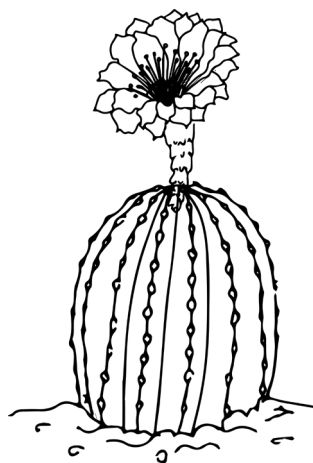




Independent Oversight Committees
Statewide Operations Manual &
Standard Work



“Volunteers do not necessarily have the time;
They just have the heart”

~Elizabeth Andrew



Independent Oversight Committees Statewide Operations Manual & Standard Work

This manual has been developed by the Arizona Department of Administration (ADOA) in consultation with statewide stakeholders. The most current version of the manual is available through the Department of Administration IOC website <https://ioc.az.gov/>.

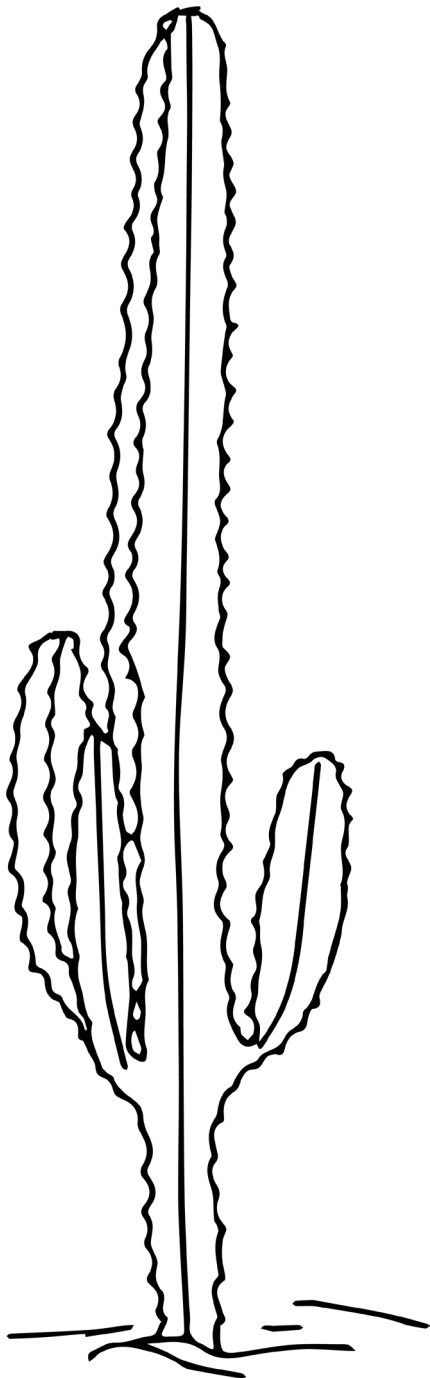
The manual is intended to assist in meeting the statutory requirement for IOC training, which includes training for both committee members and agencies with IOC deliverables. This manual is not intended to serve in lieu of agency policy or training on systems required by an agency.

The committees may elect to adopt this manual or any portion of the manual as guidelines upon majority vote of the IOC, and approval of the Director of ADOA.

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Section 1: IOC Overview

1.1 Statutes/Rules

In August 2018, legislative changes took effect that renamed the Human Rights Committees (HRCs) to Independent Oversight Committees (IOCs). The legislative changes established within the Arizona Department of Administration (ADOA) the Independent Oversight Committees of: the Department of Economic Security (DES), the Department of Child Safety (DCS) and the Arizona Health Care Cost Containment System (AHCCCS), and Department of Health Services (DHS)/Arizona State Hospital (ASH).

Agencies and IOCs are established under, and must abide by the following statutes/rules:

- a. A.R.S. § 36-509: Confidential Records (<https://www.azleg.gov/ars/36/00509.htm>)
- b. A.R.S. § 38-431: Open Meeting Law (<https://www.azleg.gov/ars/38/00431.htm>)
- c. A.R.S. § 41-192(A)(8): Attorney General Arizona Agency Handbook - Open Meeting Law (<https://www.azag.gov/outreach/publications/agency-handbook>)
- d. A.R.S. § 38-503: Conflict of interest; exemptions; employment prohibition (<https://www.azleg.gov/ars/38/00503.htm>) and the related “Attorney General Manual - Chapter 8” (<https://www.azag.gov/outreach/publications/agency-handbook>)
- e. A.R.S. § 41-3801: IOC on persons with developmental disabilities - DES (<https://www.azleg.gov/ars/41/03801.htm>)
- f. A.R.S. § 41-3802: IOC on children, youth and families - DCS (<https://www.azleg.gov/ars/41/03802.htm>)
- g. A.R.S. § 41-3803: IOC on mentally ill; training plan - AHCCCS (<https://www.azleg.gov/ars/41/03803.htm>)
- h. A.R.S. § 41-3804: IOC’s membership, duties, client information, immunity, violation and classification (<https://www.azleg.gov/ars/41/03804.htm>)
- i. A.R.S. § 41-1092.06: Arizona Administrative Procedure Act/ Article 10, Uniform Administrative Hearing Procedures; Appeals of agency actions and contested cases; informal settlement conferences; applicability (<https://azsos.gov/sites/default/files/arizona-administrative-procedure-act.pdf>)
- j. A.R.S. § 12-901 through 12-914: Judicial Review of Administrative Decisions
- k. Arizona Administrative Code Title 9, Chapter 21: Behavioral Health Services for Persons with Serious Mental Illness (https://apps.azsos.gov/public_services/Title_09/9-21.pdf)

This document provides the framework for multi-agency IOCs and is structured to meet the IOC Guidelines requirements across agencies.

In some cases the information contained in this manual may not be relevant for an IOC; therefore, members are encouraged to modify and adopt components of the manual which are relevant.

This manual is intended to be used with the IOC's scope as defined in statute and rule. The IOC may vote to adopt this manual to serve as its IOC Guidelines.

All IOC Guidelines outside of this manual must be published on the ADOA IOC website (ioc.az.gov) with an explanation where modifications are made pertaining to the IOC's operations.

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1.2 Membership Requirements

- a. The independent oversight committee on the mentally ill is established in the Department of Administration to promote the rights of persons who receive behavioral health services pursuant to:
 1. Section 13-3994
 2. Title 36, chapters 5 and 34.
- b. Each region of this state covered by a regional behavioral health authority shall have at least one independent oversight committee with the authority and responsibilities as prescribed by the department of administrations pursuant to rules adopted by the department relating to behavioral health services.
- c. The director of the department may establish additional committees to serve persons who receive behavioral health services or to oversee the activities of any service provider.
- d. Each independent oversight committee established pursuant to this section shall consist of at least seven and not more than fifteen members appointed by the director of the department with expertise in at least one of the following areas:
 1. Psychology.
 2. Law.
 3. Medicine.
 4. Education.
 5. Special education.
 6. Social work.
 7. Mental health.
 8. Housing for the mentally ill.
 9. Criminal justice.
 10. Public safety.
- e. Each independent oversight committee, if appropriate, shall include at least two parents of children who receive behavioral health services pursuant to title 36, chapter 34.
- f. Each independent oversight committee shall include at least one member who is a current or former client of the behavioral health system.

- g. Current or former providers or employees of providers that have contracted with a regional behavioral health authority may serve on an independent oversight committee but may not hold more than two positions on the committee.
- h. Each independent oversight committee may hold one or more community forums annually to receive comments regarding the experiences of individuals living with serious mental illness, and their family members and caregivers, across the care continuum.
- i. The department shall ensure that each regional behavioral health authority and its providers develop and implement a human rights training plan to ensure that providers are trained regarding clients' human rights and the duties of the independent oversight committees.
- j. The Independent Oversight Committee at the Arizona State Hospital shall have oversight of patients who have been determined to have a serious mental illness and who are hospitalized and receiving behavioral health services at the civil and forensic hospital pursuant to Subsection A of this section. The Arizona State Hospital shall provide to the committee, subject to state and federal law, information regarding the following:
 - 1. Seclusion of and the use of restraints on patients.
 - 2. Incident accident reports.
 - 3. Allegations of illegal, dangerous or inhumane treatment of patients.
 - 4. Provisions of services to patients in need of special assistance.
 - 5. Allegations of neglect and abuse.
 - 6. Allegations of denial of rights afforded to patients with serious mental illness except where a right may be restricted for the safety of a patient, the state hospital or the public.

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Section 2: IOC Duties (Roles & Responsibilities)**2.1 IOC Guidelines**

- a. To fulfill the purposes of Section 41-3803, The Director of the Department of Administration, in conjunction with each independent oversight committee established pursuant to Section 41-3803, shall adopt policies relating to the authority and responsibility of the independent oversight committees established pursuant to this article that define the process and procedures that each independent oversight committee and each department or service provider that is subject to oversight must follow. Before adopting the policies, the director shall post the proposed policies on the department's public website for a period of thirty (30) days and provide for public comment. The director shall consider the public comments when adopting the proposed policies.
- b. Subject to the approval of the director of the department of administration, each committee established pursuant to this article shall adopt guidelines that govern its operation, including terms of members, quorum and attendance requirements and removal of a committee member if necessary. Each committee shall adopt these guidelines by majority vote within the first three (3) months of its formation. These guidelines shall not conflict with this article. The director of the department shall approve the guidelines unless they are inconsistent with the statutes, policies, procedures or rules, or if the guidelines do not promote participation by all interested members of the community that the committee serves. In addition to the procedures in the guidelines, each independent oversight committee must approve the removal of any committee member on majority vote of the committee. The director shall provide committee members the opportunity to review potential changes to rules or policies that affect the committee.
- c. Employees of the Department of Economic Security, the Department of Child Safety, the Arizona Health Care Cost Containment System the Arizona Health Care Cost Containment System Administration and subject-matter experts may serve on a committee only as nonvoting members whose presence is not counted for the purpose of determining a quorum.
- d. Advocacy groups, local advisory councils, committee members and the Director of the Department of Administration may submit names of candidates to fill committee vacancies. The director shall appoint a person to fill a vacancy subject to the approval of the committee.
- e. Each committee shall meet at least quarterly each calendar year.
- f. Each committee shall provide independent oversight to:

1. Ensure that the rights of clients are protected.
2. Review incidents of possible abuse, neglect or denial of a client's rights.
3. Conduct research in the field of mental health.
4. Make recommendations to the director of any Department or service provider subject to oversight under this article and to the legislature regarding laws, rules, policies, procedures and practices to ensure the protection of the rights of clients receiving behavioral health and developmental disability services.

g. Each committee shall submit written objections to specific problems or violations of client rights by the department or service provider through the director of the Department of Administration for review by the director of the department that is responsible for the client. The director of the department shall deliver to the committee a detailed written response to each written objection within twenty-one (21) calendar days after receiving the objection within twenty one (21) calendar days after receiving the objection from the Department of Administration.

h. Each committee shall issue an annual report of its activities and recommendations, if any, to the director of the Department of the Administration, the director of the Department of Economic Security, The Director of the Department of Child Safety, the director of the Department of Health Services, the director of the Arizona Healthcare Cost Containment System, the president of the Senate, the Speaker of the House of Representatives and the chairpersons of the Senate Health and Human Services Committee and the House of Representatives Health and Human Services Committee, or their successor committees.

i. The Department of Administration shall post on the department's website a copy of the agenda of each committee's meetings and a copy of the annual report that is required by this section.

j. A committee may request from a department the services of a consultant to advise the committee on specific issues. The consultant may be a member of another independent oversight committee, an employee or consultant from a department or service provider. Subject to the availability of monies, the department shall assume the cost of the consultant. A consultant shall not participate in committee votes.

k. Subject to federal and state law, attorney client privilege and attorney work product doctrine and to the extent necessary to conduct committee duties, committee members and consultants shall have access to client information and records, including quality of care reports, incident reports and investigative reports and, on request, case presentations, adult protective services investigation case status and outcomes, substantiations, recommendations and other quality of care findings from peer reviews or any successor report or process, maintained by a department, service provider or regional behavioral health authorities. The departments or service provider shall redact protected information in documents if the department or service provider determines in good faith cannot be provided even in redacted form pursuant to federal law, attorney client privilege or

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attorney work product doctrine, the department or service provider shall object in writing to the request within the time frame set forth under subsection G of this section in a matter that, without revealing the information that is believed to be protected, enables the requesting committee to understand the basis on which the department or service provider determined the information or records are protected. Each person who receives information or records pursuant to this subsection shall maintain the information or records as strictly confidential and sign an agreement to comply with all confidentiality requirements. Any client information or records shall be released to the committee without the designation of personally identifiable information unless the personally identifiable information is required for the official purposes of the committee. A violation of this subsection is a class 2 misdemeanor. For the purposes of this subsection, "personally identifiable information" includes a person's name, address, date of birth, social security number, tribal enrollment number, telephone or fax number, e-mail address, social media identifier, driver license number, places of employment, school identification or military identification number or any other distinguishing characteristic that tends to identify a particular person.

l. For information and records requested and provided pursuant to this section regarding persons with developmental disabilities for the work of the independent oversight committee on persons with developmental disabilities established by section 41-3801, the Department of Economic Security and not the service provider shall provide the information and records and redact any necessary information.

m. Within its jurisdiction, each committee that has oversight responsibilities for clients who are seriously mentally ill shall, for a client who needs special assistance, and may, for any other client who is seriously mentally ill make regular site visits to a residential environment and meet with the client in a residential environment to determine the client's satisfaction with residential environment, if each client's guardian is given the right to decline for any reason and without explanation to participate in any part of a site visit conducted by any independent oversight committee.

n. If a committee's request for information or records from a department is denied, including an objection pursuant to subsection G of this section, and if requested by the committee, at least one representative of the department or service provider and at least one committee member shall meet and confer within five (5) business days after the date of the request or on a later date that is agreed to by both parties and shall in good faith attempt to resolve the objection informally and cooperatively. After meeting and conferring, the committee may request in writing that the director of a department review this decision. The director shall timely conduct the review and not later than twenty one (21) calendar days, after receiving the request for review, the director shall deliver to the committee a written decision explaining in detail the factual and legal basis and reasoning for the department's decision. The department shall bear the costs of conducting the review. A final agency decision made pursuant to this subsection is subject to judicial review pursuant to title 12, chapter 7, article 6. The department shall not release any information or records during the period an appeal may be filed or is pending.

- o. Confidential records and information received by the committee or its consultant are subject to the same provisions concerning subpoenas, discovery and use in legal actions as are the original records and information.
- p. The independent oversight committees may exchange information and engage in planning and coordination activities between committee members in the performance of committee duties pursuant to this section.
- q. The independent oversight committees may encourage public awareness and involvement in their activities by supporting committee members with affiliation agreements with postsecondary education-sponsored internship placements pursuant to the department's approved operating procedures.
- r. The department shall coordinate education and training programs for committee members to facilitate their role as independent oversight committee members. The department shall coordinate statewide meetings of committees at least every two (2) years and provide staff for the committees.
- s. Any person who, in good faith and without malice and in connection with duties or functions of a committee established pursuant to this article, takes an action or makes a decision or recommendation as a member or agent of a committee or who furnishes records, information or assistance that is related to the duties of a committee is not subject to liability for civil damages in consequence of that action. The court shall determine the presence of malice by clear and convincing evidence.
- t. Title 38, chapter 3, article 8, relating to conflict of interest, applies to all committee members.

2.3 Review of Incident Reports

- a. Agencies are required to send to the IOCs all related incident reports of possible abuse, neglect or denial of a client's rights per A.R.S. §41-3804; these include Incident/Accident/Death (IAD) Reports and Seclusion/Restraint (SR) Reports. (see Sections 10.1 and 10.5) [A.R.S. §41-3804]
 - 1. These reports are to be reviewed by IOC members to identify if there are any concerns or possible violations to specific client rights.
 - 2. If a report is missing critical information, or if additional information is needed, a formal written request, upon a majority vote of an IOC, must be sent to the appropriate Agency Liaison and copy ADOA. (See Sections 5.6 and 7)
 - 3. IOC members may request unredacted information, but only when necessary to perform the functions of the IOC; an official written request, upon a majority vote of an IOC, must be sent to the appropriate Agency Liaison and copy ADOA. (see Section 7) [A.R.S. §41-3804]
- b. Depending on the report, IOC members may take appropriate action including formal recommendations, or written objections to problems and violations of client rights. (see Sections 8.1, 8.2 and Appendices W & X)
- c. If reports are missing information that is not yet available, the Agency/Division shall report the findings to the IOC when it becomes available.

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2.4 Site Visits (AHCCCS & DHS-ASH)

- a. Within its jurisdiction, each IOC from AHCCCS and DHS-ASH shall, for a client who needs special assistance, and may, for other clients and enrolled children:
 1. Make site visits to residential environments,
 2. Upon a signed consent form, meet with the client/patient and/or with their assigned guardian in the residential environment to determine satisfaction of the client/patient within the residential environment,
 3. If included in the signed consent form, inspect client records, including client records for clients who need special assistance, except as prohibited by federal or state law and a client's right to privacy. (see Sections 7.1-7.2 and Appendices A-E) [A.A.C. R9-21-105(H)]
- b. **Scheduled Site Visits:** Shall be scheduled at least twenty-four (24) hours in advance by contacting the appropriate Agency Liaison in writing with the proposed dates/times of the visit/s and a list of specific clients/patients to be visited via an email. (see Appendix N)
- c. **Unscheduled Site Visits:** Based upon need, unscheduled site visits may be conducted by IOC members to ensure and/or validate specific concerns regarding clients/patients; however, as stated above in sections 2.4(a)(2-3), an appropriate signed consent form may be required in order to meet with the client/patient or review any records.
- d. For the safety and security of all involved, there must be at least two IOC members¹ on any site visit but always less than a quorum to prevent an Open Meeting Law violation. (see Section 5.1)
- e. IOCs should develop within their guidelines protocols for members to follow when conducting site visits (see Appendix K for an example)
- f. ADOA will work with Agency Liaisons and members to secure proper identification that can be used to identify their status as an active IOC member, which will be needed prior to conducting a site visit. (see Sections 10.1 and 11.3 and Appendix V)
- g. IOC members are to only use the approved Agency/IOC Site Visit Questions/Checklists. (see Appendices L-M)
- h. It is recommended that members use the IOC Site Visit Log to record all site visits conducted by its members throughout the year; this tool will assist IOCs in ensuring proper tracking and subsequent reporting of all site visits conducted within their annual report. (see Section 9 and Appendix Y)
- i. IOCs should include in their Guidelines standard work protocols for conducting
 1. DHS/ASH requires a minimum of two (2) IOC members

site visits and the required follow-up documentation/reports that will need to be submitted upon completion of a site visit. (see Appendix K)

2.5 Exchange of Information & Public Awareness

- a. IOC members may exchange information and engage in planning and coordination activities between members in the performance of IOC duties. [A.R.S. §41-3804]
- a. IOC members may encourage public awareness and involvement in their activities by supporting members with affiliation agreements with postsecondary education-sponsored internship placements pursuant to the department's approved operating procedures. [A.R.S. §41-3804]

2.6 Advocacy Outside of the IOC Role

- a. IOC members can be personal advocates of clients/patients being served by the agencies subject to the licensure and ethical obligations of the IOC members' profession and state and federal law; however, the ability to serve on the IOC and represent a client/patient or guardian as an advocate does not entitle the IOC member to speak on matters pertaining to the client/patient.
- b. It is important to note the following when an IOC member becomes a personal client/patient advocate:
 - 1. The advocate role is separate from the role of an IOC member; therefore, the member must recuse themselves from any discussion, comments, or voting on all matters related to the specific client/patient represented. (see Section 5.3)
 - 2. Grievance and appeals filed by an IOC member acting as a client/patient advocate must clearly indicate that the member is acting as a client/patient advocate and not an IOC member by clearly stating they are acting in an advocacy capacity.
 - 3. IOC members shall not use their status as a member to influence the agency to provide services to their client/patient, including involvement in the grievance process. (see Section 5.3)
 - 4. Members must immediately identify when this type of conflict of interest exists to the IOC Chairperson and all other IOC members (see Sections 3.9-3.10 and 5.3).
- c. In the event that a client's record is needed by an IOC member who is acting as a personal advocate, an official Agency/Division Public Records request must be submitted to the appropriate Agency's Public Information Officer. (see Appendix N)

2.7 IOC Member Role in the Program Review Committee (DES only)

- a. IOC members are charged with the responsibility of reviewing the Behavior Plans (BP) to ensure that there are no potential violations of client's rights.
- b. In the event that an IOC member believes a BP violates client's rights, they will notate their recommendations to the agency and IOC members when applicable, using the approved agency form and provide it to the PRC Chairperson.
- c. In addition, one member from each DES IOC may attend the Program Review Committee (PRC) meeting held in their local

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Section 3: IOC Membership Guidelines

3.1 Member Application Process; Background Check Requirements

- a. Applicants for IOC membership shall apply using an application form authorized by the ADOA.

The application is located online at: <https://ioc.az.gov/independent-oversight-committee-ioc-application> (see *Appendix F*)

1. The application form is a fillable online form which will be sent directly to ADOA through the web portal.
 2. Individuals requiring assistance should contact the Agency Liaison or email ADOA at ioc@azdoa.gov for accommodations. (see *Section N for a contact list of Agency Liaisons*)
- b. Applicants must fully complete the application and attach a resume, along with any necessary credentials, when applicable, and email all documents to either the appropriate agency or to ioc@azdoa.gov (the document title should be as follows: *agency name_IOC name_first name_last name*).
 - c. Upon receipt of a complete applicant packet the Agency Liaison or ADOA will forward to the Chairperson of the appropriate IOC for which the applicant is applying for consideration.
 - d. ADOA advises agencies to conduct *background checks* for IOC applicants according to their programs and statutory authority where applicable. (see *Section 10.8*).

3.2 Member Appointment/Denial Process

- a. IOC members shall have the opportunity to review an applicant's information prior to a vote at a public meeting.
- b. Applicants shall have their application reviewed and voted on by the IOC within ninety (90) days of the submission of an application, and it is recommended that the applicant attended at least one (1) IOC meeting.
- c. Consistent with this program, and ensuring a quorum is present, the members shall vote to approve or disapprove the applicant and notify ADOA of its decision. (see *Section 5.1*) [A.R.S. §38-431]
- d. IOC's voting outcome may be communicated to the applicant by either the Agency or ADOA verbally or in writing. (see *Appendix J*)
- e. Applicants confirmed by the IOC members should be referred by the Chairperson to ADOA; the ADOA Director or Director's designee shall send one of the official IOC Member Appointment Letters or IOC Applicant Denial Letter to the applicant and copy the IOC Chairperson and the Agency Liaison. (see *Section 11.3 and Appendices G-I*)

3.3 Non-Voting Members

- a. In addition to appointed members, non-voting members and consultants may serve on the IOC in an advisory capacity. [A.R.S. §41-3804]
- b. These non-voting members at IOC meetings cannot not be counted for the purpose of determining a quorum. (*see Section 5.1 and Appendices G and R*)

3.4 Member Time Commitment & IOC Meeting Attendance

- a. Since most IOCs meet at least monthly, members of DES and DCS IOCs will typically need to commit to volunteering approximately two to three (2-3) hours per month; however, members of AHCCCS and DHS/ASH IOCs should anticipate an additional two-three (2-3) hours per month to be available for conducting site visits when needed. (*see Section 2.3*)
- b. The IOC Chairperson shall track member attendance at all meetings to ensure compliance of the IOC's guidelines and advise all members if/when there are any violations that might require removal consideration of a member due to non-participation. (*see Section 3.4*)

3.5 Removal of a Member

- a. Consistent with the IOC's guidelines, and ensuring a quorum is present, the members shall vote to remove any IOC member. [A.R.S. §41-3804]
- b. Upon removal of a member, the Chairperson will immediately notify the Agency Liaison in writing and copy ADOA. (*see section 3.5*)

3.6 Member Qualification - Change of Status

- a. Potential qualifying changes of status include any circumstances whereby the IOC member may change: 1) their voting status, or 2) their eligibility under State law to perform their duties as an IOC member. Examples include, but are not limited to: change in employment, employment with a state agency, moving out of state, arrest, indictment or conviction, revocation or suspension of licensure, etc.
- b. Upon any potential qualifying change of an IOC member's status, the member will immediately notify in writing the IOC Chairperson, the Agency Liaison, and copy ADOA.
- c. Any IOC member, an Agency Liaison, or an ADOA representative may request discussion, or possible action on the change, to be added to the agenda for the next IOC meeting.
- d. A change in status may not necessarily require the IOC member to resign their position.

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3.7 Member Change of Address

- a. The member is to notify the IOC Chairperson of any change of address.
- b. The IOC Chairperson will notify the Agency Liaison in writing and copy ADOA upon notification of a member's change of address.

3.8 Electing IOC Leadership

- a. Consistent with the IOC's guidelines, and ensuring a quorum is present, the members shall vote to elect a Chairperson and any other leadership positions; a Vice Chairperson or Co-Chair leadership position is highly recommended for all IOCs. (see Section 5.1)
- b. All Chairpersons and other leadership positions shall be voted on annually.
- c. Upon election of the new Chairperson and/or other leadership position/s the Chairperson will immediately notify the Agency Liaison in writing and copy ADOA.

3.9 Chairperson Responsibilities

- a. Ensure the IOC's Guidelines are created, adopted via a vote of a quorum of members, and approved by ADOA. (see Sections 2.1, 2.2, 5.1, and 11.3) [A.R.S. §41-3804]
- b. Abide by the IOC's Guidelines and all related statutes/rules. (see Sections 1.1, 2.1 and 2.2)
- c. Identify and share the annual IOC meeting schedule (e.g. location, dates and times), and advise members, the Agency and ADOA when there are any changes. (see Section 5.1 and Appendix O) [A.R.S. §38-431]
- d. Ensure IOC meetings abide by the Open Meeting Law. (see Section 5.1 and Appendix T) [ARS §38-431]
- e. Facilitate the identification, discussion, and ranking of issues with members at meetings.
- f. Notify the Agency Liaison and ADOA immediately upon a change in any IOC member status. (see Sections 3.5, 3.6, and 3.8)
- g. Work with members, the Agency Liaison and ADOA to identify/recruit new IOC members as needed. [A.R.S. §41-3804]
- h. Create IOC meeting agendas and forward to the Agency Liaison and copy ADOA within five (5) days of the meeting to ensure the timely posting on the appropriate IOC Public Meeting notices webpage: <https://ioc.az.gov/> and on the board located at 100 North 15th Avenue, Phoenix, AZ 85007. (see Sections 5.1, 5.3, 5.6, and Appendix Q) [A.R.S. §38-431]

- i. Circulate agenda to IOC members, other agency staff, and contracted providers.
- j. Track and monitor member attendance and participation. (*see Section 3.4*)
- k. Ensure appropriate electronic communications and meeting discussions meet all Open Meeting Laws, and the IOC and ADOA guidelines. (*see Sections 5.1, 5.7 and Appendix T*) [A.R.S. §38-431]
- l. Identify when a conflict of interest exists and abstain from discussions, comments, and voting on any related matters. (*see Section 5.3*) [A.R.S. §38-503]
- m. Review incidents of possible abuse, neglect or denial of a client's rights. (*see Section 2.1*) [A.R.S. §41-3804 & AAC: R9-21-105]
- n. Conduct site visits as needed (AHCCCS & DHS/ASH IOCs only). (*see Section 2.4*) [A.A.C. R9-21-105 (H)]
- o. Ensure that formal recommendations are sent to the Agency Director/s and the legislature regarding laws, rules, policies, procedures and practices to ensure the protection of the rights of clients receiving behavioral health and developmental disability services and copy ADOA. (*see Section 8.1 and Appendix W*) [A.R.S. §41-3804]
- p. Ensure the submittal of written objections to specific problems or violations of client rights by Agency/Department employees or service providers to the Agency Director/s for review and copy ADOA. (*see Section 8.2 and Appendix X*) [A.R.S. §41-3804]
- q. Attend all required training and assist Agency Liaisons and ADOA in identifying any additional or remedial training needed for IOC members. (*see Section 4*) [A.R.S. §41-3804]
- r. Issue an annual report of the IOC's activities and recommendations for changes to the ADOA Director, President of the Senate, Speaker of the House of Representatives, Chairpersons of the Senate Health and Human Services Committee, and the House of Representatives Health Committee, or their successor committees. (*see Section 9.2 and Appendix U*) [A.R.S. §41-3804]
- s. Ensure/maintain confidentiality of all client information/records. (*see Section 7.1*) [A.R.S. §41-3804 & §36-509].

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3.10 Member Responsibilities

- a. Abide by the IOC's Guidelines and all related statutes/rules. (*see Section 1.1*) [A.R.S. §41-3804]
- b. Review agenda and all related materials prior to attending a meeting.
- c. Attend and actively participate in all IOC meetings and Executive Sessions; notify Chairperson in advance when unable to attend. (*see Section 3.3*)
- d. Assist in the identification and recruitment of new members. [A.R.S. §41-3804]
- e. Provide recommendations for agenda topics when needed.
- f. Review incidents of possible abuse, neglect or denial of a client's rights. (*see Section 2.1*)
- g. Conduct site visits as needed. (*see Section 2.3*). [A.R.S. §41-3804]
- h. Assist as needed in developing recommendations and/or written objections to specific problems or violations of client's rights. (*see Sections 8.1-8.2 and Appendices W & X*) [A.R.S. §41-3804]
- i. Identify when a conflict of interest exists and abstain from discussions, comments, and voting on any related matters. (*see Section 5.3*) [A.R.S. §38-503]
- j. Attend all required trainings. (*see Section 4*) [A.R.S. §41-3804]
- k. Ensure/maintain confidentiality of all client information/records. (*see Section 7.1*) [A.R.S. §41-3804 & §36-509]

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Section 4: Training Standards and Requirements

4.1 Training Standards

- a. The Agency Liaisons shall develop and coordinate with ADOA an education/training program statewide for all IOC members to facilitate their role as members; this manual is part of the training program. [A.R.S. §41-3804 & A.A.C. R9-21-105.L.]
- b. Education/training programs will include the development and delivery of initial and ongoing (maintenance) training needs of members, including any remedial (post-incident/follow-up) training identified. (see Section 4.3)
- c. All IOC members are required to participate in these trainings and may not conduct a site visit until all necessary training has been completed (e.g. OML, HIPAA, etc).

4.2 Orientation: Required Initial Training

- a. All new IOC members will be required to attend an initial training/orientation to ensure understanding of all related statutes, rules and member guidelines.
- b. The Agency Liaisons, in coordination with ADOA, along with the IOC Chairpersons, will assist in conducting these trainings with new IOC members.
- c. When a new member is appointed they shall complete all required training within ninety (90) days.

4.3 Remedial Training

- a. Remedial training may be required for any IOC member identified as in noncompliance with IOC guidelines by the Chairperson or Agency Liaison, in coordination with ADOA.
- b. Remedial training is the reassignment of any applicable introductory courses for new IOC members.

4.4 Request for Training

- a. IOCs can make a request to an Agency Liaison if they are in need of specific training for its members (e.g. systems, policies, processes, etc.).
- b. The IOC will need to make the request in writing to the Agency Liaison and copy ADOA.
- c. The agency, to the fullest extent possible, will provide training to the IOC members within thirty days upon receipt of the written request. (see Section 10.13)

4.5 Statewide Training

- a. At least every two (2) years, the Agency Liaisons, in coordination with ADOA, will work with all IOC members to identify any training needed. [A.R.S. §41-3804]
- b. The Agencies/ADOA will, to the fullest extent possible, coordinate any training offerings with the schedule of IOC members, including making trainings available online or in-person.

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Section 5: IOC Meeting Guidelines

5.1 General Open Meeting Law Requirements

a. The Arizona Open Meeting Law [A.R.S. §38-431] All members must follow, which includes, but is not limited to:

1. All regular meetings shall be open to the public.
2. Agenda, along with time allowing for an “open call to the public” (if applicable), must be posted within twenty-four (24) hours prior to the meeting.
3. Remote conferencing is allowed; however, the remote conferencing number and related instructions must be included on the public agenda that is posted. (see Section 5.4 and Appendix Q)
4. Audio recordings are required. In the event of a technical difficulty, that prevents all or part of the meeting from being recorded, written minutes are required.
5. Recordings and/or minutes required must be available for public inspection within three (3) business days after the meeting.
6. A quorum is defined by a “majority of members” participating in the meeting, either in person or remote call-ins. (see Section 5.6(c) for specific IOC quorum requirements)
7. An Executive Session can be scheduled upon a majority vote of a quorum, and requires the following:
 - i. An agenda, with a “general description of the matters to be considered” must be posted within twenty-four (24) hours prior to the session.
 - ii. Minutes are required to be taken/recorded and are considered confidential except from: members, officers, appointees or employees who were the subject of the discussion, or auditor general upon a request by the attorney general when investigating any alleged violation.
8. Meetings held in violation of these laws will be considered null and void unless exceptions are found through the ratification process.

5.2 Meeting Cadence & Basic Principles

OCs are required to meet at least quarterly each calendar year. (see Section 2.1) [A.R.S. §41-3804]

b. Some basic meeting principles² for IOCs to consider using include the following:

- Ensure a quorum of the minimum number of IOC members are present, which is always no less than four (4) voting members (see Sections 5.6(c) for specific IOC quorum requirements)
- Follow the agenda and stay on topic; any new topic items will need to be added to the next meeting agenda
- Encourage all members to participate
- Keep discussions factual
- Always strive to move discussions towards a conclusion
- Ensure differences of opinion are respected and look for common ground
- Repeat motions before voting, and ensure the motion is specific, concise and clear
- Summarize the vote for the record

c. In addition, the IOC Chairpersons/members should review Appendix T: “Tips on Conducting IOC Meetings According to Open Meeting Law”

d. It is recommended that the IOC Chairperson send an email reminder to all members confirming the meeting is scheduled and the agenda is posted for their review.

5.3 Conflict of Interest and Recusal

a. A.R.S. Title 38, Chapter 3, Article 8, relating to conflict of interest, applies to all committee members.

b. Identify to the IOC Chairperson and other members when a conflict of interest exists, and abstain from discussions, comments and voting on any related matters. (see Sections 2.6, 3.9-3.10) [A.R.S. §38-503]

2. IOCs should consider using the following basic meeting principles adapted from Robert’s Rules of Order

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5.4 Agenda Setting

- a. It is the role of the IOC Chairperson to create agendas and send to the Agency Liaison and copy ADOA at least five (5) days prior to the meeting date to allow for sufficient time to be posted on the appropriate IOC Public Meeting notice webpage found at <https://ioc.az.gov> and on the board located at 100 North 15th Avenue, Phoenix, AZ 85007, within the twenty-four (24) hour public meeting law requirement. (see Sections 3.8. 5.1, 10.1 and 11.3)
- b. All meeting agendas must include: 1) Americans with Disabilities Act (ADA) disclaimer statement, 2) executive session disclaimer statement 3) call-in information, 4) meeting location, 5) date, 6) time of the meeting, and 7) agenda items. (see Appendix Q for an example)
- c. IOC Regular meeting agendas are required to be posted twenty-four (24) hours prior to the meeting by law. (see Section 5.1) [A.R.S. §38-431]
- d. IOC Executive Session meeting agendas are required to only include a general description of the matters to be considered and must be posted within twenty-four (24) hours prior to the session. (see Sections 5.1 and 5.7) [A.R.S. §38-431]
- e. Agenda items should not have times associated with them; however, if a time is provided for a specific agenda item it shall only be discussed at the time specified on the agenda.
- f. Items/topics not on the published agenda cannot be discussed; and are required to be deferred until the item/topic is added to a subsequent meeting agenda. (see Section 5.1 and Appendix T)



5.5 Meeting Minutes Requirements

- a. Regular IOC meeting minutes are required to be taken/recorded and available for public inspection within three (3) business days after the meeting.
- b. All IOC meeting minutes will be made available to the public upon request, or posted by the applicable Agency Liaison, on the IOC website (<https://ioc.az.gov/>) within the three (3) business day requirement. (see Sections 5.1 and 10.1) [A.R.S. §38-431]
- c. Written meeting minutes may need to be reviewed by members at the following meeting, stating any corrections when needed.
- d. Executive Session meeting minutes are required to be taken and kept confidential. (see Sections 5.1 and 5.7) [A.R.S. §38-431]
- e. All meeting minutes must contain the following information:
 1. The date, time and place of the meeting,
 2. The members of the IOC recorded as either present or absent,
 3. A general description of the matters [discussed or] considered even if no formal action is taken,
 4. An accurate description of all actions proposed, discussed or taken, including a record of how each member voted noting abstentions, recusals or those otherwise not voting; best practice includes roll call votes in some circumstances. (see Section 5.1 and Appendix S) [A.R.S. §38-431, Arizona Agency Handbook, Chapter 7.8.2³]
- f. It is recommended that IOCs use the “IOC Meeting Other Attendees/Guest Sign In Sheet” and “IOC Meeting Minutes & Action Items” templates as guides. (see Appendices R-S)

5.6 Specific IOC Quorum & Voting Requirements

- g. A quorum is required for the IOC members to vote on any matter. (*see Section 5.1*) [A.R.S. §38-431]
- h. All voted upon matters will require the IOC Chairperson/member to clearly “*state for the record*” the actual motion; take an official vote, which includes remote call-in members; and identify the names of any opposing members so that the final outcome of the decision becomes a part of the formal meeting minutes.
- i. By statute, each IOC requires seven (7) to fifteen (15) members; therefore, a quorum for an IOC is the total number of voting members, divided by two, plus one (# of voting members/2 + 1 = IOC quorum); thus, the **minimum** quorum requirement for an official IOC vote is no less than four (4) members. (*See Sections 1.2, 5.1(6) and 5.2(b)*) [A.R.S. §38-431 and A.R.S. §41-3801-3804]

3. Background checks may vary dependent upon an Agency’s policy, processes and statutory authority.

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5.7 Executive Session Requirements

- a. Executive Sessions can only be entered into if the following requirements are met: 1) if the potential reason to go into executive session is stated on an agenda, 2) upon a motion, second, and a majority vote of a quorum and 3) only for the purposes outlined in A.R.S. §38-431.03(A) (*see Sections 5.1, 5.6, Appendix T*)
- b. Agendas need to include a general description of the matters to be considered and must be posted within twenty-four (24) hours prior to the session. (*see Sections 5.1 and 5.3*) [A.R.S. §38-431]
- c. Executive Session shall not be listed on the regular agenda unless known in advance. (*See requirements in Part a. of this Section 5.7 and Section 5.4*)
- d. Executive Session minutes are required to be recorded or written. (*see Sections 5.1 and 5.5*) [A.R.S. §38-431]
- e. The IOC shall come out of Executive Session to vote on any matter or take any action. [A.R.S. §38-431]
- f. The details of the discussions in Executive Sessions (including any name or information shared by members) shall not be discussed.
- g. No ADOA staff person, or Agency Liaison, shall participate in the discussions during Executive Sessions except to provide administrative consultation directly related to OC procedural matters.

5.8 IOC Electronic Communications

- a. According to the Open Meeting Laws [A.R.S. §38-431], IOC meetings can occur through:
 1. A one-way electronic communication by one member of an IOC that is sent to a quorum of the members of the IOC.
 2. An exchange of electronic communications among a quorum of the members of the IOC that involves a discussion, deliberation or the taking of legal action by the IOC, and/or concerning a matter likely to come before the IOC for action.
- b. IOC members should use the “BCC” option when communicating via email, unless the communication pertains to an agenda, announcement, or general information (i.e. anything that doesn’t propose legal action) to pass along to a quorum of the IOC.

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Section 6: IOC General Information Requests and Consultant Services

6.1 Informational Questions Related to Agency/Division Policy or Program

- a. When the IOC has questions about any agency/division policies or programs they need to make a formal written and specific request upon the vote of a majority to the Agency Liaison in writing and copy ADOA. [A.R.S. §41-3804]
- b. It is the responsibility of the liaison/representative to research related policy and programs as requested by the IOC. (*see Section 10.3*)

6.2 Request for Agency/Division Representative or Consultant Services

- a. An IOC may request from the agency the services of a consultant or an agency department or provider employee to advise it on specific issues. [A.R.S. §41-3804]
- b. The consultant may be a member of another IOC, an agency department employee or a service provider.
- c. Subject to the availability of monies, the Agency/Division shall assume the cost of the consultant and the consultant shall not participate in any IOC votes. [A.R.S. §41-3804]
- d. These requests shall be made by the IOC Chairperson in writing to the appropriate Agency Liaison upon a majority vote and copy ADOA on the request.

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Section 7: IOC Request for Client Information/Records, Confidentiality & Grievance Process

7.1 Client Information/ Records & Confidentiality

- a. Subject to federal law, an IOC and its consultants may have access to client information and records, including quality of care reports, case presentations, adult protective services investigation case status and outcomes, substantiations, recommendations and other quality of care findings from peer reviews or any successor report or process, maintained by the department, provider or regional behavioral health authorities to the extent necessary to conduct its duties. [A.R.S. §41-3804 and §36-509]
- b. Each person who receives information or records shall maintain the information or records as confidential and *sign an agreement to comply with all confidentiality requirements*; any violation of this is a Class 2 misdemeanor. (*see Appendix P*) [A.R.S. §41-3804]
- c. Any client information or records shall be released to the IOC without personally identifiable information¹ (PPI) or protected health information⁴ (PHI)⁵ unless it is required for the official purposes of the IOC [A.R.S. §41-3804 & §36-509]
- d. Confidential information (PII/PHI) can only be discussed by members while in Executive Session. (*see Section 5.7 and Appendix T*)

7.2 Client Information and Records Request Process

- a. When the IOC is requesting copies of client/patient records from any agency/division they need to make a formal written and specific request upon a majority vote of a quorum, to the Agency Liaison in writing and copy ADOA. (*see Sections 7.1, 10.3, 10.6 & Appendices A-E*) [A.R.S. §41-3804]
- b. Client/Patient Initiated Complaint:
 - c. In instances of a client/patient initiated complaint, where a response is requested from the agency or a provider, a signed HIPAA and/or a Consent release is required prior to the receipt of or disclosure of any client/patient information. (*see Sections 7.1-7.3, 10.3, 10.6 & Appendices A-E*)
 - d. It is the responsibility of the Agency Liaison to notify the IOC Chairperson when a HIPAA/Consent release is required. (*See Section 10.6*)
- e. Review and Inspection of Client Records:

4. Personally identifiable information (PII) includes, but is not limited to: a person's name, address, date of birth, social security number, tribal enrollment number, telephone or fax number, email address, social media identifier, driver's license number, places of employment, school identification or military identification number or any other distinguishing characteristic that tends to identify a particular person

5. Protected health information (PHI) includes, but is not limited to: names, geographical identifiers, dates other than year (including birth, admittance, discharge, and death), phone/fax numbers, email addresses, social security numbers, medical record numbers, health insurance beneficiary numbers, account numbers, certificate/license numbers, vehicle identifiers and serial numbers, including license plate numbers, device identifiers and serial numbers, web Uniform Resource Locators (URLs), Internet Protocol (IP) address numbers, biometric identifiers (including finger, retinal and voice prints), full face photographic images and any comparable images, any other unique identifying number, characteristic, or code except the unique code assigned by the investigator to code the data, plus any other medical information contained within the clients' reports/records

1. IOC members and designated consultants shall have access to client/patient records according to A.R.S. §36-509(A)(11), 41-3804(I) and A.A.C R9-21-105(J). (*See Section 7.1*)
 2. Members may also request unredacted information, when necessary, to perform the functions of their role. (*See Section 7.1*) [A.R.S. §41-3804 & ARS §36-509]
- f. It is the responsibility of the Agency Liaison to obtain the related records requested by the IOC. (*7.1-7.3, 10.3, 10.6*)
- g. The Agency Liaison will respond to the records request as follows:
1. If approved, the requested records will be forwarded to the IOC and copy ADOA, ensuring appropriate *confidentiality agreements* have been signed by IOC members. (*see Sections 7.1 and Appendix P*) [A.R.S. §41-3804 & §36-509]
 2. If denied, the Agency/Division (or contracted organization) shall list the specific reasons for denial in writing and send to the IOC Chairperson and copy the ADOA Director. (*see Section 7.4*) [A.R.S. §41-3804]

7.3 Agency-Specific Records Request Processes

- a. For DCS records request, complete the **Department of Child Safety Records Request form CSO-1036A** (<https://dcs.az.gov/sites/default/files/CSO-1036A.doc>) with as much information as possible. Send the form to the assigned IOC Agency Liaison. The liaison/representative will send it to the appropriate contact. The liaison/representative will provide a statement within three (3) days indicating that the records request has been submitted and tracked until a response is received. (*see Appendix A*)
- b. For DES Adult Protective Services (APS) records request, complete the attached **APS Custodian of Records form AAA-1301A FORFF** (<https://des.az.gov/sites/default/files/dl/AAA-1301A.pdf>) with as much information as possible. Send the form to the assigned IOC Agency Liaison. The liaison/representative will send it to the appropriate contact. The liaison/representative will provide a statement within three days that the records request has been submitted and track it until a response is received. (*see Appendix B*)
- c. For DDD records request, complete the **DES/DDD Authorization for Release of Information** form (<https://des.az.gov/sites/default/files/legacy/dl/DD-524-FF.pdf>) with as much information as possible. Send the form to the assigned IOC Agency Liaison. The liaison/representative will send it to the appropriate contact. The liaison/representative will provide a statement within three (3) days indicating that the records request has been submitted and tracked until a response is received. (*see Appendix C*)
- d. For AHCCCS records request, complete the **Authorization to Disclose Protected Health Information** form (<https://www.azahcccs.gov/Members/Downloads/privacy/OLAHIPFORM04Auth4AHCCCSdisclosePHI.pdf>) with as much information as possible. Send the form to the assigned IOC Agency Liaison. The liaison/representative will send it to the appropriate contact. The liaison/representative will provide a statement within three (3) days indicating that the records request has been submitted and tracked until a response is received. (*see Appendix D*)

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e. For DHS/ASH records request, complete the **DHS/ASH to Use or Disclose Protected Health Information** form (<https://azdhs.gov/documents/az-state-hospital/authorization-phi.pdf>) with as much information as possible. Send the form to the assigned IOC Agency Liaison. The liaison/representative will send it to the appropriate contact. The liaison/representative will provide a statement within three (3) days indicating that the records request has been submitted and tracked until a response is received. (see *Appendix E*)

7.4 Review of Denial of a Request for Information or Records

- a. When a denial for a request for information or records is received, the IOC can make a motion, ensuring a quorum is present, to request in writing that the Agency Director or designee review the decision.
- b. The Agency Director or the director's designee shall conduct the review within five (5) business days after receiving the request for review; and provide a final decision to the IOC, copying ADOA on the response. [A.R.S. §41-3804]
- c. A final agency decision is subject to judicial review, pursuant to Title 12, Chapter 7, Article 6, and the department shall not release any information or records during the period an appeal may be filed or is pending. [A.R.S. §41-3804 and §12-901 through 12-914]

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Section 8: IOC Formal Recommendations & Objections to Problems/ Violations of Client Rights

8.1 Formal Recommendations

- a. Formal recommendations may be made to an Agency Director and/or the legislature regarding laws, rules, policies, procedures and practices to ensure the protection of the rights of clients receiving behavioral health and developmental disability services ***upon the majority vote of a quorum.*** (see Section 5.1). [A.R.S. §41-3804 and A.R.S. §38-431]
- b. The IOC shall clearly state for the record the specific recommendation/s and all related laws, rules, policies, procedures and/or practices involved. (see Section 5.5) [A.R.S. §38-431]
- c. The IOC shall send a letter, or use the ADOA template, detailing their recommendation/s to the Agency Director and copy the Agency Liaison and ADOA. (see Appendix W)
- d. If a response is requested, the Agency Director or the Agency Liaison will follow up as necessary.

8.2 Formal Objections to Specific Problems or Client Rights Violations

- a. IOCs shall submit written objections to specific problems or violations of client rights by department employees or service providers to the Agency Director and copy the Agency Liaison and ADOA, ***upon the majority vote of a quorum.*** (see Section 5.1) [A.R.S. §41-3804.F & A.R.S. §38-431]
- b. The IOC shall clearly state for the record the objection to specific problems or violations of clients rights. (see Section 5.5) [A.R.S. §38-431]
- c. The IOC shall send a letter, or use the ADOA template, detailing their objection to specific problems and/or violation/s of client's rights to the related Agency Director and copy the Agency Liaison and ADOA. (see Appendix X)
- d. Upon receipt of the IOC's written objections or violations the Agency Director shall respond within twenty-one (21) days and copy ADOA. [A.R.S. §41-3804]

8.3 Complaint Escalation and Grievances

- a. When members of the public raise concerns regarding potential grievances with an agency; or one of its contracted providers, the IOC members should advise the individual to first follow the appropriate agency specific complaint and/or problem escalation process. [AR.S. § 41-1092.06]
- b. If the member of the public is unable to follow the complaint and/or escalation processes, the IOC will contact the Agency Liaison and request them to provide assistance to the individual.

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Section 9: IOC Reporting Requirements

9.1 Annual Report Requirements

Each IOC shall issue an annual report of its activities and recommendations for changes to the ADOA Director, President of the Senate, Speaker of the House of Representatives, Chairpersons of the Senate Health and Human Services Committee, and the House of Representatives Health Committee, or their successor committees. [A.R.S. §41-3804]

a. At minimum, the annual report should include the following information:

1. Cover letter (*see Appendix U*)
2. IOC member names and membership status, include voting and non-voting members, (*see Sections 1.2, 3.2 and 3.3*)
3. Number of IOC meetings conducted, (*see Sections 2.1 and 5.2*)
4. Trend data on incident reports, (*see Section 2.3*)
5. Number of site visits conducted as applicable and a summary of findings, (*see Section 2.4*)
6. Exchange of information and public awareness activities, (*see Section 2.5*)
7. Number of IOC members who have attended training including courses taken, (*see Section 4*)
8. Requests for information and/or consultant services, (*see Sections 6.1 and 6.2*)
9. Policy/program recommendations, (*see Section 8.1*)
10. Objections to specific problems or violations of clients rights, (*see Section 8.2*)
11. Any other relevant activities conducted by the IOC throughout the year. [A.R.S. §41-3804]

b. Other items which may appear in the report; include, but are not limited to:

1. Timeliness of agency deliverables defined in statute
2. Timeliness of responses to complaints as defined in statute
3. Count of complaints with and without responses (percent to resolution)
4. Grade rating for the completeness of Agency responses (i.e. 5=favorably resolved, 4=Resolved into perpetuity, 3=Responded with explanation either favorable or unfavorable, 2=Response insufficient, 1= No Agency Response).

9.2 Annual Report Submittal Process & Timeline

- a. The annual report is due to ADOA on *November 1st* and should follow the standard fiscal year of July 1st - June 30th.
- b. It is recommended that the IOC members begin to develop the content at least three (3) months prior to the due date to ensure sufficient time for the members to review a draft and vote on a *final* report prior to the November 1st deadline.
- c. Each committee shall issue an annual report of its activities and recommendations for changes, if any, to the Director of the Department of Administration, the Director of the Department of Economic Security, the Director, the Director of the Department of Child Safety, the Director of the Department of Health Services, the Director of the Arizona Health Care Cost Containment System, the President of the Senate, the Speaker of the House of Representatives and the Chairpersons of the Senate Health and Human Services Committee and the House of Representatives Health and Human Services Committee, or their successor committees. The Department of Administration shall post on the Department's website a copy of the agenda of each committee's meeting and copy of the annual report that is required by this section. (*see Section 2.1*)

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Section 10: Agency/Division Guidelines

10.1 Agency Roles and Responsibilities

- a. All agencies shall appoint an IOC *Agency Liaison*, who shall be responsible for the following:
 1. Reserve meeting space, set up room when needed, and obtain security if necessary.
 2. Receive meeting agenda from IOC Chairperson and ensure the posting on the appropriate IOC Public Meetings website page located at <https://ioc.az.gov/> within twenty-four (24) hours of the meeting to comply with the Open Meeting Law. (*See Sections 3.9, 5.1 and 5.4*) [A.R.S. § 38-431]
 3. Circulate agenda to IOC members, other agency staff, contracted providers as needed and copy ADOA.
 4. Secure and share with IOC Chairperson a call-in conference line for all IOC meetings.
 5. Ensure audio recordings or written meeting minutes are taken and either made available for public inspection, or posted on the appropriate IOC website page located at ioc@azdoa.gov within three (3) business days to comply with the Open Meeting Law. (*see Section 5.5*) [A.R.S. § 38-431]
 6. Assist in the recruitment of new IOC members and track/monitor IOC membership to ensure the statutorily required types of members are maintained. (*see Section 1.2*) [A.R.S. § 41-3801 - 3804]
 7. Ensure IOC member applicants complete the standard IOC Member Application form when needed. (*see Section 3.1 and Appendix F*)
 8. Review/distribute applicant packets to the IOC Chairpersons, copying ADOA when needed. (*see Sections 3.1-3.2*)
 9. Draft an appropriate IOC Member appointment and/or denial letters and send to ADOA at ioc@azdoa.gov to approve/sign upon the IOC majority vote recommendations. (*see Section 3.1-3.2, and Appendices G-H*)
 10. Coordinate with ADOA to ensure IOC members have an IOC Member Identification Badge. (*see Section 11.3 and Appendix V*)
 11. Accept IOC member resignations from Chairpersons, notify ADOA in writing, and ensure the appropriate member removal process is followed. (*see Sections 3.5-3.6*) [A.R.S. § 41-3804]
 12. Obtain responses to all written requests on questions raised by the IOC. (*see Sections 6.1-6.2 and 10.6*)
 13. Forward all related Incident Reports and report any trends to the IOC members and copy ADOA. (*see Sections 2.1, 2.3 and 10.5*)

14. Ensure **requested** individuals are present at an IOC meeting to address specific questions or concerns related to Incident Reports, Behavior Plans, and Program/Policy. (*see Sections 6.2 and 10.4*)
15. Follow up on policy/program recommendations to ensure timely responses to the IOC. (*see Sections 8 and 10.6*)
16. Respond to requests for agency provided training for IOC members and work with ADOA to coordinate any other training as needed. (*see Sections 4, 10.13 and 11.3*)
17. Follow up/respond to any other IOC member requests made.
18. Secure quarterly updates on IOC activities and assist as needed in the development of the IOC Annual Report. (*see Section 9*) [A.R.S. § 41-3804]
- b. Conduct background checks on IOC members in accordance with Agency authority. (*see Section 10.8*)
- c. Respond to complaints originated by a client/patient receiving services or an assigned guardian. (*see Section 10.11*)
- d. Respond to complaints originated by an IOC member or other public member. (*see Section 10.12*)

10.2 Agency/Division Representation at IOC Meetings

- a. Employees of the Department of Economic Security (DES), Department of Child Safety (DCS), Arizona Health Care Cost Containment System (AHCCCS), and Department of Health Services/Arizona State Hospital (DHS/ASH) and other subject-matter experts may serve on a committee only as **non-voting** members. [A.R.S. §41-3804 & A.A.C. R9-21-105]
- b. Presences of any of these individuals are also **not counted** for the purpose of determining a quorum. [A.R.S. §41-3804]

10.3 Responding to IOC Information Requests

- a. The agency shall develop, follow and ensure compliance with written redaction standards specifically for all information provided to the IOCs; no other standard may be substituted.
- b. When an IOC has questions about any agency/division policy or program they will make a formal written and specific request to the Agency Liaison in writing and copy ADOA. (*see Section 6.1*). [A.R.S. §41-3804]
- c. Upon receipt of a written request for information the Agency Liaison is required to research the related policy/program respond in writing to the IOC and copy ADOA. (*see Section 6.1*)

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10.4 Appearing Before the IOC (Consultants, Agency Employees, and Contracted Providers)

- a. On occasion an IOC may request the scheduling of a consultant, member of another IOC, an agency department employee or a contracted service provider to attend an upcoming meeting to address specific questions or concerns related to Incident Reports, Behavior Treatment Plans, and Programs/Policies. [A.R.S. §41-3804]
- b. Upon receipt of the written request the Agency Liaisons shall coordinate and ensure that all requested staff are present at the next scheduled IOC meeting, subject to staffing availability. (*see Section 6.2*)

10.5 Incident Reports, Review, and Feedback

- a. **AHCCCS Reports:** The Office of Human Rights shall promptly distribute to all appropriate IOCs copies of all reports received according to this Chapter (e.g., reports regarding clients who need special assistance, allegations of mistreatment, denial of rights, restraint, and seclusion). [A.A.C. R9-21-104(G)]
- b. Upon receipt of a written request for additional information on incident reports or related trends; the Agency Liaison shall provide a timely response to the request from the members as outlined within this manual. (*See Sections 10.3 and 10.5*)

10.6 Responding to IOC Client Information and Records Requests

- a. When an IOC is requesting copies of client/patient records from any agency/division, they must make a formal written and specific request to the Agency Liaison in writing and copy ADOA. [A.R.S. §41-3804]
- b. IOC members may request unredacted information, when necessary, to perform the functions of their role. (*see Section 7*) [A.R.S. §41-3804 and §36-509]
- c. In some instances, the agency providing services may require a signed HIPAA and/or a consent release prior to the receipt of or disclosure of any client information and it is the responsibility of the Agency Liaison to advise the IOC when needed. (*see Section 7.3*)
- d. It is the responsibility of the Agency Liaison to obtain the related records requested by the IOC and to respond to the records request as follows:
- e. If approved, the requested records will be forward to the IOC and copy ADOA, ensuring appropriate confidentiality (*see Sections 7.1*) [A.R.S. §41-3804 and §36-509]
- f. If the Agency/Division (or contracted organization) has objections to the records request, the specific reasons for denial must be clearly stated in writing and sent to the IOC Chairperson and copy ADOA. (*see Section 7.4*) [A.R.S. §41-3804]

10.7 Denial of a Request for Information or Records

- a. When a denial for a request for information or records is received, the IOC may request in writing that the Agency Director or Designee review the decision.
- b. The Agency Director or the Director's Designee shall conduct the review within five (5) business days after receiving the request for review.
- c. A final agency decision is subject to judicial review, pursuant to Title 12, Chapter 7, Article 6, and the department shall not release any information or records during the period an appeal may be filed or is pending. [A.R.S. §41-3804 and §12-901 through 12-914]

10.8 IOC Member Background Checks

- a. Agencies need to ensure appropriate⁶ background checks are conducted on new IOC applicants. (*see Section 3.1*)
- b. These may only occur according to the Agency's/Program and statutory authority where applicable.

10.9 Policy/Program Recommendations

- a. Formal recommendations may be made by IOCs to Agencies/Divisions regarding laws, rules, policies, procedures and practices to ensure the protection of the rights of members receiving services. [A.R.S. §41-3804]
- b. Upon receipt of a formal/written request the Agency Liaison shall follow up and prepare a response when necessary. (*see Section 8.1*)
- c. Recommendations may also be made directly to an Agency Director or the legislature as well after notification to ADOA; in these instances the IOC Chairperson may directly contact these individuals or include their recommendations in their annual report, so they may be reviewed. (*see Sections 2.1 and 9*) [A.R.S. §41-3804]

10.10 Objections, Problems and Client Rights Violations

- a. IOCs may submit written objections to specific problems or violations of client rights to the Director of the agency providing the services. (*see Section 8.2*) [A.R.S. §41-3804]
- b. The Director of the agency shall respond in writing to the IOC within twenty-one (21) days after receiving the written objections. [A.R.S. §41-3804]

6. Background checks may vary dependent upon an Agency's policy, processes and statutory authority.

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10.11 Complaints Originated by a Client/Patient Receiving Services or a Guardian

- a. A client/patient receiving services, or their guardian, who appears before an IOC and requests their case be reviewed may be obligated to sign, or have their guardian sign, documentation to satisfy federal or agency requirements regarding the protection of Personally Identifiable Information (PII) and/or Protected Health Information (PHI) prior to the processing of the complaint by the agency. The agency is required to provide all necessary forms to the IOC that are required to process the complaint within two (2) business days of receiving the complaint in writing. (*see Sections 7.1-7.3*) [A.R.S. § 36-509]
- b. All signed necessary forms/releases should be provided with the complaint in writing by the IOC.
 1. Similarly, if any additional forms are needed to process the complaint the agency is responsible for responding to the IOC in writing prior to the next IOC meeting.
 2. If there are perceived delays in processing the IOC's request, then the agency shall provide the estimated timeframe in which they will be able to respond to the request on or before the next public meeting.

10.12 Complaints Originated by an IOC Member or Other Individual

- a. For all matters discussed by IOC members or other individuals without the presence of the client/patient receiving services and/or their guardian, patient confidentiality (PII/PHI) shall be maintained. (*see Section 7.1*) [A.R.S. § 36-509]
- b. If the IOC decides to hear a matter without the knowledge of the client/patient receiving services or their guardian, no PII/PHI can be discussed without first entering into Executive Session (*see Sections 5.7, and 7.1-7.3*). [A.R.S. § 36-509 and A.R.S. § 38-431]

10.13 IOC Requests for Agency Specific Training

- a. Agencies are responsible for providing training on their related systems, processes, etc. within thirty (30) days upon receipt of a request from IOC members.
- b. The agency is responsible for providing the necessary components to train members, including covering any costs associated with the delivery of the training, and bringing all necessary materials, required equipment, etc. in a method of the agency's choice, provided the selection is sufficient for IOC members to demonstrate familiarization of the system, processes, etc. upon completion of the training.
- c. It is recommended that the demonstration of familiarization be assessed post-training through the use of a survey, testing process, etc. to ensure members gained sufficient knowledge/competency.

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Section 11: ADOA Role

11.1 Legislative Guidelines

- a. The Arizona State Legislature in 2018 passed Senate Bill 1450, which amended A.R.S. §41-3801, 41-3802, 41-3803 and 41-3804.
- b. The legislative changes renamed the Human Rights Committees to *Independent Oversight Committees* and transferred these from the various agencies to the Arizona Department of Administration (ADOA).
- c. The transfer was a zero fund assignment with a zero budgetary impact forecasted by the agencies.

11.2 ADOA Background

- a. The ADOA consists of eight (8) divisions, none of which involve the direct oversight or supervision of the delivery of health, disabilities, or child, youth and family services.
- b. The nature of the IOC is such that ADOA does not have the in-house expertise to advise the members on matters related to the Arizona Health Care Cost Containment System, Department of Health Services, Department of Child Safety, or the Department of Economic Security.

11.3 ADOA Responsibilities

- a. Review all IOC and related Agency/Division structures and establish a statewide framework for the IOCs.
- b. Review and approve IOC Guidelines. (*see Sections 2.1 and 2.2*) [A.R.S. § 41-3804]
- c. Coordinate to have Agencies/Divisions deliver all necessary training for IOC members as needed. (*see Section 4*) [A.R.S. § 41-3804]
- d. Upon receipt of IOC meeting agendas post on the board located at 100 North 15th Avenue, Phoenix, AZ 85007.
- e. Coordinate with Agency Liaisons to provide IOC members with proper member Identification Badges. (*see Section 10.1 and Appendix V*)
- f. Continuously review statewide IOC operations to ensure compliance and make recommendations for improvements/changes as necessary.
- g. Provide maintenance and hosting of the IOC website (<https://ioc.az.gov>) as needed.
- h. Assist in the recruitment/application and removal process of IOC members as follows:
 - i. Develop a standard IOC Member Application form. (*see Section 3.1 and Appendix F*)
 - j. Review/distribute applicant packets to the IOC Chairperson/Agency Liaison when needed. (*see Sections 3.1-3.2, 10.1*)

11

k. Make final IOC member appointments upon the IOC majority vote recommendation and send the official Member Appointment Letter; the use of e-signatures on ADOA letters may be used in accordance with A.R.S. §44-7031. (*see Section 3.1-3.2, and Appendices G-H*)

l. When ADOA rejects an applicant; ADOA will send an official Applicant Denial Letter; the use of e-signatures on ADOA letters may be used in accordance with A.R.S. §44-7031. (*see Section 3.2 and Appendices I*)

m. Work with Agency Liaisons to ensure the statutorily required types of members are maintained, and assist IOCs in filling these required types of members. (*see Section 1.2*) [A.R.S. § 41-3801 - 3804]

n. Work with Agency Liaisons to accept IOC member resignations and ensure the appropriate member removal process is followed. (*see Sections 3.5-3.6*) [A.R.S. § 41-3804]

o. Secure quarterly updates on relevant IOC activities. (*see Section 9*) [A.R.S. § 41-3804]

p. Provide IOC members and Agency Liaisons the opportunity to review potential changes to rules or policies that affect the IOCs. [A.R.S. §41-3804]

q. Approval of the formation of a new IOC. (*See Section 12.1*) [A.R.S. § 41-3801-3803]



Section 12: New IOC Formation & Leadership Appointments

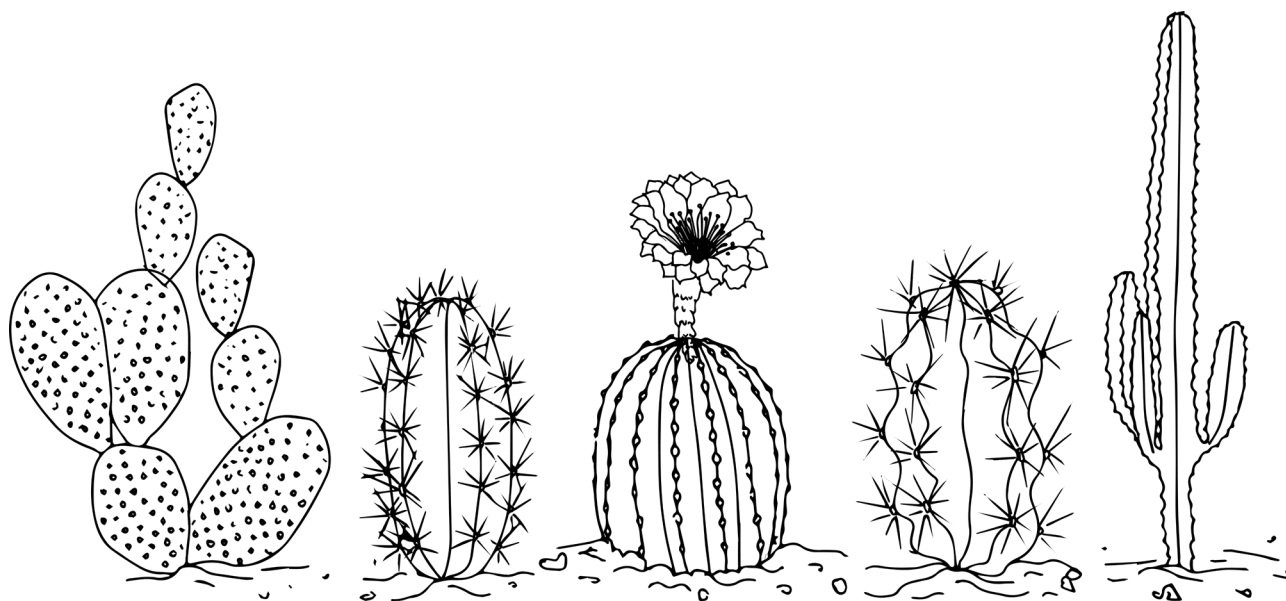
12.1 New IOC - Formation

- a. The ADOA Director, in consultation with the Agency Directors, may establish additional IOCs to promote human rights established pursuant to section A.R.S. §41-1961 or to oversee the activities of any service provider. [A.R.S. §41-3804]
- b. Members will have three (3) months to develop IOC Guidelines and submit to ADOA for approval. (*see Sections 2.1, 2.2, and 11.3*) [A.R.S. §41-3804]

12.2 New IOC - Appointment of Leadership

- a. Upon the establishment of a new IOC, ADOA will assist as needed with Agency Liaisons and the IOC members to designate leadership roles for a one year term.
 - b. At the end of the one (1) year term, the IOC members shall vote on leadership roles and designate their own leadership. (*see section 3.8*)
-

APPENDICES



APPENDIX A: DCS Records Request

NOT FOR OFFICIAL USE

CSO-1036A (5-17)

ARIZONA DEPARTMENT OF CHILD SAFETY
DCS RECORDS REQUEST

*REQUESTOR'S NAME	CONTACT PHONE NO.	SOC. SEC. NO.	DATE OF BIRTH
*COMPLETE ADDRESS		EMAIL ADDRESS (if applicable)	
*CITY, STATE, ZIP		DCS CASE NUMBER(S) OR REPORT NUMBER(S)	
CHILD(S) NAME (Last, First, M.I.)	OTHER NAMES USED AND SPELLINGS	DATE OF BIRTH	SOC. SEC. NO.
CHILD'S PARENT/GUARDIAN NAME (Last, First, M.I.)			
CHILD'S PARENT/GUARDIAN NAME (Last, First, M.I.)			

***If your name and COMPLETE address are not provided, your request will not be processed.**Is this request for an upcoming court date? Yes ☐ No ☐ If Yes, when is the court date? _____**Your relationship to this case:**☐ Biological parent ☐ Adoptive parent ☐ Prospective adoptive parent ☐ Legal guardian ☐ Foster parent☐ Attorney: Whom do you represent? _____ Is your client a criminal defendant? Yes ☐ No ☐☐ Other (specify): _____**Reason for this request:**☐ Court case: Type of court case: _____ Case number: _____☐ Personal files☐ Other (explain): _____

A.R.S. §8-807 requires that the records be necessary to promote the safety, permanency and well-being of the child. If seeking records that include child's information, please explain how this request meets that requirement.

What documents are you requesting? (Allow a minimum of 30 days for processing)☐ DCS report(s) summary only (formerly known as hotline reports)☐ Case summary package (Request includes DCS reports and investigation(s) summary, court reports, case plans, case notes)☐ Specific document(s): (List what you need below)

See reverse for EOE/ADA/LEP/GINA disclosures.

CSO-1036A (5-17)

APPENDIX A: DCS Records Request cont'd*NOT FOR OFFICIAL USE***CERTIFICATION SECTION – REQUIRED**

Department of Child Safety records and files are confidential and can be released only to those individuals and agencies authorized by law (A.R.S. §8-807, §8-807.01 and §41-1959). This form may be used by a parent, guardian, custodian, a child, a person who is the subject of DCS information, a prospective adoptive parent, foster parent, or an attorney representing any of these persons pursuant to

A.R.S. § 8-807. Your signature must be notarized or your identity verified. You must also provide documentation showing that you are authorized to obtain the information, such as a court order and/or explanation of your connection to the records and reason for your request. The Department of Child Safety will strike out/redact information that you are not entitled to, including the identity of the reporting person whose life or safety may be endangered by the disclosure. You must provide information as completely and accurately as possible to facilitate a records search and processing.

I certify that I am the person indicated in this request. I also understand that all information I receive is confidential and shall not be further disclosed.

Requester's Signature

Date

WITNESSED BY

STATE OF ARIZONA)
) SS.
 County of)

_____, known to me or having been satisfactorily proven to be the person described in, and the executor of the foregoing instrument for the purpose therein contained, personally appeared before me on this _____ day of _____, 20____.

Signature of Notary Public

Date

My commission expires

- ☐ VERIFICATION BY DCS STAFF OF DRIVER'S LICENSE OR OTHER PICTURE IDENTIFICATION OF AN INDIVIDUAL WHO PRESENTS HIM/HERSELF PERSONALLY, AND A NOTARY PUBLIC IS UNAVAILABLE.

DCS Representative

NAME (PRINT)

SIGNATURE

DATE

Type of identification presented:

SPECIFY

Email the notarized form to:

DCSRecordsRequest@azdcs.gov

Submitting your request via email allows DCS to process your request more efficiently.

ARIZONA DEPARTMENT OF CHILD SAFETY
Centralized Records Coordination Unit
 Site Code C010-19
 P.O. Box 6030
 Phoenix, AZ 85005-6030
 FAX to 602-255-3245

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. The Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service or activity. For example, this means if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. To request this document in alternative format or for further information about this policy, contact your local office; TTY/TDD Services: 7-1-1. • Free language assistance for Department services is available upon request. • Disponible en español en línea o en la oficina local.

APPENDIX B: DES Adult Protective Services (APS) Records Request*NOT FOR OFFICIAL USE*

AAA-1301A FORFF (07-18)

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Division of Aging and Adult Services

Page 1 of 1

**ADULT PROTECTIVE SERVICES (APS)
RECORDS REQUEST FORM**

Please accept this as an official request for the APS case file on:

Name of Vulnerable Adult/Client _____

Address (No., Street) _____

City _____ State _____ ZIP Code _____

Date of Birth _____ Social Security Number _____

Relationship to Vulnerable Adult/Client _____

Requestor's Name (please print) _____

Address (No., Street) _____

City _____ State _____ ZIP Code _____

Phone Number _____ Date _____

Signature of Requestor _____

This request will be forwarded to the Arizona Attorney General's office for review and consideration. The requestor will receive written communication regarding the release of the requested case file within 30 days. Please include any related documents to support your request. Below you will find a list of some of the types of supporting documents that you may want to include with your request:

- Guardian/conservator appointment
- Power of Attorney
- Payee
- Death certificate
- Legal representative
- Any other essential documentation

Please complete the form for your request. Requests must be submitted in writing to the APS Custodian of Records. Your written request may be emailed to the following mailbox: PublicRecordsRequest@azdes.gov or mailed to:

The Arizona Department of Economic Security
Attn: APS Custodian of Records
1789 W Jefferson St., Mail Drop 6271
Phoenix, Arizona 85007

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. To request this document in alternative format or for further information about this policy, contact your local office; TTY/TDD Services: 7-1-1. • Free language assistance for DES services is available upon request.

APPENDIX C: DES DDD Authorization for Release of Information

NOT FOR OFFICIAL USE

DD-524-FF (10-18)

Page 1 of 2

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Division of Developmental Disabilities

AUTHORIZATION FOR RELEASE OF INFORMATION

Name of Person to Receive Documents

(Use the DES-166 envelope)

Applicant/Patient's Name (Last, First, M.I.)
Birthdate
Address (No., Street, PO Box No.)
City/State/ZIP Code

INFORMATION REQUESTED

- ☐ Developmental Evaluation
 ☐ Behavioral Health Records
 ☐ Latest IPP/IEP
 ☐ Psycho Educational Evaluation
☐ Medical Documentation or Developmental Disability
 ☐ Social History
 ☐ Medical Records
☐ Vocational Evaluation
 ☐ Physical/Occupational/Speech Therapy Evaluation
☐ Other (Specify)

Copying fees will not be reimbursed by the Division • The information sought is the minimum amount of information the Division needs for the purpose stated below.

Comments:

AUTHORIZATION

I authorize the above named company, school, agency, health care provider or individual to disclose to the Arizona Department of Economic Security, Division of Developmental Disabilities (DES/DDD) the above indicated health, medical information, and/or other records requested. The purpose of this release is to assist in determining eligibility for services with the DES/DDD, or if eligible, to assist in providing treatment services. This authorization shall expire one year from the date below.

I understand that I can revoke this authorization at any time by written notice to the provider of records, except to the extent that the disclosure authorized has been acted upon prior to receipt of any written revocation.

I understand that I do not have to sign this authorization. If I do not sign it, I understand that the Division may not be able to determine eligibility for services. I understand that a health plan may not condition treatment, payment, or enrollment in a health plan on my signing this authorization.

I understand that once the records and information authorized herein are disclosed to entities or persons outside of DDD, they could be redisclosed by the recipient(s) and may no longer be protected by the Health Insurance Portability and Accountability Act of 1996. However, DES/DDD service providers generally are bound by contract and law to maintain the confidentiality of the health and other information received, especially that relating to HIV infection, AIDS or AIDS-related conditions, and psychological or psychiatric conditions.

I understand that I have a right to have a copy of this form.

Applicant/Personal Representative's Name (Print Name)

Applicant/Personal Representative's Signature Date

My authority as a personal representative to make health care decisions for this person is:

- ☐ Parent of a Minor
 ☐ Guardian
 ☐ Court Appointed Conservator
 ☐ Health Care POA

A FACSIMILE OR PHOTOCOPY OF THIS AUTHORIZATION IS CONSIDERED TO BE AS AUTHENTIC AS THE ORIGINAL

Routing: ORIGINAL – Keeper of records; COPY – Case file; COPY – Applicant/Personal Representative

See reverse for EOE/ADA/LEP/GINA disclosures

DD-524-FF (10-18)

Page 2 of 2

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. To request this document in alternative format or for further information about this policy, contact the Division of Developmental Disabilities ADA Coordinator at 602-542-0419; TTY/TDD Services: 7-1-1. • Free language assistance for DES services is available upon request. Disponible en español en línea o en la oficina local.

APPENDIX D: AHCC Authorization to Disclose Protected Health Information

NOT FOR OFFICIAL USE



Authorization to Disclose Protected Health Information by AHCCCS

(For use by AHCCCS members who want AHCCCS to disclose their protected health information to another person/entity)

Name:	AHCCCS ID Number or ACN:
Address:	
Date of Request:	Date of Birth:

I give my permission for AHCCCS to disclose my protected health information to:

Name of Person or Entity and Address:

*You **MUST** choose one of the following:*

- ☐ I specifically authorize AHCCCS to disclose **all** of my protected health information in its possession to the person/entity listed above.
- ☐ I specifically authorize AHCCCS to disclose **only the health information described here:**

*You **MUST** choose one of the following:*

- ☐ This disclosure is being made at my request and I choose not to state the reason for this disclosure.
- ☐ I specifically authorize the disclosure of my health information for the following purpose(s):

APPENDIX D: AHCC Authorization to Disclose Protected Health Information (cont'd)*NOT FOR OFFICIAL USE*

By placing my initials in front of any of the following items, I specifically authorize AHCCCS to disclose the following: [NOTE: FEDERAL REGULATIONS REQUIRE A DESCRIPTION OF THE REASONS FOR DISCLOSING SUBSTANCE ABUSE INFORMATION.]

_____ HIV/AIDS and communicable disease related information and/or records
 _____ Mental health information and/or records
 _____ Genetic testing information and/or records
 _____ Drug/alcohol diagnosis, treatment/referral information for the following purposes:

By signing this Authorization, I understand that:

- I may refuse to sign this authorization, and my refusal will not affect my eligibility for benefits. If I do not sign this form, my health care and the payment for my health care will not be affected.
- If the person or entity receiving the information is not a health care provider or health plan covered by federal privacy regulations, the information described above may be disclosed again by that person or entity, and your information will no longer be protected by the regulations. However, the Federal Substance Abuse Confidentiality Requirements may prohibit any further disclosure.
- I may see and obtain a copy of the information on this form, per AHCCCS policy, if I ask for it.
- I may decide at any time that I do not want to do this. I must then **revoke** this authorization **in writing**. If I do, it will not have any effect on the actions taken before the revocation of my authorization. Once AHCCCS receives the revocation, this authorization will be revoked, except to the extent that AHCCCS has already taken action in reliance upon this authorization. Revocations can be made by completing an AHCCCS "Revocation of Authorization" form, and sending it to:

Arizona Health Care Cost Containment System
 Office of Administrative Legal Services, Attention: Privacy Officer
 701 E. Jefferson, MD 6200
 Phoenix, AZ 85034
 Fax 1-602-253-9115

I have read the above and authorize the disclosure of the protected health information as stated. This authorization will expire one year from date of signing unless another date or specific event is given:

Specify other expiration date/event: _____

Signature of Member or Legal Representative:	Date:
Print Name of Member or Member's Legal Representative:	Relationship to Member:
For AHCCCS use only:	Date of Receipt
Received by _____	

APPENDIX E: DHS/ASH to Use or Disclose Protected Health Information*NOT FOR OFFICIAL USE*

ARIZONA DEPARTMENT OF HEALTH SERVICES

Arizona State Hospital**Civil and Forensic Facilities**

2500 East Van Buren Street

Phoenix, Arizona 85008

AUTHORIZATION TO USE OR DISCLOSE PROTECTED HEALTH INFORMATION

Patient name: _____

Address: _____

Phone number: _____ DOB: _____

Social Security Number: _____

I authorize Arizona State Hospital to:☐ Disclose copies of protected health information (PHI)☐ Exchange verbal information☐ Request information

Person/agency: _____

Address: _____

Phone number (if known): _____ Fax number (if known): _____

The admission and discharge periods requested are _____ to _____

(If dates are incomplete, the most current discharge information will be provided.)

Specific description of the information to be disclosed: (**NOTE:** I understand that a release of this information may include information related to AIDS/HIV and other Communicable Diseases, Alcohol and/or Drug Abuse Treatment) _____ Patient Initials

- _____ Discharge Summary
- _____ History and Physical Exam
- _____ X-ray Reports
- _____ Lab Tests
- _____ Psychiatric Admission Summary
- _____ A summary of medical records (History and Physical, Psychiatric Assessment and Discharge Summary) for hospital visits dated: _____
- _____ A summary of billing records (cover page of the patient billing statement for each visit for hospital visits dated: _____)
- _____ Legal Health Record (complete medical record)
- _____ Entire Designated Record Set (includes billing records)
- _____ Other (specify) _____

Specific description of the purposes of the disclosure:

- _____ Continued Patient Care
- _____ Workers' Compensation
- _____ Insurance Coverage or Payment for Care
- _____ Other (specify) _____
- _____ The disclosure is at my (the patient's) request.

APPENDIX E: DHS/ASH to Use or Disclose Protected Health Information (cont'd)

NOT FOR OFFICIAL USE

I authorize the provider to use or disclose information related to (check all that apply):

☐ AIDS/HIV and other Communicable Diseases
☐ Behavioral Health Care/Psychiatric Care/Mental Health Information
☐ Alcohol and/or Drug Abuse Treatment
☐ Genetic Testing Information

The provider will not deny me treatment if I do not wish to sign this form. I understand that I may refuse to sign this authorization form.

I understand that I may revoke this authorization at any time, with some exceptions. For more details on when I can and cannot revoke this authorization, I can read the provider's Notice of Privacy Practices (Notice of Privacy Practices is not applicable to patients admitted under forensic commitment).

To revoke my authorization I must submit a written request to the Director of the Health Records Department or sign the section below on the original authorization.

Unless I revoke this authorization earlier, it will expire one year from today's date.

I understand that if this information is disclosed to a third party the information may no longer be protected by the federal privacy regulations and may be re-disclosed by the person or organization that receives the information.

I understand the matters discussed on this form. I release the provider, its employees, officers and directors, medical staff members, and business associates from any legal responsibility or liability for the disclosure of the above information to the extent indicated and authorized herein.

Signature of Patient

Date

Signature of Legal Representative

Relationship to Patient or
Authority to Act for Patient

REVOCATION SECTION

I hereby revoke this authorization.

Signature

Date

APPENDIX F: ADOA IOC Member Application

NOT FOR OFFICIAL USE



Independent Oversight Committee (IOC) Application for Appointment (Human Rights Committees)

Complete both pages of this application and submit with current resume, to:

Arizona Department of Administration

100 North 15th Avenue, Suite 305, Phoenix, Arizona 85007

You may submit your completed application and resume via email to ioc@azdoa.gov

APPLICANT

Full Name:

(First Name, Middle Initial, Last Name)

Date of Birth:

(mm/dd/yyyy)

PREFERRED METHOD OF CONTACT

Contact Information

Mailing Address:

Home:

Office:

Cell:

Email Address:

Work Information (if applicable)

Employer:

Position/Title:

Office Address:

License/Certification (if applicable)

Type:

Number:

Date:

REFERENCES

1.

First Name, Last Name

Relationship

Years Known

Phone

2.

First Name, Last Name

Relationship

Years Known

Phone

3.

First Name, Last Name

Relationship

Years Known

Phone

APPENDIX F: ADOA IOC Member Application (cont'd)*NOT FOR OFFICIAL USE**Please select the primary area of your expertise. Select only one option under the agency you are applying for.*

DES A.R.S. § 41-3801 Developmentally Disabled 7-15 members	DCS A.R.S. § 41-3802 Children, Youth and Family 7-15 members	AHCCCS & DHS/ASH A.R.S. § 41-3803 Behavioral Health Services 7-15 members
<input type="radio"/> 1. Psychology	<input type="radio"/> 1. Psychology	<input type="radio"/> 1. Psychology
<input type="radio"/> 2. Law	<input type="radio"/> 2. Law	<input type="radio"/> 2. Law
<input type="radio"/> 3. Medicine	<input type="radio"/> 3. Medicine	<input type="radio"/> 3. Medicine
<input type="radio"/> 4. Education	<input type="radio"/> 4. Education	<input type="radio"/> 4. Education
<input type="radio"/> 5. Special education	<input type="radio"/> 5. Special education	<input type="radio"/> 5. Special education
<input type="radio"/> 6. Social work	<input type="radio"/> 6. Social Work	<input type="radio"/> 6. Social work
<input type="radio"/> 7. Criminal Justice	<input type="radio"/> 7. Parent of child w/services	<input type="radio"/> 7. Mental health
<input type="radio"/> 8. Parent of child w/services	<input type="radio"/> 8. Other	<input type="radio"/> 8. Housing for the mentally ill
<input type="radio"/> 9. Other		<input type="radio"/> 9. Criminal justice
		<input type="radio"/> 10. Public safety
		<input type="radio"/> 11. Parent of child w/services
		<input type="radio"/> 12. Other

AFFIRMATION OF ELIGIBILITY:

In accordance with A.R.S. 38-201, every state officer shall not be less than eighteen years of age, a citizen of the United States and a resident of this state. Do you meet these requirements?

Yes ☐No ☐

If no, please attach explanation.

Have you ever been arrested or to your knowledge, have any formal charges of professional misconduct, criminal misdemeanor or a felony ever been filed against you in any jurisdiction?

Yes ☐No ☐

If yes, please attach description. Answering "yes" will not disqualify an applicant from consideration.

I certify that the facts contained in this application are true and correct to the best of my knowledge. I have expressed an interest and confirm that I meet the requirements of the committee position. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my qualifications and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damages that may result from furnishing the same to you.

SIGNATURE: _____

DATE: _____

Questions? If assistance is required completing this form, please call us at (602) 542-2024

APPENDIX G: ADOA Non-Voting IOC Member Appointment Letter Template*FOR AGENCY IOC LIAISON AND ADOA USE ONLY***Douglas A. Ducey**
Governor**Andy Tobin**
Director**ARIZONA DEPARTMENT OF ADMINISTRATION****OFFICE OF THE DIRECTOR**

100 NORTH FIFTEENTH AVENUE • SUITE 403

PHOENIX, ARIZONA 85007

(602) 542-1500

Month DD, YYYY

First Name Last Name

Address 1

Address 2

Dear Ms/Mr _____,

Congratulations on your recent committee approval to the (Name of IOC) Independent Oversight Committee (IOC) by authority of (Rule or Statute). You are hereby appointed to the committee effective immediately. In your current capacity, as an (Indicate Status) and as a third member in this role, you will serve as a non-voting member according to the limitations of (Statue). It is understood that this position cannot be counted for purposes of a quorum or allowed to vote on any matter before the Committee.

The Committee plays an important role in our state's work to protect the rights of people with (name of IOC group served). We admire your willingness to volunteer and give of your time and talent!

(ADOA IOC Transition Coordinator Name) is the Department's Independent Oversight Committee Transition Coordinator, and (he/she) will contact you with further information regarding your appointment.

Sincerely,

Matthew Hanson

Assistant Director | Arizona Department of Administration

cc: (First and Last Name), Independent Oversight Committee Transition Coordinator

(First and Last Name), Independent Oversight Committee Chairperson

(First and Last Name), (Agency Name) IOC Liaison

APPENDIX H: ADOA IOC Member Appointment Letter Template

FOR AGENCY IOC LIAISON AND ADOA USE ONLY

Douglas A. Ducey
Governor



Andy Tobin
Director

ARIZONA DEPARTMENT OF ADMINISTRATION

OFFICE OF THE DIRECTOR

100 NORTH FIFTEENTH AVENUE • SUITE 403

PHOENIX, ARIZONA 85007

(602) 542-1500

Month DD, YYYY

First Name Last Name

Address 1

Address 2

Dear Ms/Mr _____,

Thank you for applying to serve on the (Agency/Division Name) Independent Oversight Committee (IOC). This letter is to inform you that the committee has voted you on as a member and to confirm you are hereby appointed to the (IOC Name) effective immediately.

The Committee plays an important role in our state's work to protect the rights of people with developmental disabilities. We admire your willingness to volunteer and give of your time and talent!

(ADOA IOC Transition Coordinator Name) is the Department's Independent Oversight Committee Transition Coordinator, and (he/she) will contact you with further information regarding your appointment.

Sincerely,

Matthew Hanson

Assistant Director | Arizona Department of Administration

cc: (First and Last Name), Independent Oversight Committee Transition Coordinator

(First and Last Name), Independent Oversight Committee Chairperson

(First and Last Name), (Agency Name) IOC Liaison

APPENDIX I: ADOA IOC Member Appointment Letter Template

FOR AGENCY IOC LIAISON AND ADOA USE ONLY

Douglas A. Ducey
Governor



Andy Tobin
Director

ARIZONA DEPARTMENT OF ADMINISTRATION

OFFICE OF THE DIRECTOR

100 NORTH FIFTEENTH AVENUE • SUITE 403

PHOENIX, ARIZONA 85007

(602) 542-1500

Month DD, YYYY

First Name Last Name

Address 1

Address 2

Dear Ms/Mr _____,

Thank you for your interest in becoming a member of an Independent Oversight Committee for the (Agency/Division). The purpose of this letter is to inform you that the Department of Administration will not be appointing you to a position on the committee at this time. We wish you the best moving forward.

Sincerely,

(Name of ADOA IOC Coordinator)

Arizona Department of Administration

Independent Oversight Committee Coordinator

APPENDIX J: ADOA IOC Member Appointment Letter Template

FOR AGENCY IOC LIAISON AND ADOA USE ONLY

Douglas A. Ducey
Governor



Andy Tobin
Director

ARIZONA DEPARTMENT OF ADMINISTRATION

OFFICE OF THE DIRECTOR

100 NORTH FIFTEENTH AVENUE • SUITE 403

PHOENIX, ARIZONA 85007

(602) 542-1500

Month DD, YYYY

First Name Last Name

Address 1

Address 2

Dear Ms/Mr _____,

Thank you for your interest in becoming a member of an Independent Oversight Committee for the (Committee Name). The purpose of this letter is to inform you that the committee did not elect you as a new member. We wish you the best moving forward and thank you for your continued commitment to volunteer with the State of Arizona.

Sincerely,

(Name of ADOA IOC Coordinator)

Arizona Department of Administration

Independent Oversight Committee Coordinator

APPENDIX K: IOC Site Visit Recommended Protocols

FOR AGENCY IOC LIAISON AND ADOA USE ONLY

Prior to Conducting a Site Visit:

1. Schedule the site visit with the appropriate agency at least twenty-four (24) hours in advance (when applicable) and obtain the approved IOC Site Visit Checklist. (see Appendices L & M)
2. Work with the Agency Liaison to secure a signed consent and release of information form if an interview of a client/patient is needed. (see Sections 7.1-7.2, and Appendices A-E)
3. If client/patient records will be reviewed ensure this is indicated on the consent and release of information form. (see Sections 7.1-7.2, and Appendices A-E)

During the Site Visit:

1. Present credentials to the appropriate site representative and inform the individual of the reason for the site visit.
2. Inspect the facility using the IOCs approved checklist. (see Appendices L & M)
3. Prior to conducting any interviews ensure client/patient and/or the parent/guardian has signed Agency/Provider approved consent and release of information form. (see Sections 7.1-7.2, and Appendices A-E)
1. If covered within the consent/release of information, review the client file on site and make note of plans such as Individual Service Plan, Behavioral Treatment Plan, medication list, etc.
2. If a condition is found which constitutes a direct risk to the health, safety or welfare of the clients, the checklist will be noted and the site manager/supervisor told of the problem observed by the IOC member/s.
3. If there is immediate danger, call 911 or the appropriate authority.

Post Site Visit:

1. The completed checklist and a report summarizing the site visit should be forwarded to the contract provider responsible for the site/facility, the appropriate Agency (AHCCCS or DHS/ASH) and ADOA.
2. In the event the report finds a condition which constitutes a risk to the health, safety or welfare of the residents, or constitutes a human rights violation, a copy of the report will also need to be forwarded to the contracted provider, related Agency Director, and the licensing division of the Department of Health Services, if applicable.

APPENDIX L: ASH IOC Site Visit Questions

NOT FOR OFFICIAL USE

ASH IOC Site Visit Questions

What we do / Why we are asking questions.

Do you have access to your property?

Do you require a special diet for any reason and are you being given food choices?

Do you have clean well-fitting clothes?

Do you have access to educational materials of your choice?

Are you able to worship in a manner that supports your faith?

In general, how are you treated by staff?

Do you feel pressured by the staff to accomplish tasks or work around the unit or grounds?

Do you have access to legal representation?

Do you have access to your medical records?

Has a staff member intimidated anyone in any manner?

Is your right to privacy being guarded by the staff?

Are you receiving adequate medical care? Who is your physician?

Have you been secluded or restrained in the past week/month/year?

APPENDIX L: ASH IOC Site Visit Questions (cont'd)*NOT FOR OFFICIAL USE*

Has staff laid hands on you for any reason?

Are you allowed as much freedom as you would like within the confines of ASH?

Are you offered the chance to exercise?

Is your correspondence both to and from impeded in any way?

Are you able to form relationships, romantic or otherwise with other patients?

Is your choice or sexuality respected and accommodated by the staff?

Are you offered the opportunities to experience the enjoyment of the arts?

What would give you hope?

Are you able to have physical contact with loved ones or friends who come to visit you?

Do you feel safe where you are?

Has a staff member reviewed your treatment plan either during a staffing or re-approached you later to ensure you are aware of the details of that plan?

Do you have the right to express your opinions freely?

Have you been given the opportunity to work for a reasonable remuneration?

Do you receive and disseminate information from various media if desired?

APPENDIX M: ASH IOC Site Visit Questions

NOT FOR OFFICIAL USE

NAIOC FACILITIES AND SERVICES VISITATION CHECKLIST

Facility or Service Name: _____

Address: _____

Phone: _____ Visit Date: _____

Name of Agency/Organization Director/Representative: _____

Names of NAIOC Reviewers: _____

Licensed: ____ Yes ____ No License# (if applicable): _____

Name of RBHA/Provider: _____

of Beds: _____ Monthly Rent \$: _____

of Current Residents: _____ # of Male Residents: _____ # of Female Residents: _____

Visual Observation- Describe facility

Information Obtained from Agency/Organization Director/Representative:

How do residents find out about your facility?

How are meals provided?

Describe contact with residents' case managers and/or providers.

APPENDIX M: ASH IOC Site Visit Questions (cont'd)*NOT FOR OFFICIAL USE*

Questions - What is the process you use to dispense medication?
Do you store resident's medications?
Do you remind residents to take medications?
Do you read the medication label to the resident to ensure that resident patient is taking it correctly and/or to reassure resident that they are taking correct dosage?
Do you open the medication for the resident?
Do you distribute/pour out medications for residents?
Do you observe resident to make sure meds are taken?
Other Questions
What is the facility policy for keys? Do you have a key?
Is unit furnished or unfurnished?
What is your process for pest control (does this include specifics for bed bug prevention/treatment)?

APPENDIX M: ASH IOC Site Visit Questions (cont'd)

NOT FOR OFFICIAL USE

What time are meals served?
Are clients allowed seconds?
What is your policy for snacks? Accessible? Storage? Limit? Sanitary?
What is your procedure for evacuation? Posted? Practice?
Are there fire and smoke alarm; and are they in working condition? Sprinklers?
What kind of information is maintained for clients: emergency contacts?
What kind of Staff do you have on a shift and what is their training? What training do you provide? Credentials?
Are electronic devices permitted. used such as cell phones, ipads, etc.? What is your policy for use of wireless or electronic devices on shift?
Are emergency phone numbers posted?

APPENDIX M: ASH IOC Site Visit Questions (cont'd)*NOT FOR OFFICIAL USE*

Are clients' right, posted?
Is there a curfew?
What kind of laundry facilities do you have?
What instances invoke disciplinary procedures for residents? Staff?
What activities are provided for the clients? Describe:

Information Obtained from Residents - Did resident express satisfaction concerning the following?

Meals

Feeling safe

Rules of facility

Money management

Treatment by staff

Treatment by other residents

APPENDIX M: ASH IOC Site Visit Questions (cont'd)

NOT FOR OFFICIAL USE

Living conditions (adequate bedding, hot water temperature, etc.)

His/her daily activities

Access to money

Access to transportation

Privacy

General enjoyment of life

How could the site be improved?

Access to adaptive devices.? Are they appropriate?

Contact with case manager?

Are you familiar with your current ISP or treatment plan?

Do you store your own medications?

Are you reminded to take medications?

Are medication labels. read to you?

Do you pour your own medication?

Do the staff watch you take your medications?

APPENDIX M: ASH IOC Site Visit Questions (cont'd)*NOT FOR OFFICIAL USE*

Are medications kept in locked places (rooms/boxes)?

Does staff have a key to your unit?

Do you have a key to your unit?

Concerns of Reviewer(s) - Did reviewer find evidence that conflicted with person's statement?

Identification of Abuse (residents hurting each other; harmed by staff; inappropriate grouping of people)	Yes/ No
--	---------

Staffing Issues (respectful treatment by staff resident, treated as individuals)	Yes/ No
---	---------

Identification of boarding home safety and/or living issues (close to bus; "horniness", safety hazard., on property; cleanliness)	Yes/ No
--	---------

Evidence of substantial medication problems	Yes/ No
---	---------

What is the condition of the furniture?

Are the units clean and maintained?

Food storage/spoilage problems, most recent health inspections?	Yes/ No
---	---------

Any violations of Individual's rights?

APPENDIX N: Agency Directory and Contact Information

Agency	IOC Name	Meeting Schedule	Time	Location
AHCCCS		Monthly Rotation, 3rd Monday: - Flagstaff - Site Visits (no meeting) - Prescott Valley	1:00 PM	3274 Bob Dr, Prescott Valley, AZ 86314
				1701 N 4th Ave, Flagstaff, AZ 86004
				1740 W. Adams St. Phoenix, AZ 85007
AHCCCS		Monthly, 3rd Wednesday	5:00 PM	
AHCCCS		Monthly, 4th Tuesday	10:30 AM	400 W Congress, Tucson, AZ 85701
DCS	DCS	TBD	TBD	TBD
DES	DES North	Monthly, 3rd Thursday	9:30 AM	1701 N 4th Ave, Flagstaff, AZ 86004
DES	DES East	Monthly, 2nd Wednesday	5:00 PM	120 W 1st Ave, Mesa, AZ 85210
DES	DES Sierra Vista	Monthly, 2nd Thursday	9:00 AM	2981 E Tacoma St, Sierra Vista, AZ 85635
DES	DES Central	Monthly, 4th Monday	10:00 AM	4000 N Central Ave, Suite 900, Phoenix, AZ 85012
DES	DES West	Monthly, 4th Tuesday	5:30 PM	8990 W Peoria Ave, Peoria, AZ 85345
DES	DES Tucson	Monthly, 4th Wednesday	2:00 PM	400 W Congress, Suite 500, Tucson, AZ 85701
DES	DES Statewide	Quarterly, Various	10:00 AM	5328 E Washington St, Building C, Conference Room, Phoenix, AZ 85034
DHS	ASH	Monthly, 3rd Thursday	6:00 PM	1740 W. Adams St. Phoenix, AZ 85007

APPENDIX O: IOC Meeting Cadence, Locations and Times⁷*NOT FOR OFFICIAL USE*

All IOC Requests/Complaints & General Information		
ADOA	Various Contacts	ioc@azdoa.gov
AHCCCS	Various Contacts	ahcccsdeliverables@azdhs.gov
DCS	TBD	TBD
DES	Various Contacts	See Agency IOC Liaisons
DHS-ASH	Various Contacts	ashhrc@azdhs.gov

IOC Agency Liaisons (Logistics, training, and other similar matters)		
ADOA	TBD	
AHCCCS	Fredreaka Graham	fredreaka.graham@azahcccs.gov
DCS	TBD	
DES (East, South/Tucson, West)	Jeffrey Yamamoto	JeffreyYamamoto@azdes.gov
DES (North, South/Sierra Vista, Central)	Eric Houghtalin	EHoughtalin@azdes.gov
DHS-ASH	Jacqueline Bachelier	Jacqueline.Bachelier@azdhs.gov

Public Records Request Only (Human Rights violation not defined)		
ADOA	Megan Rose	
AHCCCS	Heidi Capriotti	
DCS	Nicole Capone	
DES		
DHS-ASH		

IOC Call-In Conference Line Information:

- **DES/DDD IOCs:** This is just for conference line use only. WebEx: 1-240-454-0879, meeting number (access code): 802 354 038; DES Conference line point of contact is Eric Houghtalin (EHoughtalin@azdes.gov)
- **AHCCCS IOCs:** (need # and contact information)
- **DHS/ASH IOCs:** need # and contact information)

7. Please check the IOC website at ioc.az.gov as the dates, times and locations are subject to change.

APPENDIX P: IOC Member Confidentiality Agreement

NOT FOR OFFICIAL USE



IOC MEMBER CONFIDENTIALITY AGREEMENT

Subject to federal and state laws, including the Health Insurance Portability and Accountability Act (HIPAA) of 1996 privacy standards (45 Code of Federal Regulations part 160 and part 164, subpart E), IOC members, who are considered *agency volunteers*, may have access to client¹ information and records, including quality of care reports, case presentations, adult protective services investigation case status and outcomes, substantiations, recommendations and other quality of care findings from peer reviews or any successor report or process, maintained by the agencies, providers or regional behavioral health authorities to the extent necessary to conduct its duties (ARS §41-3804 & ARS §36-509).

When IOC members review incident reports, behavioral health plans, or come into contact with any other specific records it is considered that they are working with personally identifiable information (PII) and potentially protective health information (PHI).

PII includes, but is not limited to: a person's name, address, date of birth, social security number, tribal enrollment number, telephone or fax number, e-mail address, social media identifier, driver license number, places of employment, school identification or military identification number or any other distinguishing characteristic that tends to identify a particular person (ARS §36-509).

PHI includes, but is not limited to: names, geographical identifiers, dates other than year (including birth, admittance, discharge, and death), phone/fax numbers, email addresses, social security numbers, medical record numbers, health insurance beneficiary numbers, account numbers, certificate/license numbers, vehicle identifiers and serial numbers, including license plate numbers, device identifiers and serial numbers, web Uniform Resource Locators (URLs), Internet Protocol (IP) address numbers, biometric identifiers (including finger, retinal and voice prints), full face photographic images and any comparable images, any other unique identifying number, characteristic, or code except the unique code assigned by the investigator to code the data, plus any other medical information contained within the clients' reports/records (45 Code of Federal Regulations part 164, subpart E).

Therefore, all PII and PHI concerning clients shared with IOC members is always considered confidential. "Confidential" means that you are not permitted to disclose clients' names, or talk about them or their health information in ways that will make their identity known, or, their health status known to those not directly responsible for their care. No confidential information may be released without appropriate authorization from the client or by their parent/legal guardian.

As an IOC member and a state agency volunteer, you are expected to respect the privacy of clients and to treat all personally identifiable information (PII) and any protected health information (PHI) as confidential. Any violation is a Class 2 misdemeanor (A.R.S. §41-3804).

ACKNOWLEDGEMENT OF CONFIDENTIALITY OF CLIENT PII & PHI INFORMATION

By signing below, I agree to treat as confidential all PII and PHI information about clients or former clients that I learn during the performance of my duties as IOC Member, and I understand that it would be a violation to disclose such information to anyone outside of the committee and not involved in that client's care.

IOC Member Name: _____

Signature of IOC Member: _____

Date Signed: _____

¹ Clients are defined as all individuals who are currently receiving, or formerly received services, or who have a matter with the agency.

APPENDIX Q: IOC Meeting Agenda Template



INDEPENDENT OVERSIGHT COMMITTEE MEETING IOC MEETING AGENDA TEMPLATE

Instructions: To ensure compliance with the Open Meeting Law A.R.S. § 38-431, below is an IOC meeting agenda template. This template can be used as a guide for all IOCs to follow when creating their meeting agendas. However, all **bolded** items below are required to be included on all IOC agendas. In addition, the *italicized* example statements were taken and/or adapted from "The Arizona Open Meeting Law" handbook¹ and are strongly recommended to be used in their entirety.

Name of IOC (Needs to include the actual name of the IOC and the related Agency/Division)

Meeting Date (MM/DD/YY)

Meeting Time (XX am/pm - XX am/pm)

Meeting Location (Full address, including conference room number when applicable)

Remote Conferencing Statement (e.g. "IOC Members may attend either in person or by telephone.")

Call-in Information (Call-in telephone number and participant access code)

Americans with Disabilities Act (ADA) Disclaimer Statement (e.g. "Persons with a disability may request a reasonable accommodation, such as a sign language interpreter, by contacting (name of individual to contact) at (phone number) or (email address). Requests should be made as early as possible to allow time to arrange the accommodation.")

Agenda Topics (most frequently used topics are listed below)

- Call to order and roll call (recommended to ensure a quorum is present)
- Approval of Minutes (optional)
- ADOA Update (as needed)
- IOC Agency/Division Liaison Updates (if/when applicable)
- REBA/Provider Updates (if/when applicable)
- Member Outreach/Recruitment (when applicable)
- New member Nominations (when applicable)
- IOC Leadership Position/s Nominations (when applicable)
- Review of Incident Reports and/or Behavioral Plans (if/when applicable)
- Site Visit Summary Reports (if/when applicable)
- Follow up Items (as needed)
- Call to the Public (optional)
- Motion to adjourn (optional)

Agenda Order Statement (i.e. "Agenda items above may be heard out of order or not at all.")

Executive Session Disclaimer Statement (e.g. "The IOC may vote to go into Executive Session, pursuant to A.R.S. § 38-431, to discuss information on potential and/or existing IOC members (considerations, appointments, removals, etc.), discussion on legal issues/concerns, or to discuss topics that include confidential client/patient information/records. Members of the public are required to leave if the IOC members vote to go into Executive Session.")

¹ The Arizona Open Meeting Law. Attorney General Arizona Agency Handbook - Open Meeting Law September 2018. [Available online at <https://www.azag.gov/outreach/publications/agency-handbook>]

APPENDIX R: IOC Meeting Other Attendees/Guest Sign In Sheet Template



INDEPENDENT OVERSIGHT COMMITTEE MEETING
GUEST SIGN IN SHEET

Name of IOC: _____ Meeting Date: _____

Meeting Location: _____ Meeting Time: _____

Other Attendees/Guest Information

First and Last Name <i>(please print)</i>	Organization <i>(if applicable)</i>	Agenda Item	Contact Information <i>(optional)</i>

APPENDIX S: IOC Meeting Notes & Action Items Template

Below is an optional template can be used by IOCs to capture required information necessary to ensure compliance of the Open Meeting Law, meeting minutes requirements (A.R.S. §38-431).



INDEPENDENT OVERSIGHT COMMITTEE MEETING NOTES & ACTION ITEMS TEMPLATE

IOC Name: _____ Meeting Date: _____

Meeting Location: _____ Meeting Time: _____

Members Present:

Members Absent:

Other Attendees:

Agenda Item <i>(Enter the related topic from the IOC's agenda)</i>	General Description of Matters Discussed & Motions Made <i>(Summarize key points discussed; be sure to restate the "actual motion" made including the vote result when applicable)</i>	Action Item/Assigned To/Due Date <i>(Indicate the specific follow-up task/s that need to be completed, name of the member assigned to the item, and the anticipated due date)</i>

IOC.MN.V1 (01.2019)

APPENDIX T: Tips on Conducting IOC Meetings According to Open Meetings Law

Below are some meeting tips and example statements that can be used as a guide by IOC Chairpersons/Members to help ensure compliance of the Open Meeting Law, public meeting requirements (A.R.S. §38-431).

1. **Calling the Meeting to Order:** When the meeting is called to order, several statements may be made by the Chairperson. One such example may be: "This session of the (name of IOC) Independent Oversight Committee is now called to order. The date is (state the date) and the time is (state the time)."
2. **Call to the Public:** When a call to the public is made, the IOC members cannot respond to topics brought up during the call to the public that are not on the agenda. Such a statement might look like: "Call to the Public: this is the time for the public to comment. Members of the IOC may not discuss items that are not specifically identified on the agenda. Comments are limited to three minutes per person."
3. **When a Topic Not Posted on the Agenda is Discussed:** The possibility exists that during any part of the meeting a member of the IOC (or the public) may want to discuss a topic not on the posted agenda as well. When this happens, it is best practice for another member to defer such discussion. Such a statement might look like: "I recommend that we defer discussion and decision on the matter until a later meeting so that the item can be specifically listed on the agenda."
4. **Going into Executive Session (Initial Motion):** Before an IOC goes into Executive Session, a motion must be made and seconded, then a majority of present/call-in members must vote in a public meeting to hold an Executive Session. Such an initial statement may look like: "I move that we go into executive session so confidential information may be reviewed and discussed pertaining to (summarize what the confidential information; typically this includes matters pertaining to incident reports, behavior plans, personal information of potential or existing IOC members, etc.)"
5. **Executive Session (Second & Vote):** If the motion is seconded, a vote needs to be taken. If the majority vote approves it is the Chairperson's responsibility to notify any public in attendance that they must leave. Such a statement may look like: "The IOC has now voted to go into executive session. Members of the public now need to leave and take all personal items with them."
6. **In Executive Session:** Once the IOC is in executive session, it is the Chairperson's responsibility to remind all present that the business conducted and information discussed/reviewed is to remain confidential. Such a statement may look like: "May I remind everyone that all business or information discussed in the executive session of this meeting must remain confidential pursuant to A.R.S. 38-431.03(C)"
7. **Entering Public Session from Executive Session:** If the IOC is in executive session and wishes to return the meeting back into a public session to allow them to vote on topics discussed during the executive session or to adjourn the meeting, the statement may look like:

"The Committee is returning to public session to vote on any Executive Session topics and/or adjourn the meeting. Please be aware that the IOC members may no longer discuss confidential topics. As this session is public, non-IOC and public members may rejoin the meeting at this time."
8. **Adjourn the Meeting:** Once the IOC members have concluded discussion of topics on the agenda, the Chairperson has the option to dismiss the meeting, or do so with a majority vote (which is not required). Such a statement may look like:

"The meeting of (IOC Name) is adjourned. The next scheduled meeting will be held on (date of next meeting) at (time of next meeting)"

APPENDIX U: Annual Report Cover Sheet - Required**Douglas A. Ducey****Governor****Andy Tobin****Director****ARIZONA DEPARTMENT OF ADMINISTRATION****OFFICE OF THE DIRECTOR**

100 NORTH FIFTEENTH AVENUE • SUITE 403

PHOENIX, ARIZONA 85007

[Date]

(602) 542-1500

The Honorable Douglas A. Ducey
 Governor, State of Arizona
 1700 West Washington Street
 Phoenix, Arizona 85007

The Honorable Karen Fann
 President, Arizona State Senate
 1700 West Washington Street
 Phoenix, Arizona 85007

The Honorable Russell Bowers
 Speaker, Arizona House of Representatives
 1700 West Washington Street
 Phoenix, Arizona 85007

Dear Governor Ducey, President Fann and Speaker Bowers

On behalf of the __Agency_ - __Committee Name_ Independent Oversight Committee, it is my pleasure to present you the Annual Independent Oversight for _____. The report has been prepared in accordance with the requirements of A.R.S. § 41-3804(G).

Please contact me (____phone____) or _____person_____, Title (____phone____) if you wish to discuss the contents of this report.

Sincerely,

First and Last Name

IOC Chair

cc:

Carolyn Allen, Senate Health and Human Services Committee Chair
 House of Representatives Health Committee
 Matt Gress, Director, OSPB
 Richard Stavneak, Director, JLBC Staff

APPENDIX V: IOC Member Identification Badge (Actual Badge Not Shown)

The IOC member identification badge is to identify members as volunteers of the State of Arizona. This badge does not provide any additional permissions or privileges not granted in the authorizing statutes.

Badge holders, as public members, will be required to go through standard security screening upon entering a building.

Each badge will contain the member's picture, first and last name, and expire in a period not longer than two (2) years. Upon completion of volunteer service the badge need to be returned immediately to the IOC Chairperson, the Agency Liaison, or the address provided on the back of the card.

The IOC member badge is for identification purposes only.



APPENDIX W: IOC Formal Recommendations's Template



IOC Formal Recommendation

Instructions: To expedite the process, this optional template can be used upon the majority vote of a quorum of IOC members to submit formal recommendations to an Agency Director regarding laws, rules, policies, procedures and practices to ensure the protection of the rights of members receiving behavioral health and developmental disability services (A.R.S. § 41-3804.3 & A.R.S. §38-431). The IOC Chairperson should complete the form below in detail, then sign, date, and submit to the appropriate agency via email and send a copy to ADOA at ioc@AZ.gov.

Note: To ensure confidentiality & compliance of ARS §36-509 do not include any confidential information (PII or PHI)¹

IOC Name: _____

IOC Chairperson/Designee Submitting Form: _____

IOC Meeting Date: _____
(indicate the actual meeting date that the formal motion made/approved by a majority vote of IOC Members)

Name of Agency involved:	
Name of Division involved:	
Specific laws, rules, policies, procedures or practices involved: <i>(please list all)</i>	
Detailed description for the reason/s of the recommendation/s:	
Supporting evidence: <i>(summarize and attach any related documentation/ information if needed)</i>	
Other relevant information:	
Specific recommended change/s:	

Signature: _____ Date Submitted: _____

¹ PII: Personally Identifiable Information / PHI: Protected Health Information

APPENDIX X: IOC Formal Objection to Specific Problem's or Client's Rights Violation's Template



IOC Formal Objections to Specific Problems or Client Rights Violation/s

Instructions: To expedite the process, this optional template can be used upon the majority vote of a quorum of IOC members to submit a formal objection to "specific problems or client rights violation by department employees or service providers" to an Agency Director (A.R.S. §41-3804.F & A.R.S. §38-431). The IOC Chairperson should ensure completion of the form, then sign, date, and submit to the appropriate agency via email and send a copy to ADOA at ioc@AZ.gov.

NOTE: The information contained within this document is confidential and shall be sent directly to the Agency Director according to A.R.S. §41-3804(F)

IOC Name: _____

IOC Chairperson/Designee Submitting Form: _____

IOC Meeting Date: _____

(actual meeting date that the formal motion made/approved by a majority vote of IOC Members to submit the formal objection)

Name of Agency involved:	
Name of Client/s involved:	
Name of Service Provider involved: (if applicable)	
Name/s of department or provider employee/s involved:	
Detailed description of the objection, problem and/or specific client rights violated:	
Known date/s and/or time/s of occurrence/s:	
Supporting evidence: (summarize and attach any related documentation/ information if needed)	
Other specific/relevant information:	
Recommended relief/resolution: (if applicable)	

Signature: _____ **Date Submitted:** _____

APPENDIX Y: IOC Site Visit Log

Instructions: It is recommended that this form be used by applicable IOCs for the tracking of all site visits conducted by members throughout the year.



INDEPENDENT OVERSIGHT COMMITTEE SITE VISIT LOG

IOC Name: _____

Date of Site Visit (Enter the date the site visit was conducted)	Names of IOC Members (Enter the first and last names of all members who conducted the site visit)	Site Visit Location (Indicate the name and address of facility visited)	Purpose of Site Visit (State the specific purpose or indicate the reasons for conducting the site visit)	Scheduled/Unscheduled? (Enter S for scheduled and U for unscheduled)	Summary Report Completed/Shared (Indicate the date the Site Visit Summary Report was shared with IOC Members)

IOC.SVL.V2 (02.2019)