

# Board for Licensing Health Care Facilities

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**(OBSOLETE POLICIES)**

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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 2

**SUBJECT:** Door Closers On Patient Bedroom Doors

**DATE:** November 18, 1981

**That:** The Board grant the Staff authority to grant waivers for the requirement for self-closing devices on patient bedroom doors.

BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 3

**SUBJECT:** Authority To Grant Waivers

**DATE:** November 18, 1981

**That:** This authority ( of the Staff ) to grant waivers  
( re self-closing devices on patient bedroom doors )  
be incorporated into the regulations.

BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 4

**SUBJECT:** Fires In Licensed Health Care Facilities

**DATE:** March 17, 1982

**That:** The reporting of fires in licensed health care facilities be a part of proposed regulation.

BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 13

SUBJECT: Dampers

DATE: February 16, 1983

That: The Board take the position that the applicable code be interpreted that dampers are not required in one hour rated wall assemblies that are fully sprinklered.

BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 14

SUBJECT: Ceiling Tile

DATE: February 16, 1983

That: Staff be directed to require that ceiling tiles be of a shape to include rectangles and squares with exceptions only when it is allowed by codes.

BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 15

**SUBJECT:** Incinerator Requirement

**DATE:** February 16, 1983

**That:** Staff be granted the authority to make exceptions to the requirement of having an incinerator on each health care facility premise.



## BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 16**SUBJECT:** Washable Impervious Ceilings**DATE:** February 16, 1983

**That:** We (The Board) not require continuous washable impervious surfaces ceilings in hospitals, except in operating rooms and delivery rooms, for one year, or until we have some evidence from the Federal CDC to the contrary.

## BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 18

**SUBJECT:** Staff Authority to Refer to O.G.C.

**DATE:** May 17, 1983

**That:** The Board, as a matter of policy, in all types of Residential Homes for the Aged, authorize Staff to go to the Office of General Counsel and request them to enter a petition in the appropriate Chancery Court whenever appropriate medical determination is made that patient(s) are not being cared for according to regulations, and upon concurrence of two (2) Board members.

BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 19

**SUBJECT:** Pet Therapy in Nursing Homes

**DATE:** May 17, 1983

**That:** The Board adopt a policy allowing Staff to grant waivers allowing Pet Therapy in licensed Nursing Homes, upon receipt of acceptable protocol.

## BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 20

**SUBJECT:** Interpretation of Section 1200-8-6-.02(8)(b)1. Nursing Home Regulations  
**DATE:** November 14, 1984

Section 1200-8-6-.02(8)(b)1 of the Rules and Regulations for Nursing Homes states: A resident who dies cannot be removed from the facility until pronounced dead by a licensed physician.

The interpretation of the Board is that: This regulation be interpreted to mean that a physician be permitted to pronounce an individual dead over the telephone, since the responsibility for pronouncing dead rests with the physician.

BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 22

**SUBJECT:** Conversion of Hospital beds to Nursing Home Units

**DATE:** April 29, 1986

**THAT:** When a hospital converts part of its beds to nursing home beds and will be licensed separately, staff is directed to use current codes.

BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 25

**SUBJECT:** Hospital Discharge Summary

**DATE:** November 17, 1987

The Board approved the time requirement on completing a discharge summary be changed from 15 days to 30 days after discharge on September 9, 1987.

AN/G6067321

## BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 27

**SUBJECT:** Plans Review on Homes for Aged with 16 Beds of Less

**DATE:** November 8, 1989

Health Care Facility staff is instructed to use the 1985 Life Safety Code (LSC) for plan reviews on Homes for the Aged with sixteen (16) beds or less.

The 1985 LSC shall take precedence over the Standard Building Code (SBC) where the two codes conflict.

The 1985 LSC specifically addresses small facilities of sixteen (16) beds or less. The 1985 SBC is not as definitive on this particular facility type as the LSC.

Specifically, Chapter 21 of the LSC allows exceptions to certain building requirements in small facilities where there is no specific definition provide by SBC. Small facilities of sixteen (16) beds or less will be allowed to take advantage of these exceptions.

All other requirements of the SBC shall continue to apply.

Facilities will be required to obtain a wavier for this exception.

DATE

**BOARD FOR LICENSING HEALTH CARE FACILITIES**  
**POLICY MEMORANDUM NUMBER 30**

**Subject:** Conditional License - In Changes of Ownership

**Date:** January 17, 1990.

The Board approved the following policy on February 12, 1987.

The conditional license requirement not be applied when there is no actual change of the parties involved in change of ownership.

AD/G4031017



Board for Licensing Health


Care Facilities

Policy Memorandum Number 33

Subject: Extend Conditional License

Date: March 27, 1991

Policy: Gives staff the authority to extend a conditional license during the three (3) months of April, May and June so that the facility will be permitted to operate under such license until it is replaced by a regular license issued as a part of the license renewal process.

  
Approved: Helmut (John) Bonkowski, Director  
Board for Licensing  
Health Care Facilities

BF/G5141113

cc: LAB  
EK  
RB.  
AG  
OGC

*Out dated*


Board for Licensing Health  
Care Facilities

Policy Memorandum Number 34

Subject: Policy for Nursing Home Administrators Signature

Date: March 27, 1991

Policy: The administrator of a nursing home is responsible for all deficiencies cited by licensure/certification staff as a result of a survey or complaint investigation. Therefore, the administrator shall sign the appropriate documentation (statement of deficiencies/plan of correction, etc.) thereby, indicating that he/she is aware of all the problems and that he/she will be responsible for correcting the deficiencies.

  
Approved: Helmut (John) Bonkowski, Director  
Board for Licensing  
Health Care Facilities

IN  
REGULATIONS

BF/G4041171

cc: LAB  
EK  
RB  
AG  
PSW  
OGC



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NASHVILLE, TENNESSEE 37247-0530

Policy Memorandum Number 35

Date: April 20, 1992

Subject: Fire Safety/Cubicle curtains in Facilities

Policy: That the non-conforming cubicle curtains in facilities that do not pose a fire hazard, as determined by the surveyor at the time of the survey, be allowed a reasonable time (up to three (3) years) to replace or correct those cubicle curtains.

Approved:  Helmut (John) Bonkowski, Director  
Board for Licensing Health Care Facilities

HJB/BF/G6252107

cc: LAB  
EK  
RB  
AG  
OGC  
JOC

*out dated*



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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM  
AMENDED

**SUBJECT:** Microwave Ovens in Residential Homes For Aged and Assisted Care Living Facilities

**DATE:** May 12, 1999

**POLICY:** Microwave ovens are not considered "cooking appliances" provided the facility has appropriate written policy and procedures approved by the Department to insure that the residents are capable of using these appliances safely

**APPROVED:** <sup>164</sup> Katy Ganmon, Director  
Board for Licensing  
Health Care Facilities



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POLICY MEMORANDUM NUMBER 40

DATE: March 24, 1993

SUBJECT: Window sill heights in Residential Home for Aged

POLICY: The Board for Licensing Health Care Facilities requested that staff place waiver requests, for renovations in existing Residential Homes for Aged, pertaining to window sill heights being between forty-four (44) and forty-eight (48) inches on the Consent Calendar.

APPROVAL:  Helmut (John) Bonkowski, Director Board for Licensing Health Care Facilities.

RMF/GZ173095

cc: LAB  
HJB  
EK  
RB  
MH  
OGC  
JOC  
RMF

*In reply*



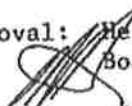
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POLICY MEMORANDUM NUMBER 41

Date: March 24, 1993

Subject: Electronic Signatures For Medical Records  
in Ambulatory Surgical Treatment Centers

Policy: The Board for Licensing Health Care Facilities requested that staff place waiver requests, that have appropriate safeguards and protocol, pertaining to Ambulatory Surgical Treatment Centers utilizing electronic signatures on medical records on the Consent Calendar, until the regulations have been amended.

Approval:  Helmut (John) Bonkowski, Director  
Board for Licensing Health Care Facilities

RMF/G5073111


cc: LAB  
HJB  
EK  
RB  
MH  
OGC  
JOC  
RMF

POLICY MEMORANDUM NUMBER 42

DATE: June 16, 1993

SUBJECT: Orders in Nursing Homes to be signed by physician within ten (10) days.

POLICY: The Board for Licensing Health Care Facilities requested by Board policy that staff change the Nursing Home Rules and Regulations concerning physician orders given by telephone for a patient to be signed by the physician within ten (10) days. This policy is to remain in effect until the regulations can be amended.

APPROVAL:  Helmut (John) Bonkowski,  
Director, Board For Licensing  
Health Care Facilities

BF/G6043187

cc: Leslie A. Brown  
Helmut (John) Bonkowski  
Elna Kee  
Rita Bollinger  
Melanie Hill  
Office of General Counsel  
John O'Connor  
Robert M. Finks

HEALTH CARE FACILITIES

POLICY MEMORANDUM NUMBER 43

DATE: June 16, 1993

SUBJECT: Waiver Requests to Sprinkler for Ambulatory Surgical Treatment Centers in Lieu of One (1) Hour Fire-rated Corridors

POLICY: One-hour (1) rated corridor walls may be omitted, in Ambulatory Treatment Centers (ASTC), as defined in the Standard Building Code, in the 1988 edition when the facility is fully sprinklered. This language is in the 1991 edition of the SBCC, and NFC's.

The Board for Licensing Health Care Facilities request that staff place these waiver requests on the consent calendar when it does not pose a threat to public safety.

APPROVAL:  Helmut (John) Bonkowski, Director  
Board for Licensing Health Care Facilities

BF/G4203189

cc: Leslie A. Brown  
Elna Kee  
Melanie Hill  
Rita Bollinger  
John J. O'Connor  
Robert M. Finks, Jr.  
Office of General Counsel





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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

**SUBJECT:** Allow Hospital Administrators to serve as Administrator of Skilled Nursing Units.

**DATE:** August 14, 1996

**POLICY:** The Board's policy is that the hospital administrator may serve as the administrator of the skilled nursing unit provided he/she is a Tennessee licensed nursing home administrator, the facilities are located on the same campus, and the surveys do not reflect substandard care.

The Board for Licensing Health Care Facilities request that staff place these waiver requests on the consent calendar when it does not pose a threat to public safety.

**APPROVED:** Helmut (John) Bonkowski, Director  
Board for Licensing  
Health Care Facilities

**cc:** JMF  
RB  
MH  
SJ  
OGC  
LH  
CM



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BOARD FOR LICENSING HEALTH CARE FACILITIES  
POLICY MEMORANDUM

**SUBJECT:** Conditional Licensure  
**DATE:** February 26, 1997  
**POLICY:** Gives staff the authority to eliminate the requirement of a conditional license for Nursing Homes, Home for the Aged and Alcohol and Other Drugs of Abuse Facilities. When approved, the new regulations will not require conditional licensure.

**APPROVED:** Melanie Hill, Director  
Board for Licensing  
Health Care Facilities

cc: JMF  
RB  
SJ  
OGC  
AD  
BW  
KG  
WH



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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

**SUBJECT:** Procedure for Approval of Inactive Health Care Facility Licenses

**DATE:** May 28, 1997

**POLICY:** The following conditions must be met by a health care facility requesting to hold its license in abeyance:

- The facility must appear before the Board and request to hold its license in abeyance.
- The facility must review its request annually and justify to the Board why inactive status should continue.
- Licensure fees must be paid annually.
- An office at the licensed site with a working phone must be maintained.
- Appropriate staffing, licensed and otherwise, must be maintained for facility type.
- Policies and procedures must be maintained.
- The joint Annual Report must be submitted annually.

**APPROVED:** Melanie Hill, Director  
Board for Licensing  
Health Care Facilities

*This policy no longer in effect  
due to SB 2175*

CHAPTER NO. 616

SENATE BILL NO. 2175

By Cooper

Substituted for: House Bill No. 2630

By Walley

AN ACT To amend Tennessee Code Annotated, Title 68, Chapter 11, Part 2, relative to the licensure of health care facilities.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Section 68-11-206, is amended by designating the current language as subsection (a), and adding a new subsection (b) as follows:

(b) Upon request by a licensee, the board shall have authority to place a license in an inactive status for a period determined by the board upon a finding that (1) the licensee has a need to suspend temporarily operations and (2) the licensee intends to continue operations after a period of suspension. Placing a license in an inactive status shall not relieve the licensee from the annual license fees imposed by Section 68-11-216, nor shall the holder of an inactive license be relieved of the obligations to comply with the provisions of Chapter 11, Part 1, of this title.

SECTION 2. This act shall take effect upon becoming a law, the public welfare requiring it.

PASSED: March 27, 2000

  
JOHN S. WILDER  
SPEAKER OF THE SENATE

  
JIMMY HAIFEH, SPEAKER  
HOUSE OF REPRESENTATIVES

APPROVED this 5<sup>th</sup> day of April 2000

  
DON SUNDQUIST, GOVERNOR



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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

**SUBJECT:** Interpretation of Hospital Regulation, Section 1200-8-1-.02(3) as it applies to Chronic Disease Hospitals.

**DATE:** November 12, 1997

**POLICY:** That Chronic Disease Hospitals must meet the requirements of a general hospital except that an emergency department and obstetrical facilities are not required.

This language is to be inserted into the new hospital rules.

**APPROVED:** Melanie Hill, Director *mt*  
Board for Licensing  
Health Care Facilities



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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

**SUBJECT:** Policy Memorandum on Nursing Home Regulations, Section 1200-8-6-.04(2)(f)(xv).

**DATE:** November 12, 1997

**POLICY:** The Board adopted the following language for the proposed nursing home rules:

Weights shall be taken and recorded at least monthly unless contradicted by a physician's order.

This policy is to remain in effect until the new regulations become effective.

**APPROVED:** Melanie Hill, Director *MH*  
Board for Licensing  
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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

**SUBJECT:** Policy Memorandum on Hospital Regulations. Section 1200-8-1-.02(1)(c) as it applies to general hospitals.

**DATE:** November 12, 1997

**POLICY:** That general hospitals be allowed to discontinue obstetrical services when the Health Facilities Commission has granted the facility a waiver to discontinue this service.  
The Board for Licensing Health Care Facilities request that staff place these waiver requests on the Consent Calendar when it does not pose a threat to public safety

**APPROVED:** Melanie Hill, Director  
Board for Licensing  
Health Care Facilities *MH*



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BOARD FOR LICENSING HEALTH CARE FACILITIES  
POLICY MEMORANDUM

**SUBJECT:** Secured Units in Homes for the Aged and Nursing Homes.

**DATE:** February 10, 1999

**POLICY:** The Board adopted policy, effective immediately, to allow secured units in residential homes for the aged and nursing homes until such time as the new rules containing this provision become effective.

**APPROVED:** *KG* Katy Gammon, Director  
Board for Licensing  
Health Care Facilities





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**BOARD FOR LICENSING HEALTH CARE FACILITIES**

**POLICY MEMORANDUM**

**SUBJECT:** Proposed language change in regulations

**DATE:** February 10, 1999

**PURPOSE:** To change the terminology used in the regulations to be more in line with the construction industry.

**POLICY:** Change "preliminary plans" to "phased construction" in Hospital, Birthing Centers and Assisted Care Living Regulations.

This policy will be in effect until the regulations can be changed by rulemaking hearing.

**APPROVED:**  Katy Gammon, Director  
Board for Licensing  
Health Care Facilities



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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

**SUBJECT:** Licensing Alcohol and Other Drugs of Abuse Facilities.

**DATE:** February 10, 1999

**PURPOSE:** Allow Health Care Facilities to license Alcohol and Other Drug Abuse facilities located in MHMR licensed facilities without increasing licensure fees.

**POLICY:** The Department shall license Alcohol and Other Drug Abuse facilities located in licensed MHMR facilities at the reduced fee of \$150.00.

**APPROVED:** *KG* Katy Gammon, Director  
Board for Licensing  
Health Care Facilities



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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

**SUBJECT:** Staff toilet facilities.

**DATE:** February 10, 1999

**PURPOSE:** To waive the regulation that requires separate toilet facilities for male and female staff in existing licensed DUI Schools, Prevention Program, Non-Narcotic and Non-Residential facilities.

**POLICY:** Place on the Consent Calendar requests for waivers of the requirements for separate toilet facilities for staff and for separate sex facilities of the handicapped in existing licensed DUI Schools, Prevention Program, Non-Narcotic and Non-Residential facilities.

**APPROVED:** *KG* Katy Gammon, Director  
Board for Licensing  
Health Care Facilities



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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

**SUBJECT:** 1997 Edition of the Standard Building Code.

**DATE:** May 13, 1998

**POLICY:** To allow the use of the 1997 Edition of the Standard Building Code (excluding Chapter I and Section 508, Handicapped Accessibility) until such time as the new rules for all licensed facilities (that have been filed with the Attorney General) are effective.

**APPROVED:** Katy Gammon, Director  
Board for Licensing  
Health Care Facilities



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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

**SUBJECT:** Submission of Building Plans

**DATE:** May 13, 1998

**POLICY:**

1. One set of plans shall be submitted to the department, after final approval is given, but prior to occupancy, in the form approved by the department.
2. Final plans are to be submitted on CAD CD Rom disk in plotter (PLT) or drawing (DWG) format.

**APPROVED:** Katy Gammon, Director  
Board for Licensing  
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BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

SUBJECT: Hospitals On Diversion Status Report

DATE: May 13, 1998

POLICY: Each hospital must have a policy which assures that all patients who present to the emergency department are screened/triaged to determine if a medical emergency exists and stabilized when a medical emergency does exist. A hospital may deny access to patients when it is in diversionary status only because it does not have the staff or facilities in the emergency department to accept any additional emergency patients at that time. However, if the ambulance disregards the hospital's instructions and brings the individual on to the hospital grounds, the individual arrived at the hospital and therefore the hospital cannot deny the individual access to hospital services.

Hospital property, for the purposes of this policy, is considered to be:

1. The hospital's physical geographic boundaries; or
2. In the case of ambulances owned and operated by the hospital, whenever in operation whether or not on the hospital grounds; or
3. Non-hospital owned ambulance that has arrived on the physical property of the hospital, i.e., turned into the hospital campus driveway or entrance.

EFFECTIVE: Until such time as the Hospital Regulations are amended to reflect this revision and become effective.

APPROVED: Katy Gammon, Director  
Board for Licensing  
Health Care Facilities



STATE OF TENNESSEE  
DEPARTMENT OF HEALTH  
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PM 69

BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

**SUBJECT:** Continuing education required for Assisted Care Living and Homes for the Aged Administrators Initial Certification.

**DATE:** May 13, 1998

**POLICY:** The Board grants staff the authority to extend the initial biannual re-certification expiration date of Home for the Aged or Assisted Care Living Facility administrator candidates who receive their initial administrator certification between the dates of January 1 and June 30 of any year to two (2) years plus the additional months remaining in the fiscal year. This policy is to apply only to the first biennial certification period for any such administrator and may only be applied when there are less than six (6) months remaining in the State's fiscal year.

**EFFECTIVE:** Until such time as the Homes for the Aged and Assisted Care Living Facility Regulations are amended to reflect this revision and become effective.

**APPROVED:** Katy Gammon, Director  
Board for Licensing  
Health Care Facilities



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PM 70

BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

- SUBJECT:** Swing Beds for Halfway House and Residential Facilities.
- DATE:** May 12, 1999
- POLICY:** In order to utilize licensed bed capacity adequately, appropriately and address client needs as census varies, the Department shall allow Residential and Halfway House Treatment Facilities to request a waiver to utilize their beds for either service depending on the clients needs.
- APPLICABILITY:** This policy will apply to licensed facilities located within the same building or adjacent buildings on the same property.
- PROCEDURE:** A facility shall make a request in writing to the Director, Board for Licensing Health Care Facilities. The request shall be placed on the Consent Calendar for the next scheduled Board Meeting.
- **NOTE:** When waivers are requested, the Bureau of Alcohol and Drug will be notified by the Division of Health Care Facilities.

**APPROVED:** Katy Gammon  
Director  
Health Care Facilities





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PM 72

BOARD FOR LICENSING HEALTH CARE FACILITIES

POLICY MEMORANDUM

**SUBJECT:** Influenza/Pneumococcal Vaccine in Nursing Homes, Residential Homes for the Aged and Assisted Care Living Facilities.

**DATE:** June 22, 1999

**POLICY:** The Board adopted the following policy effective until the Infection Control Sections of the Regulations for Assisted Care Living Facilities, Nursing Homes and Residential Homes for the Aged amendments become effective:

Institutions shall make vaccine available to residents.

The facility shall document evidence of annual vaccination against influenza for each resident, in accordance with the recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control most recent to the time of vaccine, unless such vaccination is medically contraindicated or the resident has refused the vaccine. Influenza vaccination for all residents accepting the vaccine shall be completed by November 30 of each year or within 10 days of the vaccine becoming available. Residents admitted after this date during the flu season and up to February 1, shall as medically appropriate, receive influenza vaccination prior to or on admission unless refused by the resident.

The facility shall document evidence of vaccination against pneumococcal disease for all residents who are 65 years of age or older, in accordance with the recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control at the time of vaccination, unless such vaccination is medically contraindicated or the resident has refused offer of vaccine. The facility shall provide or arrange the pneumococcal vaccination of residents who have not received this immunization prior to or on admission unless the resident refuses offer of the vaccine.

**APPROVED:**  Katy Gammon, Director  
Board for Licensing  
Health Care Facilities



**TENNESSEE DEPARTMENT OF HEALTH  
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**Board for Licensing Health Care Facilities**

**Policy Memorandum**

**SUBJECT:** Hospice Patients in ACLFs

**DATE:** March 12, 2008

**POLICY:** The Board accepted the Hospice Waiver Task Force recommendations and development of a policy statement on November 14, 2007:

The Board's interpretation of 68-11-201(5)(C)(i) which states, "The person requires intravenous or daily intramuscular injections or intravenous feedings" is to include percutaneous patches as meeting the intent of 68-11-201(5)(C)(i).

The Board chose to interpret a transdermal patch as a means of parental administration of a drug.

The Board also supports legislative action addressing the current inadequacy of existing legislation with regard to persons in ACLFs who develop conditions after admission requiring hospice care with which they are no longer able to meet the definition of an ACLF resident.

**EFFECTIVE:** March 12, 2008

**APPROVED:**

Larry Arnold, M.D., Chairman  
Board for Licensing Health Care Facilities

Ann R. Thompson, RN, BSN, MBA  
Director of Licensure  
Board for Licensing Health Care Facilities