

The September 2021 Arizona State Board of Nursing performance audit and sunset review found that the Board generally issued licenses/certificates we reviewed in accordance with statute and rule but did not resolve some complaints in a timely manner, which may affect patient safety; remit all required revenues to the State General Fund; and provide sufficient public information. We made 11 recommendations to the Board, and its status in implementing the recommendations is as follows:

Status of 11 recommendations

Implemented	6
Implemented in a different manner	1
In process	1
Not yet applicable	1
Not implemented	2

We will conduct an 18-month followup with the Board on the status of the recommendations that have not yet been implemented.

Finding 1: Board has not resolved some complaints in a timely manner, which may affect patient safety

1. The Board should investigate and adjudicate complaints within 180 days and, as necessary, use its complaint-prioritization categories to focus its resources on resolving the highest-risk complaints first.
Not implemented—Although the Board reported that it prioritizes high-risk complaints for investigation, it did not investigate and adjudicate most complaints we reviewed within 180 days. Specifically, we reviewed all 133 complaints the Board adjudicated between January 2022 and February 2022 and found it did not investigate and adjudicate 107 of these complaints (81 percent) within 180 days. We will further assess the Board’s efforts to investigate and adjudicate complaints within 180 days during our 18-month followup.
2. The Board should assess the impact of the requested investigator positions on its complaint-resolution timeliness and determine if it needs to request additional resources to resolve complaints within 180 days. If the Board determines that it needs additional resources, it should work with the Legislature to obtain these resources.

Implementation in process—The Board reported hiring 8 new investigative staff as of November 2021, which helped it to reduce its investigators’ complaint caseloads, but as of August 2022, it reported that it had 7.5 investigative staff vacancies. Although the Board is actively recruiting to fill these vacancies, these investigative staff position vacancies impact the Board’s ability to investigate and adjudicate complaints within 180 days (see explanation for Recommendation 1). We will further review Board efforts to fill its investigative staff positions and its assessment of the impact of filled and vacant investigative staff positions on its complaint-resolution timeliness during our 18-month followup.

Sunset Factor 2: The extent to which the Board has met its statutory objective and purpose and the efficiency with which it has operated.

3. The Board should continue to implement its new policy to review and align Arizona APRN certificate expiration dates with the expiration date of the multistate RN license issued by another state when the RN license expiration date is before the APRN certificate expiration date to ensure Arizona APRN certificate holders have an active RN license.

Implemented at 12 Months

4. The Board should implement its new policy and procedures to periodically review the appropriateness of its fees.
Not yet applicable—According to the Board’s policies and procedures, which were finalized in September 2021, it should review its fees every 5 years. As indicated in our audit report, the Board previously reviewed its fees in January 2021. As such, the Board would not be scheduled to again review its fees until 2026.

5. The Board should, as soon as possible, determine the correct amount that should be remitted to the State General Fund due to its misclassification of fiscal year 2018 credit card revenues and unremitted civil and administrative penalties, including researching how long it has not remitted 100 percent of both penalties, and remit these monies to the State General Fund.

Implemented in a different manner at 12 months—The Board was unable to determine the full amount it owed to the State General Fund in response to not properly remitting 100 percent of all administrative and civil penalties in prior years and the misclassification of its fiscal year 2018 credit card revenues. Although the Board attempted to calculate the full amount it owed, it encountered various issues that prevented an accurate calculation, such as no longer having access to previous cashiering systems that would provide documentation to support the amount owed to the State General Fund and the State’s accounting system lacking sufficient detail to likewise determine this amount. Consequently, to compensate the State General Fund for monies it did not properly remit in prior years, the Board remitted approximately \$82,000 more to the State General Fund than required by statute. Specifically, the Board remitted all penalty and late fees it collected in fiscal years 2019 through 2021, including the approximately \$82,000 from the portion of late fees that it was authorized to retain. However, absent the necessary information and documentation from prior years, we could not determine if the Board remitted sufficient monies to address the shortfall from prior years.

6. The Board should ensure it remits 100 percent of future civil and administrative penalties to the State General Fund.

Implemented at 12 months

Sunset Factor 3: The extent to which the Board serves the entire State rather than specific interests.

7. The Board should continue to implement its new conflict-of-interest policy.

Implemented at 12 months

Sunset Factor 5: The extent to which the Board has encouraged input from the public before adopting its rules and the extent to which it has informed the public as to its actions and their expected impact on the public.

8. The Board should continue to implement its new open meeting law policies and procedures.

Implemented at 12 Months

9. The Board should continue to implement its new and revised public information policies and procedures.
- Not implemented**—Although the Board established a policy and procedures during the audit for providing licensing and complaint information to the public, Board staff have not adhered to the policy and procedures. Specifically, in response to 2 anonymous telephone calls we made to the Board in June 2022, Board staff did not provide licensing information over the phone, including licensure status information, and information about nondisciplinary actions, as required by statute. We will further assess Board staff compliance with the policy and procedures during our 18-month followup.
10. The Board should continue to follow its procedures for ensuring that disciplinary information for LNAs and substantiated complaint information for CNAs is accurately uploaded to its database and displayed on its website, and update its written policies and procedures to reflect these procedures after its database is upgraded.
- Implemented at 12 Months**
11. The Board should conduct a risk-based review of its online information for LNAs and CNAs to ensure the information on its website is complete and accurate.

Implemented at 12 Months