



DEBRA K. DAVENPORT, CPA
AUDITOR GENERAL

STATE OF ARIZONA
OFFICE OF THE
AUDITOR GENERAL

MELANIE M. CHESNEY
DEPUTY AUDITOR GENERAL

May 1, 2013

The Honorable Chester Crandell, Chair
Joint Legislative Audit Committee

The Honorable John Allen, Vice Chair
Joint Legislative Audit Committee

Dear Senator Crandell and Representative Allen:

Our Office has recently completed a 24-month followup of the Arizona Medical Board regarding the implementation status of the 10 audit recommendations (including sub-parts of the recommendations) presented in the performance audit report released in June 2011 (Auditor General Report No. 11-04). As the attached grid indicates:

- 9 have been implemented, and
- 1 has been implemented in a different manner.

Unless otherwise directed by the Joint Legislative Audit Committee, this concludes our follow-up work on the Board's efforts to implement the recommendations from the June 2011 performance audit report.

Sincerely,

Dale Chapman, Director
Performance Audit Division

DC:ss
Attachment

cc: Gordi S. Khera, MD, FACC, Chair
Arizona Medical Board

Lisa Wynn, Executive Director
Arizona Medical Board

Arizona Medical Board

Auditor General Report No. 11-04

24-Month Follow-Up Report

Recommendation	Status/Additional Explanation
Finding 1: Board should improve staff doctor and medical consultant selection, medical consultant training, and problem resolution practices	
1.1 The Board should formalize its staff doctor and medical consultant selection practices in written policies and procedures, including how board staff should consider the nature of the complaint and licensees' practice specialties in determining the selection of consultants.	Implemented at 6 months
1.2 The Board should establish and implement policies and procedures regarding medical consultant qualifications, and complaint review time frames and requirements.	Implemented at 6 months
1.3 The Board should establish and implement a process for requiring and ensuring that its medical consultants complete board-provided training before they review complaints. One way to do this would be to request confirmation from the consultants that they had reviewed the training materials.	Implemented at 6 months
1.4 The Board should establish and implement written policies and procedures that provide guidance on when medical consultants should not be used or should be used only for certain types of complaints.	Implemented at 6 months
1.5 The Board should establish and implement policies and procedures on how and where problems with specific medical consultants' work and decisions regarding the continuing use of these consultants should be documented.	Implemented at 6 months
Sunset Factor #2: The effectiveness with which the Board has met its objective and purpose and the efficiency with which it has operated.	
2.1 The Board should develop and implement a written policy and procedures for the Executive Director to use in deciding whether to dismiss a complaint, including what factors should be considered when deciding whether a complaint should be dismissed and what to do when disagreeing with a staff recommendation for dismissal.	Implemented at 6 months

Recommendation

Status/Additional Explanation

2.2 To ensure that it processes more complaints in a timely manner, the Board should develop a report to capture additional complaint-handling timeliness information to help identify and address factors in the process that may impact timeliness. The Board should include the priority level in its report so that it can assess whether complaints are processed within required time frames according to assigned priority. The Board may also need to modify its computer system to include additional date fields, such as the date the Staff Investigational Review Committee completes its complaint review. Once the Board has developed a report, it should use this information to address factors within its control that cause delays in the complaint-handling process.

Implemented at 24 months

2.3 To ensure that only appropriate individuals have access to confidential information, the Board should follow a standard developed by the state Government Information Technology Agency (GITA) that calls for classifying data and developing a plan to secure data based on its classification.

Implemented at 24 months¹

2.4 To ensure continuous information technology services, the Board should enhance its business continuity plan to address all the issues included in the GITA standard for such plans. The Board needs to ensure that complaint investigative and license application information will not be lost and can still be accessed should the Board's information technology systems shut down.

Implemented in a different manner at 24 months
Rather than enhance its business continuity plan, the Board has taken steps to ensure continuous information technology services by contracting for electronic data backup and disaster recovery services, and creating a disaster recovery plan to help ensure that board information will not be lost and can still be accessed by staff in the event of an information technology system shut down.

Sunset Factor #3: The extent to which the Board has operated within the public interest.

3.1 The Board should ensure that it obtains required information from licensees and updates its Web site as required by statute.

Implemented at 6 months

¹ Although this recommendation directs the Board to follow GITA's policy, in 2011, GITA was merged with the Department of Administration's Information Services Division and the Telecommunications Program Office. This technology-focused group is called the Arizona Strategic Enterprise Technology office, or ASET.