



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

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Douglas A. Ducey
Governor

Board Members

Pauline Campbell, President

Charles Villafranca, Vice President

Ken Kidder, Member

Nina Louis, Member

Fred Randolph, Member

Melanie Seamans, Member

Susan Archer, Member

Ted Ihrman, Member

REGULAR MEETING

March 8, 2021

1. CALL TO ORDER

Vice President Villafranca called the meeting to order at 9:17 a.m., at 1740 W. Adams St. Board Meeting Room C, Phoenix, AZ 85007.

2. ROLL CALL

Present: Pauline Campbell, Charles Villafranca, Susan Archer, Ted Ihrman were present in-person, and Nina Louis, Melanie Seamans, Fred Randolph were present telephonically. Member Randolph left the meeting at 10:17 a.m.

Absent: Ken Kidder

Attendance: Allen Imig Executive Director, Sabrina Khan Executive Director, Phil Smyth Investigator, Zakiya Mallas, Licensing Specialist, Seamus Monaghan Assistant Attorney General, Mary D. Williams, Assistant Attorney General

3. CALL TO THE PUBLIC

There was no one who spoke during the call to the public.

4. APPROVAL OF MINUTES

The Board may vote to go into Executive Session pursuant to A.R.S. § 38-431.03(A)(2) (to discuss confidential information), A.R.S. § 38-431.03(A)(3) (to receive legal advice).

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

1. February 8, 2021, Regular Board Meeting Minutes

Vice President Villafranca made a motion that was seconded by Member Archer to approve the draft meeting minutes. The motion pass unanimously by a roll call vote.

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

The Board may vote to go into Executive Session pursuant to A.R.S. § 38-431.03(A)(2) (to discuss confidential information), A.R.S. § 38-431.03(A)(3) (to receive legal advice).

A. Formal Administrative Hearings, Consent Agreement or Motion to Deem Allegations Admitted.

2. Stefanescu, Petre 20-35 Formal Hearing

Assistant Attorney General Seamus Monaghan was present in-person representing the State. Assistant Attorney General Mary Williams was present telephonically as the independent legal advisor for the Board. The formal hearing began at 9:30 a.m.

Vice President Villafranca provided an outline of the formal hearing process and asked for a roll call to take attendance for the proceeding. The following Board members were present for the formal hearing: Pauline Campbell, Charles Villafranca, Susan Archer, Ted Irhman were present in-person; Nina Louis, Melanie Seamans, Fred Randolph were present telephonically.

Vice President Villafranca asked for introduction from the parties. AAG Monaghan introduced himself to the Board. Vice President Villafranca asked whether Petre Stefanescu was present either in-person or telephonically. Mr. Stefanescu was not present in-person or telephonically and Vice President Villafranca noted the time of 9:32 a.m.

AAG Williams asked whether there is a proposed consent agreement in this matter. AAG Monaghan stated, as a preliminary matter to the formal hearing, there is a proposed consent agreement for the Board to review. AAG Monaghan explained that Mr. Stefanescu signed the proposed consent agreement self-surrender in Complaint No. 20-35.

Vice President Villafranca made a motion that was seconded by Member Archer to accept the proposed consent agreement. The motion passed unanimously by a roll call vote.

6. COMPLAINT CASE

The Board may vote to go into Executive Session pursuant to A.R.S. § 38-431.03(A)(2) (to discuss confidential information), A.R.S. § 38-431.03(A)(3) (to receive legal advice).

The name of a Resident is confidential information. In public session, the Board members, staff, and the licensee should refer to the Residents as “Resident” or use the Resident’s initials.

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

Facility Name

- 3. Caring Angels Assisted Living Home
- 4. Desert Harbor Adult Care Home
- 5. Fisher Family Home, LLC
- 6. Glynnis Place
- 7. 1 Abbey Adult Care Home
- 8. Lavie Home
- 9. San Judas Adult Care Home, LLC
- 10. Show Low Assisted Living LLC
- 11. Sunrise Adult Care Home #2
- 12. The Citadel Assisted Living Facility

13. The Forum at Desert Harbor

Vice President Villafranca made a motion that was seconded by Member Irhman to not open a complaint on the facility managers for this agenda item. The motion passed unanimously by roll call vote.

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

	Complaint #	Licensee	Title	Open Date
14.	20-07	McMillan, Naomi	Administrator	01/22/21

Investigator Smyth summarized Complaint No. 20-07 for the Board. Manager Naomi McMillan was present for the Board meeting. Investigator Smyth summarized that the Department of Health Services conducted complaint investigations at Maravilla Care Home in Phoenix that identified eleven deficiencies in nine different areas. On approximately December 11, 2020, DHS took an enforcement action on two substantiated violations and issued a civil money penalty on the facility in the amount of \$1,000.

Vice President Villafranca asked what the policies were for notifying the proper authorities once personnel became aware of a resident-on-resident altercation. Manager McMillan stated that she notified the police, Adult Protective Services, and the ombudsman, but did not notify the State. Manager McMillan spoke with her supervisor, and that she and her supervisor were under the impression they had met the reporting requirements. Manager McMillan stated the nurse on duty who reported the incident, reported the incident different from how it occurred. Once Manager McMillan became aware of the situation, she stated that she took immediate action to remedy the situation and notify proper authorities. Manager McMillan explained the employment action taken as a result of this incident.

Vice President Villafranca made a motion that was seconded by President Campbell to dismiss complaint in 20-07 against Manager McMillan. The motion passed unanimously by roll call vote.

15.	20-118	Ocava, Loreli	Manager	12/10/20
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Investigator Smyth summarized Complaint No. 20-118 for the Board. Manager Loreli Ocava was present for the Board meeting. Investigator Smyth summarized that the Department of Health Services conducted a compliance inspection at One Abbey Adult Care Home in Tucson that identified eight deficiencies in eight different areas. The DHS conducted complaint investigations that identified one deficiency in the area of administration. The compliance inspection did not result in any enforcement action. The complaint investigations resulted in a DHS enforcement action for failing to ensure compliance with the fingerprint card requirements, and the facility was assessed a \$1500.00 civil money penalty.

Vice President Villafranca asked how large the facility was. Manager Ocava stated that there were ten residents at the facility, but at the time of the survey was conducted, the facility had seven residents. Manager Ocava stated that she was not present during the compliance inspection. She further stated she works on a part-time basis, and that the owner works in the facility a majority of the time. Member Ocava stated she was hired in November but began working in December 2019.

President Campbell asked her how much time she spends at the facility. Manager Ocava stated she works four hours per month. Manager Ocava indicated that the owner is also the caregiver, and only desires her services for four hours per month.

Vice President Villafranca asked who the owner is. Manager Ocava stated Angelique Roy. Vice President Villafranca expressed his concerns and recommended a 40-hour training course to re-educate

the manager on the rules and regulations. Member Irhman agreed and noted that there were rule changes in 2013 that need to be understood. President Campbell noted that spending four hours in the facility per month may not be enough time to ensure compliance with regulations. Member Archer clarified with Manager Ocava about her only spending four hours per month at the direction of the owner. Manager Ocava commented that she is only paid for four hours, but may enter the facility as needed. Board members agreed the 40-hour course should be required.

Vice President Villafranca made a motion that was seconded by President 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 20-118 involving Manager Loreli Ocava 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) Completion of a 40-hour assisted living facility manager training course with the executive director's pre-approval for which the licensee must submit documented completion.
 - b) Successfully pass the State's exam administered by the Board.
 - c) Reimbursement of investigative costs in the amount of \$444.00
 - d) Reimbursement cost of the probation are those of the certificate holder

The motion passed unanimously by a roll call vote.

16. 21-06 Fernandez, Theresa Manager 01/22/21

Investigator Smyth summarized Complaint No. 21-06 for the Board. Manager Theresa Fernandez was present for the Board meeting. Investigator Smyth summarized that the Department of Health Services conducted a compliance inspection at Casa Theresita II located in Tucson. The compliance inspection identified three deficiencies in three different areas. On approximately December 9, 2020, the DHS took enforcement action for two substantiated deficiencies and imposed a civil money penalty in the amount of \$500.00. Manager Fernandez filed an Informal Dispute Resolutions with DHS, and as a result, DHS changed the wording of the deficiencies.

Vice President Villafranca asked her how long she has been a certified manager. Manager Fernandez stated since 1995. Manager Fernandez commented that she has been the manager of the facility since 1995, and is the owner. She lives at the facility and is there all of the time, and was present during the time of the survey. The facility has three residents.

Manager Fernandez had signed documentation from healthcare providers in electronic form, but did not provide that documentation to the surveyor within the two hours of locating the signatures in electronic form. Member Archer asked about the medication list and whether she had the electronic signature. Manager Fernandez explained that the resident was on hospice, and when she received the orders from hospice they were electronic.

Vice President Villafranca asked her about the chemicals stored outside of the facility. Manager Fernandez stated that the chemicals were stored outside in a gated area. Manager Fernandez stated that the gate was locked and is a self-latching gate, and that she should have explained that to the surveyor, but did not.

Member Irhman asked whether she had the electronic signatures during the survey. Manager Fernandez stated she had the electronic signature during the survey, but did not have it readily available for the surveyor to view.

Member Archer commented that she has the facility under control. Vice President Villafranca agreed.

Vice President Villafranca made a motion that was seconded by Member Archer to dismiss the Complaint No. 21-06 against Theresa Fernandez. The motion passed unanimously by a roll call vote.

17. 21-05 Ray, Leeann Manager 01/28/21

Investigator Smyth outlined Complaint No. 21-05 for the Board. Leeann Ray was not present for the Board meeting, but was provided notice as to the Board’s review of Complaint No. 21-05. Manager Ray informed Investigator Smyth that her last of employment at the facility was the day before the compliance inspection. Investigator Smyth summarized that the Department of Health Services conducted a compliance inspection at Hacienda at the River located in Tucson. The compliance inspection identified eleven deficiencies in four different areas, some were repeat deficiencies. On approximately December 2, 2020, DHS took enforcement action and imposed a civil money penalty on the facility in the amount of \$1000.00 for four substantiated violations.

Vice President Villafranca noted that Manager Ray’s response to the Board included a desire to not renew her manager’s certificate, as she is retiring. Vice President Villafranca commented that because of number of deficiencies he would entertain a voluntary surrender of her certificate. Members Irhman and President Campbell indicated that they would accept a voluntary surrender.

Vice President Villafranca 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 A.A.C. R4-33-407(A) & (B)(1), in complaint number 20-05 involving Manager Leeann Ray and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms would include the voluntary surrender of the manager’s certificate.

The motion passed unanimously by a roll call vote.

18. 21-09 Razinn, Russ Manager 01/22/21

Investigator Smyth outlined Complaint No. 21-09 for the Board. Manager Russ Razinn was present for the Board meeting with facility owner Lucius Saucan was present. Investigator Smyth summarized that the Department of Health Services conducted a compliance inspection as a result of a complaint at Elite Loving Care Home located in Scottsdale. The compliance inspection identified sixteen deficiencies in nine different areas with one repeat deficiency. On approximately December 9, 2020, DHS took enforcement action against facility licensee Lucian Saucan and imposed a civil money penalty in the amount of \$750.00.

Vice President Villafranca indicated that there were two main issues, one was the fingerprint clearance card and the other was a resident agreement issue. Vice President Villafranca asked Manager Razinn about certain provisions that are to be included in a residency agreement.

Manager Razinn confirmed that all provisions are included in the agreement. Manager Razinn explained to the Board that he tried to communicate with the surveyor about him not being able to go back in time to conduct a 90-assessment.

Member Archer asked whether he has a form to use in providing a 90-day assessment as a part of the admission process for new residents. Manager Razinn indicated that the original assessment did not get done the first time, but is done now, and he cannot go back in time and retroactively complete something when time has passed. He further commented that he is making sure the assessment gets done.

Vice President Villafranca asked about fingerprint clearance card issue. Manager Razinn explained that when he was hired the employee in question was already working at the facility, and that the person was not a caregiver and only performs cooking and cleaning services with no direct care to residents. Manager Razinn indicated that he tried to communicate with the surveyor the best he could, and not argue with the surveyor during the survey process.

President Campbell asked whether Manager Razinn had a disaster plan completed. Manager Razinn stated that he has a disaster plan completed for the facility.

Vice President Villafranca made a motion that was seconded by Member Archer to dismiss Complaint No. 21-09. The motion passed unanimously by a roll call vote.

Time 10:02 a.m. the Board took a 15-minute recess. The Board reconvened at 10:16 a.m.

A roll call vote was conducted, and Member Randolph was not present as of 10:17 a.m.

19. 21-11 Torreno, Benavides Manager 01/25/21

Investigator Smyth outlined Complaint No. 21-11 for the Board. Manager Benavides Torreno was present for the Board meeting. Sheila Philips, the owner of the facility, was not present. The Department of Health conducted two on-site complaint investigations at St. Joseph Assisted Living in Phoenix, Arizona. The complaint investigations identified two deficiencies in two different areas. On approximately December 7, 2020, DHS took enforcement action and imposed a civil money penalty of \$250.00 for one substantiated violation. Vice President Villafranca noted that an offsite investigation was conducted.

Manager Torreno commented that he spends eight hours per week in the facility; he was not present at the facility when the survey was conducted, and that there were four residents living at the facility during the survey in response to Vice President Villafranca's question. Manager Torreno commented that he typically works in this facility in the evening time. Manager Torreno was informed about the survey one week after it was completed by the owner, Sheila Phillips, who is also a caregiver.

Vice President Villafranca asked about financial interactions. Manger Torreno commented that he became the manager in February 2020, and that the owner already had a prior arrangement with a resident to share a joint bank account. Vice President Villafranca asked whether this matter was reported to Adult Protective Services for which Manager Torreno responded no. Manager Torreno commented that he put a stop to this arrangement once he

became aware of it. Manager Torreno commented that he will notify Adult Protective Services. Vice President Villafranca directed Board staff to also notify Adult Protective Services.

Member Irhman asked about the potential financial exploitation of a resident if they were to share a joint bank account. Manager Torreno commented that the amount of money received from the resident was way below the amount the resident was supposed to pay to live at the facility.

Vice President Villafranca indicated that ethics and resident rights training would be helpful to re-educate the Manager Torreno regarding these issues. Members Seamans and Archer agreed that those courses should be taken.

Vice President Villafranca made a motion that was seconded by Member Irhman 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 21-11 involving manager Benavides Torreno 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 \$444.00
 - b) 3 hours of Board approved continuing education in resident rights
 - 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, and the certificate holder is required to provide documented completion of the hours to Board staff.
 - e) Any costs of the probation are those of the certificate holder

The motion passed unanimously by a roll call vote.

20. 21-10 Grant, Dawn Manager 01/25/21

Investigator Smyth outlined Complaint No. 21-10 for the Board. Manager Dawn Grant was present. The Department of Health Services conducted a compliance inspection at Savanna House Assisted Living and Memory Care located in Gilbert. The compliance inspection identified three deficiencies in the area of service plans. On approximately December 4, 2020, DHS took enforcement action and imposed a \$1000.00 civil money penalty on the facility for one substantiated violation.

Manager Grant stated that the facility has eighty-nine personal care and forty-eight memory care beds, and that the corporate structure includes directors of personal care and memory care in response to Vice President Villafranca's question. Manager Grant explained that a nurse missed inputting a care plan in the system, and that the facility has new systems in place to ensure this does not happen again. Manager Grant explained the steps the facility has taken to remedy the situation including using another software program that they are trying to navigate

with new staff. Vice President Villafranca asked about steps taken so this does not get missed again. Manager Grant indicated that she participated in the software development so that the facility's needs are met. The new software has a ticker/notification prompt to notify the nursing staff or other employees when service plans should be reviewed. Manager Grant explained that the resident in question received proper care and was located across from the nurse's station.

Member Irham made a motion to dismiss complaint number 21-10 against Manager Grant that was seconded by Member Campbell. The motion passed unanimously by a roll call vote.

21. 21-08 Lalo, Florencio Manager 01/22/21

Investigator Smyth outlined Complaint 21-08 for the Board. Manger Florencio Lalo was present for the Board meeting. The Department of Health Services conducted a compliance inspection at Sunshine Circle Assisted Living Enclave, LLC in Phoenix. The compliance inspection identified five deficiencies in the area of Personnel that include repeat deficiencies. On December 2, 2020 DHS took enforcement action on the facility in the amount of a \$1250.00 civil money penalty.

Manager Lalo commented that the owner, Ms. Erickson, hired an administrator in 2020 who went to another country, and that he was not introduced to the administrator. Manager Lalo commented that he was told by the owner that the facility would be sold. In response to Vice President Villafranca's question, Manager Lalo responded that the facility has ten residents, and that he is in charge of the facility. In response to Vice President Villafranca's question, Manager Lalo commented that he works on the weekends to relieve the care staff, verify medications are done properly, review paperwork, and communicate with families.

Manager Lalo commented he started working in 2017, and tried to communicate with the owner about these issues. Vice President Villafranca commented that he understands the owner sometimes places the manager in a difficult position when the owner makes decisions that impacts an assisted living facility manager's certificate. Vice President Villafranca commented as to how Manager Lalo would handle the situation today when dealing with an uncooperative owner. Manager Lalo stated that he would no longer continue to work at the facility.

Member Archer commented to Manager Lalo that he was trying to be helpful, the owner did not support you, and the owner is not present at this Board meeting today. Member Archer stated that she understands the plight at the assisted living manager level that does place the certificate holder in a difficult position while wanting to continue to help residents, but not able to make necessary corrections to a facility because of the owner. Member Archer said it is a hard line to draw in that the manager has empathy for residents, and is placed in a hard position by owners who don't maintain a certificate.

Vice President Villafranca indicated that Manager Lalo learned from the experience and is no longer a manager at the facility. Member Irham commented that this situation is not uncommon, and we see this situation frequently. Member Archer suggested that before taking a management position – he should evaluate how cooperative the owner appears to be.

Vice President Villafranca moved that the Board dismiss complaint No. 21-08 against Manager Lalo that was seconded by Member Irhman. The motion passed unanimously by a roll call vote.

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

22. Gary L. Kotz - Administrator #01664 - Pueblo Norte Senior Living

Vice President Villafranca moved to not open a complaint that was seconded by President Campbell. Vice President Villafranca noted that the reason the Board would not open a complaint is because the complaint involved someone who did not agree with the facility’s policy regarding Covid-19 lockdown regulations imposed by regulations.

The motion passed unanimously by a roll call vote.

7. **ADMINISTRATOR LICENSURE AND MANAGER CERTIFICATION**

The Board may vote to go into Executive Session pursuant to A.R.S. § 38-431.03(A)(2) (to discuss confidential information), A.R.S. § 38-431.03(A)(3) (to receive legal advice).

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.

23. Temporary Administrator Licenses

Leathers, Grace			
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Permanent Administrator Licenses

Leathers, Grace	Bennett, David	Shambro, Kristin	
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Temporary Manager Certificates

Pare, Frederic			
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Permanent Manager Certificates

Pare, Frederic		Joy, Monique	Ansah, Robert
Sanders, Kimberly	Adams, Ellen	Dautel, Jennifer	Sayco, Joselito
Yates, Christina	Nguimbi, Doriane	McPherson, Jessica	McCutcheon, Scott
Dartoe, Nora	White, Uloma	Phillips, Akilah	Alcaraz, Gema

Vice President Villafranca made a motion that was seconded by Member Archer 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.

The motion passed unanimously by a roll call vote.

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.

24. Doggett, Tomica Permanent manager certificate

Zakiya Mallas, Licensing Specialist, outlined the application disclosure of Applicant Tomica Doggett. Applicant Doggett was present and answered the Board’s questions. Applicant Doggett disclosed prior criminal conduct, a misdemeanor petty theft in 2006. She has a current fingerprint clearance card and passed the State’s examination for assisted living facility managers.

Vice President Villafranca asked what Applicant Doggett plans to do with a certificate, if she is granted one. Applicant Doggett commented that she has been working as a physical therapy assistant, and wants to open her own group home for seniors. Applicant Doggett indicated a desire to work with the senior population.

Vice President Villafranca made a motion that was seconded by Member Archer to approve the certificate.

The motion passed unanimously by a roll call vote.

25. None
 26. None
 27. None
 28. Medina, Annette Permanent & temporary manager certificate

Zakiya Mallas, Licensing Specialist, outlined the application disclosure of Applicant Annette Medina. Applicant Medina was present to answer questions from the Board. Applicant Medina owns a care home in Tucson, and it was revealed that the facility did not have a certified manager during a Department of Health compliance inspection. Applicant Medina has a valid fingerprint clearance card and passed the State’s examination for assisted living facility managers.

Vice President Villafranca asked why she did not know that her certificate expired. Applicant Medina commented that she was overwhelmed in 2019 with Covid-19 and surrounding concerns, asked a family member to assist her in the renewal process, and was assured that it was done for both her manager’s certificate and her nursing license. Applicant Medina stated she has a current nursing license. Applicant Medina commented that she spends about 80 hours per week in the facility, and that when things settle down, she plans to spend 25 to 30 hours per week.

Vice President Villafranca made a motion to approve seconded by Member Irhman to approve the permanent and temporary manager’s certificate of Annette Medina. The motion passed unanimously by a roll call vote.

28a Raach, Kelly Permanent manager certificate

Zakiya Mallas, Licensing Specialist outlined the application disclosure of Applicant Kelly Raach. Applicant Raach was present to answer questions from the Board. Applicant Raach answered truthfully on the application and disclosed arrests and criminal conduct that occurred between 2000 to 2005. The criminal conduct included possession of drug paraphernalia, prostitution, trespass and criminal damage.

Vice President Villafranca stated that he has reservations about granting a certificate to someone with prior conduct, but past conduct does not dictate who we are today. Vice President Villafranca asked Applicant Raach to explain to the Board members how she has rehabilitated herself and capable of being a manger.

Applicant Raach acknowledged that she made a lot of mistakes in her very young years, and those mistakes have defined how she wants to be today. Applicant Raach indicated that her last offense occurred many years ago in 2005. As a result of her trying to rehabilitate herself, Applicant Raach stated she completed both a bachelors and master’s degree, and worked in the memory care unit of an assisted living facility when she obtained her fingerprint clearance card. She commented that she has a passion for working with older adults and those who have Alzheimer. Applicant Raach stated that she held positions working in assisted living and was the regional director of the Alzheimer’s association in Arizona for four year. She has worked for for-profit hospitals, and now works in non-profit assisted living. Applicant Raach commented that not only has she improved her professional choices, she has made strides to improve her personal choices as well. She is currently assisting with the care of her grandchildren, and is working towards adopting them. She also serves her community working with organizations that help seniors.

Member Irhman asked how long she has had her fingerprint clearance card. Applicant Raach responded that she just renewed the card, so 7 years.

Member Campbell asked her what do you plan to do with your certificate, if granted? Applicant Raach responded that she currently works in a retirement community in Tucson, and wants to take over as the manager of that facility. She is currently the executive director of member health services.

Vice President Villafranca commented that Applicant Raach has really learned from these experiences and turned her life around.

Vice President Villafranca made a motion that was seconded by Member Irhman to approve the permanent manager certificate. The motion passed unanimously by roll call vote.

8. ASSISTED LIVING FACILITY TRAINING PROGRAMS

The Board may vote to go into Executive Session pursuant to A.R.S. § 38-431.03(A)(2) (to discuss confidential information), A.R.S. § 38-431.03(A)(3) (to receive legal advice)

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

29. Assisted Living Facility Caregiver Training Program

Independent Care Connections, LLC	
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Assisted Living Facility Manager Training Program

Independent Care Connections, LLC	
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Assisted Living Facility Caregiver Training Program Renewal

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Assisted Living Facility Manager Training Program Renewal

Legespi Management Services, LLC ALMTP-0021	
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Vice President Villafranca made a motion that was seconded by Member Irhman to approve the consent agenda for assisted living facility training programs. The motion passed unanimously by a roll call vote.

9. OTHER BUSINESS

The Board may vote to go into Executive Session pursuant to A.R.S. § 38-431.03(A)(2) (to discuss confidential information), A.R.S. § 38-431.03(A)(3) (to receive legal advice).

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

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.

30. Financial Reports

Nothing new to report since our last meeting as we are currently waiting on reports from CSB.

31. Complaints Status Report

Investigator Smyth summarized the complaints status, 8 of which were addressed today.

32. Licensing Report

Licensing Specialist, Zakiya Mallas commented that there are 2377 active licenses, 19 inactive, 17 temporary, 319 administrator licenses, and 20 inactive.

33. Legislation Update – SB1282

SB1282 passed the Senate and in the House.

34. Rules Update

The rules go into effect on April 2, 2021.

35. Training Program Report

The report that you were provided was updated. The on the job training programs under the executive order will expire at some point and the on the job training programs will continue under our rules.

36. Board Meeting Critique

President Campbell thanked the vice president for presiding over the Board meeting. Campbell expressed gratitude to Allen Imig for his service to the Board.

11. FUTURE AGENDA ITEMS AND MEETING DATES

The next regular meeting of the Board will be held on Monday, April 12, 2021 at 1740 W. Adams, Board Meeting Room C, Phoenix, Arizona, at 9:00 a.m.

12. ADJOURNMENT

The meeting adjourned at 11:11 a.m.