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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS

F I N A L M I N U T E S

MEETING OF:

**STATE BOARD OF EXAMINERS OF
NURSING HOME ADMINISTRATORS**

TIME: 10:32 A.M.

Held at

PENNSYLVANIA DEPARTMENT OF STATE

2525 North 7th Street

CoPA HUB, Eaton Conference Room

Harrisburg, Pennsylvania 17110

as well as

VIA MICROSOFT TEAMS

Wednesday, February 7, 2024

1 State Board of Examiners of
2 Nursing Home Administrators
3 February 7, 2024
4
5

6 BOARD MEMBERS:
7

8 Sharon K. McDermond, NHA, Chairperson
9 Arion R. Claggett, Acting Commissioner, Bureau of
10 Professional and Occupational Affairs
11 Ilene Warner-Maron, Ph.D., Vice Chairperson
12 Sara L. King, NHA, Secretary
13 Ann Chronister, Department of Health
14 Michael P. Kelly, NHA
15 Francis J. King, NHA
16 Robert L. Wernicki, NHA
17 Carrie E. Wilson, Office of Attorney General, Bureau
18 of Consumer Protection
19 David R. Hoffman, Public Member
20
21

22 BUREAU PERSONNEL:
23

24 Carole Clarke Smith, Esquire, Senior Board Counsel
25 Judith Pachter Schulder, Esquire, Board Counsel
26 Thomas M. Davis, Esquire, Board Regulatory Counsel
27 Codi M. Tucker, Esquire, Senior Board Prosecutor
28 Kathryn E. Bellfy, Esquire, Board Prosecution Liaison
29 Deidre Bowers, Board Administrator
30 Carlton Smith, Deputy Chief Counsel, Prosecution
31 Division
32 Deena Parmelee, Legal Office Administrator 1,
33 Department of State
34 Brian Poeschl, Legal Extern, Department of State
35 Benjamin McFadden, Extern, Department of State
36
37

38 ALSO PRESENT:
39

40 Kim Deline, Meeting & Marketing Manager, Pennsylvania
41 Coalition of Affiliated Healthcare & Living
42 Communities
43 Denise Whitmire, Nursing Home Administrator, The
44 Gardens at Orangeville
45 Pamela Dalberto, Human Resources/Payroll Director,
46 The Gardens at Orangeville
47 Brandy Jones, Applicant
48 Alex Ringkamp
49 Victoria Lantz
50

1 ***

2 State Board of Examiners of
3 Nursing Home Administrators

4 February 7, 2024

5 ***

6 [Pursuant to Section 708(a)(5) of the Sunshine Act,
7 at 9:30 a.m. the Board entered into Executive Session
8 with Judith Pachter Schulder, Esquire, Board Counsel,
9 for the purpose of conducting quasi-judicial
10 deliberations and to receive legal advice. The Board
11 returned to open session at 10:30 a.m.]

12 ***

13 The regularly scheduled meeting of the State
14 Board of Examiners of Nursing Home Administrators was
15 held on Wednesday, February 7, 2024. Sharon K.
16 McDermond, NHA, Chairperson, called the meeting to
17 order at 10:32 a.m.

18 ***

19 Roll Call of Board Members/Introduction of Attendees
20 [Deidre Bowers, Board Administrator, provided a roll
21 call of Board members and introduction of attendees.]

22 ***

23 [Judith Pachter Schulder, Esquire, Board Counsel,
24 informed everyone that the meeting was being recorded
25 and voluntary participation constituted consent to be

1 recorded.]

2

3 Appointment - Annual Prosecution Division

4 Presentation

5 [Carlton Smith, Esquire, Deputy Chief Counsel,
6 Prosecution Division, informed Board members that he
7 assumed his role in March 2023 when Carolyn
8 DeLaurentis was promoted to the executive deputy
9 chief counsel position and provided a brief history
10 of his professional background.

11 Mr. Smith reported a decrease in the number of
12 Bureau of Professional and Occupational Affairs
13 (BPOA) complaints for all boards from around 22,000
14 in 2022 to roughly 19,000 in 2023.

15 Mr. Smith presented the Prosecution Division's
16 Annual Report for the State Board of Examiners of
17 Nursing Home Administrators. He reported around
18 2,100 active licensees in 2023. He noted 90 cases
19 were opened in 2023. He also reported 63 current
20 open cases and 103 cases closed. He informed Board
21 members that prosecution's gold standard is to be
22 able to dispose of a case within a year across all
23 boards and is around 239 days for the State Board of
24 Examiners of Nursing Home Administrators.

25 Mr. Smith addressed discipline, noting one

1 reprimand in 2023. He informed Board members that
2 most of the cases are being disposed of by non-
3 disciplinary methods. He stated prosecution not
4 warranted is the most common and warning letters.

5 Mr. Smith noted warning letters are the most
6 appropriate course of action when cases are fairly
7 mundane, where the person does not have a significant
8 discipline history or there may be problems from an
9 evidentiary standpoint. He explained that
10 prosecution not warranted may involve considering the
11 seriousness of the allegations and how confident an
12 expert is that there was a violation.

13 Mr. Smith informed everyone that the complainant
14 who files a complaint with their office first
15 receives an acknowledgment letter that the complaint
16 was received and being investigated. He stated the
17 complainant does not receive updates throughout the
18 investigation but will receive a notification of the
19 final disposition.

20 Chair McDermond thanked Mr. Smith for the
21 presentation.]

22

23 Appointment - Pamela Dalberto - 39.5(b)(5) Applicant
24 [Sara L. King, NHA, Secretary, asked Ms. Dalberto to
25 describe the current position and extent of her

1 responsibilities at the facility.

2 Pamela Dalberto, Human Resources/Payroll
3 Director, The Gardens at Orangeville, addressed her
4 role in payroll and assisting with department
5 managers. She noted working closely with laundry,
6 housekeeping, and the activities department as far as
7 day-to-day operations.

8 Ms. King asked Ms. Dalberto to discuss
9 supervision of her employees, who she reports
10 directly to, and whether she has any involvement with
11 corrective action leading to termination or any
12 performance improvement plans.

13 Ms. Dalberto noted she reports to her
14 administrator and works with management staff to work
15 through disciplinary processes. She mentioned that
16 she often sits in during disciplinary action with a
17 staff member. She believed she had a strong presence
18 in the building with managers and floor staff.

19 Ms. King requested information regarding their
20 last state survey and her involvement.

21 Ms. Dalberto stated their annual survey was
22 completed last week. She noted the administrator was
23 not present the first two days, and she was present
24 on the initial entrance, walked through the first
25 couple of days with the director of nursing, and

1 participated in gathering information. She noted
2 helping with the plan of correction but has not
3 completed one from start to finish.

4 Ms. King asked Ms. Dalberto to discuss the most
5 significant finding and her response prior to writing
6 a plan of correction.

7 Ms. Dalberto explained that she looked at the
8 tags as far as scope and severity. She mentioned not
9 being sure how to answer the issue that may be the
10 most severe.

11 Ms. Whitmire explained that it would be infection
12 control for the facility itself from the last survey
13 but reported having a strong commitment with LTC RISE
14 for assistance.

15 Ms. Pachter Schulder asked Ms. Dalberto to
16 explain the issue with infection control.

17 Ms. Dalberto noted meeting with surveyors and
18 discussing the housekeeping schedule and training.
19 She mentioned there were issues from a dietary
20 standpoint and some of the rooms. She mentioned two
21 more candidates are in the process of training for
22 that department to help as far as the overall
23 cleanliness of the facility.

24 Ms. King asked Ms. Dalberto to discuss her role
25 when preparing the budget and reviewing the per

1 patient day costs (PPD). She mentioned that staffing
2 is an issue everywhere and asked how Ms. Dalberto
3 correlates all of those issues.

4 Ms. Dalberto noted attending daily staffing
5 meetings looking at the census and acuity. She noted
6 PPD is important, but they also look at what they
7 have during the next 24 to 48 hours. She addressed
8 ratio and minimum state requirements for additional
9 support staff. She reported a PPD of 3.04.

10 Dr. Warner-Maroon asked whether Ms. Dalberto was
11 present when their facility was cited during prior
12 inspections in August and September of last year for
13 insufficient nursing staff and why the facility was
14 cited.

15 Ms. Dalberto noted it to be a learning curve as
16 far as ratio goes. She reported having COVID in the
17 facility in September and experiencing a number of
18 call offs. She mentioned being more diligent over
19 the last three to four months by having additional
20 PRN staff through agencies.

21 Dr. Wernicki asked what percentage of nursing
22 staff is through an agency.

23 Ms. Dalberto reported 10% of their staff is
24 through their three agencies, and they would be able
25 to go higher if necessary. She also addressed trying

1 to recruit people as permanent staff who come to
2 their facility from agencies.

3 Dr. Warner-Maron asked how they are trying to
4 retain staff rather than just focus on recruitment.

5 Ms. Dalberto explained that their director of
6 nursing and assistant director meet with nursing
7 staff and reported changes to benefits, tuition
8 reimbursement, sign-on bonuses and referral bonuses
9 for current staff, along with cross training.

10 Dr. Warner-Maron asked whether they have ever
11 needed less staff when census decreases.

12 Ms. Dalberto explained that agency staff would be
13 canceled out first and other staff would be asked if
14 they would like to go home. She mentioned having
15 many things for them to do in the activity department
16 if they choose to stay.

17 Dr. Warner-Maron asked how they have seen COVID
18 change the responsibilities of running a skilled
19 nursing facility.

20 Ms. Dalberto reported struggling with
21 requirements in the facility from 2020 to 2021 but
22 working very hard over the last two years as far as
23 training new people and additional education to keep
24 residents safe. She noted there is a different
25 mindset now if they have COVID in the building as

1 opposed to three years ago.

2 Chair McDermond asked Ms. Dalberto would handle a
3 situation where a certified nursing assistant (CNA)
4 has been repeatedly late to work several days within
5 a pay period several pay periods in a row.

6 Ms. Dalberto explained that she would have a
7 conversation with the employee as to why they are not
8 able to be there, where they may need a shift change.
9 She would also discuss the importance of being on
10 time for the employee leaving their shift and then it
11 would go to progressive discipline.

12 Chair McDermond asked Ms. Dalberto to describe
13 her interactions and responsibilities within the
14 nursing department.

15 Ms. Dalberto started in long-term care as a
16 certified nursing assistant, and it is not uncommon
17 for her to help on the floor. She reported working
18 closely with their director of nursing and assistant
19 director to discuss staffing and where to allocate
20 people. She addressed clinical and stand-up meetings
21 and her role in dietary and the grievance process.
22 She also discussed her role in Quality Assurance
23 Performance Improvement.

24 Chair McDermond asked whether she has been
25 involved in contracting or had any exposure.

1 Ms. Dalberto is involved from a nursing
2 perspective as far as reviewing contract and the
3 credentials of individuals. She mentioned not being
4 involved with some of the other vendors.

5 Ms. Whitmire commented that Ms. Dalberto will be
6 involved in the Plan of Correction by identifying
7 respiratory symptoms quicker, sanitation in the
8 kitchen, urinary leg bags in the bathrooms, along
9 with working with the RISE team.

10 Ms. Chronister asked whether Ms. Dalberto has
11 been involved with reporting events to the Department
12 of Health.

13 Ms. Dalberto explained that she has observed and
14 been involved in investigations but has not been
15 involved in the reporting process.

16 Ms. Whitmire commented that Ms. Dalberto would be
17 an asset wherever she decides to work.

18 Ms. Pachter Schulder informed Ms. Dalberto that
19 the Board will deliberate on her application, noting
20 she will also receive a letter with the results but
21 welcomed her to continue to participate virtually for
22 the decision after Executive Session.]

23

24 Appointment - Brandy Jones - 39.5(b)(5) Applicant
25 [Sara L. King, NHA, Secretary, asked Ms. Jones to

1 describe her current position at the facility and
2 extent of her responsibilities.

3 Brandy Jones was the assistant administrator at a
4 396-bed facility in the west Philadelphia area. She
5 reported managing all departments during her time
6 there, noting everyone reported to her and then she
7 communicated the information to the administrator.
8 She noted currently being an assistant administrator
9 in New Jersey but that she will be practicing in
10 Pennsylvania once she receives her license.

11 Ms. King asked whether Ms. Jones is involved in
12 hiring or disciplinary action up to termination of
13 employees.

14 Ms. Jones noted hiring several employees and
15 being involved in recruitment and retention. She
16 reporting having labor meetings every week with
17 department heads to see if they need help. She also
18 reported doing investigations and reporting to the
19 Department of Health (DOH), and depending on whether
20 it was substantiated or unsubstantiated, she would
21 terminate the employee.

22 Ms. King asked Ms. Jones to describe how she
23 obtained the skills needed in order to supervise
24 staff and her team.

25 Ms. Jones started out as a medication technician

1 in assistant living, moved over to long-term care and
2 became a recreation aide, a unit clerk, business
3 office manager, administrative assistant, and then
4 became assistant administrator. She mentioned that
5 working in all of the departments allowed her to grow
6 within the nursing home and run the nursing home to
7 take care of the residents.

8 Ms. King asked Ms. Jones to discuss her role in
9 the most recent survey.

10 Ms. Jones addressed her last survey with Mr.
11 Ringkamp at the 396 building. She noted coming out
12 with 14 tags and playing a huge role to make sure
13 everything was running fluently. She mentioned
14 getting hit bad care plans, and she assisted the
15 nursing team to ensure they went over care plans and
16 interventions for residents, especially falls.

17 Mr. Jones noted being in charge of risks,
18 especially during event reporting, where she made
19 sure fall care plans and interventions were updated
20 inside the clinical meeting.

21 Ms. King asked Ms. Jones to discuss her budgeted
22 PPD and how she determines what is budgeted for PPD.

23 Ms. Jones noted Mr. Ringkamp was working on that
24 with her because she struggled with that a bit. She
25 reported taking acuity into account but also the

1 mandated ratio to find the balance. She reported a
2 PPD of 2.8.

3 Ms. King asked Ms. Jones to address the average
4 acuity for the building.

5 Ms. Jones explained that it was a lot of behavior
6 and psych, along with skilled because they had a lot
7 of homelessness and drug addiction, especially after
8 COVID. She mentioned the acuity of the building did
9 start to change a little bit, but they still had a
10 large number of residents who resided there
11 previously from COVID and had been there over 10
12 years. She reported it to be a good mix of skilled
13 and long-term care, along with the behavioral health
14 and mental health issues.

15 Ms. King asked what the PPD looked like when the
16 acuity was increasing during that time frame.

17 Ms. Jones reported having between a 2.8 and 3.0.
18 Speaker 4.

19 Dr. Warner-Marion mentioned that the previous
20 facility, Care Pavilion, has had a lot of different
21 changes and challenges over the last few years with
22 multiple changes in ownership and difficulties with
23 state surveys, along with the issue of the red stop
24 sign on the medicare.gov website page. She asked why
25 the facility has that red stop sign and what Ms.

1 Jones did or tried to do in order to remediate that
2 issue.

3 Ms. Jones stated Care Pavilion comes with some
4 challenges because they had a lot of homelessness and
5 drug addicted residents. She was not sure why the
6 red stop sign is there because she did not believe it
7 was there before. She believe the red stop sign is
8 for no admissions and possible immediate jeopardy.

9 Dr. Warner-Maron explained that the stop sign is
10 actually abuse, which could be staff to resident
11 abuse or resident to resident abuse. She asked what
12 kinds of interventions Ms. Jones would want to see in
13 the facility with a large number of people with
14 behavioral health issues who may have more of a
15 tendency to commit resident to resident abuse than
16 when you had more traditional older adults on the
17 building.

18 Ms. Jones stated there was a lot of education on
19 behavioral health training from specialists for staff
20 because the population was changing from older
21 residents to younger residents. She also noted
22 having abuse training quarterly.

23 Dr. Warner-Maron asked Ms. Jones whether she
24 experienced a decrease in census and asked staff to
25 go home. She also asked whether she self-imposed a

1 ban on admissions.

2 Ms. Jones experienced a decrease in census but
3 never put a self-imposed ban on admissions.

4 Dr. Warner-Maron asked whether Ms. Jones had seen
5 changes in the responsibilities for management due to
6 COVID.

7 Ms. Jones reported management style being lax
8 before COVID and more hands on during COVID. She
9 noted more infection control and staff not being as
10 confident as before COVID because of the changes in
11 residents.

12 Chair McDermond asked Ms. Jones to explain her
13 response to an employee who is repeatedly late for
14 work.

15 Ms. Jones stated she would have a conversation
16 with the employee to see if she could help and then
17 discipline the employee per the policy.

18 Chair McDermond asked Ms. Jones to describe her
19 involvement in the nursing department in her role as
20 an assistant administrator.

21 Ms. Jones noted working closely with the nursing
22 department to collect documentation, interview staff,
23 and provide information to DOH, along with watching
24 to see if anything was trending or that she needed to
25 talk to families about and working with social

1 service. She addressed trends she identified during
2 process reviews by utilizing the fishbone to identify
3 falls.

4 Chair McDermond asked whether Ms. Jones had any
5 involvement or responsibilities with the maintenance
6 department.

7 Ms. Jones noted running a safety committee for
8 the building every month and giving out audits to all
9 of the staff to make sure everything was safe
10 throughout the building. She also noted the audits
11 were returned to her and discussed with the
12 maintenance director.

13 Chair McDermond asked Ms. Jones to describe her
14 role in Quality Assurance Performance Improvement
15 (QAPI) and their grievance program.

16 Ms. Jones collected all of the documentation
17 from everyone and entered the data into the QAPI
18 form, along with Mr. Ringkamp. She noted the
19 grievance process was huge for Care Pavilion and
20 addressed their angel round program, where residents
21 were able to express themselves and trust staff.

22 Chair McDermond asked whether Ms. Jones had any
23 experience with contracting new providers.

24 Ms. Jones noted having experience reviewing
25 contracts with hospice and sometimes a vendor for

1 maintenance.

2 Mr. Hoffman asked Ms. Jones to describe her role
3 as it pertained to the ethics and compliance program
4 within their organization.

5 Ms. Jones reported having a compliance hotline
6 with posters all over the facility, where anyone
7 could call the compliance hotline and make a
8 complaint. She noted they did not receive many
9 complaints through the compliance hotline because
10 they had a good open-door policy with staff and with
11 residents because of the angel round program.

12 Mr. Hoffman asked Ms. Jones what types of
13 activities she would like to see for residents with
14 behavioral health issues, mental health issues, and
15 substance use disorder.

16 Ms. Jones implemented the 55 and younger club,
17 where they could play cards and listen to music,
18 along with discussion groups concerning what is
19 happening in the world for the younger population.
20 She mentioned that she would like to see more focus
21 or discussion groups at late night hours.

22 Mr. Ringkamp noted working with Ms. Jones as the
23 regional director of operations for a company in
24 Pennsylvania. He mentioned sitting as interim
25 administrator at Care Pavilion while they searched

1 for a candidate. He noted working closely with Ms.
2 Jones at a very challenging nursing home that served
3 a community with a lot of mental health issues, drug
4 addiction, and homelessness.

5 Mr. Ringkamp stated Ms. Jones ran the RISK
6 program and tried to navigate the facility out of
7 harm's way when it came to potential crisis and
8 actual crisis. He noted Ms. Jones was involved in
9 many departments. He reported running the ethics
10 committee and not sharing that with Ms. Jones but did
11 not she was very involved with the compliance program
12 and hotline.

13 Mr. Ringkamp stated Ms. Jones was the Chair in
14 creating activities for younger populated units and
15 has done an excellent job regarding QAPI. He
16 referred to the number of deficiencies and informed
17 everyone that they took over a building that had a
18 provisional 2 license and multiple immediate jeopardy
19 (IJ) citations.

20 Mr. Ringkamp explained that the work they did in
21 that building was very relevant to the building's
22 success and is why he moved Ms. Jones from a 180-bed
23 facility, where she was the business office manager,
24 to Care Pavilion as the assistant administrator in
25 training. He stated Pennsylvania would be a better

1 place in the nursing home business if Ms. Jones is at
2 the helm because she is willing to learn and knows
3 her weaknesses. He mentioned that Ms. Jones uses
4 critical element pathways to research and teach
5 herself the regulations and how to create policy, and
6 he believed that kind of knowledge is a recipe for
7 success.

8 Ms. Pachter Schulder informed Ms. Jones that the
9 Board will deliberate during Executive Session and
10 welcomed her to continue to participate virtually,
11 but noted she would also receive a letter from the
12 Board.]

13 ***

14 Report of Prosecutorial Division
15 [Kathryn E. Bellfry, Esquire, Board Prosecution
16 Liaison, on behalf of Trista M. Boyd, Esquire, Board
17 Prosecutor, presented the Consent Agreement for Case
18 No. 22-62-008638.]

19 ***

20 Approval of minutes of the November 1, 2023 meeting
21 CHAIRPERSON MCDERMOND:

22 Motion to approve the minutes for
23 November 1, 2023.

24 DR. WARNER-MARON:

25 So moved.

1 ACTING COMMISSIONER CLAGGETT:

2 Second.

3 MS. BOWERS:

4 McDermond, abstain; Claggett, aye;

5 Warner-Maroon, aye; Sara King, aye;

6 Chronister, aye; Kelly, abstain;

7 Francis King, aye; Wernicki, abstain;

8 Wilson, aye; Hoffman, aye.

9 [The motion carried. Sharon McDermond, Michael
10 Kelly, and Robert Wernicki abstained from voting on
11 the motion.]

12 ***

13 Report of Board Counsel - No Report

14 [Judith Pachter Schulder, Esquire, Board Counsel, had
15 nothing to report from Board Counsel.

16 Dr. Warner-Maroon noted changing the makeup of the
17 CEUs that will be in effect for the licensure cycle
18 that ends June 30, 2024. She mentioned that the
19 change included taking 12 units of the 48 CEUs and
20 having them specifically focused on a combination of
21 disaster planning and infection control. She asked
22 how they notified the licensees ahead of time to make
23 sure that they are aware of this change in the
24 requirement.

25 Ms. Pachter Schulder asked whether the change was

1 done by a regulation and asked Ms. Bowers whether
2 licensees were notified of the change.

3 Chair McDermond recalled that there was
4 communication on the Board website and through a
5 distribution list. She also noted receiving
6 something as a license holder.

7 Mr. King remembered receiving an email to his
8 personal account attached to his license of the new
9 rule.

10 Ms. Pachter Schulder addressed the importance of
11 knowing whether all licensees received the message,
12 noting the Board would have an issue with enforcement
13 if everyone did not receive the email but could send
14 a reminder email blast if everyone received the
15 message.

16 Dr. Warner-Maroon suggested placing a reminder of
17 the new regulations on the website.

18 Ms. Pachter Schulder whether Mr. Davis knew
19 whether it was a regulation of the Board that changed
20 that requirement or whether they were directed by way
21 of an email blast to licensee letting them know of
22 that directive.

23 Kim Deline, Meeting & Marketing Manager,
24 Pennsylvania Coalition of Affiliated Healthcare &
25 Living Communities (PACAH), noted being present for

1 discussions surrounding infection control and
2 emergency preparedness requirements. She mentioned
3 that she started advertising and communicating this
4 once the regulations were determined and informed the
5 former Board administrator.

6 Ms. Deline stated they advertise that for all of
7 their conferences and webinars and note they will be
8 offering this many credits and specify whether it is
9 infection control or emergency preparedness related.

10 She reported that all of their members have been
11 notified of the change.

12

13 Ms. Pachter Schulder informed Board members that
14 Mr. Davis was having difficulty with his microphone
15 and was unable to speak to the issue. She suggested
16 sending an email blast to all licensees reminding
17 them of the requirement. She explained that if the
18 blast did not go out or if it is not a regulation
19 that they probably will have to wait for another
20 session for that, but this way will give them an
21 alternative pathway.

22 Mr. King recommended including a clarification
23 message that there is no required combination of the
24 12 credits.

25 Dr. Warner-Maroon further noted it is simply 12

1 credits in infection control and disaster
2 preparedness, where someone could do all 12 in 1 area
3 or 6 and 6 because there is no breakdown requirement
4 for how many in infection versus disaster planning.

5 Mr. King remembered there was no breakdown,
6 noting it was assumed that there would be at least 1
7 and 11, where it was not intended to be all 12-
8 infection control but was intended to be a
9 combination.

10 Chair McDermond remembered that it was left open
11 ended because some people might come from a nursing
12 background and have more infection control and vice
13 versa. She believed the Board initially wanted to
14 make sure they had some autonomy to self-reflect.

15 Ms. Pachter Schulder informed Board members that
16 Mr. Davis let her know it was a regulation and is on
17 the Independent Regulatory Review Commission's
18 website. She wanted to look for the information on
19 the website and provide the information to the
20 Board.]

21 ***

22 Report of Board Chairperson

23 CHAIRPERSON MCDERMOND:

24 The first Temporary Permit Application
25 to Ratify is Julie Barrett. I need to

1 do a motion for approval.

2 DR. WARNER-MARON:

3 So moved.

4 ACTING COMMISSIONER CLAGGETT:

5 Second.

6 MS. BOWERS:

7 McDermond, aye; Claggett, aye; Warner-
8 Maron, aye; Sara King, aye; Chronister,
9 aye; Kelly, aye; Francis King, aye;
10 Wernicki, aye; Wilson, aye; Hoffman,
11 aye.

12 [The motion carried unanimously.]

13 ***

14 CHAIRPERSON MCDERMOND:

15 The second Temporary Permit Application
16 to Ratify is Laura Murnyack. Would
17 someone like to make a motion for
18 approval?

19 DR. WARNER-MARON:

20 So moved.

21 ACTING COMMISSIONER CLAGGETT:

22 Second.

23 MS. BOWERS:

24 McDermond, aye; Claggett, aye; Warner-
25 Maron, aye; Sara King, aye; Chronister,

1 recuse; Kelly, aye; Francis King, aye;
2 Wernicki, aye; Wilson, aye; Hoffman,
3 aye.

4 [The motion carried. Ann Chronister recused herself
5 from deliberations and voting on the motion.]

6 ***

7 [Judith Pachter Schulder, Esquire, Board Counsel,
8 informed everyone that the regulations were published
9 as final on May 21, 2022, and Chris Stuckey indicated
10 on July 26, 2022, a notice and breakdown was sent.
11 She mentioned that she would get a copy of that and
12 use that notice as a basis for the email blast.]

13 ***

14 Report of Acting Commissioner - No Report

15 ***

16 Report of Board Administrator - No Report

17 ***

18 Report of Board Members - No Report

19 ***

20 Report of Committees - Examination Committee - No
21 Report

22 ***

23 Report of Committees - Education Committee - No
24 Report

25 ***

1 Report of Committees - State Examination Review
2 Committee - No Report

3 ***

4 Report of Committees - Administrator-in-Training
5 (AIT) Review Committee - No Report

6 ***

7 Report of Committees - Regulatory Committee - No
8 Report

9 ***

10 Discussion Items - 2025 Board Meeting Dates

11 CHAIRPERSON MCDERMOND:

12 We need to approve the Board meeting
13 dates for 2025. Who will make a motion
14 for approval?

15 DR. WARNER-MARON:

16 So moved.

17 ACTING COMMISSIONER CLAGGETT:

18 Second.

19 MS. BOWERS:

20 McDermond, aye; Claggett, aye; Warner-
21 Maron, aye; Sara King, aye; Chronister,
22 aye; Kelly, aye; Francis King, aye;
23 Wernicki, aye; Wilson, aye; Hoffman,
24 aye.

25 [The motion carried unanimously.]

1 ***

2 Discussion Items - Election of Officers

3 MS. PACHTER SCHULDER:

4 Is there a Board member desirous of
5 making a motion either for all of the
6 offices or one office?

7 MS. KING:

8 I would like to make a motion to move
9 Ilene Warner-Maron into the Chairperson
10 role.

11 CHAIRPERSON MCDERMOND:

12 Second.

13 MS. PACHTER SCHULDER:

14 Is there any discussion on that motion?
15 Do you agree to accept?

16 DR. WARNER-MARON:

17 Yes.

18 MS. BOWERS:

19 McDermond, aye; Claggett, aye; Warner-
20 Maron, aye; Sara King, aye; Chronister,
21 aye; Kelly, aye; Francis King, aye;
22 Wernicki, aye; Wilson, aye; Hoffman,
23 aye.

24 [The motion carried unanimously.]

25 ***

1 MS. PACHTER SCHULDER:

2 Is there a motion for Vice Chair?

3 DR. WARNER-MARON:

4 I motion that Sara King be the Vice
5 Chair of the Board.

6 ACTING COMMISSIONER CLAGGETT:

7 Second.

8 MS. BOWERS:

9 McDermond, aye; Claggett, aye; Warner-
10 Maron, aye; Sara King, aye; Chronister,
11 aye; Kelly, aye; Francis King, aye;
12 Wernicki, aye; Wilson, aye; Hoffman,
13 aye.

14 [The motion carried unanimously.]

15 ***

16 MS. PACHTER SCHULDER:

17 Is there a motion to name a Secretary?

18 MR. KELLY:

19 I nominate David Hoffman.

20 DR. WARNER-MARON:

21 I second.

22 MS. BOWERS:

23 McDermond, aye; Claggett, aye; Warner-
24 Maron, aye; Sara King, aye; Chronister,
25 aye; Kelly, aye; Francis King, aye;

1 Ms. Pachter Schulder noted the Board could also
2 talk about whether they wanted to add that kind of
3 language or have that language and have a mental
4 health requirement and perhaps explore what other
5 states might do regarding continuing education and
6 mental health issues.]

7

8 [Pursuant to Section 708(a)(5) of the Sunshine Act,
9 at 12:15 p.m. the Board entered into Executive
10 Session with Judith Pachter Schulder, Esquire, Board
11 Counsel, to discuss the Consent Agreement and two
12 Applications before the Board. The Board returned to
13 open session at 12:29 p.m.]

14 MOTIONS

15 MS. PACHTER SCHULDER:

16 During Executive Session, the Board
17 engaged in quasi-judicial deliberations
18 under the matters of this agenda and
19 the Consent Agreement from the
20 prosecuting attorney, Case No. 22-62-
21 008638.

22 Is there a motion to approve?

23 DR. WARNER-MARON:

24 So moved.

25 CHAIRPERSON MCDERMOND:

1 Second.

2 MS. BOWERS:

3 McDermond, aye; Claggett, aye; Warner-
4 Maron, aye; Sara King, aye; Chronister,
5 aye; Kelly, aye; Francis King, aye;
6 Wernicki, aye; Wilson, aye; Hoffman,
7 aye.

8 [The motion carried unanimously. The Respondent's
9 name is Samuel Joseph Zaffuto, NHA.]

10 ***

11 MS. PACHTER SCHULDER:

12 Also during Executive Session, the
13 Board discussed the Application of
14 Pamela Dalberto for Licensure under
15 § 39.5(b)(5) of the regulations.

16 Is there a motion to approve that
17 Application?

18 DR. WARNER-MARON:

19 So moved.

20 CHAIRPERSON MCDERMOND:

21 Second.

22 MS. BOWERS:

23 McDermond, aye; Claggett, aye; Warner-
24 Maron, aye; Sara King, aye; Chronister,
25 aye; Kelly, aye; Francis King, aye;

1 members that the email blast discussed earlier has
2 been found. He noted they would re-send the email
3 blast and add it to the Board's website.]

4 ***

5 [Ilene Warner-Maron, Ph.D., Vice Chair, thanked
6 Sharon McDermond for 10 years of service to the
7 Board.]

8 ***

9 Adjournment

10 ACTING COMMISSIONER CLAGGETT:

11 We need a motion to adjourn.

12 WARNER-MARON:

13 So moved.

14 CHAIRPERSON MCDERMOND:

15 Second.

16 ***

17 [There being no further business, the State Board of
18 Examiners of Nursing Home Administrators Meeting
19 adjourned at 12:32 p.m.]

20 ***

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CERTIFICATE

I hereby certify that the foregoing summary minutes of the State Board of Examiners of Nursing Home Administrators, was reduced to writing by me or under my supervision, and that the minutes accurately summarize the substance of the State Board of Examiners of Nursing Home Administrators meeting.



Victoria Lantz,
Minute Clerk
Sargent's Court Reporting
Service, Inc.

STATE BOARD OF EXAMINERS OF
NURSING HOME ADMINISTRATORS
REFERENCE INDEX

February 7, 2024

	TIME	AGENDA
1		
2		
3		
4		
5		
6		
7		
8		
9		
10	10:00	Executive Session
11	10:30	Return to Open Session
12		
13	10:32	Official Call to Order
14		
15	10:33	Roll Call
16		
17	10:33	Introduction of Attendees
18		
19	10:35	Appointment - Carlton Smith, Deputy
20		Chief Counsel, Annual Prosecution
21		Division Report
22		
23	10:36	Appointment - Pamela Dalberto -
24		39.5(b)(5) Applicant
25		
26	11:20	Appointment - Brandy Jones -
27		39.5(b)(5) Applicant
28		
29	11:51	Report of Prosecutorial Division
30		
31	11:52	Approval of Minutes
32		
33	12:04	Report of Board Chairperson
34		
35	12:07	Discussion Items
36		
37	12:15	Executive Session
38	12:29	Return to Open Session
39		
40	12:29	Motions
41		
42	12:32	Adjournment
43		
44		
45		
46		
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