September 17, 2014

Debra K. Davenport, CPA
Auditor General
Office of the Auditor General
State of Arizona
2910 N. 44th Street, Ste. 410
Phoenix, AZ 85018

Dear Ms. Davenport:

On behalf of the State of Arizona Naturopathic Physicians Medical Board, I have attached the agency's response to the Audit Report conducted by your office.

The Board is thankful for the time and effort you and your staff have taken to conduct this audit. We view this audit not only as a requirement of statute, but as a valuable tool which will be used to help the Board become more effective and efficient in its mission to protect the public through regulating the practice of naturopathic medicine.

The field of naturopathic medicine in the State of Arizona has made great strides over the previous 10 years. In order to keep up with these advances in naturopathic medicine, the Board must make changes to outdated statute, rule, and update its policies and procedures. The recommendations identified in the report, either have been implemented or are in the process of being implemented.

Thank you for consideration of the following response.

Sincerely,

Gail Anthony
Executive Director

Attachment
Cc: State of Arizona Naturopathic Physicians Medical Board Members
AUDIT RESPONSE
State of Arizona Naturopathic Physicians Medical Board

Licensing
1. The Board should develop and implement policies and procedures:

   1a. To ensure that board staff place all completed license applications on its agenda for approval.

   **The finding of the Auditor General is agreed to and will be implemented.**
   The Board will implement policies and procedures to include a reconciliation process to ensure a complete application is not inadvertently left off the agenda.

   1b. To ensure that board staff place all applicants with criminal history information, whether self-reported or resulting from the background check, on a board agenda for special consideration and approval or disapproval.

   **The finding of the Auditor General is agreed to and will be implemented.**
   Policy and procedure has been implemented to ensure that all criminal histories, no matter how reported, what degree of seriousness of the offense, or the age of the offense, will be placed on the board agenda, separate from the consent agenda, for individual board consideration.

2. The Board should strengthen its policies and procedures, including its application and checklist, to help ensure that applicants applying for licensure by endorsement meet all statutory and rule requirements. These policies and procedures, including the application and checklist, should specify the documentation applicants must submit to demonstrate meeting all licensure requirements, including requirements for actively practicing naturopathic medicine for 3 years immediately preceding the application and graduating form an approved school.

   **The finding of the Auditor General is agreed to and will be implemented.**
   The application and checklist for applying for licensure by endorsement will indicate the specific documentation required in order to meet the requirements as outlined in A.R.S. §32-1523 (3)(a)(b)(c)(d). As part of the requirement for gaining licensure in another state, an applicant would have demonstrated proof of graduation from an approved college of naturopathic medicine, by causing a transcript to be supplied to that states' board. Based on this audit, the Board will now require an applicant to provide the same evidence to this Board when applying for licensure by endorsement.

3. The Board should develop and implement policies and procedures, including a checklist, to guide board staff in obtaining and documenting the information necessary for the Board to determine whether applicants for certificates to conduct preceptorship training programs meet the certificate requirements.

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

4. The Board should develop and implement policies and procedures to ensure it audits 10 percent of all license renewal applications.

   **The finding of the Auditor General is agreed to and will be implemented.**
   The Board will strengthen its policy and procedures outlining specific steps staff should take when auditing applications for renewal of licensure processed online and when auditing renewal applications processed by paper form.
5. The Board should develop and implement policies and procedures setting forth how to perform continuing medical education audits. These policies and procedures should specify what documentation is acceptable for proving licensees have completed continuing medical education and how board staff should document and report these audits' results to the Board.

The finding of the Auditor General is agreed to and will be implemented.
The Board will develop policy and procedures regarding what evidence is appropriate to support the CME requirements as outline in R4-18-205.

6. The Board should develop and implement policies and procedures to track compliance with all licensing and certification time frames and train board staff on them. These policies and procedures should also specify the documentation that the Board should retain to allow it to track compliance with its time frames and what information board staff should periodically report to the Board.

The finding of the Auditor General is agreed to and will be implemented.
Policies and procedures will be based on the updated database electronic tracking.

7. To effectively track and report licensing timeframe information, board staff should develop and implement a centralized electronic mechanism for doing so.

The finding of the Auditor General is agreed to and will be implemented.
The Board is in the process of updating its database to give staff the ability to track licensing and certification time frames electronically.

Complaint Resolution

1. The Board should develop and implement policies and procedures that:

1a. Establish when it is appropriate for the executive director to recommend that the Board dismiss a complaint, such as when the executive director is not also the investigator and there is no evidence to support the complaint allegations.

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

1b. Establish when it is appropriate for the executive director to recommend that the Board dismiss a complaint, such as when the executive director is the investigator and there is no evidence to support the complaint allegation.

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

1c. Require that the executive director provide the Board with a summary of each complaint dismissed and the basis for the dismissal. This policy should pertain to both complaints the executive director dismissed and those referred for board dismissal.

The finding of the Auditor General is agreed to and will be implemented.
2. The Board should continue to develop and implement complaint discipline policies and procedures that:

2a. Ensure that complaints with similar statutory and/or rule violations receive consistent discipline.

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

2b. Escalate discipline when appropriate, such as for licensees with multiple or prior complaints.

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

3. The Board should develop and implement policies and procedures that:

3a. Specify time frames for completing an investigator's key steps, including how long it should take to open a complaints after receipt and the additional time the Board may grant licensees to respond to complaint allegations.

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

3b. Include criteria for prioritizing complaints based on the nature of the alleged violations and the extent to which these alleged violations endanger the public's health and safety.

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

3c. Establish requirements for tracking and monitoring complaint processing, including establishing a mechanism to track key steps' completion in the complaint-handling process, ensuring that board staff record key information on complaint investigations in a timely manner, and identify responsibilities for board staff and the Board to actively monitor the progress of complaint investigations and address reasons for delay.

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

3d. Require staff to submit report to the Board at defined intervals regarding the status of open complaints and the timeliness of closed complaints to help the Board identify and address factors in the complaint-handling process that may impact timeliness.

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

4. The Board should develop and implement policies and procedures that indicate under what circumstances it will investigate complaints that originate in another state.

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

Statute makes clear the Board should investigate complaints originating elsewhere. Pursuant to A.R.S. § 32-1501 31 "Unprofessional conduct" includes the following, whether occurring in this state or elsewhere. And, A.R.S. § 32-1501(ll) Action taken against a doctor of naturopathic medicine by a licensing or regulatory board in another jurisdiction due to that doctor's mental or physical inability to engage safely in the practice of naturopathic medicine or the doctor's medical incompetence or for unprofessional conduct as defined by that licensing or regulatory board and that corresponds directly or indirectly to an act of unprofessional conduct prescribed by this paragraph. The action taken may include refusing, denying, revoking or suspending a
license, otherwise limiting, restricting or monitoring a licensee or placing a licensee on probation by that licensing or regulatory board. Policy and Procedure will outline these statutes.

5. The board should determine whether it needs additional investigative resources to help ensure it processes complaints in a timely manner. Specifically, the Board should:

5a Assess the efficiency of its complaint investigation process, and other processes, tasks, and responsibilities that its executive director performs. This would help determine if these processes are as efficient as possible and whether the complaint investigation process can be streamlined, or other processes and tasks can be streamlined and/or eliminated. As part of this assessment, the Board should also determine whether its executive director has sufficient time to investigate complaints and perform the other required executive director tasks and responsibilities. The Board should document the results of these assessments, including how much time the executive director must spend to perform the various processes, tasks, and responsibilities assigned to her, including complaint investigations.

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

5b. Determine its complaint investigative workload, including an estimate of its future investigative workload and document the results. Doing so will help give the Board the information it needs to then determine its investigative staffing needs.

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

5c Determine investigative staffing needs and document the results.

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

5d. If after completing these assessments the Board determines that it needs additional investigative resources, it may be able to request additional appropriations to use some of its end-of-year fund balance to contract for investigative assistance on an as-needed basis.

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

Public Information

1. The Board should develop policies and procedures for ensuring that board staff update the database with the correct certificate status in a timely manner.

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

2. The Board should develop and implement public information policies and procedures to guide staff on what information to provide about licensees and certificate holders over the phone and how quickly to return phone calls, and train its staff accordingly.

The finding of the Auditor General is agreed to and will be implemented.
Sunset Factor Analysis

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

• Board should conduct statutorily required inspections.

   The finding of the Auditor General is agreed to and a different method of dealing with the finding will be implemented.
   Specifically, the Board determined at the September 11, 2014 Board meeting A.R.S. 32-1504 (A) (6), the outlined is subject to oversight by other entities. The statute appears to be an outdated statute that the Board will consider changing or removing.

   A.R.S. 32-1509 (C)(20), was also discussed. The board determined it would create a specific checklist for the inspector to follow, and will further determine an audit schedule.

• Board should approve schools of naturopathic medicine and renew approved schools annually.

   The finding of the Auditor General is agreed to and will be implemented.
   Naturopathic Colleges recognized by the Board have been accredited by one of the regional accrediting agencies approved by the U.S. Department of Education. In addition, all of the naturopathic medicine programs of these colleges have been accredited by the Council on Naturopathic Medical Education. Each year, the American Association of Naturopathic Medical Colleges provides the Board with a current list of accredited colleges. Policy and Procedure will be implemented to include a once a year board formal approval/and recognition of these colleges based on the list provided each year by the AANMC

• Board should develop and implement policies and procedures for license reinstatement.

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

9. The extent to which changes are necessary in the laws of the Board to adequately comply with the factors listed in the sunset law.

• Licensure-by-endorsement applicants should demonstrate competence to practice acupuncture and minor surgery.

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