



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
SECOND AMENDED**

Date: February 4, 2019

To: Shelley Walker, 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: February 5, 2019

Time: 9:00 a.m.

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

Major Item(s) on Agenda: See attachment.

LINK TO LIVE VIDEO STREAM:

February 5, 2019

<https://web.nowuseeit.tn.gov/Mediasite/Play/a4a4396430974b33aa587fca7db66fb31d>

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.

LISA PIERCEY, MD, MBA, FAAP
LEE
COMMISSIONER

BILL
GOVERNOR

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

AGENDA

BOARD FOR LICENSING HEALTH CARE FACILITIES

FEBRUARY 5, 2019

IRIS CONFERENCE ROOM, FIRST FLOOR
9:00 a.m.

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

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1. **WELCOME NEW BOARD MEMBERS:** Julie Jeter, M.D., Physician-Medicine Representative replacing Dr. Kenneth Robertson.
 2. **CONTESTED CASE HEARING.**
 3. **RULEMAKING HEARING(S)** – Notice of Rulemaking Hearings can be viewed online at: https://publications.tnsosfiles.com/rules_filings/11-01-18.pdf
 - A. 1200-08-12 Trauma Centers
 - 1200-08-12-.01 Preamble
 - 1200-08-12-.02 Authority
 - 1200-08-12-.03 Definitions
 - 1200-08-12-.04 Requirements
 - 1200-08-12-.05 Repealed
 - 1200-08-12-.06 Trauma Registry Data
 - 1200-08-12 Trauma Centers
 - 1200-08-12-.01 Preamble
 - 1200-08-12-.02 Definitions
 - 1200-08-12-.03 Facility Outreach
 - 1200-08-12-.04 Requirements
 - 1200-08-12-.05 Trauma Registry Data

4. REPORTS.

A. EMS REPORT – Robert Seesholtz

B. NURSE AIDE REPORT – Wanda King

C. OFFICE OF GENERAL COUNSEL REPORT – Caroline Tippens

- (1) Update-EMS dissertation on the status of distinction between Level I and Level II trauma centers in adopting the rules.

D. TENNESSEE ARTS COMMISSION IMPLEMENTATION OF THE MUSIC & MEMORY PROGRAM IN TENNESSEE PROJECT.

REPRESENTATIVE(S): Anne Pope, Executive Director

5. LICENSE STATUS REQUESTS.

RENAISSANCE SURGERY CENTER, BRISTOL (ASTC #177)

This ambulatory surgical treatment facility is seeking to place their license on extension inactive status. This ASTC was recently acquired by Renaissance Surgery Center, LLC. The CHOW application has been submitted and has been tentatively approved pending ratification by the Board. The new owner want this license to be on inactive status in order to get Medicare certification; get Medicare number assigned and resume operations as soon as possible. The Renaissance Surgery Center saw their last patient on August 13, 2018 and has discontinued offering surgical services.

REPRESENTATIVE(S): Jerry Taylor, Attorney

LAKEWAY REGIONAL HOSPITAL, MORRISTOWN (HOSP. #72)

This one hundred thirty-five bed hospital is seeking to place their license on inactive status for three (3) years to determine if there is a future use for the beds. Lakeway Regional has ceased inpatient services on December 28, 2018. Tennova Healthcare has provided notice to the Centers for Medicare and Medicaid Services.

REPRESENTATIVE(S): Warren Gooch, Attorney and Tammy White, CEO, Lakeway Regional Hospital

BELCOURT TERRACE NURSING HOME, NASHVILLE-(NH #43)

This forty-nine (49) bed nursing home facility is requesting a third extension waiver for their license to remain on inactive status for an additional one (1) year. Belcourt Terrace Nursing Home ceased operation on December 15, 2015. The Purchaser entered into a contract to purchase the real estate for the replacement facility. The Purchaser is now actively working to secure proper zoning for the real estate and a Certificate of Need for the construction of the replacement facility. The Purchaser expects to be in position to complete the purchase of the license in the summer of 2019. Belcourt Terrace Nursing Home's license was initially placed on inactive status on January 2016 for one (1) year; an inactive status extension waiver granted on February 8, 2017 for one (1) additional year; and a second extension granted was granted on February 2018 which expires February 2019.

REPRESENTATIVE(S): Hannah Cole, Attorney

NASHVILLE SURGERY CENTER, NASHVILLE-(ASTC #12)

This ASTC facility is requesting a second extension waiver for their license to remain on inactive status for an additional twelve (12) months. The owner is in the process of re-syndicating ownership interests to a group of local surgeons, renovating the facility, and then re-opening the surgery center at its current location. Negotiating agreements with health plans, getting Medicare certification, getting construction plans approval and completing renovation progress is being made but additional time is needed. Nashville Surgery Center was granted inactive status on September 18, 2015 for two (2) years; and an inactive status extension waiver was granted October 4, 2017 for eighteen (18) months which expires in February 2019.

REPRESENTATIVE(S): Jerry W. Taylor, Attorney

SENIOR SAINTS' HOME, CHATTANOOGA (RHA #84)

This Residential Home for the Aged (RHA) facility is requesting a second extension waiver for their license to remain on inactive status for an additional twelve (12) months to finalize their plans review process. Senior Saints' Home is experiencing a delay in completing the required remodeling due to financial constraints, but much progress has been made and completion is envisioned in the next few months. Senior Saints' Home was granted inactive status on September 7, 2016 for one (1) year; and an extension inactive status waiver was granted on February 7, 2018 which expires in February 2019.

REPRESENTATIVE(S): Kennedy N. Omanwa, Administrator

CUMBERLAND RIVER HOMECARE, COOKEVILLE (HH #135)

This home health facility is requesting an extension waiver for their license to remain on inactive status for an additional one (1) year. Cumberland River Homecare is part of the Cookeville Regional Medical Center Health System (CRMC). CRMC has requests additional time to finish its evaluation and to complete a comprehensive search to identify an appropriate sales partner to continue the future operations of this facility. Cumberland River Homecare was granted inactive status on February 7, 2018 which will expire on February 2019.

REPRESENTATIVE(S): Travis Swearingen, Attorney

**BAPTIST SKILLED REHABILITATION UNIT-GERMANTOWN,
GERMANTOWN (NH #391)**

This eighteen (18) bed skilled nursing unit at Baptist Rehabilitation-Germantown is requesting a fourth extension for their license to remain on inactive status for an additional twelve (12) months. Effective October 1, 2019, CMS altered the case-mix classification rules and payment system for short term nursing facilities to encourage a more value-based, unified post-acute care model. Baptist is evaluating the feasibility of reopening this new combined unit in close proximity to one of its acute care hospitals to better treat post-acute patients who are medically fragile. Baptist requires additional time to fully vet this possible option. Baptist Skilled Rehabilitation Unit-Germantown was granted an inactive status waiver on January 21, 2015 for twelve (12) months; an extension inactive status waiver was granted January 14, 2016 for twelve (12) months; a second extension inactive status waiver was granted February 8, 2017; and a third extension inactive status waiver was granted February 7, 2018 which will expire on February 2019.

REPRESENTATIVE(S): Travis Swearingen, Attorney

BAPTIST MEMORIAL-MEMPHIS SKILLED NURSING FACILITY, MEMPHIS (NH #352)

This thirty-five (35) bed skilled nursing unit at Baptist Memorial Hospital-Memphis is requesting a fifth extension for their license to remain on inactive status for an additional twelve (12) months. Continued inactive status for this facility will enable Baptist Memorial to reach a definitive plan for the future operation of this facility. Baptist Memorial Hospital-Memphis was granted an inactive status waiver on February 7, 2013 for twelve (12) months; an extension inactive status waiver was granted on January 23, 2014 for twelve (12) months; a second extension inactive status waiver for additional twelve (12) months was granted January 15, 2015; a third extension inactive status waiver for additional twelve (12) months was granted January 14, 2016; a fourth extension for inactive status was granted February 8, 2017 for twelve (12) months; and a fifth extension for inactive status was granted on February 7, 2018 which will expire on February 2019.

REPRESENTATIVE(S): Travis Swearingen, Attorney

SIGNATURE HEALTHCARE AT METHODIST, MEMPHIS (NH #247)

This forty-four (44) bed nursing home is requesting an extension waiver for their license to remain on inactive status for an additional one (1) year. Signature HealthCare continues to search for viable options to reactivate the licensed facility and beds. No such option has presented itself at this point in time, and additional time in inactive status is needed to find the best option for the continued use of this facility. Signature Healthcare at Methodist was granted an inactive status waiver on February 7, 2018 which will expire on February 2019.

REPRESENTATIVE(S): Christopher C. Puri, Attorney

SIGNATURE HEALTHCARE AT SAINT FRANCIS, MEMPHIS (NH #254)

This one hundred ninety-seven (197) bed nursing home is requesting an extension waiver for their license to remain on inactive status for an additional one (1) year. Signature HealthCare continues to search for viable options to reactivate the licensed facility and beds. No such option has presented itself at this point in time, and additional time in inactive status is needed to find the best option for the continued use of this facility. Signature Healthcare at Saint Francis was granted an inactive status waiver on February 7, 2018 which will expire on February 2019

REPRESENTATIVE(S): Christopher C. Puri, Attorney

FAMILY MINISTRIES JOHN M. REED CENTER, LIMESTONE (NH #293)

This thirty-eight (38) bed nursing home is requesting to place their license on inactive status effective October 4, 2018.

REPRESENTATIVE(S): Jonathan Bailie, Chief Operating Officer

7. **WAIVER REQUESTS.**

JELICO COMMUNITY HOSPITAL, INC, JELICO (HOSP-7)

This 54 bed hospital is seeking to discontinue their OB Services.

REPRESENTATIVE(S): Gene Miller, Interim CEO

LEBONHEUR CHILDREN’S MEDICAL CENTER, MEMPHIS-(HOSP-109)

This two hundred and fifty-five (255) bed hospital is requesting to increase their acute pediatric bed count by nineteen (19) licensed beds. LeBonheur Children’s Medical Center, Memphis is a satellite of Methodist Healthcare-Memphis Hospitals. The total licensed bed complement will be two hundred seventy-four (274) beds upon approval. This request is made pursuant to the Tennessee Health Services and Development Agency statute T.C.A. §68-11-1607(g).

REPRESENTATIVE(S): Byron Trauger, Attorney

ERLANGER EAST HOSPITAL, CHATTANOOGA – (HOSP-140)

This one hundred and thirteen (113) bed hospital is requesting to increase their general acute care beds count by eleven (11) licensed beds. Erlanger East Hospital, Chattanooga is a satellite of Chattanooga-Hamilton County Hospital Authority. The total licensed bed complement will be one hundred and twenty-four (124) beds upon approval. This request is made pursuant to the Tennessee Health Services and Development Agency statute T.C.A. §68-11-1607(g).

REPRESENTATIVE(S): Byron Trauger, Attorney

**TAKOMA REGIONAL MEDICAL HOSPITAL, GREENEVILLE (HOSP #54)
AND LAUGHLIN MEMORIAL HOSPITAL, GREENEVILLE (HOSP #53)**

Laughlin Memorial Hospital, Greeneville, a 140 bed general acute care hospital is owned by a subsidiary of Mountain State Health Alliance and Takoma Regional Hospital, Greeneville, a 100 bed general acute care hospital owned by a subsidiary of Mountain States Health Alliance and is seeking to become a satellite of Laughlin Memorial Hospital according to hospital rule 1200-08-01-.01(37)(b) effective April 1, 2019.

REPRESENTATIVE(S): Dan Elrod, Attorney

LINCOLN AND DONALSON CARE CENTERS, FAYETTEVILLE (NH #159)

Lincoln and Donalson Care Centers are seeking to no longer require the waiver to have one administrator to serve both nursing home facilities due to declining census at Lincoln Care Center. Lincoln and Donalson Care Centers, Fayetteville are both under the same license number #159, as a consolidated/satellite licensure. Lincoln & Donalson Care Centers was granted the consolidated license by the Board for Licensing Health Care Facilities in 1990. At the February 7, 2018 Board meeting, the Board granted the request for one (1) administrator over the two (2) buildings for one (1) year with a report back to the Board. In addition, the facility is updating the Board to its current status.

REPRESENTATIVE(S): Vicky Groce, Chief Nursing Officer

8. DISCUSSION(S).

A. Prestige Assisted Living of Loudon County, Loudon #53 (ACLF)-Progress Report.

REPRESENTATIVE(S): Nikki Zaveri, Administrator

- B. Magnolia Manor, McKenzie– Progress Report – Status on Meeting the Requirements of the Agreed Order for September 5, 2018 and September 21, 2018.

REPRESENTATIVE(S): Lynda Miller, Owner

- C. Riverdale Assisted Living Facility, Memphis #370 (ACLF) – Request to Lift Probation.

REPRESENTATIVE(S): Rhonda Westbrooks, Administrator

- D. Inaugural Meeting of the Coordinated Community Response on Elder Abuse in regards to Grant Work with the Plough Foundation.

REPRESENTATIVE(S): Jim Shulman, HCF Chairman Pro Tem Board Member

- E. **HOME HEALTHCARE SOLUTIONS OF DAVIDSON, LLC, NASHVILLE (PSS #333)**

This Professional Support Services (PSS) agency requested to waive the requirement of having a contract with DIDD at the October 3, 2018 Board meeting. The Board requested a progress report by the facility on securing a DIDD contract and provide further information for explanation of TennCare relationship.

REPRESENTATIVE(S): Tony O’Digie, Owner

- F. **VANDERBILT UNIVERSITY MEDICAL CENTER, NASHVILLE**

Received Report on Accepted Plan of Correction (POC).

REPRESENTATIVE(S): Dr. Wright Pinson, Deputy Chief Executive Office/Chief Health System for VUMC; Marilyn Dupree, Executive Chief Nursing Officer; Mitch Edgeworth, CEO and Dan Elrod, Attorney

9. APPROVAL OF MINUTES.

- A. October 3, 2018– Board Meeting
- B. December 18, 2018 – Performance Improvement Issue Standing Committee Meeting

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

A. SPECIAL CONSIDERATION

(INITIALS)
N/A

(CHOWS)
Ashton Place Health & Rehab Center, Memphis
Midsouth Health and Rehabilitation Center, Memphis

B. RATIFICATION.

1. QUALIFYING APPLICATIONS (Approval)

(INITIALS)

- (a) **Ambulatory Surgical Treatment Centers**
The Plastic Surgery Center, Brentwood, LLC, Brentwood
UCH Vascular Access ASC, Memphis
- (b) **Assisted Care Living Facility**
Legacy Village of Cleveland, Cleveland
Morning Pointe of Knoxville, Knoxville
NHC Place, Cavette Hill, Knoxville
Sunset Gardens, Mountain City
The Crossings at Victory Station, Murfreesboro
- (c) **End Stage Renal Dialysis Clinics**
Fresenius Kidney Care Goodlettsville, Goodlettsville
Singleton Farms Dialysis, Memphis
- (d) **Home Medical Equipment**
National Seating & Mobility, Inc., Kingsport
- (e) **Professional Support Services**
Quality of Life, Spring City

(CHOWS)

- (a) **Ambulatory Surgical Treatment Center**
Bowden Gastro Associates, LLC, Memphis
UCH Vascular Access ASC, Memphis
- (b) **Assisted Care Living Facility**
Brookdale Hendersonville, Hendersonville
Brookdale Kingston, Kingston dba Sycamore Springs, Kingston
Cadence at Rivergate, Madison
Maybelle Carter Senior Adult Home, Madison
Northshore Senior Living, Knoxville
Sommerby of Franklin, Franklin
- (c) **Home Health Agency**
AbilisHealth, Nashville, LLC, Brentwood
AbilisHealth Knoxville, LLC, Knoxville
AbilisHealth Martin, LLC, Martin
AbilisHealth McMinnville, LLC, McMinnville
AbilisHealth Nashville, LLC, Nashville
- (d) **Residential Home for the Aged**
Fairfield Glade Assisted Living, Crossville
His House, Cookeville
Tree of Life Residential Care, LLC, Tracy City

11. LICENSE STATUS UPDATES.

BRISTOL SURGERY CENTER, BRISTOL (ASTC-52)

This ambulatory surgical treatment center has requested to place their license on inactive status for minor renovations to their facility. This request was effective on November 8, 2018 with the intent to reopen the facility on January 2, 2019.

PENDLETON HOUSE OF LOVE, MEMPHIS (RHA-185)

This residential home for the aged has requested for their license on inactive status extension to be placed back to active status effective March 1, 2019. Their license was previously placed on inactive status extension on October 3, 2018 for one (1) year to expire on October 2019. Pendleton House of Love, Memphis was previously on probation and it was lifted on October 4, 2017 and was placed on inactive status for one (1) year.

UPPER CUMBERLAND HOSPICE OF CHATTANOOGA, CHATTANOOGA (HOSPICE #622)

This hospice facility has requested for their license on inactive status to be placed back to active status effective February 4, 2019. Their license was placed on inactive status for twelve (12) months on February 7, 2018 which will expire February 2019.

***FACILITY CLOSURES**

See attachment.

12. BOARD POLICY CONSENTS.

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 BY BOARD POLICY #81:**

- (1) Nashville Center for Rehabilitation and Healing, LLC, Nashville (NH #394)
- Rodger Peden, Temporary Administrator
- (2) Diversicare of Smyrna Healthcare & Rehabilitation Center, Smyrna (NH #218)
- Amber Williamson, Temporary Administrator

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

Grace Healthcare of Cordova, Cordova (NH-238)
Princeton Transitional Care & Assisted Living, Johnson City (NH-337) & (ACLF-486)

C. THE FOLLOWING FACILITIES ARE REQUESTING APPROVAL TO PERMIT A NURSING HOME ADMINISTRATOR TO SERVE AS ADMINISTRATORS BOTH A NURSING HOME AND RESIDENTIAL HOMES FOR AGED AND/OR ASSISTED CARE LIVING FACILITY ACCORDANCE WITH BOARD POLICY #39:

Somerfield at the Heritage, Brentwood (NH-386) and The Heritage at Brentwood, Brentwood (ACLF-Open Effective March 2019)

13. ORDERS.

A. Consent Orders.

14. REGULATION(S).

A. BOARD APPROVAL FOR RULEMAKING HEARING
N/A

B. PROPOSED RULE LANGUAGE

- (1) Public Chapter 427 – Necessitating rulemaking for assisted care living facilities (ACLF) which requires criminal background checks to be completed prior to employing any person who will be in a position that involves providing direct care to a resident or patient. – Caroline Tippens, OGC
- (2) Amendments to Hospital Rule 1200-08-01-.05(5) to make the rules consistent with the new effective definition of licensed healthcare professional in Rule 1200-08-01-01(45). – Caroline Tippens, OGC
- (3) Chapter 1200-08-34 Standards for Home Care Organizations Providing Professional Support Services Rule Language 1200-08-34-.02 regarding Licensing Procedures. – Caroline Tippens, OGC
- (4) Consideration of language changes regarding the Commissioner’s Rules - Review of Health Care Facility Construction Plans and Specifications.
– Craig Parisher, Director, Plans Review.

MINUTES
BOARD FOR LICENSING HEALTH CARE FACILITIES
February 5, 2019

The Board for Licensing Health Care Facilities Board meeting began February 5, 2019. Dr. René Saunders, Chairperson of the Board for Licensing Health Care Facilities, informed of the new Board member appointment. Dr. Julie Jeter, MD replaced Dr. Kenneth Robertson. Dr. Jeter was not in attendance at this meeting.

The meeting was called to order. Ann Reed conducted a roll call of attendance.

Dr. René Saunders, Chairperson – here
Mr. Robert Breeden – here (arrived at 9:10 am)
Dr. Jennifer Gordon-Maloney – not here
Mr. Joshua Crisp– here
Ms. Carissa Lynch – here
Dr. Patsy Carihfield – here
Mr. Thomas Gee – here
Mr. Chuck Griffin – here
Mr. Jim Shulman, Chairman Pro Tem – here
Mr. Bobby Wood – here
Mr. Roger Mynatt – here
Dr. Sherry Robbins – here
Ms. Janet Williford – here
Dr. Evelyn Brock – here
Mr. Paul Boyd – here
Ms. Gina Throneberry – here
Ms. Patricia Ketterman - here

A quorum was established.

CONTESTED CASE HEARING:

Caroline Tippens, Office of General Counsel (OGC), presented an agreed order for Legacy Assisted Living & Memory Care. She recapped past orders signed by this board in November of 2017, June of 2018, and October of 2018. Ms. Tippens also gave the survey background for this facility which resulted in the above referenced orders and the presentation today. She informed the Board the facility went into a receivership in December 2018. Following this, a survey was conducted in January 2019 with three (3) deficiencies cited. Ms. Tippens read items of the agreed order into the records which includes reports to the Board at the June 2019 and October 2019 Board meetings. Jerry Taylor, attorney for the receiver, addressed the Board regarding the receivership action. He clarified the legal entity remains the owner/operator of the facility. AHMG was hired as the management firm by the receiver along with a new director of nursing (DON) and administrator. A representative of AHMG presented to the Board items to be addressed at the facility which included, but were not limited to quality assurance audits on all medical records, completion of pharmacy audits, review of monthly physician order sheets, development and update of policies and procedures, implementation of an electronic health record, etc. Mr. Crisp asked what the arrangement will be after all has been approved and passed; what steps will be

in place to keep the facility from reverting back to its former ways. Mr. Taylor stated the management firm will be in place at least a year and/or as long as necessary. AHMG is in the facility until the facility reaches compliance with state requirements. The long term is not certain. Mr. Shulman questioned the length of time between reports presented to the Board. He feels four (4) months is a long time. Ms. Tippens stated TDH surveyors will be in close contact with the facility. Dr. Robbins requested the presence of the owner/operator at the next Board meetings. **Mr. Shulman made a motion to accept the agreed order; seconded by Dr. Robbins. The motion was approved.**

RULEMAKING HEARING:

A rulemaking hearing for the following set of regulations was conducted at this Board meeting – 1200-08-12 Trauma Centers.

Kyontzé Hughes-Toombs, OGC, presented this language for the rulemaking hearing. **Mr. Shulman made a motion to adopt the proposed rules presented at the rulemaking hearing; seconded by Dr. Robbins. The motion was approved.**

REPORTS:

OGC -

Ms. Tippens presented the following report –

- Eighteen (18) open cases in OGC with six (6) Consent and Agreed Orders to be presented at today's meeting.
- Rule status
 - Combined rules (Hospital Rehabilitation Services – PT changes, storing and repackaging medications, secured unit, fire safety, social worker, orders for HME; and dieticians) were effective October 8, 2018.
 - Governor Lee issued Executive Order #5, which halts all new regulations across the state of Tennessee for the next ninety (90) days. No executive branch department any file a new rule or regulation with the Secretary of State. Regulations approved by the previous administration that have not yet taken effect will be excluded from the Executive Order. Executive Order #5 will remain in effect through May 2, 2019.
 - The definition of THA caregivers; ASTCS – invasive procedures; implementation of contractual requirement for PSS agencies to have a contract with DIDDs; and exemptions for mail order companies were posted to the Secretary of State's website in January 2019 and will be final within ninety (90) days, pending approval by Government Operations Committee. If approved by Government Operations, these rules will be final in April 2019. Since these rules were approved under the prior Administration, the rules will continue to go through the Government Operations process.
 - The Board held the rulemaking hearing today, February 5, 2019, regarding implementation of trauma rules. However, pursuant to Executive Order #5, the rules will be held for ninety (90) days and will not be filed with the Secretary of State's office until the rulemaking moratorium is lifted. All other rules are currently in internal review and will also be held until after May 2, 2019.

Nurse Aide –

Wanda King, Nurse Aide Registry Manager, presented this report to the Board which included the following –

- Nurse Aide Certification – as of December 31, 2018 37,334 active nurse aides were certified in Tennessee. There were 9,393 new applicants certified during 2018. Forty-four (44) certifications were revoked and sixteen (16) were suspended for failure to pay child support.
- Abuse Registry – as of December 31, 2018 2,439 persons were on the Registry of Persons Who Have Abused, Neglected, or Misappropriated the Personal Property of Vulnerable Individuals. There have been 161 placements during 2018 with breakdown as follows
 - County Courts: 53
 - TN Dept of Health: 9
 - DIDD: 58
 - APS: 21
 - MHSAS: 20
- Training Programs – there are 143 approved nursing home based training programs and 157 private training programs for a total of 300 approved programs.

EMS -

Robert Seesholtz, EMS Trauma System Manager, presented the following EMS report –

- August 11, 2018 Trauma Care Advisory Council (TCAC) meeting minutes were noted as available.
- University of Tennessee Medical Center had reverification Level I Trauma Center site visit conducted October 3-4, 2018 by the American College of Surgeons with verification as a Level I trauma center granted for one (1) year. Designation as a Level I trauma center is recommended for a three (3) year period.
- Sumner Regional Medical Center was revisited on January 4, 2019 for follow-up of the provisional Level III trauma center designation. Designation as a Level III trauma center is recommended for a three (3) year period.

Mr. Shulman made a motion to accept above report; seconded by Mr. Griffin. The motion was approved.

TENNESSEE ARTS COMMISSION IMPLEMENTATION OF THE MUSIC & MEMORY PROGRAM IN TENNESSEE PROJECT –

Anne Pope, Executive Director, Tennessee Arts Commission gave an overview of this program to the Board. The Arts Commission was awarded a \$1 million civil monetary penalty (CMP) grant from the Center for Medicare and Medicaid Services (CMS) and the Tennessee Department of Health to implement Music & Memory Tennessee. She stated over 2,000 residents in 47 nursing homes in Tennessee will benefit from the program over a three (3) year grant period from February 1, 2019 – January 31, 2022. The lead partner with the Arts Commission is the Tennessee Commission on Aging and Disability. Additional partners include the Tennessee Health Care Association, Alzheimer’s Association-TN Chapter, Alzheimer’s Tennessee, Volunteer Tennessee, the Country Music Hall of Fame and Museum, and Music & Memory, Inc. Music & Memory is an evidenced-based national program using personalized music to improve quality of life and health outcomes for nursing home residents, including those with dementia or Alzheimer’s. All Tennessee nursing homes are eligible to apply to the program which includes training, equipment, certification fees, and technical assistance. Dr. Robbins asked if there were a certain number of minutes/days per week/threshold to see changes in residents.

Ms. Pope stated there was no threshold. She further elaborated this program assists with high stress events, bedtime, transportation events, etc. Ms. Pope stated more integration equals more success.

LICENSE STATUS REQUEST(S):

The following licensure status requests were presented -

Renaissance Surgery Center, Bristol –

This ambulatory surgical treatment center (ASTC) sought an extension of their inactive status for the license. Dr. Evelyn Brock recused. The facility was recently acquired by Renaissance Surgery Center, LLC. The CHOW application has been submitted and has been tentatively approved pending ratification by the Board. The new owner wants this license to remain on inactive status in order to get Medicare certification and will resume operations as soon as possible. Jerry Taylor was the representative for the facility. **Mr. Shulman made a motion to approve the inactive status extension for one (1) year; seconded by Dr. Robbins. The motion was approved.** Dr. Brock returned to the meeting following the vote.

Lakeway Regional Hospital, Morristown –

This one hundred thirty-five bed hospital is seeking to place their license on inactive status for a period of three (3) years. The facility ceased inpatient services effective December 28, 2018 with notice provided to the Center for Medicare and Medicaid services. Warren Gooch, attorney, and Tony Benton, CEO, represented the facility. Dr. Robbins asked about discussions with ER and EMS personnel on possible increase in usage of these services. Mr. Benton stated notices were made last year. He further stated that work ensued with others including EMS on a notification system regarding length of time spent in an ER. This system was implemented on January 28, 2019. Mr. Benton ensured the facility will continue to work with local persons/providers. He also informed the Board that Morris Hamblen hospital is still in operation and is adjacent to Lakeway Regional Hospital. Dr. Saunders asked the population of Morristown. Mr. Gooch stated approximately 30,000. He went on to state that other hospital CEOs in the area were good with absorbing services. Mr. Benton stated two (2) of the other hospitals in the area are sister Tennova facilities. Dr. Robbins asked the trauma designations of these hospitals. A trauma designation does not apply to these facilities located in Morristown. She further stated a preference for a one (1) year inactive status with reconsideration at the 2020 Board meeting. Mr. Gooch informed the Board of the precedent the Board set granting three (3) year inactive status requests for this particular system at different locations. Dr. Saunders noted there is a difference between a metro and rural area with this request. **Dr. Robbins made a motion to grant one (1) year inactive status; seconded by Mr. Shulman. The motion was approved by a roll call vote of 11 yea's to 4 no's with 1 abstention.**

Belcourt Terrace Nursing Home, Nashville –

This forty-nine (49) bed nursing home requested a third extension for its license to remain on inactive status for an additional one (1) year. The facility ceased operations December 15, 2015. A contract to purchase the real estate for a replacement facility was entered into and the purchaser is actively working to secure proper zoning for the real estate and a Certificate of Need (CON) for the construction of a replacement facility. The purchaser expects to be in a position to complete the purchase of the license in the summer of 2019. Hannah Cole was the representative for the facility. **Mr. Shulman made a motion to grant a third extension of the inactive status for one (1) year; seconded by Mr. Mynatt. The motion was approved.**

Nashville Surgery Center, Nashville –

This ambulatory surgical treatment center (ASTC) requested a second extension for its license to remain on inactive status for an additional year. The owner is in the process of re-syndicating ownership interests to a group of local surgeons, renovating the facility, and then re-opening the surgery center at its current location. Progress with negotiating agreements with health plans, getting Medicare certification, getting construction plans approved and completing renovation is being made, but additional time is needed. Jerry Taylor was the representative for the facility. **Mr. Shulman made a motion to grant a second extension of the inactive status for one (1) year; seconded by Mr. Boyd. The motion was approved.**

Senior Saints' Home, Chattanooga –

This home for the aged (RHA) requested a second extension for its license to remain on inactive status for an additional year. Senior Saints' needs a year to finalize the plans review process. The facility is experiencing a delay in completing the required remodeling due to financial constraints, but much progress has been made with completion envisioned in the next few months. Kennedy Omanwa, administrator, was the representative for the facility. **Mr. Shulman made a motion to grant a second extension of the inactive status for one (1) year; seconded by Mr. Boyd. The motion was approved.**

Cumberland River Homecare, Cookeville –

This home health agency requested an extension for its license to remain on inactive status for an additional one (1) year. Cumberland River Homecare is a part of the Cookeville Regional Medical Center Health System (CRMC). CRMC requested additional time to finish its evaluation and to complete a comprehensive search to identify an appropriate sales partner to continue the future operations of this facility. Travis Swearingen was the representative for the facility. **Mr. Shulman made a motion to grant an extension of the inactive status for one (1) year; seconded by Ms. Williford. The motion was approved.**

Baptist Skilled Rehabilitation Unit-Germantown, Germantown –

This eighteen (18) bed skilled nursing unit at Baptist Rehabilitation Unit-Germantown requested a fourth extension for its license to remain on inactive status for an additional year. Effective October 1, 2018, CMS altered the case-mix classification rules and payment system for short term nursing. Baptist is evaluating the feasibility of reopening this new combined unit in close proximity to one of its acute care hospitals to better treat post-acute patients who are medically fragile. Baptist requires additional time to vet this option. Travis Swearingen was the representative for the facility. **Mr. Shulman made a motion to grant a fourth extension of the inactive status for one (1) year noting that Baptist should have a resolution by the end of the one (1) year; seconded by Dr. Robbins. The motion was approved.**

Baptist Memorial-Memorial Skilled Nursing Facility, Memphis –

This thirty-five (35) bed skilled nursing unit at Baptist Memorial Hospital-Memphis requested a fifth extension for its license to remain on inactive status for an additional year. Continued inactive status for this facility will enable Baptist Memorial to reach a definitive plan for the future operation of this facility. The ultimate plan for these two (2) licensed facilities, Baptist Skilled Rehabilitation Unit-Germantown and Baptist Memorial-Memorial Skilled Nursing Facility, is to combine into one (1) licensed entity. Travis Swearingen was the representative for the facility. **Mr. Shulman made a motion to grant a fifth extension of the inactive status for one (1) year noting that Baptist should have a resolution by the end of the one (1) year; seconded by Dr. Robbins. The motion was approved.**

Signature HealthCare at Methodist, Memphis –

This forty-four (44) bed nursing home requested an extension for its license to remain on inactive status for an additional year. Signature HealthCare continues to search for viable options to reactivate the licensed facility and beds. No such option has presented itself at this point in time and additional time in inactive status is needed to find the best option for the continued use of this facility. Chris Puri was the representative for the facility. **Mr. Shulman made a motion to grant an extension of the inactive status for one (1) year; seconded by Dr. Brock. The motion was approved.**

Signature HealthCare at Saint Francis, Memphis –

This one hundred ninety-seven (197) bed nursing home requested an extension for its license to remain on inactive status for an additional year. Signature HealthCare continues to search for viable options to reactivate the licensed facility and beds. No such option has presented itself at this point in time and additional time in inactive status is needed to find the best option for the continued use of this facility. Chris Puri was the representative for the facility. **Mr. Shulman made a motion to grant an extension of the inactive status for one (1) year; seconded by Ms. Williford. The motion was approved.**

Family Ministries John M. Reed Center, Limestone –

This thirty-eight (38) bed nursing home requested to place its license on inactive status effective October 4, 2018. Jonathan Bailie, Chief Operating Officer, was the representative for the facility. **Mr. Shulman made a motion to grant the inactive status request until the October 2019 Board meeting; seconded by Mr. Mynatt. The motion was approved.**

WAIVER REQUEST(S):

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

Jellico Community Hospital, Inc., Jellico –

This licensed fifty-four (54) bed hospital sought to discontinue OB services. Representative for the facility was Joe Thomason via phone. Dr. Saunders questioned the number of deliveries and distance of nearest provider of OB servicers. Mr. Thomason informed the Board the facility delivered approximately one hundred twenty (120) babies per year. He stated the nearest OB provider is thirty (30) miles away. Mr. Thomason stated prenatal and postnatal care will continue. Physicians continue to be at the facility, but declining finances and certified registered nurse anesthetist (CRNA) availability requires the facility to request a waiver of the OB requirement. It was also stated there is not an active call schedule for OB doctors. Dr. Robbins asked if the facility had a helipad with Mr. Thomason stating yes. It was identified that the closest hospital to Jellico is in Kentucky. Dr. Saunders asked if the Board were not to grant the waiver would the hospital look at closing completely due to the financial situation. Mr. Shulman referenced Governor Lee’s executive order related to rural distressed counties of which Campbell county where Jellico is found is not noted as one of these. He further stated the belief that the Governor wants these looked at closely especially in situations such as what has been presented. Mr. Shulman also recommended sharing with the new Commissioner of Health. **Mr. Gee made a motion to grant the waiver request; seconded by Mr. Mynatt. The motion was approved.**

LeBonheur Children’s Medical Center, Memphis –

This licensed two hundred and fifty-five (255) bed hospital requested to increase their acute pediatric bed count by nineteen (19) licensed beds. LeBonheur Children’s Medical Center, Memphis is a satellite of Methodist Healthcare-Memphis Hospitals. The total licensed bed complement will be two hundred and seventy-four (274) beds upon approval. The request is made pursuant to the Tennessee Health

Services and Development Agency statute T.C.A. §68-11-1607(g). Representative for the facility was Byron Trauger, attorney. **Mr. Shulman made a motion to grant the waiver request; seconded by Mr. Boyd. The motion was approved.**

Erlanger East Hospital, Chattanooga –

This licensed one hundred and thirteen (113) bed hospital requested to increase its general acute care beds by eleven (11). Erlanger East Hospital, Chattanooga is a satellite of Chattanooga-Hamilton County hospital Authority. The total licensed bed compliment will be one hundred and twenty-four (124) beds upon approval. The request is made pursuant to the Tennessee Health Services and Development Agency statute T.C.A. §68-11-1607(g). Representative for the facility was Byron Trauger, attorney. **Mr. Shulman made a motion to grant the waiver request; seconded by Mr. Gee. The motion was approved.**

Takoma Regional Medical Hospital, Greeneville and Laughlin Memorial Hospital, Greeneville –

Laughlin Memorial Hospital, Greeneville, a licensed one hundred and forty (140) bed general acute care hospital owned by a subsidiary of Mountain State Health Alliance and Takoma Regional Hospital, Greeneville, a licensed one hundred (100) bed general acute care hospital owned by a subsidiary of Wellmont Health System sought approval by the Board for a satellite parent designation. Takoma Regional Hospital requested to be a satellite of Laughlin Memorial Hospital per hospital rule 1200-08-01-.01(37)(b) effective April 1, 2019. Representative for the facility was Dan Elrod, attorney. Mr. Elrod further clarified for the Board that Laughlin desires to be the parent campus with Takoma being the satellite yet having Takoma's license to be the surviving license. Dr. Robbins recused from this discussion and vote. **Mr. Shulman made a motion to grant the waiver request; seconded by Mr. Boyd. The motion was approved.**

Lincoln and Donalson Care Centers, Fayetteville –

Lincoln and Donalson Care Centers sought to no longer be required to have a waiver for one (1) administrator to serve both nursing home facilities. This request is due to declining census at the Lincoln Care Center location. Both facilities are under the same license, # 159. This was granted by the Board for Licensing Health Care Facilities in 1990. At the February 7, 2018 Board meeting, the Board granted the request for one (1) year for one administrator to be for the two (2) buildings with a report back to the Board. The facility also updated the Board to its current status. Representative for the facility was Vicky Groce, Chief Nursing Office, who joined by phone. **Mr. Shulman made a motion to grant the waiver request; seconded by Mr. Breeden. The motion was approved.**

DISCUSSION(S):

Prestige Assisted Living of Loudon County, Loudon, (ACLF) Progress Report-

Alicia McMurray, attorney for the facility, presented the progress report to the Board. She presented that an acceptable POC had been submitted to the East Tennessee Regional Office (ETRO) with all life safety deficiencies cleared, but with health deficiencies cited at the revisit survey. The submitted progress report identifies the areas in which improvements have been made in order to remove the suspension of admissions on the license. Those areas are as follows –

Development of a QA/QI Committee: This committee was founded to address deficient practices previously cited and to address any potential new deficiencies. The committee met monthly for the last five months. Resident meetings have been implemented on a monthly basis.

New Smoking Policy: A new smoking policy has been implemented in the facility. All smoking material is kept in a designated place during the day and residents are only allowed to smoke at designated smoke breaks in designated areas while being monitored by staff.

New Narcotic Disposal Policy: A new procedure has been implemented for the disposal of narcotic medication.

Posting of Required Statements: All required statements have been posted in the facility.

TB Testing: TB skin tests are to be administered annually to all residents in the month of July.

Influenza Vaccination Program: The facility is administering the 'flu' vaccine to all residents and staff free of charge every October.

Medication Administration Policy: Only licensed staff administers medications. The Director of Nursing (DON) is reviewing the medical records daily to ensure licensed staff are documenting. No medication is administered after 9 pm when licensed staff leaves. Hospice staff is to administer medication after 9 pm for hospice residents.

New Alcohol Policy: A new alcohol policy has been implemented. Residents are not to have alcohol in their possession.

New Policy Aggressive Behavior: Staff has been trained to note aggressive behaviors and to notify the DON of such.

New Policy Hospice Patients: All hospice care plans have been updated in current hospice resident charts. The DON is completing monthly audits of hospice patient charts.

Pest Control: The facility has contracted with a pest control company who comes to the facility at least monthly and more frequently if needed.

New Policy Code Status: All residents with do not resuscitate status must sign a POST form. This will be placed in the resident's chart. All code status' are marked on residents' charts. The DON is performing an annual review of resident charts to ensure DNR residents have proper documentation on file.

New Policy Care Plans, Implementation of Quarterly Care Meeting: The licensure regulations are followed such that each resident careplan is placed in the chart within five (5) days of admission. The DON is to review careplans on a quarterly basis.

Ms. Tippens stated to the Board the facility is to remain under the SOA due to continuing deficiencies. Tamra Turberville of the East Tennessee Regional Office (ETRO) informed the Board that her office is working with the facility on the latest POC for second cited health deficiencies. Vincent Davis, Director of Health Care Facilities, questioned the current census. The current census is twenty-seven (27) with a total licensed bed count of fifty-seven (57).

Magnolia Manor, McKenzie, Progress Report – Status of Meeting Requirements of Agreed Order-

Ms. Reed gave background to this agenda item. The Board had requested when the agreed order was signed to have the applicant for licensure to appear before the Board during its next scheduled meeting to show progress towards completion of the application process. Lynda Miller, owner, presented the current status of her licensure application to the Board. Craig Parisher, Facilities Construction Director, informed the Board that no architectural plans have been received for this applicant. He further clarified for the Board that the life safety surveyors have not cited deficiencies on this facility. Ms. Miller informed the Board that the location of this facility holds two (2) buildings with the newer of the two being designated for the licensed facility.

Riverdale Assisted Living Facility, Memphis, Request to Lift Probation-

Rhonda Westbrooks, administrator, presented to the Board the facility was in compliance with licensure requirements. She stated a new DON was hired which helped to solve most problems encountered during the survey process. Ms. Westbrooks stated to the Board that the facility's most recent survey finds them in compliance. She had a copy of a letter regarding the results of a complaint survey in

August 2018 which stated the facility was in compliance. **Mr. Shulman made a motion to approve an order of compliance; seconded by Dr. Brock. The motion was approved.**

Inaugural Meeting of the Coordinated Community Response on Elder Abuse in regards to grant work with the Plough Foundation-

The purpose of this inaugural meeting is for development of protocol on elder abuse primarily in the hospital setting. It will also be used by district attorneys across the state. The meeting was thought to have occurred prior to the Board meeting, but such was not the case. Ms. Williford would be attending the meeting on February 6 and would bring a report back to the Board at the June meeting.

Home Healthcare Solutions of Davidson, LLC, Nashville-

This professional support services agency (PSS) requested at the October 3, 2018 Board meeting to waive the requirement for a contract with the Department of Intellectual and Developmental Disabilities (DIDD). The Board requested a progress report on the facility's ability to secure a contract with DIDDs. In addition to the report on obtaining a contract with DIDDs, the Board wanted further information provided explaining the provider's relationship with TennCare. Representative for the facility was Tony O'Digie, owner. Mr. O'Digie stated an application for contract had been submitted to DIDDs and he was awaiting a response. The Board asked when this was submitted and he stated in December of 2018. The facility has been communicating with Linda Maurice at DIDD and working with her to obtain this contract. Ms. Tippens asked the facility about their most recent survey experience. Mr. O'Digie stated they currently have no patients under the PSS license and are not providing such services. Ms. Turberville of the ETRO stated a surveyor went to the facility and attempted a survey, but had difficulty. Mr. O'Digie stated the waiver didn't require a surveyor to visit and since the facility was not providing services a survey was not needed. He further stated he had uncertainty of who was surveying. Mr. Davis stated this appeared to be a communication issue with Home Healthcare Solutions and doesn't address completing a survey. Mr. O'Digie confirmed paperwork has been submitted to DIDD and has proof of such. Ms. Reed confirmed with licensure staff that DIDDs is currently working on a contract for this agency and it has not been finalized. Ms. Turberville informed the Board that the POC submitted by Home Healthcare Solutions was unacceptable with a notice letter being sent to the provider. The facility was provided guidance to address the unacceptable POC; remove the timeframe for a visit date as annual surveys are unannounced. The Board requested another progress report at the June 2019 meeting.

Vanderbilt University Medical Center, Nashville, Report on Accepted Plan of Care (POC)-

Dan Elrod, attorney, opened the presentation for Vanderbilt. He referenced an incident of December 2017 that led to negative survey findings and submission of a POC by the facility. Mr. Elrod then introduced Dr. Wright Pinson, Deputy Chief Executive Officer/Chief Health System for VUMC. Dr. Pinson recapped the incident of December 2017 which was the death of a patient after receiving the wrong medication. He stated the patient's family was informed of the incident and were settled with. Dr. Pinson stated the death was reported to the ME's office and the facility addressed the incident immediately calling it a medication error. Dr. Pinson further stated VUMC did not report the death to the Tennessee Department of Health (TDH) as this had not been a requirement since 2009. He stated VUMC has made many changes in important policies with improved processes to address this event and to prevent another unfortunate event. Dr. Pinson introduced Mitch Edgeworth, CEO, who addressed the Board. Mr. Edgeworth stated reporting guidelines are in place after this survey. He stated steps include how practitioners access paralytic medications. Mr. Edgeworth stated there was work with the pharmacy at VUMC to develop processes including red shrink wrap being used on paralytic medication. He further stated nurse double checks are now required on medications, requirement to report to ME's

office, reporting requirement changes, etc. have been put into place. A highlight of the reporting requirement changes includes a change in the review of adverse events to include review of multidisciplinary team for reporting to TDH. Mr. Edgeworth introduced Marilyn Dupree, Executive Chief Nursing Office. Ms. Dupree reported to the Board on the new policies and procedures to be implemented for practitioners. She stated this will also include new orientees. Ms. Dupree stated the focus is safe patient treatment and the establishment of detailed requirements for monitoring patients and communication of information during patient handoff. She stated an audit tool is being used to establish effectiveness and any need for improvement. Ms. Dupree also stated key nursing resources have been added to VUMC.

APPROVAL OF MINUTE(S):

The following minutes were presented –

October 3, 2018 – Board Meeting

December 18, 2018 – Performance Improvement Issue Standing Committee Meeting

Mr. Shulman made a motion to accept the above meeting minutes; seconded by Dr. Robbins. The motion was approved.

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

The CHOW and initial licensure applications received by the Office of Health Care Facilities were presented as follows -

The following CHOW applications were presented to the Board for special consideration – Ashton Place Health & Rehab Center, Memphis (NH) and Midsouth Health and Rehabilitation Center, Memphis (NH). These applications were presented to the Board for ratification due to the complex nature of the changes of ownership and the history of these two facilities with their operation, former ownership, and presentations before this Board. **Mr. Shulman made a motion to approve ratification of the CHOW applications; seconded by Mr. Breeden. The motion was approved.**

The following initial applications were processed by the Board’s administrative staff without concern –

Ambulatory Surgical Treatment Center: UCH Vascular Access ASC, Memphis

Assisted Care Living Facilities: Legacy Village of Cleveland, Cleveland; Morning Pointe of Knoxville, Knoxville; NHC Place, Cavette Hill, Knoxville; Sunset Gardens, Mountain City; and The Crossings at Victory Station, Murfreesboro

End Stage Renal Dialysis Clinics: Fresenius Kidney Care of Goodlettsville, Goodlettsville and Singleton Farms Dialysis, Memphis

Home Medical Equipment: National Seating & Mobility, Inc., Knoxville

Professional Support Services Agency: Quality of Life, Spring City

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

Dr. Brock recused from the vote on the following initial application –

Ambulatory Surgical Treatment Center: The Plastic Surgery Center, Brentwood, LLC, Brentwood

Mr. Shulman made a motion to approve; seconded by Dr. Robbins. The motion was approved.

Dr. Brock returned to the meeting.

The following CHOW applications were presented to the Board for approval without staff concern –
Assisted Care Living Facilities: Brookdale Hendersonville, Hendersonville; Brookdale Kingston, Kingston
d/b/a Sycamore Springs, Kingston; Cadence at Rivergate, Madison; Maybelle Carter Senior Adult Home,
Madison; Northshore Senior Living, Knoxville; and Somerby of Franklin, Franklin

Ambulatory Surgical Treatment Centers: Bowden Gastro Associates, LLC, Memphis and UCH Vascular
Access ASC, Memphis

Home Health Agencies: AbilisHealth Nashville, LLC, Brentwood; AbilisHealth Knoxville, LLC, Knoxville;
AbilisHealth Martin, LLC, Martin; AbilisHealth McMinnville, LLC, McMinnville; and AbilisHealth Nashville,
LLC, Nashville

Residential Home for the Aged: Fairfield Glade Assisted Living, Crossville; His House, Cookeville; and
Tree of Life Residential Care, LLC, Tracy City

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

LICENSURE STATUS UPDATE(S):

The following licensure status update was presented –

Bristol Surgery Center, Bristol (ASTC) had requested to place their license on inactive status for minor
renovations to the facility. This request was effective November 8, 2018 with the intent to reopen the
facility on January 2, 2019.

Pendleton House of Love, Memphis (RHA) requested to have the facility's license placed back to active
status effective March 1, 2019. The inactive status of the license was extended on October 3, 2018 for a
period of one (1) year. Pendleton House of Love's license was previously on probation which was lifted
on October 4, 2017. The facility will undergo a survey due to the length of the inactive status of the
license.

Upper Cumberland Hospice of Chattanooga, Chattanooga (Hospice) requested to have the facility's
license placed back to active status effective February 4, 2019. The facility's license was placed on
inactive status in February 2018. The facility will undergo a survey due to the length of the inactive
status of the license.

FACILITY CLOSURES:

A listing of all facility closures during the time period of October 1, 2018 thru January 1, 2019 was
provided to the Board. No discussion was held.

BOARD POLICY CONSENTS:

The following Board Policy Consent requests were presented –

Board Policy #81 request –

Nashville Center for Rehabilitation and Healing, LLC, Nashville

Diversicare of Smyrna Healthcare & Rehabilitation Center, Smyrna

**Mr. Shulman made a motion to approve the requests for a Board Policy #81 waiver to be issued to the
above facilities; seconded by Mr. Breden. The motion was approved.**

Board Policy #32 request –

Grace Healthcare of Cordova, Cordova
Princeton Transitional Care & Assisted Living, Johnson City (NH #337 ONLY)

Mr. Shulman made a motion to approve the requests for a Board Policy #32 waiver to be issued to the above facilities; seconded by Mr. Mynatt/Dr. Robbins. The motion was approved.

Board Policy #39 request –
Sommerfield at the Heritage, Brentwood and The Heritage at Brentwood, Brentwood (ACLF to open March 2019)

Mr. Shulman made a motion to approve the request for a Board Policy #39 waiver to be issued to the above facilities; seconded by Mr. Breeden. The motion was approved.

ORDER(S):

Consent Orders -

The following consent orders were presented -

Cades Center – ACLF – Survey conducted resulting in a \$1,500 CMP, six (6) month probation, and to appear before the Board at the June 2019 Board meeting. **Mr. Shulman made a motion to accept; seconded by Mr. Mynatt. The motion was approved.**

Caring Estates – RHA – Voluntary surrender same as revocation of license. **Mr. Shulman made a motion to accept; seconded by Mr. Boyd. The motion was approved.**

Dominion Senior Living of Crossville – ACLF – Survey conducted resulting in a \$1,000 CMP. **Mr. Shulman made a motion to accept; seconded by Mr. Mynatt. The motion was approved.**

Martin Boyd Christian Home – ACLF – Survey conducted resulting in a \$2,000 CMP. **Mr. Shulman made a motion to accept; seconded by Dr. Robbins. The motion was approved.**

Ridgemont Manor #2 – ACLF – Survey conducted resulting in a \$3,500 CMP. **Mr. Shulman made a motion to accept; seconded by Ms. Williford. The motion was approved.**

REGULATIONS:

The following rule language was presented as proposed rule language for approval by the Board –

- Public Chapter 427 – necessitates rulemaking for assisted care living facilities to require criminal background checks be completed prior to employing any person who will be in a position that involves providing direct care to a resident or patient. Mr. Crisp asked is this was considered a substantive change. Ms. Tippens stated most ACLFs do criminal background checks this just puts this requirement into the rule. She stated it was presented to the PI Standing Committee. Dr. Robbins asked if a facility could still hire even if there was an incident on the criminal background check. Ms. Tippens stated yes that this was at the discretion of the facility. Dr. Robbins also asked if a criminal background check was performed only once which Ms. Tippens confirmed to be the case. **Mr. Shulman made a motion to approve and move forward; seconded by Dr. Robbins. The motion was approved.**
- Amendments to hospital rule 1200-08-01-.05(5) to make the rules consistent with the new effective definition of licensed healthcare professional in rule 1200-08-01-.01(45). Ms. Tippens stated this was also presented to the PI Standing Committee upon the recommendation of THA. The desire was to create consistency with other aspects of the hospital rule. **Mr. Shulman made a motion to approve and move forward; seconded by Mr. Gee. The motion was approved.**

- Chapter 1200-08-34 Standards for Home Care Organizations Providing Professional Support Services rule language. Ms. Tippens stated this is a chapter rewrite and clean-up of the rule language. She further stated this was presented by Melanie Kellar at the December 2018 PI Standing Committee. **Mr. Shulman made a motion to approve and move forward; seconded by Ms. Williford. The motion was approved.**
- Consideration of language changes regarding the Commissioner's rules – Review of Health Care Facility Construction Plans and Specifications. Mr. Parisher presented the new language to the Board. He stated this is clean-up language for the definition of health care facility and occupancy type and new language for electronic submission of architectural plans including a \$15 fee. The electronic submission is an option for submission. A provider may still submit hard copies. **Mr. Griffin made a motion to approve and move forward; seconded by Mr. Shulman. The motion was approved.**