



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@aznciboard.us](mailto:information@aznciboard.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

Web Site: [www.aznciboard.us](http://www.aznciboard.us)

MINUTES  
REGULAR MEETING

June 10, 2019

1. **CALL TO ORDER**

President Villafranca called the meeting to order at 9:01 a.m., at 1740 W. Adams, Board Meeting Room C, Phoenix, AZ 85007

2. **ROLL CALL**

Present: Melanie Seamans, David Hasseltine, Susan Archer, Charles Seal-Villafranca, Pauline Campbell

Absent: Fred Randolph, Ken Kidder, Nina Louis

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

3. **CALL TO THE PUBLIC**

No one wished to speak.

4. **APPROVAL OF MINUTES**

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

1. May 13, 2019 Regular Board Meeting Minutes

Member Hasseltine made a motion that was seconded by Member Campbell to approve the May 13, 2019, regular meeting minutes.

The motion passed 5 – 0.

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

**5. FORMAL ADMINISTRATIVE HEARINGS OR MOTION TO DEEM ALLEGATIONS ADMITTED**

A. Formal Administrative Hearings or Motion to deem allegations admitted.

2. Leka, Daniela 18-220 & 18-221

President Villafranca conducted the hearing.

Sabrina Khan, Assistant Attorney General, was present and represented the state. Daniela Leka was not present for the hearing.

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

Ms. Khan made an opening statement stating that Ms. Leka failed to complete the terms of the consent agreement and therefore is not in noncompliance.

Philip Smyth was sworn in and testified as a witness for the State.

Ms. Khan introduced two exhibits

1. Notice of Hearing and Complaint, dated 4/29/2019
2. Consent Agreement and Order, dated 1/15/2019

Mr. Smyth testified to the exhibits introduced by Ms. Khan.

Ms. Khan made a closing argument that Ms. Leka did not complete the terms of probation and appears she cannot be regulated.

Member Villafranca made a motion that was seconded by Member Campbell to adopt the Parties and Jurisdictions and Factual Allegations as the Board’s Findings of Fact.

A roll call vote passed 5 – 0.

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

Member Seamans made a motion that was seconded by Member Archer to adopt the Alleged Allegations of Unprofessional Conduct from the Complaint and Notice of Hearing as the Board’s Conclusions of Law.

A roll call vote passed 5 – 0.

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

After the Board deliberated, Member Seamans made a motion that was seconded by Member Villafranca to revoke the manager certificate of Daniela Leka.

A roll call vote passed 5 – 0.

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

The hearing was concluded.

3. Raymond, Delia 18-146

President Villafranca conducted the hearing.

Sabrina Khan, Assistant Attorney General, was present and represented the state. Delia Raymond was not present for the hearing.

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

Ms. Khan made an opening statement and requested the Board to continue the hearing for a future meeting to give staff time to mail the Complaint and Notice of Hearing to an alternate address of record.

Member Villafranca made a motion that was seconded by Member Seamans to table the hearing to a future meeting.

The motion passed 5 – 0.

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

4. Insanic, Damir 18-111

President Villafranca conducted the hearing.

Sabrina Khan, Assistant Attorney General, was present and represented the state. Damir Insanic was present for the hearing.

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

Ms. Khan made an opening statement stating that Mr. Insanic failed to complete the terms of the consent agreement and therefore was not in compliance.

Mr. Insanic made a brief opening statement that due to family issues he was not able to complete the terms of probation.

Philip Smyth was sworn in and testified as a witness for the State. According to testimony, Mr. Insanic did not complete any of the terms of the consent agreement probation terms.

Ms. Khan introduced two exhibits

1. Notice of Hearing and Complaint, dated 4/29/2019
2. Consent Agreement and Order, dated 8/6/2018

Mr. Insanic did not have any questions for Mr. Smyth.

Ms. Khan rested.

Mr. Insanic called himself as a witness and testified that he was working full time as a paramedic

Mr. Insanic rested.

Ms. Khan made a closing argument that Mr. Insanic did not complete the terms of probation and appears he cannot be regulated.

Mr. Insanic made a closing statement and wanted a second chance to complete the terms of probation.

Ms. Khan made a rebuttal statement that it was the respondents responsibility to complete the terms of probation that he signed and agreed to in the consent agreement.

Member Seamans made a motion that was seconded by Member Campbell to adopt the Parties and Jurisdictions and Factual Allegations as the Board’s Findings of Fact.

A roll call vote passed 5 – 0.

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

Member Campbell made a motion that was seconded by Member Archer to adopt the Alleged Allegations of Unprofessional Conduct from the Complaint and Notice of Hearing as the Board’s Conclusions of Law.

A roll call vote passed 5 – 0.

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

After the Board deliberated, Member Seamans made a motion that was seconded by Member Campbell to revoke the manager certificate of Damir Insonic.

A roll call vote passed 5 – 0.

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

The hearing was concluded.

5. Carlos, Jose 18-272

President Villafranca conducted the hearing.

Sabrina Khan, Assistant Attorney General, was present and represented the state. Jose Carlos was not present for the hearing.

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

Ms. Khan made an opening statement stating that Mr. Carlos was the manager of record at the time of the inspection and responsible for the deficiencies.

Philip Smyth was sworn in as a witness for the State and testified to the states exhibits.

Ms. Khan introduced two exhibits

1. Notice of Hearing and Complaint, dated 4/26/2019
2. Arizona Department of Health Services Enforcement Action Report
3. Arizona Department of Health Services Statement of Deficiencies, dated 2/27/2018
4. Board Investigator Notice of Complaint No. 18-272 to Respondent, dated 12/20/2018
5. Respondent’s Response to the Notice of Complaint No. 18-272, dated 1/16/2019
6. Respondent’s Answer to the complaint and Notice of Hearing, dated 5/29/2019

Ms. Khan rested.

Ms. Khan made a closing argument that Mr. Carlos was the manager when the DHS inspection was done and Mr. Carlos submitted the plan of correction to DHS regarding those deficiencies.

Member Seamans made a motion that was seconded by Member Villafranca to adopt the Parties and Jurisdictions and Factual Allegations as the Board’s Findings of Fact.

A roll call vote passed 5 – 0.

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

Member Villafranca made a motion that was seconded by Member Archer to adopt the Alleged Allegations of Unprofessional Conduct from the Complaint and Notice of Hearing as the Board’s Conclusions of Law.

A roll call vote passed 5 – 0.

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

After the Board deliberated, Member Campbell made a motion that was seconded by Member Seamans to revoke the manager certificate of Jose Carlos

A roll call vote passed 4 – 1, with Member Archer voting nay.

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

4 – 1 with Archer voting nay.

The hearing was concluded.

**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**

- 6. AAA Adult Care Home
- 7. Aegis at D’Arcy Ranch Assisted Living
- 8. Arizona Bright Morning Star Assisted Living
- 9. Arrowhead Senior Living
- 10. Beehive Homes of Yuma
- 11. Better Living Care Home Scottsdale LLC
- 12. Brookdale North Chandler
- 13. Christine’s Rose Garden Home Care, LLC

- 14. Circle of Life LLC
- 15. Desert Oasis Adult Care Home
- 16. Family Loving Kare S3
- 17. Hacienda at The River
- 18. Happy Family Home Care
- 19. Hummingbird Assisted Living Home
- 20. Ironwood Estate Assisted Living
- 21. New Horizons Adult Care Home #2
- 22. Prestige Assisted Living at Green Valley

Member Villafranca made a motion that was seconded by Member Archer to not open complaints on managers of the facilities listed on agenda items 6 - 22.

The motion passed 5 – 0.

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

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

	<b>Complaint #</b>	<b>Licensee</b>	<b>Title</b>	<b>Open Date</b>
23.	19-33	Pennington, Jessica	Manager	02/19/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Joshua Springs Senior Living, located in Bullhead City and identified 7 deficiencies in 5 different areas. Some of the deficiencies included:

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

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

Ms. Pennington was present and answered the Board’s questions. Ms. Pennington said she was only at the facility for a few days prior to the survey.

Member Villafranca made a motion that was seconded by Member Archer to dismiss complaint 19-33 against Jessica Pennington, for insufficient evidence of a violation.

24.	19-42	Chavez, Sara	Manager	02/26/19
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Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at The Villas at La Canada, Villa 1, located in Tucson 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 administration requirement was met

DHS took enforcement action on one violation and assessed a civil money penalty of \$6,800.00.

Ms. Chavez was present and answered the Board’s questions. She was manager on 3/20/2018. To March of 2019. A care manager was overseeing the medications. Ms. Chavez said she was not responsible for the previous survey but was aware of the repeat violations. Ms. Chavez explained there were not enough personnel to help with the correction as promised by the owners. She took her certificate down after the survey.

Member Villafranca made a motion that was seconded by Member Campbell to dismiss complaint 19-42 against Sara Chavez, for insufficient evidence of a violation.

The motion passed 4 – 1, with Member Hasseltine voting nay

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

25. No agenda item.

26. 19-35 Akator, Anthony Manager 02/25/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliant investigation at Akator’s Assisted Living Home, located in Tucson and identified 6 deficiencies in 4 different areas. Some of the deficiencies included:

- Manager failed to ensure medication administration requirement was met
- Manager failed to ensure a caregiver was present
- Manager failed to ensure TB requirement was met

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

Mr. Akator was present and answered the Board’s questions. According to Mr. Akator the narcotics were recorded and were locked. A lock was being placed on the refrigerator when the surveyor was present. Regarding the caregiver not present when the surveyor arrived. It was a shift change problem and the caregiver was late in showing up for work.

Member Hasseltine made a motion to dismiss the complaint. There was not a second.

Member Archer 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 19-35 involving manager Anthony Akator 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 \$200.00
  - b) 3 hours of Board approved continuing education in medication management
  - c) 3 hours of Board approved continuing education in personnel requirements
  - d) All continuing education classes must be pre-approved by the Board’s Executive Director
  - e) Any costs of the probation are those of the certificate holder



A roll call vote failed 2 – 3. Members Seamans, Campbell and Archer voted nay.

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

Member Seamans 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 19-35 involving manager Anthony Akator and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

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

A roll call vote passed 4 – 1, with member Hasseltine voting nay.

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

27. 19-54 Boado, Elizabeth Manager 04/02/19

Tabled until next month

28. 19-56 Schoen, Veronica Manager 04/05/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Papy McGuire, located in Tucson and identified 12 deficiencies in 5 different areas. Some of the deficiencies included:

- 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 \$500.00.

Ms. Schoen was present along with Yolanda Apodaca the owner of the facility. Ms. Schoen was not present at the time of the inspection. Ms. Schoen wrote the plan of correction. Ms. Schoen is at the facility two to three times a week for several hours.

Member 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 AAC R4-33-407(A)(B)(1), in complaint number 19-56 involving manager Veronica Schoen and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

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

A roll call vote passed 4 – 1, with Member Hasseltine voting nay.

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

29. 19-52 Rachi, Cornel Manager 03/25/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Majestic Villa Assisted Living II, located in Glendale and identified 7 deficiencies, 4 of which were repeat deficiencies, in 6 different areas. Some of the deficiencies included:

- Manager failed to ensure TB requirement was met
- Manager failed to ensure resident assessment requirement was met
- Manager failed to ensure disaster drill requirement was met

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

Mr. Rachi was present and answered the Board’s questions. Mr. Rachi is the manager of two homes. Mr. Rachi was not present at the time of the inspection. There were some things that could not be located for the surveyor.

Member Villafranca made a motion that was seconded by Member Hasseltine 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 19-52 involving manager Cornel Rachi and to offer a consent agreement to be signed within 10 days or the matter will proceed to formal hearing. The terms shall include the following:

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

A roll call vote passed 5 – 0.

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

30. 19-60 Singh, Porabhjoat Manager 04/05/19

Tabled until next month

31. 19-68 Tran, Dat Manager 04/29/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at DT Care 2, located in Surprise and identified 5 deficiencies in 4 different areas. Some of the deficiencies included:

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

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

Mr. Tran was not present at the meeting.

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 19-68 involving manager Dat Tran 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:

- I. Formal hearing

A roll call vote passed 5 – 0

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

32. 18-253 Barajas, Veronica Manager 10/26/18

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Rosa’s Little House II, located in Tucson and identified 7 deficiencies in 5 different areas. Some of the deficiencies included:

- Manager failed to ensure quality management was implemented
- Manager failed to ensure service plan requirement was met

- Manager failed to ensure medication storage requirement was met

DHS took enforcement action on 2 violations and assessed a civil money penalty of \$1,250.00.

Ms. Barajas was present and answered the Board’s questions. Ms. Barajas manages two home. One of the personnel files was at the other house. Ms. Barajasa has been a manager since 2001. Ms. Barajas took responsibility for the quality assurance deficiency.

Member Villafranca made a motion that was seconded by Member Hasseltine 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 18-253 involving manager Veronica Barajas 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 \$200.00b
  - b) 3 hours of Board approved continuing education in recordkeeping
  - 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 5 – 0.

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

33. 19-62 Adjei, Gloria Manager 04/23/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at House of Dignity Assisted Living, LLC, located in Queen Creek and identified 18 deficiencies in 9 different areas. Some of the deficiencies included:

- Manager failed to ensure hot water temperature requirement was met
- Manager failed to ensure TB requirement was met
- Manager failed to ensure service plan requirement was met

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

Ms. Adjei was present and answered the Board’s questions. There were two residents in the facility at the time of the survey. The surveyor could not get access to the records. The records were not complete and the TB test was not done. Member Seamans asked about the hot water error. According to Ms. Adjei, they got a new thermometer to correct the error.

Member 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 AAC R4-33-407(A)(B)(1), in complaint number 19-62 involving manager Gloria Adjei 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 residency agreement
  - c) 3 hours of Board approved continuing education in residency agreement
  - d) 3 hours of Board approved continuing education in medication management
  - 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 5 – 0.

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

34. 19-63 Pecora, Lenora Manager 04/23/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Villas at Green Valley, located Green Valley and identified 5 deficiencies in 5 different areas. Some of the deficiencies included:

- Manager failed to ensure documentation of caregiver training
- Manager failed to ensure service plan requirement was met

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

Ms. Pecora was present and answered the Board’s question. Ms. Pecora started in June 2018 and the survey was conducted in December 2018. Ms. Pecora advised they have an HR department that does all the checks, but she now checks all the files.

Member Villafranca made a motion that was seconded by Member Campbell to dismiss complaint 19-64 against Lenora Pecora, for insufficient evidence of a violation.

The motion passed 5 – 0.

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

35. 19-65 Salagean, Georgiana Manager 04/25/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at Angel Care Senior Home, LLC, located in Glendale and identified 10 deficiencies in 6 different areas. Some of the deficiencies included:

- Manager failed to ensure TB requirement was met
- Manager failed to ensure swimming pool gate was locked when not in use
- Manager failed to ensure resident agreement requirement was met

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

Was present and answered the Board’s questions regarding the survey deficiencies. The home is licensed for five residents and five were there at the time of the survey. Ms. Salagean said she has corrected all the deficiencies from the inspection.

Member Campbell 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 19-65 involving manager Georgiana Salagean 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 resident agreement
  - 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 5 – 0.

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

36. 18-222 Sagna-Nardy, Zeynab Manager 07/07/18

Member Villafranca made a motion that was seconded by Member Archer to continue the complaint until criminal case is adjudicated. The Board directed Mr. Smyth to monitor the criminal case progress.

37. 18-249 Garcia, Analyn Manager 02/05/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a compliance inspection at West Lane Home, located Phoenix and identified 9 deficiencies in 5 different areas. Some of the deficiencies included:

- Manager failed to ensure fingerprint clearance card requirement was met
- Manager failed to ensure CPR training requirement was met
- Manager failed to ensure a resident inability to ambulate requirement was met

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

Analyn Garcia was present along with the owner Rebecca Siddiqui. Staff did not receive a response from Ms. Garcia. Ms. Garcia stated she was away from the facility from May 21, 2018 to June 18, 2018, which was during the time of the inspection.

Ms. Garcia said she is in the facility once a week for eight hours. She works full time at another job.

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 18-249 involving manager Analyn Garcia 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 ethics
  - c) 3 hours of Board approved continuing education in record keeping
  - d) 3 hours of Board approved continuing education in personnel requirements
  - 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 4 – 1, Member Hasseltine voted nay.

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

38. 19-48 Harraway, Yvette Manager 03/09/19

Investigator Smyth summarized the complaint for the Board. DHS conducted a complaint investigation at Arnolds Place, located in Peoria and identified 6 deficiencies in 5 different areas. In September 2018 DHS conducted a compliance inspection and identified 10 deficiencies in 9 different areas. Some of the deficiencies included:

- Manager failed to ensure medication administration requirement was met
- Manager failed to ensure residency agreement requirement was met
- Manager failed to ensure service plan requirement was met

DHS took enforcement action on two violations on the complaint investigation and assessed a civil money penalty of \$250.00 and \$750.00 on three violations on the compliance inspection.

Ms. Harraway was present and answered the Board’s questions. The facility is licensed for 15 residents. Member Villafranca questioned Ms. Harraway about the number of deficiencies and why they were so many repeats. Ms. Seamans asked why she did not respond to the Board. Ms. Harraway said she is going through a divorce and her husband changed the address where mail went and did not get the notice.

Member Villafranca made a motion that was seconded by Member Seamans that the Board finds insufficient evidence of a violation in complaint 19-48 involving manager Yvette Harraway, but issue a letter of concern. The Board's concern was that the manager failed to administer sufficient oversight.

The motion passed 5 – 0.

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

39. 19-36 Austin, Danielle Manager 02/25/19

Ms. Austin was not present at the meeting.

The Board tabled the matter until the July meeting.

C. Board Review Pursuant to Terms of Probation

40. Worley, Tiffany

Investigator Smyth reviewed the terms of the consent agreement. Ms. Worley explained what she learned from the meeting.

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.

41. Temporary Administrator Licenses

None			
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Permanent Administrator Licenses

Bouseman, Timothy			
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Temporary Manager Certificates

Martin, Amalia	Martin, Heather		
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Permanent Manager Certificates

Martin, Amalia	Martin, Heather	Banning, Kathryn	Moreno, John
Lloyd, Amy	Thompson, Amey	Wiese, Danielle	Campbell, Stephanie
Matthias, Lori	Myers, Amy	Gonzales, Amy	Martin, Wendy



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.

The motion passed 5 – 0.

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

42. Hovey, Kalyn Permanent manager certificate

Complaint tabled until the July meeting.

43. Wells, Dylan Permanent manager certificate

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

Applicant Dylan was present and answered the Board’s questions.

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

The motion passed 4 – 1, with Member Campbell voting nay.

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

44. Assisted Living Facility Caregiver Training Program

None	
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Assisted Living Facility Manager Training Program

None	
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Assisted Living Facility Caregiver Training Program Renewal

Mohave Community College ALCTP-0031	Prestige Senior Living Caregiver Training ALCTP-0050
Bee Hive Homes Assisted Living ALCTP-0032	

Assisted Living Facility Manager Training Program Renewal

Excel Caregiver Training Program ALMTP-0013	
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Member Villafranca made a motion that was seconded by Member Archer to approve the assisted living facility caregiver training program

The motion passed 5 – 0.

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

**9. OTHER BUSINESS**

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

45. Discussion on if AHCCCS would allow homeless people in assisted living homes.

**10. ADMINISTRATIVE MATTERS**

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

46. Financial Reports

Executive Director Imig reviewed the financial reports with the Board. The Board fund ended the month of May with a balance of \$361,225. Overall expenses were as projected.

47. Complaints Status Report

Investigator Smyth reported that in May there were 7 complaints opened. There are 7 open complaints from FY18 and 41 from FY19. There are currently 28 active consent agreements.

48. Licensing Report

Licensing Specialist Mallas reported there are currently there are 2,386 active and 22 inactive managers and 328 active and 22 inactive administrators.

49. Legislation Update

Executive Director reported that HB1244 was signed by the governor and would go into law in 90 days.

50. Rules Update

There was none to report.

51 Training Program Report

Executive Director Imig reported there were about 44 caregiver training programs and 41 manager training programs. During the last year from May 2018 to May 2019 there were 2281 caregivers that took the exam for the first time and had a 79% pass rate. There were 376 manager trainees that had first time pass rate of 80%.

52. Board Meeting Critique

There was a brief Board meeting Critique.

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

The next regular meeting of the Board will be held on Monday, July 15, 2019 at 1740 W. Adams, Board Meeting Room C, Phoenix, Arizona, at 9:00 a.m.

**12. ADJOURNMENT**

The Board meeting was adjourned at 1:40 p.m.