

The February 2020 Arizona Board of Examiners of Nursing Care Institution Administrators and Assisted Living Facility Managers performance audit and sunset review found that the Board did not ensure all license/certificate applicants met statutory requirements or that it timely investigated and adjudicated all complaints. The Board's status in implementing the recommendations is as follows:

### Status of 17 recommendations

Implemented	16
Partially implemented in a different manner	1

Unless otherwise directed by the Joint Legislative Audit Committee, this report concludes our follow-up work on the Board's efforts to implement the recommendations from the February 2020 report.

### Finding 1: Board issued or renewed some administrator and manager licenses/certificates despite not ensuring some requirements were met

1. The Board should continue to implement its new policies and procedures to ensure initial administrator and manager applicants submit the required documentation to demonstrate lawful presence.  
**Implemented at 6 months**
2. The Board should continue to implement its revised policies and procedures for verifying the validity of an initial and renewal applicant's fingerprint clearance card and documenting this verification prior to initially issuing or renewing a license or certificate.

**Implemented at 6 months**

### Finding 2: Board has not timely investigated and adjudicated some complaints, which may have put residents at risk

3. The Board should work with DHS to develop a process for obtaining in a timely manner the names of the responsible certified managers associated with the assisted living facilities identified in DHS reports.  
**Implemented at 42 months**—The Board and DHS have developed and implemented an automated process for providing the Board with the names of responsible certified managers identified in DHS reports by approximately the 6th day of every month. Our review of monthly information provided by DHS to the Board between January and June 2023 found that DHS followed the process for all 6 months.
4. The Board should revise and implement its DHS report review policies and procedures to incorporate a requirement for monitoring Board staff compliance with these policies and procedures.  
**Implemented at 42 months**
5. The Board should implement and further revise its complaint handling policies and procedures to include the following requirements:

- a. Monitoring Board staff compliance with these policies and procedures.

**Implemented at 30 months**

- b. Regularly generating and reviewing management reports that provide information on the timeliness of the complaint handling process.

**Implemented at 30 months**

- c. Generating monthly Board reports that include complaint handling timeliness information, such as how long complaints have been open and reasons for any complaint handling delays.

**Partially implemented in a different manner at 42 months**—Board policy requires Board staff to prepare a monthly report for the Board on the status of all complaints, including how long complaints have been open and reasons for any complaint handling delays. Because the Board is not statutorily required to meet monthly, Board staff instead provide the Board with a report listing all open complaints, including how long the complaints have been open, in advance of each Board meeting. However, this report does not include information related to reasons for complaint handling delays. Additionally, although Board policy requires the report to include information about the timeliness of closed complaints, the report does not include this information.

### **Finding 3: Board did not provide adequate public information in response to anonymous phone calls we made**

- 6. The Board should continue to implement and ensure staff compliance with its newly revised policies and procedures for providing public information over the phone.

**Implemented at 30 months**

### **Sunset Factor 2: The extent to which the Board has met its statutory objective and purpose and the efficiency with which it has operated.**

- 7. The Board should work with its Assistant Attorney General to obtain an exemption to the rule-making moratorium and contingent on receiving an exemption, modify its rules to provide the Board with greater flexibility to conduct continuing education audits between renewal cycles for licensed administrators and certified managers.

**Implemented at 6 months**

- 8. The Board should implement its new policies and procedures for ensuring that assisted living facility manager training programs and assisted living facility caregiver training programs receive onsite or telephonic evaluations when these training programs are approved and renewed pursuant to rule requirements.

**Implemented at 6 months**

### **Sunset Factor 3: The extent to which the Board serves the entire State rather than specific interests.**

- 9. The Board should develop and implement policies and procedures for addressing potential conflicts of interest in accordance with State laws, including (1) requiring Board members and staff to annually disclose certain interests in the Board's official records through a signed form, (2) maintaining completed forms in a special file available for public inspection, and (3) implementing a process for managing any disclosed potential conflicts of interest to ensure the conflict will not interfere with the performance of Board member and staff duties.

**Implemented at 42 months**

## **Sunset Factor 5: The extent to which the Board has encouraged input from the public before adopting its rules and the extent to which it has informed the public as to its actions and their expected impact on the public.**

10. The Board should continue to implement its newly revised complaint handling policies and procedures to ensure its online licensing information provides accurate information to the public.

**Implemented at 6 months**

11. The Board should conduct a risk-based review of its online licensing information to ensure the information is complete and accurate.

**Implemented at 6 months**

## **Sunset Factor 6: The extent to which the Board has been able to investigate and resolve complaints that are within its jurisdiction.**

12. The Board should conduct a review of its costs for investigating complaints by taking the following steps:

- a. Develop a method for determining direct and indirect costs associated with complaint investigations.

**Implemented at 6 months**

- b. After developing this cost methodology, establish an hourly rate for investigations.

**Implemented at 6 months**

- c. Establish a method for tracking and documenting staff time and activities to investigate each complaint.

**Implemented at 6 months**

13. The Board should develop and implement policies and procedures for Board members and staff that include implementing the cost methodology, tracking Board staff time and overhead costs, and documenting justification for the amounts charged to provide guidance for when the reimbursement of investigative costs should be included in the consent agreement.

**Implemented at 30 months**