

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

Douglas A. Ducey Governor 1740 W. Adams, Suite 2490, Phoenix, Arizona 85007 (602) 364-2273 phone • (602) 542-8316 fax Email: information@aznciaboard.us

Web Site: www.aznciaboard.us

Allen Imig Executive Director

Board Members

Charles Seal-Villafranca, President Nina Louis, Vice President Ken Kidder, Member Fred Randolph, Member Melanie Seamans, Member David Hasseltine, Member Pauline Campbell, Member Susan Archer, Member

MINUTES REGULAR MEETING

May 13, 2019

1. CALL TO ORDER

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

2. ROLL CALL

Present: Ken Kidder, Melanie Seamans, David Hasseltine, Nina Louis, Susan Archer, Charles

Seal-Villafranca, Fred Randolph, Pauline Campbell

Absent: None

Attendance: Allen Imig, ED, Phil Smyth, Investigator, Zakiya Mallas, Licensing Specialist,

Sabrina Khan, AAG, Elizabeth Campbell, AAG

3. <u>CALL TO THE PUBLIC</u>

No one wished to speak.

4. APPROVAL OF MINUTES

- A. Board Review, Consideration and Action on Approval of Minutes
 - 1. April 8, 2019 Regular Board Meeting Minutes

Member Hasseltine made a motion that was seconded by Member Seamans to approve the April 8, 2019 regular meeting minutes as amended.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

5. FORMAL ADMINISTRATIVE HEARINGS OR PROPOSED CONSENT AGREEMENTS

- A. Motion to proceed to Formal Administrative Hearing
- B. Formal Administrative Hearing
 - 2. Ciorba, Viorel 18-53

President Villafranca conducted the hearing.

Sabrina Khan, Assistant Attorney General, was present and represented the state. Ms. Khan made a motion to proceed with formal hearing.

Mr. Ciorba was not present for the hearing.

Elizabeth Campbell, Assistant Attorney General was present to advise the Board.

Ms. Khan made an opening statement.

The State called Phil Smyth the Board Investigator as a witness who testified to the three exhibits the State offered.

The State offered three exhibits into evidence which were admitted.

- 1. Notice of Hearing and Complaint, dated 12/26/2018
- 2. Consent Agreement and Order, dated 7/6/2018
- 3. Letter to Respondent from Investigator, dated 10/9/2019

The state made a brief closing argument and recommended the Board revoke Mr. Ciorba's certificate.

Member Kidder made a motion that was seconded by Member Randolph to adopt the parties and jurisdiction, and factual allegations outlined in the Complaint and Notice of Hearing as the Board's Findings of Fact.

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

Member Kidder made a motion that was seconded by Member Louis 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.

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V.P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									·

After the Board deliberated, Member Kidder made a motion that was seconded by Member Randolph to revoke the manager certificate of Viorel Ciorba.

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

The hearing was concluded.

6. <u>COMPLAINT CASE</u>

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

Facility Name

- 3. All Valley Home Care
- 4. ANC Assisted Living Homes I
- 5. Burkeshire Retirement Hotel
- 6. Cottonwood Village
- 7. Grand Court of Mesa
- 8. Granite Gate Senior Living
- 9. Hacienda Del Rey 2
- 10. Hacienda Del Rey 4
- 11. Hands of Care
- 12. Hummingbird Gardens
- 13. Laurel Assisted Living Home LLC
- 14. Omega Assisted Living
- 15. Savanna House Assisted Living & Memory Care
- 16. Silver Sunset Home Care
- 17. Sunbeam Oasis
- 18. Sunnyhill Adult Care Home Inc, II
- 19. The Villas at King Road, Villa B
- 20. Tranquility Assisted Living Home
- 21. White Roses Assisted Living

Member Villafranca made a motion that was seconded by Member Randolph to not open complaints on managers of facilities listed under agenda items 3 through 21.

The motion passed 7 - 0. Member Kidder was not present.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X		X	X	X	X	X	
No	0									
Abstain	0			X						
Recuse	0									
Absent	0									

Member Kidder returned at 9:23 a.m.

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

	Complaint #	Licensee	Title	Open Date
22.	19-51	Stidham, Savannah	Manager	04/02/19

Investigator Smyth summarized the complaint for the Board. Board staff initiated the complaint after receiving a letter and speaking with Sharon Fried, a previous employee at Angels Assisted Living, located at in Dewey. Some of the allegations included:

- Manager failed to ensure Ms. Fried was unable to provide care for residents as required
- Manager failed to ensure Ms. Stidham allowed Ms. Fried to care for residents without a certificate.

Ms. Stidham was present and answered the Board's questions. She is the owner and manager designee. This was a dispute over wages owed. Ms. Stidham said a caregiver assistant is not left alone with the residents.

Member Kidder made a motion that was seconded by Member Randolph to dismiss complaint 19-51 against Savannah Stidham, for insufficient evidence of a violation.

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

23. 19-31 Darkus, Mia Manager 02/07/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Rolling Hill Manor, located Prescott and identified 7 deficiencies in 5 different areas. Some of the deficiencies included:

- Manager failed to ensure first aid training requirement was met
- Manager failed to ensure resident inability to ambulate requirement was met

DHS took enforcement action on one violation and assessed a civil money penalty of \$500.00. Ms. Darkus was present and answered the Board's questions. Ms. Darkus said the documentation was an oversight and she now has systems in place to make sure it does not happen again.

Member Villafranca made a motion that was seconded by Member Randolph to dismiss complaint 19-31 against Mia Darkus, for insufficient evidence of a violation.

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

24. 19-33 Pennington, Jessica Manager 02/19/19

The Board tabled until the Next meeting.

25. 19-34 Ventura, Ramon Manager 02/25/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Montebello Assisted Living, LLC, located in Mesa and identified 9 deficiencies in 6 different areas. Some of the deficiencies included:

- Manager failed to ensure service plan requirement was met
- Manager failed to ensure medication administration documentation requirement was met
- Manager failed to ensure disaster plan requirement was met

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

Mr. Ventura was present at the meeting and answered the Board's questions. Mr. Ventura advised the Board that he wished to surrender his manager certificate.

Member Kidder made a motion that was seconded by Member Villafranca 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 19-34 involving manager Ramon Ventura 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 certificate

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

26. 19-37 Wilbanks, Brian Manager 02/25/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Oak Tree Care Home, located in Tucson and identified 5 deficiencies in 5 different areas. Some of the deficiencies included:

- Manager failed to ensure service plan requirement was met
- Manager failed to ensure CPR and first aid requirement was met

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

Mr. Wilbanks was not present.

The Board combined with this complaint with complaint 19-38.

27. 19-38 Wilbanks, Brian Manager 02/25/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Plum Tree Care Home, located in Tucson and identified 7 deficiencies in 4 different areas. Some of the deficiencies included:

- Manager failed to ensure documentation of services requirement was met
- Manager failed to ensure medication was stored in a locked cabinet
- Manager failed to ensure CPR requirement was met

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

Mr. Wilbanks was not present.

Member Kidder 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 19-37 and 19-38 involving manager Brian Wilbanks 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 \$500.00
 - b) 3 hours of Board approved continuing education in medication management
 - c) 3 hours of Board approved continuing education in personnel requirements
 - d) 3 hours of Board approved continuing education in service plans
 - 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 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

28. 19-46 Noriega, Imelda Manager 03/01/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at San Judas Group Home, located in Phoenix and identified 10 deficiencies, 4 of which were repeat violations, in 6 different areas. Some of the deficiencies included:

- Manager failed to ensure MAR was documented as required
- Manager failed to ensure service plan requirement was met
- Manager failed to ensure medication was administered as ordered

DHS took enforcement action on 4 repeat violations and assessed a civil money penalty of \$1,250.00.

Ms. Noriega was present and answered the Board's questions. She only corrected the files that were mentioned in the previous survey. She now corrects them all even if it involves only one file.

Member Louis questioned how Ms. Noriega preformed her quality assurance. Ms. Noriega address the question with what she is doing now.

Member Kidder made a motion that was seconded by Member Villafranca that the Board finds insufficient evidence of a violation in complaint 19-46 involving manager Imelda Noriega, but issue a letter of concern. The Board's concern was that the manager failed to implement a quality assurance program.

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

29. 18-251 Ramlow, Thomas Manager 10/22/18

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Prestige Assisted Living, located in Green Valley and identified 4 deficiencies in 4 different areas. Some of the deficiencies included:

- Manager failed to ensure service plan requirement was met
- Manager failed to ensure medication storage requirement was met
- Manager failed to ensure employee disaster drill requirement was met

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

Mr. Ramlow was not present

Member Kidder made a motion that was seconded by Member Archer 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 18-251 involving manager Thomas Ramlow 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 \$400.00
 - b) 3 hours of Board approved continuing education in service plans
 - c) 3 hours of Board approved continuing education in resident agreement
 - d) 3 hours of Board approved continuing education in quality assurance
 - 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 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

30. 19-44 Hunter, Valerie Manager 03/01/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a complaint investigation at Canyon Valley Memory Care Residence, located Green Valley and identified 5 deficiencies in 2 different areas. Some of the deficiencies included:

- Manager failed to ensure assistant caregiver requirement was met
- Manager failed to ensure caregiver skills and knowledge were verified

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

Ms. Hunter was present and answered the Board's questions. Ms. Hunter advised hiring went through their health service director and business office. They have since changed the process to make sure it did not go over the 20 day limit for fingerprint clearances of employees. They also implemented an audit of resident and employee files.

Member Kidder made a motion that was seconded by Member Seamans to dismiss complaint 19-44 against Valerie Hunter, for insufficient evidence of a violation.

The motion passed 6-1 with Member Hasseltine voting nay. Member Louis stepped out of the meeting prior to the vote.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X		X	X	X	X	X		
No	0								X	
Abstain	0		X							
Recuse	0									
Absent	0									

31. 19-08 Green, Victoria Manager 01/07/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Tanque Verde Assisted Living Home, located in Tucson and identified 9 deficiencies in 5 different areas. Some of the deficiencies included:

- Manager failed to ensure TB requirement was met
- Manager failed to ensure fingerprint clearance card requirement was met

DHS took enforcement action on two violations and assessed a civil money penalty of \$1,250.00

Ms. Green was present and answered the Board's questions. Ms. Green explained she did not have time to check the medication when the order came in. Ms. Green normally puts the medication sets together, but due to her surgery, the caregiver took over the duty. The resident did not receive the right dosage of medication for about a week.

Member Villafranca questioned about the fingerprint clearance card.

Member Kidder made a motion that was seconded by Member Seamans 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 19-08 involving manager Victoria Green 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

The motion passed 7 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X		X	X	X	X	X	X	
No	0									
Abstain	0		X							
Recuse	0									
Absent	0									

32. 19-42 Chavez, Sara Manager 02/26/19

The Board tabled the complaint to the next month.

33. 18-248 Lorimer, Monique Manager 02/08/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Above and Beyond Senior Care, located in El Mirage and identified 8 deficiencies, 3 of which were repeat violations, in 6 different areas. Some of the deficiencies included:

- Manager failed to ensure medication storage requirement was met
- Manager failed to ensure employee disaster drill requirement was met
- Manager failed to ensure storage of toxic material requirement was met

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

Ms. Lorimer was present and answered the Board's questions. There were 3 residents at the facility and they were not being overseen by a manager. Ms. Lorimer left her certificate with her mother who is the owner, and it was never hung at the facility. Ms. Lorimer advised the Board said she would surrender her certificate.

Member Kidder 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 18-248 involving manager Monique Lorimer 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 certificate

The motion passed 7 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X		X	X	X	X	X	X	
No	0									
Abstain	0		X							
Recuse	0									
Absent	0									

34. 19-40 Bicking, Regina Manager 02/25/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a complaint investigation at Sol Acoma Assisted Living, LLC, located in Phoenix and identified 14 deficiencies in 6 different areas. Some of the deficiencies included:

- Manager failed to ensure there was a qualified manager designee
- Manager failed to ensure CPR and first aid requirement was met
- Manager failed to ensure MAR was documented as required

DHS took enforcement action on 11 violations and assessed a civil money penalty of \$2,275.00.

Ms. Bicking was present and answered the Board's questions. The facility is licensed for 10 residents. Ms. Bicking was not present at the time of the survey.

The owner lives out of state and Ms. Bicking does not get the support she needs from him. The ownership changed and the new owners did not want her to complete the plan of correction until later. Ms. Bicking was employed at the facility for two months.

Member Villafranca made a motion that was seconded by Member Randolph to dismiss complaint 19-40 against Regina Bicking, for insufficient evidence of a violation.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

35. 19-41 Dickerson, Kim Manager 02/26/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a complaint investigation at Arizona Angels, LLC, located in Dewey and identified 2 deficiencies in 3 different areas. Some of the deficiencies included:

- Manager failed to ensure caregiver training requirement was met
- Manager failed to ensure medication was administered as ordered

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

Ms. Dickerson was present and answered the Board's questions. She was the manager of record for this survey and the previous survey. The facility had 9 residents at the time of the survey. Ms. Dickerson said she manages two facilities.

Member Villafranca was concerned most about a caregiver that was not certified and working for the full weekend.

Member Kidder made a motion that was seconded by Member Villafranca 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 19-41 involving manager Kim Dickerson 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 \$100.00
 - b) 3 hours of Board approved continuing education in personnel requirements
 - 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

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

36. 19-55 Villamayor, Carmona Manager 04/04/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Precious Loving Home Care, located in Surprise and identified 9 deficiencies in 4 different areas. Some of the deficiencies included:

- Manager failed to ensure an employee did not act as a resident's representative
- Manager failed to ensure TB requirement was met
- Manager failed to ensure service plan requirement was met

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

Ms. Villamayor was present and answered the Board's questions. She has been manger for 10 months.

Ms. Villamayor advised that the owner has the final say when the service plan is completed because of the nurse that she hires. The service plan was not done within the 14 days it was about 21 days. The owner withheld information about her being a POA for a resident. Ms. Villamayor then pulled her certificate from the facility.

Member Kidder made a motion that was seconded by Member Louis to dismiss complaint 19-55 against Carmona Villamayor, for insufficient evidence of a violation.

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

37. 19-04 Carlos, Jose Manager 01/04/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Eldercare at Siesta, located Chandler and identified 50 deficiencies, 8 of which were repeat violations, in 12 different areas. Some of the deficiencies included:

- Manager failed to ensure in-service education requirement was met
- Manager failed to ensure a quality management plan was implemented
- Manager failed to ensure TB requirement was met

DHS took enforcement action and revoked the facility license.

Mr. Carlos was present and advised the Board he was not the manager of record at that facility at that time. According to the investigation and contact with the owner, Mr. Carlos was the manager at the time of the survey. Mr. Carlos says he is the manager at 1620 W. Jasper Dr. and Saratoga New beginnings in Gilbert.

The facility is now closed.

Member Kidder made a motion that was seconded by Member Villafranca 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 19-04 involving manager Jose Carlos

1. Proceed to formal hearing

The motion passed 7 - 1 with Member Hasseltine voting nay.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X		
No	0								X	
Abstain	0									
Recuse	0									
Absent	0									

38. 18-89 Nikita, Niki Manager 12/28/17

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Emerald Home Care 2, located in Phoenix and identified 19 deficiencies, 4 were repeat violations, in 9 different areas. Some of the deficiencies included:

- Manager failed to ensure residents were treated with respect and consideration
- Manager failed to ensure service plan for pressure sore requirement was met
- Manager failed to ensure poisonous or toxic materials were stored as required

DHS took enforcement action on 4 violations and assessed a civil money penalty of \$1,250.00.

Mr. Nikita was not present.

Member Kidder made a motion that was seconded by Member Villafranca 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 18-89 involving manager Niki Nikita 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 \$500.00
 - 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

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

39. 18-189 Harraway, Yvette Manager 06/08/19

Investigator Smyth summarized the complaint for the Board. Board staff initiated the complaint after receiving an email from DHS that APS had opened an inspection. Some of the allegations included:

- Facility was over census
- Manager failed to ensure residents medications were administered timely
- Manager failed to ensure there was sufficient food

DHS did not substantiate any of the accounts and APS investigations are not known.

Ms. Harraway was present and answered the Board's questions. Ms. Harraway completed the plan of correction for the facility. According to Ms. Harraway APS did not substantiate any of the findings.

The cook and housekeeper did not have a fingerprint clearance card and they were providing care at the facility which was observed by the Surveyor.

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 18-189 involving manager Yvette Harraway 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

The motion passed 7 - 1, with Member Hasseltine voting nay.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X		
No	0								X	
Abstain	0									
Recuse	0									
Absent	0		·							

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

40. 19-18

Agbada, Leonila

Manager

01/25/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Jeanwood Assisted Living Home, LLC, located in Tucson and identified 15 deficiencies in 7 different areas.

The investigation was unable to determine who the manager was at the time and Ms. Agbada said she was not the manager then.

Member Kidder made a motion that was seconded by Member Randolph to close complaint 19-18 against Leonila Agbada.

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

41. 19-20

Duffy, Robin

Manager

01/25/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Rook at Fairmount Assisted Living, located in Tucson and identified 12 deficiencies in 6 different areas.

The investigation determined that Ms. Duffy was only there one day before the DHS inspection. There were several managers prior to Ms. Duffy.

Member Kidder made a motion that was seconded by Member Randolph to close complaint 19-20 against Robin Duffy.

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	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.

42. Temporary Administrator Licenses

Pruitt, Jennifer		

Permanent Administrator Licenses

Pruitt, Jennifer	Brkovic, Jasmina	Keating, Cherie	Roberts, Jaime
Cline, Julianne			

Temporary Manager Certificates

Lela, Tunder	Bortis, Mariana	

Permanent Manager Certificates

Lela, Tunder	May, Lisa	Grozav, Gabriel	Butuza, Claudia
Libiran, Virgrid	Roesler, William	Wilson, Randall	Caswell, Kyle
Frazer, Sherin	Kelepolo, Ashley	Asota, Celestine	Hall, Deborah
Amante, Felix	Sydnor, Heather	Pintea, Raluca	Fanning, Kathleen
Knight, Tashay	Strojny, Andrew	Dorough, Thomas	Roberts, Sherrel

Member Villafranca made a motion that was seconded by Member Hasseltine 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.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	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.
 - 43. Weaver, Jessica

Permanent and temporary manager's certificate

Zakiya Mallas, Licensing Specialist outlined for the Board the past criminal issues related to the applicant. Ms. Mallas also advised the Board that Ms. Weaver did not qualify for the temporary license pursuant to ARS 36-446.06(D), because she failed the state exam.

Applicant Jessica Weaver was present and answered the Board's questions regarding her past criminal history.

Member Kidder made a motion that was seconded by Member Louis to deny the temporary certificate because she does not qualify pursuant to ARS 36-446.06(D).

Vote 7 - 1 with Hasseltine voting nay,

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X		
No	0								X	
Abstain	0									
Recuse	0									
Absent	0									

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

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									·
Absent	0									

44. Stidham, Savannah

Permanent manager's certificate

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

Applicant Savannah Stidham was present and answered the Board's questions related to her past criminal issues.

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

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

- C. Individual Board Review, Consideration and Action to deny temporary administrator license or manager certificate for failing to meet the qualifications of A.R.S. § 36-446.06(D), for failing the state examination.
 - 45. Grozav, Gabriel

Temporary manager certificate

Member Villafranca made a motion that was seconded by Member Randolph to deny the temporary certificate because Mr. Grozav does not qualify pursuant to ARS 36-446.06(D).

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

8. <u>ASSISTED LIVING FACILITY TRAINING PROGRAMS</u>

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

Havasu Caregiver Institute	
----------------------------	--

Assisted Living Facility Manager Training Program

Trisummit Facility Manager & Caregiver
aining Center

Assisted Living Facility Caregiver Training Program Renewal

A+ Assisted Living Academy	East Valley Institute of Technology
ALCTP-0078	ALCTP-0043
Excel Caregiver Training Program	Trisummit Facility Manager & Caregiver
ALCTP-0012	Training Center ALCTP-0076
Carriage House on West Garden Lane	Innovative School of Health Sciences
ALCTP-0030	ALCTP-0066

Assisted Living Facility Manager Training Program Renewal

Arizona Certified Manager's Education	
ALMTP-0014	

Member Villafranca made a motion that was seconded by Member Hasseltine to approve the assisted living facility caregiver training program.

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

9. <u>OTHER BUSINESS</u>

- A. New Business: The Board may Review, Consider and take Action
 - 47. Move November meeting date to Tuesday the 12th.

Member Villafranca made a motion that was seconded by Member Kidder to move the Board meeting date to Tuesday November 12, 2019.

The motion passed 8 - 0.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	0									

47a Rules to correct errors in Article 2

Executive Director Imig requested the Board submit a request to the Governor's office for an exception to amend errors, unintended consequences or as a result of the elicensing platform related to Article 2 and 4.

Member Villafranca made a motion that was seconded by Member Hasseltine to approve the request to ask for the rule exception.

Vote		Villafranca	Louis	Kidder	Randolph	Seamans	Archer	Campbell	Hasseltine	Vacant
		President	V. P.	Member	Member	Member	Member	Member	Member	
Yes	8	X	X	X	X	X	X	X	X	
No	0									
Abstain	0									
Recuse	0									
Absent	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.

48. Financial Reports

Executive Director Imig reviewed the financial reports with the Board. The Board fund ended the month of April with a balance of \$283,379. Overall expenses were as projected.

49. Complaints Status Report

Investigator Smyth reported that in April there were 18 complaints opened. There are 14 open complaints from FY18 and 47 from FY19. There are currently 28 active consent agreements.

50. Licensing Report

Licensing Specialist Mallas reported there are currently there are 2,368 active and 25 inactive managers and 326 active and 22 inactive administrators.

51. Legislation Update HB2569

Executive Director Imig advised the HB2569 that was signed into law did not apply to our Board as it only applies to Title 32 professions.

52. Rules Update

There was no report

53 Training Program Report

Executive Director Imig reported there were about 43 caregiver training programs and 11 manager training programs. During the last year from May 2018 to May 2019 there were 2365 caregivers that took the exam for the first time and had an 80% pass rate. There were 357 manager trainees that had first time pass rate of 83%.

54. Board Meeting Critique

There was a brief meeting critique.

11. FUTURE AGENDA ITEMS AND MEETING DATES

The next regular meeting of the Board will be held on Monday, June 10, 2019 at 1740 W. Adams, Board Meeting Room C, Phoenix, Arizona, at 9:00 a.m.

12. <u>ADJOURNMENT.</u>

The meeting was adjourned at 12:17 p.m.