



**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

Nina Louis, Vice President

Ken Kidder, Member

Fred Randolph, Member

Melanie Seamans, Member

Pauline Campbell, Member

Susan Archer, Member

**MINUTES
REGULAR MEETING**

October 21, 2019

The Board's mission is to protect the health, welfare, and safety of the public who seek and use the services of nursing care institution administrators and assisted living facility managers.

1. CALL TO ORDER

President Villafranca called the meeting to order at 9:05 a.m., at 1740 W. Adams, Board Meeting Room C, Phoenix, AZ 85007.

2. ROLL CALL

Present: Ken Kidder, Fred Randolph, Melanie Seamans (by telephone), Pauline Campbell, Nina Louis (by telephone), Susan Archer, Charles Seal-Villafranca

Absent: None

Attendance: Allen Imig, ED, Phil Smyth, Investigator, Zakiya Mallas, Licensing Specialist, Sabrina Khan, AAG, Elizabeth Campbell, AAG (independent advisor)

A. Recognition of Board Member Service, David Hasseltine.

Executive Director Imig described the years of service Member Hasseltine has given to the Board. Member Villafranca called for a moment of silence.

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. September 16, 2019, Regular Board Meeting Minutes

Member Villafranca made a motion that was seconded by Member Archer to approve the September 16, 2019, regular meeting minutes.

A roll call vote passed 7 – 0

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

5. FORMAL ADMINISTRATIVE HEARINGS OR PROPOSED CONSENT AGREEMENTS

A. Board Review, Consideration and Action on Proposed Consent Agreement.

2. Marghitas, Axenie 18-226 Manager

Axenie Marghitas was present with attorney Florin Ivan.

Sabrina Khan, AAG explained that Ms. Marghitas had signed the consent agreement related to the late compliance of her original consent agreement.

Member Villafranca made a motion that was seconded by Member Kidder to accept the consent agreement related to the late compliance.

A roll call vote passed 6 – 1, with Member Campbell voting nay.

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

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

- 3. Brookdale Central Chandler
- 4. Brookdale Peoria
- 5. Chandler Senior Assisted Living Home LLC
- 6. Devonshire ALH LLC
- 7. Eldercare at Western Sunrise Adult Care
- 8. Grandma’s Angel
- 9. Horizon Manor 1
- 10. Mama Mary Assisted Living
- 11. Maranatha Assisted Living
- 12. Mesa Christian Residential Care Center

- 13. Mountain Ranch Home Care
- 14. New Horizons Adult Care Home #3
- 15. Paradise Cove
- 16. Rustic River Homes, LLC
- 17. Springdale Village Assisted Living
- 18. Sunridge Village
- 19. Tender Loving Care Home 1
- 20. Villas at La Canada, Villa M
- 21. Westfield Assisted Living, LLC

Member Randolph asked that agenda item 20 be pulled off the consent agenda and the Board open an investigation based on the enforcement and statement of deficiencies.

Member Kidder made a motion that was seconded by Member Randolph to not open complaints on managers of the facilities under agenda items 3 through 19 and 21.

A roll call vote passed 7 – 0.

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

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

	Complaint #	Licensee	Title	Open Date
22.	19-77	Valderama, Edwin	Manager	05/30/19

Investigator Smyth summarized the complaint for the Board. Board staff received the complaint through the portal from Emee Sarmiento the owner of Nino Villas 3 Assisted Living Home, located in Gilbert. Ms. Samiento alleged:

- Mr. Valderama entered her facility and accessed confidential resident information without permission
- Mr. Vladerama took photographs inside the facility without permission

Member Villafranca disclosed he knows Ms. Sarmiento but it would not influence any decision.

Mr. Valderama admitted he was signed into the facility and when he left he deleted his entry. Mr. Valderama admitted he took photos of the staff roaster. Mr. Valderama said he was not the manager at the facility. He said the only reason he was there was to update CEU’s in his wife’s file who was a former manager at the facility. Mr. Valderama did not have permission to be in the facility.

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)(10), in complaint number 19-77 involving manager Edwin Valderama 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 ethics
 - 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 7 – 0.

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

23. 19-86 Fuller, Coty Manager 07/01/19

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

- Manager failed to ensure TB requirement was met
- Manager failed to ensure personnel record requirement was met
- Manager failed to ensure disaster plan requirement was met

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

Ms. Fuller was present and answered the Board’s questions. The owner and Ms. Fuller had their differences and the owner did not let her do her job as manager and undermine her decisions. As a result Ms. Fuller quit as manager of that facility.

Member Kidder made a motion that was seconded by Member Randolph that the Board finds insufficient evidence of a violation in complaint 19-86 involving manager Coty Fuller, but issue a letter of concern. The Board’s concern was that the manager failed to ensure proper maintenance of personnel records.

A roll call vote passed 7 – 0.

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

24. 19-89 Akator, Anthony Manager 07/01/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a complaint investigation at Akator’s Assisted Living Home, located in Tucson and identified 7 deficiencies in 5 different areas. Some of the deficiencies included:

- Manager failed to ensure manager designee requirement was met
- Manager failed to ensure service plan requirement was met
- Manager failed to ensure medical record requirement was met

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

Mr. Akator was present and answered the Board’s questions. Mr. Akator spends about 8 hours a day at the facility. Mr. Akator answered questions related to the service plan citation in that the resident representative was out of town. The service plan was emailed to them but they did not sign and return the service plan. Mr. Akator said there was a residency agreement but it was at his house and did not send it to DHS within the time frame. Mr. Akator said he had not listed the caregiver as a designee.

Member Kidder made a motion that was seconded by Member Randolph to dismiss complaint 19-89 against Anthony Akator, for insufficient evidence of a violation.

A roll call vote passed 7 – 0.

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

25. 19-32 Fernandez, Ma. Grace Manager 02/08/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a complaint investigation at Bloomfield Manor, Inc., located in Scottsdale and identified 7 deficiencies, 1 of which was a repeat deficiency, in 5 different areas. Some of the deficiencies included:

- Manager failed to ensure service plan requirement was met
- Manager failed to ensure quality management program requirement was met
- Manager failed to ensure policy and procedure requirement was met

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

Ms. Fernandez was present and answered the Board’s questions. She was hired in August 2017 and quit in September 2018. Ms. Fernandez spent a few hours at the facility every two to three weeks. The rest of the time the owner who was the manager designee did the work.

Member Villafranca made a motion that was seconded by Member Campbell 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 19-32 involving manager Ma Grace Fernandez 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

A roll call vote passed 7 – 0.

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

26. 19-45 Johnson, Ramona Manager 03/01/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Otilia’s Home Care, located in Glendale and identified 12 deficiencies, 6 were repeat deficiencies, in 7 different areas. Some of the deficiencies included:

- Manager failed to ensure residency agreement requirement was met
- Manager failed to ensure medication was administered as ordered
- Manager failed to ensure policy and procedure requirement was met

DHS took enforcement action on 7 violations and assessed a civil money penalty of \$2,000.00.

Ms. Johnson 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 19-45 involving manager Ramona Johnson 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

A roll call vote passed 7 – 0.

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

27. 19-98 Dekova, Daniela Manager 08/08/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Agape Senior Living of Scottsdale, located in Scottsdale and identified 6 deficiencies in 5 different areas. Some of the deficiencies included:

- Manager failed to ensure service plan requirement was met
- Manager failed to ensure policy and procedure requirement was met
- Manager failed to ensure personnel record requirement was met

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

Ms. Dekova was present and answered the Board’s questions. Ms. Dekova said she does the hiring and spends 10 to 12 hours a day at the facility. Ms. Dekova admitted she did not follow up on a caregiver’s fingerprint clearance card that had expired.

Member Villafranca made a motion that was seconded by Member Archer to dismiss complaint 19-98 against Daniela Dekova, for insufficient evidence of a violation.

A roll call vote passed 7 – 0.

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

28. 19-103 Tonna, Jennifer Manager 08/19/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a complaint investigation at Emerald Groves Central, located in Mesa and identified 1 deficiency that included:

- Manager failed to immediately report an allegation of exploitation

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

Ms. Tonna was present and answered the Board’s questions. Ms. Tonna advised there was some improper communication going on between a caregiver and a resident. They investigated and the caregiver was terminated. Adult Protective Services investigated and did not substantiate the exploitation allegation.

Member Villafranca made a motion that was seconded by Member Archer to dismiss complaint 19-103 against Jennifer Tonna, for insufficient evidence of a violation.

A roll call vote passed 7 – 0.

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

29. 19-104 Gonzalez, Maria Manager 08/22/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a complaint investigation at Golden Hope Adult Care Home, located in Tucson and identified 4 deficiencies in 3 different areas. Some of the deficiencies included:

- Manager failed to ensure a manager or caregiver were present at the facility
- Manager failed to ensure alert system was available
- Manager failed to ensure medication was administered as ordered

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

Ms. Gonzalez was present along with her son Mark Gonzalez and answered the Board’s questions. There was no caregiver in the facility for a period of time when they left and went to the neighbor’s house to check on something. The caregiver was gone for 10 to 15 minutes, leaving the residents alone.

Member Campbell asked about medication documentation, which Mr. Gonzalez responded too.

Member Villafranca made a motion that was seconded by Member Campbell that the Board finds insufficient evidence of a violation in complaint 19-104 involving manager Maria Gonzalez, but issue a letter of concern. The Board’s concern was that manager failed to properly follow prescribed orders for one resident’s medication.

A roll call vote passed 7 – 0.

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

30. 19-94 Pritchard, Cheron Manager 07/25/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Apollo Ral located in Glendale and identified 6 deficiencies in 2 different areas. Some of the deficiencies included:

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

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

Ms. Pritchard was present and answered the Board’s questions. The owner reached out to a staffing company and requested a certified caregiver, but the person was not certified.

Ms. Pritchard now verifies that the caregiver has all of required documents before they start.

Member Kidder made a motion that was seconded by Member Randolph to dismiss complaint 19-94 against Cheron Pritchard, for insufficient evidence of a violation.

A roll call vote passed 7 – 0.

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

31. 19-102 Ayers, Jerrod Manager 08/19/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a 4 complaint investigations at Copper Village Assisted Living, located in Mesa and identified 3 deficiencies in 3 different areas. Some of the deficiencies included:

- Manager failed to report suspected abuse
- Manager failed to ensure service plan requirement was met

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

Mr. Ayers was present and answered the Board’s questions. Mr. Ayers said that a hospice CNA came to the facility for a specific behavioral resident. The resident had a red mark on their face after the CNA was with the resident. Mr. Ayers investigated the incident and determined it was not abuse. DHS determined the incident should have been reported but wasn’t until later.

Member Villafranca made a motion that was seconded by Member Kidder to dismiss complaint 19-102 against Jerrod Ayers, for insufficient evidence of a violation.

A roll call vote passed 7 – 0.

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

32. 19-83 Ndunga, Teresia Manager 06/07/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Symphony Assisted Living, located in Gilbert and identified 14 deficiencies in 7 different areas. Some of the deficiencies included:

- Manager failed to ensure manager designee requirement was met
- Manager failed to ensure service plan requirement was met
- Manager failed to ensure personnel record requirement was met

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

Ms. Ndunga was present and answered the Board’s questions. The owner hired a caregiver without the manager’s knowledge. A caregiver went to get the mail and left the residents alone and that is when the surveyor came to the facility. Ms. Ndunga was out of town at the time of the survey.

Member Villafranca made a motion that was seconded by Member Archer to dismiss complaint 19-83 against Teresia Ndunga, for insufficient evidence of a violation.

A roll call vote passed 7 – 0.

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

33. 19-105 Canady, Mercy Manager 08/30/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Mercy’s Care Home II, located in Chandler and identified 10 deficiencies, 4 of which were repeat deficiencies, in 6 different areas. Some of the deficiencies included:

- Manager failed to ensure medication was administered as ordered
- Manager failed to ensure TB requirement was met
- Manager failed to ensure residency agreement requirement was met

DHS took enforcement action on 4 violations and assessed a civil money penalty of \$1,000.00.

Ms. Canady was present and answered the Board’s questions. Ms. Canady explained the repeat deficiency related to the medication orders. Ms. Canady explained the mix up with the TB test. Ms. Canady said that she uses a new residency agreement now but did not go back and change out the older resident agreements.

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 19-105 involving manager Mercy Canady 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 environmental standards
 - d) 3 hours of Board approved continuing education in residency agreements
 - 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 6 – 1, with Member Archer voting nay.

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

34. 19-57 Damian, Angela Manager 04/05/19

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 5 different areas. Some of the deficiencies included:

- Manager failed to ensure inability to ambulate requirement was met
- Manager failed to ensure TB requirement was met
- Manager failed to ensure medication was administered as ordered

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

Ms. Damian was present and answered the Board’s questions. Ms. Damian did not respond to the Board’s notice of this complaint.

Ms. Damian said the facility is licensed for five. Ms. Damian said that she administers all of the medications to the residents.

Member Villafranca made a motion that was seconded by Member Campbell 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 19-57 involving manager Angela Damian 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 quality assurance
 - c) 3 hours of Board approved continuing education in medication management
 - d) 3 hours of Board approved continuing education in service plans
 - e) 3 hours of Board approved continuing education in resident rights
 - 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

A roll call vote passed 7 – 0.

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

35. 18-199 Maxwell, Julie Manager 07/03/18

Investigator Smyth summarized the complaint for the Board. DHS conducted a complaint investigation at Family Home Care House of Treasures, located in Glendale and identified 5 deficiencies in 3 different areas. Some of the deficiencies included:

- Manager failed to ensure personnel record requirement was met
- Manager failed to ensure medical record requirement was met

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

Mr. Smyth explained that in talking to Ms. Maxwell she said she had not been the manager at that home for three years. Also Ms. Maxwell’s certificate expired 6/30/19.

Ms. Maxwell was not present.

Member Villafranca made a motion that was seconded by Member Randolph to dismiss complaint 18-199 against Julie Maxwell, for insufficient evidence of a violation.

A roll call vote passed 7 – 0.

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

36. 19-100 Koford, Nathan Manager 08/16/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Visions Assisted Living at Apache Junction 1, located in Apache Junction and identified 12 deficiencies, 4 of which were repeat deficiencies, in 5 different areas. Some of the deficiencies included:

- Manager failed to ensure disaster drill requirement was met
- Manager failed to ensure evacuation drill requirement was met
- Manager failed to ensure service plan requirement was met

DHS took enforcement action on 4 violations and assessed a civil money penalty of \$1,000.00.

Member Archer recused herself from hearing the complaint.

Mr. Koford was present and answered the Board’s questions. The facility is licensed for 56 beds. Mr. Koford had been at the facility for three months before the DHS survey. Prior to the survey he was trying to correct areas that were deficient.

Member Kidder made a motion that was seconded by Member Villafranca to dismiss complaint 19-100 against Nathan Koford, for insufficient evidence of a violation.

A roll call vote passed 6 – 0.

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

37. 19-53 Ruhorimbere, Rugabirw Manager 04/02/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Cedar Pastures, located in Chandler and identified 14 deficiencies, of which 3 were repeat deficiencies, in 12 different areas. Some of the deficiencies included:

- Manager failed to ensure medical record requirement was met
- Manager failed to ensure quality management program requirement was met
- Manager failed to ensure TB requirement was met

DHS took enforcement action on 3 violations and assessed a civil money penalty of \$750.00.

Mr. Ruhorimbere was present and answered the Board’s questions. Mr. Ruhorimbere said all of the deficiencies were corrected. Mr. Ruhorimbere spends about 3 hours a day at each of the two facilities he manages. He has a nurse that does the service plans, TB testing and flu shots.

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 19-53 involving manager Rugabirw Ruhorimbere 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) Any costs of the probation are those of the certificate holder

A roll call vote passed 7 – 0.

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

Villafranca made a motion that was seconded by Member Randolph to rescind the previous motion.

A roll call vote passed 7 – 0.

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

Member Villafranca made a motion that was seconded by Member Campbell 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 19-53 involving manager Rugabirw Ruhorimbere 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. A civil money penalty in the amount of \$500.00, to be paid within 3 months.

A roll call vote passed 7 – 0.

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

38. 19-91 Bora, John Manager 07/01/19

Investigator Smyth summarized the complaint for the Board. Staff initiated the investigation upon learning Mr. Bora’s fingerprint clearance card was invalid due to a criminal charge.

Mr. Bora was not present at the meeting

Member Villafranca made a motion that was seconded by Member Campbell to dismiss the complaint without prejudice. Should Mr. Bora reapply for a manager certificate the complaint would be heard at that time.

A roll call vote passed 7 – 0.

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

C. Board Review, Consideration and Action on Whether to Open a Complaint on the Administrator of the Facility.

39. Ridgecrest Healthcare

Member Villafranca recused himself.

Member Randolph made a motion that was seconded by Member Kidder to open a complaint on the facility administrator based on the DHS survey and enforcement action.

D. Board Review, Consideration and Action on Closing Complaint.

40. 19-24 Wielechowski, Susan Manager 01/31/19

Investigator Smyth summarized the complaint in that there were several managers of record at that facility during 2018 and was not able to determine which manager was responsible for the deficiencies related to the DHS survey. Mr. Smyth informed the Board that Ms. Wielechowski did not renew her manager certificate and it was not expired.

Member Kidder made a motion that was seconded by Member Villafranca to close complaint 19-24 involving manager Susan Wielechowski.

A roll call vote passed 7 – 0.

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

E. Board Review Pursuant to Terms of Probation

41. Worley, Tiffany Manager 11/16/18

Ms. Worley explained to the Board how she was doing as a manager and some of the challenges. This is her last required meeting to attend per her probation terms.

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

None			
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Permanent Administrator Licenses

Bramschreiber, Ethan	Budzinski, Eric		
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Temporary Manager Certificates

LaFountaine, Cristina	Oulanyah, Ladywinnie		
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Permanent Manager Certificates

LaFountaine, Cristina			
Pacurar, Casiana	Dunn, Allison	Phillips, Akilah	Eyestone, Sheila
Quintero, Rosario	Kayiira-Bukiirwa, Sylvia	Lewis, Carese	Aleman, Medardo
Duran, Leni	Pfund, Chris	Rau, Alin	Maftean, Maria
Palisbo, Yurey	McLester, Heidi	Oulanyah, Ladywinnie	Colinayo, Francis
Viloria, Analyn			

Licensing Specialist Mallas requested the Board removed Cristina LaFountaine from the consent agenda for temporary manager certificates because she was put on by mistake. Member Villafranca removed Cristina LaFountaine from the temporary manager certificate consent agenda.

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 7 – 0.

Vote		Villafranca President	Louis V. P.	Kidder Member	Randolph Member	Seamans Member	Archer Member	Campbell Member
Yes	8	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. None

44. None

C. Individual Board Review, Consideration and Action to Rescind Prior Approval of Temporary Manager Certificate.

45. Valle, Karen Temporary manager certificate

Licensing Specialist Mallas summarized that the Board approved the temporary certificate but Ms. Valle did not qualify and was put on the consent agenda in error.

Member Villafranca made a motion that was seconded by Member Kidder to rescind the previous motion to approve.

A roll call vote passed 7 – 0.

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

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.

46. Assisted Living Facility Caregiver Training Program

Assisted Living Consultants	
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Assisted Living Facility Manager Training Program

None	
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Assisted Living Facility Caregiver Training Program Renewal

Arizona Medical Training Institute, Inc. ALCTP-0008	Yavapai College ALCTP-0055
Northland Hospice Caregiver Training ALCTP-0039	Platinum Training Services, LLC ALCTP-0005

Assisted Living Facility Manager Training Program Renewal

Arizona Medical Training Institute, Inc. ALMTP-0001	Angles' Caregiver Training School ALMTP-0016
Platinum Training Services LLC ALMTP-0006	

Member Villafranca made a motion that was seconded by Member Cambell to approve the caregiver and manager training programs listed under agenda item 46.

A roll call vote passed 7 – 0.

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

9. OTHER BUSINESS

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

47. None

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 reported that the Board’s fund balance at the end of September was \$469,826 which is about 1% above projections. Expenses are running as budgeted.

49. Complaints Status Report

Investigator Smyth reported that in September there were 20 complaints opened. There are 5 open complaints from FY18 and 44 from FY19. There are currently 28 active consent agreements.

50. Licensing Report

Licensing Specialist Mallas reported there are 338 active and 22 inactive administrators and 2096 active and 17 inactive managers.

51. Legislation Update

There was none to report.

52. Rules Update

Executive Director reported that the notice of final rules went to GRRC on the changes to Article 2 and 4 updating them to accommodate the elicense system.

President Villafranca appointed himself, Member Kidder and Archer to the rules committee for the caregiver rules update.

53 Training Program Report

Executive Director Imig reported there were about 49 caregiver training programs and 13 manager training programs. During the last year from October 2018 to October 2019 there were 2394 caregivers that took the exam for the first time and had an 80% pass rate. There were 379 manager trainees that had a first time pass rate of 78%.

54. Board Meeting Critique

The Board had a brief critique of the meeting.

11. **FUTURE AGENDA ITEMS AND MEETING DATES**

The next regular meeting of the Board will be held on Tuesday, November 12, 2019 at 1740 W. Adams, Board Meeting Room C, Phoenix, Arizona, at 9:00 a.m.

12. **ADJOURNMENT**

The meeting was adjourned at 12:50 p.m.