

NOTICES OF PROPOSED RULEMAKING

Unless exempted by A.R.S. § 41-1005, each agency shall begin the rulemaking process by first submitting to the Secretary of State's Office a Notice of Rulemaking Docket Opening followed by a Notice of Proposed Rulemaking that contains the preamble and the full text of the rules. The Secretary of State's Office publishes each Notice in the next available issue of the *Register* according to the schedule of deadlines for *Register* publication. Under the Administrative Procedure Act (A.R.S. § 41-1001 et seq.), an agency must allow at least 30 days to elapse after the publication of the Notice of Proposed Rulemaking in the *Register* before beginning any proceedings for making, amending, or repealing any rule. (A.R.S. §§ 41-1013 and 41-1022)

NOTICE OF PROPOSED RULEMAKING

TITLE 4. PROFESSIONS AND OCCUPATIONS

CHAPTER 33. BOARD OF EXAMINERS FOR NURSING CARE INSTITUTION ADMINISTRATORS AND ASSISTED LIVING FACILITY MANAGERS

[R07-351]

PREAMBLE

1. Sections Affected

R4-33-101
R4-33-102
R4-33-109
R4-33-201
R4-33-202
R4-33-204
R4-33-206
Article 3
R4-33-301
R4-33-301
R4-33-302
R4-33-302
R4-33-303
R4-33-401
R4-33-403
R4-33-405
R4-33-409
R4-33-410

Rulemaking Action

Amend
Amend
New Section
Amend
Amend
Amend
Amend
Amend
Amend
Repeal
New Section
Repeal
New Section
Repeal
Amend
Amend
Amend
New Section
New Section

2. The specific authority for the rulemaking, including both the authorizing statute (general) and the statutes the rules are implementing (specific):

Authorizing statute: A.R.S. § 36-446.03

Implementing statute: A.R.S. § 36-446.04

3. List of all previous notices appearing in the Register addressing the proposed rules:

Notice of Rulemaking Docket Opening: 13 A.A.R. 3156, September 14, 2007

4. The name and address of agency personnel with whom persons may communicate regarding the rulemaking:

Name: Allen Imig
Address: NCIA Board
1400 W. Washington St., Suite B8
Phoenix, AZ 85007
Telephone: (602) 364-2273
Fax: (602) 542-8316
E-mail: allen.imig@nciabd.state.az.us

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5. An explanation of the rules, including the agency's reasons for initiating the rulemaking:

During its 2007 session, the legislature amended A.R.S. § 36-446.04 to require that an administrator or manager have a valid fingerprint clearance card. The Board is amending its rules to address this requirement. The Board is adding Sections regarding certification following revocation and notice of manager appointment that mirror Sections applicable to administrators. The Board is also amending the rules dealing with the administrator-in-training program to complete the actions planned in a five-year-review report approved by Council on March 4, 2003.

6. A reference to any study that the agency proposes to rely on in its evaluation of or justification for the proposed rule and where the public may obtain or review the study, all data underlying each study, any analysis of the study and other supporting material:

None

7. A showing of good cause why the rules are necessary to promote a statewide interest if the rules will diminish a previous grant of authority of a political subdivision of this state:

Not applicable

8. The preliminary summary of the economic, small business, and consumer impact:

The rulemaking will have minimal economic impact. Licensees and certificate holders will incur the cost of obtaining and maintaining a valid fingerprint clearance card but this cost results from legislative action rather than this rulemaking.

A provider of an administrator-in-training program will incur the cost of obtaining the Board's approval of the provider's program. However, this is a cost of doing business that the provider will assume in anticipation of the benefits resulting from an approved program.

9. The name and address of agency personnel with whom persons may communicate regarding the accuracy of the economic, small business, and consumer impact statement:

Name: Allen Imig
Address: NCIA Board
1400 W. Washington St., Suite B8
Phoenix, AZ 85007
Telephone: (602) 364-2273
Fax: (602) 542-8316
E-mail: allen.imig@nciabd.state.az.us

10. The time, place, and nature of the proceedings for the making, amendment, or repeal of the rules or, if no proceeding is scheduled, where, when, and how persons may request an oral proceeding on the proposed rules:

An oral proceeding regarding the proposed rules will be held as follows:

Date: Monday, December 3, 2007
Time: 12:00 p.m.
Location: 1400 W. Washington St.
Room B-1
Phoenix, AZ 85007

The rulemaking record will close at 5:00 p.m. on Friday, December 7, 2007.

11. Any other matters prescribed by statute that are applicable to the specific agency or to any specific rule or class of rules:

None

12. Incorporations by reference and their location in the rules:

None

13. The full text of the rules follows:

TITLE 4. PROFESSIONS AND OCCUPATIONS

**CHAPTER 33. BOARD OF EXAMINERS FOR NURSING CARE INSTITUTION ADMINISTRATORS
AND ASSISTED LIVING FACILITY MANAGERS**

ARTICLE 1. GENERAL

- Section
R4-33-101. Definitions
R4-33-102. Board Officers
R4-33-109. ~~Reserved~~ Fingerprint Clearance Card Requirement

ARTICLE 2. NURSING CARE INSTITUTION ADMINISTRATOR LICENSING

- Section
R4-33-201. Requirements for Initial License by Examination
R4-33-202. Requirements for Initial License by Reciprocity
R4-33-204. Initial Application
R4-33-206. Renewal Application

ARTICLE 3. ADMINISTRATOR-IN-TRAINING PROGRAM

- Section
R4-33-301. ~~Administrator in Training Program Requirements~~ Approval of an AIT Program
R4-33-302. ~~Preceptor Qualifications and Responsibilities~~ Standards for an AIT Program
R4-33-303. ~~Administrator in Training~~ Repealed

ARTICLE 4. ASSISTED LIVING FACILITY MANAGER CERTIFICATION

- Section
R4-33-401. Requirements for Initial Certification by Examination
R4-33-403. Initial Application
R4-33-405. Renewal Application
R4-33-409. ~~Repealed~~ Certification following Revocation
R4-33-410. ~~Renumbered~~ Notice of Appointment

ARTICLE 1. GENERAL

R4-33-101. Definitions

The definitions in A.R.S. § 36-446 apply to this Chapter. Additionally, in this Chapter, unless otherwise specified:

“Accredited” means approved by the North Central Association of Colleges and Secondary Schools, New England Association of Schools and Colleges, Middle States Association of Colleges and Secondary Schools, Northwest Association of Schools and Colleges, Southern Association of Colleges and Schools, or Western Association of Schools and Colleges.

“ACHCA certified” means written evidence of completing the Professional Certification Program administered by the American College of Health Care Administrators.

“Administrator” has the meaning prescribed at A.R.S. § 36-446 and means an individual licensed under this Chapter.

“Administrator in training” or “AIT” means an individual who is taking an AIT program to be licensed as an administrator for a nursing care institution.

“AIT program” means ~~an NAB approved a training lasting not less than 20 weeks nor more than 52 weeks, at 40 hours per week, conducted as an educational experience in a licensed nursing care institution that the Board approves after determining that the training meets the standards at R4-33-302.~~

“Applicant” means an individual who applies to the Board to be licensed as an administrator of a nursing care institution, to be certified as a manager of an assisted living facility, or for approval of a continuing education.

“Application package” means the forms, documents, and fees that the Board requires an applicant to submit or have submitted on the applicant’s behalf.

“Arizona examination” means a measure of an applicant’s knowledge of Arizona statutes and rules regarding nursing care institution administration or assisted living facility management.

“Biennial period” means July 1 of an even-numbered year through June 30 of the next even-numbered year for an administrator and July 1 of an odd-numbered year through June 30 of the next odd-numbered year for a manager.

“Contact hour” means an hour during which an administrator or manager is physically present at a continuing education or a manager is physically present at a required initial training.

“Continuing education” means a planned educational course or program that the Board approves under R4-33-502.

“Good standing” means that ~~a nursing care institution administrator is the holder of a current and valid license; an individual licensed by the state is~~ not subject to any disciplinary action or consent order, and not currently under investigation for alleged unprofessional conduct.

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“Health care institution” means every place, institution, building or agency, whether organized for profit or not, which provides facilities with medical services, nursing services, health screening services, other health-related services, supervisory care services, personal care services or directed care services and includes home health agencies as defined in A.R.S. § 36-151 and hospice services agencies. A.R.S. § 36-401.

“Manager” means an assisted living facility manager, as defined at A.R.S. § 36-446, who is certified under this Chapter.

“NAB” means the National Association of Board of Examiners for Nursing Home Administrators.

“Party” has the same meaning as prescribed in A.R.S. § 41-1001.

“Preceptor” means a practicing nursing care institution administrator who ~~has taken a board approved preceptor training course and~~ helps to develop a new professional in the field of care administration by tutoring the new professional.

~~“Program Advisory Committee” means the group of practicing nursing care administrators that provides oversight to AITs and ensures the application of uniform training standards and guidelines outlined in the AIT program.~~

“Qualified instructor” means a person who meets one or more of the following criteria:

A registered nurse, licensed under A.R.S. Title 32, Chapter 15;

An instructor employed by an accredited college or university, or health care institution to teach a health-care related course; or

A person or entity that has sufficient education and training to be qualified to teach a health-care related course.

“Work experience in a health-related field” means employment in a health care institution or in the professional fields of medicine, nursing, social work, gerontology, or other closely related field.

R4-33-102. Board Officers

A. At its first annual meeting, the Board shall elect a president and vice-president.

B. The functions, duties, and limitations of these officers are as follows:

1. President. The president shall call and preside at all Board meetings. The president shall act as chief officer of the Board, appoint committees, and delegate authority to other members of the Board as needed.
2. Vice-president. The vice-president shall preside at Board meetings in the absence of the president and may exercise all the powers and duties of the president in the absence of the president.

C. Board officers serve for one year. A Board officer shall not serve more than two consecutive years in the same position.

R4-33-109. ~~Reserved~~ Fingerprint Clearance Card Requirement

Under A.R.S. § 36-446.04, an administrator or manager is required to maintain a valid fingerprint clearance card during the biennial period. Within 10 days after the referenced action, an administrator or manager shall:

1. Submit to the Board a photocopy of the front and back of a new fingerprint clearance card issued to the administrator or manager during the biennial period; or
2. Provide written notice to the Board if:
 - a. The fingerprint clearance card of the administrator or manager is suspended or revoked; or
 - b. The administrator or manager is denied a new fingerprint clearance card.

ARTICLE 2. NURSING CARE INSTITUTION ADMINISTRATOR LICENSING

R4-33-201. Requirements for Initial License by Examination

To be eligible to receive an initial license by examination as a nursing care institution administrator, an individual shall:

1. Education and training.
 - a. Hold a minimum of a baccalaureate degree from an accredited college or university and successfully complete an AIT program;
 - b. Hold a minimum of a masters degree in a health-related field from an accredited college or university; or
 - c. Hold a minimum of an associate of arts degree in nursing from an accredited college or university and:
 - i. Be currently licensed as a registered nurse under A.R.S. § 32-1632,
 - ii. Have worked as a registered nurse for five of the last seven years, and
 - iii. Successfully complete an AIT program.
2. Examination.
 - a. Obtain the scaled passing score on the NAB examination, and
 - b. Obtain a score of at least 80 percent on the Arizona examination; ~~and~~
3. Fingerprint clearance card. Have a valid fingerprint clearance card issued under A.R.S. Title 41, Chapter 12, Article 3.1; and
- ~~3-4.~~ Application. Submit all applicable information required under R4-33-204.

R4-33-202. Requirements for Initial License by Reciprocity

To be eligible for an initial license by reciprocity as a nursing care institution administrator, an individual shall:

1. Substantially equivalent educational requirement.
 - a. Meet the education and training requirement described in R4-33-201(1), or
 - b. Hold ACHCA certification;
2. Substantially equivalent examination requirement.
 - a. Hold a valid and current license as a nursing care institution administrator issued by a state or territory, which was obtained by passing the NAB examination; and
 - b. Obtain a score of at least 80 percent on the Arizona examination; ~~and~~
3. Fingerprint clearance card. Have a valid fingerprint clearance card issued under A.R.S. Title 41, Chapter 12, Article 3.1; and
- 3-4. Application.
 - a. Submit all applicable information required under R4-33-204,
 - b. Have submitted directly to the Board a certified copy of the valid and current license issued by a state or territory, and
 - c. Have submitted directly to the Board the score that the applicant obtained on the NAB examination.

R4-33-204. Initial Application

- A. An individual who desires to be licensed as a nursing care institution administrator shall submit the following information to the Board on an application form, which is available from the Board:
1. Full name of the applicant;
 2. Other names that the applicant has used;
 3. Mailing address of the applicant;
 4. Home, work, and mobile telephone numbers of the applicant;
 5. Applicant's date and place of birth;
 6. Applicant's Social Security number;
 7. Whether the applicant is a U.S. citizen and if not, evidence of authorization to work in the United States;
 8. Address of every residence at which the applicant has lived in the last five years;
 9. Name and address of every accredited college or university attended, dates of attendance, date of graduation, and degree or certificate received;
 10. Information regarding professional licenses or certifications currently or previously held by the applicant, including:
 - a. Name of issuing agency;
 - b. License or certificate number;
 - c. Issuing jurisdiction;
 - d. Date on which the license or certificate was first issued;
 - e. Whether the license or certificate is current; and
 - f. Whether the license or certificate is in good standing and if not, an explanation;
 11. Information regarding the applicant's employment record for the last five years, including:
 - a. Name, address, and telephone number of each employer;
 - b. Title of position held by the applicant;
 - c. Name of applicant's supervisor;
 - d. Dates of employment; and
 - e. Reason for employment termination;
 12. Whether the applicant was ever denied a professional license or certificate and if so, the kind of license or certificate denied, licensing authority making the denial, and date;
 13. Whether the applicant ever voluntarily surrendered a professional license or certificate and if so, the kind of license or certificate surrendered, licensing authority, date, and reason for the surrender;
 14. Whether the applicant ever allowed a professional license or certificate to lapse and if so, the kind of license or certificate that lapsed, licensing authority, date, reason for lapse, and whether the license or certificate was reinstated;
 15. Whether the applicant ever had a limitation imposed on a professional license or certificate and if so, the kind of license or certificate limited, licensing authority, date, nature of limitation, reason for limitation, and whether the limitation was removed;
 16. Whether the applicant ever had a professional license or certificate suspended or revoked and if so, the kind of license or certificate suspended or revoked, licensing authority, date, and reason for the suspension or revocation;
 17. Whether the applicant ever was subject to disciplinary action with regard to a professional license or certificate and if so, the kind of license or certificate involved, licensing authority, date, and reason for and nature of the disciplinary action;
 18. Whether any unresolved complaint against the applicant is pending with a licensing authority, professional association, health care facility, or nursing care institution and if so, the nature of and where the complaint is pending;

19. Whether the applicant ever was charged with or convicted of a felony or a misdemeanor, other than a minor traffic violation, in any court and if so, the nature of the offense, jurisdiction, and date of discharge; and
 20. Whether the applicant ever was pardoned from or had expunged the record of a felony conviction and if so, the nature of the offense, jurisdiction, and date of pardon or expunging.
- B.** In addition to the application form required under subsection (A), an applicant shall submit or have submitted on the applicant's behalf:
1. Official transcript submitted directly to the Board by each accredited college or university attended by the applicant;
 2. Verification of license that is signed, authenticated by seal or notarization, and submitted directly to the Board by each agency that ever issued a professional license to the applicant;
 3. "Character Certification" form submitted directly to the Board by two individuals who have known the applicant for at least three years and are not related to, employed by, or employing the applicant;
 4. If the applicant is certified by ACHCA, verification of certification submitted directly to the Board by ACHCA;
 5. If the applicant completed an AIT program, a photocopy of the certificate issued upon completion;
 6. For every felony or misdemeanor charge listed under subsection (A)(19), a copy of documents from the appropriate court showing the disposition of each charge;
 7. For every felony or misdemeanor conviction listed under subsection (A)(19), a copy of documents from the appropriate court showing whether the applicant met all judicially imposed sentencing terms;
 8. Passport-size, color, full-face photograph of the applicant taken within the last 180 days and signed on the back by the applicant;
 9. Fingerprint clearance card.
 - a. Photocopy of the front and back of the applicant's fingerprint clearance card;
 - b. Proof of submission of an application for a fingerprint clearance card; or
 - c. If denied a fingerprint clearance card, proof that the applicant qualifies for a good-cause exception hearing under A.R.S. § 41-619.55;
- 9-10. Signed and notarized affidavit affirming that the information provided in the application is true and complete and authorizing others to release information regarding the applicant to the Board; and
- ~~10-11.~~ Fees required under R4-33-104(A)(1) and (A)(2).
- C.** If required by the Board under A.R.S. § 36-446.03(D), an applicant shall appear before the Board.
- D.** When the information required under subsections (A) and (B) is received and following an appearance before the Board required under subsection (C), the Board shall provide notice regarding whether the applicant may take the licensing examinations required under R4-33-201 or R4-33-202.
- E.** Because of the time required for the Board to perform an administrative completeness review under R4-33-103, an applicant shall submit the information required under subsections (A) and (B) at least 30 days before the applicant expects to take the Arizona examination.

R4-33-206. Renewal Application

- A.** The Board shall provide a licensee with notice of the need for license renewal. Failure to receive notice of the need for license renewal does not excuse a licensee's failure to renew timely.
- B.** An administrator license expires at midnight on June 30 of each even-numbered year.
- C.** To renew an administrator license, the licensee shall submit the following information to the Board, on or before June 30, on a renewal application, which is available from the Board:
1. Current address;
 2. Current home and business telephone numbers;
 3. Whether within the last 24 months the licensee was convicted of or pled guilty or no contest to a criminal offense, other than a minor traffic violation, in any court and if so, attach a copy of the original arrest record and final court judgment;
 4. Whether within the last 24 months the licensee was denied a professional license or had a professional license revoked, suspended, placed on probation, limited, or restricted in any way by a state or federal regulatory authority and if so, the kind of license, license number, issuing authority, nature of the regulatory action, and date;
 5. An affirmation that the number of hours of continuing education required under R4-33-501 has been completed; and
 6. The licensee's dated and notarized signature affirming that the information provided is true and complete.
- D.** In addition to the renewal application required under subsection (C), a licensee shall submit:
1. A photocopy of the front and back of the licensee's fingerprint clearance card; and
 2. ~~the~~ The license renewal fee required under R4-33-104.
- E.** An individual whose license expires because of failure to renew timely may apply for renewal by complying with subsections (C) and (D) if:
1. The individual complies with subsections (C) and (D) on or before July 31;
 2. The individual pays the penalty prescribed under R4-33-104; and

3. The individual affirms that the individual has not acted as a nursing care institution administrator since the license expired.
- F. An individual whose license expires because of failure to renew timely and who does not comply with subsection (E) may become licensed as a nursing care institution administrator only by complying with R4-33-201 or R4-33-202.

ARTICLE 3. ADMINISTRATOR-IN-TRAINING PROGRAM

R4-33-301. Administrator in Training Program Requirements Approval of an AIT Program

- A. An AIT program shall have a program advisory committee that is responsible for all aspects of the training program. The committee shall conduct at least two on-site visits during each training period. For 20 to 52 week approved training periods, the two site visits shall be conducted upon completion of 30 and 80% of the program requirements. Additional site visits may be conducted upon request of the AIT, the preceptor or the committee. The Board approves an AIT internship provided at an educational institution with a NAB-accredited program.
- B. The program advisory committee shall endorse a preceptor for each AIT. A preceptor shall provide training to no more than one AIT at a time. The provider of an AIT program that does not meet the standard in subsection (A) may apply to the Board for approval of the AIT program. To apply for approval of an AIT program, the provider of the program shall submit to the Board:
 1. A letter on official letterhead providing the following information:
 - a. Name, address, and telephone and fax numbers of the provider; and
 - b. Name and telephone number of an individual who can be contacted regarding the information provided;
 2. A copy of the materials required under R4-33-302(2)(d) to measure the success of an AIT;
 3. A copy of the AIT program monitoring procedure required under R4-33-302(3) and any forms that are used in the monitoring;
 4. A copy of the certificate of completion required under R4-33-302(2)(e);
 5. A detailed outline of the training course required under R4-33-302(4)(d);
 6. A copy of the policy and procedures manual required under R4-33-302(5); and
 7. The signature of an authorized representative of the provider:
 - a. Affirming that the information provided is true and complete; and
 - b. Authorizing the Board to monitor the program's compliance with the standards in R4-33-302.
- C. ~~The program advisory committee shall appoint a site evaluator for each preceptor/administrator training relationship who shall conduct the site visits. A site visit check list shall be completed by the site evaluator during each site visit and reviewed with the preceptor and the AIT if program discrepancies or concerns are identified. The Board shall approve an AIT program that the Board determines meets the standards in R4-33-302. The Board's approval of an AIT program is valid for one year if the program remains in compliance with the standards in R4-33-302.~~
- D. ~~A site evaluator shall:~~ To maintain approval of an AIT program, the provider of the AIT program shall, before the approval expires, submit:
 1. The information required under subsection (B); or
 2. The letter required under subsection (B)(1) and the signature of an authorized representative of the provider affirming that the materials previously submitted under subsections (B)(2) through (B)(6) continue to be true and complete and authorizing the Board to monitor the program's compliance with the standards in R4-33-302.
 1. ~~Review the AIT application as approved by the program advisory committee;~~
 2. ~~Review the individualized training programs as approved by the advisory committee;~~
 3. ~~Make initial contact by telephone with the AIT and the preceptor to introduce the site evaluator, confirm receipt of the NAB AIT/preceptor domains of practice manual, answer any questions, and schedule the first site visit;~~
 4. ~~Review all monthly reports, daily logs, and other information received from the AIT or preceptor before the first site visit;~~
 5. ~~Tour the facility with the AIT, review the AIT's daily log, and interview the AIT and preceptor, both individually and together, during the site visit;~~
 6. ~~Complete the site visit report and review the findings with the AIT and preceptor before leaving the facility. The site visit report shall address the following:~~
 - a. ~~Whether the evaluator met with the AIT and preceptor, individually and together;~~
 - b. ~~Whether the NAB AIT/preceptor domains of practice manual and instructions were reviewed with both the AIT and preceptor and any comments;~~
 - e. ~~Whether the AIT and preceptor appeared to understand their respective roles and responsibilities as outlined in the NAB AIT/preceptor domains of practice manual;~~
 - d. ~~Whether the facility was toured with the AIT and preceptor, and any comments;~~
 - e. ~~Examples of staff and resident interaction with the AIT, the apparent position occupied by the AIT in the facility, and whether the AIT appeared to know and recognize staff and residents;~~
 - f. ~~Whether the evaluator met with any departments with which the AIT had worked and any comments made by~~

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- department heads regarding AIT's learning experience;
 - g- Which written reports, time logs, and other program materials were reviewed, whether the monthly reports were timely and complete, and what other reports, tests, and workshops had been completed by the AIT;
 - h- Which approved AIT training program is being used as a primary resource and what supplementary texts or other materials are being used;
 - i- What concerns were expressed or questions asked during the interview with the AIT and preceptor;
 - j- The frequency and duration of meeting between the AIT and preceptor, scheduled or unscheduled;
 - k- The locations outside the facility where AIT has been assigned or visited, and the purpose, length and supervision provided;
 - l- The community meetings or events attended by the AIT as part of the program, including any AzACHCA meeting or peer group sessions;
 - m- How closely the actual training program has adhered to the proposed training schedule, any variations and whether the variations have negatively affected the program;
 - n- An overall assessment of the training program and its progress and whether there are any apparent problems that may prevent the AIT from completing the program as planned; and,
 - o- Any additional comments;
7. Schedule additional site visits if a significant change occurs in the program outline, if there is a change in either the AIT or preceptor, or upon request of the AIT, preceptor, or program advisory committee; and
8. Conduct telephone interviews with the AIT upon receipt of the monthly progress report to validate the learning experience and respond to any questions or concerns.
- E.** A site program evaluator shall maintain a file on each assigned AIT that includes the following:
- 1. The AIT application and attachments reviewed by the advisory committee;
 - 2. A copy of each monthly report and daily log;
 - 3. A copy of each site visit report;
 - 4. Copies of any correspondence and interim reports; and,
 - 5. Copy of the program completion form from the NAB AIT/preceptor domains of practice manual, completed by the preceptor and co-signed by the AIT when the training program is finished.
- F.** An individualized training plan shall be prepared at the beginning of the training by the preceptor and the AIT. Any changes to the training plan shall be submitted, in writing, to the program evaluator, for review by the advisory committee.
- G.** A training program shall not permit the following:
- 1. A preceptor to train the preceptor's employer or supervisor; or
 - 2. A preceptor to train the preceptor's spouse, child, parent, brother, sister, first or second cousin, niece, nephew, uncle, or aunt.
- H.** A program advisory committee shall provide semiannual reports in June and December to the Board which include the names of preceptors trained, number of administrators in training, number of administrators in training who have completed training, and the names of facilities where training is being provided.
- I.** If a preceptor is no longer able or willing to be a preceptor or the AIT chooses to change location or preceptor, the AIT program ceases and the following shall occur:
- 1. The original preceptor and AIT shall write a letter to the program advisory committee stating the reasons for the change and the last date of training. The letter shall be signed by both the AIT and original preceptor. The AIT shall complete and sign the last monthly report.
 - 2. The AIT and new preceptor shall submit a letter of application for continuance to the program advisory committee stating that the preceptor or training location has changed. The new preceptor shall complete and submit the preceptor portion of the application form, including the preceptor's credentials.
 - 3. At the next meeting of the program advisory committee following receipt of the letter, the committee shall review the documentation and send written notification to the AIT and the preceptor of the committee's decision and program continuance date within five working days after the meeting.
 - 4. Change requests may be completed in advance to allow for a smooth and timely transition.

R4-33-302. Preceptor Qualifications and Responsibilities Standards for an AIT Program

- A.** A preceptor shall have the following qualifications: For an AIT program to be approved by the Board, the provider of the AIT program:
- 1. Be an administrator of record with a current nursing care institution administrator's license in good standing in Arizona with no disciplinary actions taken against the preceptor's license in the last three years, excluding letters of concern. Shall be:
 - a. An accredited college or university;
 - b. An institution licensed by the Board of Private Postsecondary Education under A.R.S. § 32-3001 et seq.;
 - c. ACHCA or the Arizona chapter of ACHCA; or
 - d. Another nationally recognized organization of care administrators;

2. ~~Be a full-time practicing nursing care institution administrator with a minimum of two years of experience as an administrator within the last three years; Shall ensure that the AIT program:~~
 - a. Provides at least 1,000 hours of full-time educational experience to the AIT in not less than six months and not more than 12 months in the following subject areas:
 - i. Federal and state law regarding nursing care institutions;
 - ii. Nursing care institution administration and policy;
 - iii. Health care quality assurance;
 - iv. Communications skills;
 - v. Health economics;
 - vi. Financial management of a nursing care institution;
 - vii. Personnel management;
 - viii. Resident care;
 - ix. Facility operation and management;
 - x. Safety and environmental management; and
 - xi. Community resources;
 - b. Allows the AIT to work only with a preceptor who meets the standards in subsection (4) and is responsible for supervising the AIT while the AIT participates in the program;
 - c. Is implemented at the nursing care institution of which the preceptor is administrator;
 - d. Measures the AIT's success in acquiring the knowledge and skills necessary to be a competent nursing care institution administrator; and
 - e. Provides the AIT with a certificate of completion that indicates:
 - i. The AIT's name;
 - ii. The preceptor's name and license number;
 - iii. The name and address of the facility at which the AIT program was implemented;
 - iv. The beginning and ending dates of the AIT program; and
 - v. The preceptor's signature affirming that the AIT successfully completed the AIT program;
 3. ~~Comply with all required continuing education in the care field; and Shall develop a procedure to monitor the AIT program, assess the AIT's progress through the AIT program, and make adjustments necessary to ensure that the AIT acquires the knowledge and skills necessary to be a competent nursing care institution administrator;~~
 4. ~~Complete a preparatory educational seminar approved by the Board. Shall ensure that an individual who serves as an AIT preceptor:~~
 - a. Has been licensed by the Board for at least two years;
 - b. Is employed full-time as a nursing care institution administrator at a facility that the Department determines is in compliance with applicable standards;
 - c. Is in good standing and has no disciplinary actions against the individual's license in the last three years; and
 - d. Completes a training course regarding the role and responsibilities of a preceptor; and
 5. Shall develop a written policy and procedures manual that includes at least the following:
 - a. Procedure and forms required to apply to be an AIT;
 - b. Procedure and forms required to apply to be a preceptor;
 - c. Procedure for matching an AIT applicant with a preceptor;
 - d. Goals of the AIT program related to each of the subject areas listed in subsection (2)(a);
 - e. Learning experiences to achieve each goal;
 - f. Estimated time to accomplish each goal;
 - g. Responsibilities of a preceptor;
 - h. Responsibilities of an AIT;
 - i. Procedures for deviating from the goals of the AIT program, changing the facility at which the AIT program is implemented, changing preceptor, and extending the AIT program; and
 - j. Procedure for evaluating the preceptor.
- B.** ~~A preceptor shall~~
1. ~~Implement the AIT training program in a facility.~~
 2. ~~Interview a prospective AIT to ensure that the preceptor and AIT understand the required training plan, develop the AIT program experience, identify individual responsibilities, and assure compatibility between them. A proposed training program shall be prepared by the preceptor and AIT for submission to and approval by the program advisory committee. The training plan shall include the following:~~
 - a. ~~The name of the AIT;~~
 - b. ~~The date;~~
 - c. ~~The name of the training site, and its address and phone number;~~
 - d. ~~The number of weeks or hours to complete the program;~~
 - e. ~~The start, completion and examination dates of the program, including the hours in administration, human~~

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- resources, nursing, rehabilitation, medical records, activities, social services, business office, dietary, housekeeping, laundry, maintenance, and other;
 - f. The total assigned time in weeks or hours;
 - g. Other comments; and
 - h. The dated signatures of the AIT and preceptor.
3. Provide the AIT with an initial orientation to the facility, its philosophy, its staff and basic operation.
 4. Alert the facility's staff to the presence of the AIT and the purpose of the clinical experience and solicit staff cooperation in providing information and encouragement to the AIT.
 5. Meet with the AIT on at least a weekly basis to evaluate performance, apprise the AIT of areas of competency and weakness, identify problem areas, and modify the training plan to meet altered needs.
 6. Provide information and guidance to the AIT in test-taking techniques to prepare for state licensure.
 7. Provide follow-up with the AIT's progress upon completion of the training program and provide information regarding job opportunities in the field of care administration.
 8. Report on a monthly basis to the program advisory committee any concerns or problems regarding the progress of the AIT, including comments on the professional competence of the AIT as well as the attitudes about care and general suitability of the AIT for the field.
 9. Modify the structure and content of the AIT program in response to feedback received from the AIT's evaluation of the preceptor.
 10. Incorporate into the AIT program visits to other facilities to provide broader exposure to the field, and visits to relevant governmental and community agencies.
 11. Upon completion of training, prepare a certification of program completion and provide it to the program advisory committee, which shall notify the Board that the AIT has successfully completed training. The certification of program completion shall provide the following information:
 - a. The full name of the AIT;
 - b. The place of training, including mailing and street address;
 - c. The telephone number of the place of training;
 - d. The dates the AIT began and completed the program;
 - e. The number of weeks spent in administration, human resources, nursing department, rehabilitation department, medical/patient records, activities department, social services/admissions, business office, dietary department, housekeeping/laundry, environment/maintenance and other;
 - f. The total number of weeks in the AIT training program;
 - g. A certification that the AIT has satisfactorily completed the program under the preceptor's personal supervision;
 - h. A narrative evaluation of the suitability of the AIT for licensure as a nursing care institution administrator; and
 - i. The signatures of the AIT and preceptor, the date, and the preceptor's license number.
- C.** A preceptor shall immediately inform the site evaluator when the preceptor is absent for more than 10 consecutive working days for any reason. The site evaluator may extend or suspend the program if the preceptor is absent for a cumulative total of 25 working days for any reason. An AIT may train at another facility under another preceptor who has no other AIT during the absence of the original preceptor.

R4-33-303. Administrator in Training Repealed

- A.** An AIT shall comply with the standards of conduct applicable to nursing care institution administrators.
- B.** An AIT shall serve an internship between the hours of 6:00 a.m. and 7:00 p.m., Monday through Friday, on a regular basis. An AIT may train on weekends and on second and third shifts for limited periods of time and for specific purposes.
- C.** An AIT shall not serve in any capacity in a facility other than that of trainee during the training period.
- D.** An AIT shall send a report at the end of the first calendar month and every month thereafter to the site evaluator. Each monthly report, together with daily logs, shall be completed for review and signature by the preceptor and submitted to the site evaluator. The report shall provide the following information:
1. The full name of the AIT;
 2. The training facility name, address, and phone number;
 3. The date of the report;
 4. The dates covered by the report;
 5. The date the internship began and its expected completion date;
 6. A list of assignments and departments with time spent in each;
 7. A summary of learning experiences;
 8. A brief analysis of any problems observed, new experiences, and insights gained;
 9. A statement of any problems that arose during the training;
 10. A list of visits made outside the facility and educational conference attended;
 11. A certification that the information presented is true and accurate; and,
 12. The signatures of the AIT and preceptor.

- ~~E.~~ An AIT shall complete the training program in not less than 20 weeks nor more than 52 weeks after beginning training.
- ~~F.~~ Any consecutive absence of an AIT of more than five working days shall result in the suspension of the program effective with the first day of absence. The preceptor shall immediately notify the site evaluator. The program may resume upon the return of the AIT to the program schedule if reviewed by the site evaluator. The program shall be extended equivalent to the period of time lost. Absences of five consecutive working days or less shall be worked out between the preceptor and the AIT.
- ~~G.~~ An AIT shall develop professional competency and a personal code of ethics through the following:
 - ~~1.~~ In collaboration with the preceptor, become involved in decisionmaking activities of increasing difficulty and their implementation.
 - ~~2.~~ Increase knowledge and appreciation of the clinical aspects of delivering quality care services through observation and participation, including involvement with nursing, rehabilitative, and social services.
 - ~~3.~~ Develop a familiarity with the patient population in the facility and with the unique problems associated with the delivery of multiple services to an aged, chronically ill, and disabled dependent population.
 - ~~4.~~ Become familiar with all departments and services in the facility, including dietary, housekeeping, laundry, maintenance and others, to understand both their individual functions and how they interface with each other.
 - ~~5.~~ Complete all projects and assignments made by the preceptor.
 - ~~6.~~ Communicate openly with the preceptor at all times.
 - ~~7.~~ Evaluate the preceptor's performance in the tutorial role.
 - ~~8.~~ Apply the theories, concepts, principles, and techniques learned through formal academic preparation to practical situations in the facility.

ARTICLE 4. ASSISTED LIVING FACILITY MANAGER CERTIFICATION

R4-33-401. Requirements for Initial Certification by Examination

To be eligible to receive an initial certificate by examination as an assisted living facility manager, an individual shall:

1. Education:
 - a. Earn a high school diploma or G.E.D., and
 - b. Complete, within one year before the date of application for certification, a ~~Department approved~~ training program in personal, supervisory, and directed care and management of an assisted living facility that is:
 - i. Approved by the Department under A.A.C. R9-10-724, and
 - ii. Provided by an institution licensed by the Board of Private Postsecondary Education under A.R.S. Title 32, Chapter 30 or exempt from licensing by the Board of Private Postsecondary Education, or
 - c. Complete at least 36 contact hours of instruction at an accredited university or college the following hours in the following subject areas:
 - i. ~~Residents' rights, two contact hours;~~
 - ii. ~~Care of elderly or disabled adults, 10 contact hours;~~
 - iii. ~~Nutrition and food preparation, four contact hours;~~
 - iv. ~~Care of confused individuals, four contact hours;~~
 - v. ~~Pharmacology of commonly prescribed medications, four contact hours;~~
 - vi. ~~Care plan development, four contact hours;~~
 - vii. ~~Environmental and fire safety, four contact hours; and~~
 - viii. ~~Business practices and recordkeeping, four contact hours~~
 - c. Hold a license in good standing issued under A.R.S. Title 32, Chapter 13, 15, or 17 or Article 2;
2. Work experience. Complete at least 2,080 hours of paid work experience in a health-related field within the five years before application;
3. Examination. Obtain a score of at least 75 percent on the Arizona examination;
4. Training. Complete an adult cardiopulmonary resuscitation and basic first-aid training program; ~~and~~
5. Fingerprint clearance card. Have a valid fingerprint clearance card issued under A.R.S. Title 41, Chapter 12, Article 3.1; and
- 5-6. Submit all applicable information required under R4-33-403.

R4-33-403. Initial Application

- A. An individual who desires to be certified as a manager of an assisted living facility shall submit the following information to the Board on an application form, which is available from the Board:
 1. Full name of the applicant;
 2. Other names that the applicant has used;
 3. Mailing address of the applicant;
 4. Home, work, and mobile telephone numbers of the applicant;
 5. Applicant's date and place of birth;
 6. Applicant's Social Security number;

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7. Whether the applicant is a U.S. citizen and if not, evidence of authorization to work in the United States;
 8. Address of every residence at which the applicant has lived in the last five years;
 9. Education information regarding the applicant, including:
 - a. Name and location of last high school attended;
 - b. Date of high school graduation or date on which a G.E.D. was earned; and
 - c. Name and address of every accredited college or university attended, dates of attendance, date of graduation, and degree or certificate earned;
 10. Information regarding professional licenses or certifications currently or previously held by the applicant, including:
 - a. Name of issuing agency;
 - b. License or certificate number;
 - c. Issuing jurisdiction;
 - d. Date on which the license or certificate was first issued;
 - e. Whether the license or certificate is current; and
 - f. Whether the license or certificate is in good standing and if not, an explanation;
 11. Information regarding the applicant's employment record for the last five years, including:
 - a. Name, address, and telephone number of each employer;
 - b. Title of position held by the applicant;
 - c. Name of applicant's supervisor;
 - d. Dates of employment;
 - e. Number of hours worked each week;
 - f. Whether the employment was full or part time; and
 - g. Reason for termination;
 12. Whether the applicant was ever denied a professional license or certificate and if so, the kind of license or certificate denied; licensing authority making the denial, and date;
 13. Whether the applicant ever voluntarily surrendered a professional license or certificate and if so, the kind of license or certificate surrendered, licensing authority, date, and reason for the surrender;
 14. Whether the applicant ever allowed a professional license or certificate to lapse and if so, the kind of license or certificate that lapsed, licensing authority, date, reason for lapse, and whether the license or certificate was reinstated;
 15. Whether the applicant ever had a limitation imposed on a professional license or certificate and if so, the kind of license or certificate limited, licensing authority, date, nature of limitation, reason for limitation, and whether the limitation was removed;
 16. Whether the applicant ever had a professional license or certificate suspended or revoked and if so, the kind of license or certificate suspended or revoked, licensing authority, date, and reason for suspension or revocation;
 17. Whether the applicant ever was subject to disciplinary action with regard to a professional license or certificate and if so, the kind of license or certificate involved, licensing authority, date, and reason for and nature of the disciplinary action;
 18. Whether any unresolved complaint against the applicant is pending with a licensing authority, professional association, health care facility, or assisted living facility and if so, the nature of and where the complaint is pending;
 19. Whether the applicant ever was charged with or convicted of a felony or a misdemeanor, other than a minor traffic violation, in any court and if so, the nature of the offense, jurisdiction, and date of discharge; and
 20. Whether the applicant ever was pardoned from or had the record expunged of a felony conviction and if so, the nature of the offense, jurisdiction, and date of pardon or expunging.
- B.** In addition to the application form required under subsection (A), an applicant shall submit or have submitted on the applicant's behalf:
1. Education:
 - a. Copy of the applicant's high school diploma or G.E.D., and
 - b. Certificate of completion issued within a year before the date of application from the ~~Department-approved~~ training course described under R4-33-401(1)(b), or
 - c. ~~Official transcript submitted directly to the Board by each accredited college or university attended by the applicant~~ Copy of the applicant's license issued under A.R.S. Title 32, Chapter 13, 15, or 17 or Article 2;
 2. Documentation of 2,080 hours of paid work experience in a health-related field;
 3. Copy of current certification in adult cardiopulmonary resuscitation and first aid;
 4. Verification of license that is signed, authenticated by seal or notarization, and submitted directly to the Board by each agency that ever issued a professional license to the applicant;
 5. "Character Certification" form submitted directly to the Board by two individuals who have known the applicant for at least three years and are not related to, employed by, or employing the applicant;
 6. For every felony or misdemeanor charge listed under subsection (A)(19), a copy of documents from the appropriate court showing the disposition of each charge;
 7. For every felony or misdemeanor conviction listed under subsection (A)(19), a copy of documents from the appropri-

ate court showing whether the applicant met all judicially imposed sentencing terms;

8. Passport-size, color, full-face photograph of the applicant taken within the last 180 days and signed on the back by the applicant;
 9. Fingerprint clearance card.
 - a. Photocopy of the front and back of the applicant's fingerprint clearance card;
 - b. Proof of submission of an application for a fingerprint clearance card; or
 - c. If denied a fingerprint clearance card, proof that the applicant qualifies for a good-cause exception hearing under A.R.S. § 41-619.55;
 - 9-10. Signed and notarized affidavit affirming that the information provided in the application is true and complete and authorizing others to release information regarding the applicant to the Board; and
 - 10-11. Fees required under R4-33-104(B)(1) and (B)(2).
- C. If required by the Board under A.R.S. § 36-446.03(D), an applicant shall appear before the Board.
- D. When the information required under subsections (A) and (B) is received and following an appearance before the Board required under subsection (C), the Board shall provide notice regarding whether the applicant may take the Arizona examination required under R4-33-401(3).
- E. Because of the time required for the Board to perform an administrative completeness review under R4-33-103, an applicant shall submit the information required under subsections (A) and (B) at least 30 days before the applicant expects to take the Arizona examination.

R4-33-405. Renewal Application

- A. The Board shall provide a certificate holder with notice of the need for certificate renewal. Failure to receive notice of the need for certificate renewal does not excuse a certificate holder's failure to renew timely.
- B. A manager certificate expires at midnight on June 30 of each odd-numbered year.
- C. To renew a manager certificate, the certificate holder shall submit the following information to the Board, on or before June 30, on a renewal application, which is available from the Board:
 1. Current address;
 2. Current home and business telephone numbers;
 3. Whether within the last 24 months the certificate holder was convicted of or pled guilty or no contest to a criminal offense, other than a minor traffic violation, in any court and if so, attach a copy of the original arrest record and final court judgment;
 4. Whether within the last 24 months the certificate holder was denied a professional license or had a professional license revoked, suspended, placed on probation, limited, or restricted in any way by a state or federal regulatory authority and if so, the kind of license, license number, issuing authority, nature of the regulatory action, and date;
 5. An affirmation that the number of hours of continuing education required under R4-33-501 has been completed;
 6. An affirmation that the certificate holder complies with the disclosure requirements under R4-33-408; and
 7. The certificate holder's dated and notarized signature affirming that the information provided is true and complete.
- D. In addition to the renewal application required under subsection (C), a certificate holder shall submit:
 1. A photocopy of the front and back of the certificate holder's fingerprint clearance card; and
 2. ~~the~~ The renewal fee required under R4-33-104.
- E. An individual whose certificate expires because of failure to renew timely may apply for renewal by complying with subsections (C) and (D) if:
 1. The individual complies with subsections (C) and (D) on or before July 31;
 2. The individual pays the penalty prescribed under R4-33-104; and
 3. The individual affirms that the individual has not acted as an assisted living facility manager since the certificate expired.
- F. An individual whose certificate expires because of failure to renew timely and who does not comply with subsection (E) may obtain a manager certificate only by complying with R4-33-401.

R4-33-409. ~~Repealed~~ Certification following Revocation

An individual who wishes to be certified after the individual's certificate as an assisted living facility manager is revoked shall:

1. Not apply for certification until at least 12 months have passed since the revocation; and
2. Apply for certification under R4-33-401.

R4-33-410. ~~Renumbered~~ Notice of Appointment

- A. A manager shall provide written notice to the Board, within 30 days, of being appointed manager of an assisted living facility or terminating an appointment.
- B. A manager shall include the following, as applicable, in a notice regarding the manager's appointment:
 1. Manager's name,
 2. Manager's certificate number,
 3. Name and address of the assisted living facility to which the manager is appointed.

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4. Date of appointment.
5. Name and address of the assisted living facility at which the manager's appointment is terminated, and
6. Date of termination.