



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: January 29, 2018
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: February 7, 2018
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 7, 2018

<https://web.nowuseeit.tn.gov/Mediasite/Play/c27e3052ac6b4e8086b275f9767938031d>

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

FEBRUARY 7, 2018

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

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

- 1. CALL THE MEETING TO ORDER AND ESTABLISH A QUORUM.**
- 2. REPORTS.**
 - A. EMS REPORT - Robert Seesholtz**
 - B. NURSE AIDE REPORT – Wanda King**
 - C. OFFICE OF GENERAL COUNSEL REPORT – Caroline Tippens**
- 3. BOARD APPROVAL FOR THE FOLLOWING INTERPRETATIVE GUIDELINES**
 - A. Ambulatory Surgical Treatment Center (ASTC) Definition**
- 4. LICENSE STATUS REQUESTS.**

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. This facility was initially granted inactive status on September 7, 2016 which expired in October 2017.

REPRESENTATIVE(S): Kennedy N. Omanwa, Administrator

BELCOURT TERRACE NURSING HOME, NASHVILLE

This forty-nine (49) bed nursing home facility is requesting a second extension waiver for their license to remain on inactive status for an additional one (1) year through February 2019. Belcourt Terrace Nursing Home ceased operation on December 15, 2015 and has a prospective purchaser who is working diligently to identify a location for a replacement facility which will allow the sale of the license to take place and pending receipt of a Certificate of Need. Belcourt Terrace Nursing Home's license was placed on inactive status in January 2016 for one (1) year and an extension waiver was granted on February 8, 2017 which expires in February 2018.

REPRESENTATIVE(S): Michaela Poizner, Attorney

BAPTIST MEMORIAL-MEMPHIS SKILLED NURSING FACILITY, MEMPHIS

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; and a second extension inactive status waiver for additional twelve (12) months was granted January 15, 2015; and a third extension inactive status waiver for additional twelve (12) months was granted January 14, 2016; and the fourth extension for inactive status was granted February 8, 2017 for an additional twelve (12) months which will expire February 7, 2018.

REPRESENTATIVE(S): Dan Elrod, Attorney

**BAPTIST SKILLED REHABILITATION UNIT-GERMANTOWN,
GERMANTOWN**

This eighteen (18) bed skilled nursing unit at Baptist Rehabilitation-Germantown is requesting a third 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 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 for additional twelve (12) months which will expire on February 7, 2018.

REPRESENTATIVE(S): Dan Elrod, Attorney

UPPER CUMBERLAND HOSPICE AND PALLIATIVE CARE, LLC, COOKEVILLE #9

Upper Cumberland Hospital and Palliative Care, LLC, Cookeville, a ten (10) bed residential hospice facility is requesting an extension waiver for their license to remain on inactive status for an additional one (1) year. The current lease has expired and operations are inactive at this time. Upper Cumberland Hospice and Palliative Care, LLC, Cookeville was granted an inactive status waiver on February 8, 2017 for one (1) year which expires February 2018.

REPRESENTATIVE(S): Bryon R. Trauger, Attorney

UPPER CUMBERLAND HOSPICE OF CHATTANOOGA, COOKEVILLE #622

Upper Cumberland Hospice of Chattanooga, Cookeville, a hospice provider is requesting an extension waiver for their license to remain on inactive status for an additional one (1) year. The current lease has expired and operations are inactive at this time. Upper Cumberland Hospice of Chattanooga, Cookeville was granted an inactive status waiver on February 8, 2017 for one (1) year which expires February 2018.

REPRESENTATIVE(S): Byron R. Trauger, Attorney

HOSPICE OF CHATTANOOGA WALKER ROAD, CHATTANOOGA #8

Hospice of Chattanooga Walker Road, Chattanooga, a residential hospice facility is seeking to place their license on inactive status for three (3) years. Hospice of Chattanooga subleases the unit space from Standifer Place Properties, LLC, an NHC affiliate. This facility provides residential hospice service at The Health Center at Standifer Place (HCSP). Unfortunately, the residential hospice unit's location was difficult for many families and caregivers to reach so on November 30, 2017 the unit closed. Hospice of Chattanooga has entered into a three-year lease with Siskin Hospital. Hospice of Chattanooga will offer only GIP and respite care at Siskin Hospital. It is the hope and expectation of Hospice of Chattanooga will relocate and reinstitute residential hospice services after three years at Siskins.

REPRESENTATIVE(S): Byron R. Trauger, Attorney

SIGNATURE HEALTHCARE AT METHODIST, MEMPHIS

This forty-four (44) bed nursing home is requesting to place its license on inactive status for one (1) year. It is necessary for the facility to seek inactive status because the continued operation of the facility is no longer economically feasible. The facility discharged its last patient as of January 19, 2018. Signature HealthCare wishes to maintain their license while it determines the best and most effective means to provide post-acute and long term care services to patients, and how it can utilize the licensed nursing home.

REPRESENTATIVE(S): Christopher C. Puri, Attorney

SIGNATURE HEALTHCARE AT SAINT FRANCIS, MEMPHIS

This one hundred ninety-seven (197) bed nursing home is requesting to place its license on inactive status for one (1) year. It is necessary for the facility to seek inactive status because the continued operation of the facility is no longer economically feasible. This facility was decertified from Medicare and Medicaid participation in 2017, but continued to operate while an appeal of that decertification was pending. The facility decided to voluntarily suspend operations. The facility discharged its last patient on January 12, 2018 and the facility is closed. Signature HealthCare at Saint Francis wishes to maintain their license while it determines the best and most effective means to provide post-acute and long term care services to patients, and how it can utilize the licensed nursing home.

REPRESENTATIVE(S): Christopher C. Puri, Attorney

CUMBERLAND RIVER HOME HEALTH, COOKEVILLE

This home health facility is seeking to place their license on inactive status for one (1) year. Cumberland River Homecare is part of the Cookeville Regional Medical Center Health System which includes Highland Rim Home Health. Highland Rim Home Health is authorized to serve all of the counties in which Cumberland River is authorized to provide service. In light of overlapping service area of the two agencies it has been determined that efficiencies can be achieved by combining the day-to-day operations of the two agencies. Cumberland River Homecare will continue to serve patients until the transition is complete, which will likely be in mid-February 2018. The inactive status effective date is requested to be the date on which the last patient is discharged.

REPRESENTATIVE(S): Dan Elrod, Attorney

5. 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.**

Claiborne Health and Rehabilitation Center, Tazewell – Seeking Extension
-Patti Ketterman, Administrator/President/Chief Administrative Officer

B. OTHER WAIVER REQUEST(S)

VANDERBILT-INGRAM CANCER CENTER AT MAURY REGIONAL SPRING HILL; GATEWAY-VANDERBILT CANCER TREATMENT CENTER; AND VANDERBILT-INGRAM CANCER CENTER, FRANKLIN

Vanderbilt-Ingram Cancer Center at Maury Regional Spring Hill; Gateway-Vanderbilt Cancer Treatment Center; and Vanderbilt-Ingram Cancer Center, Franklin are three (3) ambulatory surgical treatment centers which is wholly-owned by Vanderbilt University Medical Center and Gateway. The only service provided at these facilities is radiation therapy by means of a linear accelerator. No surgeries or other invasive procedures are performed in these facilities. Vanderbilt University Medical Center and Gateway is seeking to waive the following ASTC rules along with the marginal notes explaining the bases for the requests: 1200-08-10-.04(20)(b)(3) relative to the provision of a bed and other furnishings; 1200-08-10-.04(20)(b)(5) relative to the provision of bath basin, emesis basin, bedpan and urinal; 1200-08-10-.04(20)(c)(3) relative to required processes for insertion of venous catheter; 1200-08-10-.04(20)(c)(4) relative to food handling, sources of air pollution and culturing of autoclaves and sterilizers; 1200-08-10-.04(21)(a) relative to the applicability of performance improvement to post-operative surveillance; and 1200-08-10-.04(21)(f) relative to the applicability of performance improvement to central venous catheter insertion.

REPRESENTATIVE(S): C. Wright Pinson, Deputy Chief Executive Officer, Vanderbilt University Medical Center

VANDERBILT UNIVERSITY MEDICAL CENTER (VUMC), NICU-MOTHER CARE UNIT

This facility is seeking to waive for variances outlined to utilize three (3) existing double-occupancy licensed rooms within the MCJCHV neonatal intensive care unit. VUMC is proposing the conversion of (3) double occupancy NICU rooms to (3) NICU-mother care units. The NICU-mother care units include (1) NICU patient (existing to remain) and (1) postpartum patient. VUMC is seeking to waive certain sections of the 2010 FGI guidelines as follows:

- Code compliance analysis is based on conformance to FGI 2010 section 2.2-2.11.2.2 with reference to section 2.2-2.2.2.1;
 - For compliance with section 2.2-2.2.2.1(1) see functional program;
 - All rooms are in compliance with area requirements of section 2.2-2.2.2.2(b) – 100 sf per bed minimum;
 - Rooms 4301 and 4313 are in compliance with clearance requirements in section 2.2-2.2.2.2(2);
 - Room 4312 is in compliance with clearance requirements of 2.2-2.2.2.2(a), but is 12 ½” short of compliance with 2.2-2.2.2.2(b) which requires 4’-0” clear at the foot of the bed. A variance is requested for this section of the code.

In summary, the request for the waiver includes:

- Request Variance for section 2.2-2.2.2.2(2)(b) in Patient Room 4312, as existing condition only allows 2'-11 ½" clearance between foot of bed and existing nurse station sidewall;
- Request Variance for section 2.2-2.10.2.2(3) in Patient Rooms 4312, 4313 & 4301 as existing condition does not allow 8'-0" clearance between multiple beds. Actual dimension between bassinet and bed is 5'-5 ½".

REPRESENTATIVE(S): C. Wright Pinson, Deputy Chief Executive Officer, Vanderbilt University Medical Center

6. DISCUSSION(S).

- A. **Board Policy #81** – Unexpected Loss of Nursing Home Administrator
- B. Tennessee End of Life Partnership (TELP) is requesting Board's approval for minor changes to the Provide Identification of a Surrogate Form; also requesting assistance with a mail out concerning Alert for Rule Clarification for the POST/Advance Directive.

REPRESENTATIVE(S): Judy Eads, President

- C. **LINCOLN AND DONALSON CARE CENTERS, FAYETTEVILLE**
Lincoln Care Center 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 contingent on each building having a licensed nursing home administrator. Lincoln and Donalson Care Centers due to declining census are seeking to have one administrator for both facilities thus requesting the Board to revisit the 1990 decision.

REPRESENTATIVE(S): Candie Starr, CEO, Lincoln Health System

7. APPROVAL OF MINUTES.

- A. October 4, 2017 – Board Meeting
- B. December 5, 2017 – Performance Improvement Issue Standing Committee Meeting

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

A. SPECIAL CONSIDERATION

(CHOWS)

(1) MidSouth Health and Rehab, Memphis #248

B. RATIFICATION.

1. QUALIFYING APPLICATIONS (Approval)

(INITIALS)

(a) Assisted Care Living Facility

Bristol Terrace Assisted Living, Nashville
Morning Pointe of Spring Hill, Spring Hill
Traditions of Spring Hill, Spring Hill

(b) End Stage Renal Disease Facility

Briley Parkway Dialysis, Madison
Woodbine Dialysis, Nashville

(c) Home Medical Equipment Facility

National Biological Corporation, Nolensville
Southern Patient Care, Inc., Columbia
Star Medical, Inc., Nashville
The Richmond Light Co., Nolensville

(CHOWS)

(a) Assisted Care Living Facility

Charter Senior Living at Hermitage, Hermitage

(b) Home Medical Equipment Facility

Titan Healthcare, Mt. Juliet

(c) Nursing Homes

Christian Care Center of Milan, Milan
Concordia Nursing and Rehabilitation-Fairpark, Maryville
Concordia Nursing and Rehabilitation-Loudon, Loudon
Concordia Nursing and Rehabilitation-Maryville, Maryville
Concordia Nursing and Rehabilitation-Northaven, Knoxville
Concordia Nursing and Rehabilitation-Smith County, Carthage
Graceland Rehabilitation and Nursing Center, Memphis

(d) **Professional Support Services**

Omni Support Services, Jackson
Omni Support Services, Greeneville
Omni Support Services, Nashville

2. **NON-QUALIFYING APPLICATIONS (DENIAL)**

- (1) Ashton Place Health & Rehab, Memphis #252
- (2) The Highlands of Memphis Health & Rehab, Memphis #257

9. **LICENSE STATUS UPDATES.**

RIDGEMONT MANOR #1, MEMPHIS

Ridgemont Manor #1, Memphis placed its license back to active status effective November 1, 2017. This ACLF had placed their license on inactive at the February 8, 2017 Board meeting in order to pursue a different program licensure type.

BEST NURSES, INC., MEMPHIS

This home health agency placed its license back on active status effective January 18, 2017. Best Nurses, Inc., had been assessed substantial extrapolated overpayments by the ZPIC's and was in a two (2) year appeal process with ZPIC prompting this agency to request an inactive status which was granted January 14, 2016.

**MIDDLE TENNESSEE CENTER FOR AMBULATORY SURGERY
TREATMENT CENTER, SHELBYVILLE F/K/A CENTER FOR SURGICAL
SPECIALTIES, SHELBYVILLE #128**

This ambulatory surgical and treatment center license was placed on inactive status on February 8, 2017 which will expire on February 2018. Ms. Toni Canonico, RN, Administrator and owner has requested to close the facility license.

SURGICAL SERVICES, P.C., SWEETWATER

This ambulatory surgical treatment center (ASTC) was placed on inactive status June 7, 2017 which would expire June 2018. Dr. Ray Villanueva, President and Owner decided to close the facility effective November 23, 2017.

MORGAN CARES SENIOR CARE FACILITY, LLC, MEMPHIS

This eleven (11) bed Residential Home for the Aged (RHA) facility was placed on inactive status on February 8, 2017 which will expire on February 2018. Ms. Michelle Fifer, Executive Director/Administrator, has requested to close the facility license.

***FACILITY CLOSURES**

See attachment.

10. BOARD POLICY CONSENTS.

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

Wharton Nursing Home, Pleasant Hill
The Waters of Johnson City, Johnson City

B. 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:

The Pavilion, Lebanon (Nursing Home) and The Pavilion Assisted Living, Lebanon (ACLF)

The Reserve at Spring Hill, Spring Hill (Nursing Home) and The Reserve at Spring Hill, Spring Hill (ACLF) – Application in Process

11. REGULATION(S).

A. PROPOSED RULE LANGUAGE FOR BOARD APPROVAL FOR RULEMAKING HEARING.

- (1) Ambulatory Surgical Treatment Center (ASTC) Rules 1200-08-10-.01(7)(b) – ASTC Definition Language.
- (2) Nursing Home Rules 1200-08-06-.06 NF Drug Disposal Rules for SB 1320-PC 355 – Language change.
- (3) Emergency Called Rulemaking Hearing for March 15, 2018 in the Poplar Conference Room, 9:00 a.m. – 12:30 p.m. for Fee Increases

12. ORDERS.

A. Consent Orders.

13. OTHER BUSINESS.

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

MINUTES
BOARD FOR LICENSING HEALTH CARE FACILITIES
February 7, 2018

The Board for Licensing Health Care Facilities Board meeting began February 7, 2018.

Dr. René Saunders, chairman, called the meeting to order. Ann Reed, Director of the Board for Licensing Health Care Facilities, conducted a roll call of attendance.

Dr. René Saunders, Chairman –here
Mr. Robert Breeden – here
Dr. Jennifer Gordon-Maloney – not here
Mr. Joshua Crisp – here
Ms. Carissa Lynch –here
Ms. Annette Marlar – not 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
Dr. Kenneth Robertson – here
Ms. Janet Williford – here
Dr. Evelyn Brock – not here
Mr. Paul Boyd – here
Ms. Gina Throneberry – here
Dr. Lisa Piercey – here
Ms. Patricia Ketterman - here

A quorum was established.

REPORTS:

EMS -

Robert Seesholtz, EMS Trauma System Manager, presented the EMS report. He presented the results of the focused site visit to Blount Memorial Hospital a Level III Trauma Center. This focused site visit was a follow-up to the site visit in October 2016 at which time the site team recommended a provisional status for one year. Mr. Seesholtz reported the site team's recommendation based upon the focused site visit was revocation of Blount Memorial's Level III trauma center designation. He further informed the Board that the facility was notified of the outcome of the focused site visit and the recommendation to be forthcoming to this Board. Blount Memorial Hospital submitted a letter dated January 4, 2018 relinquishing their Level III Trauma Center designation. The Board took no action. Mr. Seesholtz also shared the minutes of the last Trauma Care Advisory Council (TCAC) meeting held in August 2016. The last item Mr. Seesholtz provided to the Board was the TCAC's Trauma Care in Tennessee 2017 Report to the 110th General Assembly. He stated this report is not ready for public consumption. It must be presented to the legislature and the TCAC for approval.

OGC -

Caroline Tippens, Office of General Counsel (OGC), presented her report. She stated there are ten (10) open cases in the OGC. Four (4) of these were to be presented to the Board as consent orders. Ms. Tippens report on rule status for the Board was as follows – combined rules are still under review in the Attorney General's (AG) Office; fee increase rules will have rulemaking hearing March 15, 2018; central service technician, ambulatory surgical treatment centers abortion language, administration language, and nursing home civil monetary penalty rule language are in internal review with a goal for a June 2018 rulemaking hearing; proposed caregiver language, proposed invasive language for ambulatory surgical treatment centers, changes to the personal support services agency language relative to the Department of Intellectual and Developmental Disabilities, fee increases, and exemptions for mail order home medical equipment companies are in internal review as well; emergency rules for NF Drug Disposal rules have been filed along with proposed rules; and the Trauma Center rules are still in internal review. Mr. Shulman asked about proposed legislation and effects to the Board. Ms. Tippens stated there is much legislation relative to the Board, but reviews of such legislation is not complete. The Board will be updated at a later date with any required action. Mr. Shulman mentioned a bill by Bell essentially stating that newly drafted policies of a Department are to go to the AG's Office for review. He stated OGC may want to look at this bill as there may be policies that should be rule.

BOARD APPROVAL INTERPRETATIVE GUIDELINES (IG):

Ann Reed, Director of Licensure and the Board for Licensing Health Care Facilities, presented the IG for rule 1200-08-10-.01(7)(a) & (b) regarding the definition of ambulatory surgical treatment center (ASTC). She stated this IG resulted from several meetings of the Performance Improvement (PI) Standing Committee which met to address the four (4) anesthesia aspect of the definition. Ms. Reed stated this standing committee also approved recommended rule language changes to the ASTC definition which directly correlates to the presented IG. The rule language will be heard later in the meeting. **Mr. Shulman made a motion to approve the IG; seconded by Mr. Crisp. The motion was approved.**

LICENSE STATUS REQUEST(S):

Ms. Reed presented the following licensure status requests.

Senior Saints' Home –

This residential home for the aged (RHA) facility sought an extension of the inactive status for its license. The representative of the facility, Kennedy Omanwa, requested an additional twelve (12) months for inactive status. Senior Saints' Home is working to finalize their plans review submission to the department. The facility was first granted inactive status on September 7, 2017 which expired in October 2017. The facility was on the October Board agenda to extend the inactive status of the license, but was not considered at that time. Mr. Omanwa presented to the Board the facility was struck by lightning resulting in a fire to the facility. Construction was required to repair the structure and the building has been restored. Mr. Omanwa stated he still needs to submit plans to the department and hopes that within three to four months the review process will be complete. He further stated the remodel was extensive and was a large capital investment. **Mr. Mynatt made a motion to approve the extension to the inactive status request for an additional twelve (12) months; seconded by Mr. Shulman. The motion was approved.**

Belcourt Terrace Nursing Home –

This 49 bed nursing home sought a second extension to the inactive status of the facility license. The facility ceased operation and an inactive status was granted in January of 2016. The facility requests to keep the license in inactive status for an additional year through February 2019. Michaela Poizner, attorney, was the representative for the facility. She stated there are still ongoing negotiations with the prospective buyer relative to the purchase. **Mr. Shulman made a motion to approve the second extension to the inactive status request until the February 2019 Board meeting; seconded by Dr. Robertson. The motion was approved.**

Signature Healthcare at Methodist –

This 44 bed licensed nursing home sought to place its license on inactive status for one (1) year. Representative for the facility was Chris Puri, attorney. He indicated the facility sought inactive status because the continued operation of the facility was no longer economically feasible. Mr. Puri also informed the Board this facility is located within Methodist Midtown Hospital. The facility discharged its last patient on January 19, 2018. Signature HealthCare hopes to maintain their license while it determines the best and most effective means to provide post-acute and long term care services to patients utilizing the licensed nursing home. **Mr. Shulman made a motion to approve the inactive status request until the February 2019 board meeting; seconded by Mr. Mynatt. The motion was approved.**

Signature HealthCare at Saint Francis –

This one hundred ninety-nine (199) licensed bed nursing home sought to place its license on inactive status for one (1) year. Representative for the facility was Chris Puri, attorney. He stated it has become necessary for the facility to seek inactive status because continued operation of the facility is no longer economically feasible. The facility was decertified from Medicare and Medicaid participation in 2017, but continued to operate as a licensed only facility while an appeal of the decertification was pending. This placed a financial strain on the provider since the only patients were private pay. Signature HealthCare at Saint Francis decided to voluntarily suspend operations. The facility discharged its last patient on January 12, 2018 and the facility closed. Signature HealthCare at Saint Francis wants to maintain its license while determining the best and most effective means to provide post-acute and long term care services to patients using the licensed nursing home. Mr. Boyd asked what would occur if the request were denied. Ms. Reed deferred legal counsel for response. Ms. Tippens stated the license would not be able to renew. She asked Mr. Puri what are the plans for the facility? Mr. Puri stated the facility wishes to get recertified or to locate a purchaser of the facility. There were many questions from the Board members about the CON and applicability. Dr. Saunders asked how long the recertification process is. Ms. Tippens stated it is very lengthy. Mr. Puri stated if the facility were to terminate the license then obtaining a CON would limit the licensed bed number to 30. He stated the bed limit cap for a licensed nursing home is in order to control growth of Medicaid expenditures. **Mr. Shulman made a motion to approve the inactive status request until the February 2019 Board meeting; seconded by Dr. Robertson. The motion was approved.**

Cumberland River Home Health –

This home health agency sought to place its license in inactive status for one (1) year. Cumberland River Homecare is part of the Cookeville Regional Medical Center Health System which includes Highland Rim Home Health. Highland Rim Home Health is authorized to serve all counties that Cumberland River Homecare serves. In light of the overlapping service area of the two agencies, it was determined that efficiencies can be achieved by combining the day-to-day operations of the two agencies. Cumberland

River Homecare will continue to serve patients until the transition is complete which is likely to be in mid-February 2018. The inactive status is requested to be effective the date of the last patient discharge. Representative for the facility was Travis Swearingen, attorney. Mr. Swearingen informed the Board as of February 6 there were only four (4) patients. He further stated discharge of these patients would occur as care is completed or they choose to discharge to another agency. Dr. Robertson asked what happens in one year. Mr. Swearingen stated the facility would probably relinquish the license, but need the year to make sure all works well. Dr. Robbins asked if patient insurance has transferred for those patients leaving Cumberland River. Mr. Swearingen stated yes. **Mr. Shulman made a motion to approve the request for inactive status until the February 2019 Board meeting; seconded by Mr. Boyd. The motion was approved.**

Baptist Memorial-Memphis Skilled Nursing Facility –

This 35 bed nursing home sought a fifth extension to the inactive status of the facility license for an additional 12 months. The continued inactive status of the licenses will allow Baptist Memorial Hospital organization to reach a definitive plan for the future operation of the facility. The plan is expected to be complete in the next several months. Representative for the facility was Travis Swearingen, attorney. Mr. Swearingen stated negotiations will include a relocation of the facility resulting in a consolidation of this facility and Baptist Skilled Rehabilitation Unit – Germantown. Dr. Saunders clarified this would be a merger of two facilities. Mr. Swearingen stated yes. Dr. Robbins stated this has been ongoing for a lengthy period of time and asked if these are new developments. She also questioned why the facility closed. Mr. Swearingen stated there were inefficiencies realized. **Mr. Shulman made a motion to approve the fifth extension to the inactive status request until the February 2019 Board meeting; seconded by Dr. Piercey. The motion was approved.**

Baptist Skilled Rehabilitation Unit - Germantown –

This 18 bed nursing home sought a third extension to the inactive status of the facility license for an additional 12 months. The continued inactive status for this facility will enable Baptist Memorial to reach a definitive plan for the future operation of this facility. Representative for the facility was Travis Swearingen, attorney. **Dr. Piercey made a motion to approve the third extension to the inactive status request until the February 2019 Board meeting; seconded by Mr. Gee. The motion was approved.**

Upper Cumberland Hospice and Palliative Care, LLC –

This 10 bed residential hospice facility sought an extension to the inactive status of the facility's license for an additional year. The lease expired for its location and the facility has ceased operations and inactive at this time. Representatives for the facility were Byron Trauger, attorney, and Tracy Wood, CEO. **Mr. Shulman made a motion to approve the extension to the inactive status request until the February 2019 Board meeting; seconded by Mr. Crisp. The motion was approved.**

Upper Cumberland Hospice of Chattanooga –

This hospice facility sought an extension to the inactive status of the facility's license for an additional year. As with the above facility the lease has expired and operations have ceased. Representatives for the facility were Byron Trauger, attorney, and Tracy Wood, CEO. **Mr. Shulman made a motion to approve the extension to the inactive status request until the February 2019 Board meeting; seconded by Mr. Crisp. The motion was approved.**

Hospice of Chattanooga Walker Road –

This residential hospice facility sought to place its license in inactive status for three (3) years. Hospice of Chattanooga subleases its current space from Standifer Place Properties, LLC, a NHC affiliate. This

facility provides residential hospice services at The Health Center at Standifer Place. The current location is difficult for many families and caregivers to reach so on November 30, 2017 the unit closed. Hospice of Chattanooga has entered into a three (3) year lease with Siskin Hospital. Hospice of Chattanooga will offer only general inpatient and respite care at Siskin Hospital. It is the expectation of Hospice of Chattanooga will relocate and reinstitute residential hospice services after the three (3) years at Siskin. Representatives for the facility were Byron Trauger, attorney, and Tracy Wood, CEO. Dr. Robertson questioned the facility's ability to go into a hospital without being in contradiction of code requirements. Mr. Trauger stated it would not be a residential provision of hospice services, but general inpatient services. Ms. Reed also stated this is allowed. Dr. Saunders asked how long the facility had been in existence. Ms. Wood stated seven (7) years. Ms. Williford asked where the nearest residential hospice provider was located. Ms. Wood stated there were no other providers in Hamilton County. She stated the intent of Hospice of Chattanooga is to purchase land and build a free standing facility. **Mr. Shulman made a motion to approve the inactive status request for three (3) years; seconded by Dr. Robertson. The motion was approved.**

WAIVER REQUEST(S):

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

Claiborne Health and Rehabilitation Center, Tazewell -

Ms. Patricia Ketterman recused herself from this agenda item as she was the requestor. This licensed nursing home sought to waive nursing home regulation 1200-08-06-.04(1) for a Tennessee licensed nursing home administrator until a permanent replacement could be hired at the October 2017 Board meeting. Ms. Ketterman indicated she needed further time to hire a permanent licensed nursing home administrator. She stated she will continue to serve as the nursing home administrator temporarily. **Mr. Shulman made a motion to grant the waiver request until the October 2018 Board meeting; seconded by Mr. Mynatt. The motion was approved.**

OTHER WAIVER REQUEST(S):

Vanderbilt – Ingram Cancer Center at Maury Regional Spring Hill; Gateway – Vanderbilt Cancer Treatment Center; and Vanderbilt – Ingram Cancer Center, Franklin –

These three (3) licensed ambulatory surgical treatment centers (ASTC) provide only one service at each facility. The service is limited to radiation therapy by means of a linear accelerator. These facilities do not perform surgery or other invasive procedures at their respective locations. Based upon this information, each of the three ASTCs are asking to waive the following ASTC regulations: 1200-08-10-.04(20)(b)(3) relative to the provision of a bed and other furnishings, 1200-08-10-.04(20)(b)(5) relative to the provision of a bath basin, emesis basin, bedpan, and urinal; 1200-08-10-.4(20)(c)(3) relative to required processes for insertion of venous catheter; 1200-08-10-.04(20)(c)(4) relative to food handling, sources of air pollution and culturing of autoclaves and sterilizers; 1200-08-10-.04(21)(a) relative to the applicability of performance improvement to post-operative surveillance; and 1200-08-10-.04(21)(f) relative to the applicability of performance improvement to central venous catheter insertion. Representative for the facility was Travis Swearingen, attorney. Mr. Swearingen stated to the Board that each facility had recently had surveys resulting in no deficiencies. During these surveys, there was conversation with the surveyor about certain ASTC rules that are not applicable which lead to the decision by the provider to submit this waiver request. Dr. Robbins asked if the facility had a bath, an emesis basin, bedpan, and urinal at the facility. She felt this would not be a financial burden on a provider. Ms. Reed asked if the items were in stock and available for a patient if needed. The facility representative stated their interpretation of the rule is that these items are available to each patient.

The facility further stated they do not give these items to each patient, but do have available if needed. Ms. Throneberry asked how many ASTCs that are licensed and operate as these three facilities. Ms. Reed stated she did not know an exact number. Mr. Shulman asked how conformity can be established with other licensed ASTCs that operate as these three providers. Ms. Reed stated this could be done via an IG and rule change. Ms. Tippens further stated a waiver of the regulations would offer a case by case review. **Mr. Shulman made a motion to approve the waiver request referenced above for the named ASTC regulations for the above named facilities; seconded by Mr. Griffin. The motion was approved.**

Vanderbilt University Medical Center (VUMC), NICU-Mother Care Unit –

This facility sought to waive for variances utilized by three (3) existing double-occupancy rooms within the MCJCHV neonatal intensive care unit. VUMC proposed the conversion of three (3) double occupancy NICU rooms to three (3) NICU-mother care units. The NICU-mother care units include one (1) NICU patient (existing to remain) and one (1) postpartum patient. VUMC sought to waive certain sections of the 2010 FGI guidelines as follows: Variance for section 2.2-2.2.2.2(2)(b) which requires 4' clearance at the foot of the bed; patient room 4312 only allows 2'11 ½" clearance between the foot of the bed and existing nurse station sidewall and variance for section 2.2-2.10.2.2(3) which requires 8' clearance between multiple beds; patient rooms 4312, 4313, & 4301 only allows 5'5 ½" dimension between bassinet and bed. Representative for the facility was Travis Swearingen, attorney. Dr. Saunders voiced concern over the current size of the rooms. She stated that rooms that meet the required sizes are usually not enough to perform necessary functions. Dr. Robertson asked about equipment requirements relative to room and space. Craig Parisher, Director of Facilities Construction, stated he can't address this item as it is care centered, but if it were a life/fire safety question he could address. Dr. Piercy asked if babies are in rolling bassinets or warmers. The Vanderbilt representative stated this is based upon the size and weight of the baby. Dr. Piercy asked if the baby would be removed from the room if a code ensued. Vanderbilt representative stated yes. Dr. Saunders stated pictures of the beds and the room would be helpful or a tape measure to reflect the sizes of the room spaces being discussed. These items were not available. Dr. Saunders asked how many people would be in a room during a code. The Vanderbilt representative stated there would be five (5) after parents and others removed if the code involved the baby. Mr. Griffin asked if the nurses' station wall could be moved 11". Vanderbilt representative stated this has not been explored due to the size of the room, but could be possible. **Dr. Robbins made a motion to grant a waiver of the above referenced sections of the 2010 FGI guidelines; seconded by Mr. Gee. The motion was approved by a vote of thirteen (13) yes to two (2) no. Dr. Saunders abstained from the vote.**

DISCUSSION(S):

Board Policy #81–

Ms. Reed presented this draft Board Policy #81 to the Board members as a result of the October 2017 Board meeting discussion concerning waiver requests for the Tennessee licensed nursing home administrator requirement in the nursing home regulations. The Board at the October 2017 meeting established several items they would like to have addressed by those providers requesting this waiver. These items were incorporated into the presented draft policy. Ms. Reed stated if this policy were adopted the process would be the same as for those providers requesting to provide outpatient therapy or sharing of an administrator. She also asked for the Board members to consider a timeframe to apply to this policy as she didn't think the Board would want this to be a permanent approval. Chris Puri, attorney representing THCA, addressed the Board relative to the presented policy. He stated the policy needed clarity to the administrator referenced in the policy was temporary and not permanent. Dr. Robertson had concern with timeframes and continually being before the Board under this policy. Ms.:

Tippens stated the Board could add to the policy that only a certain number of requests could be made under the policy and then an appearance before the Board would be required. Dr. Robbins asked if the option to have the requestor to appear before the Board was available. **Mr. Breeden made a motion to approve the presented Board Policy #81 with a six (6) month timeframe; to contain Chris Puri's clarification; and if Board chooses further discussion the provider must appear before the Board; seconded by Mr. Mynatt. The motion was denied.** Dr. Robertson stated it is tenuous to make notice to the applicant regarding appearance before the Board. He stated he was okay with a twelve (12) month timeframe to the policy. Dr. Piercey agreed with the notice of the applicant, but would rather stay with the six (6) month timeframe. Mr. Shulman suggested moving this to the PI Standing Committee for further vetting. Mr. Gee asked if the question of the number of licensed beds would make a difference in decision making. **Mr. Shulman made a motion to move this item to the PI Standing Committee; seconded by Mr. Crisp. The motion was approved.**

Tennessee End of Life Partnership (TELP) Request for Surrogate Form Revision Approval –

Judy Eads presented on this item. She requested of the Board approval of minor changes to the provider Identification of a Surrogate Form and assistance with a mail out titled Alert for Rule Clarification for the POST/Advance Directive. Dr. Robbins stated that she tried to find the statute pertaining to this request. She further stated she was confused by the form and the statute and the listing of who can be a surrogate. Dr. Robbins stated this seems to supersede a POA and other advance directives. She asked Ms. Tippens to pull the TCA. Ms. Eads stated the surrogate form does not supersede a POA or other advance directive. Dr. Robbins feels the form goes beyond the TCA and its direction. Ms. Eads stated the form is a model form and is to be used to direct the physician. Ms. Throneberry asked if the statute being referenced applies to all facility types. Ms. Tippens stated it does. Dr. Robbins asked if the form could be altered. Ms. Reed stated it could as the Board developed the model form and it is not in rule. Mr. Shulman asked if it was duplicative to have the designated physician twice on the form. Ms. Eads stated the designated physician is to fill out the portion of the form that is needed. The top portion is if the individual has chosen a surrogate and the bottom is for when an individual does not choose. Dr. Saunders asked if a person signing as the surrogate must agree with the patient's care plan. Ms. Tippens stated that according to TCA 68-11-180 they must. Mr. Shulman stated TCAD works with TELP and that this is an important form for the public. He suggested moving to the PI Standing Committee to discuss further and to make changes to the form. Dr. Saunders stated is it necessary to have this form to spend time with a standing committee. Mr. Shulman and Ms. Tippens stated yes as the form is on the Board's website. **Mr. Shulman made a motion to move this item to the PI Standing Committee; seconded by Dr. Robbins with a friendly amendment to look at the form in accordance with the TCA. The motion was denied by a vote of eight (8) to six (6) with Dr. Saunders and Dr. Robertson abstaining.** Ms. Eads stated the form is to be used when there is absolutely no one available. If there is family, etc. that is available then it would not be expected the physician would step in. Dr. Robbins feels the form reaches farther than the TCA intended. Mr. Gee feels the intent of the form is lost. He stated facilities try to document who is responsible for patient care and this is making it more complicated. Mr. Gee further stated hospitals go to great lengths legally to protect themselves. Dr. Piercey made a motion to accept the proposed form; seconded by Dr. Robertson. The motion was approved by a vote of thirteen (13) to two (2) with Dr. Saunders abstaining. Ms. Eads then asked for the Board's assist in having the Alert for Rule Clarification for the POST/Advance Directive to be provided to facilities. Dr. Saunders asked who will pay for the e-mail. Ms. Reed stated licensure staff would provide the e-mail blast to providers. Ms. Throneberry has an issue with just the presented document being sent. She would like for the rules relative to the POST/Healthcare Decision Making and POST form be sent with the clarification document in the e-mail blast. Mr. Davis the wording of the e-mail blast to clarify that the provided clarification document is not in lieu of the rules.

Mr. Breeden made a motion to approve the above request to provide to licensees the Alert for Rule Clarification for the POST/Advance Directive with attached rules relative to the POST/Healthcare Decision Making and POST form and to state this is not in lieu of the licensing rules; seconded by Mr. Mynatt. The motion was approved.

Lincoln and Donalson Care Center, Fayetteville –

Lincoln Care Center & Donalson Care Centers in 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 1190 contingent on each building having a licensed nursing home administrator. Lincoln & Donalson Care Centers due to declining census is seeking to have one administrator for both facilities thus requesting the Board to revisit the 1990 decision. Representative for the facility is Vicky Groce. Dr. Piercey asked how many beds the facility has. Ms. Groce stated 140 beds. Mr. Shulman asked if there was a precedent for this type of request. Ms. Reed stated yes that there was in approximately 1996 another two separately licensed nursing homes allowed to be under one license with one administrator to serve as the administrator and the Board at the October 2017 Board meeting allowed two separately licensed nursing homes to have the same administrator. **Mr. Shulman made a motion to allow one administrator to serve as the administrator of license #159; seconded by Mr. Breeden with an amendment of a one (1) year timeframe and for the licensee to appear back before the Board at that time for a review. The motion was approved.**

APPROVAL OF MINUTE(S):

Ms. Reed presented the following minutes for approval by the full Board –

December 5, 2017 – Performance Improvement Issue Standing Committee meeting

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

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

Ms. Reed presented the CHOW and initial licensure applications received by the Office of Health Care Facilities.

The following CHOW application was processed by the Board’s administrative staff with concern –

Midsouth Health and Rehabilitation, Memphis – Nursing Home; license #248. Representative for the facility, Kim Looney, attorney, requested a deferral of the ratification of this application until the next Board meeting in June 2018. The Board members granted.

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

Assisted Care Living Facilities: Bristol Terrace Assisted Living, Nashville; Morning Pointe of Spring Hill, Spring Hill; and Traditions of Spring Hill, Spring Hill

End Stage Renal Dialysis Clinics: Briley Parkway Dialysis, Madison and Woodbine Dialysis, Nashville

Home Medical Equipment: National Biological Corporation, Nolensville; The Richmond Light Company, Nolensville; Southern Patient Care, Inc., Columbia; and Star Medical, Inc., Nashville

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

The following CHOW applications were presented to the Board for approval without staff concern –

Assisted Care Living Facility: Charter Senior Living at Hermitage, Hermitage

Home Medical Equipment: Titan Healthcare, Mt. Juliet

Nursing Homes: Christian Care Center of Milan, Milan; Concordia Nursing and Rehabilitation-Fairpark, Maryville; Concordia Nursing and Rehabilitation-Loudon, Loudon; Concordia Nursing and Rehabilitation-Maryville, Maryville; Concordia Nursing and Rehabilitation-Northhaven, Knoxville; Concordia Nursing and Rehabilitation-Smith County, Carthage; and Graceland Rehabilitation and Nursing Center, Memphis

Professional Support Services Agencies: Omni Support Services, Jackson; Omni Support Services, Greenville; and Omni Support Services, Nashville

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

The following CHOW applications were presented to the Board as non-qualifying applications due to an administrative denial –

Nursing Homes: Ashton Place Health and Rehabilitation, Memphis and The Highlands of Memphis Health and Rehabilitation, Memphis.

Mr. Puri, attorney, as legal counsel for Ashton Place Health and Rehabilitation the seller presented to the Board on the department's denial. He referenced his submitted letter outlining the background of this transaction and the timeline of events. Mr. Puri stated a legal transaction occurred i.e. the lease expired by the terms which was 8/31/17. He further stated his client doesn't fit the definition of a legal licensee. If the denial of the CHOW application is ratified, what does this make his client? Mr. Puri stated if the department feels action should be taken against the licensee/operator of the facility then there is statutory authority to do so outside of the CHOW process. Mr. Puri requested of the Board to approve the CHOW application. Mr. Davis stated how does the Board want administrative staff to address in the future when a CHOW applicant is a poor performer in Tennessee. He stated there is a quality issue of providers coming in to Tennessee. Dr. Robertson stated there is recourse for the licensee. The licensure rules state to approve a CHOW when it legally occurs. Ms. Tippens pointed out to and read for the Board members the licensure rule relative to what constitutes a change of ownership. She further stated this occurred in the Ashton Place situation. Mr. Boyd asked why the process to vet CHOW applications is not like initial applications prior to the legal movement of ownership. Mr. Puri stated as THCA's lawyer financial institutions desire to know if a CHOW application is to be approved by the state. Financial institutions seek lawyers' opinions for approval. Ms. Tippens stated this should be moved to the PI Standing Committee for further discussion on the approval of CHOW applications. Mr. Shulman asked where the slowdown is for the processing of the CHOW applications. Ms. Reed stated it is in the internal process of waiting for CMS 855 approval before finalizing a CHOW application which is a lengthy process itself. **Mr. Shulman made a motion to move the discussion of CHOW application approval process to the PI Standing Committee; seconded by Dr. Robbins. The motion was approved. Dr. Robertson made a motion to reverse the denial of the CHOW application effective 9/1/18; seconded by Mr. Gee. The motion was approved.**

For The Highlands of Memphis Health & Rehabilitation, Memphis, license #257, Diane Carter, West Tennessee Regional Administrator addressed the Board. She presented the survey team has been back to the facility for the deficiencies cited at the 11/15/17 and found to be in compliance. **Mr. Shulman made a motion to deny the denial of the CHOW application and to approve the CHOW application; seconded by Mr. Boyd. The motion was approved.**

LICENSURE STATUS UPDATE(S):

Ms. Reed presented licensure status updates on the following five (5) facilities – Ridgemont Manor #1, Memphis; Best Nurses, Inc., Memphis; Middle Tennessee Center for Ambulatory Surgery Treatment Center, Shelbyville f/k/a Center for Surgical Specialties; Surgical Services, P.C., Sweetwater; and Morgan Cares Senior Care Facilities, LLC, Memphis. Ridgemont Manor #1 placed its license back to active status effective November 1, 2017. The facility's inactive status was granted February 8, 2017 in order to pursue a different licensure program type. Best Nurses, Inc. placed its license back to active status effective January 18, 2018. The facility had been assessed substantial overpayments by ZPIC and was in a two (2) year appeal process with ZPIC resulting in the initial request for inactive status. Middle Tennessee Center for Ambulatory Surgery Treatment Center requested to close the license of this facility and will return the wall license upon securing. This facility was initially placed in inactive status February 8, 2017. Surgical Services, P.C. requested to close the facility license effective November 23, 2017. The facility's license was first placed in inactive status on June 7, 2017. Morgan Cares Senior Care Facility, LLC requested to close the facility's license. This facility's inactive status was first granted on February 8, 2017.

FACILITY CLOSURES:

A listing of all facility closures during the time period of October 1, 2017 thru January 31, 2018 was provided to the Board. No discussion was held.

BOARD POLICY CONSENTS:

Ms. Reed 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, and Board Policy #39, Nursing Home administrator to serve as administrator for both a nursing home and residential home for the aged and/or assisted care living facility.

Board Policy #32 requests –
Wharton Nursing Home, Pleasant Hill
The Waters of Johnson City, Johnson City

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

Board Policy #39 requests –
The Reserve at Spring Hill, Spring Hill (nursing home) and The Reserve at Spring Hill, Spring Hill (ACLF) – application is in process.

Mr. Mynatt made a motion to approve the request for a Board Policy #39 waiver to be issued to the above facility; seconded by Mr. Breeden. The motion was approved. Mr. Crisp recused from the next request.

The Pavilion, Lebanon (nursing home) and The Pavilion Assisted Living, Lebanon (ACLF)

Mr. Mynatt made a motion to approve the request for a Board Policy #39 waiver to be issued to the above facility; seconded by Mr. Breeden. The motion was approved. Mr. Crisp rejoined the meeting.

REGULATION(S):

Emergency Proposed Rule Language for Board Approval for Rulemaking Hearing –

Ms. Tippens presented to the Board nursing home rules found at 1200-08-06-.06 related to nursing facility drug disposal. She explained this is rule language that had initially been presented to the PI Standing Committee for approval as a result of PC 355. The PI Standing Committee did not upon first presentation approve, but instead wanted additional work done to the language. At the December 5, 2017 PI Standing Committee, the presented language was approved. **Mr. Shulman made a motion to approve the presented language for an emergency rulemaking hearing; seconded by Mr. Boyd. The motion was approved.**

Board Approval for Rulemaking Hearing –

Ms. Tippens presented to the Board the developed rule language for the ambulatory surgical treatment center definition. This language was developed during several PI Standing Committee meetings. The rule language reflects the IG that was approved earlier in the meeting. **Dr. Robertson made a motion to approve the presented language for a rulemaking hearing; seconded by Ms. Williford. The motion was approved.**

The second drafted rule language presented to the Board was proposed rule language for nursing homes relative to nursing facility drug disposal as put forth in PC 355. The request for approval as proposed rule language will eliminate the requirement for a rulemaking hearing of this language. Ms. Tippens stated a roll call vote is required for this presented language. **Mr. Shulman made a motion to approve the proposed nursing home rule language; seconded by Mr. Breeden. The motion was approved.**

Ms. Reed made the Board members aware of an emergency called rulemaking hearing for March 15, 2018 regarding the fee increase language.

ORDER(S):

Consent Orders -

The following consent orders were presented by Ms. Tippens.

Elmcroft of West Knoxville – Assisted Care Living Facility (ACLF) – Survey conducted resulting in a \$500 Civil Monetary Penalty (CMP). **Mr. Mynatt made a motion to approve; seconded by Mr. Breeden. The motion was approved.**

Cambridge House – Nursing Home – Overdue bed tax fees. **Dr. Robertson made a motion to approve; seconded by Mr. Crisp. The motion was approved.**

Culpepper Place of Bartlett – ACLF – Survey conducted resulting in a \$1,500 CMP. **Mr. Shulman made a motion to approve; seconded by Dr. Piercy. The motion was approved.**

Clarity Pointe of Knoxville – ACLF – Survey conducted resulting in a \$500 CMP. **Mr. Shulman made a motion to approve; seconded by Mr. Crisp. The motion was approved.**

OTHER BUSINESS:

Ms. Reed presented the OHCF P&P 240 list of facilities and status of plans of correction (POC) submissions. No discussion was held.