

LEGISLATIVE PERFORMANCE AUDIT AND OVERSIGHT COMMITTEE MINUTES

September 5, 2025

The Legislative Performance Audit and Oversight Committee met on Friday, September 5, 2025 at 10:00 AM in the State House, Room 100.

Members in attendance were as follows:

Rep. Gerald Griffin, Chairman
Rep. Lucy Weber
Rep. Keith Erf
Rep. Mary Jane Wallner
Sen. Timothy Lang
Sen. Howard Pearl
Sen. Keith Murphy
Sen. Cindy Rosenwald (joined during the meeting)

The meeting was called to order by Representative Griffin at 10:00 AM.

VOTE ON ACCEPTANCE OF THE JUNE 6, 2025 MEETING MINUTES:

On a motion by Representative Griffin, seconded by Representative Erf, that the minutes of the June 6, 2025 meeting be accepted. **MOTION ADOPTED.**

POTENTIAL AUDIT TOPICS – REVIEW STATUS OF PRIOR PERFORMANCE AUDITS:

Liquor Commission for Statewide Recycling - 1 Observation

The Liquor Commission’s Director of Administration, Patricia Peters, and Chief Financial Officer, Tina Demers, stated the Commission did not know about the observation. The performance audit was an audit of the Department of Administrative Services (DAS), not the Liquor Commission. The Commission has since communicated with DAS regarding an action plan for the observation.

Senator Lang asked Jay Henry, Supervisor of Performance Audits, if it would be appropriate to mark this observation as complete, given the Commission’s response. Henry affirmed, as long as the status is updated on the TransparentNH website.

Department of Employment Security for WorkReadyNH Program – 1 Observation

Richard Lavers, Deputy Commissioner of the Department of Employment Security, stated the Department had submitted a letter to the Committee last week explaining the open item from the 2016 audit. The Department of Resources and Economic Development – which had previously administered the WorkReadyNH program – no longer exists. The Department of Employment Security inherited the responsibilities of the Job Training Program, which funded WorkReadyNH,

as a result of changes made by the Legislature in 2019. Senator Lang asked Henry whether this observation can be considered resolved, given the legislative changes. Henry affirmed off screen.

Adult Parole Board – 26 Observations

Roger Phillips, Chair of the Adult Parole Board, stated he was not aware of the TransparentNH reporting requirements. The Board has submitted a written response depicting 18 of the 26 observations in the report as being fully resolved. Of the eight that remain, three need more work and the remaining five are nearing completion. Phillips described the training events that Board members have attended to address the recommendations. Phillips was not sure of the timeline for completion due to pending training but estimated an updated status report would be submitted within six months. He also noted pending IT updates were needed to perform the Board's work, including a Department of Corrections software update.

Regarding record retention, Phillips explained that the Board needs to scan old files to a digital format, but due to a 20 percent workforce reduction, a flooded storage room, and IT not having yet created a space for confidential records to be stored, this has not been completed. Senator Rosenwald asked for clarification on Observation No. 24, regarding records retention. Jay Mackey, Director of Operations, Adult Parole Board added that the Board's administrative rules conflicted with statutes for record retention, and that the Board currently follows the State's Archives and Records Management Act. He clarified that they do not have a policy yet, and no records have been destroyed since he has been in office starting in 2021.

Representative Griffin stated that the Board should provide a report by the end of March 2026 on the status of the eight open observations.

Wetlands Council

Senator Lang asked Henry whether the Wetlands Council would be in attendance – as discussed in the last meeting – even though their observation status has been updated to 100 percent fully addressed. Henry explained that he had talked to the Department of Environmental Services and the Council's responses were included in the Department's prior updates.

Other Issues

Senator Lang stated the Committee had previously discussed the option to audit non-state agencies and concluded that they do have that statutory authority. More specifically, the Committee discussed auditing school districts to examine low, medium, and high costs per special education student. Henry stated there was no decision made at the time, but that the special education performance audit is ongoing, suggesting the Committee may want to examine the report before moving forward. Senator Lang asked when the report will be done. Henry estimated the report would be completed in 2026, with 20 observations out of 50 already drafted. Senator Lang agreed to wait until 2026 for the report. Senator Rosenwald asked for clarification on the process of sharing observations with the Department of Education. Henry clarified that the Department is receiving about five at a time to provide sufficient time for a response.

Future Status Reviews

Senator Rosenwald inquired about whether the Committee could ask the Naturopathic Board of Examiners for a status report, due to none of the observations from their 2017 audit being addressed. Senator Lang suggested the Committee bring in OPLC, the Naturopathic Board of Examiners, the Board of Dental Examiners, and the Police Standards and Training Council to the next meeting.

OTHER BUSINESS:

Senator Lang and Representatives Griffin and Weber discussed the best way to keep departments accountable for audit recommendations and concluded that these follow up meetings are the most effective way to do it for the time being.

Senator Lang asked if any new audit topics are needed. Henry said not immediately, as the next audit team won't be freed up until 2026. Senator Lang requested that an informal block be included on the next agenda for the current status of ongoing performance audits.

DATE OF NEXT MEETING AND ADJOURNMENT:

Next meeting is scheduled for Friday, October 3, 2025, at 10:00 AM, in Room 100 of the State House. Representative Griffin adjourned the meeting at 10:51AM.

Gerald Griffin, Chair



STATE OF NEW HAMPSHIRE
OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION
OFFICE OF THE EXECUTIVE DIRECTOR

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AUDIT STATUS REPORT

Office of Professional Licensure and Certification
 Board of Dental Examiners Audit
 November 2022
 Status Update: September 15, 2025
 Goal to be completed: March 18, 2027

Summary of Audit Observations/Findings					
Number	Observation Title	Status			
		Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved
1	Improve the Board's Operating Environment and Organizational Culture				X
2	Develop Strategic Management Controls		X		
3	Develop Risk Management Controls		X		
4	Control the Board's Statutory, Regulatory and Procedural Framework			X	
5	Develop Compliance Management Controls			X	
6	Comply with the <i>Administrative Act</i>			X	
7	Improve Board Organization Controls			X	
8	Improve Anesthesia and Sedation Evaluation Committee and Anesthesia and Sedation Evaluation Committee-Advisory Subcommittee Controls				X
9	Improve Delegation of Authority of Controls				X
10	Improve Performance Management Controls		X		
11	Improve Knowledge Management Controls		X		
12	Improve Office of Professional Licensure and Certification Control Framework			X	
13	Improve Office of Professional Licensure and Certification				X

	Organization, Delegation, and Accountability Controls				
14	Improve Office of Professional Licensure and Certification Performance and Customer Service Controls			X	
15	Improve Fee Setting and Administrative Controls				X
16	Improve Fee Collection, Processing, and Waiver Controls				X
17	Develop Controls to Ensure Remediation of Audit Findings			X	
18	Improve Dental Care Industry Regulation		X		
19	Improve Initial Regular Dentist and Hygienist License Controls		X		
20	Develop Regular Dentist and Hygienist License Duration Controls				X
21	Improve Temporary License Controls				X
22	Revise Expanded Function Dental Auxiliary Permit Controls of Dissolve the Credential				X
23	Improve Lapsed and Inactive Credential Controls				X
24	Improve Dentist Anesthesia and Sedation Permit Controls				X
25	Improve Hygienist Anesthesia and Sedation Permit Controls				X
26	Improve Certified Public Health Dental Hygienists Controls				X
27	Rationalize Regulation of Dental Assistants			X	
28	Improve Applicant and Regulatee Monitoring Controls			X	
29	Improve Verification of Compliance with Character and Conduct Requirements				X
30	Improve Prescription Drug Monitoring Program Compliance Controls				X
31	Improve Regular Dentist and Hygienists License Renewal Controls				X
32	Improve Continuing Education Controls			X	
33	Improve Complaint Management Controls			X	
34	Improve Investigation Management Controls			X	
35	Improve Adjudicatory Proceedings and Hearings Controls			X	
36	Improve Disciplinary Process and Sanction Controls			X	

Observation 1: Improve the Boards’s Operating Environment and Organizational Culture

Summary of Finding: The Board of Dental Examiners (Board) improve its operating environment and organizational culture, design controls to efficiently and effectively achieve outcomes, and adequately control processes.

Current Status: The Office of Professional Licensure and Certification (“OPLC”) has hired three full-time board counsel and board administrators to ensure that all Boards, including the Board of Dental Examiners, have an attorney and administrator assisting them at every board meeting and adjudicative proceeding, and who is also available for board issues that crop up in between meetings. Additionally, in July of 2023, the legislature enacted RSA 310, which strengthened the Office of Professional Licensure and Certification’s ability to create processes and provide oversight of boards. OPLC has used that authority to promulgate rules and/or issue policies concerning the licensing application process, the disciplinary investigation process, the disciplinary proceeding process, recordkeeping, and administrative rulemaking. Since 2021, the legislature also restructured OPLC’s division to eliminate the division of technical boards and health care boards and create the division of enforcement and the division of board and licensing administration. This organizational structuring better mirrors the key functions of the Board of Dental Examiners, which is licensing and disciplining licensees. The executive director has also further organized the OPLC to provide all necessary services to the board in an efficient manner that respects necessary operational walls, such as between the Bureau of Hearings and the Division of Enforcement. See attached operational organizational chart.

Observation 2: Develop Strategic Management Controls

Summary of Finding: The Legislature consider exerting additional oversight of Board audit remediation. The Board develop and execute a risk-based, data-informed strategy and supporting plans.

Current Status: In July of 2023, the legislature enacted RSA 310, which dramatically reshaped the relationship between the Office of Professional Licensure and Certification (“OPLC”) and the Board of Dental Examiners (“Board”) with respect to the Board’s three main functions: rulemaking, licensing and discipline. Under RSA 310, the OPLC controls the process for licensing (RSA 310:4, II(c)) and disciplinary investigations and proceedings (RSA 310:9 and RSA 310:10, and has promulgated administrative rules that must be followed with respect to the licensing application process (Plc 300 et seq), the disciplinary investigation and adjudicative proceeding process (Plc 200 et seq, Plc 310, and Plc 311). The OPLC also can approve or deny applications for licensure in the first instance based upon objective criteria established by the board (RSA 310:4, II(c)) and appoints a presiding officer to render legal conclusions in all disciplinary (RSA 310:10, IV and VI) and licensing hearings (RSA 310:11, IV and VI). The OPLC is also tasked with assisting the Board with its rulemaking authority (RSA 310:4, II(f)) and maintaining the official records of the OPLC and Board (RSA 310:4, II(e)). The OPLC is also actively working on building a library of policies related to licensing, discipline, recordkeeping, and rulemaking with the

objective of ensuring the current law is followed. In addition to OPLC's oversight, the legislature also established an oversight committee for the OPLC and its professional licensing boards that meet at least quarterly (RSA 310:15). These legislative developments provided OPLC and the legislature with additional oversight of Board remediation in relation to this audit.

Observation 3: Develop Risk Management Controls

***Summary of Finding:** The Legislature consider how to structure regulatory agency controls to ensure agencies' actions conform to State policy and receive active State supervision. The Board develop objective, data-informed risk management processes tied to strategy and plans, regularly review risks, and establish mitigating controls.*

***Current Status:** See Observation 2.*

Observation 4: Control the Board's Statutory, Regulatory and Procedural Framework

***Summary of Finding:** The Board control, simplify, monitor, and refine its statutory, regulatory, and procedural framework.*

***Current Status:** See response to **Observation 2**. RSA 310 has controlled, simplified, monitored and refined the statutory, regulatory and procedural framework of all 58 boards, including the Board of Dental Examiners, by creating universal processes for licensing and discipline, and clearly delegating certain licensing, discipline, recordkeeping, and rulemaking authority to the OPLC as described in Observation 2 above.*

Observation 5: Develop Compliance Management Controls

***Summary of Finding:** The Board comply with statutory and regulatory requirements.*

***Current Status:** The OPLC has hired three full-time board counsel and board administrators to ensure that all Boards, including the Board of Dental Examiners, have an attorney and administrator assisting them at every board meeting and adjudicative proceeding, and who is also available for board issues that crop up in between meetings. Additionally, in July of 2023, the legislature enacted RSA 310, which strengthened the Office of Professional Licensure and Certification's ability to create processes and provide oversight of boards. OPLC has used that authority to promulgate rules and/or issue policies concerning the licensing application process, the disciplinary investigation process, the disciplinary proceeding process, recordkeeping, and administrative rulemaking. Having a consistent presence of an attorney and board administrator has assisted the board with complying with the law.*

Observation 6: Comply with the *Administrative Act*

Summary of Finding: *The Board discontinue enforcement of extra-legal and extra-jurisdictional rules, comply with the Administrative Procedure Act, and ensure its rules help control risks and structure Office of Professional Licensure and Certification (OPLC) procedural rules.*

Current Status: The OPLC has hired three full-time board counsel, board administrators, and a rule maker to ensure that all Boards, including the Board of Dental Examiners, have legal, administrative and rulemaking assistance at every board meeting and who are also available for board issues that crop up in between meetings. The OPLC has been assisting all board with revising their rules to ensure they comply with the changes brought about by RSA 310 and are otherwise compliant with the law. Board counsel and the rule maker regularly work with the Office of Legislative Services Administrative Rules Office to ensure existing and proposed board rules are based in statutory authority in accordance with RSA 541-a.

Observation 7: Improve Board Organization Controls

Summary of Finding: *The Legislature consider increasing the number of public Board members. The Board discontinue forming and operating subordinate entities without authority, effectively control authorized subordinate entity operations, and seek legislation to: add a member well-versed in dental anesthesia and sedation, reconstitute the Dental Hygienists Committee, and increase the number of public members.*

Current Status: The legislature passed legislation allowing the Board to have a subcommittee for anesthesia and sedation (RSA 317-A:2-b). The OPLC has hired three full-time board counsel, as well as board administrators to assist boards at every board meeting and to address issues that crop up in between meetings. This consistent assistance has helped the Board not create committees without authority. The legislature has not addressed the need for an additional public member.

Observation 8: Improve Anesthesia and Sedation Evaluation Committee and Anesthesia and Sedation Evaluation Committee-Advisory Subcommittee Controls

Summary of Finding: *The Board discontinue operating the unauthorized agencies regulating dentist anesthesia and sedation, discontinue allowing receipt of honorarium by its agents, and request legislative authority for an advisory body on dentist anesthesia and sedation. If authority is granted to create subordinate entities, oversee their operation to ensure compliance with requirements and expected outcomes are produced.*

Current Status: See Observation 7.

Observation 9: Improve Delegation of Authority of Controls

Summary of Finding: *The Legislature consider: 1) requiring the Board and OPLC to adopt rules formalizing the terms and conditions of their relationship or 2) directly establishing the detailed terms and conditions of the relationship through statute. The Board and the OPLC formalize the terms and conditions of their relationship through rules. The Board discontinue delegating substantive, discretionary authority; discontinue delegating authority when allowed to, but where no effective controls exist; adopt oversight and accountability rules; and actively monitor delegations.*

Current Status: See Observation 2.

Observation 10: Improve Performance Management Controls

Summary of Finding: *The Board develop, implement and refine a performance management system, and regularly assess and incorporate performance data into decision making.*

Current Status: The OPLC, which has only existed since 2015 and has undergone significant statutory changes, has been working on establishing policies to create standards and expectations for its employees' providing services to the board. This will allow it to better track employment performance and assess and incorporate it into decision-making. The OPLC is also in the process of moving into new software that will hopefully assist it in this endeavor.

Observation 11: Improve Knowledge Management Controls

Summary of Finding: *The Board ensure reliable and accurate records are retained, establish information requirements, migrate towards data-informed decision making, and ensure reporting is timely, reliable, and relevant.*

Current Status: The OPLC is in the process of scanning all paper files into our current licensing system. Additionally, the OPLC has invested in a new software system for both licensing and enforcement that will assist in ensuring availability of accurate and reliable records, ensure timely reporting, and help us make data informed decisions. Our current software also has these capabilities but not to the same extent as the new software. Lastly, the OPLC has been establishing policies related to recordkeeping, including with respect to archiving and document management.

Observation 12: Improve Office of Professional Licensure and Certification Control Framework

Summary of Finding: OPLC management maintain an operating environment and organizational culture supportive of effective management control; manage strategy plans, and risk; and develop, monitor, and refine comprehensive controls.

Current Status: See Observation 1.

Observation 13: Improve Office of Professional Licensure and Certification Organization, Delegation, and Accountability Controls

Summary of Finding: The Legislature consider clarifying OPLC roles and responsibilities and whether changes to the State's approach to regulating occupations and related industries are needed. OPLC management stabilize, control, and optimize its organization, delegations, and accountabilities; adopt rules on the terms and conditions of support it provides; and preserve assigned agency independence and discretionary decision-making authority.

Current Status: See Observation 2.

Observation 14: Improve Office of Professional Licensure and Certification Performance and Customer Service Controls

Summary of Finding: OPLC management identify its customers' inventory support requirements; develop a customer-centric strategy and plan; develop a performance management system; assist assigned agencies with operations, compliance, rulemaking, and knowledge management; ensure data reliability; migrate towards data-driven decision making; and routinely report on performance. The Board formalize performance expectations, communicate unsatisfactory performance and require remediation, and consider requesting statutory authority to oversee support quality.

Current Status: The OPLC has developed a strategic plan and mission statement that encompasses the concerns in this recommendation. See attached. The Board and OPLC maintain open lines of communication with senior OPLC leadership frequenting Board meetings to discuss concerns the Board may have with the operation of OPLC and the Board.

Observation 15: Improve Fee Setting and Administrative Controls

Summary of Finding: The Board seek statutory authority to require necessary fees, monitor OPLC fee setting, and levy fees to recover enforcement costs. OPLC management develop a cost

allocation system reflecting actual costs, avoid potential taxation, inventory and clarify fee requirements, seek necessary statutory changes, discontinue charging unauthorized fees, set fee values, and provide assigned agencies cost data to enable enforcement case cost recovery.

Current Status: In July of 2023, the legislature placed fee setting authority with the OPLC Executive Director, subject to the advice and recommendation of the Boards (RSA 310:6). The OPLC has developed a cost allocation methodology and is in the process of establishing procedures for enforcement case cost recovery.

Observation 16: Improve Fee Collection, Processing, and Waiver Controls

Summary of Finding: *The Board adopt rules on waiving late fees and ensure late fees are consistent. OPLC management ensure fee-related procedures conform to rules, adopt comprehensive fee administration rules, develop procedures, and discontinue unauthorized refunds.*

Current Status: The OPLC no longer charges late fees, eliminating the need to adopt consistent rules on waiver of late fees. OPLC has written accounting procedures in accordance with state and federal law, including the Department of Administrative Services manual. The OPLC has also developed a refund policy in accordance with RSA 310:5.

Observation 17: Develop Controls to Ensure Remediation of Audit Findings

Summary of Finding: *The Legislature consider increasing oversight of the OPLC's audit remediation efforts. OPLC management timely and fully remediate the conditions identified in audits and develop and publish required plans and reports.*

Current Status: OPLC has created an internal controls and contracts administrator who oversees all internal controls, contracts, and audits to address this concern. Additionally, the legislature assigned fee making authority to the OPLC (RSA 310:6) and created a legislative oversight committee (RSA 310:15).

Observation 18: Improve Dental Care Industry Regulation

Summary of Finding: *The Board develop a regulatory strategy; objectively establish public protection threats, assess regulatory costs and benefits, demonstrate each regulation is necessary, and identify the minimum level of regulation necessary; adhere to State policy; review license-specific practices and reciprocity requirements; seek necessary changes to statutory authority; ensure credentialing provides substantive public protection; eliminate perfunctory, wasteful, and gratuitous requirements; monitor the regulatory program; ensure the program operates as intended; and routinely report on program performance.*

Current Status: OPLC has created a quality assurance position to address this concern. In July of 2023, the legislature also placed rulemaking authority for the disciplinary process with the executive director (RSA 310:6). Additionally, the OPLC Rulemaking unit has been working with OPLC operations and the boards on eliminating unnecessary regulations and requirements.

Observation 19: Improve Initial Regular Dentist and Hygienist License Controls

Summary of Finding: *The Board fully implement State initial licensing policy, ensure requirements are necessary and used to assess qualifications, oversee initial licensing; substantively review applications, and approve applications before issuing licenses.*

Current Status: See observation 18. OPLC is in the process of implementing a new licensing system that will continue to improve adherence to law and rules.

Observation 20: Develop Regular Dentist and Hygienist License Duration Controls

Summary of Finding: *The Board ensure issued licenses comply with State policy, correct defective licenses, and seek statutory changes to implement staggered renewals. OPLC management discontinue noncompliant renewal practices and identify defective licenses it issued.*

Current Status: See observation 19. Additionally, the legislature created RSA 310:8, which addresses renewal of licensure in a uniform manner. In July of 2023, the legislature gave the OPLC control over the application process for all boards. The OPLC has created administrative rules (Plc 300) and internal policies to ensure licensing is done correctly and in accordance with the law.

Observation 21: Improve Temporary License Controls

Summary of Finding: *The Board improve controls over temporary licenses, seek legislative change to allow for temporary credentials for all credentials, oversee temporary credentialing, and approve applications before issuing credentials.*

Current Status: See observation 20. In July of 2023, the legislature enacted RSA 310:6, V, which creates a universal temporary license for health care professions, including those professions licensed by the Board. OPLC is in the process of coordinating with Boards to eliminate rules that no longer comply with current law, including temporary licensure. The OPLC Rulemaking Bureau consists of one full-time and one part-time employee and is responsible for approximately 25% of the state of New Hampshire's rulemaking. The OPLC has recently developed a system and policy for accepting, prioritizing, and fulfilling rulemaking requests and is working with all boards on eliminating board rules that do not comport with new statutory requirements for licensure.

Observation 22: Revise Expanded Function Dental Auxiliary Permit Controls of Dissolve the Credential

***Summary of Finding:** The Board examine the costs and benefits of the Expanded Function Dental Auxiliary permit and if the permit does not provide substantive public protection, eliminate it; otherwise, seek legislative changes to fully incorporate permits in statute, oversee permitting, and approve applications before issuing permits.*

***Current Status:** This permit no longer exists, and the Board has recently updated all permit requirements in accordance with Den 304. See observation 20.*

Observation 23: Improve Lapsed and Inactive Credential Controls

***Summary of Finding:** The Board approve reactivation and reinstatement applications before using licenses, seek statutory changes to ensure consistent requirements oversee reactivations and reinstatements, and monitor lapsed and inactive credentials.*

***Current Status:** In July of 2023, the legislature gave the OPLC control over the application process for all boards. The OPLC has created administrative rules (Plc 300) and internal policies to ensure licensing is done correctly and in accordance with the law.*

Observation 24: Improve Dentist Anesthesia and Sedation Permit Controls

***Summary of Finding:** The Board examine the costs and benefits of the dentist anesthesia and sedation permit renewal process and if the current process provides substantive public protection, seek statutory authority for permit renewal fees; otherwise, eliminate renewal requirements or make the process valuable; fully implement State policy; review permit applications; ensure all substantive requirements precede permit issuance; approve applications before using permits; and oversee permitting, inspections, and evaluations.*

***Current Status:** The Board does not control whether there is permitting for local anesthesia and nitrous oxide—the legislature does. After the 2019-2020 audit took place, the legislature eliminated requirements for local anesthesia for hygienists. This past legislative season, the legislature brought back requirements for local anesthesia. The requirement for having a nitrous oxide permit has remained in place since the audit.*

Observation 25: Improve Hygienist Anesthesia and Sedation Permit Controls

***Summary of Finding:** The Board examine the costs and benefits of hygienist local anesthesia and nitrous oxide minimal sedation permits and if permitting does not ensure substantive public protection, eliminate it; otherwise, seek statutory authority for permits, require competency maintenance, approve applications before issuing permits, and oversee permitting.*

Current Status: See observation 24.

Observation 26: Improve Certified Public Health Dental Hygienists Controls

Summary of Finding: *The Board establish the costs and benefits of the Certified Public Health Dental Hygienist certificate if certification does not provide substantive public protection, eliminate it; otherwise, seek necessary statutory authority, approve applications before issuing certificates, and oversee certification.*

Current Status: Certified Public Health Dental Hygienist is a statutory requirement. Only the legislature can eliminate a statutory requirement. The board, as an executive agency, leaves legislative policy decisions to the legislature.

Observation 27: Rationalize Regulation of Dental Assistants

Summary of Finding: *The Board ensure dental assistant regulation does not exceed its authority; discontinue extra-legal, informal, and improvised regulations; and harmonize dental assistant regulations with agencies with concurrent jurisdiction.*

Current Status: See observation 6.

Observation 28: Improve Applicant and Regulatee Monitoring Controls

Summary of Finding: *The Board review monitoring strategy and requirements, develop minimum necessary and cost-effective monitoring controls, ensure requirements are clear and consistently applied, and coordinate regulation with agencies with concurrent jurisdiction.*

Current Status: See observation 2.

Observation 29: Improve Verification of Compliance with Character and Conduct Requirements

Summary of Finding: *The Board discontinue relying on attestations, verify regulatee compliance with character and conduct requirements, remedy defective licenses issued without criminal history records checks, and seek legislative changes to require criminal history record checks for all primary credentials.*

Current Status: In July of 2023, the legislature sought fit to require all boards to only establish objective criteria for licensure. The OPLC has worked with the boards to ensure that all criteria, including professional character, meets the qualifications of this new requirement. Additionally, the legislature put the OPLC in charge of the licensing application process. The legislature has

also recently passed RSA 317-A:8-a, which requires all initial applicants to be subject to a criminal background check. OPLC has ensured that the Department of Safety has sought and received approval by the FBI of this statute. The statute is currently being used in daily operations to require criminal background checks.

Observation 30: Improve Prescription Drug Monitoring Program Compliance Controls

Summary of Finding: The Board ensure licensees timely register with the Prescription Drug Monitoring Program, implement statutory requirements, and sanction noncompliance.

Current Status: The Prescription Drug Monitoring Program has subsequently moved back to the Department of Health and Human Services, rendering this concern moot.

Observation 31: Improve Regular Dentist and Hygienists License Renewal Controls

Summary of Finding: The Board examine the costs and benefits of the license renewal process, revise requirements to ensure they provide substantive public protection, implement proactive monitoring, fully implement State policy, oversee renewal licensing, and approve applications before licenses are renewed.

Current Status: In July of 2023, the legislature gave the OPLC control over the application process for all boards. The OPLC has created administrative rules (Plc 300) and internal policies to ensure licensing is done correctly and in accordance with the law.

Observation 32: Improve Continuing Education Controls

Summary of Finding: The Board evaluate continuing education requirements to ensure they provide substantive public protection, formalize review processes, and conduct hearings for noncompliance.

Current Status: The OPLC rule maker and board counsel have been working with all boards on establishing objective criteria for renewal (including continuing education). The OPLC now controls rulemaking for application processing and has promulgated rules around auditing continuing education and holding licensing hearings. The OPLC Rulemaking Bureau consists of one full-time and one part-time employee and is responsible for approximately 25% of the state of New Hampshire's rulemaking. The OPLC has recently developed a system and policy for accepting, prioritizing, and fulfilling rulemaking requests and is working with all boards on eliminating board rules that do not comport with new statutory requirements for licensure.

Observation 33: Improve Complaint Management Controls

Summary of Finding: The Board monitor complaint processing and patterns of potential noncompliance, and discontinue dismissing adverse event reports.

Current Status: In July of 2023, the legislature placed the OPLC in charge of rulemaking for the disciplinary process. The OPLC has promulgated rules that comply with the law and does not issue dismissive adverse event reports because they are not statutorily authorized.

Observation 34: Improve Investigation Management Controls

Summary of Finding: The Board and OPLC management review statutory changes to investigations-related authority, and the Board discontinue informal investigations referrals, create investigative plans, and monitor investigation progress.

Current Status: See observation 33.

Observation 35: Improve Adjudicatory Proceedings and Hearings Controls

Summary of Finding: The Board and OPLC management review statutory changes to hearings-related authority, members attend necessary training, and the Board hold required hearings and monitor disciplinary case progress.

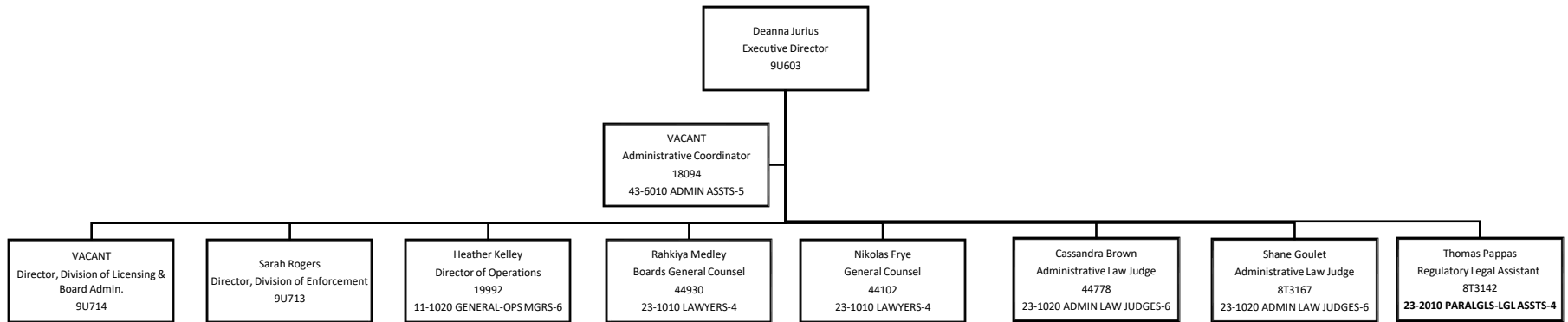
Current Status: In July of 2023, the legislature changed disciplinary hearings for all boards and placed the executive director in charge of creating process rules. As part of that change, the legislature also requires that the executive director appoint a presiding officer to preside over all disciplinary proceedings based on qualifications and experience. Currently the standing order has administrative law judges preside over hearings in the first instance. In the event no administrative law judge is able to preside, the executive director may appoint some other New Hampshire bar certified attorney.

Observation 36: Improve Disciplinary Process and Sanction Controls

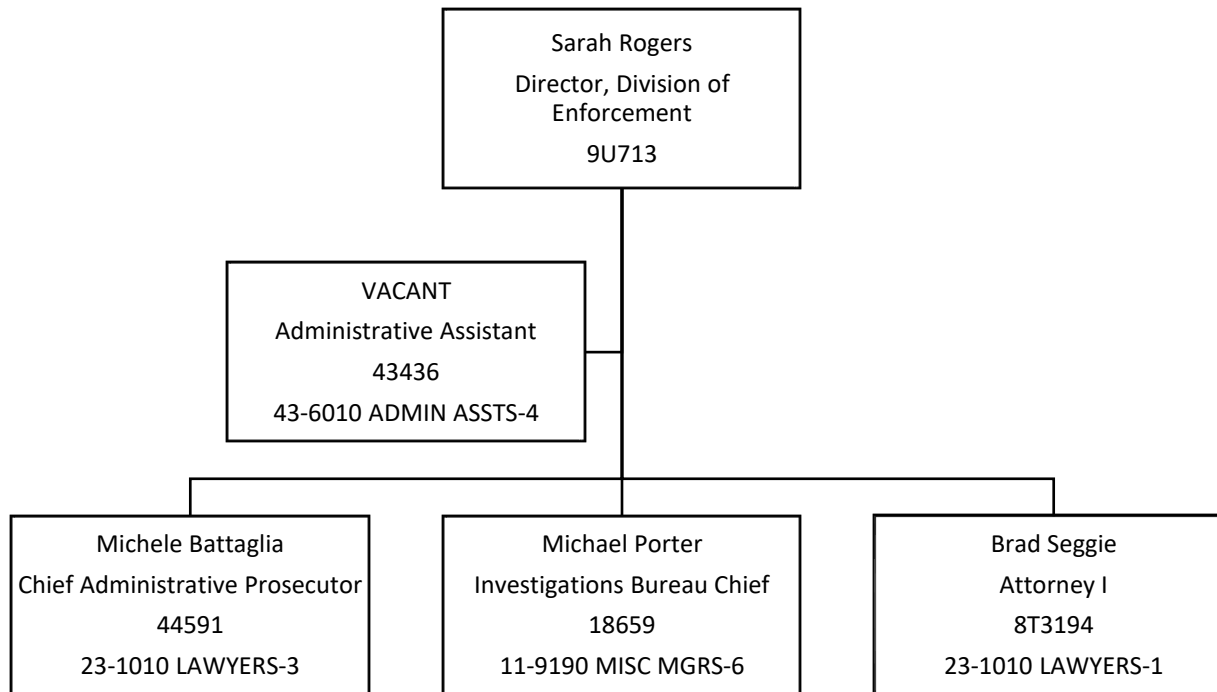
Summary of Finding: The Board identify gaps and refine the statutory disciplinary framework, discontinue imposing sanctions beyond its authority, and consistently address noncompliance.

Current Status: In July of 2023, the legislature changed this to an OPLC function. The OPLC has followed the applicable RSA 310 statutes and developed administrative rules for the disciplinary process. Further, the board always has board counsel and an administrative law judge present when deliberating cases to ensure compliance with the law with respect to finding and sanctions.

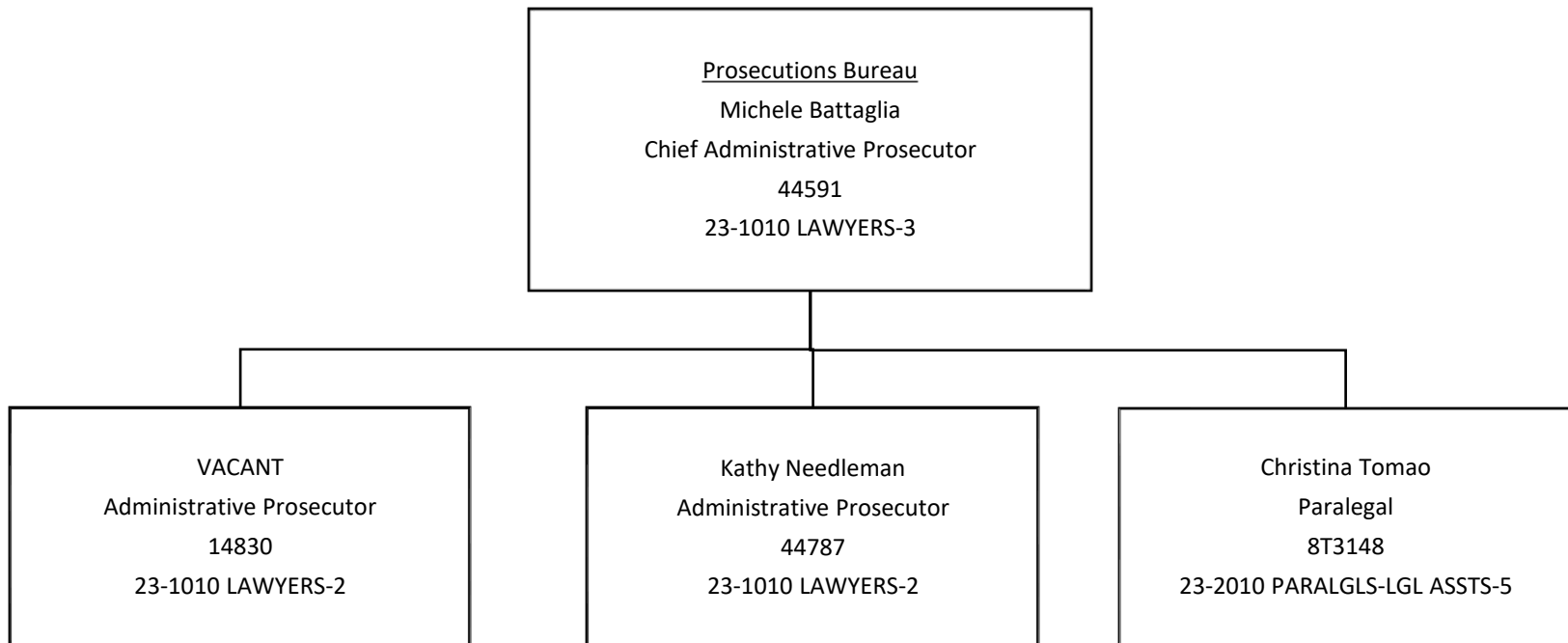
Office of Professional Licensure and Certification Organizational Chart



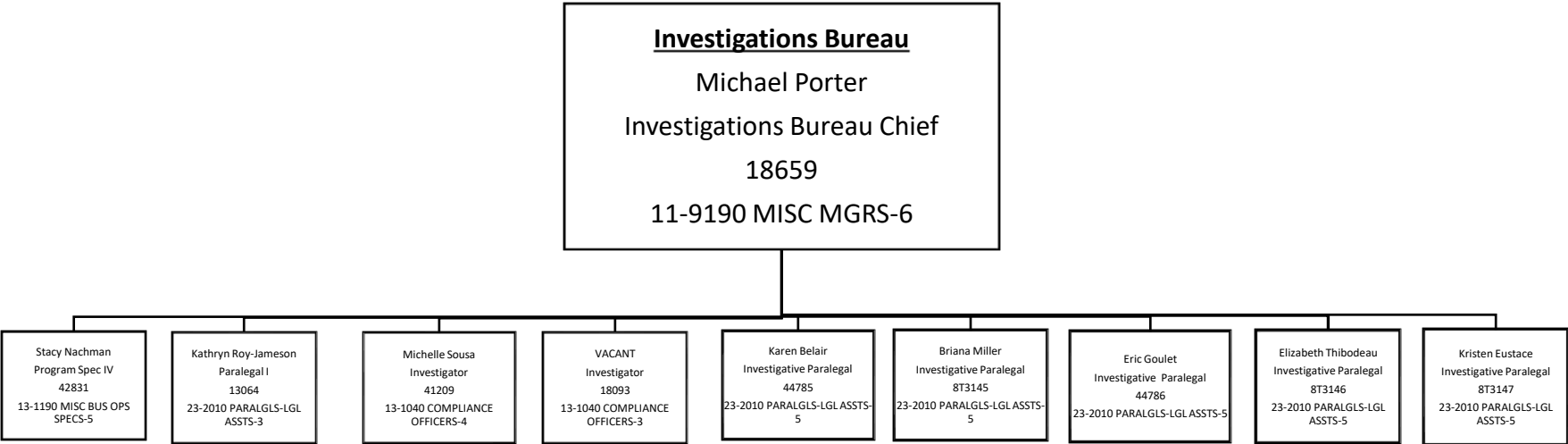
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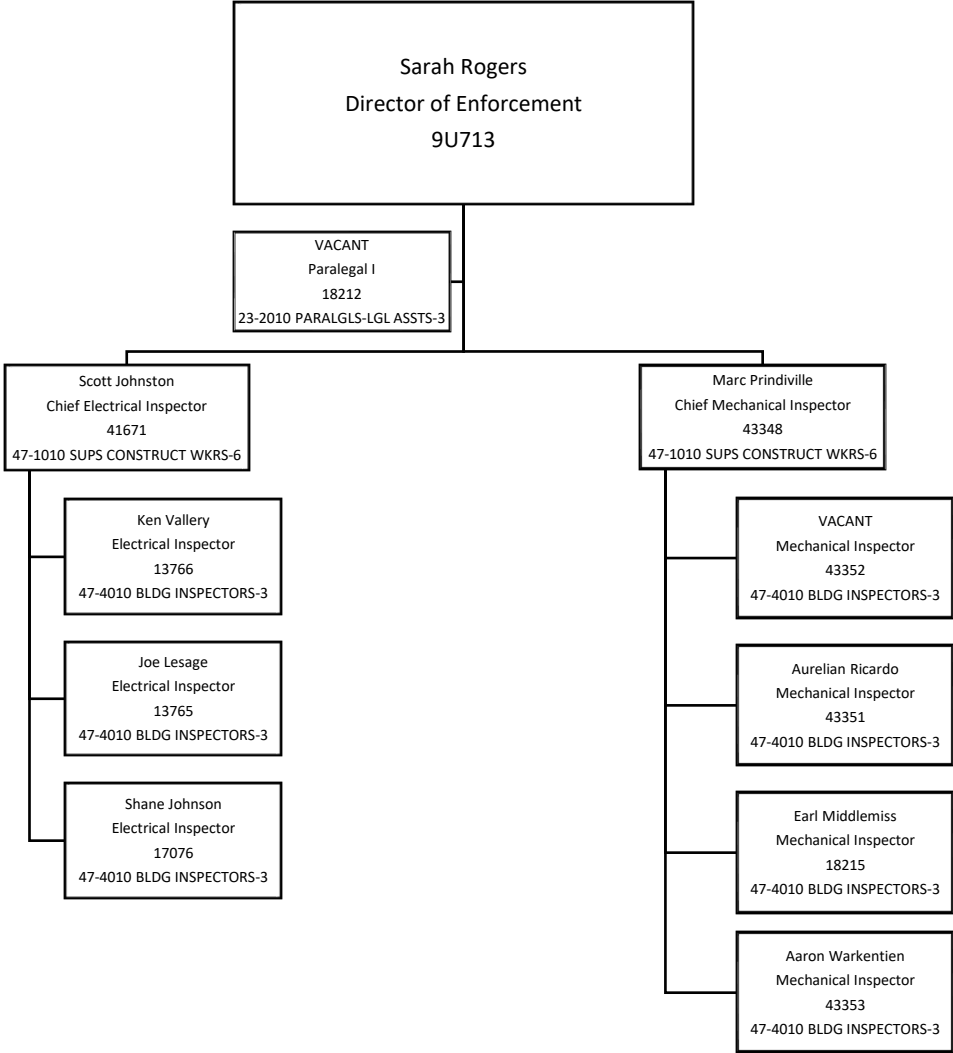
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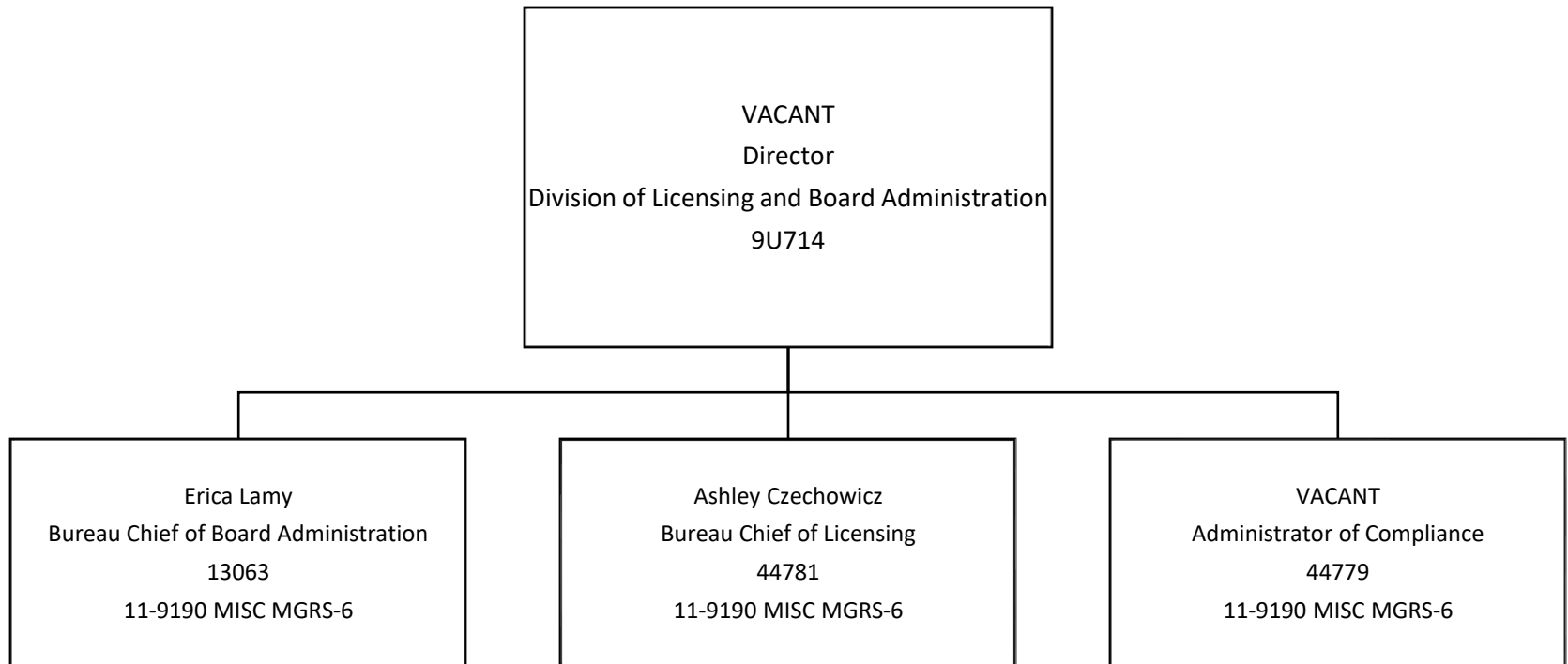
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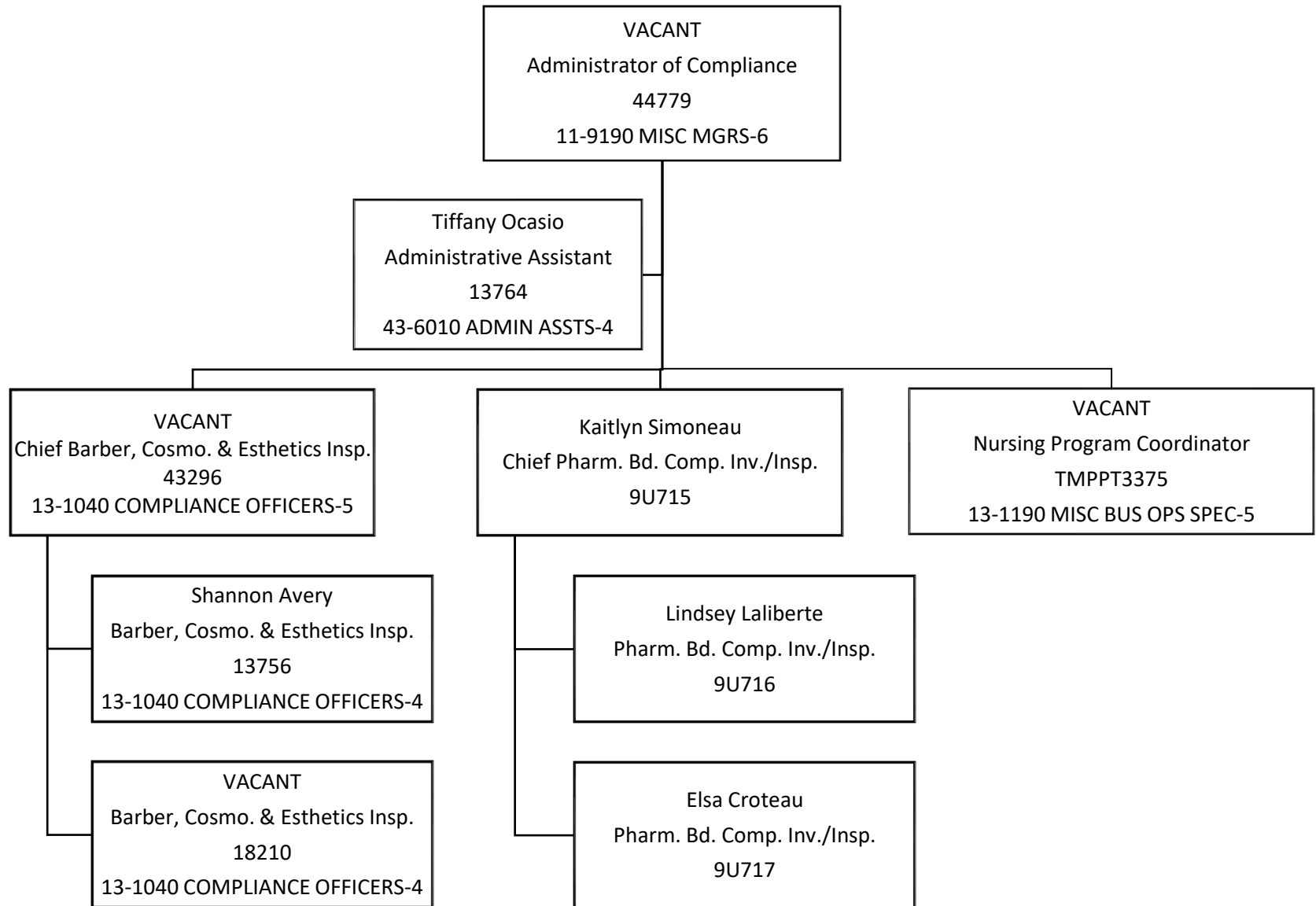
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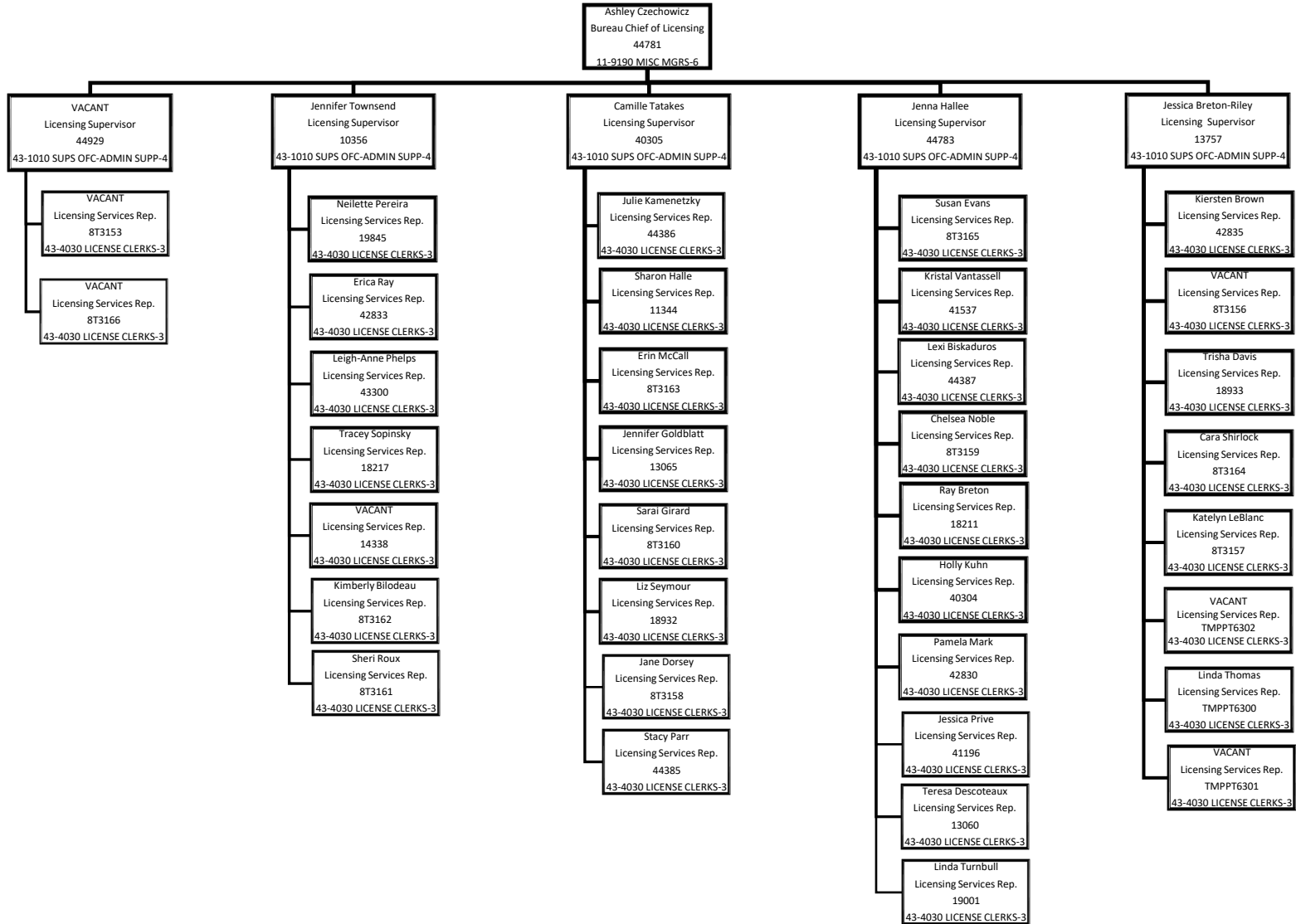
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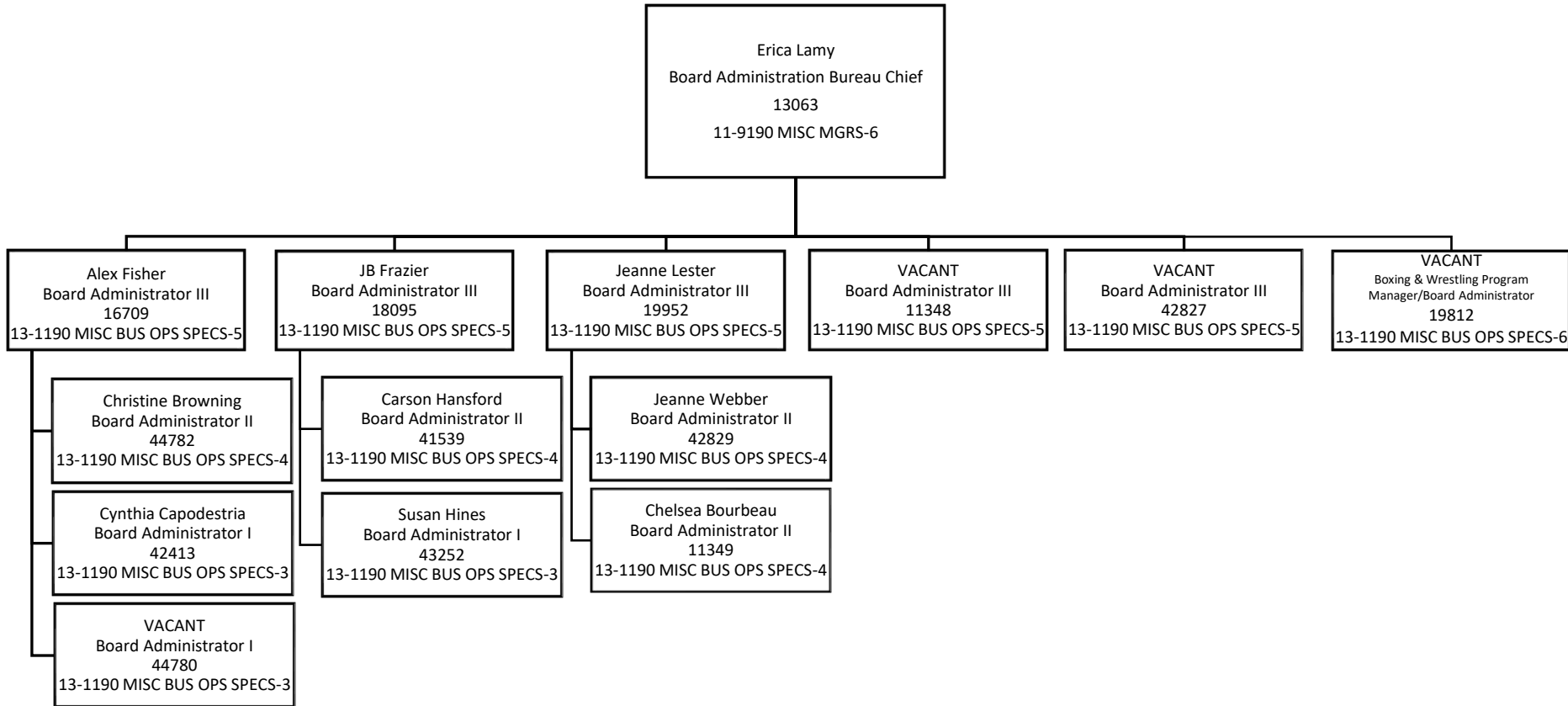
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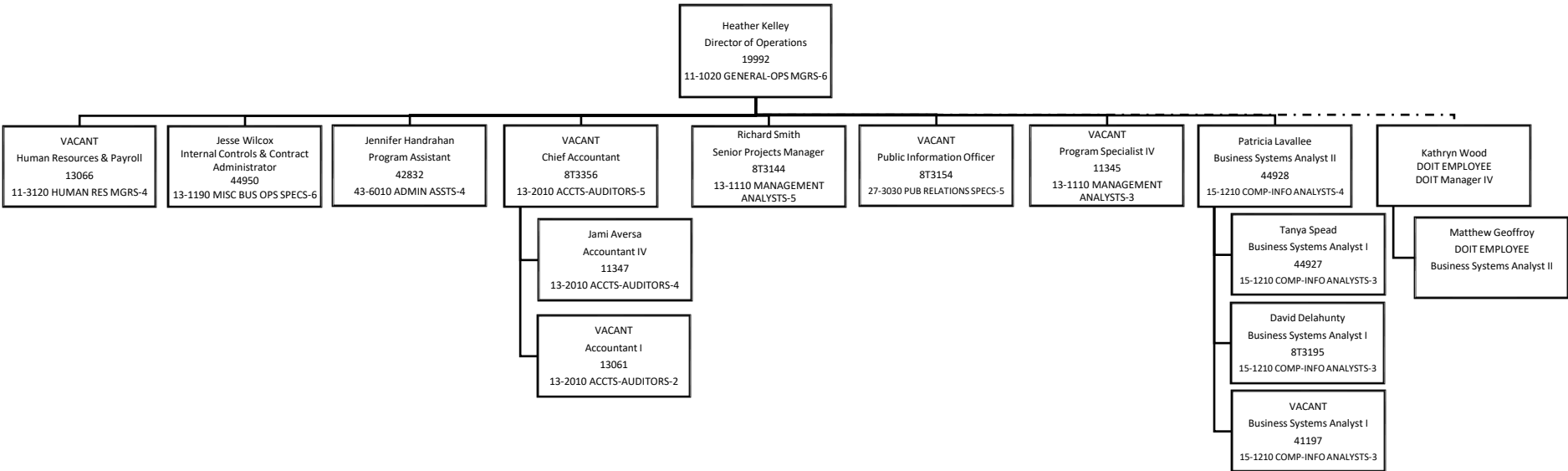
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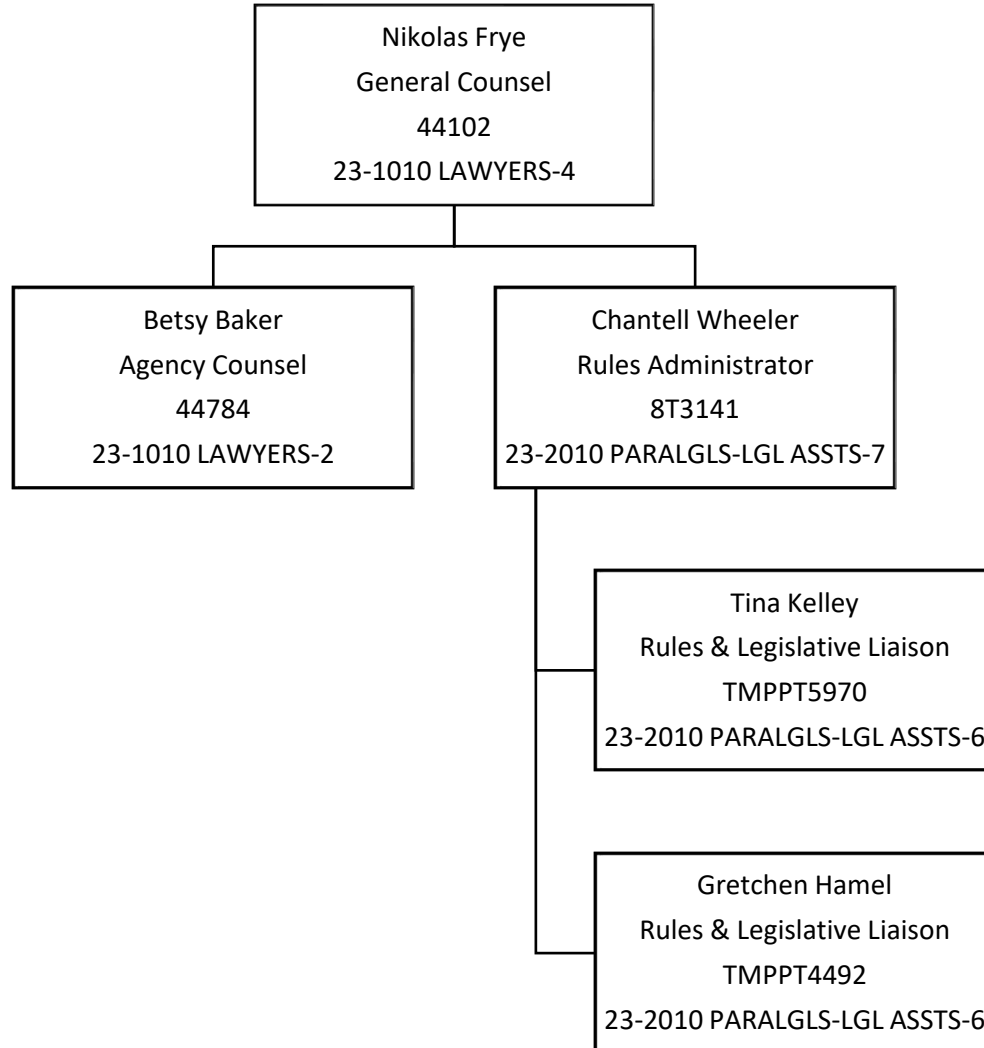
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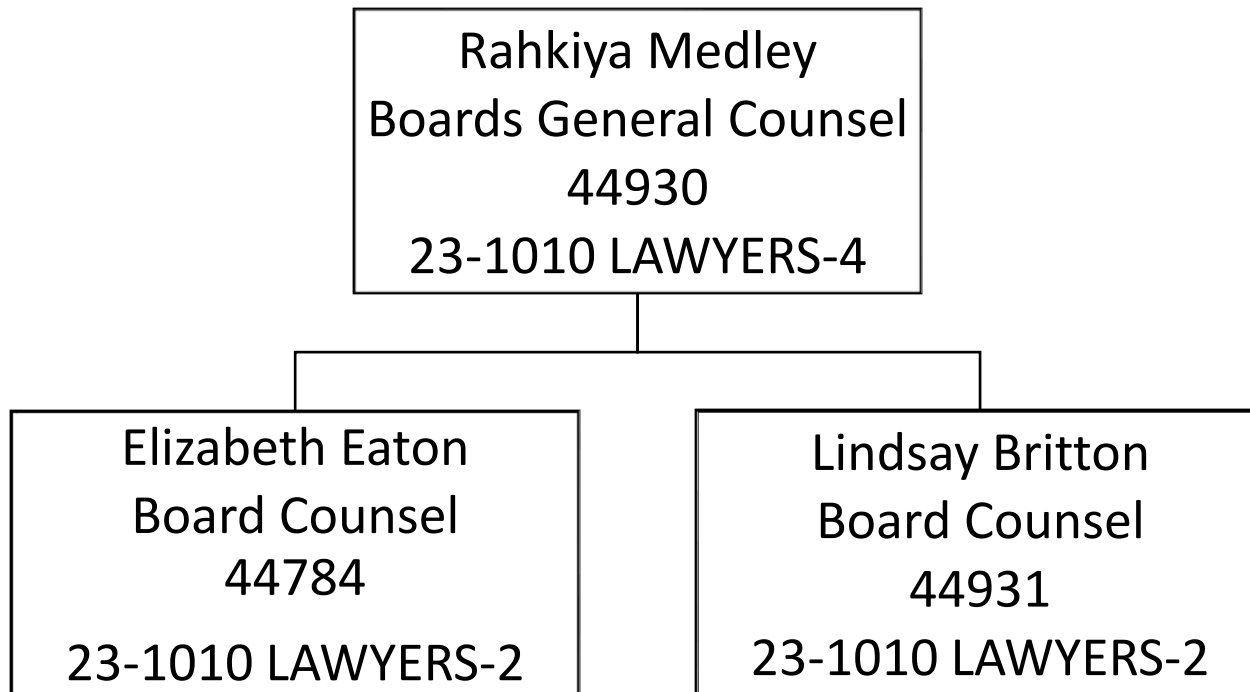
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STATE OF NEW HAMPSHIRE

OFFICE OF PROFESSIONAL LICENSURE AND CERTIFICATION

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AUDIT STATUS REPORT

Office of Professional Licensure and Certification

Naturopathic Board of Examiners

November 2024

Status Update: September 18, 2025

Target Completion Date: March 18, 2027

Summary of Audit Observations/Findings					
Number	Observation Title	Status			
		Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved
1	Define and Communicate the Scope of Practice for Naturopaths		X		
2	Establish Controls Over Otherwise Unregulated Drugs and Related Activities	X			
3	Improve Controls Over the Formulary	X			
4	Oversee Naturopaths Subject to PDMP Registration				X
5	Improve Initial Licensing Practices and Ensure Standards are Met				X
6	Issue Licenses for the Statutorily Required Two-year Period				X
7	Improve License Renewal Practices and Ensure Standards are Met				X
8	Improve Continuing Education Management Practices and Ensure Standards are Met				X
9	Improve Practices for Issuing and Renewing Specialty				X
10	Improve Management of Complaints, Investigations, and Enforcement			X	
11	Develop and Formalize Council Operations	X			
12	Ensure Quorum Requirements are Met				X
13	Comply with the Right to Know Law			X	

14	Develop Ethical Standards and Formalize Policy for Board and Council Operations			X	
15	Improve Board Rules		X		
16	Comply with Generally Applicable Administrative Statutes				X
17	Improve Records Management			X	
18	Clarify and Codify Terms and Conditions of Administrative Support			X	

Observation 1: Define and Communicate the Scope of Practice for Naturopaths

Summary of Finding: *The Naturopathic Board of Examiners (Board): adopt rules to define the naturopathic scope of practice; establish the qualifications for naturopathic assistants; formally respond to all inquiries; and inform the public about naturopaths practicing under a limited scope of practice.*

Current Status: The board has started the process of rulemaking to adopt rules to define scope of practice. OPLC is in the process of coordinating with all boards to update rules to comply with current law. The OPLC Rulemaking Bureau consists of one full-time and one part-time employee and is responsible for approximately 25% of the state of New Hampshire's rulemaking. The OPLC has recently developed a system and policy for accepting, prioritizing, and fulfilling rulemaking requests and is working with all boards on eliminating board rules that do not comport with new statutory requirements for licensure. The OPLC responds to all inquiries that do not require a declaratory ruling from the board. The Board and OPLC have the authority to provide the public with access to the applicable rules and statutes regarding scope of practice. Any interpretation of rules or statute would need to be done through the declaratory ruling process.

Observation 2: Establish Controls Over Otherwise Unregulated Drugs and Related Activities

Summary of Finding: *The Board: develop a systemic process to monitor and adequately control naturopaths' practices related to the prescription, administration, distribution, manufacture, and storing of drugs; include relevant statutory and regulatory requirements in a jurisprudence examination; and enter into an agreement with the Pharmacy Board to develop an inspection protocol. The boards may wish to seek legislation to include naturopaths within the scope of the Pharmacy Board's authority to inspect and regulate.*

Current Status: The board of pharmacy inspectors have authority to provide inspectional services to the naturopathic board pursuant to RSA 318:9-a. The OPLC is working on implementing an inspection process that will eventually encompass this board. The board has developed and administers a jurisprudence examination.

Observation 3: Improve Controls Over the Formulary

Summary of Finding: *The Board either seek clarification from the Legislature on Board practices that were inconsistent with statute, or: ensure the formulary contains only those elements specified in statute; remove from rule the functional similarity test to be applied to synthetic substances; promulgate rule to limit substances, and the use and doses of those substances, to those approved by the federal Food and Drug Administration; and clarify the Council on Doctors of Naturopathic Medicine Formulary's (Council) status as advisory to the board.*

Current Status: The formulary has not been able to meet due to a lack of members. This has made it difficult to implement changes based on the concerns noted.

Observation 4: Oversee Naturopaths Subject to PDMP Registration

Summary of Finding: *The Board: oversee naturopaths subject to Prescription Drug Monitoring Program (PDMP) registration; develop rules, policy, and procedure; ensure all naturopaths required to register with the PDMP do so; make failure to comply with registration and training requirements subject to disciplinary action; and consider whether membership on the advisory council is warranted, and seek relevant changes to statute.*

Current Status: The Prescription Drug Monitoring Program has moved over to the Department of Health and Human Services rendering this concern moot.

Observation 5: Improve Initial Licensing Practices and Ensure Standards are Met

Summary of Finding: *The Board: amend rules to ensure examinations administered by other jurisdictions are substantially equivalent and new applicants graduate from an institution that is accredited at or before the time of graduation; require a New Hampshire jurisprudence examination; clarify which institutions produced graduates not required to pass a competency examination or seek statutory changes to require all applicants pass a competency examination; amend application forms; and timely notify applicants of the receipt of applicants.*

Current Status: The legislature passed universal endorsement for boards within OPLC, and the Naturopaths are part of that process. The OPLC has promulgated rules establishing substantially equivalent requirements for licensure in New Hampshire, as well as a rule requiring the jurisprudence examination.

Observation 6: Issue Licenses for the Statutorily Required Two-year Period

Summary of Finding: *The Board approve license for a two-year period and correct any defective licenses it approved. Office of Professional Licensure and Certification (OPLC) management discontinue the mis-implementation of the June 30 license expiration requirement and correct defective licenses issued.*

Current Status: The legislature enacted RSA 310:8, which created a two-year renewal process. The OPLC has discontinued mis-implementation of the June 30 license expiration requirement.

Observation 7: Improve License Renewal Practices and Ensure Standards are Met

***Summary of Finding:** The Board: timely acknowledge receipt of renewal applications; ensure defective applications are remediated; renew complete, eligible applications; establish a time limit for complying with conditions on licenses; take final action on conditional licenses once conditions have been met; develop policies and procedure to ensure approval, conditional approval, and denial of license renewals are consistent; propose to deny noncompliant applications and enforce lapse requirements; discontinue prospective renewals; ensure timely action is taken to notify non-renewers of their legal inability to practice, and remove inactive licensees from the directory; and address record completeness issues with OPLC. OPLC management develop adequate controls to ensure compliance with Board rules and procedural requirements.*

***Current Status:** In July of 2023, the legislature gave the OPLC control over the application process for all boards. The OPLC has created administrative rules (Plc 300) and internal policies to ensure licensing is done correctly and in accordance with the law.*

Observation 8: Improve Continuing Education Management Practices and Ensure Standards are Met

***Summary of Finding:** The Board seek legislative changes to synchronize the continuing education (CE) and licensing cycles, and, once approved, amend rules; consolidate CE forms into one; and ensure CE hours and courses comply with rules. If the board does not pursue or obtain a statutory change to the three-year CE Cycle, we recommend the Board comply with existing rules. OPLC management ensure CE Forms distributed to naturopaths comply with Board rules.*

***Current Status:** RSA 328-E:13 and RSA 310:8 now synchronize the continuing education and licensing cycles. The Board amended its continuing education rules in 2020. OPLC is in the process of coordinating with all boards to update rules to comply with current law, which requires use of a universal renewal application and a board specific addendum if necessary. The OPLC Rulemaking Bureau consists of one full-time and one part-time employee and is responsible for approximately 25% of the state of New Hampshire's rulemaking. The OPLC has recently developed a system and policy for accepting, prioritizing, and fulfilling rulemaking requests and is working with all boards on eliminating board rules that do not comport with new statutory requirements for licensure.*

Observation 9: Improve Practices for Issuing and Renewing Specialty

***Summary of Finding:** The Board ensure: specialty certification applicants are timely notified of application receipt; records demonstrate achievement of educational requirements; ineligible specialty CE courses do not contribute to renewals; specialty field CE courses are properly*

approved; the application process is formalized; rules are amended or relevant statutory change are sought; and only those applications with sufficient, valid CE hours are approved for renewal.

Current Status: In July of 2023, the legislature gave the OPLC control over the application process for all boards. The OPLC has created administrative rules (Plc 300) and internal policies to ensure licensing is done timely, correctly, and in accordance with the law.

Observation 10: Improve Management of Complaints, Investigations, and Enforcement

Summary of Finding: *The Board: develop complaint and investigation procedures; promulgate rules to structure investigations; ensure investigative practices do not compromise the Board's independence in adjudicating matters; discontinue extra-jurisdictional enforcement and the use of letters of concern; and act on expired licenses. OPLC management discontinue enforcement activities without specific Board direction.*

Current Status: In July of 2023, the legislature gave OPLC control over rulemaking for the disciplinary process for all boards. The OPLC has created administrative rules (Plc 200 et seq., Plc 311, and Plc 312) and internal policies to ensure disciplinary investigations are done correctly and in accordance with the law. To be clear, there are now some enforcement activities that may occur without specific Board direction (RSA 310:9).

Observation 11: Develop and Formalize Council Operations

Summary of Finding: *The Board and Council develop: policy, procedures, and rules to govern Council operations; establish frequency and scope of periodic formulary reviews; develop mechanism for receiving input on the formulary; and clearly defined roles and relationships between the Board and Council.*

Current Status: The formulary has not been able to meet due to a lack of members. This has made it difficult to implement changes based on the concerns noted.

Observation 12: Ensure Quorum Requirements are Met

Summary of Finding: *The Board: ensure compliance with the Financial Disclosure statute; periodically review members' compliance; ensure only a quorum of eligible members participate in meetings; and seek legal advice regarding actions taken without quorum and ratify acts taken without proper authority. The Board's chairperson annually submit to the Secretary of State an organizational chart of all Board and Council members required to file statements of financial interest. OPLC management develop policy and procedures to ensure the Board and Council*

receive necessary administrative and clerical support to comply with the Financial Disclosure statute.

Current Status: The OPLC Human Resources position annually works with board members to ensure compliance with the Financial Disclosure statute. The OPLC also supplies the board with a board counsel and board administrator for each meeting to ensure compliance with the law, including quorum.

Observation 13: Comply with the Right to Know Law

Summary of Finding: *The Board and Council: provide notice for, and public participation in, all meetings; limit communications and business to duly constituted meetings; ensure meeting minutes meet minimum requirements; retain all public records; develop meeting procedures; include the Council throughout Board rules; include the Right-to-Know law in orientation materials; and consider developing a formal training program.*

Current Status: The OPLC has created a board orientation PowerPoint and occasionally coordinates with the New Hampshire Department of Justice on Board trainings regarding the law, including executive agency ethics and the right to know. Additionally, OPLC also supplies the board with a board counsel and board administrator for each meeting to ensure compliance with the law. The OPLC is in the process of creating a more formal process for board orientation.

Observation 14: Develop Ethical Standards and Formalize Policy for Board and Council Operations

Summary of Finding: *The Board: develop formal ethical standards for Board and Council operations, include the standards in rule, and ensure members are aware of the standards.*

Current Status: While not in rule, please see observations 12 and 13.

Observation 15: Improve Board Rules

Summary of Finding: *The Board: ensure rules remain in effect; track rule status; enforce only requirement contained in valid rules; repeal rule without statutory basis; ensure forms and their requirements are adopted in rule; and adopt missing rules.*

Current Status: The OPLC has hired three full-time board counsel, board administrators, and a rule maker to ensure that all Boards, including Naturopaths, have legal, administrative and rulemaking assistance at every board meeting and who are also available for board issues that crop up in between meetings. The OPLC has been assisting all board with revising their rules to ensure they comply with the changes brought about by RSA 310 and are otherwise compliant with the law. Board counsel and the rule maker regularly work with the Office of Legislative

Services Administrative Rules Office to ensure existing and proposed board rules are based in statutory authority in accordance with RSA 541-a. The OPLC Rulemaking Bureau consists of one full-time and one part-time employee and is responsible for approximately 25% of the state of New Hampshire's rulemaking. The OPLC has recently developed a system and policy for accepting, prioritizing, and fulfilling rulemaking requests and is working with all boards on eliminating board rules that do not comport with new statutory requirements for licensure.

Observation 16: Comply with Generally Applicable Administrative Statutes

***Summary of Finding:** The Board: ensure rules are provided to licensees, biennially publish a report on Board and Council activities, and improve orientation and training of Board and Council members. OPLC management assist the Board and Council in complying with statute. The Legislature may wish to consider compensating Board and Council members for mileage and per diem costs incurred in State service.*

***Current Status:** The OPLC provides hyperlink access to board rules on the board's website: [Naturopathic Board of Examiners Laws and Rules | NH Office of Professional Licensure and Certification](#). The OPLC has improved orientation and training of the Board and Council Members as explained in observations 12 and 13. The OPLC publishes an Annual Report that includes information on the Board. Board members are compensated for mileage and per diem costs incurred in State service. As previously explained, The OPLC has hired three full-time board counsel, board administrators, and a rule maker to ensure that all Boards, including Naturopaths, have legal, administrative, and rulemaking assistance at every board meeting and for board issues that crop up in between meetings.*

Observation 17: Improve Records Management

***Summary of Finding:** The Board: develop a records management system and retention schedules; make and maintain adequate records of Board and Council policies; decisions, procedures, and transaction; seal and properly sign its official acts; and ensure Board and Council records are timely available at the Board's office. OPLC management assist the Board and Council by performing administrative clerical, and business processing responsibilities.*

***Current Status:** The OPLC is in the process of scanning all paper files into our current licensing system. Additionally, the OPLC has invested in a new software system for both licensing and enforcement that will assist in ensuring availability of accurate and reliable records, ensure timely reporting, and help us make data informed decisions. Our current software also has these capabilities but not to the same extent as the new software. Lastly, the OPLC has been establishing policies related to recordkeeping, including with respect to archiving and document management. Board counsel and a board administrator are present at all meetings to ensure that board documents are properly signed. The OPLC General Counsel handles right-to-know requests on behalf of the board to ensure records are timely available at the board's office.*

Lastly, Board Administrators and licensing service representatives perform administrative and licensing functions for the board in accordance with RSA 310.

Observation 18: Clarify and Codify Terms and Conditions of Administrative Support

***Summary of Finding:** The Board formalize and clarify the terms and conditions of its relationship, and that of the Council to the OPLC. OPLC management: reevaluate the OPLC mission statement; standardize policy and practice for similar administrative functions; help ensure board members understand statutory requirements; develop a performance measurement system; ensure convenient access to public information; ensure the Council receives administrative support; develop policies documenting the lifecycle of transactions and ensure incompatible duties are segregated; and undertake more detailed cost accounting.*

Current Status: In July of 2023, the legislature enacted RSA 310, which dramatically reshaped the relationship between the Office of Professional Licensure and Certification (“OPLC”) and the Naturopaths (“Board”) with respect to the Board’s three main functions: rulemaking, licensing and discipline. Under RSA 310, the OPLC controls the process for licensing (RSA 310:4, II(c) and disciplinary investigations and proceedings (RSA 310:9 and RSA 310:10, and has promulgated administrative rules that must be followed with respect to the licensing application process (Plc 300 et seq), the disciplinary investigation and adjudicative proceeding process (Plc 200 et seq, Plc 310, and Plc 311). The OPLC also has the ability to approve or deny applications for licensure in the first instance based upon objective criteria established by the board (RSA 310:4, II(c)) and appoints a presiding officer to render legal conclusions in all disciplinary (RSA 310:10, IV and VI) and licensing hearings (RSA 310:11, IV and VI). The OPLC is also tasked with assisting the Board with its rulemaking authority (RSA 310:4, II(f) and maintaining the official records of the OPLC and Board (RSA 310:4, II(e)). The OPLC is also actively working on building a library of policies related to licensing, discipline, recordkeeping, and rulemaking with the objective of ensuring the current law is followed. In addition to OPLC’s oversight, the legislature also established an oversight committee for the OPLC and its professional licensing boards that meet at least quarterly (RSA 310:15). These legislative developments provided OPLC and the legislature with additional oversight of Board remediation in relation to this audit. The OPLC has created a mission statement and strategic plan that is in alignment with RSA 310. See also paragraphs 12, 13, 15, 16, and 17.

Agency Name	New Hampshire Police Standards and Training Council
Audit Name	Performance Audit
Audit Period	
Status Report Date	September 8, 2025

Summary of Audit Observations/Findings					
Number	Observation Title	Status [place X in status column]			
		Unresolved	Partially Resolved	Substantially Resolved	Fully Resolved
1	Require Psychological and Drug Screenings				X
2	Improve Applications and Certification Forms				x
3	Ensure Audits are Periodically Conducted				x
4	Improve Complaint and Disciplinary Process				x
5	Ensure Constant Management of Instructors				x
6	Incorporate Job Task Analysis into Curriculum Development			x	
7	Develop Performance Measurement System and Strategic Plan		x		
8	Improve Process Efficiency				x
9	Comprehensive Risk Management Needed				x
10	Improve Administrative Rules			x	
11	Evaluate Efficiency of Internal Maintenance Crew				x
12	Define Role of Reviewing County Corrections Academy Curriculum				x
13	Ensure Proper Authority to Enter Non-Public Session				x
14	Disclose Financial Interests and Ensure Quorum Requirements are met				x
15	Formerly Adopt PSTC Recusal Practices				x
16	Ensure Corrections Advisory Committee Complies with Statute		x		

Observation 1: Require Psychological and Drug Screenings

Summary of Finding: We recommend the PSTC ensure all State-employed law enforcement officers are screened as required by law;

- Ensure all officers employed by political subdivisions are appropriately screened according to whether the subdivision has funds budgeted for such testing;
- Develop rules to describe acceptable psychological and drug screening tests;
- Develop methods to ensure local hiring authorities either conducted required testing or demonstrated exemptions.

Current Status: **Fully Resolved**. NH RSA 106-L:6, IV and VI now requires all police officers, state corrections and probation parole officers to successfully complete both Psychological and Drug Screening prior to being hired by the hiring authority, the parameters of each screening defined in administrative rule. In 2020, RSA 106-L:16 Psychological Stability Screening Fund was created to assist any law enforcement agency to pay for such screening, (as a reimbursement) for up to 750 dollars per officer. The hiring authority must provide an affidavit to PSTC indicating that the newly hired officer has successfully completed both screenings. During department audits, PSTC auditors check that these screenings were completed.

Observation 2: Improve Application and Certification Forms

Summary of Finding: We recommend PSTC management improve its forms to ensure the application and certification processes are efficient and collect all the required information. The PSTC should ensure all the forms are complete upon receipt and only accept complete and compliant forms.

Current Status: **Fully Resolved**. PSTC previously used paper applications of different types that needed to be filled out by hand by police agencies who would then mail, fax or hand deliver them back to PSTC. We now have a completely computerized application and certification management system that every law enforcement officer has access to, (levels of access are dependent on the officers' ranks and responsibilities). We utilize this system for all academy and in-service application procedures as well as for discipline and the reporting of misconduct. The system tracks when we need to send an application back to the home agency for amendments or corrections and it tracks when it is returned to us and by whom. The system is designed to not allow the submitting party to proceed if there are open required fields of information that are needed to be complete before the form is submitted.

Observation 3: Ensure Audits are Periodically Conducted

Summary of Finding: We recommend PSTC develop policies and procedures defining the PSTC audit function and ensure they are periodically conducted.

Current Status: **Fully Resolved**. PSTC has adopted protocol defining circumstances under which council staff will audit law enforcement agencies for compliance with Council Administrative Rules, including audits whenever a new chief law enforcement officer has been appointed or elected; when the council,

the director, or the director's designee, receives information from a source deemed credible, outlining a potential violation of council rules.

Observation 4: Improve Complaint and Disciplinary Process.

Summary of Finding: We recommend PSTC management improve the complaint and disciplinary processes by: increasing authority in administrative rule to allow for the disciplining of non-terminated officers and officers found not-guilty of criminal offenses; and develop mechanisms and procedures to ensure unreported criminal misconduct is addressed.

Current Status: **Fully Resolved.** RSA 106-L was amended in 2022 that expanded the statutory authority of PSTC to receive and investigate allegations of misconduct and when sustained, to impose sanctions. RSA 106-L: 17 creates the Conduct Review Committee, (CRC) that oversees this process. RSA 106-L:2 clearly defines what misconduct is. RSA 106-L:20 mandates agencies to report to PSTC any allegation of misconduct that fits the definition. RSA 106-L:21 mandates agencies to investigate allegations of misconduct and report their findings to the CRC for review to include cases where an officer is arrested but found not-guilty. Any sustained findings by the CRC are then presented to the Council for disciplinary proceedings. PSTC now maintains a public portal to receive allegations of misconduct and provides a public list of sustained findings misconduct.

Observation No. 5: Ensure Consistent Management of Instructors.

Summary of Finding: We recommend the PSTC improve policies and practices to ensure the consistent management of instructors by developing credential verification and instructor approval processes for non-PSTC instructors with some degree of parity to the treatment of PSTC staff instructors, setting a minimum level of instructor training required and ensuring those standards are consistently met with written evaluations, and reducing the level of monitoring activities of non-PSTC instructors after instructional proficiency has been demonstrated and documented by the PSTC.

Current Status: **Fully Resolved.** Amendments to our Instructor Certification and Approval protocol have been approved by the Council and implemented. Those protocols include an application and approval process for all outside instructors, a policy that defines the requisite level of instructor training and experience required and the expectations of behavior by instructors, and the use of written instructor evaluation to ensure delivery of quality instruction. We have substantially reduced the level of monitoring of instructors once instructional proficiency has been demonstrated and documented.

Observation No. 6: Incorporate Job Task Analysis into Curriculum Development.

Recommendation: We recommend PSTC seek funding to ensure an updated job task analysis is completed and the results integrated into their curriculum.

Current Status: **Substantially Resolved.** PSTC secured funding to hire a company to conduct a JTA in the last budget cycle, developed and released an RFP to outline the scope of the project and to identify vendors and ultimately awarded a contract to Stanards and Associates of Chicago IL to conduct the JTA. The JTA was conducted and the results of the JTA were submitted to PST on June 13, 2025. The only

outstanding piece of the project that the vendor is completing is the Fitness Test Analysis study that was incorporated into the JTA project. Further, PST is now meeting with state SMEs in various broad topic groups to review the JTA findings and to review present curriculum to ensure all topics identified in the JTA are being addressed in the curriculum. The outstanding portions of this process should be completed by March of 2026.

Observation No. 7: Develop Performance Measurement System and Strategic Plan.

Recommendation: We recommend PSTC complete a comprehensive strategic plan which identifies goals and objectives for the PSTC and then design performance measures which can be tracked to determine the organization's achievement of these goals and objectives.

Current Status: **Partially Resolved but with explanation.** To date, the PST Council has not proactively developed a formal strategic plan that identifies formal goals and objectives for the agency. In essence, this LBA audit, along with the summary report and Executive Order 2020-19, based on the work of the Governor's Commission on Law Enforcement Accountability, Community and Transparency (LEACT) from June 16, 2020, have acted as this agency's strategic plan. Along with the 16 observations contained in this LBA report, there were a total of 48 recommendations from the LEACT EO 2020-19, and PST was responsible to address 22 of them.

It is clear that this agency needs to work with the Council to more proactively establish a strategic plan moving forward and will work to organize a council retreat/work session strictly to address this item by the end of this year.

Observation No. 8 Improve Process Efficiency.

Recommendation(s): We recommend PSTC work with the Department of Information Technology to reengineer its processes for efficiency and identify or develop suitable software to assist PSTC in achieving its primary responsibilities efficiently.

Current Status: **Fully Resolved.** PSTC has contracted with a software company that provides us with a full Record Management System and Learning Management System. The system allows for PSTC to maintain a comprehensive "Cradle to Grave" record of every certified officer in the State of New Hampshire. This record system allows PSTC to track all hiring, training and disciplinary records of all officers and streamlines the submission of all annual agency compliance reporting mandates.

Observation No. 9: Comprehensive Risk Management Needed.

Recommendation: We recommend the PSTC fully implement a risk management policy which includes a comprehensive written risk assessment.

Current Status: **Substantially Resolved.** We have developed and promulgated an agency policy titled RISK MANAGEMENT PROGRAM . We have established a Risk Safety Committee who have been meeting monthly to assess risk within the building and are developing a risk management plan. We are developing a comprehensive safety program and conducting job hazard analysis. Risk is being addressed

on an ongoing basis with repairs being made to unsafe conditions within the building and employee training increased to address specific hazards. All academy training staff is now required to be trained and certified in first aid, CPR, and AED use. New first aid equipment has been added throughout the facility. New vehicles for recruit training have been purchased to replace vehicles that would not pass inspection. We submitted a capital budget request for funds to improve building security, restrict and control building access, and video surveillance upgrades. Those requests have been approved, and the video and door access projects have been completed, and Public Works has assigned a number to our capital improvement project to secure the main entranceway to the building.

Observation No. 10: Improve Administrative Rules.

Recommendations: We recommend the PSTC improve administrative rules by ensuring rules are consistent with statute, updated timely, and all forms requiring information from external parties are properly adopted.

Current Status: **Partially Resolved**. PST Council has hired a part-time employee to oversee and coordinate the efforts of the Council appointed Rules Sub-committee. This subcommittee has finalized their work and have identified all proposed amendments to the rules and are now getting ready to begin the public input process required for rule making.

Observation No. 11: Evaluate Efficiency of Internal Maintenance Crew.

Recommendation: We recommend PSTC management explore opportunities to combine maintenance services with DAS and determine whether to keep its internal maintenance crew independent. Its assessment should be reported to the relevant legislative oversight committees for their review.

Current Status: **Fully Resolved**. We met with DAS Bureau of Plant and Property Management officials at PSTC. We toured the facility and discussed the potential operational advantages of shared services with DAS. After consideration of several aspects of the maintenance function at PSTC, we determined that overall, shared services with contracted custodial services. PST eliminated two full time maintenance staff and obtained a third-party vendor through the States's RFP process for such services at a cost savings. DAS personnel advised that they employ very limited specialized personnel and would be unable to provide shared services to PSTC. Fleet Maintenance: The auditors note that PSTC maintains an internal garage to perform inspections and minor repairs to vehicles, and suggests that it may be more efficient to send PSTC vehicles to a larger state garage or a private vendor. PSTC currently sends vehicles to private vendors for inspections and major repairs. Our mechanic performs basic and minor repair work. Most vehicles in the fleet are used as emergency driver training vehicles. The driving course includes intensive emergency driver training on an 800 foot driving pad involving quick starts and stops, tight corners with rapid acceleration and hard braking. The nature of the course results in extreme tire and brake wear. The driving course is conducted for two solid weeks during four full time police academies and on weekends during one part time academy each year. An on-site mechanic is important to reduce

interruption to the program. Outsourcing vehicle maintenance while the driving course is in session is not feasible.

Observation No. 12: Define Role in Reviewing County Corrections Academy Curriculum.

Recommendations: We recommend the PSTC adopt rules defining the approval and oversight of the county corrections academy curriculum, including: the frequency and scope of review, and the degree of autonomy delegated to the NHAC to implement an approved curriculum.

Current Status: **Fully Resolved.** The PSTC has adopted protocol for consistent annual review of the County Corrections Academy curriculum and allows that the NHAC may make non-consequential modifications to the Council approved curriculum, including modifications to the order courses are presented, and minor changes in the length of specific courses, without prior Council approval.

Observation No. 13: Ensure Proper Authority to Enter Non-Public Session.

Recommendations: We recommend PSTC management work with DOJ to develop policies and procedures to ensure proper authority is cited when entering into non-public session for the frequent scenarios before PSTC. The Legislature may wish to clarify whether exemption from a public setting under RSA 91-A:3, II(a) is for the protection of any public employee before any public body or whether an employer-employee relationship is required.

Current Status: **Fully Resolved.** The PSTC has reviewed and updated their Non-Public Session Worksheet which serves as a guide for members to assure proper authority is cited when entering into non-public sessions. Council staff and the DOJ have reviewed minutes of all non-public sessions entered into during the audit period to ensure proper authority is cited. The DOJ review found that none of the non-public sessions were entered contrary to law.

Observation No. 14: Disclose Financial Interests and Ensure Quorum Requirements are met.

We recommend the PSTC management: develop policy and procedures to ensure compliance with the financial disclosure statute and periodically review members' compliance; and only eligible members conduct PSTC business. We also suggest the Legislature consider clarifying RSA 15-A:6 regarding whether failure to file annual financial disclosures should prohibit public officials from serving in their appointed capacity.

Current Status: **Fully Resolved.** Council members have been reminded of their obligation to file the disclosures in a timely manner. Each December, members will be provided with a financial disclosure form for the following year and reminded of the deadline. Members will not be allowed to vote on any council action unless they have filed the disclosure. Council staff will review the Secretary of State web site to verify that disclosures have been filed and will advise the Council Chair of any delinquent filing. Also, the non-State employee member of the Corrections Advisory Committee has been informed of his obligation to file a Financial Disclosure Form and he has filed the form with the Secretary of State.

Observation No. 15: Formerly Adopt PSTC Recusal Practices.

Recommendation: We recommend PSTC adopt formal recusal practices in policy by defining potential conflicts of interest for PSTC members and determining when a recusal from the meeting or abstention from voting is the appropriate remedy to avoid a potential conflict.

Current Status: **Fully Resolved**. PSTC has consulted with the DOJ and has adapted a recusal protocol to include a recusal guide available to members during Council meetings.

Observation No. 16: Ensure Corrections Advisory Committee (CAC) Complies with Statute.

Recommendation: Develop policies and procedures to ensure the Corrections Advisory Committee consistently complies with statute and continues its efforts to utilize the Committee.

Current Status: **Partially Resolved**. The committee membership has been updated and includes only individuals authorized by statute. The PSTC has adopted protocol governing committee membership and practice, consistent with statute. The Committee convened during 2020 and 2021 but has not convened since then. The reason for the CAC not convening is that the NH Dept of Corrections has struggled to have the CAC membership positions, as defined in RSA 106-L, filled with any consistency. With new leadership in place at NH DOC, PST will re-establish a regular meeting pattern to meet the 2/year statutory mandate. It is my belief that some consideration should be given to changing the membership of the committee with members who might have more insight regarding the basic requisite knowledge of a 1-5 year corrections officer.

State of New Hampshire
LBA Audit Division
Performance Audits: Ten Year Status Summary
Agency Progress In Implementing LBA Recommendations As Of September 26, 2025

Performance Audit Topics	Year of Release	# of Observations	# Concur	# Concur in Part	# Don't Concur	Fully Addressed Observations	% Fully Addressed	# of Updates Completed	Year of Last Update	LPAOC Received Update	Notes
Board of Pharmacy Inspections - OPLC	2015	10	9	1	0	0	0%	1	2015		
DOC Sex Offender Treatment Program	2016	6	6	0	0	0	0%	0	N/A		
Real Estate Commission - OPLC	2017	13	8	4	1	0	0%	0	N/A		
Adult Parole Board - DOC	2019	13	11	2	0	0	0%	0	N/A		
DRED Office of Workforce Opportunity, WorkReadyNH	2016	9	7	2	0	8	89%	2	2025	☑	
DOS Division of Homeland Security & Emergency Mangement	2016	8	8	0	0	7	88%	6	2025		
DOT Bridge Maintenance	2016	20	3	15	2	14	70%	12	2025		
DHHS Prescription Drug Monitoring Program	2017	26	25	1	0	24	92%	2	2025	☑	
Naturopathic Board of Examiners - OPLC	2017	18	17	1	0	8	44%	1	2025	☑	B
Department of Information Technology	2018	24	23	1	0	21	88%	13	2025		
Adult Parole Board - Board	2019	26	21	5	0	18	69%	1	2025	☑	B
Police Standards & Training Council	2019	16	14	2	0	12	75%	3	2025	☑	B
DHHS Sununu Youth Services Center	2021	10	10	0	0	8	80%	5	2025		
Board of Dental Examiners & OPLC	2022	36	25	11	0	16	44%	1	2025	☑	B
OPLC Mental Health Workforce	2023	12	12	0	0	1	8%	1	2025	☑	A
Dept of Energy Weatherization Assistance Program	2023	6	6	0	0	4	67%	4	2025		
Commission for Human Rights	2025	25	24	1	0	0	0%	0	N/A		C
Statewide Recycling - DAS	2015	8	1	7	0	8	100%	8	2025	☑	B
DHHS Public Health - Food Protection Section	2015	29	18	11	0	29	100%	11	2024		
DES State Owned Dams	2015	12	12	0	0	12	100%	3	2017		
DHHS Child Support Services	2015	7	6	1	0	7	100%	7	2020		
DHHS Bureau of Development Services: Unspent Appropriations	2016	12	7	5	0	12	100%	6	2023		
DAS Back Office Consolidation	2016	12	10	2	0	12	100%	1	2019		
Community College System of NH - CCSNH & Foundation	2017	29	22	6	1	29	100%	2	2023		
DES Air Resources Division	2018	10	10	0	0	10	100%	4	2022		
DES Wetlands Bureau Permitting - Department	2019	60	57	3	0	60	100%	8	2024		
DES Wetlands Bureau Permitting - Council	2019	10	3	4	3	0	100%	8	2024		
DHHS Therapeutic Cannabis Program	2019	9	9	0	0	9	100%	11	2024		
NHED Bureau of Vocational Rehabilitation	2021	46	4	42	0	43	100%	4	2025		
Liquor Commission Division of Enforcement & Licensing	2021	47	44	3	0	47	100%	7	2024		
DHHS Child Care Licensing	2022	8	8	0	0	8	100%	5	2024		
NHED SPED Dispute Resolution Processes	2024	20	9	11	0	20	100%	3	2025		

Legend

Red = Agency Not Demonstrating Progress
Yellow = Agency Made Progress
Green = Agency Reports Corrective Actions Are Completed

Notes

- A - LPAOC recently received an update; it has not been posted on TransparentNH.
- B - Recently moved down the list based on new submissions
- C - Statutorily required to address findings