



**BOARD OF EXAMINERS OF NURSING CARE INSTITUTION ADMINISTRATORS AND
ASSISTED LIVING FACILITY MANAGERS**

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Douglas A. Ducey
Governor

Allen Imig
Executive Director

Board Members

Charles Seal-Villafranca, President

Ken Kidder, Vice President

Nina Louis, Member

Fred Randolph, Member

Melanie Seamans, Member

Pauline Campbell, Member

Susan Archer, Member

Ted Ihrman, Member

MINUTES
REGULAR MEETING

May 11, 2020

1. CALL TO ORDER

President Villafranca called the meeting to order at 9:02 a.m., at 1740 W. Adams, Board Meeting Room C, Phoenix, AZ 85007.

2. ROLL CALL

Present: Ken Kidder (by telephone), Fred Randolph, Pauline Campbell (by telephone), Nina Louis (by telephone), Susan Archer (by telephone), Charles Seal-Villafranca, Ted Ihrman (by telephone at 9:07 a.m.)

Absent: Melanie Seamans,

Attendance: Allen Imig, ED, Phil Smyth, Investigator, Zakiya Mallas, Licensing Specialist, Sabrina Khan, AAG, Mary Williams, AAG

3. CALL TO THE PUBLIC

No one wished to speak.

4. APPROVAL OF MINUTES

A. Board Review, Consideration and Action on Approval of Minutes

1. April 13, 2020 Regular Board Meeting Minutes

Member Villafranca made a motion that was seconded by Member Randolph to approve the April 13, 2020, regular meeting minutes.

A roll call vote passed unanimously, 6 – 0.

5. **FORMAL ADMINISTRATIVE HEARINGS, PROPOSED CONSENT AGREEMENTS OR MOTION TO DEEM ALLEGATIONS ADMITTED**

A. Formal Administrative Hearings or Consent Agreement.

2. Wilson, JoAnn M. 19-152 Manager Consent Agreement

Anne Cavett, attorney for Ms. Wilson was present by telephone.

Mary Williams, AAG was on the telephone as the Board's independent advisor.

Sabrina Khan, AAG summarized the consent agreement and that Ms. Wilson agreed to it and signed the agreement.

Member Villafranca made a motion that was seconded by Member Randolph to approve the consent agreement.

A roll call vote passed unanimously, 6 – 0.

3. Romero, Adrian R. 19-115 Manager Motion to Deem

President Villafranca conducted the hearing.

Sabrina Khan, Assistant Attorney General, was present and represented the state. Ms. Khan made a motion to deem the allegations in the Complaint admitted, because Adrian Romero did not respond to the Complaint and Notice of Hearing as required per ARS 36-446.07(O).

Adrian Romero was not present for the hearing at 9:12 a.m.

Mary Williams, Assistant Attorney General was present to advise the Board.

Member Villafranca made a motion that was seconded by Member Randolph to grant the State's motion and deem the allegations in the Complaint and Notice of Hearing as admitted.

A roll call vote passed unanimously, 7 – 0.

Member Villafranca made a motion that was seconded by Member Randolph to adopt the Factual Allegations and the Allegations of Unprofessional Conduct from the Complaint and Notice of Hearing as Findings of Fact and Conclusions of Law.

A roll call vote passed unanimously, 7 – 0.

After the Board deliberated, Member Villafranca made a motion that was seconded by Member Randolph to revoke the manager certificate of Adrian Romero.

A roll call vote passed unanimously, 7 – 0.

The hearing was concluded.

4. Singh, Porabhjoat K. 19-60 Manager Motion to Deem

President Villafranca conducted the hearing. 9:17 a.m.

Sabrina Khan, Assistant Attorney General, was present and represented the state. Ms. Khan made a motion to deem the allegations in the Complaint admitted, because Porabhjoat Singh did not respond to the Complaint and Notice of Hearing as required per ARS 36-446.07(O).

Porabhjoat Singh was not present for the hearing. 9:18 a.m.

Mary Williams, Assistant Attorney General was present to advise the Board.

Member Villafranca made a motion that was seconded by Member Randolph to grant the State's motion and deem the allegations in the Complaint and Notice of Hearing as admitted.

A roll call vote passed unanimously, 7 – 0.

Member Villafranca made a motion that was seconded by Member Randolph to adopt the Factual Allegations and the Allegations of Unprofessional Conduct from the Complaint and Notice of Hearing as Findings of Fact and Conclusions of Law.

A roll call vote passed unanimously, 7 – 0.

After the Board deliberated, Member Randolph made a motion that was seconded by Member Villafranca to revoke the manager certificate of Porabhjoat Singh.

A roll call vote passed unanimously, 7 – 0.

The hearing was concluded.

5. Gordon, Erna C. 19-120 Manager Motion to Deem

President Villafranca conducted the hearing.9:23 a.m.

Sabrina Khan, Assistant Attorney General, was present and represented the state. Ms. Khan made a motion to deem the allegations in the Complaint admitted, because Erna Gordon did not respond to the Complaint and Notice of Hearing as required per ARS 36-446.07(O).

Erna Gordon was not present for the hearing.

Mary Williams, Assistant Attorney General was present to advise the Board.

Member Villafranca made a motion that was seconded by Member Randolph to grant the State's motion and deem the allegations in the Complaint and Notice of Hearing as admitted.

A roll call vote passed unanimously, 7 – 0.

Member Villafranca made a motion that was seconded by Member Randolph to adopt the Factual Allegations and the Allegations of Unprofessional Conduct from the Complaint and Notice of Hearing as Findings of Fact and Conclusions of Law.

A roll call vote passed unanimously, 7 – 0.

After the Board deliberated, Member Randolph made a motion that was seconded by Member Villafranca to revoke the manager certificate of Erna Gordon.

A roll call vote passed unanimously, 7 – 0.

The hearing was concluded at 9:29 a.m.

6. Divinagracia, Eric N. 19-66 Manager Motion to Deem

President Villafranca conducted the hearing. 9:29

Sabrina Khan, Assistant Attorney General, was present and represented the state. Ms. Khan made a motion to deem the allegations in the Complaint admitted, because Eric Divinagracia did not respond to the Complaint and Notice of Hearing as required per ARS 36-446.07(O).

Eric Divinagracia was not present for the hearing.

Mary Williams, Assistant Attorney General was present to advise the Board.

Member Villafranca made a motion that was seconded by Member Randolph to grant the State’s motion and deem the allegations in the Complaint and Notice of Hearing as admitted.

A roll call vote passed unanimously, 7 – 0.

Member Villafranca made a motion that was seconded by Member Randolph to adopt the Factual Allegations and the Allegations of Unprofessional Conduct from the Complaint and Notice of Hearing as Findings of Fact and Conclusions of Law.

A roll call vote passed unanimously, 7 – 0.

After the Board deliberated, Member Randolph made a motion that was seconded by Member Villafranca to revoke the manager certificate of Eric Divinagracia.

A roll call vote passed unanimously, 7 – 0.

The hearing was concluded. 9:37 a.m.

7. Sulffridge, June A. 19-125 Manager Motion to Deem

President Villafranca conducted the hearing. 9:37

Sabrina Khan, Assistant Attorney General, was present and represented the state. Ms. Khan made a motion to deem the allegations in the Complaint admitted, because June Sulffridge did not respond to the Complaint and Notice of Hearing as required per ARS 36-446.07(O).

June Sulffridge was not present for the hearing.

Mary Williams, Assistant Attorney General was present to advise the Board.

Member Villafranca made a motion that was seconded by Member Randolph to grant the State’s motion and deem the allegations in the Complaint and Notice of Hearing as admitted.

A roll call vote passed unanimously, 7 – 0.

Member Villafranca made a motion that was seconded by Member Randolph to adopt the Factual Allegations and the Allegations of Unprofessional Conduct from the Complaint and Notice of Hearing as Findings of Fact and Conclusions of Law.

A roll call vote passed unanimously, 7 – 0.

After the Board deliberated, Member Randolph made a motion that was seconded by Member Villafranca to revoke the manager certificate of June Sulffridge.

A roll call vote passed unanimously, 7 – 0.

The hearing was concluded. 9:43 a.m.

7a. Fatato, Julie 19-96 Manager Motion to Deem

President Villafranca conducted the hearing. 9:43

Sabrina Khan, Assistant Attorney General, was present and represented the state. Ms. Khan made a motion to deem the allegations in the Complaint admitted, because Julie Fatato did not respond to the Complaint and Notice of Hearing as required per ARS 36-446.07(O).

Julie Fatato was not present for the hearing. 9:43

Mary Williams, Assistant Attorney General was present to advise the Board.

Member Villafranca made a motion that was seconded by Member Randolph to grant the State’s motion and deem the allegations in the Complaint and Notice of Hearing as admitted.

A roll call vote passed unanimously, 7 – 0.

Member Villafranca made a motion that was seconded by Member Randolph to adopt the Factual Allegations and the Allegations of Unprofessional Conduct from the Complaint and Notice of Hearing as Findings of Fact and Conclusions of Law.

A roll call vote passed unanimously, 7 – 0.

After the Board deliberated, Member Randolph made a motion that was seconded by Member Villafranca to revoke the manager certificate of Julie Fatato.

A roll call vote passed unanimously, 7 – 0.

The hearing was concluded. 9:49

6. COMPLAINT CASE

A. Consent Agenda to not open a complaint investigation on the facility manager that is related to an ADHS enforcement action.

Facility Name

- 8. Ana’s Assisted Living Home LLC**
- 9. Ana’s Haven at Cedar**
- 10. Andara**
- 11. Arcadia Assisted Care Camelhead**
- 12. Arcadia Home Care, LLC**

- 13. **Belmont Village Scottsdale**
- 14. **Best Home Care of Surprise LLC**
- 15. **Biltmore Care Home, LLC**
- 16. **Bridgewater Assisted Living-Midtown**
- 17. **Carlton Village 2**
- 18. **Carlton Village 5**
- 19. **Family Home Care of Treasures**
- 20. **Heatherwood**
- 21. **House of Prayer Inc.**
- 22. **Ironwood Estate Assisted Living**
- 23. **Kopper Crest Manor on Harris, LLC**
- 24. **Lifestream at Youngtown**
- 25. **Love and Care II Assisted Living, LLC**
- 26. **Medisys Home Care LLC**
- 27. **Northlands Assisted Living Home, LLC**
- 28. **Palos Verdes Senior Living**
- 29. **Pennington Manor Assisted Living Home**
- 30. **Soft Touch Assisted Living LLC**
- 31. **Southwest Healing Gardens**
- 32. **Summa Care Tempe**
- 33. **The Villas at King Road, Villa A**
- 34. **Venezia Place, LLC**
- 35. **White Roses Assisted Living**

Member Archer recuse from agenda item 23. Member Louis recused on agenda item 24. Item 23 and 24 were removed from the consent agenda to be voted on separately.

Member Ihrman made a motion that was seconded by Member Kidder to not open complaints on managers of facilities listed under consent agenda items 8 – 35 except 23

A roll call vote passed unanimously, 7 – 0.

Member Villafranca made a motion that was seconded by Member Randolph to not open a complaint in the manager of the facility listed under agenda item 23.

A roll call vote passed unanimously, 6 – 0.

Member Villafranca made a motion that was seconded by Member Randolph to not open a complaint in the manager of the facility listed under agenda item 24.

A roll call vote passed unanimously, 6 – 0.

B. Board Review, Consideration and Action regarding new complaints:

	Complaint #	Licensee	Title	Open Date
36.	20-12	Lev, Ariel	Administrator	01/27/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection along with four complaint investigations at Allegiant Healthcare of Mesa, located in Mesa and identified 16 deficiencies in 16 different areas. Some of the deficiencies included:

- Failure to prevent pressure ulcers from forming
- Failure to ensure an unnecessary pain medication was not administered

DHS took enforcement action on one violation and assessed a civil money penalty of \$2,000.00.

Mr. Lev was present by telephone. Mr. Lev advised he was the administrator at the facility for two years. Mr. Lev did not ask for help from the corporation to help solve the problems.

Wounds and wound care were the major issue for substandard care.

Mr. Lev said he would consider voluntary surrender of his license.

Member Villafranca made a motion that was seconded by Member Randolph that based upon the information contained in the investigation report, the Board finds sufficient evidence of a violation of A.R.S. § 36-446.07(A)(3) as defined by A.R.S. § 36-446 (10)(a) for unprofessional conduct and AAC R4-33-208(A)(B)(1), in complaint number 20-12 involving administrator Ariel Lev and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

1. Voluntary surrender of license.

A roll call vote passed unanimously 7 – 0.

37. 20-10 Jacobs, Penny Administrator 01/24/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection along with two complaint investigations at Estrella Center, located in Avondale and identified 21 deficiencies in 19 different areas. Some of the deficiencies included:

- The facility failed to maintain an effective infection control program
- The facility failed to assist two residents in maintaining their highest practicable well-being.

DHS took enforcement action on 2 violations and assessed a civil money penalty of \$1,500.00.

Ms. Jacobs was present and addressed the Board’s questions regarding the deficiencies in the survey. Ms. Jacobs self-reported the allegation of neglect and abuse by a staff member, who was dealt with immediately. The survey then went on and found additional deficiencies.

Member Villafranca made a motion that was seconded by Member Randolph that based upon the information contained in the investigation report, the Board finds sufficient evidence of a violation of A.R.S. § 36-446.07(B)(3) as defined by A.R.S. § 36-446 (10)(a) for unprofessional conduct and AAC R4-33-208(A)(B)(1), in complaint number 20-10 involving administrator Penny Jacobs and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

1. Suspension of certificate but stay the suspension as long as terms of the consent agreement are met.
2. Probation for 3 months that includes:
 - a) Reimbursement of investigative costs in the amount of \$250.00
 - b) 3 hours of Board approved continuing education in communicable disease
 - c) All continuing education classes must be pre-approved by the Board’s Executive Director
 - d) Any costs of the probation are those of the certificate holder

A roll call vote passed unanimously 7 – 0.

38. None

39. 20-13 Phillips, Vickie Administrator 01/28/20

Member Kidder recused himself from hearing this matter.

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection and 7 complaint investigations at Desert Highlands Care Center, located in Kingman and identified 86 deficiencies in 48 different areas. Some of the deficiencies included:

DHS took enforcement action and entered into the settlement agreement.

Ms. Phillips was present and answered the Board’s questions. Ms. Phillips was out of the facility as of January 2019. Ms. Phillips was present at the time of the survey. Ms. Phillips had no control of staffing which was a significant problem, plus it was hard to find qualified people. There was little support at the corporate level. Ms. Phillips is currently retired and she has no plans on renewing her license in June, 2020,

Member Randolph made a motion that was seconded by Member Villafranca to dismiss complaint 20-13 against Vickie Phillips, for insufficient evidence of a violation.

A roll call vote passed unanimously 6 – 0

10:00 A.M – 1100 A.M.
40. 20-34 Hamilton, Sallye Manager 1/27/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Grand Court of Mesa, located in Mesa and identified 16 deficiencies, of which 8 were repeat deficiencies, in 7 different areas. Some of the deficiencies included:

- Manager designee requirement was not met
- Service plan requirement was not met

DHS took enforcement action on 8 violations and assessed a civil money penalty of \$2,000.00.

Ms. Hamilton was present and answered the Board’s questions regarding the compliance inspection violations. Ms. Hamilton was the manager prior to the inspection but not at the time of the inspection. She quit because corporate management would not give her the tools to correct the many environmental and health safety issues she brought to their attention.

Member Ihrman made a motion that was seconded by Member Randolph to dismiss complaint 20-34 against Sallye Hamilton, for insufficient evidence of a violation.

A roll call vote passed unanimously 7 – 0.

41. 20-36 Komerdelj, Anuca Manager 03/12/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Fountainview Assisted Living Facility, located in Fountain Hills and identified 2 deficiencies in 2 different areas. Some of the deficiencies included:

- The manager failed to ensure a medical record entry was changed to make it illegible
- The manager failed to ensure the TB requirements were met

DHS took enforcement action on 1 violation and assessed a civil money penalty of \$250.00.

Ms. Komerdelj was present and answered the Board's questions regarding the survey. Ms. Komerdelj showed the document to the Board and they agreed that it looked altered, as alleged.

Member Villafranca made a motion that was seconded by Member Kidder that based upon the information contained in the investigation report, the Board finds sufficient evidence of a violation of A.R.S. § 36-446.07(B)(3) as defined by A.R.S. § 36-446 (10)(a) for unprofessional conduct and AAC R4-33-407(A)(B)(1), in complaint number 20-36 involving manager Anuca Komerdelj and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

1. Suspension of certificate but stay the suspension as long as terms of the consent agreement are met.
2. Probation for 3 months that includes:
 - a) Reimbursement of investigative costs in the amount of \$250.00
 - b) 3 hours of Board approved continuing education in personnel requirements
 - c) 3 hours of Board approved continuing education in Ethics
 - d) All continuing education classes must be pre-approved by the Board's Executive Director
 - e) Any costs of the probation are those of the certificate holder

A roll call vote passed unanimously 7.

10:57 Member Kidder exited the meeting.

42. 20-20 Weeks, Sherre Manager 01/30/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Plum Tree Care Home, located in Tucson and identified 13 deficiencies in 6 different areas. Some of the deficiencies included:

- The manager failed to ensure a caregiver or assistant caregiver received orientation
- The manager failed to ensure CPR and first aid training requirement was met

DHS took enforcement action on 2 repeat violations and assessed a civil money penalty of \$750.00.

Ms. Weeks was present and answered the Board's questions regarding the survey violations. Ms. Weeks was the temporary manger from March 2019 to when she became permanent manger in June, 2019. Ms. Weeks explained that part of the problem was a shortage of staff and that she had to depend on assistant managers to cover some of the duties.

Member Villafranca made a motion that was seconded by Member Randolph that based upon the information contained in the investigation report, the Board finds sufficient evidence of a violation of A.R.S. § 36-446.07(B)(3) as defined by A.R.S. § 36-446 (10)(a) for unprofessional conduct and AAC R4-33-407(A)(B)(1), in complaint number 20-20 involving manager Sherre Weeks and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

1. Suspension of certificate but stay the suspension as long as terms of the consent agreement are met.
2. Probation for 3 months that includes:
 - a) Reimbursement of investigative costs in the amount of \$250.00
 - b) 3 hours of Board approved continuing education in medication management
 - c) 3 hours of Board approved continuing education in personnel requirements
 - d) All continuing education classes must be pre-approved by the Board's Executive Director
 - e) Any costs of the probation are those of the certificate holder

A roll call vote passed unanimously 6 – 0.

43. 20-15 Barya, Verna Manager 01/30/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Lavia Home, located in Maricopa and identified 23 deficiencies in 9 different areas. Some of the deficiencies included:

- Residents were left alone with an employee who was not a trained caregiver
- The manager failed to ensure the personnel requirement was met
- The manager failed to ensure the service plan requirement was met

DHS took enforcement action on 3 violations and assessed a civil money penalty of \$1,500.00.

Ms. Barya was present and answered the Board’s questions regarding the deficiencies.

The home is licensed for 5 and there were 5 residents at the time of the survey. Ms. Barya went shopping and left an uncertified caregiver in charge.

Member Villafranca made a motion that was seconded by Member Louis that based upon the information contained in the investigation report, the Board finds sufficient evidence of a violation of A.R.S. § 36-446.07(B)(3) as defined by A.R.S. § 36-446 (10)(a) for unprofessional conduct and AAC R4-33-407(A)(B)(1), in complaint number 20-15 involving manager Verna Barya and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

1. Suspension of certificate but stay the suspension as long as terms of the consent agreement are met.
2. Probation for 3 months that includes:
 - a) Reimbursement of investigative costs in the amount of \$250.00
 - b) 3 hours of Board approved continuing education in record keeping
 - c) 3 hours of Board approved continuing education in service plans
 - d) 3 hours of Board approved continuing education in personnel requirements
 - e) 3 hours of Board approved continuing education in emergency preparedness
 - f) All continuing education classes must be pre-approved by the Board’s Executive Director
 - g) Any costs of the probation are those of the certificate holder

The service plans continuing education term can be waived if documentation is presented that the class was taken within the last 9 months.

A roll call vote passed unanimously 6 – 0.

44. 20-22 Abella-Tagaloguin, Amelia Manager 01/31/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Marie Silver Assisted Living Facility, located in Surprise and identified 5 deficiencies in 4 different areas. Some of the deficiencies included:

- The manager failed to ensure in-service policies and procedure requirement was met
- The manager failed to ensure medication was administered as ordered.

DHS took enforcement action on 4 repeat violations and assessed a civil money penalty of \$3,940.00

Ms. Abella-Tagaloguin was present and answered the Board’s questions regarding the survey deficiencies. The facility is licensed for 8 but there were 3 residents there at the time of the survey. Ms. Abella-Tagaloguin is at the facility on Sunday’s every week and works full time at a hospital.

Member Villafranca made a motion that was seconded by Member Ihrman that based upon the information contained in the investigation report, the Board finds sufficient evidence of a violation of A.R.S. § 36-446.07(B)(3) as defined by A.R.S. § 36-446 (10)(a) for unprofessional conduct and AAC R4-33-407(A)(B)(1), in complaint number 20-22 involving manager Amelia Abella-Tagaloguin and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

1. Suspension of certificate but stay the suspension as long as terms of the consent agreement are met.
2. Probation for 3 months that includes:
 - a) Reimbursement of investigative costs in the amount of \$250.00
 - b) Complete the 40 hour manager training course that is approved by the Board
 - c) Pass the manager state examination
 - d) Any costs of the probation are those of the certificate holder

A roll call vote passed unanimously 6 – 0

45. 20-23 Muresan, Calin Manager 01/31/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Sun View Estates Home Care II, located in Surprise and identified 7 deficiencies of which 2 were repeat deficiencies, in 3 different areas. Some of the deficiencies included:

- The manager failed to ensure medication was administered as ordered.
- The manager failed to document the medication administration in the medical record

DHS took enforcement action on 2 violations and assessed a civil money penalty of \$500

Mr. Muresan was present and answered the Board’s questions regarding the deficiencies.

There were three residents at the facility at the time of the survey. Mr. Muresan said he was helping his cousin in managing the facility. Mr. Muresan also manages another facility.

Member Villafranca made a motion that was seconded by Member Louis that based upon the information contained in the investigation report, the Board finds sufficient evidence of a violation of A.R.S. § 36-446.07(B)(3) as defined by A.R.S. § 36-446 (10)(a) for unprofessional conduct and AAC R4-33-407(A)(B)(1), in complaint number 20-23 involving manager Calin Muresan and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

1. Suspension of certificate but stay the suspension as long as terms of the consent agreement are met.
2. Probation for 3 months that includes:
 - a) Reimbursement of investigative costs in the amount of \$250.00
 - b) 3 hours of Board approved continuing education in medication management
 - c) All continuing education classes must be pre-approved by the Board’s Executive Director
 - d) Any costs of the probation are those of the certificate holder

A roll call vote passed unanimously 6 – 0.

46. 20-16 Didde-Esteban, Christopher Manager 01/30/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Remington House, located in Chandler and identified 22 deficiencies in 11 different areas. Some of the deficiencies included:

- The manager failed to ensure the personnel record requirement was met
- The manager failed to ensure smoke detectors were tested and documented as required

DHS took enforcement action on 1 violation and assessed a civil money penalty of \$1,000.00.

Mr. Didde-Esteban was present and answered the Board’s questions regarding the compliance inspection. The facility was licensed for 5 but there were 3 residents at the time. The caregiver quit and took her personnel record so there was not one to show the surveyor. The cabinet were the record was kept was not locked.

Member Villafranca made a motion that was seconded by Member Randol to dismiss complaint 20-16 against Christopher Didde-Esteban, for insufficient evidence of a violation.

A roll call vote passed unanimously 6 – 0

47. 20-17 Wint, Daniel Manager 01/30/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Victory Homes 1, located in Phoenix and identified 7 deficiencies in 6 different areas. Some of the deficiencies included:

- The manager failed to ensure medical record was documented as required
- The manager failed to ensure medication was administered as ordered.

DHS took enforcement action on 2 repeat violations and assessed a civil money penalty of \$1,000.00.

Mr. Wint was present and answered the Board’s questions related to the deficiencies. The home is licensed for 5 and there were 5 at the time of the survey. The issue came down to documentation and a hospice nurse failed to document the record.

Member Randolph made a motion that was seconded by Member Villafranca to dismiss complaint 20-17 against Daniel Wint, for insufficient evidence of a violation.

A roll call vote passed unanimously 6 – 0

11:00 A.M – 12:00 P.M.

48. 20-18 Cristea, Teodor Manager 01/30/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Acoma Assisted Living, located in Phoenix and identified 6 deficiencies 2 of which were repeat deficiencies, in 4 different areas. Some of the deficiencies included:

- The manager failed to ensure medication was administered as ordered.
- The manager failed to ensure medication was stored as required

DHS took enforcement action on 2 repeat violations and assessed a civil money penalty of \$500.00.

Mr. Cristea was present and answered the Board’s questions and explained the reason for the deficiencies. Ms. Cristea now verifies all medication records now.

Member Villafranca made a motion that was seconded by Member Randolph to dismiss complaint 20-18 against Teodor Cristea, for insufficient evidence of a violation.

A roll call vote passed unanimously 6 – 0

49. 20-24 Davis, Dennis Manager 01/31/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Las Fuentes Assisted Living, located in Scottsdale and identified 2 deficiencies in 2 different areas. Some of the deficiencies included:

- The manager failed to ensure the restraint requirement was met
- The manager failed to ensure to document the disaster plan was reviewed as required

DHS took enforcement action on 1 violation and assessed a civil money penalty of \$500.00.

Mr. Davis was present and answered the Board’s questions and explained the deficiencies. A staff member put a bed rail on the resident bed at night without Mr., Davis’ knowledge. The staff member was terminated.

Member Villafranca made a motion that was seconded by Member Randolph to dismiss complaint 20-24 against Dennis Davis, for insufficient evidence of a violation.

A roll call vote passed unanimously 6 – 0

50. 20-19 Santos, Agnes Manager 01/30/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Golden Care, located in Scottsdale and identified 6 deficiencies in 3 different areas. Some of the deficiencies included:

- The manager failed to ensure the restraint requirement was met
- The manager failed to ensure medication was administered as ordered.

DHS took enforcement action on 2 violations and assessed a civil money penalty of \$750.00

Ms. Santos was not present at the meeting.

Member Ihrman made a motion that was seconded by Member Randolph that based upon the information contained in the investigation report, the Board finds sufficient evidence of a violation of A.R.S. § 36-446.07(B)(3) as defined by A.R.S. § 36-446 (10)(a) for unprofessional conduct and AAC R4-33-407(A)(B)(1), in complaint number 20-19 involving manager Agnes Santos and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

1. Suspension of certificate but stay the suspension as long as terms of the consent agreement are met.
2. Probation for 3 months that includes:
 - a) Reimbursement of investigative costs in the amount of \$250.00
 - b) 3 hours of Board approved continuing education in service plans
 - c) 3 hours of Board approved continuing education in environmental standards
 - d) 3 hours of Board approved continuing education in record keeping
 - e) All continuing education classes must be pre-approved by the Board’s Executive Director
 - f) Any costs of the probation are those of the certificate holder

A roll call vote passed unanimously 6 – 0

51. 20-27 Ramos, Lilia Manager 02/20/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Claire's Home located in Phoenix and identified 29 deficiencies in 11 different areas. Some of the deficiencies included:

- The manager failed to ensure CPR training requirement was met
- The manager failed to ensure the disaster drill requirement was met

DHS took enforcement action on 2 violations and assessed a civil money penalty of \$750.00

Elsie Jumao-As was present with manager Lilia Ramos. The home is licensed for 10 but there were 8 residents at the time of the survey. Ms. Ramos was not present at the time of the survey. Ms. Ramos seemed to let the owner run the facility with little oversight by Ms. Ramos.

Member Villafranca made a motion that was seconded by Member Randolph that based upon the information contained in the investigation report, the Board finds sufficient evidence of a violation of A.R.S. § 36-446.07(B)(3) as defined by A.R.S. § 36-446 (10)(a) for unprofessional conduct and AAC R4-33-407(A)(B)(1), in complaint number 20-27 involving manager Lilia Ramos and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

1. Suspension of certificate but stay the suspension as long as terms of the consent agreement are met.
2. Probation for 3 months that includes:
 - a) Reimbursement of investigative costs in the amount of \$250.00
 - b) Complete the manager training course that is approved by the Board
 - c) Pass the manager state examination
 - d) Any costs of the probation are those of the certificate holder

A roll call vote passed unanimously 6 – 0.

52. 20-25 Duran, Inge Manager 02/14/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Solterra La Cholla Operations, located in Tucson and identified 7 deficiencies in 4 different areas. Some of the deficiencies included:

- The manager failed to ensure a caregiver provided proof of training
- The manager failed to ensure documentation of caregiver experience, skills and knowledge

DHS took enforcement action on 2 violations and assessed a civil money penalty of \$750.00.

Ms. Duran was present and answered the Board's questions regarding the deficiencies. Ms. Duran was the manager for six months prior to the survey. The facility is licensed for 105 residents. There was a lot turnover with managers and staff at the facility.

Member Villafranca made a motion that was seconded by Member Randolph to dismiss complaint 20-25 against Inga Duran, for insufficient evidence of a violation.

A roll call vote passed unanimously 6 – 0.

53. 20-31 Garcia, Evelyn Manager 02/27/20

Investigator Smyth summarized the complaint for the Board. DPS informed the Board that her fingerprint clearance card was suspended due to an arrest for domestic violence.

Ms. Garcia was not present at the meeting.

Member Villafranca made a motion that was seconded by Member Randolph that based upon the information contained in the investigation report, the Board finds sufficient evidence of a violation of ARS 36-446.04(D) and AAC R4-33-109 for failing to maintain a valid fingerprint clearance card in complaint number 20-31 involving manager Evelyn Garcia and to offer her a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

1. Suspend certificate until a valid fingerprint clearance card is provided showing evidence of compliance:

A roll call vote passed unanimously 6 – 0.

54. 20-33 Ang, Adrian Manager 02/27/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Elmer Place for Parents 2, located in Goodyear and identified 5 deficiencies in 5 different areas. Some of the deficiencies included:

- The manager failed to ensure the inability to ambulate requirement was met
- The manager failed to ensure the service plan requirement was met

DHS took enforcement action on 2 violations and assessed a civil money penalty of \$750.00.

Mr. Ang was present and answered the Board's questions regarding the violations. The facility is licensed for five residents. Mr. Ang has three bedbound residents that did not have the proper documentation from the doctor.

Member Villafranca made a motion that was seconded by Member Randolph that based upon the information contained in the investigation report, the Board finds sufficient evidence of a violation of A.R.S. § 36-446.07(B)(3) as defined by A.R.S. § 36-446 (10)(a) for unprofessional conduct and AAC R4-33-407(A)(B)(1), in complaint number 20-33 involving manager Adrian Ang and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

1. Suspension of certificate but stay the suspension as long as terms of the consent agreement are met.
2. Probation for 3 months that includes:
 - a) Reimbursement of investigative costs in the amount of \$250.00
 - b) 3 hours of Board approved continuing education in service plans
 - c) All continuing education classes must be pre-approved by the Board's Executive Director
 - d) Any costs of the probation are those of the certificate holder

A roll call vote passed unanimously 6 – 0

55. 20-32 Carillo, Cecelia Manager 02/27/20

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Legacy Retirement Residence, located in Mesa and identified 10 deficiencies, 5 of which were repeat deficiencies, in 6 different areas. Some of the deficiencies included:

- The manager failed to ensure the inability to ambulate requirement was met
- The manager failed to ensure the service plan requirement was met
- The manager failed to ensure the CPR and first aid requirement was met

DHS took enforcement action on 3 violations and assessed a civil money penalty of \$1,000.00.

Ms. Carillo was present and answered the Board’s questions. The facility is licensed for 110 residents. Ms. Carillo had become manager of the facility shortly before the survey. The work of the assistant administrator and HR director are now being audited by Ms. Carillo. They are now doing quarterly quality management program.

Member Villafranca made a motion that was seconded by Member Randolph to dismiss complaint 20-32 against Cecelia Carillo, for insufficient evidence of a violation.

A roll call vote passed unanimously 6 – 0

C. Board Review, Consideration and Action on Whether to Close a Complaint

56. 18-275 Darnell, Jeanette Manager 01/2/19

Investigator Smyth summarized the complaint for the Board. Board staff received a complaint through the portal from Rachel Nelson the daughter of a resident at Villa de Bella #1, located in Tucson. Ms. Nelson made allegations about not being able to speak with Ms. Darnell. The Ms. Darnell did not have a regular work schedule.

Staff spoke with the manager at the time of Ms. Nelson’s allegations, but did not know Ms. Nelson or who her mother was. Staff attempted to contact Ms. Nelson to clarify her allegations, but the telephone number is no longer in service.

Member Randolph made a motion that was seconded by Member Villafranca to close complaint 18-275 due to lack of response from the complainant.

A roll call vote passed unanimously 6 – 0

7. ADMINISTRATOR LICENSURE AND MANAGER CERTIFICATION

- A. Consent Agenda to approve temporary administrator licenses, permanent administrator licenses, temporary manager certificates, permanent manager certificates, pending passing all required examinations within the substantive time frame or the license or certificate will be denied.

57. Temporary Administrator Licenses

Acuna, Stephanie	P. Elayne Poston		
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Permanent Administrator Licenses

Acuna, Stephanie	Cooper, Brandy	Martin, Joshua	Cobanovich, Stephanie
P. Elayne Poston			

Temporary Manager Certificates

Wilburn, Tierny	Babaletskos, Haralambos		
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Permanent Manager Certificates

Wilburn, Tierny	Jolley, Michelle	Barton, Lydia	Wieczorek, Edyta
Heilmeier, Max	Vlad, Mary	Norhton, Todd	Bautista, Jonathan
Gonzales, Samantha	Barretto, Rossana	Newbourn, Jessica	Chacon, Norma
Chuppo, Jeffrey	Matturro, Dana	Lumuthang, Jasmine	Tuita, Tupou
Remy, Andrea	Womble, Stefanie	Young, Christine	Shamloll, Vidhoushi

Member Villafranca made a motion that was seconded by Member Randolph to approve the temporary and permanent administrator licenses, the temporary and permanent manager certificates, pending passing all required examinations within the substantive time frame or the license or certificate will be denied.

A roll call vote passed unanimously, 6 – 0.

- B. Individual Board Review, Consideration and Action on Applicants Temporary and/or Permanent Administrator License or Manager Certificate. If approved, pending passing all required examinations within the substantive time frame or the license or certificate will be denied.

58. Ortega, Amador Permanent administrator license

Zakiya Mallas, Licensing Specialist outlined for the Board the criminal issues related to the applicant.

Applicant Amador Ortega was present by telephone and answered the Board’s questions.

Member Villafranca made a motion that was seconded by Member Randolph to approve the permanent administrator license.

A roll call vote passed unanimously, 6 – 0.

59. Rios, Thomas Permanent manager certificate

Member Randolph recused from hearing the matter.

Zakiya Mallas, Licensing Specialist outlined for the Board the issues related to the applicant.

Applicant Thomas Rios was present by telephone and answered the Board’s questions.

Member Villafranca made a motion that was seconded by Member Louis to approve the permanent manager certificate.

A roll call vote passed unanimously, 5 – 0.

60. Swanner, Janice Permanent manager certificate

Zakiya Mallas, Licensing Specialist outlined for the Board the criminal issues related to the applicant.

Applicant Janice Swanner was present by telephone and answered the Board’s questions.

Member Randolph made a motion that was seconded by Member Ihrman to approve the permanent manager certificate.

A roll call vote passed unanimously, 6 – 0.

61. Quitlib, Sabino Permanent and temporary manager certificate

Zakiya Mallas, Licensing Specialist outlined for the Board the issues related to the applicant.

Applicant Sabino Quitlib was present by telephone and answered the Board’s questions. Ms. Quitlib explained why he did not have a manger for his facility for a period of time.

Member Villafranca made a motion that was seconded by Member Randolph to approve the temporary and permanent manager certificate pending passing all required examinations within the substantive time frame or the certificate will be denied.

A roll call vote passed unanimously, 6 – 0.

62. Maravillas, Czeick Permanent and temporary manager certificate

Zakiya Mallas, Licensing Specialist outlined for the Board the issues related to the applicant.

Applicant Czeick Maravillas was present by telephone and answered the Board’s questions.

Member Randolph made a motion that was seconded by Member Villa to table.

A roll call vote passed unanimously, 6 – 0.

Villafranca and Randolph to rescind previous motion as Mr. Maravillas came back on the telephone.

A roll call vote passed unanimously, 6 – 0.

Member Villafranca made a motion that was seconded by Member Archer to approve the temporary and permanent manager certificate, pending passing all required examinations within the substantive time frame or the certificate will be denied.

A roll call vote passed 4 – 2 with Members Randolph and Ihrman voting nay.

8. ASSISTED LIVING FACILITY TRAINING PROGRAMS

A. Consent Agenda to Approve Assisted Living Facility Caregiver and Manager Training Programs and Renewals of Assisted Living Facility Caregiver and Manager Training Programs.

63. Assisted Living Facility Caregiver Training Program

None	
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Assisted Living Facility Manager Training Program

Pfundamental Consulting, LLC	
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Assisted Living Facility Caregiver Training Program Renewal

Bee Hive Homes Assisted Living ALCTP0032	Korman Healthcare ALCTP0086
Havasu Caregivers Institute ALCTP0085	

Assisted Living Facility Manager Training Program Renewal

Arizona Certified Manager’s Education ALMTP0014	
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Member Archer recused from Pfundamental Consulting and removed it off the consent agenda to be voted on separately.

Member Villafranca made a motion that was seconded by Member Randolph to approve Pfundamental Consulting.

A roll call vote passed unanimously, 5 – 0.

Member Villafranca made a motion that was seconded by Member Randolph to approve the remaining consent agenda assisted living facility caregiver and manager training program and the renewals of caregiver and manager training programs

A roll call vote passed unanimously, 6 – 0.

9. OTHER BUSINESS

A. New Business: The Board may Review, Consider and take Action

64. Primary source license verifications for applicants

Member Villafranca requested the there be a future discussion by the Board on primary source license verifications for applicants.

Member Archer made a motion that was seconded by Member Villafranca to put the matter on a future agenda for discussion.

A roll call vote passed unanimously, 6 – 0.

10. ADMINISTRATIVE MATTERS

The following items concern administrative matters and are provided for informational purposes. The Board may review and discuss the following matters.

65. Financial Reports

Executive Director Imig reported the Board’s fund balance at the end of April was \$370,093 which about 4.00 percent above projections. Expenses are right at what was budgeted

66. Complaints Status Report

Investigator Smyth reported that as of the end of April there were 61 cases opened in AY20, of which 12 are resolved. There are 2 open cases from AY19. There are currently 22 active consent agreements.

67. Licensing Report

Licensing Specialist Mallas reported there are 350 active and 23 inactive administrators and 2190 active and 16 inactive managers. There are currently 49 deficient applications and 76 pending final approval.

68. Legislation Update

There was no legislative update.

69. Rules Update

Executive Director Imig advised the current rule package was still on track and that on May 5, 2020 the emergency rulemaking was approved by the Attorney General's Office.

70 Training Program Report

Executive Director Imig reported there are 49 caregiver and 14 manager training programs. From May 1, 2019 through May 1, 2020 there were 2,609 first time caregiver exams given with an 81% pass rate. During that same time period there were 396 first time manager exams given with a 80% pass rate

71. Board Meeting Critique

There was a short Board meeting critique.

11. FUTURE AGENDA ITEMS AND MEETING DATES

The next regular meeting of the Board will be held on Monday, June 15, 2020 at 1740 W. Adams, Board Meeting Room C, Phoenix, Arizona, at 9:00 a.m.

Member Randolph brought up he would like to have a Board discussion regarding the NAB testing.

12. ADJOURNMENT

Member Villafranca adjourn the meeting at 2:10 p.m.