

The August 2022 Arizona State Board of Massage Therapy performance audit and sunset review found that the Board did not investigate or timely investigate, document, or review all complaints it received; did not issue some initial licenses in accordance with statute and rule; and did not provide some public information in response to our anonymous requests or on its website. We made 27 recommendations to the Board, and its status in implementing the recommendations is as follows:

### Status of 27 recommendations

Implemented	1
In process	3
<b>Not implemented</b>	<b>23</b>

We determined that the Board had implemented 1 recommendation and was in the process of implementing 3 recommendations. However, although the Board verbally reported progress toward implementing other recommendations, it did not provide documentation in response to 2 requests we made for documentation demonstrating its progress toward implementing any of the remaining 23 recommendations. Absent this documentation, we were unable to independently assess the Board's efforts to implement these recommendations, including corroborating any written/verbal statements it made reporting its progress. As a result, we have listed these 23 recommendations as not implemented. We will conduct an 18-month followup with the Board on the status of the recommendations that have not yet been implemented. However, if the Board again fails to provide documentation to support its efforts to implement any of the outstanding recommendations, we will again be unable to assess if it has made progress toward implementation.

### Finding 1: Board did not investigate or timely investigate, document, or review all complaints it received, increasing public safety risk

1. The Board should investigate and resolve all complaints it receives within 180 days.  
**Not implemented**—Although the Board provided a written response reporting its efforts to implement Recommendations 1 through 4, including their subparts, it did not provide the requested documentation to demonstrate these efforts. Absent this documentation, we were unable to independently assess and corroborate the Board's reported progress toward implementing these recommendations.
2. The Board should establish written policies and procedures for complaint handling that include:
  - a. Minimum documentation requirements, such as retaining complaint forms, correspondence with all parties and other investigative documents, final investigative reports, Board decisions, and dates associated with investigative steps and Board decisions.  
**Not implemented**—See explanation for Recommendation 1.
  - b. Time frames for completing key complaint-handling steps and tasks.  
**Not implemented**—See explanation for Recommendation 1.
  - c. Standards for prioritizing complaints based on the severity of allegations.  
**Not implemented**—See explanation for Recommendation 1.

- d. Complaint-screening protocols, including determining which complaints are within its jurisdiction.  
**Not implemented**—See explanation for Recommendation 1.
  - e. Notification requirements for parties involved, such as when a complaint is being opened or resolved, or when a complaint falls outside the Board’s jurisdiction.  
**Not implemented**—See explanation for Recommendation 1.
3. The Board should develop a complaint-tracking process that allows Board staff to track all complaints it receives, monitor complaints it receives to ensure that they are investigated and resolved, and ensure that complaints are being resolved in a timely manner.  
**Not implemented**—See explanation for Recommendation 1.
  4. The Board should develop and implement a formal management and analysis reporting process that includes Board staff routinely reporting to Board members and the executive director information on the nature and volume of complaints, its timeliness in investigating and resolving complaints, and the adequacy and consistency of its enforcement actions and their effectiveness in protecting the State’s citizens from harm.  
**Not implemented**—See explanation for Recommendation 1.
  5. The Board should determine whether it will delegate authority to its executive director to dismiss complaints, and if so, it should delegate this responsibility in writing, including the types of complaints the executive director may dismiss and how the Board wants to be informed of these dismissals.  
**Not implemented**—The Board Chair and staff reported that the Board reviewed and unanimously voted to adopt a policy regarding its executive director’s authority to dismiss complaints at its December 2022 meeting. Additionally, as indicated on its December 19, 2022, meeting agenda, the Board was scheduled to review, discuss, and take possible action authorizing its executive director to dismiss complaints. However, our review of the Board’s December 2022 meeting minutes and audio recording found no indication the Board discussed this agenda item and adopted such a policy at the meeting. Additionally, the Board did not provide an approved and adopted written policy regarding its executive director’s authority to dismiss complaints for our review. Board staff reported that the proposed policy regarding the executive director’s authority to dismiss complaints has been placed on the Board’s June 26, 2023, meeting agenda for discussion and adoption.

**Finding 2: Board has not made its telephone number publicly available and did not provide some information in response to our anonymous requests or on its website, restricting access to information public needs to make informed decisions about massage therapists**

6. The Board should make its telephone number publicly available through its website, consistent with all other Arizona health profession regulatory boards.  
**Implemented at 6 months**—As of April 2023, the Board’s telephone number is available on its website.
7. The Board should respond to all telephone and email inquiries it receives from the public by providing the requested information, as authorized by statute.  
**Implementation in process**—In response to 2 anonymous telephone calls we made and 2 anonymous emails we sent to the Board, Board staff responded to our inquiries within 2 business days. However, although Board staff provided the requested information in response to 3 of our inquiries, they did not provide the requested information for 1 of the email inquiries, despite statute requiring it to provide the requested information. We will further assess the Board’s efforts to implement this recommendation during the 18-month followup.

8. The Board should update and implement its public information policies and procedures to include steps its staff should take for:
  - a. Responding to email inquiries and telephone calls for information on licensees, including time frames and a schedule for staff to respond to these inquiries, and identifying what information can be disclosed.
 

**Not implemented**—The Board has not updated its public information policies and procedures for responding to email and telephone call inquiries regarding its licensees or for posting disciplinary and applicable nondisciplinary actions/orders on its website. The Board reported that it plans to complete these policies and procedures by December 31, 2023.
  - b. Posting disciplinary and applicable nondisciplinary actions/orders on its website, including identifying time frames for both posting and removing the actions/orders, identifying which actions/orders can be posted in compliance with statute, and monitoring the postings to ensure they are removed from the website in compliance with the 5-year statutory time frame.
 

**Not implemented**—See explanation for Recommendation 8a.
9. The Board should train existing and new staff on the updated public information policies and procedures.
 

**Not implemented**—See explanation for Recommendation 8a.
10. The Board should post copies of all statutorily required disciplinary and nondisciplinary actions/orders on its website that fall within the statutory 5-year time frame.
 

**Implementation in process**—We reviewed disciplinary and nondisciplinary actions/orders posted to the Board’s website as of February 2023 and disciplinary and nondisciplinary actions/orders that should have been posted to the Board’s website but were not. Based on our review, the Board had appropriately reposted to its website most of the disciplinary and nondisciplinary actions/orders it had removed in response to our finding that 111 of these actions/orders that were posted on the website exceeded the statutory 5-year time frame. However, we identified additional actions/orders the Board should have posted to its website but had not. For example, the Board had not reposted to its website 3 actions/orders that it had removed but that fell within the statutory 5-year time frame; and an additional 2 of 7 Board disciplinary and nondisciplinary actions/orders it approved between July 2022 through December 2022 that should have been posted to the website pursuant to statute. Finally, we identified 1 disciplinary order posted to the Board’s website that exceeded the statutory 5-year time frame.

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

11. The Board should issue licenses only to applicants who meet all statutory and rule requirements within the time frames established in rule.
 

**Not implemented**—Although the Board indicated it has a procedure for ensuring applicants comply with licensing requirements, it did not provide the requested documentation of this procedure. Absent this documentation, we were unable to independently assess if the Board’s reported procedure helps ensure it issues licenses only to applicants who meet all statutory and rule requirements within the time frames established in rule.
12. The Board should work with its electronic licensing software vendor to ensure that this software:
  - a. Collects all relevant data the Board needs to document and ensure license applicants comply with licensure requirements.
 

**Not implemented**—The Board provided a written response reporting that the ability to collect all relevant data it needs to document and ensure license applicants’ compliance with licensure requirements and to query or create reports to monitor its licensing process, including monitoring compliance with licensing time frames, are promised capabilities with its new electronic licensing software. However, the Board did not provide the requested documentation corroborating its written statement. The Board also reported that

the Arizona Department of Administration (ADOA) is coordinating the implementation of this software, and according to ADOA documentation, the estimated date for rolling out the software is June 2023.

- b. Allows Board staff to query or create reports to monitor its licensing process, including monitoring compliance with licensing time frames.

**Not implemented**—See explanation for Recommendation 12a.

- 13. The Board should issue renewal licenses for only 2 years, as required by statute.

**Implementation in process**—Our review of a sample of 22 licenses the Board renewed in October 2022 and February 2023 found that it renewed all but 1 of these licenses for 2 years. It renewed 1 license for 2 years and 10 days, which Board staff attributed to staff error. Additionally, we found that the Board renewed 2 licenses without a documented license renewal application. Absent these applications, the Board cannot ensure that its licensees meet all statutory and rule requirements for license renewal. Finally, the Board has developed a draft policy for issuing licenses for only 2 years and reported that it plans to discuss and consider this policy for adoption at its June 26, 2023, Board meeting.

- 14. The Board should identify and review all renewed licenses that have an expiration date exceeding 2 years and work with its assistant attorney general to determine what action it should take to ensure these licenses comply with the 2-year renewal time period outlined in statute, such as modifying the license expiration date.

**Not implemented**—The Board provided a written response indicating that in response to our August 2022 audit report, it began reviewing license renewals it was processing to ensure they were not issued for longer than 2 years. However, the Board reported it has not retroactively reviewed license renewals that may have expiration dates exceeding 2 years and does not plan to do so, indicating it would focus on prospectively ensuring license expiration dates do not exceed 2 years. Additionally, the Board reported it lacks resources to identify and review all renewed licenses that have expiration dates exceeding 2 years and that retroactively modifying license expiration dates could result in errors and/or legal challenges.

- 15. The Board should conduct continuing-education audits of at least 10 percent of active licenses annually, as authorized by rule.

**Not implemented**—Although the Board reported it conducts continuing education audits of all active licensees prior to renewing their license by requiring licensees to provide certificates demonstrating completion of the required 24 hours of continuing education, it did not provide the requested documentation of this process or any associated policies and procedures for conducting these audits.

- 16. The Board should develop and implement licensing policies and procedures for:

- a. Processing initial licenses and license renewals, including procedures for handling early license renewal applications.

**Not implemented**—The Board's written response regarding its efforts to implement our recommendations did not include information specific to this recommendation, nor did it provide any supporting documentation demonstrating progress toward implementing it.

- b. Conducting continuing-education audits of at least 10 percent of license renewal applicants.

**Not implemented**—See explanation for Recommendation 15.

- c. Maintaining and updating the Board-recognized school list, including steps its staff should take to add schools to the list and verify that schools continue to meet recognition requirements to be included on the list.

**Not implemented**—Although the Board reported it has posted a list of authorized schools on its website, it did not provide policies and procedures for maintaining and updating this list, including steps its staff should take to add schools to the list and verify that schools continue to meet recognition requirements to be included on the list.

17. The Board should conduct a fee analysis as required by its policies and procedures and revise its fees as needed.
- Not implemented**—The Board reported that it lacks the expertise to analyze its fees and will request assistance from ADOA's Central Services Bureau to perform this analysis. The Board did not provide a date or time frame for requesting this assistance.

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

18. The Board should revise its conflict-of-interest disclosure form to include an “affirmative no” option when there is no conflict of interest.
- Not implemented**—The Board’s response regarding its efforts to implement our recommendations did not include information specific to this recommendation, nor did it provide any supporting documentation demonstrating progress toward implementing it.
19. Establish and implement a documented process for remediating disclosed conflicts of interest.
- Not implemented**—The Board reported it relies on its assigned Assistant Attorney General to review and provide legal advice. However, it did not provide documentation demonstrating it has established a process for remediating disclosed conflicts of interest.