



The Tennessee Open Meetings Act passed by the General Assembly in 1974 requires that meetings of state, city and county government bodies be open to the public and that any such governmental body give adequate public notice of such meeting.

**TENNESSEE DEPARTMENT OF HEALTH
MEMORANDUM**

Date: September 28, 2017

To: Woody McMillin, Director of Communication and Media Relations

From: Wanda E. Hines, Board Administrator

Name of Board or Committee: Board for Licensing Health Care Facilities Board Meeting
(Call-in Number: 1-888-757-2790 passcode: 152602#)

Date of Meeting: October 4, 2017

Time: 9:00 a.m., CDT

Place: Iris Conference Room
665 Mainstream Drive, First Floor
Nashville, TN 37243

Major Item(s) on Agenda: See attachment.

LINK TO LIVE VIDEO STREAM:

October 4, 2017

<https://web.nowuseeit.tn.gov/Mediasite/Play/5b7a4051b9d74c669928e786e16971a81d>

This memo shall be forwarded from individual programs to the Public Information Office on the 15th day of the preceding month. The Public Information Office will prepare the monthly list of meetings within the Department and have ready for distribution to state media by the 28th day of the preceding month.

JOHN J. DREYZEHNER, MD, MPH
COMMISSIONER

BILL HASLAM
GOVERNOR

*THE MISSION OF THE TENNESSEE DEPARTMENT OF HEALTH IS TO PROTECT, PROMOTE AND
IMPROVE THE HEALTH AND PROSPERITY OF PEOPLE IN TENNESSEE*

BOARD FOR LICENSING HEALTH CARE FACILITIES

OCTOBER 4, 2017

IRIS CONFERENCE ROOM, FIRST FLOOR

**PLEASE REMEMBER TO SILENCE YOUR ELECTRONIC DEVICES
WHEN THE BOARD IS IN SESSION**

1. **WELCOME NEW BOARD MEMBERS:** Dr. Lisa Piercey, Hospital Administrator Representative replacing Mr. John Marshall.
2. **CALL THE MEETING TO ORDER AND ESTABLISH A QUORUM.**
3. **CONTESTED CASE HEARING(S).**
4. **REPORTS.**
 - A. **EMS REPORT** - Robert Seesholtz
 - B. **NURSE AIDE REPORT** – Wanda King
 - C. **OFFICE OF GENERAL COUNSEL REPORT** – Caroline Tippens
 - D. **HEALTH CARE FACILITIES REPORT** – Vincent Davis
5. **BOARD APPROVAL FOR THE FOLLOWING INTERPRETATIVE GUIDELINES**
 - A. 1200-08-30 Standards for Pediatric Emergency Care Facilities – Table 1: Part 2 Equipment

6. LICENSE STATUS REQUESTS.

PLEASANT VIEW HEALTH CARE CENTER, BOLIVAR

This sixty-seven (67) bed skilled nursing home facility is seeking to place their license on inactive status effective July 20, 2017. Care Centers Management Consulting will be closing on the purchase of this facility on September 1, 2017 and is planning to build a replacement facility in Bolivar.

REPRESENTATIVE(S): Michaela Poizner, Attorney

TENNOVA HEALTHCARE HOSPICE IN-PATIENT HOSPICE HOUSE, KNOXVILLE

This eighteen (18) bed residential hospice facility is seeking to place their license on inactive status effective June 15, 2017 pending a successful transaction completion. The Knoxville community has interest in keeping the facility open and operational through a non-profit organization.

REPRESENTATIVE(S): Patrick Todd Lyles, Sr. Vice President

PENDLETON HOUSE OF LOVE, MEMPHIS

This twenty-two (22) bed residential home for the aged (RHA) is seeking to place their license on inactive status as of October 1, 2017 while a decision is being made on rather or not to continue to remain a RHA.

REPRESENTATIVE(S): MacAuther Sharkey, Administrator

NASHVILLE SURGERY CENTER, NASHVILLE

This ASTC facility is requesting an extension waiver for their license to remain on inactive status for additional eighteen (18) months. This ASTC was acquired by HCA affiliate in September 2015 and the former owner had already suspended operations. Following the acquisition the current owner has evaluated options for future operations of the ASTC with the intent to find a solution that will best serve the needs of patients and physicians. The owner plan to renovate and update the facility, and new architectural designs and constructions plans have been developed for this project. Minority ownership of the ASTC (up to 49%) will be syndicated to local surgeons with the majority interest (at least 51%) being retained by the HCA affiliate. In order to bring and improved this facility with hospital and physician ownership an extension is needed. Nashville Surgery Center was granted inactive status on September 18, 2015 which expires on September 2017.

REPRESENTATIVE(S): Jerry W. Taylor, Attorney

COPPER BASIN MEDICAL CENTER, COPPERHILL

This twenty-five (25) hospital bed facility is seeking to place their license on inactive status as of October 1, 2017. Their request is due to the severe financial condition of Copper Basin Medical Center. Copper Basin Medical Center is pursuing a new basic business model effective October 1, 2017 which is the following: Clinic-Urgent Care, Walk-in, 7-Doc in Box etc.); Outpatient Diagnostic Treatment Center; and Ambulatory Surgery Treatment Center. Copper Basin Medical Center is applying for the necessary CONs for the Outpatient Diagnostic Treatment Center and the Ambulatory Surgery Treatment Center with HSDA.

REPRESENTATIVE(S): Dan Johnson, CEO and Tim Henry, CFO

SENIOR SAINTS' HOME, CHATTANOOGA

This Residential Home for the Aged (RHA) facility is requesting an extension waiver for their license to remain on inactive status for an additional twelve (12) months. Senior Saints' Home is working to finalize their plans review process with the department.

REPRESENTATIVE(S): Kennedy N. Omanwa, Administrator

TENNOVA HEALTHCARE-PHYSICIANS REGIONAL MEDICAL CENTER, KNOXVILLE

This twenty-five (25) bed nursing home is requesting an extension waiver for their license to remain on inactive status pursuant to T.C.A. §68-11-206(b)(1) for a period of an additional one (1) year. This facility voluntarily suspended operations on October 23, 2016. Tennova HealthCare-Physicians Regional Medical Center continues to be inactive and non-operational. The hospital desires to continue to maintain the TCU's nursing home license on inactive status while it determines the most effective means to provide post-acute and long-term care services to patient and utilize the licensed nursing home. This facility was initially granted inactive status on September 7, 2016 which expires on October 2017.

Representative(s): Chris Puri, Attorney

7. WAIVER REQUESTS.

A. THE FOLLOWING NURSING HOMES ARE REQUESTING TO WAIVE NURSING HOME REGULATIONS 1200-08-06-.04(1) FOR A TENNESSEE LICENSED NURSING HOME ADMINISTRATOR UNTIL A PERMANENT REPLACEMENT IS HIRED OR RECEIVES HIS/HER LICENSE IN TENNESSEE.

- (1) Lauderdale Community Living Center, Ripley
– Chasity P. Doss, Interim Administrator
- (2) Quince Nursing and Rehabilitation Center, LLC, Memphis
– Jennice Crowell, Interim Administrator
- (3) Pickett Care and Rehabilitation Center, Byrdstown
– Daniel Amodio, Interim Administrator
- (4) Hardin County Nursing Home, Savannah
– Nicholas Lewis, Interim Administrator

- (5) Signature Healthcare at Saint Francis, Memphis
– Jeffrey Stidam, Interim Administrator
- (6) Little Creek Sanitarium, Knoxville
– Paul Eirich, Manager
- (7) Claiborne Health and Rehabilitation Center, Tazewell
– Patricia Ketterman, President/Chief Administrative Officer
- (8) Concordia Nursing and Rehabilitation, Loudon
– Mr. Thomas Tackett, Interim Administrator

B. OTHER WAIVER REQUEST(S)

**NATIONAL BIOLOGICAL CORPORATION, NOLENSVILLE AND
THE RICHMOND LIGHT COMPANY, NOLENSVILLE**

National Biological Corporation and Richmond Biological Corporation both are home medical equipment facilities are seeking to waive the following Home Medical Equipment Rules: 1200-08-29-.04(7)-(8) and 1200-08-29-.06(5)(c)-Physical Location; 1200-08-29-.04(9) – Charity Care Statement; 1200-08-29-.06(2) – Infection Control; 1200-08-29-.06(4)(a),(f), 1200-08-29-.06(4)(b), 1200-08-29-.06(6)(c)-Equipment Management; 1200-08-29-10-Infectious and Hazardous Waste; and 1200-08-29-11-Records and Reports. Both businesses are based in Ohio and have applied for licensure in Tennessee.

REPRESENTATIVE(S): Chris Puri, Attorney and Kenneth Oif, General Manager

TRISTAR HENDERSONVILLE MEDICAL CENTER, HENDERSONVILLE

Tristar Hendersonville Medical Center, one hundred twenty-three (123) acute beds is requesting to increase their general acute beds count by eleven (11) beds which will be a total of one hundred thirty-five (135) beds. This request is being made pursuant to the Tennessee Health Services and Development Agency statute T.C.A. §68-11-1607(g).

REPRESENTATIVE(S): Jerry Taylor, Attorney

**SHANNONDALE HEALTH CARE CENTER, KNOXVILLE AND
WELLPARK AT SHANNONDALE, KNOXVILLE**

Shannondale Presbyterian Homes of Tennessee, Inc., is requesting for their administrator Mr. Keith Lee Boyce to serve as administrator for Shannondale Health Care Center and WellPark at Shannondale which both facilities are nursing homes.

REPRESENTATIVE(S): Keith L. Boyce, Interim Administrator

WOODRIDGE PSYCHIATRIC HOSPITAL, JOHNSON CITY

This eighty-four (84) bed psychiatric hospital is requesting to increase their adult/geriatric psychiatry by seven (7) and one (1) for child/adolescent psychiatry. This request is made pursuant to the Tennessee Health Services and Development Agency statute T.C.A. §68-11-1607(g). These proposed beds will be located on the Woodridge Psychiatric Hospital which is part of Johnson City Medical Center's campus.

REPRESENTATIVE(S): Dan Elrod, Attorney

8. DISCUSSION(S).

A. Propose Meeting Dates for Year 2018.

B. BIG SOUTH FORK MEDICAL CENTER, ONEIDA

This facility waiver request of the 2010 Guidelines for Design and Construction of Health Care Facilities (FGI) 2.2-3.1.3.6(9) Emergency Department requirement to have a decontamination room from the June 7, 2017 Board meeting was moved by the full board to the next Board meeting of October 4, 2017. Big South Fork Medical Center has been requested by the Board to provide more information and present for further review.

REPRESENTATIVE(S): Tony Taylor, CEO

9. APPROVAL OF MINUTES.

A. February 8, 2017 – Board Meeting

B. June 7, 2017 – Board Meeting

C. December 12, 2016 – Performance Improvement Issue Standing Committee Meeting

D. July 25, 2017 – Performance Improvement Issue Standing Committee Meeting

E. September 14, 2017 – Performance Improvement Issue Standing Committee Meeting

10. CONSIDERATION AND RATIFICATION OF LICENSURE APPLICATIONS (CHANGE OF OWNERSHIP (CHOWS) AND INITIALS).

A. CONSIDERATION.

(CHOWS)

Family Ministries John M. Reed Center, LLC, Limestone-Nursing Home

Family Ministries John M. Reed Center, LLC, Limestone-ACLF

B. RATIFICATION.

1. QUALIFYING APPLICATIONS

(INITIALS)

- (a) **Assisted Care Living Facility**
Bailey Manor, Cookeville
Dominion Senior Living of Athens, Athens
Sommerby of Franklin, Franklin
The Pavilion Assisted Living, Lebanon
- (b) **End Stage Renal Disease Facility**
Airways Dialysis, Memphis
Dialysis Care Center Crossville, LLC, Crossville
Fort Campbell Dialysis, Clarksville
- (c) **Home Health Services**
AxelaCare Health Solutions, LLC, Memphis
- (d) **Home Medical Equipment Facility**
Home Caregivers of Cookeville, LLC, Cookeville
Reliance Mobility, LLC, Columbia
- (e) **Hospitals**
Spire Rehabilitation Hospital, in Partnership w/HealthSouth, Jackson
- (f) **Nursing Homes**
Christian Care Center of Bristol, Bristol
- (g) **Professional Support Services**
Livitup, Inc., Memphis
- (h) **Residential Hospice**
The Residence at Alive Hospice, Inc.-Murfreesboro, Murfreesboro

2. **(CHOWS)**

- (a) **Ambulatory Surgical Treatment Center Facility**
Union City Surgery Center, Union City
- (b) **Assisted Care Living Facility**
Rockgate Assisted Living Facility, LLC, Cowan
- (c) **End Stage Renal Dialysis Clinics**
Dialysis Care Center Crossville, LLC, Crossville
Fresenius Kidney Care Columbia Tennessee, Columbia
- (d) **Home Medical Equipment Facility**
Gray Pharmacy, Gray
Professional Health Services, LLC, Winchester
- (e) **Nursing Homes**
Concordia Nursing and Rehabilitation-Loudon, Loudon
Concordia Nursing and Rehabilitation-Fairpark, Maryville

11. LICENSE STATUS UPDATES.

COPPER BASIN MEDICAL CENTER, COPPERHILL

Copper Basin Medical Center, Copperhill, have resume to provide inpatient services effective on July 20, 2017. They will have staff and have available a minimum of two (2) beds and will add more beds as needed. Copper Basin Medical Center came before the June 7, 2017 board meeting to seek options to continue to serve the surrounding community because they had temporarily suspended their inpatient services as of May 8, 2017.

BIG SOUTH FORK MEDICAL CENTER, ONEIDA

Big South Fork Medical Center, Oneida has reactivate their license to active status effective August 9, 2017 due to an approved full site survey of life safety and health standards and the approval by the Board.

SMOKIE MOUNTAIN DIALYSIS CENTER, SEVIERVILLE

Smokie Mountain Dialysis Center, Sevierville has notified the department that renovations are needed to the facility due to minor water damage. The facility closed on August 9, 2017. The facility has 42 Peritoneal Dialysis patients who will be receiving services at the Medical Directors' Office located at 107 Woodlawn Drive, Suite 200, Johnson City during the temporary closure. The facility plans to begin repairs on August 11, 2017; and expect all repairs to be completed within one (1) week.

ELDEREED HEALTH AND REHAB, LIMESTONE AND ELDEREED HAUS ASSISTED LIVING CENTER, LIMESTONE

Eldereed Health and Rehab and Eldereed Haus Assisted Living Center have notified the department to reactive their licenses to active status. Both facilities have submitted a Change of Ownership application and closing documentation was provided to support the request. Eldereed Haus Assisted Living Center was place on active status on August 28, 2017. Eldereed Health and Rehab was place on active status on September 5, 2017.

UNION CITY SURGERY CENTER (UCSC, LLC.), UNION CITY

Union City Surgery Center has notified the department to reactive their license from inactive to active effective June 8, 2017. This ambulatory surgical treatment center placed their license on inactive on February 8, 2017 for one year.

***FACILITY CLOSURES**

See attachment.

12. BOARD POLICY CONSENTS.

A. THE FOLLOWING NURSING HOMES ARE REQUESTING A WAIVER TO PROVIDE OUTPATIENT THERAPY SERVICES AS PROVIDED FOR BY BOARD POLICY #32:

Humphreys County Nursing Home, Waverly
Lakeshore Heartland, Nashville
Quality Center for Rehabilitation and Healing, Lebanon

13. REGULATION(S).

A. **BOARD APPROVAL FOR RULEMAKING HEARING.**

B. **PROPOSED RULE LANGUAGE**

14. **ORDERS.**

A. **Consent Orders.**

15. **OTHER BUSINESS.**

A. **OHCF P& P 240 – Facility Plans of Correction (POC)**

MINUTES
BOARD FOR LICENSING HEALTH CARE FACILITIES
October 4, 2017

The Board for Licensing Health Care Facilities Board meeting began October 4, 2017.

Dr. René Saunders, chairman, called the meeting to order. Mr. Vincent Davis, Director of Health Care Facilities, welcomed new Board member, Dr. Lisa Piercey who is serving as the Hospital Administrator representative. A roll call of attendance was requested.

Dr. René Saunders, Chairman –here
Mr. Paul Boyd – here
Mr. Robert Breeden – here
Dr. Evelyn Brock - here
Mr. Joshua Crisp – here
Mr. Thomas Gee – here
Dr. Jennifer Gordon-Maloney – here
Mr. Chuck Griffin - here
Ms. Patricia Ketterman - here
Ms. Carissa Lynch – here
Ms. Annette Marlar – here
Mr. Roger Mynatt – here
Dr. Lisa Piercey - here
Dr. Sherry Robbins – here
Dr. Kenneth Robertson – here
Mr. Jim Shulman, Chairman Pro Tem – not here
Ms. Gina Throneberry - here
Ms. Janet Williford – here
Mr. Bobby Wood – here

A quorum was established.

CONTESTED CASE HEARING:

Caroline Tippens, Office of General Counsel (OGC), presented a case against Friendship Haven Home for the Aged a licensed residential home for the aged. A court reporter was present during this hearing and record of the hearing can be found in OGC.

REPORTS:

EMS-

Robert Seesholtz, EMS Trauma System Manager, presented the EMS report. He provided the Board with the updates of February 10, 2017 Trauma Care Advisory Council Meeting report: Holston Valley Medical Center, Summit Medical Center, and Bristol Regional Medical Center. Those institutions were previously visited the first part of the year and Mr. Seesholtz was pleased to announce those required corrective action plans have been submitted and deem appropriate for review.

Mr. Seesholtz provided the Board with results of the following two facility trauma site visits –
Stone Crest Medical Center: Provisional Level 3 trauma center review specific report for hospitals and corporate administration medical step and trauma program was clearly present. The personnel at the site visit are clearly highly motivated and have demonstrated support of trauma program. Trauma site review team found the facility has met the requirements and standards to be designated as a provisional level 3 trauma centers and will be one year follow-up visit to see if they meet the requirements for full designation next year.

Sumner Regional Medical Center: Follow-up provisional Level 3 designation review with deficiencies; trauma site review team recommended continued provisional Level 3 for one year with a focused site review in one year.

Horizon Medical Center: Follow-up provisional designated in 2016. Multiple areas of improvement were noted and no deficiencies were found. Trauma site review team recommends Horizon Medical Center to grant full designation as a Level 3 Trauma center.

Mr. Mynatt made a motion to accept the above recommendation of the trauma site review team; seconded by Mr. Breeden. The motion was approved.

Nurse Aide –

Ms. Wanda King, Nurse Aide Manager, presented to the Board the Nurse Aide Report. She informed the Board there were 40,000 active nurse aides in Tennessee. Ms. King further explained in order to become certified as a nurse aide an individual has to complete a competency exam that includes a written and a skilled portion of the test that administered by an independent contractor and they had contracted with the state for about 5 years. Ms. King reported they are in the process in renewing the contract for the third time since she has worked with the nurse aide registry. She informed since we last developed an RFP process that was fairly simple is now quite involved and we have oversight from security, information technology and legal counsel as well. The process now will take 6 months at a minimal to develop a RFP and because of this we will not meet our deadline to have the RFP release and availability for a new contract to be issued by January 2018. In order to address the needs of nurse aides testing we're in the process of preparing an application to go before the physical review committee and request a 6 month extension of the current contract. Ms. King assured the Board they are working the best they can to ensure there is no interruption in those services and she will keep the Board updated as she know more regarding what is going on and when the RFP can be released.

OGC –

Ms. Tippens presented the OGC report. She indicated there were six open cases in OGC with six consent orders being presented during today's meeting. Ms. Tippens gave an update on the rules. She stated there are approximately five (5) sets of rules in process. The first set of rules which are considered to be combined rules are currently in the Attorney General's Office; the other sets of rules regarding central service technicians, ambulatory surgical center abortion language, administration language and nursing home civil monetary penalty are in the internal review process. The proposed care giver language from the AARP proposed invasive language for ambulatory surgical treatment centers, changes to personal support service agencies relative to the Department of Intellectual and Development Disabilities, fee increase and exemption from mail order, home medical equipment companies are also in internal review. The emergency rules regarding nursing homes drug disposal process are in process and will come back before the Performance Improvement Issue Standing Committee.

Health Care Facilities Report –

Mr. Vincent Davis, Director of Health Care Facilities presented the Health Care Facilities Report. Mr. Davis stated with regard to fee increases the Board approved a 30% percent licensing fee increase across the board for all facilities types. These were accepted and the rulemaking for this is currently in process. Once the rules have been approved the rules will go to the Secretary of State Office for final approval. Mr. Davis informed the Board with these fee increases five (5) new positions will be obtained to address some of the backlog of complaints and reviewing timely incidents reports. Mr. Davis presented slides presentation regarding statutory change to our requirement that all licensed health care facilities be surveyed within 15 months of their last survey. Due to the federal regulations, it splits long term care facilities are surveyed annually and all other non-domiciliary type facilities to a survey every three (3) years. There was a proposal that was put forth through legislation to change our state statute to be more in line with the federal statute. Mr. Davis stated by requiring that all facility types be surveyed annually they are able to zoom into these facilities that have fallen off the grid. He also added regard to legislation it was our statute 68-11-20-201(18) that was amended. It added that residential homes for the aged be authorized to administer medication to residents only if it employs or contracts with a physician, nurse, or physician assistant to administer medications to residents so we identified that in this particular provider type, there was administration of meds that is going on by personnel that were not qualified to do so. Lastly, with regards to change in statute independent living facilities there were changed to that definition of a single family resident building, establishment or complex use as a boarding home and active adult community a 55 plus community, senior apartments and a retirement community or retirement home that provides housing for adults who are 55 years of age or older that was the definition for an independent living facility. A lot of confusion regarding independent living, assisted care living facility (ACLF) and so forth so that language was brought forth to specify what an independent living facility mean. In addition it indicates that an independent living facility may provide meals, housekeeping services, and social activities for the entertainment of its resident but does not provide any nursing or medical care including medication administration or assistance with medication administration. These are the important points between assisted care living facility, a nursing home and independent living facility that add clarity around those three (3) provider types.

BOARD APPROVAL FOR THE FOLLOWING INTERPRETATIVE GUIDELINES (IG):

The following IG was presented to the Board for approval –

- 1) 1200-08-30, Pediatric Emergency Care Facility (PECF)-Table 1; Part 2 Equipment. A physician from a Pediatric Emergency Department suggested that the list of items listed here for the most part is unavailable on the market and the physician was requesting the interpretative guidelines to exclude the requirement for these items. Mr. Davis stated that Pediatric Emergency Care Units in hospitals and many hospitals were very appreciative for looking at the PECU rules. It has been identified things that are in the rules are outdated that we have been asked to take a look at and make changes. **Ms. Williford made the motion to approve the interpretative guidelines; Ms. Throneberry seconded the motion. The motion was approved.**

LICENSE STATUS REQUEST(S):

Ms. Reed presented the eight (8) licensure status requests:

Pleasant View Health Care Center, Bolivar –

This 67 licensed bed nursing home is seeking to place its license on inactive status for one (1) year. Care Centers Management Consulting purchase this facility on September 1, 2017 and is planning to build a replacement facility in Bolivar. Representative for the facility is Ms. Hannah Cole, attorney. **Mr.**

Breeden made a motion to approve the inactive status; seconded by Mr. Gee. The motion was approved.

Tennova Healthcare Hospice In-Patient Hospice House, Knoxville –

This 18 bed residential hospice facility is seeking to place their license on inactive status pending successful transaction completion. Almost Family is going to close this residential hospice and has already discontinued their services but community members are interested in taking over this facility. The community member and the facility are in discussion at this time. **Mr. Mynatt made a motion to approve the inactive status; seconded by Dr. Robbins. The motion was approved.**

Pendleton House of Love, Memphis

This 22 bed residential home for the aged (RHA) is seeking to place their license on inactive status. Mr. Sharkey, Owner/Administrator is requesting the license to be placed on inactive for one (1) year while he reassess, reorganize and decide whether or not to remain a RHA. Pendleton House of Love's license was currently on probation. Mr. Sharkey had requested that the probation be lifted from the license. Ms. Tippens stated she has received the report from the West Tennessee Regional Office stating that Pendleton House of Love has no current deficiencies and the former deficiencies tags were cleared. Ms. Tippens prepared a petition for the Order of Compliance for Mr. Sharkey to sign to lift the probation from the facility's license and present to the Board. **Mr. Boyd made a motion to accept the Order of Compliance; seconded by Ms. Lynch. The motion was approved.**

The Board next order of business is to determine whether the Board allow Pendleton House of Love's license to be placed on inactive status. **A Board member made a motion (could not identified by CD recording) to approve the inactive status; seconded by Mr. Boyd. The motion was approved.**

Nashville Surgery Center, Nashville

This ambulatory surgical treatment center is requesting an extension of the inactive status of its license for additional eighteen (18) months. The current owners have plans to renovate and update the facility and new architectural designs and construction plans has been developed for this project. In order to improve this facility with hospital and physician owners an extension is needed. **Mr. Breeden made a motion to approve the inactive status; seconded by Mr. Griffin. The motion was approved.**

Copper Basin Medical Center, Copperhill

This 25 hospital bed facility is seeking to place their license on inactive status for one (1) year. Their request is due to the severe financial condition of Copper Basin Medical Center. Copper Basin Medical Center is pursuing a new basic business model which will include a Clinic-Urgent Care, Walk-in, 7-Doc-in-Box, outpatient diagnostic treatment center; and ambulatory surgery treatment center. Copper Basin Medical Center is applying for the necessary CONs for the outpatient diagnostic treatment center and the ambulatory surgery treatment center with HSDA. Mr. Johnson, CEO emphasized to the Board they are not changing services to ASTC or outpatient therapy until they explore all options. **Dr. Robertson made a motion to approve the inactive status; seconded by Mr. Gee. The motion was approved.**

Senior Saints' Home, Chattanooga

This 8 bed residential home for the aged (RHA) facility is requesting an extension of the inactive status of its license for an additional twelve (12) months. The representative for the facility Mr. Omanwa was not present at the board meeting. The Board took no action.

Tennova Healthcare-Physicians Regional Medical Center, Knoxville

This 25 bed nursing home is requesting an extension of the inactive status pursuant to T.C.A. §68-11-206(b)(1) for a period of an additional one (1) year. The hospital desires to continue to maintain the TCU's nursing home license on inactive status while it determines the most effective means to provide post-acute and long-term care services to patient and utilize the licensed nursing home. **Mr. Breeden made a motion to approve the inactive status; seconded by Mr. Griffin. The motion was approved.**

Tri-Cities Outpatient Surgery, Inc., Johnson City

This ambulatory surgical treatment center (ASTC) is requesting an extension of the inactive status for an additional two (2) year. Tri-Cities Outpatient Surgery Center requested inactive status due to declining reimbursement and declining volume. Ms. Stufflestreet, Administrator stated they are currently recruiting and bringing in some new owners and physicians. This will have a direct impact when these new owners and physicians are brought in as the decision about the surgery center will use that space or give up the ASTC license. Dr. Robbins requests that the Board consider a friendly amendment to the motion for a one (1) year extension instead of a two (2) year approval. **Mr. Breeden made a motion to approve the extension of the inactive status for one (1) year; seconded by Dr. Piercey. The motion was approved.**

WAIVER REQUESTS:

Ms. Reed presented the following waiver requests for consideration by the Board.

Lauderdale Community Living Center, Ripley

This licensed nursing home is seeking to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement can be hired or receives his/her license in Tennessee. **Representative was not present no action taken by the Board.**

Quince Nursing and Rehabilitation Center, LLC, Memphis

This licensed nursing home is seeking to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement can be hired or receives his/her license in Tennessee. **Mr. Mynatt made a motion to grant the waiver request until the February 2018 Board meeting; seconded by Mr. Boyd. The motion was approved.**

Pickett Care and Rehabilitation Center, Byrdstown

This licensed nursing home is seeking to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement can be hired or receives his/her license in Tennessee. **The nursing home administrator licensed have been ratified no action was needed from the Board.**

Hardin County Nursing Home, Savannah

This licensed nursing home is seeking to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement can be hired or receives his/her license in Tennessee. **The hospital administrator is a Tennessee licensed nursing home administrator no action was taken by the Board.**

Signature Healthcare at Saint Francis, Memphis

This licensed nursing home is seeking to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement can be hired or receives his/her license in Tennessee. **Mr. Breeden made a motion to grant the waiver request until the February 2018 Board meeting; seconded by Mr. Mynatt. The motion was approved.**

Little Creek Sanitarium, Knoxville

This licensed nursing home is seeking to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement can be hired or receives his/her license in Tennessee. **Dr. Robertson made a motion to grant the waiver request until the June 2018 Board meeting; seconded by Mr. Breeden. The motion was approved.**

Claiborne Health and Rehabilitation Center, Tazewell

This licensed nursing home is seeking to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement can be hired or receives his/her license in Tennessee. **Mr. Mynatt made a motion to grant the waiver request until the February 2018 Board meeting; seconded by Dr. Robertson. The motion was approved.**

Kindred Nursing and Rehabilitation-Loudon, Loudon

This licensed nursing home is seeking to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement can be hired or receives his/her license in Tennessee. **Representative was not present no action taken by the Board.**

Kindred Nursing and Rehabilitation-Smith County, Carthage

This licensed nursing home is seeking an extension to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement can be hired or receives his/her license in Tennessee. **Mr. Mynatt made a motion to grant the extension waiver request until the February 2018 Board meeting; seconded by Dr. Robbins. The motion was approved.**

Signature Healthcare at Methodist, Memphis

This licensed nursing home is seeking an extension to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement can be hired or receives his/her license in Tennessee. **Dr. Robertson made a motion to grant the waiver request until the June 2018 Board meeting; seconded by Dr. Robbins. The motion was approved.**

Diversicare of Smyrna, Smyrna

This licensed nursing home is seeking to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement can be hired or receives his/her license in Tennessee. **Mr. Breeden made a motion to grant the waiver request until the February 2018 Board meeting; seconded by Mr. Mynatt. The motion was approved.**

National Biological Corporation, Nolensville and The Richmond Light Company, Nolensville

National Biological Corporation, Nolensville and The Richmond Light Company, Nolensville both are home medical equipment facilities seeking to waive the following HME Rules: 1200-08-29-.04(7)-(8) and 1200-08-29-06(5)(c)-Physical location; 1200-08-29-.04(9)-Charity Care Statement; 1200-08-29-.06(2)-Infection Control; 1200-08-29-.06(4)(a),(f), 1200-08-29-.06(4)(b), 1200-08-29-.06(6)(c)-Equipment

Management; 1200-08-29-10-Infectious and Hazardous Waste; 1200-08-29-11 Records and Reports. Representative for the facilities is Mr. Chris Puri, Attorney.

The Performance Improvement Issue Standing Committee when they met in December 5, 2017 had discussed and had subsequent presentation that reflects their discussion to approve the itemized rule waivers in which the letter that was presented to the full Board for approval. Mr. Puri assured the Board this letter reflects what was agreed upon at the PI issue Standing Committee. Ms. Tippens stated this letter before the Board after discussion the PI Committee removed the three (3) rules that they can put on the website or cannot comply with and remove those requests so everything that is in that letter is a collation of their requests. Dr. Robbins inquired for one last clarification on this there is no need for the Board to stipulate that they will be posting something on their website. Ms. Tippens asked Mr. Puri did they already agreed that they was going to and Mr. Puri stated they had agreed as a condition of being a Medicare DME supplier there are requirements in there for that information so that's not a problem they will assert that. **Dr. Robbins made a motion to approve the waiver based on the information presented; Mr. Mynatt seconded the motion. The motion carried.**

Parkwest Plastic Surgery, LLC, Knoxville

This licensed ambulatory surgical treatment center (ASTC) sought to waive ASTC rule 1200-08-10-.01(7)(b) which concerns the definition of ASTC. This item was heard at two (2) PI Standing Committee meetings held on July 25 and September 14, 2017. Representative for the facility is Patti Cotten, attorney. **Dr. Robertson made a motion to approve the**

Tristar Hendersonville Medical Center, Hendersonville

This licensed hospital is seeking to increase their general acute bed count by eleven (11) beds which will be a total of one hundred fifty-nine (159) beds. The request is pursuant to the Tennessee Health Services and Development Agency statute T.C.A. § 68-11-1607(g). Representative for the facility is Jerry Taylor, attorney. **Mr. Mynatt made a motion to approve the waiver for additional 11 general acute care beds; seconded by Dr. Robbins. The motion carried.**

Shannondale Health Care Center, Knoxville and WellPark at Shannondale, Knoxville

Shannondale Presbyterian Homes of Tennessee, Inc., is requesting for their administrator Mr. Keith Lee Boyce to serve as administrator for Shannondale Health Care Center and WellPark at Shannondale which both facilities are nursing homes. Representative for the facility is Keith L. Boyce, Administrator. Mr. Boyce stated Shannondale is part of the Tennessee Presbyterian Homes for Tennessee which is continual care retirement community in Knoxville. They have a position nursing home that has been there for many decades a larger facility and also built a thirty (30) bed rehabilitation facility licensed as a nursing home. Their request is to have Mr. Boyce serve as administrator for both facilities. They are located on the same campus right next door to each other 20-30 yards apart. Ms. Tippens asked is whether or not Mr. Boyce would be able to fulfill the full time requirements as an administrator for both. Mr. Boyce assured the Board that he is on campus more than 40 hours a week and the facilities are literally right next door and it is an ease of the work day to go back and forth between the facilities. There were lengthy discussions regarding this situation. Mr. Breeden stated he remembers the Board granting a similar waiver request in the past. He felt Mr. Taylor actually came before the Board when it was granted last time. **Mr. Breeden made a motion to approve the waiver request to allow the administrator to oversee both facilities on the same campus; seconded by Mr. Boyd. The motion carried.**

DISCUSSION(S):

Propose Meeting Dates for Year 2018 –

The Board was presented with meeting dates for next year. **Mr. Mynatt made a motion to accept the dates as presented; seconded by Mr. Breeden. The motion was approved.**

Big South Fork Medical Center, Oneida –

Big South Fork Medical Center, Oneida had reactivated their license to active status effective August 9, 2017 due to an approved full site survey of life safety and health standards and approved by the Board. On June 7, 2017 Board meeting Big South Fork Medical Center had a waiver request of the 2010 Guidelines for Design and Construction of Health Care Facilities (FGI) 2.2-3.1.3.6(9) Emergency Department requirements to have a decontamination room which the Board moved to the next board meeting of October 4, 2017. Representative for the facility is Mr. Tony Taylor. Mr. Taylor explained their proposal last time to move the Emergency Department area from where it is currently located now is the emergency room is basically two (2) rooms. They have three (3) beds in the trauma side divided by curtains and another room has five (5) beds on the other side down a long room which is also divided by curtains. These rooms do not provide a whole lot of privacy and that is one of the major complaints from patients. Big South Fork Medical Center was considering the OB unit that is not being used to move the emergency department from to this new location. Upon submitting this request it would be surveyed under the 2010 standards which must include a decontamination room. This facility does not have a decontamination room at this time. Mr. Taylor explained what other hospitals he was requested was doing as far as decontamination. Mr. Taylor contacted 15 critical access hospitals in Tennessee. He stated seven (7) used external pop-up decontamination showers; one hospital did not respond; one hospital was closed-Copper Hill; one hospital had a decontamination room; another hospital had a decontamination room but it was a regular shower and bathroom like you find in a patient room; one do not have any type of decontamination room and three uses the fire department's or EMS to decontaminate patients and at our location the fire guy stated if they come up on a chemical they are going to have to hose the person down and the ambulance driver is not going to let them in there. Ms. Tippens asked who will be responsible for actually putting up the decontamination tent. Mr. Taylor stated it would be maintenance. Maintenance will be thoroughly trained. Mr. Griffin, architect representative of the Board asked why Big South Fork Medical Center cannot build a decontamination room. Mr. Taylor stated at this time they don't have the funds to go into construction and hired an architect for a \$24 thousand dollar project like this.

Dr. Robertson made a motion to approve the waiver for Big South Fork Medical Center, Oneida to move their ER and use the decontamination plan that was proposed; seconded by Mr. Gee. Dr. Piercey requested an amendment to add infinite timeframe as long as it remains critical access status. Dr. Saunders reread the motion is to grant the waiver for Big South Fork Medical Center, Oneida to be able to use their current decontamination model plus allowing this waiver to run indefinitely as long as this facility is classified as a critical access hospital. If major renovations are undertaken to the emergency department all life safety requirements must be met and the waiver will be invalidated. Dr. Robertson stated he is happy with that and the final motion amended. The motion is approved.

Milan Health Care Center, Milan –

This sixty-six (66) bed nursing home facility due to financial and operational issues had been granted inactive status and had suspended operations at the time the facility was acquired by Christian Care Center of Milan, LLC (CCCM). This facility was not aware of the outstanding deficiencies and suspension of admission (SOA) at the time the facility acquired. Christian Care Center of Milan, LLC learned there were unpaid civil monetary penalties and license renewal fees they immediately paid the fees. The new operator is requesting the Board to consider deeming the outstanding deficiencies corrected and the Suspension of Admission lifted from the license. Representative for the facility is Jerry Taylor, Attorney. Mr. Taylor and Ms. Teresa Wall, the regional administrator of Care Centers Management Consulting spoke regarding the situation Care Centers Management was in becoming new owner of Milan Health Care Center. This facility was a very financially distressed facility. Change of Ownership applications have been filed and are pending. Milan Health Care Center is currently on inactive status but they did not know this facility was under Suspension of Admissions. Milan Health Care Center must submit a Plan of Correction which Care Centers Management Consulting feel since this facility is no longer in exist and is seeking a Certificate of Need (CON) to relocate and build a new facility the requirement for Milan Health Care Center to submit a Plan of Correction shouldn't be required of the new owners. The old building will never be reopened and the old Medicare number will not be assigned to Care Centers because they will apply for a new provider number providing a plan of correction and a follow-up survey doesn't seem feasible. Care Centers feels how they can correct deficiencies when there will be no residents and the building will not be used. They felt the goal for the plan of correction is to bring quality of care to the residents of the facility. They feel due to no existence of the building and residents removing these deficiencies will be difficult. Dr. Robbins asked what was the issue in starting with a new license if you know the issues with that facility will be voluntarily surrendering their license. Mr. Taylor explained they needed to keep that license to apply for a Certificate of Need (CON). The normal situation is if you have a license that is inactive status even though it is not operating you can still get a Certificate of Need (CON) but it will be for relocation and replacing of an existing nursing home rather than building a new nursing home. Dr. Robbins agreed it would be a lot less complicated. Mr. Davis explained the follow-up of the Certificate of Need from HSDA will reach out to our office to ask whether or not this license has any encumbrances on it or any other problem and our office will have to report there are deficiencies related to this license that have not been removed. Ms. Marlar asked Mr. Taylor wouldn't he look at this as an opportunity to do a quality improvement program when you look at the past deficiencies even though you are stating you will have new staff there will be somebody that worked in that nursing home previously will be employed at the new facility and the same problems could occur again. Ms. Marlar stated this nursing home didn't only have life safety issue, there were bedside issues which are administrative issues and she felt this is an opportunity for the provider. Mr. Taylor explained he understood what Ms. Marlar was stating but he felt the provider is experiencing from the ground up nursing home experiencing going in and taking over existing nursing homes and they would certainly have expertise how to provide this best of care and how to respond and seen almost anything you can in a nursing home. Mr. Taylor continued to state the community has lost a nursing home and they can provide a new facility with 30 beds and if we don't have the license essentially the community lost that nursing home for good. Mr. Davis assured the Board that they have had a number of providers that come into the state and take over large number of facilities and do tabletop mock surveys. Mr. Davis explained the surveyors would not be able to come back into a facility that has no residents to check to see rather or not you've implemented them but it would create some very good dialogue between the state regulators and the providers in terms of the deficiencies that was cited in our state some things that were very egresses and happened to our residents this is what we would do

to address that and then we could come together in terms of a desk review and then communication from a QA/PI prospective.

Dr. Robertson made a motion to deny this request; seconded by Mr. Boyd. The motion carried. Mr. Davis assured Mr. Taylor he had some conversation with a number of Christian Care Centers staff and we're on the same page in terms of quality care so from what I heard the discussion that we had I think that you addressing these deficiencies would give us an understanding of what quality really looks like from a provider's prospective and may help us help other providers that find themselves in similar situations.

BOARD DOCUMENTATION PRIOR TO BOARD MEETINGS:

Mr. Davis had another discussion item that was not on the agenda but he wanted to bring the Board based on his role for today. Mr. Davis stated yesterday from 2:00 p.m. to 4:00 p.m. the agenda had changed twice and he realized he couldn't prepare himself for the agenda because of multiple changes and reprints of the agenda. Mr. Davis explained this is the reason some things get missed and so forth and seeing his experience yesterday and then the end results today he can imagine what the board members who have very busy schedules and members are getting multiple updates and reviews and so forth. Mr. Davis asked whether or not there is a cut-off date for receiving information and he heard it was supposed to be two (2) weeks before the board meeting but as of yesterday evening he was still getting updates and people was sending additional information and it changed the whole prospective of what he was looking at on the agenda and so if the board is amendable he would like to be able to send out a letter to providers/organizations who wish to present to the board or have something coming before the board that two (2) weeks is the absolute maximum deadline for submitting things to the board. This will allow the support staff to put it all together and to do it timely and prevent things to fall off or missing from the agenda. Dr. Robbins stated she think that's great; she felt it has already improved from what it used to be; believe me it used to be worse. Dr. Robbins had a question if something came up like some cases where there's been a serious issue about resident's safety would there some way as far as jeopardizing lives that maybe it could still be routed to us? Ms. Tippens stated that would not affect the request for a summary suspension because that is disciplinary action on a license. Mr. Breeden offered a friendly suggestion that we add or include unless the department or board asked for additional information. Ms. Tippens agreed that gives them a loophole in case we need additional information. Mr. Davis stated he is going to pen a letter and sign it and that is going to be the standard because it serves the board better in making the decisions and it serves the staff for not having to work late because of the last minute changes.

APPROVAL OF MINUTES:

Mr. Davis presented the following minutes for approval by the full Board –
June 7, 2017 – Board meeting. Dr. Robbins stated that on page 11 of the first paragraph at the end of the paragraph it mentions that Dr. Saunders and Dr. Robbins abstained from an issue. Dr. Robbins felt both her and Dr. Saunders voted no and wanted it clarified. Ms. Tippens looked at her past notes and confirm this was indeed a no vote. This information will be corrected on the minutes.
December 12, 2016 – Performance Improvement Issue Standing Committee meeting
July 25, 2017 – Performance Improvement Issue Standing Committee meeting
September 14, 2017 – Performance Improvement Issue Standing Committee meeting

Mr. Mynatt made a motion to accept the all minutes with the above referenced tweak to the June 7, 2017 Board meeting minutes; seconded by Mr. Breeden. The motion was approved.

CONSIDERATION AND RATIFICATION OF LICENSURE APPLICATIONS (CHANGE OF OWNERSHIP (CHOWS) AND INITIALS):

Mr. Davis presented the CHOW and Initial licensure applications received by the Office of Health Care Facilities.

The following CHOW applications were processed by the Board's administrative staff with concern- Family Ministries John M. Reed Center, LLC, Limestone-Nursing Home and Family Ministries John M. Reed Center, LLC, Limestone-Assisted Care Living Facility (ACLF)

Mr. Davis explained under ElderReed Health and Rehab, Limestone and ElderReed Haus Assisted Living Center, Limestone have notified the department to reactive their licenses to active status. Both facilities have submitted a Change of Ownership application and closing documentation to support their request. Mr. Randy Trivette representing Family Ministries acknowledged they had submitted the change of ownership applications and submitted the closing documentation which was needed in order to process their request. Mr. Trivette stated the reason their applications had been pulled out from the normal ratification is that in March 2017 they had another facility; they had two (2) other facilities that are assisted living facilities one in Wise, Virginia and one in Erwin, Tennessee and on the application for the change of ownership it asks if the parent company has any other facilities and if the parent company have ever had a fine or suspension or any type of survey, probation, etc. The Wise, Virginia facility had a fine and a probationary period and all deficiencies have been corrected and the fine has been paid, the probation has expired now and they passed their annual survey with flying colors. Mr. Trivette stated this facility had been in operation for 11 years and this was the first time they had that type of a penalty had been assessed. **Mr. Breeden made a motion to approve the change of ownership applications; seconded by Dr. Piercey. The motion was approved.**

The following initial applications for Assisted Care Living Facilities (ACLF) were processed by the Board's administrative staff without concern – Bailey Manor, Cookeville; and Somerby of Franklin, Franklin. **Mr. Mynatt made a motion to approve; seconded by unable to hear. The motion was approved.**

The following initial ACLF applications were considered for approval. Mr. Joshua Crisp had to recuse himself from this vote. Dominion Senior Living of Athens, Athens; and The Pavilion Assisted Living, Lebanon. **Mr. Mynatt made a motion to approve; seconded by Mr. Boyd. The motion was approved.** Mr. Crisp returned to the meeting.

The following End Stage Renal Dialysis was considered for approval - Airways Dialysis, Memphis; Dialysis Care Center, Crossville, Crossville; and Fort Campbell Dialysis, Clarksville. **Dr. Robertson made a motion to approve; seconded by Mr. Boyd. The motion was approved.**

The following Home Health Services application was considered for approval- AxelaCare Health Solutions, LLC, Memphis. **Mr. Mynatt made a motion to approve; seconded by Dr. Robbins. The motion was approved.**

The following Home Medical Equipment Facilities (HME) application were considered for approval - Home Caregivers of Cookeville, LLC, Cookeville; MobilityWorks, Chattanooga; and Reliance Mobility, LLC, Columbia. **Mr. Mynatt made a motion to approve; seconded by Dr. Robbins. The motion was approved.**

The following Hospital application was considered for approval - Spire Rehabilitation Hospital, in Partnership w/HealthSouth, Jackson. **Mr. Gee made a motion to approve; seconded by Mr. Breeden. The motion was approved.**

The following Nursing Home was considered for approval - Christian Care Center of Bristol, Bristol. **Mr. Mynatt made a motion to approve; seconded by Mr. Boyd. The motion was approved.**

The following Professional Support Services application was considered for approval - Livitup, Inc., Memphis. **Dr. Robbins made a motion to approve; seconded by Mr. Breeden. The motion was approved.**

The following Residential Hospice application was considered for approval - The Residence at Alive Hospice, Inc., Murfreesboro, Murfreesboro. **Mr. Breeden made a motion to approve; seconded by Dr. Robbins. The motion was approved.**

The following CHOWS applications were presented to the Board for approval without staff concern.

The following Ambulatory Surgical Treatment Center Facility application was considered for approval – Union City Surgery Center, Union City. **Mr. Breeden made a motion to approve; seconded by Dr. Robbins. The motion was approved.**

The following Assisted Care Living Facility application was considered for approval – Rockgate Assisted Living Facility, LLC, Cowan. **Dr. Robbins made a motion to approve; seconded by Mr. Boyd. The motion was approved.**

The following End Stage Renal Dialysis Facility application was considered for approval – Fresenius Kidney Care Columbia, Tennessee, Columbia. **Dr. Piercey made a motion to approve; Dr. Lynch seconded the motion. The motion was approved.**

The following Home Medical Equipment Facilities application were considered for approval – Gray Pharmacy, Gray; and Professional Health Services, LLC, Winchester. **Dr. Robbins made a motion to approve; seconded by Mr. Boyd. The motion was approved.**

LICENSURE STATUS UPDATE(S):

Mr. Davis presented licensure status updates on the following two (2) facilities – Smokie Mountain Dialysis Center, Sevierville and Union City Surgery Center (UCSC, LLC), Union City. Smokie Mountain Dialysis Center had notified the department that renovations were needed due to minor water damage and the facility closed on August 9, 2017. This facility had 42 Peritoneal Dialysis patients who were receiving g services at the Medical Directors' Office, in Johnson City during the temporary closure. The facility begin repairs on August 11, 2017 and Mr. Davis informed the Board the department received confirmation that those repairs have been completed and therefore, patients are now back at the dialysis center. Union City Surgery Center has notified the department to reactivate their license effective June 8, 2017. This Ambulatory Surgical Treatment Center (ASTC) had placed their licensed on inactive status on February 8, 2017 for one year.

FACILITY CLOSURES:

A listing of all facility closures during the months of June 7, 2017 Board meeting was provided to the Board. No discussion was held.

BOARD POLICY CONSENTS:

Mr. Davis presented the Board Policy Consent requests. The requests were for Board Policy #32, Nursing Homes and Residential Homes for the Aged to provide outpatient therapy services.

Board Policy #32 requests-
Lakeshore Heartland, Nashville

Ms. Carissa Lynch recused herself from the discussion and vote. Mr. Davis stated Lakeshore Heartland, Nashville have identified their floor plan for outpatient therapy services. Dr. Saunders reviewed the floor plan and felt that someone presumably coming from outpatient therapy could either turn left and go to the therapy area or turn right and end up in a resident's room. She felt there was not a wall there so they could either turn right or left. Mr. Craig Parisher, Facilities Construction Director agreed. Mr. Nelson Rodriguez, Fire Safety Manager explained that the floor has four (4) residential homes for the aged where you come into the top where it states exit and the circle is the main entrance. The area to the right is the administrative section and there are two (2) rooms for physical therapy which is actually two (2) rooms they want to convert residential home for the aged and across is another two (2) rooms that have a wall with doors with the rest of the residential aged. Dr. Saunders questioned the location of the physical therapy area which is across from residents' rooms. Mr. Parisher explained the first floor is built on a hill so the basement is actually ground level on one side. Mr. Griffin who is the architect representative of the Board stated in his opinion the hallway is not considered a resident care area so this facility meets the qualification the entrance and exit is not going through resident's care areas.

Mr. Mynatt made a motion to accept Lakeshore Heartland, Nashville waiver application to provide outpatient therapy services according by Board Policy #32; seconded by Dr. Robertson. The motion was approved. Ms. Lynch returned to the meeting.

Humphreys County Nursing Home, Waverly

Mr. Davis stated Humphreys County Nursing Home, Waverly for seeking to provide outpatient therapy services. Judy Eads was the management contractor representative for this facility. Ms. Eads explained their request to provide outpatient occupational, speech and hearing therapy for their new facility which is being built. This request came to the attention of the department's Plans Review in order to provide outpatient therapy they had to get a waiver for this building from the Board. Mr. Parisher explained the schematics of the proposed area meet the requirement of an outpatient therapy area and Mr. Griffin agrees.

Dr. Piercey made a motion to approve this waiver for outpatient therapy services; seconded by Mr. Griffin. The motion was approved.

Quality Center for Rehabilitation and Healing, Lebanon

Mr. Davis stated Quality Center for Rehabilitation and Healing, Lebanon is seeking to provide outpatient therapy services. Mr. Parisher explained the current outpatient therapy schematics to the Board where the outpatient therapy is located. This facility had also submitted a second set of schematics some renovation will take place where they are building out in that area and will be adding on and showing separate entrances which will be in the back of the facility.

Dr. Robertson made a motion to approve this waiver for outpatient therapy services; seconded by Mr. Griffin. The motion was approved.

REGULATION(S):

No regulations were present to the Board.

ORDER(S):

Consent Orders –

The following consent orders were presented by Ms. Tippens.

Autumn Ridge Manor, LLC, White Bluff #53 – RHA - A life safety revisit survey conducted with the facility being cited deficiencies resulted in the facility's license being placed on probation for no less than six (6) months on October 4, 2017. During this period of probation the facility must submit an acceptable POC.

Mr. Mynatt made a motion to approve; seconded by Mr. Breeden. The motion was approved.

Caring Estates, Arlington #570 – RHA – A life safety revisit survey was conducted at the facility to ensure that the deficiencies cited on November 8, 2016 survey had been corrected. To date, respondent has failed to submit a Plan of Correction to resolve the life safety deficiencies. An annual licensure survey was performed at the facility on May 15, 2017 and a complaint survey was performed at the facility from June 5, 2017 through June 28, 2017. Since being cited for deficiencies in both May and June 2017, the facility has failed to submit adequate Plans of Corrections to correct the cited deficiencies. As a result the facility's license shall be placed on probation for no less than (1) year and submit an acceptable Plan of Correction. Respondent shall provide department with a schedule to expedite the removal of inappropriate residents from the facility within (7) days of Consent Order. **Mr. Breeden made motion to accept as a start. Dr. Piercey seconded. Motion was approved.**

Mabry Health Care & Rehab Center, Gainesboro #136-NH- On or about July 7, 2017 TN Department of Health received notification from TennCare that respondent has failed to pay the 4th quarter of 2016, and all (4) quarters of 2017 annual nursing home assessment fee. If payment is not made within (90) days of the effective date of order and/or there is no payment plan in place with TennCare, then admissions to the facility shall be immediately suspended. **Dr. Robertson made motion to approve. Mr. Breeden seconded. Motion was approved.**

Nashville Metro Care and Rehabilitation Center, Nashville #47-NH- On or about July 14, 2017 TN Department of Health received notification from TennCare that respondent is late paying the 3rd and 4th quarter installments of its 2017 annual nursing home assessment fee. If payment is not made within (90) days of the effective date of order and/or there is no payment plan in place with TennCare, then

admissions to the facility shall be immediately suspended. **Mr. Breeden made motion to approve. Dr. Piercey seconded. Motion was approved.**

Noles Residential Home for Aged, Gallatin #198- RHA- A complaint and licensure survey were conducted at the facility on September 12, 2016 being cited deficiencies resulted in the facility's license being placed on probation for no less than six (6) months. During the period of probation, the respondent shall submit an acceptable Plan of Correction. **Mr. Breeden made a motion to approve. Dr. Piercey seconded. Motion was approved.**

Riverdale Assisted Living Facility, Memphis #370-ACLF- On August 1, 2017 an annual survey was conducted at the facility. On August 21, 2017 through August 23, 2017 a complaint survey was conducted. Since being cited for deficiencies in August 21, 2017 and August 23, 2017 the facility has failed to submit adequate Plans of Corrections to correct the cited deficiencies. The facility shall be placed on probation for no longer than (6) months and assessed (1) CMP fee of (\$500.00) payment that shall be submitted to Department within (30) days of order. **Dr. Robertson made motion to approve. Mr. Mynatt seconded. Motion was approved.**

OTHER BUSINESS:

OHCF P&P 240-Facility Plan of Correction (POC)

Mr. Davis presented to the Board about the facilities not submitting plans of corrections and delinquent notices. There were (3) ACLF's that were listed. (1) Plan of Correction not submitted and (2) that have continued non-compliant. **Dr. Saunders asked for further discussion or questions. Mr. Davis asked for motion. Dr. Robertson seconded.**

Dr. Saunders adjourn meeting at 6:30pm.