

**STATE OF NEVADA
BOARD OF EXAMINERS FOR LONG-TERM CARE ADMINISTRATORS
3157 North Rainbow Boulevard, #313
Las Vegas, Nevada 89108
Telephone: 702-486-5445 Fax: 702-486-5439
Website: www.beltca.nv.gov
E-mail: beltca@beltca.nv.gov**

MEETING NOTICE AND AGENDA

Date & Time: November 4, 2014, 1:00 p.m.

Place of Meeting: Nevada Early Intervention Service
3811 W. Charleston Blvd.
Suite 112
Las Vegas, Nevada 89102
and

Video Conferencing Nevada Early Intervention Service
2667 Enterprise Rd.
Reno, Nevada 89512

All times are approximate. The Board reserves the right to take items in a different order, items may be combined for consideration by the Public Body and items may be pulled or removed at any time to accomplish business in the most efficient manner.

In certain situations, the option exists to declare the meeting on that agenda item to be a Closed (Executive) Session per NRS 241.030.

I. OPEN MEETING

II. ROLL CALL

III. PUBLIC COMMENTS

This item is to receive comments, limited to five (5) minutes, on any issue and any discussion of those items. However, no action will be taken on an item raised during Public Comments. Comments based on viewpoint are welcome.

IV. APPROVAL OF THE FOLLOWING PROPOSED DISCIPLINARY ACTION (Board may go into closed session) "FOR POSSIBLE ACTION"**

- a. Stacy Brown, Highland Manor of Fallon – Case No. B-36087



- b. Benjamin Medina – Royal Haven – Case No. B-36086

V. SECRETARY'S REPORTS:

- a. Approve Minutes of August 7, 2014 Meeting "for possible action".

VI. ADMINISTRATIVE REPORT

VII. ADMINISTRATOR LICENSES ISSUED MUST RECEIVE FINAL BOARD APPROVAL WHEN ALL REQUIREMENTS HAVE BEEN MET.

- a. Nursing Facility Administrator Licenses Issued "for possible action".
 - (1) Christensen, Cory
 - (2) Quintana, Pinky
 - (3) Clegg, Trent
- b. Residential Facility Administrator Licenses Issued "for possible action".
 - (1) Mims, Deanna
 - (2) Pannu, Karpal
 - (3) Hamilton, Gerald
 - (4) Cobb, Janea
 - (5) Donohue, Sieglinde
 - (6) Thomas, Laurretta
 - (7) Gerardo, Gabriela
 - (8) Na, Andrea
 - (9) Boyar, Jonathan
 - (10) Smith, Kathryn
- c. Inactive Requests "for possible action".
 - (1) Haltom, Julie - RFA
 - (2) Biesinger, Stephen - NFA
 - (3) Broyles, Catherine - NFA
- d. Final approval of NFA License "for possible action".
 - (1) Behn, Marc
 - (2) Iwertz, Denise
- e. Approve/Deny RFA Application "for possible action"
 - (1) Betsy Winters

VIII. UNFINISHED BUSINESS:

- a. RCAL AIT Program Reports "for possible action"
- b. NFA lack of AIT opportunities, obtaining grants and formalize training for preceptors "for possible action"

IX. NEW BUSINESS:

- a. Annual Audit

X. DEPUTY ATTORNEY GENERAL'S REPORT

XI. BOARD MEMBER COMMENTS

XII. PUBLIC COMMENTS

This item is to receive comments, limited to five (5) minutes, on any issue and any discussion of those items. However, no action will be taken on an item raised during Public Comments. Comments based on viewpoint are welcome.

XIII. TIME/DATE/LOCATION OF NEXT REGULAR QUARTERLY MEETING(S) "for possible action"

XIV. ADJOURNMENT

****Pursuant to NRS 241.030(1), The Nevada State Board of Examiners for Long Term Care Administrators may conduct a closed meeting to consider the character, allegations of misconduct, professional competence, or physical and mental health of a person.**

Note: We are pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary please notify the Board of Examiners for Long Term Care Administrators by calling the Board Office at 702-486-5445, or by e-mail at: beltca@beltca.nv.gov.

Anyone desiring additional information regarding the meeting, including information on how to obtain supporting board meeting material is invited to call Sandy Lampert, Executive Director, at (702) 486-5445.

Copies of BELTCA's Meeting Minutes are available at no charge at BELTCA's web site at:
beltca.nv.gov

**The Agenda was posted at the following locations:
BELTCA'S website: www.beltca.nv.gov**

Grant Sawyer State Office Building
555 East Washington Ave.
Las Vegas, NV 89101
Fax: 702-486-2012

ADSD
3416 Goni Rd., Building – D 132
Carson City, NV 89706
Fax: 775-687-0574

ADSD
1860 East Sahara Ave.
Las Vegas, NV 89104
Fax: 702-486-3572

DPBH
727 Fairview Dr., Suite E
Carson City, NV 89706
Fax: 775-684-1073

DPBH
4220 S. Maryland Pkwy.
Suite 810, Bldg. D
Las Vegas, NV 89119
Fax: 702-486-6520

ADSD
445 Apple Street
Reno, NV 89502
Fax: 775-688-2969

Carson City Courthouse
100 Stewart St.
Carson City, NV 89701
Fax: 775-887-2146

Public Library
Sierra View Branch
Fax 775-827-8792

Clark County – Las Vegas Library
732 North Las Vegas Blvd.
Las Vegas, NV 89101
Fax: 702-507-3598

By E-Mail

Sue Levinsky, ADSD, LV
Paul Shubert, DPBH, LV
Heather Korbolic, ADSD
Charles Perry
Rich Hernandez, Senior Transitions
Theresa Brushfield
Ed Vogel, Las Vegas Review-Journal
Mark McBride, Administrator
Chris Nicholas, Administrator

Jill Berntson, ADSD, Reno
Teresa Stricker, ADSD, LV
Donna McCafferty, DPBH
Daniel Mathis, NVHCA
Shawn McGivney
~~Rexanne O. Warner, United Health Care~~
Robbie Williams, Administrator
James Sullivan, Administrator
Susan Magluilo, Administrator

BEFORE THE NEVADA STATE BOARD OF EXAMINERS
FOR LONG TERM CARE ADMINISTRATORS

In the Matter of the Complaint for
Disciplinary Action Against

STACY BROWN,

RESPONDENT

Nursing Facility Administrator for

HIGHLAND MANOR OF FALLON

Case No. B36087

Filed: _____

Executive Director

STIPULATION FOR SETTLEMENT

WHEREAS, as more fully addressed below, the NEVADA STATE BOARD OF EXAMINERS OF LONG TERM CARE ADMINISTRATORS, ("BOARD"), and RESPONDENT STACY BROWN ("RESPONDENT" or "BROWN") (collectively referred to as "the Parties"), hereby enter into this Stipulation for Settlement as follows:

Jurisdiction

1. Pursuant to Nevada Revised Statute 654.110(1)(f), the BOARD has jurisdiction to receive, investigate and take appropriate action with respect to any charge or complaint filed with the BOARD against a licensee.
2. RESPONDENT at all times relevant hereto, was and currently is, licensed in the State of Nevada as a nursing facility administrator ("NFA") by the BOARD, pursuant to the provisions of Nevada Revised Statutes and Nevada Administrative Code chapters 654.
3. At all times relevant hereto, RESPONDENT was the Administrator of HIGHLAND MANOR OF FALLON, 550 North Sherman Road, Fallon, Nevada 89406 ("the

1 Facility"), License No. 594, and as a result of such licensure, her conduct in the
2 capacity of a licensee was and is governed by Nevada Revised Statutes ("NRS")
3 Chapter 654, Nevada Administrative Code ("NAC") 654, and other provisions of
4 Nevada law.

- 5 4. Pursuant to Nevada Revised Statute 233B.121(5), the BOARD is authorized to
6 enter into a settlement agreement to resolve a disputed matter.

7 **Allegations and Violations of Law**

- 8 5. On or about August 6, 2013 through August 19, 2013, the State of Nevada,
9 Department of Health and Human Services Aging and Disability Services Division
10 ("ADSD"), conducted a complaint investigation at the Facility, and subsequently
11 ADSD issued its Statements of Deficiencies ("SOD") against the Facility. The
12 complaint was substantiated.
- 13 6. On or about July 1, 2013, Resident #1 was assisted outside to the smoking area at
14 10:35am and remained in direct sunlight until CNA #3 found the resident outside
15 and unresponsive at approximately 11:30am.
- 16 7. The temperature at the time of the above incident was approximately 100 degrees
17 Fahrenheit.
- 18 8. Resident #1 was transferred to a hospital and treated for dehydration and second
19 degree burns.
- 20 9. Resident #1 was prescribed Bactrim DS in which the Nursing 2006 Drug Handbook
21 for Bactrim DS advises healthcare professionals to tell a patient to drink plenty of
22 water, avoid prolonged sun exposure, wear protective clothing and use sunscreen.
23 None of these precautions were used when placing Resident #1 outside in the
24 smoking area.
25
26
27
28

10. The above actions are a violation of NRS 654.190(1)(e) pursuant to NAC 654.142(1)(a) in that RESPONDENT shall ensure that the facility complies with all applicable requirements of chapter 449 of NRS and NAC. Specifically, NAC 449.74469 states that a facility for skilled nursing shall provide to each patient in the facility the services and treatment that are necessary to attain and maintain the patient's highest practicable physical mental and psychological well-being.
11. The above actions are a violation of NRS 654.190(1)(e) pursuant to NAC 654.142(1)(a) in that RESPONDENT shall ensure that the facility complies with all applicable requirements of chapter 449 of NRS and NAC. Specifically, NAC 449.74471(1)(c) states that a facility for skilled nursing shall not administer a drug to a patient in the facility without monitoring the patient properly.
12. The above actions are in violation of NRS 654.190(e) pursuant to NAC 644.142(2) in that RESPONDENT is responsible for the oversight and direction of the members of the staff of the facility as necessary to ensure that the residents of the facility receive needed services and protective supervision.
13. Respondent acknowledges that information has been received by the BOARD or its agent, which constitutes sufficient grounds for the initiation of an administrative hearing.

Settlement

14. The Parties desire to resolve any disputed matters relating to the BOARD'S investigation, and recognize that continued litigation of this dispute would be protracted, costly and time consuming, and therefore, the Parties have reached a settlement agreement in the interest of judicial and administrative economy.
15. RESPONDENT has elected to enter into this settlement agreement rather than face the possibility of further disciplinary action by the BOARD if the Board were to

1 prevail at a disciplinary hearing. This agreement includes the ADSD complaint
2 received by the BOARD on October 10, 2013.

3 **Administrative Penalty**

4 16. RESPONDENT shall pay the following monetary assessment to the BOARD:

5 Administrative Fine: \$ 3,000.00

6 Administrative & Legal Costs: 950.00

7 Total Assessed: \$ 3,950.00

8
9 17. RESPONDENT shall pay to the BOARD the total sum of \$3,950.00, in twenty four
10 (24) installments consisting of the first payment being ten (10) percent of the total
11 balance equaling \$395.00 and twenty three (23) equal monthly installment
12 payments \$154.56 thereafter. RESPONDENT may prepay all or part of the total
13 assessed at any time.

14 18. The first payment of \$395.00 is due and payable within thirty (30) days after the
15 EFFECTIVE DATE of the BOARD'S Final Order, with twenty three (23) additional
16 installment payments of \$154.56, each installment payment becoming due and
17 payable on the 15th day of each next succeeding month after the first payment, until
18 the total balance due is paid in full. No grace period will be permitted. Any
19 installment payment not actually received by the BOARD on or before its due date
20 shall be construed as an event of default of this agreement by the RESPONDENT.

21
22 19. Any installment payment not actually received by the BOARD on or before its due
23 date shall be subjected to a Fifty Dollar (\$50.00) late fee and assessed Five Dollars
24 (\$5.00) per day after ten (10) days of due date.

25 20. If monthly installments are not brought current within thirty (30) days of due date,
26 the remaining unpaid balance shall become immediately accelerated, and the total
27 remaining unpaid balance of the monetary assessments shall become immediately
28

1 **Complete Agreement**

2 37. This settlement agreement consists of nine pages and embodies the entire
3 agreement between the BOARD and RESPONDENT. It may not be altered,
4 amended or modified without the express consent of the parties.

5
6 Date: 8/25/14

7 Date: 9-18-2014
8 NEVADA STATE BOARD OF
9 EXAMINERS OF LONG TERM CARE
10 ADMINISTRATORS

11 By: Stacy Brown
12 Stacy Brown

13 By: Terry Clodt
14 Investigating Board Member

15 Approved as to form and content.

16 HANCON BRIDGEMAN LLP

17
18 By: Howard Ashcraft, Esq.
19 Nevada Bar No. 7588
20 425 Market Street, 26th Floor
21 San Francisco, CA 94105
22 (415) 995-5073

23 Attorney for Stacy Brown
24
25
26
27
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1 **Complete Agreement**

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3 agreement between the BOARD and RESPONDENT. It may not be altered,
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5

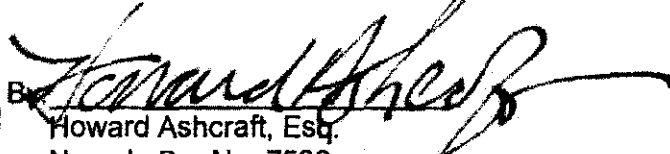
6 Date: _____

Date: _____
NEVADA STATE BOARD OF
EXAMINERS OF LONG TERM CARE
ADMINISTRATORS

7
8
9
10 By: _____
Stacy Brown

By: _____
Terry Clodt
Investigating Board Member

11
12 Approved as to form and content:
13 HANSON BRIDGETT LLP

14 
15 By: _____
Howard Ashcraft, Esq.
16 Nevada Bar No. 7588
425 Market Street, 26th Floor
17 San Francisco, CA 94105
(415) 995-5073
18 Attorney for Stacy Brown
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1 **BEFORE THE NEVADA STATE BOARD OF EXAMINERS**
2 **FOR LONG TERM CARE ADMINISTRATORS**

3
4 In the Matter of the Complaint for
5 Disciplinary Action Against

Case No. B36086

6 BENJAMIN MEDINA,

Filed: _____

7 RESPONDENT

8 Residential Facility Administrator for

Executive Secretary

9 ROYAL HAVEN
10 _____

11
12 **STIPULATION FOR SETTLEMENT**

13 WHEREAS, as more fully addressed below, the NEVADA STATE BOARD OF
14 EXAMINERS OF LONG TERM CARE ADMINISTRATORS, ("BOARD"), and RESPONDENT
15 BENJAMIN MEDINA ("RESPONDENT" or "MEDINA") (collectively referred to as "the
16 Parties"), hereby enter into this Stipulation for Settlement as follows:

17 **Jurisdiction**

- 18 1. Pursuant to Nevada Revised Statute 654.110(1)(f), the BOARD has jurisdiction to
19 receive, investigate and take appropriate action with respect to any charge or
20 complaint filed with the BOARD against a licensee.
21
22 2. RESPONDENT at all times relevant hereto, was and currently is, licensed in the
23 State of Nevada as a residential facility administrator ("RFA") by the BOARD,
24 pursuant to the provisions of Nevada Revised Statutes and Nevada Administrative
25 Code chapters 654.
26
27 3. At all times relevant hereto, RESPONDENT was the Administrator of ROYAL
28 HAVEN, 1913 Collins Avenue, Las Vegas, Nevada 89106, ("the Facility"), License

No. 9314, and as a result of such licensure, his conduct in the capacity of a licensee was and is governed by Nevada Revised Statutes ("NRS") Chapter 654, Nevada Administrative Code ("NAC") 654, and other provisions of Nevada law.

4. Pursuant to Nevada Revised Statute 233B.121(5), the BOARD is authorized to enter into a settlement agreement to resolve a disputed matter.

Allegations and Violations of Law

RESPONDENT admits to the following allegations and violations of law:

5. On or about June 11, 2013, Health and Human Services Division of Public and Behavioral Health ("DPBH"), conducted a grading re-survey of the Facility. The survey was completed on June 11, 2013, on which date DPBH issued its Statements of Deficiencies ("SOD") against the Facility.
6. Based on records review, observation and interview conducted on or about June 11, 2013, the administrator file was not at the Facility.
7. The above actions are a violation of NRS 654.166 pursuant to NAC 449.194(4) in that RESPONDENT shall ensure that the facility complies with all applicable requirements of chapter 449 of NRS and NAC. Specifically, NAC 449.194(4) states that the administrator of a residential facility shall ensure the records of the facility are complete and accurate.
8. Based on records review, observation and interview conducted on or about June 11, 2013, three of three employee files failed to include the health certificates regarding tuberculosis (TB) testing.
9. The above actions are a violation of NRS 654.166 pursuant to NAC 449.200(1)(d) in that RESPONDENT shall ensure that the facility complies with all applicable requirements of chapter 449 of NRS and NAC. Specifically, NAC 449.200(1)(d) states that each personnel file must include the health certificate required pursuant

to chapter 441A of NAC.

10. Based on records review, observation and interview conducted on or about June 11, 2013, three of three employee files failed to include background checks.
11. The above actions are a violation of NRS 654.166 pursuant to NAC 449.200(1)(f) in that RESPONDENT shall ensure that the facility complies with all applicable requirements of chapter 449 of NRS and NAC. Specifically, NAC 449.200(1)(f) states that each personnel file must include the background check requirement under 449.122.
12. Based on records review, observation and interview conducted on or about June 11, 2013, RESPONDENT failed to ensure that medication belonging to one of five residents was in the original container.
13. The above actions are a violation of NRS 654.166 pursuant to NAC 449.2748(3) in that RESPONDENT shall ensure that the facility complies with all applicable requirements of chapter 449 of NRS and NAC. Specifically, NAC 449.2748(3) states that the administrator of a residential facility shall ensure that medication is kept in its original container until it is administered.
14. Based on records review, observation and interview conducted on or about June 11, 2013, two of five resident files failed to include evidence of TB testing under NAC 441A.380.
15. The above actions are a violation of NRS 654.166 pursuant to NAC 449.2749(1)(e) in that RESPONDENT shall ensure that the facility complies with all applicable requirements of chapter 449 of NRS and NAC. Specifically, NAC 449.2749(1)(e) states that the administrator of a residential facility shall ensure the resident files contain evidence of TB testing. Under NAC 441A.380.
16. Respondent acknowledges that information has been received by the BOARD or its

agent, which constitutes sufficient grounds for the initiation of an administrative hearing.

Settlement

17. The Parties desire to resolve any disputed matters relating to the BOARD'S investigation, and recognize that continued litigation of this dispute would be protracted, costly and time consuming, and therefore, the Parties have reached a settlement agreement in the interest of judicial and administrative economy.

18. RESPONDENT has elected to enter into this settlement agreement rather than face the possibility of further disciplinary action by the BOARD if the Board were to prevail at a disciplinary hearing.

Administrative Penalty

19. RESPONDENT shall pay to the BOARD the total sum of \$700.00 in administrative and legal costs within ninety (90) days of the BOARD's Order. RESPONDENT may prepay all or part of the total assessed at any time.

20. RESPONDENT shall complete forty (40) hours in Nevada Best Practices training and provide proof of completion to the Executive Secretary within thirty (30) days of the BOARD's Order.

21. In the event of default, **RESPONDENT agrees that his license shall be immediately suspended.** The suspension of RESPONDENT'S license shall continue until the unpaid balance is paid in full and until the training is completed in full. RESPONDENT acknowledges that if his license is suspended, the suspension is subject to reporting to all appropriate agencies and becomes part of his permanent record.

22. RESPONDENT acknowledges that the BOARD has the legal power and authority to take action against her, including instituting debt collection actions for unpaid

that communication, the adjudicating members of the BOARD will be provided with a copy of this settlement agreement and all related documents including, but not limited to, complaints, preliminary investigations or prior disciplinary actions.

36. RESPONDENT hereby agrees to waive any rights he might have to challenge the impartiality of the BOARD to hear the disciplinary complaint, based on prior knowledge obtained by the BOARD through consideration of this settlement agreement, if after review by the BOARD, this settlement agreement is rejected.

37. If the BOARD does not accept the settlement agreement, it shall be regarded as null and void. Admissions by RESPONDENT in the settlement agreement will not be regarded as evidence against him at the subsequent disciplinary hearing. The RESPONDENT will be free to defend himself and no inferences against him will be made from his willingness to have entered into this agreement.

Complete Agreement

38. This settlement agreement consists of eight pages and embodies the entire agreement between the BOARD and RESPONDENT. It may not be altered, amended or modified without the express consent of the parties.

Date: _____

Date: _____
NEVADA STATE BOARD OF
EXAMINERS OF LONG TERM CARE
ADMINISTRATORS

By: _____
Benjamin Medina

By: _____
Terry Clodt
Investigating Board Member

**STATE OF NEVADA
BOARD OF EXAMINERS FOR LONG-TERM CARE ADMINISTRATORS**

Draft Minutes of Regular Quarterly Board Meeting

**August 7, 2014
9:30 a.m.**

**The Grant Sawyer State Office Building
555 East Washington Avenue
Room 4401
Las Vegas, Nevada 89101
and
Video Conferencing
Legislative Counsel Bureau
401 South Carson Street
Conference Room 3138
Carson City, Nevada 89701**

- I. Chair, Margaret McConnell called the meeting to order at 9:32 a.m.
- II. Executive Director, Sandy Lampert called the roll and a quorum was present.

Board Members:

Margaret McConnell, Chair
Terry Clodt, Sec/Treas.
Jane Gruner, ADSD
Lilia Sioson

Mary Ellen Wilkinson, Vice Chair
Lindsay Hansen, M.D.
Linda Gelinger

Staff:

Sophia Long, Esq. DAG
Rosemary Reynold, Esq. DAG

Sandy Lampert, Executive Director

Guests:

Heather Korbolic, ADSD
Estaban Duran-Balen
Caleb Cage, Dir. of Military
& Veterans Policy

Benjamin Medina
Marc Behn
Denise Iwertz

- III. PUBLIC COMMENTS – Heather Korbolic, the Long Term Care Ombudsman notified the Board of a change that took effect in June of this year which now allows the Ombudsman Program to advocate of residents of Long Term Care Facilities who are under the age of 60.

- IV. PUBLIC HEARING in the matter of the Complaint for Disciplinary action against Benjamin Medina, Residential Facility Administrator, License No. RFA 9314** (Board may go into closed session) "FOR POSSIBLE ACTION"

Mr. Medina was asked if he wished the Board to go into closed session, he declined. Sophia Long, Deputy Attorney General, informed the Board that she will be acting as the prosecuting attorney in this matter. Deputy Attorney, Rosemary Reynold, will be acting as Board Counsel. Sophia Long advised that Board that Mr. Medina has agreed to settle this matter and not go to a hearing. Ms. Long is going to put the Settlement Agreement into the record. At this time Mr. Medina was sworn in by the Court Reporter. The Board has a copy of the survey involved with this matter. Based on the survey, the penalty will be that he complete 3 approved CEU hours on Administrative Oversight, he will be assessed a fine of \$250.00, and he will be responsible for all of the administrative and legal cost which to date cannot be determined. After much discussion, Chair, Margaret McConnell called for a motion. Jane Gruner moved to reject the settlement agreement. Mary Ellen Wilkinson seconded. Motion carried. Terry Clodt abstained.

- V. APPROVAL OF THE FOLLOWING PROPOSED DISCIPLINARY ACTION** (Board may go into closed session) "FOR POSSIBLE ACTION"

- a. Ophelia Javier – CJ Homes – Case No. B-36095

Chair, Margaret McConnell called for a Motion. Jane Gruner motioned to approve the disciplinary actions. Mary Ellen Wilkinson seconded. Motion carried. Terry Clodt abstained.

- VI. SECRETARY'S REPORTS:

- a. Approval of the Minutes of May 8, 2014 Meeting "for possible action" – Secretary, Terry Clodt moved to approve. Lindsay Hansen seconded. Motion carried.

- VII. ADMINISTRATIVE REPORT – Executive Director, Sandy Lampert, reported that we are working very hard on new RFA training programs.

- VIII. ADMINISTRATOR LICENSES ISSUED MUST RECEIVE FINAL BOARD APPROVAL WHEN ALL REQUIREMENTS HAVE BEEN MET.

- a. Nursing Facility Administrator Licenses Issued

- (1) Chambers, Thomas
- (2) Conaway, David
- (3) Moore, Amanda
- (4) Mavromatis, Michael Jr.
- (5) Dunyon, Aaron
- (6) Clark, James

Chair, Margaret McConnell, called for a motion. Mary Ellen Wilkinson moved to approve the Nursing Facility Administrator Licenses. Linda Gelingher seconded. Motion carried.

b. Residential Facility Administrator Licenses Issued

- (1) Hardcastle, Kaitlin
- (2) Holiday, William
- (3) Fox, Michael
- (4) Blanco, Lalaine
- (5) Helton, Catherine

Chair, Margaret McConnell, called for a motion. Terry Clodt moved to approve the Residential Facility Administrator licenses. Jane Gruner seconded. Motion carried.

c. Inactive Requests

- (1) Feeback, Thomas - NFA
- (2) McClain, Susan - RFA
- (3) Pophal, Mary - RFA
- (4) Carlgren, Betty - RFA

Chair, Margaret McConnell, called for a motion. Mary Ellen Wilkinson moved to approve the Inactive License Requests. Jane Gruner seconded. Motion carried.

d. Approve/Deny NFA Application "for possible action"

(1) Marc Behn – Mr. Behn was sworn in by Court Reporter. Chair, Margaret recounted that Mr. Behn answered "yes" to Item #2 of the Personal History section of the Application for Licensure and submitted a letter detailing that he had been convicted of a DUI. However, when his background check came back, a different incident was reported. Mr. Behn testified that he did not reveal this information because he was advised so by his attorney. Mary Ellen Wilkinson moved that Mr. Behn be allowed to go forward with the application process and on the satisfactory completion of the program, the Board would consider placing restrictions on his license. Jane Gruner seconded. Motion carried.

(2) Denise Iwertz – Ms. Iwertz was sworn in the Court Reporter. Chair, Margaret McConnell reported to the Board that Ms. Iwertz answered "yes" to Item 2 of the Personal History section of the Application for Licensure, and submitted documents indicating that on November 17, 2012, she was involved in a motor vehicle collision while driving under the influence. Ms. Iwertz pled guilty to the slightest degree and had her driving privileges suspended for 90 days and met all other requirements in the matter. Ms. Iwertz informed the Board she is a licensed Social Worker in the State of Nevada. She testified that the above incident occurred on private property and that she was in her vehicle which was not moving. A ranch hand called the police and subsequently the police came to the scene and asked if she had been drinking and she said yes. She was then detained. She was told that if your keys are in your hand, and you have been drinking, you will be found guilty. After a year of delays, her attorney encouraged her to plead guilty, and so she did. Ms. Iwertz then apologized to the Board. Chair, Margaret McConnell called for a motion. Mary Ellen Wilkinson moved that the Board allow Ms. Iwertz to go forward with her application, and come before the Board at the next meeting to approve her license with any restrictions imposed by the Board. Jane Gruner seconded. Motion carried.

VIX. UNFINISHED BUSINESS:

a. RCAL AIT Program Report – Margaret McConnell reported that we have re-energized the AIT Program for assisted living. We conducted 2 training programs to enlist mentors. The response was very favorable. We now have a adequate number of mentors. Sandy Lampert will be overseeing the program, and Wendy Simons and Connie Johnson will

help with some training. We are now discussing ways to acknowledge the service of mentors with not only CEUs, but also credit toward renewals, and special plaques. Sandy Lampert reported that we had 26 people attended the training in Reno, and 34 in Las Vegas. Those who attended were excited to be able to have some input with regard to the program and finding ways to reward them. Margaret McConnell then reported to the Board that with regard to the 40 hours of Best Practices Training we will be making it available electronically. We will be Beta testing the program in September with 3 candidates and we have asked some seasoned administrators to sit in to critique the material.

b. NFA lack of AIT Opportunities – Mary Ellen Wilkinson reported that there are task forces working to gather statistics to see what everyone's AIT program looks like and they are collaborating with Boards across the country to see how the program could be made more standardized. Hopefully, by the meeting in November, the task force will have a report to share with the NAB organization from which we can use as a template or model to take to the universities in the state.

X. NEW BUSINESS:

a. Veterans Licensure Reciprocity – Caleb Cage, Director of Military and Veterans Policy – Mr. Cage reported that Governor Sandoval declared 2014 to be the Year of the Veteran. The purpose is to decrease barriers and increase opportunities for service members and veterans returning to the states after serving out of country. So the focus will be on wellness, educational and employment opportunities. They are not asking licensing agencies to reduce their standards for licensing, but recognize the military experience and practice as experience for a license.

b. National Leadership Emergence Conference – Estaban Duran-Balan thanked the Board for providing him with this great experience. He reported that the major themes talked about were Legislative Action of Capitol Hill, increased utilization of nursing homes in the future and generational differences. They will be producing a White Paper next year to outline 3 major action plans to include a universal license, change the perception of the industry and increased accountability for participants.

XI. DEPUTY ATTORNEY GENERAL'S REPORT – Deputy Attorney General, Sophia Long, reported that the annual Board and Commission Training will be in November.

XII. BOARD MEMBER COMMENTS – Margaret McConnell reported to the Board that Mary Ellen Wilkinson was just elected as the new NAB Secretary for the next 2 years. She stated that by the next Board Meeting in November, she will report on the new Health Services Executive and the whole plan that NAB is rolling out in terms of providing a template so that Boards can license jurisdictions other than nursing facilities administrators and assisted living if they so wish, such as home community based workers, hospice and home health.

XIII. PUBLIC COMMENTS –

XIV. TIME/DATE/LOCATION OF NEXT REGULAR QUARTERLY MEETING – The next meeting will be held on Wednesday, November 5, 2014 at 9:30 a.m.

XV. ADJOURNMENT – Meeting was adjourned at 11:45 am.

Respectfully submitted:

Sandy Lampert

Sandy Lampert
Executive Director

Attested by:

Terry Clodt

Terry Clodt
Secretary/Treasurer

Mark Behn –

Mr. Behn was issued a provisional license, NFA 648 on September 17, 2014, after completing all requirements for licensure. He is required to come before the Board for final approval per the following:

Marc Behn – Mr. Behn was sworn in by Court Reporter. Chair, Margaret recounted that Mr. Behn answered “yes” to Item #2 of the Personal History section of the Application for Licensure and submitted a letter detailing that he had been convicted of a DUI. However, when his background check came back, a different incident was reported. Mr. Behn testified that he did not reveal this information because he was advised so by his attorney. Mary Ellen Wilkinson moved that Mr. Behn be allowed to go forward with the application process and on the satisfactory completion of the program, the Board would consider placing restrictions on his license. Jane Gruner seconded. Motion carried.

Denise Iwertz –

Ms. Iwertz is required to come before the Board before the issuance of a license. She has completed all of the requirements for licensure, and her file was presented to a Board Member for review. The Board must not determine if a license will be issued and if any restrictions will be placed on the license per the following:

Denise Iwertz – Ms. Iwertz was sworn in the Court Reporter. Chair, Margaret McConnell reported to the Board that Ms. Iwertz answered “yes” to Item 2 of the Personal History section of the Application for Licensure, and submitted documents indicating that on November 17, 2012, she was involved in a motor vehicle collision while driving under the influence. Ms. Iwertz pled guilty to the slightest degree and had her driving privileges suspended for 90 days and met all other requirements in the matter. Ms. Iwertz informed the Board she is a licensed Social Worker in the State of Nevada. She testified that the above incident occurred on private property and that she was in her vehicle which was not moving. A ranch hand called the police and subsequently the police came to the scene and asked if she had been drinking and she said yes. She was then detained. She was told that if your keys are in your hand, and you have been drinking, you will be found guilty. After a year of delays, her attorney encouraged her to plead guilty, and so she did. Ms. Iwertz then apologized to the Board. Chair, Margaret McConnell called for a motion. Mary Ellen Wilkinson moved that the Board allow Ms. Iwertz to go forward with her application, and come before the Board at the next meeting to approve her license with any restrictions imposed by the Board. Jane Gruner seconded. Motion carried.

Betsy Winters

Ms. Winters has submitted her RFA application for Licensure.

She has answered "yes" to Item 1 of the Personal History Information which states "Has your license, registration or certification in any state ever been denied, revoked, suspended, reprimanded, fined, surrendered, restricted, limited or placed on probation?"

Ms. Winters provided documentation that she was a Certified Assisted Living Manager in Arizona for Atria Management. As a result of a state survey, Ms Winter's license was placed on probation.

A copy of a letter sent to the Arizona Board of Examiners by Ms. Winter's attorney which outlines the deficiencies follows.

Also , please find a copy of the letter sent to the Licensing Board by Ms. Winters requesting that the probation be terminated and states all of the requirements imposed by the Board have been met.

April 29, 2014

VIA UPS DELIVERY

Philip Smyth
NCLIA Investigator
Board of Examiners of Nursing Care Institution Administrators
and Assisted Living Facility Managers
1400 West Washington, Suite B-8
Phoenix, AZ 85007

RE: Notice of Complaint #14-66

Dear Mr. Smyth:

This will acknowledge receipt by Ms. Betsy P. Winters of your letter dated April 22, 2014 and serve to respond to your letter. By way of introduction, I serve as the Senior Vice President, Assistant General Counsel for Atria Management Company, LLC ("Atria"), the manager of the Atria Campana del Rio assisted living center (the "Facility") and the employer of Ms. Winters. Atria was retained to manage the Facility by WG Campana Del Rio SH, LLC, the owner of the Facility.

In accordance with the requests made in your letter, I will respond to the six categories of inquiry in order.

1. As of the date of this response, Ms. Winters is not currently managing any assisted living facility.
2. In response to your request for a detailed written response as to why the alleged deficiencies occurred, I would initially direct your attention to the Plan of Correction prepared by the Facility and submitted to ADHS, a copy of which is attached as Exhibit A, proposing how all cited deficiencies would be corrected and by when. In addition, please note the following with respect to the specific deficiencies cited:
 - A. Scope of Services- the Facility was cited for not being able to produce a document describing the Scope of Services provided by the Facility. It is critical to note that nowhere in the Statement of Deficiencies does it state or contend that the Facility was not offering all required services to its residents in a competent and professional manner or that by its inability to produce the Scope of Services document that the Facility caused any harm or failed to provide any needed service to any of its residents. The Facility has now produced a Scope of Services document, a copy of which is attached as Exhibit B, describing the services that the Facility has been providing to its residents.
 - B. CPR Training- the Facility was cited for having one caregiver who obtained her CPR training via an on-line course and did not expressly demonstrate her ability to perform

CPR to a qualified instructor. In this instance, it is critical to note with respect to this single caregiver that she did not fail to undertake the required CPR training, but that she failed to demonstrate to a qualified instructor her ability to perform CPR. At the same time, no mention is made that the caregiver was requested to demonstrate her ability to perform CPR by the surveyor or that the caregiver could not demonstrate her ability to properly perform CPR. Further, the citation was issued to only one caregiver among many caregivers employed by the Facility and no evidence was provided to contend that improper care or treatment was provided to any Facility resident by the cited caregiver or any Facility caregiver.

- C. Fingerprint Policy-the Facility was cited for allegedly not having in place a proper policy for requiring new employees to obtain fingerprint clearance for criminal background checks. The deficiency noted that the Certified Manager of the Facility could not produce the specific fingerprint clearance policy for inspection. Notwithstanding the momentary inability to produce the requested policy, the Facility contends that such a policy did exist at the time of the survey, a copy of HR-006 is attached, and that all new hires are subjected to the required background checks and fingerprint clearances by an outside consultant agency Certiphi and the results are provided to the Facility. Again, it is critical to the nature of your inquiry that no evidence was submitted, and none could be submitted, that offers any proof that any resident of the Facility was harmed in any way or did not receive all promised care services in a professional and competent manner as the result of the alleged lack of a fingerprint policy.
- D. Incomplete Service Plans-the Facility was cited for deficiencies found in five service plans of Facility residents. As noted in the Plan of Correction, all service plan items were corrected in the five subject plans. In addition, the Facility team reviewed all resident service plans and updated or corrected as needed. By way of explanation and not justification, the cited deficiencies represent inadvertent omissions by the caregiving staff that did need to be corrected. The more pressing point, however, is that these were only 5 service plans with a couple of deficient areas and not a situation where no plans existed or where there were grossly deficient plans.
- E. Irregular Evacuation Drills and Unposted Evacuation Route- the Facility was cited for failing to hold evacuation drills regularly every 6 months and failing to post a written evacuation route in the Facility. As noted in the Plan of Correction, these deficiencies have been corrected and are being monitored regularly. The responsibility to conduct and documents such drills fell upon the Maintenance Director and the Facility staff has reorganized to assist and ensure that the drill are conducted regularly.

- F. **New Resident Emergency Orientation-** the Facility was cited for failing to provide Emergency Orientation to three residents within 24 hours of their move into the Facility. Although measures have been taken to ensure that all new residents receive emergency orientation within 24 hours, as supervised by the Community Business Director and the Resident Services Director, it is critical to note in this instance that all of the 3 subject residents did in fact receive emergency orientation, albeit not within the 24-hour period, and that none of the 3 residents suffered any harm as the result of the delayed training.
 - G. **Unsecured Oxygen Tanks-** the Facility was cited for failing to properly secure a couple of loose oxygen tanks. This omission occurred as the inadvertent error of the caregiving staff who, despite clear Facility policy regarding proper storage of oxygen tanks, failed to secure the cited tanks.
 - H. **Provision of Assisted Living Services to Residents in Apartments Not Approved by ADHS-** the Facility was cited for providing assisted living services to residents in certain apartments that not previously been approved for assisted living residents by ADHS. The confusion over which specific Facility apartments had been approved for assisted living residents dates back to 2004, many years before Ms. Winters had ever started employment with Atria, when an application had been submitted to ADHS to increase the licensed capacity of the Facility. In connection with the 2004 application to increase licensed capacity, a diagram had been submitted which specified certain apartments to be licensed for assisted living residents. The facts are, however, that notwithstanding the drawing designations, the cited apartments have been used by the Facility in good faith for many years under the understanding that such use was permitted. In fact, ADHS has conducted numerous surveys of the Facility since the approval of the 2004 application during which the cited apartments were being used to house assisted living residents and no deficiency has ever been cited or proposed prior to this survey. Atria is now working with the Architectural Review Board to obtain approval to use the cited apartments to house assisted living residents. I believe it is critical again to note that no evidence has been, nor could be, submitted to establish that any resident has been harmed or not been provided proper care services as the result of the use of these unlicensed apartments.
 - I. **License Not Posted-** although there was no question that ADHS had properly issued an operating license to the Facility, the Facility was cited for failing to conspicuously post the license within the Facility. This deficiency has been corrected.
3. Betsy Winters was the certified manager of the Facility as the time of the Compliance Inspection. The owner of the Facility was identified above.

Philip Smyth
April 29, 2014
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4. Documentation of the enforcement action taken by ADHS is attached as Exhibit D.
5. A copy of the Enforcement Meeting Agreement Form is attached as Exhibit E.

As clearly noted above, although Ms. Winters was serving as the Certified Manager at the time of the Compliance Inspection, a majority of the cited deficiencies were not caused by her actions, omissions, or negligence but resulted either from the inadvertence of staff members who had been properly trained yet made mistakes or confusion created many years prior to her employment and not detected or understood despite repeated inspections by ADHS. Atria contends that attempting to impose liability on Ms. Winters for the deficiencies cited in the Statement of Deficiencies is grossly unfair, unreasonable, and simply not supported by any substantive evidence. Atria respectfully submits that any claims before your Board against Ms. Winters be dismissed with prejudice.

Thank you for your courtesy and cooperation.

Sincerely,

Douglas Armstrong
Senior Vice President, Assistant General Counsel

Enclosures

Date: September 05, 2014

Attn: Allen Imig
Executive Director
NCIA Board and Assisted living Facility Managers
1400 W. Washington, Suite B-8
Phoenix, AZ 85007

Re: Complaint No. 14-66
Name: Betsy Winters
Manager License # 10139

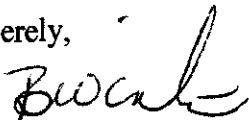
Dear Mr. Allen Imig,

Please accept this letter as a request to terminate my probation as a manager of an Assisted Living Facility. The following conditions you required have been met within the six months period.

1. A successful completion of 12 hours Assisted Living Manager Training Course. (Copy of my Certificates is attached).
 - a. Record Keeping and documentation 3.0 Hrs 9/4/14 NCA-14-018
 - b. Quality Assurance 3.0 Hrs 9/4/14 NCA-13-152
 - c. Personnel Requirements 3.0 Hrs. 9/5/14 NCA-12-186
2. Medication Certificate was faxed to your office on 8/25/14.

Your consideration regarding this matter is highly appreciated.
Please let me know if you require more information.

Sincerely,



Betsy Winters
480-298-6401