



**Janice K. Brewer**  
Governor

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Executive Director

*Arizona State Board of Nursing*

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May 11, 2011

Ms. Debra K. Davenport, CPA  
Auditor General  
Office of the Auditor General  
2910 North 44<sup>th</sup> Street, Suite 410  
Phoenix, Arizona 85018

Dear Ms. Davenport,

The Arizona State Board of Nursing Board Members have reviewed the preliminary draft performance audit and sunset review received on May 3, 2011. Please find the Board's attached response to the audit findings and recommendations. The Board appreciates having the opportunity to clarify the identified issue noted in the Sunset Factors of the Audit Report.

From your review of the Board of Nursing, the Arizona Legislature has given the Board regulatory responsibility and oversight over a greater number of licensees than any other health care regulatory board in Arizona. The 110,000 licensed nurses and certified nursing assistants regulated by the Board (CNAs, LPNs, RNs and APRNs) are unlike any other Arizona regulatory agency in both size and scope of practice variability. For this reason, the Board appreciates the consideration that you have given to the practices followed by comparably sized and funded Boards of Nursing in other states. The Board also appreciates the observations and recommendations of the audit staff over the past year and for the opportunity to work to fulfill the mandate from the legislature to protect the public.

Sincerely yours,

Kathy A. Scott, RN, MPA, PhD, FACHE  
Board President

**Response to recommendations:**

**1.1. The legislature should consider revising statute to:**

- a. Enable the Board to develop a substantive policy that would allow the Executive Director to require substance abuse, mental, physical, or psychological examinations or skills evaluation in appropriate cases; and**
- b. Expand the definition of unprofessional conduct to include failing to comply with the Executive Director's order to obtain an evaluation.**

*The finding of the Auditor General is agreed to and the audit recommendation will be implemented. The implementation is contingent upon Legislative approval.*

**1.2. If the legislature revises statute, the Board should develop and implement a substantive policy authorizing the Executive Director to require substance abuse evaluations in appropriate cases and establish criteria for determining appropriate circumstances for requiring an evaluation.**

*The finding of the Auditor General is agreed to and the audit recommendation will be implemented. The implementation is contingent upon Legislative approval.*

**1.3. To reduce delays associated with waiting for licensees and certificate holders to sign consent agreements, the Board should:**

- a. Expand its practice of drafting, negotiating, and having the licensee/certificate holder sign a consent agreement in appropriate cases prior to staff forwarding the complaint investigation to the Board for its initial review, and**
- b. Develop and implement policies and procedures that would provide guidance to its staff for negotiating and completing consent agreements**

*The finding of the Auditor General is agreed to and the audit recommendation will be implemented.*

**1.4. To enable the Board to relay on its database for tracking and monitoring timeliness of complaint processing, particularly high-priority complaints, it should:**

- a. Review and modify its procedures and controls to address missing data and inconsistency in other date fields, and**
- b. When resources permit, enhance its database to allow better tracking of historical information and status changes.**

*The finding of the Auditor General is agreed to and the audit recommendation will be implemented.*

**1.5. To better assure that medium and low risk cases continue to make progress, board officials should strengthen monitoring of these cases by selecting and implementing a process for reviewing inactive medium and low priority complaints.**

*The finding of the Auditor General is agreed to and the audit recommendation will be implemented.*

**2. The effectiveness in which the Board has met its objectives and purpose and efficiency in which it has operated.**

#### **Clarification**

The Board should clarify its guidance to staff when motor vehicle and law enforcement records should and should not be subpoenaed based on the nature of the allegations. Based on information identified during the audit, Board approved investigative guidelines have been reviewed with staff within the past six months.

**4. The extent to which rules adopted by the Board are consistent with the legislative mandate.**

#### **Clarification**

General Counsel for the Auditor General has analyzed the Board's rule making statutes and believes that the Board has fully established rules required by statute. However, one rule appears to exceed the Board's authority. Specifically, A.A.C. R4-19-515 provides that the Board can authorize a Certified Registered Anesthetist (CRNA) to prescribe medication. However, A.R.S. § 32-1661 authorizes CRNA's to only administer anesthetics, not to prescribe medication and A.R.S. § 32-1601(15) (d) (v) allows only registered nurse practitioners to prescribe medications. The Board of Nursing fully understands that CRNA's – who are registered nurses who have completed a nationally accredited program in the science of anesthesia – are important in all settings and in particular in rural areas because they perform the majority of anesthesia. Therefore, the Board has met with stakeholders about the need to seek statutory changes to conform the law to the practice that licensees, providers and the public have CRNA's to prescribe medications supported by statute.