. I've had multiple conversations.
24 I've not told Ms. Johnson, but I called him this
25 week to ask him a follow-up question.

1 He answered the phone. I said, "How are you
2 doing?"

3 He said, "Well, it's good. It's nice in
4 Hawaii." He's at a conference with another senator
5 and their wives, and I felt kind of bad I
6 interrupted him in Hawaii. But I thought, well, he
7 took my call, so I appreciated that.

8 But he's been really good. So if y'all talk
9 to Senator Blackwell, Senator Bryan, Chairman Mims
10 -- I've had some discussions with him on some other
11 legislation as well.

12 In fact, I'll go ahead and mention that the
13 income tax credit for preceptors, APRN preceptors, I
14 think our executive director, Ms. Johnson, had sent
15 y'all something out a couple of months ago. I
16 haven't seen the final version but you remember you
17 could do up to 10 rotations per year, and it was
18 \$375 tax credit per rotation shift for the first
19 three. Four through ten it went to \$750 per
20 rotation tax credit. That could add up -- that
21 could add up pretty good.

22 Now, I will say - and, Phyllis, correct me
23 if I'm wrong - I think it said in there that that's
24 for the preceptors that are not being compensated,
25 you know, for -- you know, additionally. That would

1 be their kind of bonus or reward for doing that.
2 But if you add all of those -- if you added several
3 of those sessions up, it would be a nice tax credit.
4 That's what Chairman Mims reached out to me back a
5 couple of months ago, and he wanted our input.

6 We had a conference call with our head of
7 APRNs here, and, of course, our executive director
8 and Ms. Montgomery, and we had, I thought, a very
9 good discussion.

10 We got feedback from you, Members, and
11 Ms. Johnson got me that information, and I sent that
12 back to Chairman Mims, the chairman of the Public
13 Health in the House. So it's good to have a
14 dialogue and to have the input. So I wanted you to
15 be aware of that as well.

16 I mentioned full practice.

17 The last thing I want to mention to you is
18 you remember there was -- we were given a heads-up a
19 while back, honestly, and you have discussed this as
20 well, about tweaking the composition of the board.
21 And I've had some discussions with Senator
22 Blackwell. Actually, in this meeting we had on full
23 practice authority, this issue came up as well.

24 And I also want to be very clear, taking
25 into account also input from the board members

1 through Phyllis and Shan and the staff, I think we
2 came out with something that, you know, folks seem
3 to be comfortable with.

4 What we're looking at is the tweak would put
5 -- we would put a CRNA on the board -- "we," the
6 legislature. The bill would require a CRNA in the
7 board in place of the physician on the board, and
8 that would be, at this point, the only change.

9 Now, you guys understand the legislative
10 process on any bill. You can have amendments,
11 deletions, but we left the meeting -- I also have
12 since got a draft of the bill, and that is the way
13 it is written in the draft, so that's encouraging, I
14 think.

15 Because there were some other ideas and
16 things, as y'all know, thrown out previously that
17 brought some concern, I think, to the board and the
18 staff. But I appreciate the legislators and Senator
19 Blackwell working with us on that.

20 So at this time, I'll answer any questions,
21 but those are some of the issues we're looking at.

22 MR. ADAMS: Anything for Trey?

23 MR. BOBINGER: The last thing I'll say
24 if there's not a question. Just so you know, the
25 session begins at noon on January the 3rd, which is

1 a Tuesday. So, you know, we laugh among lobbyists,
2 and Richard knows what I'm talking about. We can't
3 have a very big New Year's Day or New Year's Eve.
4 We have to be ready early.

5 Any questions?

6 MS. MONTGOMERY: Trey, appropriations.

7 MR. BOBINGER: Oh, yes. We will be
8 appearing before the House and Senate subcommittee
9 on appropriations. And I want to thank personally
10 Shan Montgomery, who does an excellent job on
11 formulating our budget numbers.

12 I walk in those meetings between Ms. Johnson
13 and Ms. Montgomery, I don't worry about anybody
14 tripping us up on our numbers because they are
15 solid; they're accurate; they can be verified. And
16 that makes it real comfortable.

17 Richard knows what I'm talking about. I've
18 sat in some of those things where somebody gets
19 asked about a line item, and they're digging around
20 in their paperwork and stumbling and stuttering. We
21 don't have that problem, so I appreciate that, Shan.

22 And we will be asking for a couple of
23 additional things in funding to meet our needs.

24 One thing that came up, while we're talking
25 about funding, is the Office of Nursing Workforce,

1 nurse workforce training. In regards to that income
2 tax credit, that office of workforce training would
3 have to certify those preceptor programs. So we
4 posed to Chairman Mims we might need, correct, a
5 little additional funding or something because it
6 may increase some work, and I think it would if that
7 law is passed.

8 So those are the kinds of things. Also on a
9 couple of other funding issues that we may seek some
10 additional funding. But that's a critical part of
11 what we do. And we've got to have a well-funded
12 agency to carry out the duties and responsibilities
13 of the Mississippi Board of Nursing.

14 Any other questions?

15 MR. ADAMS: Thank you, Trey.

16 MR. BOBINGER: Thank y'all very much.
17 Appreciate it.

18 MR. ADAMS: Office of Nursing Workforce,
19 Dr. Burks.

20 DR. BURKS: Good morning. Mr. Chairman,
21 I have several items to bring forward to the board.

22 First is the program request from Northwest
23 Mississippi Community College. They are requesting
24 to move their part-time day program from the DeSoto
25 campus to the Senatobia campus.

1 Currently, they have four locations. That
2 part-time day program is unique. It is the first
3 time that they're offering this. And the
4 administration of the school is in support, and
5 they've provided them with ample space to actually
6 have it on this campus.

7 Their anticipated enrollment is 15 students.
8 They're proposing to start August 2023.

9 There would be no changes in their
10 curriculum or the enrollment as it is with the
11 current campus.

12 Also, their licensure passage rate for the
13 last three years has been 91 -- it's 91.43 percent.
14 They are above state as well as national level.

15 They also have 11 clinical sites. And this
16 part-time day program is supported, and that support
17 has been advertised through their advisory council
18 as well as their clinical partnerships.

19 And so my recommendation is that Northwest,
20 they be given permission to move their part-time day
21 program from the DeSoto campus to the Senatobia
22 campus.

23 Do you want me to continue?

24 DR. STEWART: May we take these one at a
25 time?

1 MR. ADAMS: Absolutely.

2 DR. STEWART: Just discussion. Are you
3 okay with that?

4 DR. BURKS: Yes.

5 MR. ADAMS: Do you have any questions?

6 DR. STEWART: Well, I'm curious as to
7 why they want to move.

8 DR. BURKS: They're moving that day
9 program. Currently, they have a night program, a
10 night part-time program.

11 And so when they went back and they started
12 looking, they were placing it on that campus
13 actually because they did not have the space on the
14 Senatobia campus.

15 DR. STEWART: Okay.

16 DR. BURKS: And so the president met
17 with the administration, and he made it happen. He
18 gave them the space that they needed. So that's why
19 I was like they have the administrative support for
20 this program.

21 DR. STEWART: Okay, thank you.

22 MR. ADAMS: We do need a motion. So the
23 recommendation is recommended that Northwest
24 Mississippi Community College be given permission to
25 move part-time day program from DeSoto campus to the

1 Senatobia campus.

2 MR. CUMMINS: I make the motion.

3 DR. STEWART: I'll second it.

4 MR. ADAMS: A motion and a second.

5 All in favor?

6 BOARD MEMBERS: Aye.

7 MR. ADAMS: Motion passes.

8 DR. BURKS: The second is from Blue
9 Cliff College. They resubmitted their declaration
10 of intent for establishing a new program in
11 Gulfport, Mississippi. In their past submission of
12 the declaration, they were actually missing some
13 components. At this time, they have satisfied those
14 components.

15 They submitted their advisory committee, and
16 on their advisory committee, they provided proof of
17 input from the current PN educators. One was a PN
18 educator. The other was a PN administrator.

19 They also provided up-to-date registration
20 and the permits from the Mississippi Office of --
21 Mississippi Community College Board Office of
22 Proprietary Schools. They provided proof of an
23 unencumbered accreditation, and that agency is
24 recognized by the United States Department of
25 Education.

1 They have a nursing consultant. That
2 nursing consultant is Dr. Tomekia Lockett. She has
3 served as an instructor in a practical nursing
4 program. She also served as a director of a
5 practical nursing program. So she's well-versed in
6 the practical nursing program and the standards.

7 And they also provided surveys from the
8 healthcare facilities in that area, that included a
9 number of LPN vacancies, the average daily census,
10 and also those establishments' willingness to serve
11 as clinical resources for the prospective program.

12 My recommendation as -- because they have
13 supplied and they resubmitted the documents, that
14 they be allowed the opportunity to proceed to stage
15 II, which is to qualify for initial accreditation.

16 In addition, if they are given the
17 opportunity to proceed, it is recommended that Blue
18 Cliff College nursing administrator be required to
19 meet with the board director of PN education prior
20 to going into that second step just for
21 clarification and make sure they understand what is
22 required of them in stage II.

23 MR. ADAMS: We have a recommendation.
24 Any questions?

25 MR. CUMMINS: I make a motion that we

1 proceed.

2 MR. ADAMS: Motion by Jeremy.

3 DR. STEWART: Second.

4 MR. ADAMS: All in favor?

5 BOARD MEMBERS: Aye.

6 MR. ADAMS: Motion passes.

7 DR. BURKS: I just have some updates
8 that I would like to share with you all.

9 East Central Community College, they were
10 able to increase their enrollment to 40 students for
11 the fall of '22. They previously had been admitting
12 30 students, but when they went back and reviewed
13 their information and the students that met their
14 admission criteria, they noticed that each year from
15 2020 they had more than 40 students.

16 So they were able to increase that
17 enrollment, and they've been excited about that.
18 And those students have done well this first
19 semester.

20 Mississippi Gulf Coast College
21 apprenticeship program is up and doing well, and
22 they are appreciative to the board. That program is
23 the first in the state, and it was because of you
24 all on the board of directors that this program is
25 in existence.

1 They have a partnership with Singing River,
2 and I met with them a few weeks ago. And now other
3 healthcare facilities in the area, they're also
4 interested in creating a partnership with
5 Mississippi Gulf Coast similar to what they're doing
6 at Singing River.

7 And also with these new students, these
8 students are actually employed by Singing River.
9 They are full-time employees. And then Singing
10 River is paying for them to be in this program.

11 These students, they took what is called the
12 ATI comp predictor because they wanted to see - at
13 this point, they've been in the program two
14 semesters - where are they. And all of these
15 students scored 80 percent or higher on this comp
16 predictor, which is amazing because this is a
17 third-party exam, and many of the schools give it
18 just to allow the students to know where they are
19 and their opportunity or possibility of them passing
20 the program, and as well as passing NCLEX.

21 So as it stands, these students are doing
22 extremely well in this apprenticeship program.

23 And I also have an additional update.
24 Yesterday East Mississippi in Scooba and Co-Lin in
25 Natchez, Mississippi, they had their pinning

1 ceremonies.

2 Both schools, prior to January 2022, they
3 had been closed for more than five years, and both
4 have been granted permission to re-establish their
5 programs, again, under the purview of the board.

6 These two programs, they're well-supported
7 by their school administration, as well as their
8 community.

9 And yesterday, they had their first pinning
10 after being re-established. So we commend them for
11 that.

12 Co-Lin program was a little bit different
13 because they had developed a partnership with their
14 high school academy in January of 2022. So Co-Lin
15 had two students that were actually high school
16 students, and they're also in the practical nursing
17 program, and they were pinned yesterday. They
18 completed the programs.

19 And so both programs, they are appreciative
20 and they are grateful for the board for the
21 opportunity for them to have re-established their
22 programs.

23 The next thing I have is the annual report.
24 All the PN programs in the state, they participated
25 in the annual report. That data is currently being

1 analyzed, and we will have a report spring of 2023.

2 And the last thing I have also is this week,
3 the PN standards were presented to OLRC, and they
4 were approved with some amendments, such as
5 typographical errors.

6 That is the end of my report.

7 MR. ADAMS: Any questions for Dr. Burks?
8 That's great news. Thank you and great
9 presentation, Dr. Burks, as always.

10 MR. CUMMINS: Good job, Dr. Burks.

11 DR. STEWART: Thank you.

12 MR. ADAMS: Thank you.

13 DR. JOHNSON: Mr. Chairman, if I may.

14 MR. ADAMS: Yes, ma'am.

15 DR. JOHNSON: Dr. Burks and I have been
16 so excited this week.

17 MR. ADAMS: You can see it.

18 DR. JOHNSON: It's such a reflection on
19 your leadership, the board, because without your
20 leadership and approval, none of this could have
21 taken place. Since the PN program has come under
22 our jurisdiction, you all have done a tremendous
23 job, and our chest is stuck out so far we bump into
24 every wall.

25 And the schools are equally excited. They

1 reached out. They wanted, you know, us to be there,
2 and Dr. Burks did attend. She makes an effort to
3 attend when we're solicited by the schools because
4 we think it's so important to be there to represent
5 the board.

6 So thank you all for all that you do.

7 MS. MONTGOMERY: Dr. Johnson, if I may.

8 MR. ADAMS: Yes, ma'am.

9 MS. MONTGOMERY: I will also have to add
10 to Dr. Burks' OLRC meeting. The governor said, when
11 Dr. Burks finished presenting, "Outstanding." He
12 said, "Outstanding."

13 MR. ADAMS: Great job, Dr. Burks. We're
14 very appreciative of you.

15 Moving on to board business.

16 You have board business meetings from
17 October 7th, 2022. You've had an opportunity to
18 review those minutes. Can I --

19 MR. SHAW: Motion to accept.

20 MR. ADAMS: Got a motion.

21 MR. CUMMINS: Second.

22 MR. ADAMS: And a second. All in favor?

23 BOARD MEMBERS: Aye.

24 MR. ADAMS: Any opposed?

25 (No verbal response.)

1 MR. ADAMS: Hearing panel minutes for
2 July of 2022.

3 MR. SHAW: Motion.

4 MR. ADAMS: Make a motion.

5 MR. CUMMINS: Second.

6 MR. ADAMS: And a second.

7 All in favor?

8 BOARD MEMBERS: Aye.

9 MR. ADAMS: Any opposed?

10 (No verbal response.)

11 MR. ADAMS: Agreed settlement proposal
12 minutes - July 2022.

13 MS. CULPEPPER: Motion.

14 MR. ADAMS: Make a motion by Ms. Sandra.

15 MR. CUMMINS: Second.

16 MR. ADAMS: Second by Jeremy.

17 All in favor?

18 BOARD MEMBERS: Aye.

19 MR. ADAMS: Waive reading of names of
20 motions. Can I have a motion?

21 MS. CULPEPPER: I will make the motion.

22 MR. ADAMS: Make a motion by
23 Ms. Culpepper.

24 MR. CUMMINS: Second.

25 MR. ADAMS: Second by Jeremy.

1 All in favor?

2 BOARD MEMBERS: Aye.

3 MR. ADAMS: Any opposed?

4 (No verbal response.)

5 MR. ADAMS: Future meetings: Agreed
6 settlement proposals is scheduled for February the
7 6th, 2023. Disciplinary hearing scheduled for
8 February 7th, 8th, and 9th, of 2023 at 8:30, and our
9 board business meeting will be February 10th, 2023,
10 at 11:05 A.M.

11 The board panel for those hearings will be
12 Laura Moore, Sandra Culpepper, Mary Stewart, and
13 Jeremy Cummins.

14 Executive director's report.

15 DR. JOHNSON: Good morning, Members of
16 the Board. Happy Holidays and hopefully you've
17 received your happy, but we have some additional
18 happies that we want to present to you that just
19 arrived. So this is just another added incentive of
20 our appreciation for all that you do. Vanessa will
21 pass those out.

22 But I also wanted to acknowledge our past
23 board member, past-immediate board member,
24 Ms. Shirley Jackson, who is in the audience. I
25 think she's still here today. As you recall, we

1 gave Ms. Jackson a plaque during the last board
2 meeting, but you see she's still here supporting the
3 board, and we are so happy to have her and also
4 wanted to include her in our little happies today.

5 So thank you all for all that you do.

6 While Vanessa is passing out that, I will,
7 for time's sake, proceed with my report.

8 The board of director's retreat, you already
9 know is January the 10th through 11th of 2023, at
10 the Westin. The reception will be held on January
11 the 9th.

12 Dr. Stephanie Ferguson will be presenting on
13 board governance during the retreat. The Board of
14 Nursing capitol day is scheduled for January 11th,
15 2023, as Trey has stated, from 1:30 to 4:30 P.M.
16 with setup beginning at 1:00 o'clock P.M.

17 NCSBN's mid-year meeting is March 28th
18 through the 30th, 2023, in Seattle, Washington.
19 Again, I know I've heard from one board member that
20 is anticipating attending that meeting. So if there
21 are other board members that are interested in
22 attending, please submit your request to me via
23 e-mail as soon as possible so that we can make sure
24 our budget will meet those requirements and also to
25 get you the information.

1 New board member, we have a new board member
2 that is an LPN -- will be an LPN representative on
3 the board. That's Ms. Carly - and I hope I
4 pronounce her middle name correct - Tigrett Walker
5 from Madison, Mississippi. She was unable to be at
6 the meeting today due to a prior scheduling
7 conflict. However, we will provide board
8 orientation during the February meeting, and she
9 will be able to attend the retreat in January. So
10 hopefully you'll get a chance to meet her during
11 that time.

12 We also have a new ONW director, Ms. Lauren
13 Terry. Is Ms. Terry in the room? If you will
14 stand. Ms. Lauren Terry started with us on November
15 15th, 2022. She comes to us from Louisiana. She
16 has a master's in healthcare administration from the
17 University of Mississippi Medical Center, as well as
18 her undergraduate degree there.

19 So she brings with her a wealth of
20 knowledge. We're excited about having her, and we'd
21 just like to welcome her to the Board of Nursing.

22 You already heard from Trey about our
23 appropriations hearings. We will be doing those in
24 person. We always request to do a hearing in
25 person, and at this point, I am awaiting the

1 scheduling. Once the scheduling is received from
2 the offices, then I will send an e-mail to the board
3 members. I highly encourage you to participate and
4 attend those meetings if you've not done so in the
5 past. So as soon as I get that information for
6 scheduling purposes, I will get that out to you as
7 soon as possible.

8 I wanted to also let you know that the NCSBN
9 Board of Directors met on December the 6th, 2022,
10 and upheld the current passing standards for the
11 NCLEX-RN and the NCLEX-PN examinations when the Next
12 Generation NCLEX is launched on April 1st, 2023.

13 The Next Generation NCLEX, as you are aware,
14 is an enhancement of the current examinations and
15 places more emphasis on the measurement of a
16 candidate's nursing clinical judgment.

17 Multiple sources of information were used by
18 the Board of Directors of NCSBN to guide the
19 evaluation and discussion of the passing standard.
20 This process is very strenuous, and it involved the
21 convening of expert panels of nurses representing
22 the four geographic areas of NCSBN and Canada.

23 A criterion-reference standard setting
24 procedure was performed by the panels, and their
25 findings supported retaining the current passing

1 standard. The results of national surveys of
2 nursing professionals was also considered in this
3 process.

4 The NCSBN Board of Directors evaluates the
5 passing standard for the NCLEX exams every three
6 years to protect the public by ensuring minimal
7 competency for entry-level nurses. This action is
8 in accordance with the motion that was adopted in
9 1989 by the NCSBN Delegate Assembly.

10 So I wanted you all to be aware of that. A
11 lot of hard work went in to that, and there were
12 some members from our board that actually served on
13 some of those panels. And it's evidence based, so
14 they got the information. I know Sandra was one of
15 the ones, and I think Shan participated on some of
16 that information. So a lot goes into that.

17 So additionally, this is renewal year for
18 our RNs. And before I came into the meeting, I
19 asked, "Where are we with our renewals of RNs?"

20 Right now 25,630 as of today have renewed.
21 So there's about 30,000 plus RNs out there that have
22 not renewed their license yet. Today is December
23 9th. December 31st at midnight if those nurses have
24 not renewed, they will not be able to work on
25 January 1.

1 So hopefully we can get the word out. We
2 are sending out notifications. It is imperative
3 also if they have e-Notify - that's why we encourage
4 nurses to enroll in e-Notify, which is through
5 Nursys NCSBN. It does not cost them anything to do
6 that, and that is another notification that reminds
7 them of their renewal.

8 Hospital facilities can also enroll in
9 e-Notify. I think it's a minimal cost to them;
10 however, they will also get notification if they
11 have an RN working in their facility that has not
12 renewed, to remind them you have a staff member that
13 has not renewed. So it's very important that they
14 try to service e-Notify if at all possible.

15 We will be sending out an additional e-mail
16 blast. We do it -- it's on a rotational basis
17 during the renewal process, but we will be sending
18 out another one within the next week to remind RNs
19 that they have until December 31st to renew their
20 license.

21 Additionally, again, I would like to thank
22 the Mississippi Hospital Association and Richard
23 Roberson and Tim Moore, the executive director, who
24 could not be here today due to a conflict. But they
25 are very appreciative of the board reaching out, and

1 we look forward to working with them on those issues
2 that were discussed earlier.

3 The last thing I would like to say is that I
4 did have a publication in the Journal of Nursing
5 Regulation. I was published in the Journal of
6 Nursing Regulation. I worked with Dr. David Benton
7 and several other EOs in the United States on an
8 issue, and I think it's -- you have it in your
9 packet, so I was very pleased about that.

10 It's dealing -- it's a lot of hard work that
11 goes into that and being an editor of some of that
12 stuff is very, very difficult and time-consuming,
13 but I think it will enhance the regulatory process.
14 Is what we're trying to do is streamline the process
15 and enhance the process of the regulatory boards
16 across the nation and internationally. So hopefully
17 this will shed some light on that.

18 Additionally, I would like to report that my
19 capstone was published also in the Association of
20 Black Nursing Faculty Foundation Journal in
21 September of 2022, and that capstone dealt with a
22 policy change here at the board, which you
23 graciously, you know, gave me permission to do, and
24 so I appreciate that and thank you for that.

25 And with that, that's all that I have,

1 Mr. Chairman.

2 MR. ADAMS: Thank you, Dr. Johnson. Any
3 questions for Dr. Johnson?

4 Moving on to the executive committee report.
5 First, I want to say thank you to the hearing panel
6 this week. We did add a day of hearings to try to
7 catch ourselves up. I believe we have an additional
8 day added in February as well. I also want to thank
9 the staff this week. Things went very smoothly. We
10 had a lot of cases, and I'm very appreciative. I
11 participated as well, Ms. Nancy Norris-Johnson,
12 Ms. Laura Moore, and Mr. Jeremy Cummins. So thank
13 you to the staff because Deanne, Andrew, all the
14 staff members did a great job. Thank you very much.

15 From executive committee, I don't have
16 anything else to bring forward. We do, as mentioned
17 by Trey and Dr. Johnson, board retreat, January 9th
18 and 10th, and then capitol day, January 11th.

19 Compliance committee - Laura Moore.

20 MS. MOORE: We have three motions to
21 bring forward.

22 I move that the board adopt the compliance
23 committee's recommendation to deny the affidavit and
24 formal reprimand issued against licensee P-326161.
25 Licensee's compliance filed shall be referred for a

1 show-cause hearing for noncompliance.

2 I move that the board adopt the compliance
3 committee's recommendation that the following
4 affidavits, formal reprimands be accepted for
5 ratification: Lorraine Gaddis, R-741224.

6 And last, I move that the board adopts the
7 compliance committee's recommendation to deny
8 licensee R-873798's request to entirely remove
9 certain restrictions currently placed upon his
10 license by the board's final order of August 26th,
11 2022. Due to extenuating circumstances surrounding
12 employment of Respondent, the board's compliance
13 committee does hereby order that Respondent's
14 indirect supervision conditions be amended as
15 approved by the compliance committee.

16 MR. ADAMS: Brought forward by
17 compliance committee.

18 MR. CUMMINS: Second.

19 MR. ADAMS: Second by Mr. Cummins.

20 All in favor?

21 BOARD MEMBERS: Aye.

22 MR. ADAMS: Any opposed?

23 (No verbal response.)

24 MR. ADAMS: Thank you, Laura.

25 Advanced practice committee: Dr. King.

1 DR. KING: Thank you, Mr. Chairman. We
2 do have a couple of things to bring forward to the
3 board that are recommendations and motions to
4 approve special privileges for -- with the
5 appropriate education, training, competency
6 validation for PRP, O-shots, P-shots, and endovenous
7 ablations. And if there is any questions or
8 discussions about that, Dr. Cagle or Dr. Johnson,
9 since they are in person, would, I'm sure, be happy
10 to discuss those if needed, but that is the motion
11 that is brought forward through advanced practice.

12 MR. ADAMS: Any questions?

13 I have a motion. Can we get a second?

14 MR. SHAW: Second.

15 MR. ADAMS: Second by Alton.

16 All in favor?

17 BOARD MEMBERS: Aye.

18 MR. ADAMS: Any opposed?

19 (No verbal response.)

20 MR. ADAMS: Thank you, Dr. King.

21 DR. KING: I do have one other thing
22 just to bring forward for discussion purposes that
23 we met in the APC committee just so the board is
24 aware that we did have some denials of special
25 privileges. And those two denials include the

1 occipital nerve block for migraines and lethal
2 injections in the correctional facility is the
3 recommendation for advanced practice to deny those
4 special privileges.

5 MR. ADAMS: Thank you, Dr. King.

6 DR. KING: Thank you.

7 MR. ADAMS: Moving forward. Practice
8 committee: Mary.

9 DR. STEWART: We have no report.

10 MR. ADAMS: Thank you, Mary.

11 Administrative code: Dr. King.

12 DR. KING: Thank you, Mr. Chairman.

13 Administrative code committee did meet on
14 11/10/2022 at 3:30, and I believe it has been
15 distributed by Ms. Saltzman in your packet for the
16 Rule 1.3 regarding monitored practice hours in which
17 their recommendation of that amended rule is -- that
18 is the motion that we would like to bring forward to
19 the full board, and it should be in your packet and
20 should have been distributed for review for the full
21 board prior to this meeting.

22 MR. SHAW: I second the motion.

23 MR. ADAMS: Got a motion. Second by
24 Alton.

25 All in favor?

1 BOARD MEMBERS: Aye.

2 MR. ADAMS: Any opposed?

3 (No verbal response.)

4 MR. ADAMS: Thank you, Dr. King.

5 Anything further?

6 DR. KING: No, sir. Just a note we will
7 be meeting for the additional top priorities that
8 you and the rest of the board has identified as
9 priorities. We will be meeting those and bringing
10 things forward pretty quickly over 2023.

11 MR. ADAMS: Great. Thank you, Dr. King,
12 for all of your hard work.

13 Finance committee: Jeremy.

14 MR. CUMMINS: All right. You've got
15 your finance information in your packets there.
16 Several expenditures as of October 31st are a little
17 higher this year than they were this time last year.
18 The exception of that category would be services,
19 which would include our contracts, which is about
20 \$30,000 lower.

21 Salary expenses are higher this year than
22 the prior year. We had a creation of new positions.
23 We also had a salary increase due to the SEC 2
24 increases for a majority of the board positions. So
25 that would be the reason for that.

1 Compared to the fiscal year '22, travel is
2 up by about \$32,000. This is due to the COVID
3 restrictions being lifted. Also mileage rates were
4 increased to .625 per mile.

5 Total commodity expenses are higher due to
6 distance learning grants that were awarded to Howard
7 Industries. That was through a grant, but we did
8 have to hire a consultant, and that \$24,000 came out
9 of the board's budget for that consultant expense.

10 Total expenses are lower overall than last
11 year. The agency has only expended or obligated
12 about 35.37 percent of its budget. Last year this
13 time, we had expended 39.91 percent.

14 Our executive director raise was submitted
15 and approved by the State Personnel Board. So we
16 did make some groundwork with that. Hopefully, in
17 this next budget cycle, we'll be able to get her up
18 to what the board originally asked for. That will
19 be at least what we attempt to do.

20 As far as revenue, year to date we've
21 collected 1.962 million. In September we collected
22 \$834,380. October revenue collected was \$879,770.

23 Renewal fees for September and October were
24 higher than '22. That would be comparing not
25 RN-to-RN renewals but RN-to-LPN renewals. So they

1 were a little bit higher.

2 We do expect to have an increase with the
3 renewals, but currently -- right before we came in,
4 Shan and Dr. King and myself did a little
5 calculation, I guess you would say. Currently,
6 we've got about 36.3 percent of RNs that have not
7 renewed as of today. So we've got a little ways to
8 go, and we should see some increased revenue coming
9 in, but that is just a little more detailed
10 breakdown there.

11 Currently, the board has 5.1 million dollars
12 in available cash. This cash is sufficient to meet
13 all operational expenses.

14 That's my report.

15 MR. ADAMS: Thank you, Mr. Cummins. Any
16 questions for Mr. Cummins?

17 Office of Nursing Workforce: Ms Culpepper.

18 MS. CULPEPPER: We have nothing to bring
19 forward.

20 MR. ADAMS: Thank you. We do have a few
21 items for executive session. So I'd like to make a
22 motion to go into executive session.

23 MR. SHAW: I make a motion we go into
24 closed session to determine if executive session is
25 necessary.

BUSINESS MEETING

1 MR. CUMMINS: Second.

2 MR. ADAMS: All in favor?

3 BOARD MEMBERS: Aye.

4 DR. STEWART: Do we need to approve the
5 finance report?

6 MR. ADAMS: Yes, we do.

7 MR. CUMMINS: I put that in the form of
8 a motion to approve the finance report.

9 MR. SHAW: Second. I second it.

10 MR. ADAMS: Second. Motion and a
11 second.

12 DR. STEWART: To approve the finance
13 report?

14 MR. ADAMS: Yes.

15 All in favor?

16 BOARD MEMBERS: Aye.

17 MR. ADAMS: Any opposed?

18 (No verbal response.)

19 MR. ADAMS: We'll move into executive
20 session.

21 (Board exits to executive session at
22 12:06 P.M.)

23 (Proceeding resumes on the record at
24 12:27 P.M.)

25 MR. ADAMS: We're back live. During

BUSINESS MEETING

1 executive session, there was no action taken. I
2 would like to entertain a motion to adjourn.

3 MS. CULPEPPER: I make a motion.

4 MR. ADAMS: Make a motion - Sandra.

5 MR. CUMMINS: Second.

6 MR. ADAMS: Second by Jeremy.

7 All in favor?

8 BOARD MEMBERS: Aye.

9 (Whereupon, the above-entitled
10 proceeding concluded at 12:27 P.M.)

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CERTIFICATE OF COURT REPORTER

I, CYNTHIA HARRIS, Court Reporter and Notary Public, in and for the County of Scott, State of Mississippi, do hereby certify:

That the foregoing pages contain a full, true, and correct transcription of all the proceedings taken by me at the time and place heretofore stated;

That I am not kin or in anywise associated with any of the parties to said cause of action or their counsel, and that I am not financially interested in the action.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this the 21st day of December, 2022.



Cynthia Harris

CYNTHIA HARRIS, RPR, CCR 1828

MY COMMISSION EXPIRES: DECEMBER 10TH, 2025

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BUSINESS MEETING

THE MISSISSIPPI BOARD OF NURSING
BUSINESS MEETING

DECEMBER 9, 2022

PROCEEDINGS

taken on Friday, December 9, 2022,
commencing at approximately 11:11 A.M.
at the Mississippi Board of Nursing
713 South Pear Orchard Road
Plaza II, Suite 300
Ridgeland, Mississippi

REPORTED BY: CYNTHIA HARRIS, RPR, CCR, #1828
SOUTHERN STENO REPORTERS
3541 Highway 13 South
Morton, MS 39117
(601) 507-0849

BUSINESS MEETING

Page 2

1 APPEARANCES

2

3 BOARD MEMBERS IN ATTENDANCE IN PERSON:

4 T.J. ADAMS, RN, BSN, MSHA (PRESIDENT)

5 SANDRA CULPEPPER, LPN (VICE PRESIDENT)

6 JEREMY L. CUMMINS, LPN, LNHA (TREASURER)

7 JANIE CLANTON, RN (SECRETARY)

8 MARY STEWART, PhD, RN

9 NANCY NORRIS-JOHNSON, LPN, II, CPT

10 ALTON SHAW, MSN, FNP-C

11 LAURA MOORE, MSN, NP-C

12

13

14 BOARD MEMBERS IN ATTENDANCE VIA ZOOM:

15 MELISSA KING, DNP, FNP-C

16 LACEY T. GENTRY, MSN, RN

17

18

19 ALSO PRESENT:

20 EDWARD WIGGINS, JR., ESQUIRE

21 SPECIAL ASSISTANT ATTORNEY GENERAL

22

23

24

25

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1 PROCEEDING

2 * * * *

3 MR. ADAMS: All right. Good morning,

4 everyone. Welcome to the Board of Nursing. I would

5 like to call the meeting to order. It is 11:11. I

6 would like to begin with Mr. Jeremy opening us up in

7 a word of prayer.

8 MR. CUMMINS: Let's pray.

9 (Prayer.)

10 MR. ADAMS: I would also like to note we

11 have a declaration of a quorum, and that we have two

12 members joining us via Zoom: Dr. Melissa King and

13 Lacey Gentry.

14 You have the agenda in front of you. Can I

15 get a motion to approve the agenda?

16 MR. CUMMINS: Make a motion to approve

17 the agenda.

18 MR. ADAMS: Got a motion by Jeremy.

19 MS. NORRIS-JOHNSON: I'll second.

20 MR. ADAMS: Second by Ms. Nancy.

21 All in favor?

22 BOARD MEMBERS: Aye.

23 MR. ADAMS: Any opposed?

24 (No verbal response.)

25 MR. ADAMS: Open forum: Legislation,

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1 Mr. Trey.

2 MR. BOBINGER: All right. Good morning.

3 DR. JOHNSON: Could we back up?

4 MR. ADAMS: Yeah, sure.

5 MR. BOBINGER: Oh, yeah. We've got a

6 guest.

7 DR. JOHNSON: Mr. Chair.

8 MR. ADAMS: Yes, ma'am.

9 DR. JOHNSON: We do have an open forum.

10 A guest from the Hospital Association is here.

11 MR. ADAMS: Okay.

12 DR. JOHNSON: So --

13 MR. ADAMS: Mr. Roberson.

14 MR. ROBERSON: Actually, I'll gladly

15 yield my time.

16 MR. BOBINGER: I told him I was going to

17 echo what he says.

18 MR. ADAMS: Okay, let's go. Mr. Richard

19 Roberson.

20 MR. ROBERSON: Well, good morning,

21 everyone. And first of all, let me say thank you

22 for everything that y'all are doing and continue to

23 do as we go through some pretty unprecedented

24 challenges still in healthcare in Mississippi and

25 around the country.

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1 I'm Richard Roberson; I'm general counsel
2 and vice president for policy and state advocacy
3 with the Mississippi Hospital Association.

4 And just to -- you know, just here to say
5 thank you. Also to give you guys just an update on
6 a few things that we're working on as it relates to
7 the nursing profession.

8 We know there's a huge crisis right now
9 within the nursing profession on workforce. We're
10 engaged on some various initiatives for increasing
11 the supply of nurses and also helping the nurses
12 that are working their tails off right now.

13 And we're looking at tax credits,
14 scholarships, forgivable loans, all those types of
15 things that we've talked about over the last couple
16 of years.

17 We're looking at things to make the
18 workplace safer. We hear all the time from our
19 hospitals, challenges that their nurses have with
20 just safety issues in the hospitals and not just in
21 the hospitals but in clinics and other settings as
22 well.

23 But we're going to be talking about some
24 things from a legislative standpoint that we can do.
25 A few years ago we were able to get some increased

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1 punishment on offenders who assault nurses and other
2 healthcare workers and got that raised to a felony
3 offense instead of a misdemeanor.

4 But we know there are challenges around the
5 state with law enforcement not always being as
6 supportive as perhaps they could be for helping our
7 healthcare workers and our nurses in some very
8 difficult situations.

9 We've had instances over the last few months
10 and weeks of some potentially very bad situations
11 that thankfully have been avoided.

12 But we're looking at things such as, you
13 know, what to do about firearms being brought onto
14 campus, particularly with our public hospitals.

15 We want to make sure that folks, patients in
16 the hospitals, visitors, family members but also our
17 healthcare workers and our nurses are as safe as
18 they can be. And those stories that we've heard
19 over the last several months have been pretty
20 heartbreaking in some cases.

21 We've been working with the Mississippi
22 Nurses Association over the last couple of weeks,
23 and it will continue over the next week to engage
24 legislators and chief nursing officers and their
25 staff in conversations, kind of a town-hall

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1 discussion about what is going on with the nurses.

2 We think it's important for legislators to
3 hear how the impact of their policy decisions
4 regarding and how they approach healthcare from a
5 policy perspective impacts the nurses and impacts
6 their ability to care for patients at bedside.

7 And we've heard stories over the last couple
8 of weeks that are pretty -- pretty powerful stories.
9 We've heard the importance of, first of all, having
10 a hospital to go to. We've heard of a case up in
11 the Delta where if that hospital had not been there,
12 one of the nurse's best friend's son would be dead
13 because he would not have been someone that could
14 have ridden in an ambulance 45 minutes past that
15 town to get care.

16 So we hear all the time about how maybe
17 certain parts of the state don't need healthcare;
18 maybe they don't need a hospital; maybe it needs to
19 look like something else. Well, I think there are a
20 lot of stories out there that would tell you
21 otherwise.

22 So we're firmly engaged on that issue and
23 trying to make sure that legislators hear it
24 directly from those who are most impacted by their
25 decisions, and those are our nurses, to be quite

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1 honest.

2 So administrators in hospitals have a
3 different set of stress level. They're trying to
4 make sure the business operations and the patients
5 are taken care of and all the trains are running on
6 time, but it's the nurses that feel those different
7 stress levels, and they feel the pressures -- the
8 downward pressures of revenue and the impact that
9 that has as they take care of patients.

10 And the stories that I've heard that
11 resonate the most with me over the last couple of
12 years have been those stories of nurses and their
13 frustrations in what they've been faced with through
14 COVID and now as we're into post-COVID. And that
15 is -- you know, certainly ratios are a challenge and
16 frustrating. Money has been an issue. Work-life
17 balance has always been an issue, but it's even been
18 more acutely an issue the last few years.

19 But the primary thing that comes through to
20 me is when I've heard nurses say, "What really has
21 impacted me and frustrated me the most and is
22 affecting me personally is that I cannot take care
23 of the patients in the way I have been trained to
24 take care of them and in the way that I know is the
25 best way to take care of them." And that is

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1 depressing to me; it is frustrating to me. And we
2 need to get that fixed.

3 So those are the things from the Mississippi
4 Hospital Association's perspective that we're
5 working on, and we appreciate the board's support.
6 We look forward to continuing to work with the
7 Nurses Association and with this board and with
8 Phyllis on different things that we can do to help
9 our nurses. And we appreciate being here. So thank
10 you for what you're doing.

11 MR. ADAMS: Any questions for Richard?

12 DR. STEWART: Can I say something?

13 MR. ADAMS: Go ahead.

14 DR. STEWART: First, thank you for
15 coming and those words of encouragement.

16 We were just talking right before the board
17 meeting. You know, one of the things with the
18 nurses in absorbing so much of this stress, and our
19 Board of Nursing staff does a tremendous job of
20 helping in terms of those that have substance-use
21 disorders. We just see that more and more. And I
22 know nursing is not the only profession that's
23 affected by that, but in some respects, it's an
24 occupational hazard, I mean, because of the stress
25 and the demands and the ratios that you're talking

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1 about.

2 So, you know, we see that when we see people
3 come in who have this disease, and they need help.
4 And that then, of course, you know, distresses the
5 system even further when they are absent and are
6 able to get help, hopefully.

7 So I know you guys are thinking about that
8 and talking about that. But I just wanted to
9 mention it so it doesn't get forgotten.

10 MR. ROBERSON: No. I appreciate that.
11 In every one of these meetings we've had over the
12 last week and a half, we've talked about the mental
13 health impacts and the mental behavior health impact
14 on the nursing workforce of what they're having to
15 go -- what they've been through with COVID.

16 You know -- and you know as well as I do the
17 stories where nurses became family members during
18 COVID, and they had to be with that patient during
19 times at the end of life and provide that
20 end-of-life care from a clinical standpoint but also
21 from a personal, emotional, and spiritual
22 standpoint. And that takes what's already a
23 difficult professional job into a whole different
24 level. Then it becomes much, much more personal.

25 My sister is a nurse, and so, you know, I

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1 know some of the challenges that nurses face and
2 going home every night to a different part of your
3 house to get out of the PPE, to shower before you
4 hug your kid. Those are real stories that not all
5 of us have to face.

6 And so the mental health issues and the
7 challenges have come up and have rang true and we've
8 kind of, I think, felt like it's kind of a -- it's a
9 -- these meetings have been part legislative
10 advocacy work and part group therapy for everybody.
11 And those are certainly challenges the hospitals are
12 looking at as well. And from an advocacy
13 standpoint, we need to do better as a state and
14 getting that addressed.

15 DR. STEWART: Thank you.

16 MR. ADAMS: Questions for Richard?

17 Ms. Johnson.

18 DR. JOHNSON: Mr. Chairman, thank you.
19 And, Richard, thank you for being here, and thanks
20 to the Hospital Association for their efforts in
21 including nursing in everything because nursing is
22 so important and all that they've done legislatively
23 thus far.

24 I had a question about the hospital
25 closures. The criticality of the impact it has on

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1 the overall healthcare system in Mississippi and
2 nationally.

3 So what efforts are being undertaken to
4 address this issue in Mississippi, if you could
5 speak briefly on that?

6 MR. ROBERSON: Sure. So, you know, so
7 many challenges for hospitals right now is driven by
8 revenue.

9 Mississippi hospitals are the lowest cost
10 inpatient hospitals, for inpatient expenses in the
11 country. I mean, and it's not even close. The next
12 closest state is Wyoming, and they're almost \$200
13 more per day more expensive than Mississippi.

14 So our problem in Mississippi is not cost;
15 it's revenue. We don't have the revenue; we don't
16 have the payer mix and the volume that supports
17 healthy hospitals, healthy healthcare systems across
18 the state.

19 And, you know, you look at some hospitals,
20 and Greenwood has been one that has very publicly
21 been out front. Their payer mix is less than 10
22 percent commercial, and some of that includes the
23 federal marketplace plans which aren't, you know,
24 true commercial, employer-sponsored coverage
25 insurance companies.

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1 So the challenge in a place like Greenwood
2 is when, you know, less than 10 percent of your
3 revenue is coming from employer-sponsored healthcare
4 coverage and the rest is coming from combinations of
5 Medicare, which has been hit by sequestration;
6 market basket rate decreases through the Affordable
7 Care Act that have resulted in tens of millions of
8 dollars in Greenwood being lost over the last few
9 years; and then the rest of their population is
10 Medicaid and self-pay, which is really uninsured, no
11 pay, it makes it extremely challenging.

12 And we see those hospitals that have that
13 type of payer mix are going to be the ones at the
14 tip of the spear that are going to be, you know, in
15 a really, really bad place and already are.

16 And so, you know, we continue to talk about
17 things like Medicaid expansion because it's just
18 kind of the obvious thing.

19 And, you know, when the federal government
20 set up the Affordable Care Act, they kind of robbed
21 from Peter on the Medicare side to pay for Paul on
22 the Medicaid side. And we've had all the cuts from
23 Medicare from 2012 through 2027 that will add up to
24 almost four billion dollars across the state in
25 reductions on the Medicare side, but we've not been

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1 able to make any of that up on Medicaid.

2 And, you know, I don't think that anyone
3 will tell you right now that expansion is the single
4 solution or getting more covered lines is the
5 single-bullet solution. It probably would have been
6 10 years ago.

7 But, you know, we've got deferred
8 maintenance on the healthcare house, and so now it's
9 not just fixing the leak in the roof. It's fixing
10 the leak in the roof that has caused damage to the
11 walls in the house and the flooring in the house and
12 everything else. So you've got to fix all of that.

13 So we are very concerned about the state of
14 our hospitals in Greenwood.

15 In calendar year 2021, there were over 200
16 babies born in Greenwood at that hospital. They've
17 eliminated labor and delivery services in Greenwood.
18 So now those 200 babies are going to have to go
19 somewhere else this year.

20 So, you know, mom's in labor, driving, you
21 know, either up Highway 7 to Grenada or maybe 82
22 over to Greenville or Indianolia, 30 miles, 50
23 miles, maybe up to Oxford, down to Jackson. Those
24 are going to be your nearest labor and delivery
25 units -- or over to Cleveland, 45 minutes.

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1 If you're in labor, that's a scary drive.
2 So that's -- those are the types of things that keep
3 us up at night worried about our hospitals is,
4 obviously, impact on the hospital, but it's the
5 impact on those communities and on those patients
6 that need those services, and they need them
7 locally.

8 DR. JOHNSON: Thank you.

9 MR. ROBERSON: Thanks, Phyllis.

10 MR. ADAMS: Any questions?

11 Again, thank you, Richard, for coming.

12 MR. ROBERSON: Thank you.

13 MR. ADAMS: Thank you to the Hospital
14 Association.

15 MR. ROBERSON: Appreciate y'all. Thank
16 you.

17 MR. ADAMS: Others while we're in open
18 forum? I did notice Ms. Malone on via Zoom.
19 Teresa, do you have anything?

20 MS. MALONE: Can y'all hear me okay?

21 MR. ADAMS: Yes.

22 MS. MALONE: Yes. And I will be very
23 brief. I'm driving. I apologize if there's
24 background noise.

25 First, I want to say a very special thank

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1 you to Dr. Cagle for presenting at our October
2 convention. We were a little nervous because we
3 know that it is very difficult for nurses to take
4 off at this point in time, so we were delighted at
5 the turnout that we had, and she did an excellent
6 job in responding to questions, both from registered
7 nurses as well as advanced practice registered
8 nurses and providing an update to everyone. So,
9 again, we appreciate that.

10 I do want to remind everyone about our RN
11 and APRN day at the capitol. It is scheduled for
12 January the 25th.

13 And our nursing legislative summit is
14 scheduled for February the 28th. We would love for
15 all of the Board of Nursing members to be able to
16 attend both of those events.

17 And then I'm not going to spend a lot of
18 time, but I want to reiterate what Richard had
19 mentioned about the meetings that we have been
20 hosting throughout the state.

21 And all of you know, because you hear from
22 nurses and you are nurses, about the challenges that
23 they are facing. But he is exactly right. When you
24 hear it from so many individuals telling a different
25 story but yet the same story of exhaustion, burnout,

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1 being worried about their patients, being worried
2 about their families, being worried about their
3 colleagues and themselves. Because as we know, the
4 stress levels that you mentioned, suicides are going
5 up when it comes to nurses. All of these factors
6 are impacting our nursing workforce, and it's
7 impacting the entire state and, of course, the care
8 that is being provided to the patients in
9 Mississippi.

10 So we want to publicly thank all of the
11 nurses and all of the legislators who have attended
12 those meetings.

13 And that is all I have today. Again, I
14 apologize for any background noise.

15 MR. ADAMS: Any questions for Teresa?
16 Thank you, Ms. Malone.

17 MS. MALONE: Thank you.

18 MR. ADAMS: Anyone else?

19 Trey, you're up.

20 MR. BOBINGER: We'll try it again. Good
21 morning. I just wanted to reiterate I appreciate
22 Richard appearing today and speaking on behalf of
23 the hospitals.

24 There was a hearing recently that we were
25 extended an invitation to by Senator Hob Bryan,

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1 chairman of the Senate Public Health. Ms. Johnson,
2 Ms. Montgomery attended, as well as I. We knew a
3 lot of these things, but just to hear it in concrete
4 very candid terms, it really concerns you about the
5 future of our healthcare system in the state. And I
6 just wanted to echo Richard's comments.

7 I know the mayor of Greenwood is a personal
8 friend of mine that I've worked with over the years,
9 and I know how concerned they are about the status
10 of their hospital. It's not just theirs; it's
11 others.

12 There's been talk of everything from ARPA
13 funding, to possible Medicaid expansion. That's
14 going to be a policy question for the legislature to
15 decide. But, obviously, there is a revenue issue
16 there, as Richard pointed out, and I know we all
17 care about that issue, and, obviously, we're
18 intertwined together with the hospitals. So we will
19 continue to try to be supportive in any way we can.

20 Ms. Malone mentioned capitol day for the
21 Nursing Association. The Board of Nursing's capitol
22 day is January the 11, 2023, 1:30 to 4:30 P.M.
23 Phyllis, we have a 1:00 P.M. setup, but it goes from
24 1:30 to 4:30.

25 I think this is going to work very well,

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1 Shan, because I think our retreat, correct, board
2 retreat is in that same time frame. And it's early
3 in the session. I think there will be a lot of
4 activity, and I would encourage all of our board
5 members to try to be there. It's a great time to
6 interact with both senators and representatives, and
7 we can kind of express our views.

8 I can tell you -- we're talking about
9 hospitals. I've got three or four other things I'm
10 going to quickly mention.

11 It looks like it's going to be an active
12 session. I feel like we've kind of already been in
13 session the last couple of months, actually. We've
14 had several meetings. We also had a meeting that
15 Ms. Johnson, Ms. Montgomery, and I attended with
16 Senator Blackwell to talk about full practice
17 authority legislation with all the stakeholders
18 there from the nursing profession.

19 I thought it was a very productive meeting -
20 candid but productive. I think we're going to have
21 a good bill to work together on with these other
22 parties. I appreciate Senator Blackwell for
23 including us. I've had multiple conversations.
24 I've not told Ms. Johnson, but I called him this
25 week to ask him a follow-up question.

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1 He answered the phone. I said, "How are you
2 doing?"

3 He said, "Well, it's good. It's nice in
4 Hawaii." He's at a conference with another senator
5 and their wives, and I felt kind of bad I
6 interrupted him in Hawaii. But I thought, well, he
7 took my call, so I appreciated that.

8 But he's been really good. So if y'all talk
9 to Senator Blackwell, Senator Bryan, Chairman Mims
10 -- I've had some discussions with him on some other
11 legislation as well.

12 In fact, I'll go ahead and mention that the
13 income tax credit for preceptors, APRN preceptors, I
14 think our executive director, Ms. Johnson, had sent
15 y'all something out a couple of months ago. I
16 haven't seen the final version but you remember you
17 could do up to 10 rotations per year, and it was
18 \$375 tax credit per rotation shift for the first
19 three. Four through ten it went to \$750 per
20 rotation tax credit. That could add up -- that
21 could add up pretty good.

22 Now, I will say - and, Phyllis, correct me
23 if I'm wrong - I think it said in there that that's
24 for the preceptors that are not being compensated,
25 you know, for -- you know, additionally. That would

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1 be their kind of bonus or reward for doing that.
2 But if you add all of those -- if you added several
3 of those sessions up, it would be a nice tax credit.
4 That's what Chairman Mims reached out to me back a
5 couple of months ago, and he wanted our input.

6 We had a conference call with our head of
7 APRNs here, and, of course, our executive director
8 and Ms. Montgomery, and we had, I thought, a very
9 good discussion.

10 We got feedback from you, Members, and
11 Ms. Johnson got me that information, and I sent that
12 back to Chairman Mims, the chairman of the Public
13 Health in the House. So it's good to have a
14 dialogue and to have the input. So I wanted you to
15 be aware of that as well.

16 I mentioned full practice.

17 The last thing I want to mention to you is
18 you remember there was -- we were given a heads-up a
19 while back, honestly, and you have discussed this as
20 well, about tweaking the composition of the board.
21 And I've had some discussions with Senator
22 Blackwell. Actually, in this meeting we had on full
23 practice authority, this issue came up as well.

24 And I also want to be very clear, taking
25 into account also input from the board members

1 through Phyllis and Shan and the staff, I think we
2 came out with something that, you know, folks seem
3 to be comfortable with.

4 What we're looking at is the tweak would put
5 -- we would put a CRNA on the board -- "we," the
6 legislature. The bill would require a CRNA in the
7 board in place of the physician on the board, and
8 that would be, at this point, the only change.

9 Now, you guys understand the legislative
10 process on any bill. You can have amendments,
11 deletions, but we left the meeting -- I also have
12 since got a draft of the bill, and that is the way
13 it is written in the draft, so that's encouraging, I
14 think.

15 Because there were some other ideas and
16 things, as y'all know, thrown out previously that
17 brought some concern, I think, to the board and the
18 staff. But I appreciate the legislators and Senator
19 Blackwell working with us on that.

20 So at this time, I'll answer any questions,
21 but those are some of the issues we're looking at.

22 MR. ADAMS: Anything for Trey?

23 MR. BOBINGER: The last thing I'll say
24 if there's not a question. Just so you know, the
25 session begins at noon on January the 3rd, which is

1 a Tuesday. So, you know, we laugh among lobbyists,
2 and Richard knows what I'm talking about. We can't
3 have a very big New Year's Day or New Year's Eve.
4 We have to be ready early.

5 Any questions?

6 MS. MONTGOMERY: Trey, appropriations.

7 MR. BOBINGER: Oh, yes. We will be
8 appearing before the House and Senate subcommittee
9 on appropriations. And I want to thank personally
10 Shan Montgomery, who does an excellent job on
11 formulating our budget numbers.

12 I walk in those meetings between Ms. Johnson
13 and Ms. Montgomery, I don't worry about anybody
14 tripping us up on our numbers because they are
15 solid; they're accurate; they can be verified. And
16 that makes it real comfortable.

17 Richard knows what I'm talking about. I've
18 sat in some of those things where somebody gets
19 asked about a line item, and they're digging around
20 in their paperwork and stumbling and stuttering. We
21 don't have that problem, so I appreciate that, Shan.

22 And we will be asking for a couple of
23 additional things in funding to meet our needs.

24 One thing that came up, while we're talking
25 about funding, is the Office of Nursing Workforce,

1 nurse workforce training. In regards to that income
2 tax credit, that office of workforce training would
3 have to certify those preceptor programs. So we
4 posed to Chairman Mims we might need, correct, a
5 little additional funding or something because it
6 may increase some work, and I think it would if that
7 law is passed.

8 So those are the kinds of things. Also on a
9 couple of other funding issues that we may seek some
10 additional funding. But that's a critical part of
11 what we do. And we've got to have a well-funded
12 agency to carry out the duties and responsibilities
13 of the Mississippi Board of Nursing.

14 Any other questions?

15 MR. ADAMS: Thank you, Trey.

16 MR. BOBINGER: Thank y'all very much.
17 Appreciate it.

18 MR. ADAMS: Office of Nursing Workforce,
19 Dr. Burks.

20 DR. BURKS: Good morning. Mr. Chairman,
21 I have several items to bring forward to the board.

22 First is the program request from Northwest
23 Mississippi Community College. They are requesting
24 to move their part-time day program from the DeSoto
25 campus to the Senatobia campus.

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1 Currently, they have four locations. That
2 part-time day program is unique. It is the first
3 time that they're offering this. And the
4 administration of the school is in support, and
5 they've provided them with ample space to actually
6 have it on this campus.

7 Their anticipated enrollment is 15 students.
8 They're proposing to start August 2023.

9 There would be no changes in their
10 curriculum or the enrollment as it is with the
11 current campus.

12 Also, their licensure passage rate for the
13 last three years has been 91 -- it's 91.43 percent.
14 They are above state as well as national level.

15 They also have 11 clinical sites. And this
16 part-time day program is supported, and that support
17 has been advertised through their advisory council
18 as well as their clinical partnerships.

19 And so my recommendation is that Northwest,
20 they be given permission to move their part-time day
21 program from the DeSoto campus to the Senatobia
22 campus.

23 Do you want me to continue?
24 DR. STEWART: May we take these one at a
25 time?

1 MR. ADAMS: Absolutely.
2 DR. STEWART: Just discussion. Are you
3 okay with that?
4 DR. BURKS: Yes.
5 MR. ADAMS: Do you have any questions?
6 DR. STEWART: Well, I'm curious as to
7 why they want to move.
8 DR. BURKS: They're moving that day
9 program. Currently, they have a night program, a
10 night part-time program.

11 And so when they went back and they started
12 looking, they were placing it on that campus
13 actually because they did not have the space on the
14 Senatobia campus.

15 DR. STEWART: Okay.
16 DR. BURKS: And so the president met
17 with the administration, and he made it happen. He
18 gave them the space that they needed. So that's why
19 I was like they have the administrative support for
20 this program.
21 DR. STEWART: Okay, thank you.
22 MR. ADAMS: We do need a motion. So the
23 recommendation is recommended that Northwest
24 Mississippi Community College be given permission to
25 move part-time day program from DeSoto campus to the

1 Senatobia campus.
2 MR. CUMMINS: I make the motion.
3 DR. STEWART: I'll second it.
4 MR. ADAMS: A motion and a second.
5 All in favor?
6 BOARD MEMBERS: Aye.
7 MR. ADAMS: Motion passes.
8 DR. BURKS: The second is from Blue
9 Cliff College. They resubmitted their declaration
10 of intent for establishing a new program in
11 Gulfport, Mississippi. In their past submission of
12 the declaration, they were actually missing some
13 components. At this time, they have satisfied those
14 components.

15 They submitted their advisory committee, and
16 on their advisory committee, they provided proof of
17 input from the current PN educators. One was a PN
18 educator. The other was a PN administrator.

19 They also provided up-to-date registration
20 and the permits from the Mississippi Office of --
21 Mississippi Community College Board Office of
22 Proprietary Schools. They provided proof of an
23 unencumbered accreditation, and that agency is
24 recognized by the United States Department of
25 Education.

1 They have a nursing consultant. That
2 nursing consultant is Dr. Tomekia Lockett. She has
3 served as an instructor in a practical nursing
4 program. She also served as a director of a
5 practical nursing program. So she's well-versed in
6 the practical nursing program and the standards.
7 And they also provided surveys from the
8 healthcare facilities in that area, that included a
9 number of LPN vacancies, the average daily census,
10 and also those establishments' willingness to serve
11 as clinical resources for the prospective program.

12 My recommendation as -- because they have
13 supplied and they resubmitted the documents, that
14 they be allowed the opportunity to proceed to stage
15 II, which is to qualify for initial accreditation.

16 In addition, if they are given the
17 opportunity to proceed, it is recommended that Blue
18 Cliff College nursing administrator be required to
19 meet with the board director of PN education prior
20 to going into that second step just for
21 clarification and make sure they understand what is
22 required of them in stage II.

23 MR. ADAMS: We have a recommendation.
24 Any questions?
25 MR. CUMMINS: I make a motion that we

BUSINESS MEETING

1 proceed.

2 MR. ADAMS: Motion by Jeremy.

3 DR. STEWART: Second.

4 MR. ADAMS: All in favor?

5 BOARD MEMBERS: Aye.

6 MR. ADAMS: Motion passes.

7 DR. BURKS: I just have some updates

8 that I would like to share with you all.

9 East Central Community College, they were

10 able to increase their enrollment to 40 students for

11 the fall of '22. They previously had been admitting

12 30 students, but when they went back and reviewed

13 their information and the students that met their

14 admission criteria, they noticed that each year from

15 2020 they had more than 40 students.

16 So they were able to increase that

17 enrollment, and they've been excited about that.

18 And those students have done well this first

19 semester.

20 Mississippi Gulf Coast College

21 apprenticeship program is up and doing well, and

22 they are appreciative to the board. That program is

23 the first in the state, and it was because of you

24 all on the board of directors that this program is

25 in existence.

1 They have a partnership with Singing River,

2 and I met with them a few weeks ago. And now other

3 healthcare facilities in the area, they're also

4 interested in creating a partnership with

5 Mississippi Gulf Coast similar to what they're doing

6 at Singing River.

7 And also with these new students, these

8 students are actually employed by Singing River.

9 They are full-time employees. And then Singing

10 River is paying for them to be in this program.

11 These students, they took what is called the

12 ATI comp predictor because they wanted to see - at

13 this point, they've been in the program two

14 semesters - where are they. And all of these

15 students scored 80 percent or higher on this comp

16 predictor, which is amazing because this is a

17 third-party exam, and many of the schools give it

18 just to allow the students to know where they are

19 and their opportunity or possibility of them passing

20 the program, and as well as passing NCLEX.

21 So as it stands, these students are doing

22 extremely well in this apprenticeship program.

23 And I also have an additional update.

24 Yesterday East Mississippi in Scooba and Co-Lin in

25 Natchez, Mississippi, they had their pinning

1 ceremonies.

2 Both schools, prior to January 2022, they

3 had been closed for more than five years, and both

4 have been granted permission to re-establish their

5 programs, again, under the purview of the board.

6 These two programs, they're well-supported

7 by their school administration, as well as their

8 community.

9 And yesterday, they had their first pinning

10 after being re-established. So we commend them for

11 that.

12 Co-Lin program was a little bit different

13 because they had developed a partnership with their

14 high school academy in January of 2022. So Co-Lin

15 had two students that were actually high school

16 students, and they're also in the practical nursing

17 program, and they were pinned yesterday. They

18 completed the programs.

19 And so both programs, they are appreciative

20 and they are grateful for the board for the

21 opportunity for them to have re-established their

22 programs.

23 The next thing I have is the annual report.

24 All the PN programs in the state, they participated

25 in the annual report. That data is currently being

1 analyzed, and we will have a report spring of 2023.

2 And the last thing I have also is this week,

3 the PN standards were presented to OLRC, and they

4 were approved with some amendments, such as

5 typographical errors.

6 That is the end of my report.

7 MR. ADAMS: Any questions for Dr. Burks?

8 That's great news. Thank you and great

9 presentation, Dr. Burks, as always.

10 MR. CUMMINS: Good job, Dr. Burks.

11 DR. STEWART: Thank you.

12 MR. ADAMS: Thank you.

13 DR. JOHNSON: Mr. Chairman, if I may.

14 MR. ADAMS: Yes, ma'am.

15 DR. JOHNSON: Dr. Burks and I have been

16 so excited this week.

17 MR. ADAMS: You can see it.

18 DR. JOHNSON: It's such a reflection on

19 your leadership, the board, because without your

20 leadership and approval, none of this could have

21 taken place. Since the PN program has come under

22 our jurisdiction, you all have done a tremendous

23 job, and our chest is stuck out so far we bump into

24 every wall.

25 And the schools are equally excited. They

BUSINESS MEETING

1 reached out. They wanted, you know, us to be there,
2 and Dr. Burks did attend. She makes an effort to
3 attend when we're solicited by the schools because
4 we think it's so important to be there to represent
5 the board.

6 So thank you all for all that you do.

7 MS. MONTGOMERY: Dr. Johnson, if I may.

8 MR. ADAMS: Yes, ma'am.

9 MS. MONTGOMERY: I will also have to add
10 to Dr. Burks' OLRC meeting. The governor said, when
11 Dr. Burks finished presenting, "Outstanding." He
12 said, "Outstanding."

13 MR. ADAMS: Great job, Dr. Burks. We're
14 very appreciative of you.

15 Moving on to board business.

16 You have board business meetings from
17 October 7th, 2022. You've had an opportunity to
18 review those minutes. Can I --

19 MR. SHAW: Motion to accept.

20 MR. ADAMS: Got a motion.

21 MR. CUMMINS: Second.

22 MR. ADAMS: And a second. All in favor?

23 BOARD MEMBERS: Aye.

24 MR. ADAMS: Any opposed?

25 (No verbal response.)

1 All in favor?

2 BOARD MEMBERS: Aye.

3 MR. ADAMS: Any opposed?

4 (No verbal response.)

5 MR. ADAMS: Future meetings: Agreed

6 settlement proposals is scheduled for February the
7 6th, 2023. Disciplinary hearing scheduled for
8 February 7th, 8th, and 9th, of 2023 at 8:30, and our
9 board business meeting will be February 10th, 2023,
10 at 11:05 A.M.

11 The board panel for those hearings will be
12 Laura Moore, Sandra Culpepper, Mary Stewart, and
13 Jeremy Cummins.

14 Executive director's report.

15 DR. JOHNSON: Good morning, Members of
16 the Board. Happy Holidays and hopefully you've
17 received your happy, but we have some additional
18 happies that we want to present to you that just
19 arrived. So this is just another added incentive of
20 our appreciation for all that you do. Vanessa will
21 pass those out.

22 But I also wanted to acknowledge our past
23 board member, past-immediate board member,
24 Ms. Shirley Jackson, who is in the audience. I
25 think she's still here today. As you recall, we

1 MR. ADAMS: Hearing panel minutes for
2 July of 2022.

3 MR. SHAW: Motion.

4 MR. ADAMS: Make a motion.

5 MR. CUMMINS: Second.

6 MR. ADAMS: And a second.

7 All in favor?

8 BOARD MEMBERS: Aye.

9 MR. ADAMS: Any opposed?

10 (No verbal response.)

11 MR. ADAMS: Agreed settlement proposal
12 minutes - July 2022.

13 MS. CULPEPPER: Motion.

14 MR. ADAMS: Make a motion by Ms. Sandra.

15 MR. CUMMINS: Second.

16 MR. ADAMS: Second by Jeremy.

17 All in favor?

18 BOARD MEMBERS: Aye.

19 MR. ADAMS: Waive reading of names of
20 motions. Can I have a motion?

21 MS. CULPEPPER: I will make the motion.

22 MR. ADAMS: Make a motion by

23 Ms. Culpepper.

24 MR. CUMMINS: Second.

25 MR. ADAMS: Second by Jeremy.

1 gave Ms. Jackson a plaque during the last board
2 meeting, but you see she's still here supporting the
3 board, and we are so happy to have her and also
4 wanted to include her in our little happies today.

5 So thank you all for all that you do.

6 While Vanessa is passing out that, I will,
7 for time's sake, proceed with my report.

8 The board of director's retreat, you already
9 know is January the 10th through 11th of 2023, at
10 the Westin. The reception will be held on January
11 the 9th.

12 Dr. Stephanie Ferguson will be presenting on
13 board governance during the retreat. The Board of
14 Nursing capitol day is scheduled for January 11th,
15 2023, as Trey has stated, from 1:30 to 4:30 P.M.
16 with setup beginning at 1:00 o'clock P.M.

17 NCSBN's mid-year meeting is March 28th
18 through the 30th, 2023, in Seattle, Washington.
19 Again, I know I've heard from one board member that
20 is anticipating attending that meeting. So if there
21 are other board members that are interested in
22 attending, please submit your request to me via
23 e-mail as soon as possible so that we can make sure
24 our budget will meet those requirements and also to
25 get you the information.

BUSINESS MEETING

1 New board member, we have a new board member
2 that is an LPN -- will be an LPN representative on
3 the board. That's Ms. Carly - and I hope I
4 pronounce her middle name correct - Tigrett Walker
5 from Madison, Mississippi. She was unable to be at
6 the meeting today due to a prior scheduling
7 conflict. However, we will provide board
8 orientation during the February meeting, and she
9 will be able to attend the retreat in January. So
10 hopefully you'll get a chance to meet her during
11 that time.

12 We also have a new ONW director, Ms. Lauren
13 Terry. Is Ms. Terry in the room? If you will
14 stand. Ms. Lauren Terry started with us on November
15 15th, 2022. She comes to us from Louisiana. She
16 has a master's in healthcare administration from the
17 University of Mississippi Medical Center, as well as
18 her undergraduate degree there.

19 So she brings with her a wealth of
20 knowledge. We're excited about having her, and we'd
21 just like to welcome her to the Board of Nursing.

22 You already heard from Trey about our
23 appropriations hearings. We will be doing those in
24 person. We always request to do a hearing in
25 person, and at this point, I am awaiting the

1 scheduling. Once the scheduling is received from
2 the offices, then I will send an e-mail to the board
3 members. I highly encourage you to participate and
4 attend those meetings if you've not done so in the
5 past. So as soon as I get that information for
6 scheduling purposes, I will get that out to you as
7 soon as possible.

8 I wanted to also let you know that the NCSBN
9 Board of Directors met on December the 6th, 2022,
10 and upheld the current passing standards for the
11 NCLEX-RN and the NCLEX-PN examinations when the Next
12 Generation NCLEX is launched on April 1st, 2023.

13 The Next Generation NCLEX, as you are aware,
14 is an enhancement of the current examinations and
15 places more emphasis on the measurement of a
16 candidate's nursing clinical judgment.

17 Multiple sources of information were used by
18 the Board of Directors of NCSBN to guide the
19 evaluation and discussion of the passing standard.
20 This process is very strenuous, and it involved the
21 convening of expert panels of nurses representing
22 the four geographic areas of NCSBN and Canada.

23 A criterion-reference standard setting
24 procedure was performed by the panels, and their
25 findings supported retaining the current passing

1 standard. The results of national surveys of
2 nursing professionals was also considered in this
3 process.

4 The NCSBN Board of Directors evaluates the
5 passing standard for the NCLEX exams every three
6 years to protect the public by ensuring minimal
7 competency for entry-level nurses. This action is
8 in accordance with the motion that was adopted in
9 1989 by the NCSBN Delegate Assembly.

10 So I wanted you all to be aware of that. A
11 lot of hard work went in to that, and there were
12 some members from our board that actually served on
13 some of those panels. And it's evidence based, so
14 they got the information. I know Sandra was one of
15 the ones, and I think Shan participated on some of
16 that information. So a lot goes into that.

17 So additionally, this is renewal year for
18 our RNs. And before I came into the meeting, I
19 asked, "Where are we with our renewals of RNs?"

20 Right now 25,630 as of today have renewed.
21 So there's about 30,000 plus RNs out there that have
22 not renewed their license yet. Today is December
23 9th. December 31st at midnight if those nurses have
24 not renewed, they will not be able to work on
25 January 1.

1 So hopefully we can get the word out. We
2 are sending out notifications. It is imperative
3 also if they have e-Notify - that's why we encourage
4 nurses to enroll in e-Notify, which is through
5 Nursys NCSBN. It does not cost them anything to do
6 that, and that is another notification that reminds
7 them of their renewal.

8 Hospital facilities can also enroll in
9 e-Notify. I think it's a minimal cost to them;
10 however, they will also get notification if they
11 have an RN working in their facility that has not
12 renewed, to remind them you have a staff member that
13 has not renewed. So it's very important that they
14 try to service e-Notify if at all possible.

15 We will be sending out an additional e-mail
16 blast. We do it -- it's on a rotational basis
17 during the renewal process, but we will be sending
18 out another one within the next week to remind RNs
19 that they have until December 31st to renew their
20 license.

21 Additionally, again, I would like to thank
22 the Mississippi Hospital Association and Richard
23 Roberson and Tim Moore, the executive director, who
24 could not be here today due to a conflict. But they
25 are very appreciative of the board reaching out, and

BUSINESS MEETING

1 we look forward to working with them on those issues
2 that were discussed earlier.

3 The last thing I would like to say is that I
4 did have a publication in the Journal of Nursing
5 Regulation. I was published in the Journal of
6 Nursing Regulation. I worked with Dr. David Benton
7 and several other EOs in the United States on an
8 issue, and I think it's -- you have it in your
9 packet, so I was very pleased about that.

10 It's dealing -- it's a lot of hard work that
11 goes into that and being an editor of some of that
12 stuff is very, very difficult and time-consuming,
13 but I think it will enhance the regulatory process.
14 Is what we're trying to do is streamline the process
15 and enhance the process of the regulatory boards
16 across the nation and internationally. So hopefully
17 this will shed some light on that.

18 Additionally, I would like to report that my
19 capstone was published also in the Association of
20 Black Nursing Faculty Foundation Journal in
21 September of 2022, and that capstone dealt with a
22 policy change here at the board, which you
23 graciously, you know, gave me permission to do, and
24 so I appreciate that and thank you for that.

25 And with that, that's all that I have,

1 Mr. Chairman.

2 MR. ADAMS: Thank you, Dr. Johnson. Any
3 questions for Dr. Johnson?

4 Moving on to the executive committee report.
5 First, I want to say thank you to the hearing panel
6 this week. We did add a day of hearings to try to
7 catch ourselves up. I believe we have an additional
8 day added in February as well. I also want to thank
9 the staff this week. Things went very smoothly. We
10 had a lot of cases, and I'm very appreciative. I
11 participated as well, Ms. Nancy Norris-Johnson,
12 Ms. Laura Moore, and Mr. Jeremy Cummins. So thank
13 you to the staff because Deanne, Andrew, all the
14 staff members did a great job. Thank you very much.

15 From executive committee, I don't have
16 anything else to bring forward. We do, as mentioned
17 by Trey and Dr. Johnson, board retreat, January 9th
18 and 10th, and then capitol day, January 11th.

19 Compliance committee - Laura Moore.

20 MS. MOORE: We have three motions to
21 bring forward.

22 I move that the board adopt the compliance
23 committee's recommendation to deny the affidavit and
24 formal reprimand issued against licensee P-326161.
25 Licensee's compliance filed shall be referred for a

1 show-cause hearing for noncompliance.

2 I move that the board adopt the compliance
3 committee's recommendation that the following
4 affidavits, formal reprimands be accepted for
5 ratification: Lorraine Gaddis, R-741224.

6 And last, I move that the board adopts the
7 compliance committee's recommendation to deny
8 licensee R-873798's request to entirely remove
9 certain restrictions currently placed upon his
10 license by the board's final order of August 26th,
11 2022. Due to extenuating circumstances surrounding
12 employment of Respondent, the board's compliance
13 committee does hereby order that Respondent's
14 indirect supervision conditions be amended as
15 approved by the compliance committee.

16 MR. ADAMS: Brought forward by
17 compliance committee.

18 MR. CUMMINS: Second.

19 MR. ADAMS: Second by Mr. Cummins.

20 All in favor?

21 BOARD MEMBERS: Aye.

22 MR. ADAMS: Any opposed?

23 (No verbal response.)

24 MR. ADAMS: Thank you, Laura.

25 Advanced practice committee: Dr. King.

1 DR. KING: Thank you, Mr. Chairman. We
2 do have a couple of things to bring forward to the
3 board that are recommendations and motions to
4 approve special privileges for -- with the
5 appropriate education, training, competency
6 validation for PRP, O-shots, P-shots, and endovenous
7 ablations. And if there is any questions or
8 discussions about that, Dr. Cagle or Dr. Johnson,
9 since they are in person, would, I'm sure, be happy
10 to discuss those if needed, but that is the motion
11 that is brought forward through advanced practice.

12 MR. ADAMS: Any questions?

13 I have a motion. Can we get a second?

14 MR. SHAW: Second.

15 MR. ADAMS: Second by Alton.

16 All in favor?

17 BOARD MEMBERS: Aye.

18 MR. ADAMS: Any opposed?

19 (No verbal response.)

20 MR. ADAMS: Thank you, Dr. King.

21 DR. KING: I do have one other thing
22 just to bring forward for discussion purposes that
23 we met in the APC committee just so the board is
24 aware that we did have some denials of special
25 privileges. And those two denials include the

BUSINESS MEETING

1 occipital nerve block for migraines and lethal
 2 injections in the correctional facility is the
 3 recommendation for advanced practice to deny those
 4 special privileges.
 5 MR. ADAMS: Thank you, Dr. King.
 6 DR. KING: Thank you.
 7 MR. ADAMS: Moving forward. Practice
 8 committee: Mary.
 9 DR. STEWART: We have no report.
 10 MR. ADAMS: Thank you, Mary.
 11 Administrative code: Dr. King.
 12 DR. KING: Thank you, Mr. Chairman.
 13 Administrative code committee did meet on
 14 11/10/2022 at 3:30, and I believe it has been
 15 distributed by Ms. Saltzman in your packet for the
 16 Rule 1.3 regarding monitored practice hours in which
 17 their recommendation of that amended rule is -- that
 18 is the motion that we would like to bring forward to
 19 the full board, and it should be in your packet and
 20 should have been distributed for review for the full
 21 board prior to this meeting.
 22 MR. SHAW: I second the motion.
 23 MR. ADAMS: Got a motion. Second by
 24 Alton.
 25 All in favor?

1 BOARD MEMBERS: Aye.
 2 MR. ADAMS: Any opposed?
 3 (No verbal response.)
 4 MR. ADAMS: Thank you, Dr. King.
 5 Anything further?
 6 DR. KING: No, sir. Just a note we will
 7 be meeting for the additional top priorities that
 8 you and the rest of the board has identified as
 9 priorities. We will be meeting those and bringing
 10 things forward pretty quickly over 2023.
 11 MR. ADAMS: Great. Thank you, Dr. King,
 12 for all of your hard work.
 13 Finance committee: Jeremy.
 14 MR. CUMMINS: All right. You've got
 15 your finance information in your packets there.
 16 Several expenditures as of October 31st are a little
 17 higher this year than they were this time last year.
 18 The exception of that category would be services,
 19 which would include our contracts, which is about
 20 \$30,000 lower.
 21 Salary expenses are higher this year than
 22 the prior year. We had a creation of new positions.
 23 We also had a salary increase due to the SEC 2
 24 increases for a majority of the board positions. So
 25 that would be the reason for that.

1 Compared to the fiscal year '22, travel is
 2 up by about \$32,000. This is due to the COVID
 3 restrictions being lifted. Also mileage rates were
 4 increased to .625 per mile.
 5 Total commodity expenses are higher due to
 6 distance learning grants that were awarded to Howard
 7 Industries. That was through a grant, but we did
 8 have to hire a consultant, and that \$24,000 came out
 9 of the board's budget for that consultant expense.
 10 Total expenses are lower overall than last
 11 year. The agency has only expended or obligated
 12 about 35.37 percent of its budget. Last year this
 13 time, we had expended 39.91 percent.
 14 Our executive director raise was submitted
 15 and approved by the State Personnel Board. So we
 16 did make some groundwork with that. Hopefully, in
 17 this next budget cycle, we'll be able to get her up
 18 to what the board originally asked for. That will
 19 be at least what we attempt to do.
 20 As far as revenue, year to date we've
 21 collected 1.962 million. In September we collected
 22 \$834,380. October revenue collected was \$879,770.
 23 Renewal fees for September and October were
 24 higher than '22. That would be comparing not
 25 RN-to-RN renewals but RN-to-LPN renewals. So they

1 were a little bit higher.
 2 We do expect to have an increase with the
 3 renewals, but currently -- right before we came in,
 4 Shan and Dr. King and myself did a little
 5 calculation, I guess you would say. Currently,
 6 we've got about 36.3 percent of RNs that have not
 7 renewed as of today. So we've got a little ways to
 8 go, and we should see some increased revenue coming
 9 in, but that is just a little more detailed
 10 breakdown there.
 11 Currently, the board has 5.1 million dollars
 12 in available cash. This cash is sufficient to meet
 13 all operational expenses.
 14 That's my report.
 15 MR. ADAMS: Thank you, Mr. Cummins. Any
 16 questions for Mr. Cummins?
 17 Office of Nursing Workforce: Ms Culpepper.
 18 MS. CULPEPPER: We have nothing to bring
 19 forward.
 20 MR. ADAMS: Thank you. We do have a few
 21 items for executive session. So I'd like to make a
 22 motion to go into executive session.
 23 MR. SHAW: I make a motion we go into
 24 closed session to determine if executive session is
 25 necessary.

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1 MR. CUMMINS: Second.
 2 MR. ADAMS: All in favor?
 3 BOARD MEMBERS: Aye.
 4 DR. STEWART: Do we need to approve the
 5 finance report?
 6 MR. ADAMS: Yes, we do.
 7 MR. CUMMINS: I put that in the form of
 8 a motion to approve the finance report.
 9 MR. SHAW: Second. I second it.
 10 MR. ADAMS: Second. Motion and a
 11 second.
 12 DR. STEWART: To approve the finance
 13 report?
 14 MR. ADAMS: Yes.
 15 All in favor?
 16 BOARD MEMBERS: Aye.
 17 MR. ADAMS: Any opposed?
 18 (No verbal response.)
 19 MR. ADAMS: We'll move into executive
 20 session.
 21 (Board exits to executive session at
 22 12:06 P.M.)
 23 (Proceeding resumes on the record at
 24 12:27 P.M.)
 25 MR. ADAMS: We're back live. During

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1 CERTIFICATE OF COURT REPORTER
 2 I, CYNTHIA HARRIS, Court Reporter and Notary
 3 Public, in and for the County of Scott, State of
 4 Mississippi, do hereby certify:
 5 That the foregoing pages contain a full,
 6 true, and correct transcription of all the
 7 proceedings taken by me at the time and place
 8 heretofore stated;
 9 That I am not kin or in anywise associated
 10 with any of the parties to said cause of action or
 11 their counsel, and that I am not financially
 12 interested in the action.
 13 IN WITNESS WHEREOF, I have hereunto set my
 14 hand and seal, this the 21st day of December, 2022.
 15
 16
 17
 18
 19
 20
 21
 22 _____
 23 CYNTHIA HARRIS, RPR, CCR 1828
 24
 25 MY COMMISSION EXPIRES: DECEMBER 10TH, 2025

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1 executive session, there was no action taken. I
 2 would like to entertain a motion to adjourn.
 3 MS. CULPEPPER: I make a motion.
 4 MR. ADAMS: Make a motion - Sandra.
 5 MR. CUMMINS: Second.
 6 MR. ADAMS: Second by Jeremy.
 7 All in favor?
 8 BOARD MEMBERS: Aye.
 9 (Whereupon, the above-entitled
 10 proceeding concluded at 12:27 P.M.)
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 25

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that approve agenda for Dec. 9, 2022

Members	Favor	Oppose	Abstain
Adams, T. J.			
Clanton, Janie			
Collins, Jan			
Culpepper, Sandra			
Cummins, Jeremy			
Gentry, Lacey			
Jackson, Shirley			
Johnson, Nancy			
King, Melissa			
Moore, Laura			
Owens, Michelle			
Shaw, Alton			
Stewart, Mary			

Jeremy Cummins

MOTION MADE BY

Nancy Johnson
MOTION SECONDED BY

DATE _____

FAVOR _____

OPPOSE _____

ABSTAIN _____

MOTION PASSED _____

MOTION FAILED _____

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that approve Blue Cliff college allowed
to proceed to stage 2 & if given nursing
administrator meet & Board PN ed.

Members	Favor	Oppose	Abstain
Adams, T. J.	/		
Clanton, Janie	/		
Collins, Jan			
Culpepper, Sandra	/		
Cummins, Jeremy			
Gentry, Lacey	/		
Jackson, Shirley			
Johnson, Nancy	/		
King, Melissa			
Moore, Laura	/		
Owens, Michelle			
Shaw, Alton	/		
Stewart, Mary			

Jeremy Cummins
 MOTION MADE BY
Mary Stewart
 MOTION SECONDED BY

DATE _____

FAVOR _____

OPPOSE _____

ABSTAIN _____

MOTION PASSED _____

MOTION FAILED _____

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that ^{Northwest MS C.C.} ~~approve from Part time~~ ^{day} ~~night~~ program of from Desoto to Senatobia Campus

Members	Favor	Oppose	Abstain
Adams, T. J.	✓		
Clanton, Janie	✓		
Collins, Jan			
Culpepper, Sandra	✓		
Cummins, Jeremy	✓		
Gentry, Lacey	✓		
Jackson, Shirley			
Johnson, Nancy			
King, Melissa	✓		
Moore, Laura	✓		
Owens, Michelle			
Shaw, Alton	✓		
Stewart, Mary	✓		

Alton Shaw
MOTION MADE BY

Mary Stewart
MOTION SECONDED BY

DATE _____

FAVOR _____

OPPOSE _____

ABSTAIN _____

MOTION PASSED _____

MOTION FAILED _____

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that Business meetings for Oct. 7, 2022

Members	Favor	Oppose	Abstain
Adams, T. J.			
Clanton, Janie			
Collins, Jan			
Culpepper, Sandra			
Cummins, Jeremy			
Gentry, Lacey			
Jackson, Shirley			
Johnson, Nancy			
King, Melissa			
Moore, Laura			
Owens, Michelle			
Shaw, Alton			
Stewart, Mary			

Alton
MOTION MADE BY

Jeremy
MOTION SECONDED BY

DATE _____

FAVOR _____

OPPOSE _____

ABSTAIN _____

MOTION PASSED _____

MOTION FAILED _____

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that Hearings Panel minutes

Members	Favor	Oppose	Abstain
Adams, T. J.			
Clanton, Janie			
Collins, Jan			
Culpepper, Sandra			
Cummins, Jeremy			
Gentry, Lacey			
Jackson, Shirley			
Johnson, Nancy			
King, Melissa			
Moore, Laura			
Owens, Michelle			
Shaw, Alton			
Stewart, Mary			

Jeremy
MOTION MADE BY

Alton
MOTION SECONDED BY

DATE _____

FAVOR _____

OPPOSE _____

ABSTAIN _____

MOTION PASSED _____

MOTION FAILED _____

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that Waive reading of names

Members	Favor	Oppose	Abstain
Adams, T. J.			
Clanton, Janie			
Collins, Jan			
Culpepper, Sandra			
Cummins, Jeremy			
Gentry, Lacey			
Jackson, Shirley			
Johnson, Nancy			
King, Melissa			
Moore, Laura			
Owens, Michelle			
Shaw, Alton			
Stewart, Mary			

Sandra
MOTION MADE BY

Jeremy
MOTION SECONDED BY

DATE

FAVOR

OPPOSE

ABSTAIN

MOTION PASSED

MOTION FAILED

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that approve APRN committed
recommendations

Members	Favor	Oppose	Abstain
Adams, T. J.	/		
Clanton, Janie	/		
Collins, Jan			
Culpepper, Sandra	/		
Cummins, Jeremy	/		
Gentry, Lacey	/		
Jackson, Shirley			
Johnson, Nancy	/		
King, Melissa	/		
Moore, Laura	/		
Owens, Michelle			
Shaw, Alton	/		
Stewart, Mary	/		

Advance
MOTION MADE BY

Alton
MOTION SECONDED BY

DATE _____

FAVOR _____

OPPOSE _____

ABSTAIN _____

MOTION PASSED _____

MOTION FAILED _____

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that approve Compliance Committee
recommendations as stated

Members	Favor	Oppose	Abstain
Adams, T. J.	/		
Clanton, Janie	/		
Collins, Jan			
Culpepper, Sandra	/		
Cummins, Jeremy	/		
Gentry, Lacey	/		
Jackson, Shirley			
Johnson, Nancy	/		
King, Melissa	/		
Moore, Laura	/		
Owens, Michelle			
Shaw, Alton	/		
Stewart, Mary	/		

Comp. Com.
MOTION MADE BY

Jeremy
MOTION SECONDED BY

DATE _____

FAVOR _____

OPPOSE _____

ABSTAIN _____

MOTION PASSED _____

MOTION FAILED _____

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that approve Administrative Code Ad Hoc

Committee

(see packet)

Members	Favor	Oppose	Abstain
Adams, T. J.	/		
Clanton, Janie	/		
Collins, Jan			
Culpepper, Sandra	/		
Cummins, Jeremy	/		
Gentry, Lacey	/		
Jackson, Shirley			
Johnson, Nancy	/		
King, Melissa	/		
Moore, Laura	/		
Owens, Michelle			
Shaw, Alton	/		
Stewart, Mary	/		

adm. code

MOTION MADE BY

Alton

MOTION SECONDED BY

DATE _____

FAVOR _____

OPPOSE _____

ABSTAIN _____

MOTION PASSED _____

MOTION FAILED _____

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that Finance Committee Report

Members	Favor	Oppose	Abstain
Adams, T. J.			
Clanton, Janie			
Collins, Jan			
Culpepper, Sandra			
Cummins, Jeremy			
Gentry, Lacey			
Jackson, Shirley			
Johnson, Nancy			
King, Melissa			
Moore, Laura			
Owens, Michelle			
Shaw, Alton			
Stewart, Mary			

Jeremy
MOTION MADE BY
Alton
MOTION SECONDED BY

DATE _____

FAVOR _____

OPPOSE _____

ABSTAIN _____

MOTION PASSED _____

MOTION FAILED _____

→ motion # EX session
no action

Jeremy / Alton 2nd

→ Adjourn - Sandra / Jeremy 2nd

~~AGREED SETTLEMENT PROPOSALS MOTION:~~

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that the meeting be closed to determine whether or not an Executive Session should be declared.

Members	Favor	Oppose	Abstain
Adams, T. J.			
Clanton, Janie			
Collins, Jan			
Culpepper, Sandra			
Cummins, Jeremy			
Gentry, Lacey			
Jackson, Shirley			
Johnson, Nancy			
King, Melissa			
Moore, Laura			
Owens, Michelle			
Shaw, Alton			
Stewart, Mary			

MOTION MADE BY

MOTION SECONDED BY

DATE

FAVOR

OPPOSE

ABSTAIN


MOTION PASSED

MOTION FAILED

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that the Board adopt the Compliance Committee's recommendation to deny the affidavit and formal reprimand issued against licensee P326161. Licensee P326161 compliance file shall be referred for a show cause hearing for noncompliance.

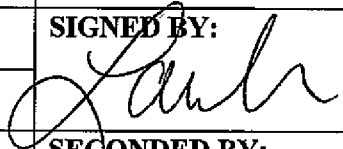
Favor Oppose Abstain Absent		Favor Oppose Abstain Absent		MOTION #:
Adams	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Moore	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	DATE: 12/9/22
Clanton	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Norris-Johnson	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Collins	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Owens	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Culpepper	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Shaw	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	SIGNED BY: 
Cummins	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Stewart	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Gentry	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	SECONDED BY: Jeremy Cummins
Jackson	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
King	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	PASS _____	FAIL _____	

MISSISSIPPI BOARD OF NURSING

MOTION # _____

I move that the Board adopt the Compliance Committee's recommendation that the following affidavits/formal reprimands be accepted for ratification.

Name	License	Date
(1) Lorraine Gaddis	R741224	12/01/2022

Favor Absent	Oppose	Abstain	Favor	Oppose	Abstain	Absent	MOTION #:			
Adams	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Moore	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Clanton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Norris- Johnson	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DATE:
Collins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Owens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12/9/22
Culpepper	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shaw	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIGNED BY:
Cummins	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stewart	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Gentry	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SECONDED BY:
Jackson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Jeremy Cummins
King	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PASS _____	FAIL _____				

MISSISSIPPI BOARD OF NURSING

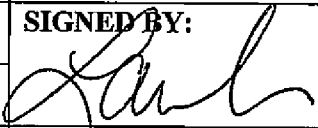
MOTION # _____

I move that the Board adopts the Compliance Committee's recommendation deny **Licensee R873798** request to entirely remove certain restrictions currently placed upon his license by the Board's Final Order of August 26, 2022. Due to extenuating circumstances surrounding employment of **RESPONDENT**, the Board's Compliance Committee does hereby Order that **RESPONDENT'S** Indirect Supervision Conditions ~~contained in paragraph three (3) on page three (3) be removed as written and replaced with the following:~~

he amended as approved by the board's compliance committee.

~~RESPONDENT shall work only regularly assigned, identified and predetermined unit(s). RESPONDENT shall not be employed by a nurse registry, temporary nurse employment agency hospice or home health agency. RESPONDENT shall not be self-employed or contract for services. Multiple employers are prohibited.~~

~~WHEREAS the amended language for paragraph three (3) has been approved by the Board's Compliance Committee, the Indirect Supervision requirement is only removed for the duration and for as long as RESPONDENT is employed by Quality Correctional Health Care on the night shift at Hinds County Raymond Detention Center. RESPONDENT agrees to make reasonable efforts to obtain a different position so that the Indirect Supervision requirement maybe met. If RESPONDENT acquires a different position other than night shift at Hinds County Raymond Detention Center, paragraph three (3) on page three (3) of the Board's Final Order dated August 26, 2022 will go into effect as originally ordered and written and the amended language above will be removed.~~

Favor Oppose Abstain Absent				Favor Oppose Abstain Absent				MOTION #:		
Adams	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Moore	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DATE: 12/9/22
Clanton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Norris- Johnson	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Collins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Owens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIGNED BY: 
Culpepper	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shaw	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cummins	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stewart	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SECONDED BY: Jeremy Cummins
Gentry	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Jackson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
King	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PASS _____ FAIL _____					