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**TENNESSEE DEPARTMENT OF HEALTH  
MEMORANDUM  
SECOND AMENDED**

**Date:** August 27, 2018  
**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-Assisted Care Living Facility Standing Committee Meeting  
**(Call-in Number: 1-888-757-2790 passcode: 152602#)**

**Date of Meeting:** August 28, 2018  
**Time:** 9:00 a.m.  
**Place:** Poplar Conference Room  
665 Mainstream Drive, First Floor  
Nashville, TN 37243

**Major Item(s) on Agenda:** See attachment.

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*

**AGENDA**

**BOARD FOR LICENSING HEALTH CARE FACILITIES  
ASSISTED CARE LIVING STANDING COMMITTEE MEETING**

**AUGUST 28, 2018  
POPLAR 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. Call the Meeting to Order and Establish a Quorum.
  2. Revisit-Interpretative Guidelines - Use of "Physician" Term - ACLF 1200-08-25-.08(5)(a)(b) and 1200-08-25-.08(9)(a).
  3. Discussion-Disaster Preparedness Rule Language for Residential Home for the Aged (RHA), Assisted Care Living Facility (ACLF), Adult Care Home-Level II, and Traumatic Brain Injury Rules.
  4. Discussion-Assisted Care Living Facility (ACLF) and Residential Home for the Aged (RHA) rule language pertaining to thirteen (13) minutes evacuation.
  5. Discussion-Board of Examiners for Nursing Home Administrators (BENHA) request for a task force with Assisted Care Living Facility (ACLF) Standing Committee to collaborate and review the policies, procedures and rule language regarding nursing home administrators between both boards.
  6. Other Discussion(s).
  7. Public Comments.
  8. Adjourn.

**MINUTES**  
**BOARD FOR LICENSING HEALTH CARE FACILITIES**  
**ASSISTED CARE LIVING FACILITY STANDING COMMITTEE MEETING**  
**August 28, 2018**

The Assisted Care Living Facility Standing Committee meeting of the Board for Licensing Health Care Facilities began August 28, 2018.

Mr. Joshua Crisp was present and served as chairman of this meeting. He called the meeting to order and requested roll call of attendance done by Ms. Ann Rutherford Reed.

Mr. Joshua Crisp - here  
Ms. Carissa Lynch - here  
Dr. Sherry Robbins – arrived at 9:20  
Mr. Roger Mynatt - here  
Dr. Rene Saunders - here

**A quorum was established.**

Ann Reed recapped the agenda item related to the use of term “physician” in the ACLF regulations specifically rules 1200-08-25-.08(5)(a)(b) and 1200-08-25-.08(9)(a). She stated this was first presented at the April 2018 ACLF Standing Committee with an interpretative guideline (IG) developed. The work of that meeting date was presented at the June 2018 full Board meeting. The IG that was presented was denied and moved back to the ACLF Standing Committee for further work. TN Cal provided draft IG language at this meeting.

Joshua Crisp asked about the sticking points at the June 2018 Board meeting for the presented IG. Ms. Reed stated the minutes from the previous standing committee were available on the iPads for review. Dr. Saunders stated the term physician is already defined and doesn’t know how this can be changed.

Chris Puri addressed the committee. He stated there is no desire to change the definition of physician, but to determine who is allowed as an extender of a physician to provide care in an ACLF for the purpose of the hospice and interdisciplinary team (IDT) rules. The document provided by Mr. Puri contains reference to clinical nurse specialist as an extender of a physician.

Dr. Saunders asked how clinical nurse specialist (CNS) got into the document as it was not mentioned previously. She further stated CNS is not referenced in the Board of Medical Examiners (BME) rules for a supervision requirement.

Caroline Tippens with the Office of General Counsel (OGC) stated there is no definition for CNS in statute, but advanced practice nurse is defined in the Board of Nursing statute. This definition of advanced practice nurse may be a better option. CNS is better defined in the Board of Nursing rule. CNS and APN are equivalent because it is a type of APN according to Tennessee Code.

Ms. Tippens stated a new definition would be created in rule for non-physician practitioner.

Mr. Puri stated the use of the term 'treating' implies a relationship between the physician and the resident/patient.

Dr. Saunder's questioned if this was an insurance or payment issue. She asked if someone would be paid more based upon professional title. Dr. Saunders asked about other states and what is allowed for APNs. Linda Estes stated to the committee that she believes other states allow APNs to function in this capacity. Mr. Crisp stated in other communities in other states that he manages this is also allowed.

Anna Gean Oneal with Alive Hospice/THO informed the standing committee that CMS has requirements that a medical doctor must determine the need for hospice. She further stated in 2019 new regulations will be going into effect allowing APNs to determine the need for hospice.

Dr. Saunders was concerned if this IG is allowed it would run afoul of the hospice requirements. Mr. Puri stated the medical doctor recommends and assesses for the need for hospice. The ACLF rule being discussed is relative to after the patient is in the ACLF community and relates to the physician's determination the facility can meet the needs of the hospice patient.

**Roger Mynatt made a motion to accept the recommended changes to the presented draft IG, to present this IG to the full Board, and for staff to prepare rule language adding appropriate non-physician practitioner for presentation to the full Board in October 2018; seconded by Carissa Lynch. The motion was approved with three (3) yeas and two (2) abstentions (Dr. Saunders and Dr. Robbins).**

Ms. Reed brought to the standing committee on behalf of Plans Review and the life safety surveyors the following requests for rule language changes.

The first was regarding the requirement for filling out and submitting a form provided by Tennessee Emergency Management Agency (TEMA) under the Disaster Preparedness section of the ACLF, home for the aged (RHA), adult care home-level 2 (ACH-Level II), and traumatic brain injury residential home (TBI) regulations. The preference is to contain the language found in the residential hospice rule.

**Dr. Saunders made a motion to accept the recommended rule change of the disaster preparedness language removing the 'form' language in ACLF, RHA, ACH-Level II, and TBI to reflect the language found in the residential hospice disaster preparedness language; seconded by Mr. Mynatt. The motion was approved.**

**Dr. Saunders made a further motion to create an IG to stand in place of the above rule language change – use same language as the above rule language recommendation; seconded by Carissa Lynch. The motion was approved.**

These items are to be presented at the October 2018 Board meeting.

The next set of rule language changes that Ms. Reed brought to the standing committee were for clean-up of code references, chapter references, etc in the ACLF and RHA regulations. She referenced the current IG of code editions approved by the Board and the discrepancy between rule language contained in the ACLF and RHA rules regarding editions of codes, names of codes, and chapters. She noted discrepancies found are for the ACLF regulations 2006 edition being referenced which should be 2012 and RHA regulations referencing Chapter 22 of the Life Safety Code which the chapter reference

should be removed and the change of Standard Building Code to International Building Code. Ms. Reed stated this would better align the current rules with the IG.

**Dr. Saunders made a motion to approve the recommended changes as presented; seconded by Dr. Robbins. The motion was approved.**

Ms. Tippens stated she may be able to add these rule language changes to the current rule packet in her office as the changes are not substantive changes.

The final item presented to the ACLF Standing Committee was Juanita Honeycutt presenting as a representative of the Board of Examiners for Nursing Home Administrators (BENHA) to the standing committee issues with the relationship between BENHA and the Board for Licensing Health Care Facilities (BLHCF). Ms. Honeycutt informed the standing committee that common references needed to be established in the rules for BENHA and BLHCF such as the BENHA rules containing number of hours an administrator is required to be in the facility and establishing standards for who can be in charge within the nursing home.

Dr. Saunders stated is the desire to have a joint taskforce developed. This joint taskforce would have representation from this standing committee. The request was for two (2) members of the ACLF standing committee to participate. Mr. Mynatt and Mr. Crisp were chosen.

Ms. Tippens stated this will be ongoing work with redline information brought to both BENHA and BLHCF.

The standing committee was adjourned.