



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
AMENDED**

Date: May 30, 2019
To: Shelley Walker, Director of Communication and Media Relations
From: Wanda E. Hines, Board Administrator

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

Date of Meeting: June 5, 2019
Time: 9:00 a.m., CDT
Place: Iris Conference Room
665 Mainstream Drive, First Floor
Nashville, TN 37243

Major Item(s) on Agenda: See attachment.

LINK TO LIVE VIDEO STREAM:

<https://web.nowuseeit.tn.gov/Mediasite/Play/658cfc6319104ace870078c4976183e61d>

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

LISA PIERCEY, MD, MBA, FAAP
COMMISSIONER

BILL LEE
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

JUNE 5, 2019

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. LEGISLATIVE UPDATE 2019** – Sara Warner and Patrick Powell,
Office of Legislative Affairs
 - B. EMS REPORT** – Robert Seesholtz
 - C. OFFICE OF GENERAL COUNSEL REPORT** – Caroline Tippens
 - D. OFFICE OF HEALTH CARE FACILITIES REPORT** – Vincent Davis
- 3. BOARD APPROVAL FOR THE FOLLOWING INTERPRETATIVE GUIDELINES**
 - A. Interpretative Guidelines** – Supervision of “unskilled” services delivered in the patient’s residence. – Home Health Services Rule 1200-08-26-.06(7)(c).

4. **LICENSE STATUS REQUESTS.**

**PLANNED PARENTHOOD OF TENNESSEE AND NORTH MISSISSIPPI (PPTNM),
NASHVILLE-ASTC #15**

This ambulatory surgical treatment facility is seeking to place their license on inactive status. The Nashville Health Center has not provided surgical abortions since November 30, 2018. Following a merger of Planned Parenthood Greater Memphis Region and Planned Parenthood of Middle and East Tennessee, the Nashville Health Center temporarily interrupted its surgical services to fill gaps in staffing and that all staff understands and adhere to the same policies and procedures. Planned Parenthood of Tennessee and North Mississippi plan to resume providing surgical services at the Nashville Health Center in early June but will alert the office for a definitive target date.

REPRESENTATIVE(S): Ashley Coffield, CEO

WAYNE COUNTY NURSING HOME, WAYNESBORO #277

This forty-six (46) bed nursing home is requesting a third extension waiver for their license to remain on inactive status pending completion of the CON project. Waynesboro Healthcare, LLC, Cleveland was granted a 24-month extension of their CON to April 1, 2019 and the organization decided to withdraw their CON pending relocation and replacement of beds. Waynesboro has decided to seek a new CON to relocate and replace the 46 beds which will give them time to finalize the scope, obtain the project costs, and complete construction. The CON project is moving forward and Wayne County Nursing Home would like to keep the 46 beds on inactive status as they go through this process. This facility's license was placed on inactive status on September 10, 2014 which expired on May 10, 2015, an extension waiver was granted on September 7, 2016 which expired February 8, 2017, and a second extension was granted on February 8, 2017 which expires on June 6, 2019.

REPRESENTATIVE(S): Kelli A. Canan, Director of Licensure and Certification

**UPPER CUMBERLAND HOSPICE AND PALLIATIVE CARE, LLC,
CHATTANOOGA #9**

Upper Cumberland Hospice and Palliative Care, LLC, Cookeville, a residential hospice facility is requesting a second extension waiver for their license to remain on inactive status. Upper Cumberland Hospice and Palliative Care LLC, Cookeville was placed on inactive status on February 8, 2017 which expired February 2018, and an extension inactive status waiver was granted on February 7, 2018 which expired on February 7, 2019.

REPRESENTATIVE(S): Tracy Wood, President and CEO and Tim Heath, EVP Business Development

SISKIN HOSPITAL'S SUBACUTE REHABILITATION PROGRAM, CHATTANOOGA #382

This twenty-nine (29) bed nursing home facility is requesting a second extension waiver for their license to remain on inactive status through June 2020. Siskin continues to explore options for deployment of their beds, but a definitive plan has not yet been developed. Siskin Subacute was placed on inactive status for one (1) year on June 7, 2017 which expired June 7, 2018, an extension inactive status waiver was granted June 7, 2018 which expires on June 7, 2019.

REPRESENTATIVE(S): Dan Elrod, Attorney

SAPLING GROVE ASC, BRISTOL #116

This ambulatory surgical treatment center is seeking to place their license on inactive status. The physicians who previously owned an interest in this facility has shifted their surgeries to other facilities. Surgeries are not currently being scheduled at Sapling Grove and the entity that owns this facility is in wind-down pending a determination as to the future possible uses of the facility.

REPRESENTATIVE(S): Dan Elrod, Attorney

MEMORIAL/MISSION OUTPATIENT SURGERY CENTER, CHATTANOOGA #147

This ambulatory surgical treatment center is requesting a fourth extension waiver to remain inactive status until June 2020. Leadership of Memorial/Mission continues to actively explore options for reactivating the facility's license. Continuation of inactive status will allow opportunity to fully evaluate proposals for reopening the facility. This facility's license was placed on inactive status for twelve (12) months on May 6, 2015 which expired May 6, 2016; an extension inactive waiver status for additional twelve (12) months was granted on May 5, 2016 which expired June 7, 2017; an second extension inactive status for additional twelve (12) months was granted on June 7, 2017 which expired June 7, 2018; and a third extension inactive waiver status for additional twelve (12) months was granted on June 6, 2018 for additional twelve (12) months which expires June 6, 2019.

REPRESENTATIVE(S): Dan Elrod, Attorney

CHRISTIAN CARE CENTER OF MEDINA f/k/a MILAN HEALTH CARE CENTER, MILAN #308

This sixty-six (66) nursing home bed facility is requesting a second extension waiver for their license to remain on inactive status through October, 2020. A Certificate of Need (CON) application for relocation and replacement of this facility was approved on June 27, 2018 and is valid thru August 1, 2020. Since the Board meets after August, 2020 a second extension of inactive status is requested until the October 2020 Board meeting.

REPRESENTATIVE(S): Jerry Taylor, Attorney

CUMBERLAND RIVER HOSPITAL, CELINA #15

This thirty-three (33) hospital bed facility is requesting to place their license on inactive status effective March 1, 2019 concurrent with the Hospital's cessation of operations. Final accounts for the Hospital are currently being processed, and that process is expected to take several months.

REPRESENTATIVE(S): Michaela D. Poizner, Attorney

TRINITY MANOR SUITES, GALLATIN #623

This six (6) bed RHA is seeking to place their license on inactive status effective May 1, 2019. The owner stated she is unable financially to keep the facility afloat and is searching alternative options. If no interest to re-open facility owner will surrender license on or before August 22, 2019.

REPRESENTATIVE(S): Andrea McGuire, Owner/Administrator

BAPTIST TRINITY HOME CARE-PRIVATE PAY DIVISION, MEMPHIS #242

This home health agency is seeking to request an extension waiver for their license to remain on inactive status through June 5, 2020. This will allow Baptist-Trinity to reach a definitive plan for the future operation of this service.

REPRESENTATIVE(S): Travis B. Swearingen, Attorney

5. WAIVER REQUESTS.

NORTH KNOXVILLE MEDICAL CENTER, POWELL #45

This six hundred and ten (610) bed hospital is requesting to increase their acute care beds count by eight (8) licensed beds for a new birthing center. The total licensed acute bed complement will be one hundred and eight beds (108) beds upon approval. This request is made pursuant to the Tennessee Health Services and Development Agency statute T.C.A. §68-11-1607(g).

REPRESENTATIVE(S): Clyde Wood, CEO

SUMNER REGIONAL MEDICAL CENTER, GALLATIN #116

This one hundred and fifty-five (155) bed hospital is requesting to increase their acute care beds count by twelve (12) licensed beds. The total licensed beds complement will be one hundred and sixty-seven (167) beds upon approval. This request is made pursuant to the Tennessee Health Services and Development Agency statute T.C.A. §68-11-1607(g).

REPRESENTATIVE(S): Susan Peach, CEO

DELTA MEDICAL CENTER, MEMPHIS #106

This two hundred twenty-three (223) bed hospital is seeking to discontinue surgical services under hospital rule 1200-08-01-.07(1). Delta Medical Center has not been able to provide surgical services at the hospital since 2016 as a result of both outdated facilities and equipment and having difficulty securing physician coverage. In addition, Delta is seeking to close its emergency room. Patients in southeast Memphis and surrounding communities do not rely on Delta for true emergency care. Most importantly, this is an ongoing financial drain which directly impacts Delta's ability to focus on and expand its core services.

REPRESENTATIVE(S): W. Brantley Phillips, Jr., Attorney

**RESPIRATORY TECHNOLOGIES, INC., MINNEAPOLIS-ST. PAUL,
MINNEAPOLIS D/B/A RESPIRTECH**

This home medical equipment provider came before the Board May 4, 2016 requesting an interpretation that a RespirTech individual employee's home would meet the physical location requirements of the HME regulations. RespirTech is currently seeking to slightly modify the previously approved waiver to allow the usage of corporate office space to serve as the physical location for Tennessee DME provider license.

In addition to location modification, RespirTech is requesting the Board to waive or modify nine (9) other HME regulations which are specified in the waiver request letter.

REPRESENTATIVE(S): Chris Puri, Attorney

**RESPIRONICS, INC., DBA PHILIPS RESPIRONICS AND RESPIRONICS
COLORADO, INC., COLORADO**

This potential applicant as a home medical equipment provider in Tennessee is seeking an interpretation and/or waiver of twelve (12) provisions of the HME Regulations 1200-08-29 including the physical location regulation. Respiroics, Inc., is requesting to be consistent with previous waiver approvals that were granted to home medical equipment provider RespirTech in May 2016 and to National Biological Company in October 2017. This provider will offer to consumers a product known as "Simply Go Mini" which is a portable oxygen concentrator as well as other durable medical equipment. Respiroics' "Simply Can Mini" will be delivered to patients only through mail order delivery. The product is also not covered under Medicare and/or Medicaid. Like the related company, RespirTech, all equipment-related problems and returns are handled through company support resources and not at the physical location in Tennessee.

REPRESENTATIVE(S): Chris Puri, Attorney

6. DISCUSSION(S).

- A. J.B. Knowles Assisted Living, Nashville fka Autumn Hills Assisted Living, Nashville #79 (ACLF) – Request to Lift Probation.

REPRESENTATIVE(S): Melvin Corlew, Administrator

- B. Home Healthcare Solutions of Davidson, LLC, Nashville (PSS-333) – Updated Progress Report by facility on securing DIDD contract.
- REPRESENTATIVE(S):** Tony O’Digie, Owner
- C. Vanderbilt University Medical Center, Nashville (HOSP-27) – Updated Progress Report on Accepted Plan of Correction (POC).
- REPRESENTATIVE(S):** Dan Elrod, Attorney, Dr. Wright Pinson, Deputy Chief Executive Officer/Chief Health System for VUMC; Marilyn Dupree, Executive Chief Nursing Officer; and Mitch Edgeworth, CEO.
- D. Legacy Assisted Living and Memory Care, Memphis (ACLF) Progress Report.
- REPRESENTATIVE(S):** Joe Jasmon, CEO, American Healthcare Mgmt.
- E. Cades Center, Inc., Jackson (ACLF-350) – Status on Meeting the Requirements of the Consent Order of February 5, 2019.
- REPRESENTATIVE(S):** Linda K. Burton, Administrator
- F. Approval of the Joint Annual Report on the Status of Children’s Emergency Care Alliance of Tennessee (CECA TN) 2019.
- REPRESENTATIVE(S):** Natasha Kurth, Executive Director
Children’s Emergency Care Alliance of Tennessee (CECA TN)
- G. SRS-Nashville HH+, LLC, Nashville (Sanderling) (ESRD-233)-Unacceptable Plan of Correction and Update Report and Approval of Plan of Correction.
- REPRESENTATIVE(S):** Dr. Jerome Tannenbaum, Owner and Clay Bird, Attorney
- H. Inaugural Meeting of the Coordinated Community Response on Elder Abuse in regards to Grant Work with the Plough Foundation.
- REPRESENTATIVE(S):** Jim Shulman, HCF Chairman Pro Tem Board Member
- I. Prestige Assisted Living of Loudon County, Loudon #53 (ACLF) – Progress Report
- REPRESENTATIVE(S):** Nikki Zaveri, Administrator
- J. Introduce \$3,000 ACLF CMP amount for CMP tags rising to actual harm of ACLF resident.
- REPRESENTATIVE(S):** Caroline Tippens, Attorney, Office of General Counsel

K. Defined 'Sleeping hours' in ACLFs and RHAs.

REPRESENTATIVE(S): Craig Parish, Facilities Construction Director

L. Autumn Ridge Manor, White Bluff #53-Unacceptable Plan of Correction and Approval of Plan of Correction.

REPRESENTATIVE(S): Steve Farless, Administrator and Joe Moore, President, Biblical Concepts Housing

7. APPROVAL OF MINUTES.

A. February 5, 2019 – Board Meeting

B. April 16, 2019 – Performance Improvement Issue Standing Committee Meeting

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

A. SPECIAL CONSIDERATION

(INITIALS)

(CHOWS)

Riverdale Assisted Living Facility, Memphis

B. RATIFICATION.

1. QUALIFYING APPLICATIONS (Approval)

(INITIALS)

(a) Assisted Care Living Facility

Clarendale at Indian Lake, Hendersonville

Jubilee Hills, Goodlettsville

Jubilee House at Warfield, Clarksville

Princeton Transitional Care & Assisted Living, Johnson City

Traditions of Smyrna, Smyrna

(b) End Stage Renal Disease Facility

FKC Sandy River, Paris

Foreman Drive Home Training, Cookeville

Fresenius Kidney Care Caryville, Caryville

Kidney Center of Ooltewah-Collegedale, LLC, Ooltewah

Lewis Creek Dialysis, Dyersburg

(c) Home Health Services

Advanced Nursing Solutions, Nashville

- (d) **Home Medical Equipment Facility**
Diversity Ortho Solutions, Murfreesboro
Medly Health Solutions, LLC, Johnson City
Serious Health, Chattanooga
Star Med Supplies, LLC, Nashville
Strive Medical, LLC, Nashville

- (e) **Professional Support Services**
Best Homecare, LLP, Kingston
Best Nurses, Inc., Memphis

(CHOWS)

- (a) **Ambulatory Surgical Treatment Center**
Renaissance Surgery Center, Bristol

- (b) **Assisted Care Living Facility**
Country Cottage-Lawrenceburg, Lawrenceburg

- (b) **Nursing Homes**
BedrockHC at Spring Meadows, LLC, Clarksville
The Highlands of Dyersburg Health and Rehabilitation, Dyersburg
The Highlands of Memphis Health and Rehabilitation, Memphis

9. LICENSE STATUS UPDATES.

RENAISSANCE SURGERY CENTER, LLC, BRISTOL #177

This ambulatory surgical treatment facility had placed their license on inactive status on February 5, 2019. Since that time Renaissance has gathered equipment, contracted with payors and vendors, and has submitted its 855B application with Medicare. This facility's current plans are to perform its first procedure on May 14, 2019 and have request the Department to place their license back to active status. A survey was conducted May 14-15, 2019 with no deficiencies cited.

PENDLETON HOUSE OF LOVE, MEMPHIS (RHA-185)

This residential home for the aged at the February 5, 2019 Board meeting had requested for their license to be placed back to active status effective March 1, 2019. A survey is required before this facility can become active. A survey was scheduled for this facility but the surveyors could not conduct the survey due to the facility was locked. A second survey was schedule, but after speaking with the owner it was found that the facility was inaccessible again and the survey could not take place. The facility continues on inactive status which will expire on October 2019.

***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:**

Adamsville Healthcare and Rehabilitation Center, Adamsville #167
Christian Care Center of Bristol, Bristol #409
Claiborne and Hughes Nursing and Rehabilitation Center, Franklin #294
Decatur County Health Care and Rehabilitation, Inc., Parson #315
Durham-Hensley Health and Rehabilitation, Chuckey #310
Majestic Gardens at Memphis Rehabilitation and Skilled Nursing Center,
Memphis #240
Mountain City Care & Rehabilitation Center, Mountain City #140
Stones River Manor, Inc, Murfreesboro #412

B. **THE FOLLOWING NURSING HOMES ARE REQUESTING TO WAIVE NURSING HOME REGULATIONS 1200-08-06-.04(1) FOR A TENNESSEE LICENSED NURSING HOME ADMINISTRATOR UNTIL A PERMANENT REPLACEMENT IS HIRED OR RECEIVES HIS/HER LICENSE IN TENNESSEE BY BOARD POLICY #81:**

- (1) Palmyra Nursing and Rehabilitation Center, Palmyra (NH #192)
- Jeffery White, Temporary Administrator

11. **ORDERS.**

A. **Consent Orders.**

12. **REGULATION(S).**

A. **BOARD APPROVAL FOR RULEMAKING HEARING**

Change ACLF/RHA Administrators' renewal date from June 30th to birthdate of administrator.

B. **PROPOSED RULE LANGUAGE**

Propose revision to Nursing Home Rules 1200-08-06-.06(h) and Assisted Care Living Rules 1200-08-25-.08(i) that governs influenza and pneumococcal disease to include proposed shingles rule language.

REPRESENTATIVE(S): Jim Schmidt, President, Schmidt Government Solutions

MINUTES
BOARD FOR LICENSING HEALTH CARE FACILITIES
June 5, 2019

The Board for Licensing Health Care Facilities Board meeting began June 5, 2019. Jim Shulman, Chairman Pro Tem, served as Chairperson of the Board for Licensing Health Care Facilities.

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

Dr. René Saunders, Chairperson – not here
Mr. Robert Breeden – here (arrived at 10:00 am)
Dr. Jennifer Gordon-Maloney – here
Mr. Joshua Crisp – here
Ms. Carissa Lynch – here
Dr. Patsy Carihfield – not here
Mr. Thomas Gee – not here
Mr. Chuck Griffin – here
Mr. Jim Shulman, Chairman Pro Tem – here
Mr. Bobby Wood – here
Mr. Roger Mynatt – not here
Dr. Sherry Robbins – not here (awaiting reappointment)
Ms. Janet Williford – here
Dr. Evelyn Brock – here
Mr. Paul Boyd – here
Ms. Gina Throneberry – not here
Ms. Patricia Ketterman – not here

A quorum was not established at the start time of 9 am for the Board for Licensing Health Care Facilities. Caroline Tippens, Office of General Counsel, stated non-voting agenda items could be addressed without a quorum.

REPORTS:

Legislative Update 2019 –

Patrick Powell, Office of Legislative Affairs, presented an update of the passed legislation for 2019 that might impact the Office of Health Care Facilities. The following public chapters (PC) were referenced to the Board:

PC 12 - allows a qualified RN with relationship with a MD to address emergency medical issues.

PC 144 - prohibits vaping material in/on healthcare facility property same as smoking ban.

PC 324 - allows a licensed nursing home to transfer beds to another licensed nursing home with approved CON.

PC 341 - a hospital cannot include in billing any specialty services unless additional information was supplied.

PC 447 - allows law enforcement to subpoena healthcare facility information before charges are brought to the respective Board.

OGC -

Ms. Tippens presented the following report –

- Twenty-four (24) open
- Fifteen to sixteen (15 – 16) consent orders for Board meeting today
- Rule status
 - Trauma Care rules under review in AGs' office;
 - PC 1003 and a few others are still in the internal review process in OGC;
 - Fee increase rules went through Government Operations and will be effective July 1, 2019;
 - Other rule language to include DIDD contract requirements, Medtronic's language, etc made it through Government Operations twice with a stay and then an effective date of June 24, 2019;
 - Seven to eight (7 – 8) rule packets continue in internal review in OGC.

Office of Health Care Facilities –

Vincent Davis, Director of the Office of Health Care Facilities (OHCF), presented the draft findings of the Department of Health's internal audit of the OHCF. He stated the draft of the audit was received on June 3, 2019 and that no comments have been made to the audit to date. Mr. Davis stated a final report will be made to the Board. There were two areas reviewed – operations of the Board and licensure; survey process. The audit revealed that licensure renewal and status was reflected incorrectly, disciplinary actions not reflected in information available to the public, and licensure fees shown as unassigned cash and not appropriately allocated. An observation of the audit team was the need to provide financial reports to the Board. For the survey process area, it was found that surveys were not performed timely on an annual basis and that complain and self-report investigations were not investigated timely for the time period of January 1, 2019 thru May 13, 2019. Mr. Shulman questioned if surveyors were needed. Mr. Davis stated this report will go to the Commissioner so it will be known that there are not enough surveyors to conduct surveys. Mr. Shulman asked if the financials are reflective of the licensure fees received. Mr. Davis stated yes plus other sources and the cost of the Board meetings.

DISCUSSION(S):

Vanderbilt University Medical Center, Nashville #27 (Hospital) Updated Progress Report on Accepted Plan of Correction (POC) -

Dan Elrod presented on behalf of Vanderbilt. Several items of the POC have been implemented including a drug cabinet override on paralytic agents, double nurse sign offs on overrides, shrink wrap of paralytic medications, better reporting to the Medical Examiner's Office, and investment in personnel training which is now imbedded in the onboarding of new employees.

Legacy Assisted Living and Memory Care, Memphis #279 (ACLF) Progress Report –

Jerry Taylor and Emily Taube presented on behalf of Legacy. Mr. Taylor gave the history of the facility being placed in receivership with KCP appointed to manage the receivership. KCP hired American Health Management to run the facility. Mr. Taylor also addressed the facility's poor survey history. It was reported in February to the Board that changes had been put into place and the probation of the facility's license would remain until February 2020. Mr. Taylor reported to the Board the facility had reached compliance and the SOA (suspension of admissions) was lifted on May 8, 2019. He further stated the turnaround of the facility is ongoing.

Cades Center, Inc., Jackson #350 (ACLF) Status on Meeting the Requirements of the Consent Order of February 5, 2019 –

Linda Burton owner and administrator reported on this agenda item. She stated there was a complaint survey conducted which was based on a disgruntled employee complaint to the Department of Health. Ms. Burton stated she had a resident that required medication administration. She has since hired nurses to administer medications and is no longer using medication technicians. Ms. Burton is also trying to move this resident to a higher level of care. She reports two subsequent surveys without deficiencies cited.

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

Discussion of elder abuse across the state was the focus of the above meeting. As a result of this discussion a task force was implemented by the legislature to look closer at financial exploitation of the elderly. Two (2) nurses from Baptist Hospital working in the emergency room developed a protocol for addressing those patients who may have been abused and presenting to the emergency room. This protocol has been moved along to other hospitals and has been recognized nationally. Ms. Shulman reported this protocol is possibly to be shared with the district attorneys during the Tennessee DA Conference. He also reported that Tennessee is recognized as a national leader in elder abuse strategies.

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

Alisha McMurray, attorney representing the facility, joined the meeting by phone to present on this agenda item. She stated the facility had submitted an acceptable plan of correction (POC) with a revisit that returned the facility to compliance. As a result of this visit the suspension of admissions (SOA) was lifted. The facility has started admitting new residents. Ms. McMurray indicated there is a potential change of ownership in the works, but a notice letter has yet to be submitted.

LICENSURE STATUS UPDATE(S):

The following licensure status update was presented –

Renaissance Surgery Center, LLC, Bristol #177 (ASTC) requested to place their license on inactive status at the February 5, 2019 Board meeting. The facility requested to place its license back to active status and was surveyed May 14 – 15, 2019 with no deficiencies cited. The facility's license is now back to active status.

Pendleton House of Love, Memphis #185 (RHA) requested to have the facility's license placed back to active status which was presented at the February 5, 2019 Board meeting. Two surveys were scheduled for the facility due to the length of time in inactive status, but these surveys were unable to be conducted. The facility continues on inactive status which expires October 2019.

FACILITY CLOSURES:

A listing of all facility closures during the time period of February 1, 2019 thru May 31, 2019 was provided to the Board. No discussion was held.

At this time, a quorum of the Board was reached and business of the Board requiring deliberation was conducted.

BOARD APPROVAL INTERPRETATIVE GUIDELINES (IG):

Supervision of “unskilled” services delivered in the patient’s residence for Home Health Services Agency rule 1200-08-26-.06(7)(c) was presented to the full Board for approval or denial. This IG was first brought to the Performance Improvement Issues (PI) Standing Committee by the Tennessee Association of Home Care for consideration. The IG is to be effective during the time of rulemaking for such change to be made to the licensure regulations. The change in language aligns the Home Health Agency rule language with federal certification requirements. **Ms. Williford made a motion to approve; seconded by Mr. Griffin and Dr. Brock. The motion was approved.**

LICENSE STATUS REQUEST(S):

The following licensure status requests were presented -

Planned Parenthood of Tennessee and North Mississippi (PPTNM), Nashville #15 (ASTC) –

This ambulatory surgical treatment center (ASTC) is seeking to place their license on inactive status. The center has not provided surgical abortions since November 30, 2018. Following a merger of Planned Parenthood Greater Memphis Region and Planned Parenthood of Middle and East Tennessee, the Nashville Health Center temporarily interrupted its surgical service to fill gaps in staffing and worked to ensure staff understood and adhered to same policies and procedures. Planned Parenthood of Tennessee and North Mississippi plan to resume providing surgical services at the Nashville Health Center in early June with the target date of June 12, 2019. Representative for the facility was Ashley Coffield, CEO. **Ms. Williford made a motion to approve the inactive status request until October 2019; seconded by Mr. Griffin. The motion was approved.**

Wayne County Nursing Home, Waynesboro #277 (NH) –

This forty-six (46) bed nursing home sought a third extension for its license to remain in an inactive status pending completion of their CON project. Waynesboro Healthcare, LLC, Cleveland was granted a 24 month extension of their CON to April 1, 2019, but the organization decided to withdraw their CON for relocation and replacement of beds. Waynesboro decided to seek a new CON to relocate and replace the 46 beds which will give them time to finalize the scope, obtain project costs, and complete construction. As the CON project moves forward, Wayne County Nursing Home would like to keep the 46 beds on inactive status. Representative for the facility was Kelli Canan, Director of Licensure and Certification. The facility’s second inactive status extension expires June 6, 2019. **Mr. Boyd made a motion to approve the third extension until June 2020; seconded by Mr. Breden. The motion was approved.**

Upper Cumberland Hospice and Palliative Care, LLC, Chattanooga #9 (Residential Hospice) –

This residential hospice provider sought a second extension of the inactive status of its license. The facility’s extension for inactive status expired on February 7, 2019. Tracy Wood, President and CEO, and Tim Heath, EVP Business Development, presented to the Board. They stated the facility is still looking for a location and will need an additional year to accomplish. **Mr. Wood made a motion to approve the second extension until June 2020; seconded by Mr. Griffin. The motion was approved.**

Siskin Hospital’s Subacute Rehabilitation Program, Chattanooga #382 (NH) –

This twenty-nine (29) bed nursing home sought a second extension for its license to remain on inactive status through June 2020. Siskin continues to explore options for deployment of the beds, but a definitive plan has not yet been developed. Siskin Subacute’s current inactive status extension expires June 7, 2019. Representative for the facility was Travis Swearingen, attorney. He informed the Board

the original inactive status request was based upon a larger plan. Mr. Swearingen further stated CMS reimbursement rates changed and this affected that larger plan. **Ms. Williford made a motion to approve the second extension until June 2020; seconded by Mr. Griffin. The motion was approved.**

Sapling Grove ASC, Bristol #116 (ASTC) –

This ASTC sought to place its license on inactive status. The physicians who previously owned and interest in the facility have shifted their surgeries to other facilities. Surgeries are not currently being scheduled at Sapling Grove. The entity that owns the facility is in wind-down pending a determination as to the future possible uses of the facility. Representative for the facility was Travis Swearingen, attorney. He informed the Board that the surgeons that were associated with the facility have applied for a CON. **Mr. Griffin made a motion to approve the inactive status until June 2020; seconded by Mr. Wood. The motion was approved.**

Memorial/Mission Outpatient Surgery Center, Chattanooga #147 (ASTC) –

This ASTC sought a fifth extension of the inactive status of its license until June 2020. Leadership of the facility continues to actively explore options for reactivating the facility's license. The continuation of the inactive status will all opportunity to fully evaluate proposals for reopening the facility. The facility's current fourth inactive status expires June 6, 2019. Representative for the facility was Travis Swearingen, attorney. He informed the Board that the MD partnership involved in this facility chose to go elsewhere. Mr. Swearingen further stated several negotiations have been undertaken without success. The facility has plans to move forward with in the next year. **Ms. Williford made a motion to approve the fifth extension until June 2020; seconded by Mr. Breeden. The motion was approved.**

Christian Care Center of Medina f/k/a Milan Health Care Center, Milan #308 (NH)–

This sixty-six (66) bed skilled nursing home sought a second extension of the inactive status its license through October 2020. A CON application for relocation and replacement of the facility was approved on June 27, 2018 and is valid through August 1, 2020. Representative for the facility is Jerry Taylor, attorney. He informed the Board the CON is the item that allows the facility to be replaced and relocated. **Ms. Williford made a motion to approve the second extension until October 2020; seconded by Mr. Griffin. The motion was approved.**

Cumberland River Hospital, Celina #15 (Hospital) –

This thirty-three (33) bed hospital sought to place its license on inactive status effective March 1, 2019 which is concurrent with the hospital's cessation of operations. Final accounts for the facility are currently being process and that process is expected to take several months. Representatives for the facility were Travis Swearingen, attorney, and Luke Hill, Chief Legal Officer, Cookeville Regional Medical Center. He informed the Board the facility is currently in negotiations to sell. Mr. Swearingen stated the financial picture had become bleak for the hospital as well as a decline in admissions had occurred. Vincent Davis, Director of Health Care Facilities, asked if this hospital was designated as a Critical Access Hospital before its closure. Mr. Lee stated yes. **Mr. Griffin made a motion to approve the inactive status until June 2020; seconded by Mr. Wood. The motion was approved.**

Baptist Trinity Home Care-Private Pay Division, Memphis #242 (HHA) –

This home health agency sought an extension of its inactive status through June 5, 2020. This would allow Baptist-Trinity to reach a definitive plan for the future operations of this service. The facility's inactive status expires June 6, 2019. Representative for the facility was Travis Swearingen, attorney. **Ms. Williford made a motion to approve the extension until June 2020; seconded by Mr. Boyd. The motion was approved.**

WAIVER REQUEST(S):

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

North Knoxville Medical Center, Powell #45 (Hospital) –

This licensed six hundred ten (610) bed hospital requested to increase their acute care beds by eight (8) for a new birthing center. The total licensed acute bed complement will be one hundred and eight (108) beds upon approval. This request was made pursuant to the Tennessee Health Services and Development Agency statute T.C.A. §68-11-1607(g). Representative for the facility was Warren Gooch, attorney. **Ms. Williford made a motion to approve the eight (8) bed increase; seconded by Mr. Breeden. The motion was approved.**

Sumner Regional Medical Center, Gallatin #116 (Hospital) –

This licensed one hundred fifty-five (155) bed hospital requested to increase their acute care beds by twelve (12). The total licensed bed complement will be one hundred and sixty-seven (167) beds upon approval. This request was made pursuant to the Tennessee Health Services and Development Agency statute T.C.A. §68-11-1607(g). Representative for the facility was Susan Peach, CEO. **Mr. Boyd made a motion to approve the twelve (12) bed increase; seconded by Mr. Griffin. The motion was approved.**

Delta Medical Center, Memphis #106 (Hospital) –

This licensed two hundred twenty-three (223) bed hospital sought to discontinue surgical services under Hospital rule 1200-08-01-.07(1). Delta Medical Center has not been able to provide surgical services at the hospital since 2016 as a result of both outdated facilities and equipment and having difficulty securing physician coverage. In addition, Delta also sought to close its emergency room. Patients in southeast Memphis and surrounding communities do not rely on Delta for true emergency care. Most importantly, there is an ongoing financial drain which directly impacts Delta's ability to focus on and expand its core services. Representative for the facility was Brantley Phillips, attorney. He addressed the Board stating Acadia who is the owner of this facility rescued the facility from bankruptcy in 2012. Mr. Phillips stated the hospital has a strong psychiatric service. He also stated the facility has over one hundred (100) medical beds to serve the prison population in the area. Mr. Phillips stated the emergency room sees fewer than twenty (20) patients per day with 85% of those having non-acute needs. He stated St. Francis another licensed hospital is a few miles down the road to serve the emergent needs of the community. Mr. Phillips state Delta would fulfill any EMTALA obligations. **Ms. Williford made a motion to approve the request; seconded by Mr. Breeden. The motion was approved.**

Respiratory Technologies, Inc., Minneapolis-St. Paul d/b/a RespirTech, Minneapolis #1250 (HME) –

This home medical equipment (HME) provider came before the Board in May 2016 requesting an interpretation that a RespirTech employee's individual home would meet the physical location requirements of the HME regulations. RespirTech sought to slightly modify the prior approved waiver which is to allow usage of corporate office space to serve as the physical location in Tennessee. In addition to this request, RespirTech requested the Board to waive nine (9) other HME regulations which are as follows –

1200-08-29-.04(2) & 1200-08-29-.04(1) – Administrator requirements; would maintain an administrator, but not an individual meeting the qualifications at 1200-08-29-.01(2)(a-c)

1200-08-29-.04(6)(c)&(d) - Personnel

- 1200-08-29-.04(7-9) – Postings within the Agency
- 1200-08-29-.05(1)[excluding subpart(b)] & .05(2) – facility does not have any patient admissions
- 1200-08-29-.06(2)(f) – Basic Agency Functions, Infection Control
- 1200-08-29-.06(4)(a-c) – Basic Agency Functions, Equipment Management
- 1200-08-29-.06(6) – Basic Agency Functions, Additional Compliance Requirements
- 1200-08-29-.11(3) – Records and Reports
- 1200-08-29-.14(1) & (2) – Disaster Preparedness

Representative for the facility was Chris Puri, attorney. He addressed the Board stating the facility is under new ownership and this ownership leases corporate office space in Nashville. Mr. Puri when presenting RespirTech’s waiver requests referenced the waiver granted to National Biological another HME provider in the past. This Board previously granted to National Biological a list of waivers that were similar to these listed above. Ms. Williford asked if a caregiver is needed by individuals receiving equipment from RespirTech. Mr. Puri stated not in all situations. It is dependent upon each patient. Ms. Williford asked if there is a safety risk. Mr. Puri stated not necessarily. The equipment requires an MD order per the FDA. Mr. Shulman questioned if this can be ordered on-line. Mr. Puri stated this is not an option. Mr. Boyd asked if attempts have been made to approach the legislature in order to change the HME laws. Mr. Puri stated the legislature has addressed some aspects with the Board relative to glucose monitoring. He further stated conversation has occurred at his law firm, but there has been no movement thus far.

Mr. Davis questioned if the training of staff and how competency was checked. Mr. Puri stated RespirTech has training for employees which is used during on-boarding. There competency test administered and follow-up with patients on the training experience. Mr. Puri also stated licensed personnel’s licensure standing is verified. Mr. Davis asked if there was certification for this. Mr. Puri stated no, but the agency provides certification to employees. Mr. Shulman asked if this product is provided all the country. Mr. Puri stated yes and that only Alabama and Tennessee have the physical location requirement. He further stated other states seem to conform to the HME entities. Mr. Puri stated this service model has no patient contact. Caroline Tippens, OGC, asked if competency training is maintained in personnel files. Mr. Puri stated yes. He also stated that contractor files are separate from actual employee personnel files. Ms. Reed sought clarification that the corporate office space would be the only physical location. Mr. Puri stated yes and that licensure will be noticed.

Mr. Breeden made a motion to approve the request of RespirTech in full; seconded by Mr. Griffin. The motion was approved.

Respironics, Inc., d/b/a Philips Respironics and Respironics Colorado, Inc, Colorado –

This potential applicant as a home medical equipment provider in Tennessee sought an interpretation and/or waiver of twelve (12) provisions of the HME Regulations 1200-08-29 including the physical location requirement. Respironics, Inc. requested to be consistent with previous waiver approvals that were granted to HME provider, RespirTech, in May 2016 and to National Biological Company in October 2017. Respironics intends to offer to consumers a product known as “Simply Go Mini” which is a portable oxygen concentrator as well as other durable medical equipment. Respironics’ “Simply Go Mini” will be delivered to patients through mail order delivery only. The product is also not covered under Medicare and/or Medicaid. Like the related company, RespirTech, all equipment related problems and returns are handled through company support resources and not at the physical location in Tennessee. Representative of the facility is Chris Puri, attorney. He stated the request by this entity is similar to the above request by RespirTech and National Biological in 2017. Mr. Puri stated there is no

customer interaction; this entity will provide via mail order which then requires additional waiver requests related to infection control. Ms. Tippens addressed the mail order definition and stated it would be effective June 24, 2019 in the HME regulations. She further clarified the entity would be providing oxygen and respiratory equipment and asked Mr. Puri to address further. Mr. Puri stated oxygen not an intracal life sustaining item. He stated a separate HME provider will provide oxygen and oxygen concentrator. The product to be provided by Respironics is a luxury. Respironics would coordinate with other HME providers in an emergent situation. The "Simply Go Mini" supplies air from the environment not a limited supply of oxygen. The device can be charged via a care charger. Patient instruction is provided and documentation is maintained of this. Ms. Tippens brought forth to the discussion that oxygen concentrators are HME equipment and need trained staff to work with patients in their home. This was not contemplated in the mail order exemption language. **Ms. Williford made a motion to move this item to the PI Standing Committee; seconded by Ms. Lynch. The motion was approved.**

DISCUSSION(S):

J.B. Knowles Assisted Living, Nashville f/k/a Autumn Hills Assisted Living, Nashville #79 (ACLF) -

This facility made a request to have the probation status of its license to be lifted. Mr. Shulman recused from this discussion item. Upon his recusal, a quorum of the Board was lost. Representative for the facility was Melvin Corlew, administrator. He presented the request to the Board stating the facility is currently in compliance. Due to the lack of a quorum, this request was moved to the next scheduled meeting of the Board. The facility will remain on probation until the Board can take action.

Home Healthcare Solutions of Davidson, LLC, Nashville #333 (PSS)-

This professional support services agency (PSS) was to provide an updated progress report to the Board on securing a DIDD contract. Representative for the facility was Tony O'Digie, owner. She provided a letter to the Board regarding the current status of the facility acquiring a DIDD contract. Ms. O'Digie stated an application was sent to DIDDs on November 28, 2018. On February 21, 2019, Home Healthcare Solutions of Davidson received further instruction from DIDDs on items to complete and documents to provide. Per instructions from DIDDs, additional information was submitted and an additional meeting was to take place on June 5th with DIDDs' staff. **Mr. Breeden made a motion to have the agency come back to the Board at the October 2019; seconded by Mr. Crisp. The motion was approved.**

Approval of the Joint Annual Report on the Status of Children's Emergency Care Alliance of Tennessee (CECA TN) 2019 -

Natasha Kurth, Executive Director, of CECA TN presented this report to the Board. Ms. Kurth is the new executive director replacing Rhonda Phillippi. There were no comments or questions from the Board. **Mr. Breeden made a motion to approve the report; seconded by Ms. Williford. The motion was approved.**

SRS-Nashville HH+, LLC, Nashville (Sanderling) #233 (ESRD) –

SRS a licensed ESRD made a request to the Board for approval of an unacceptable Plan of Correction (POC). The facility presented this request initially to the PI Standing Committee. That committee approved the presented POC. Representatives for the facility were Rocky King, attorney, and Madison Reese. Mr. King presented to the Board that policies have been implemented per the POC with a subsequent survey resulting in compliance. The other issue for SRS was home dialysis training and the use of staff as a caregiver. SRS has suspended this program per the POC and have been surveyed with

compliance being reached. More discussion ensued related to the caregiver and CCHT (certified clinical hemodialysis technician) definitions. **Ms. Williford made a motion to approve the POC and to move the caregiver and CCHT definitions/items to the PI Standing Committee for clarification on who can be the caregiver; can this be a trained and certified staff member which is allowed by CMS requirements; seconded by Ms. Lynch. The motion was approved.**

Introduce \$3,000 ACLF CMP amount for CMP tags rising to actual harm of ACLF resident –

Ms. Tippens, OGC, presented this item to the Board. She stated the current CMP structure does not allow for large CMP amounts when harm occurs to a resident. Ms. Tippens stated that CMP recommendations for resident elopement have increased and facilities fail to provide for resident safety. She stated the current CMP Grid allows for a \$500 CMP for a first offense. The \$3,000 CMP amounts are for those tags that address inappropriate placement of residents and/or if there is harm that occurs in association with those deficient practices. She recommended movement of this item to the ACLF Standing Committee. Mr. Puri stated moving this item to the ACLF Standing Committee is a good idea. The application of such a CMP amount is not a one size fits all and the right approach for the issue needs to be found. Mr. Puri further stated the Board should not borrow the nursing home stance. Ms. Tippens stated that is not the intention. Mr. Crisp stated specific cases should be brought to the standing committee. Mr. Puri and others will review these cases. **Mr. Breeden made a motion to move this item to the ACLF Standing Committee; seconded by Ms. Williford. The motion was approved.**

Define ‘Sleeping hours’ in ACLFs and RHAs –

Craig Parisher, Facilities Construction Director, presented this item to the Board. He stated this request is driven by fire drills conducted during survey in the above facility types. Mr. Tippens suggested the development of an IG to address the questions with this rule language. Mr. Shulman questioned other state practices and codes. Mr. Parisher indicated that NFPA 101 states dusk to dawn per Webster definition. Mr. Griffin stated he liked the IG suggestion by Ms. Tippens. Mr. Crisp believes the intent of the rule language is to address the time with least staffing. **Mr. Breeden made a motion to move this item to the ACLF Standing Committee for development of an IG; seconded by Ms. Williford. The motion was approved.**

Autumn Ridge Manor, White Bluff #53 (RHA) –

This licensed RHA failed to submit an acceptable POC upon a third attempt to the WTRO. The facility representatives, Steve Farless, Administrator, and Joe Moore, President of Biblical Concepts Housing, presented to the Board a POC for approval. The representatives stated they became ‘bogged down’ on who/where to address the fire alarm citation. The owner of the facility met with OHCF staff which provided clarity. OHCF life safety survey staff informed the Board that they would approve the presented POC. **Dr. Brock made a motion to approve the POC; seconded by Mr. Crisp. The motion was approved.**

APPROVAL OF MINUTE(S):

The following minutes were presented –

February 9, 2019 – Board Meeting

April 16, 2019 – Performance Improvement Issue Standing Committee Meeting

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

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

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

The following CHOW application was presented to the Board for special consideration – Riverdale Assisted Living Facility, Memphis (ACLF). This application was presented to the Board for ratification due to recent disciplinary action. Also, presented at this time was the disciplinary action; a consent order for \$1,500.00 of CMPs. **Mr. Crisp made a motion to approve the consent order and the CHOW application; seconded by Dr. Brock. The motion was approved.**

The following initial applications were processed by the Board’s administrative staff without concern –
Home Health Agency: Advanced Nursing Solutions, Nashville
Assisted Care Living Facilities: Clarendale at Indian Lake, Hendersonville; Jubilee Hills, Goodlettsville; Jubilee House at Warfield, Clarksville; Princeton Transitional Care & Assisted Living, Johnson City; and Traditions of Smyrna, Smyrna
End Stage Renal Dialysis Clinics: FKC Sandy River, Paris; Foreman Drive Home Training, Cookeville; Fresenius Kidney Care Caryville, Caryville; Kidney Center of Ooltewah-Collegedale, LLC, Ooltewah; and Lewis Creek Dialysis, Dyersburg
Home Medical Equipment: Diversity Ortho Solutions, Murfreesboro; Medly Health Solutions, LLC, Johnson City; Serious Health, Chattanooga; Star Med Supplies, LLC, Nashville; and Strive Medical, LLC, Nashville
Professional Support Services Agency: Best Homecare, LLP, Kingston and Best Nurses, Inc., Memphis

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

The following CHOW applications were presented to the Board for approval without staff concern –
Assisted Care Living Facilities: Country Cottage-Lawrenceburg, Lawrenceburg
Ambulatory Surgical Treatment Centers: Renaissance Surgery Center, Bristol
Nursing Homes: BedrockHC at Spring Meadows, LLC, Clarksville; The Highlands of Dyersburg Health and Rehabilitation, Dyersburg; and The Highlands of Memphis Health and Rehabilitation, Memphis

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

BOARD POLICY CONSENTS:

The following Board Policy Consent requests were presented –

Board Policy #81 request –
Palmyra Nursing and Rehabilitation Center, Palmyra #192

Mr. Breeden made a motion to approve the request for a Board Policy #81 waiver to be issued to the above facility; seconded by Ms. Williford. The motion was approved.

Board Policy #32 request –
Adamsville Healthcare and Rehabilitation Center, Adamsville #167
Christian Care Center of Bristol, Bristol #409

Claiborne and Hughes Nursing and Rehabilitation Center, Franklin #294
Decatur County Health Care and Rehabilitation, Inc., Parson #315
Majestic Gardens at Memphis Rehabilitation and Skilled Nursing Center, Memphis #240
Mountain City Care & Rehabilitation Center, Mountain City #140
Stones River Manor, Inc., Murfreesboro #412

Mr. Boyd 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.

ORDER(S):

Consent Orders -

The following consent orders were presented -

The Bridge at Hickory Woods – ACLF – Survey conducted resulting in a \$3,000 CMP. **Mr. Griffin made a motion to accept; seconded by Mr. Crisp. The motion was approved.**

Carriage Court of Memphis – ACLF – Survey conducted resulting in a \$6,000 CMP, 6 month probation, submit acceptable POC, prepared assessment of costs not to exceed \$10,000, if deficiencies cited rising to level of detriment will be SOA of license, and provide update to Board of current situation. Facility representatives present at this Board meeting. Chris Puri addressed the Board regarding the facility. He stated the consent order was sent to the facility on March 30, 2019. Mr. Puri further stated the deficiencies had gone on too long and that Carriage Court owns the deficiencies cited. The current executive director was promoted to this position in December 2018 and has been with the facility since April of the same year. She reported the hiring of five (5) new managers in the facility. Mr. Boyd asked who these managers report to. The executive director stated herself. **Mr. Crisp made a motion to accept; seconded by Mr. Boyd. The motion was approved.**

Cades Center of Humboldt – ACLF – Survey conducted resulting in a \$1,500 CMP. A representative for the facility was present, Linda Burton, owner. She stated to the Board that she has responded to the discrepancy in the facility's policy and procedure on dietary manager. Ms. Burton states this has been corrected. Another issue was the administrator of the facility so a new administrator has been hired. A follow-up survey has been conducted with all deficiencies cleared. **Mr. Crisp made a motion to accept; seconded by Mr. Breeden. The motion was approved.**

Chandler House – ACLF – Survey conducted resulting in a \$500 CMP. A follow-up survey has been conducted and the facility is in compliance. **Mr. Griffin made a motion to accept; seconded by Mr. Crisp. The motion was approved.**

Creekside at Three Rivers – ACLF – Survey conducted resulting in a \$500 CMP. **Mr. Crisp made a motion to accept; seconded by Mr. Griffin. The motion was approved.**

Crown Cypress – ACLF – Survey conducted resulting in a \$500 CMP. **Mr. Griffin made a motion to accept; seconded by Mr. Breeden. The motion was approved.**

Dominion Senior Living of Hixson – ACLF – Survey conducted resulting in a \$500 CMP. **Mr. Crisp made a motion to accept; seconded by Mr. Breeden. The motion was approved.**

Dogwood Bend – ACLF – Survey conducted resulting in a \$500 CMP. **Mr. Boyd made a motion to accept; seconded by Mr. Breeden. The motion was approved.**

Gardens of Germantown – ACLF – Survey conducted resulting in a \$1,500 CMP. **Mr. Breeden made a motion to accept; seconded by Mr. Breeden. The motion was approved.**

The Glen Mary at Evergreen – ACLF – Survey conducted resulting in a \$1,500 CMP. Per OGC the deficiencies have been corrected. **Mr. Boyd made a motion to accept; seconded by Mr. Breeden. The motion was approved.**

Olive Branch – ACLF – Survey conducted resulting in a \$2,500 CMP. The Board communicated to staff their desire for the provider to appear at the next Board meeting because of the pattern of the Life Safety deficiencies which were recited at the revisit. **Mr. Breeden made a motion to accept the consent order and for the facility to appear before the Board at its next meeting; seconded by Mr. Crisp. The motion was approved.**

Optimum Assisted Living – ACLF – Survey conducted resulting in a \$1,500 CMP. The Board communicated to staff their desire for the provider to appear at the next Board meeting because of the pattern of the Life Safety deficiency citations. **Mr. Breeden made a motion to accept the consent order and for the facility to appear before the Board at its next meeting; seconded by Mr. Griffin. The motion was approved.**

Signature Lifestyles of Rogersville – ACLF – Survey conducted resulting in a \$1,500 CMP. **Mr. Griffin made a motion to accept; seconded by Mr. Breeden. The motion was approved.**

Broadmore Assisted Living – ACLF – Survey conducted resulting in a \$500 CMP. While hearing the presentation of this consent order, Mr. Crisp stated he recognizes a need for education of providers. Mr. Reed stated OHCF has been partnering with TNCaI to provide training. Mr. Crisp stated he would like a blast email to ACLF providers of dates and times of future trainings. He also indicated that it would help to notify facilities of the statewide training related to Life Safety trending issues/deficiencies so that the facilities would be more educated to prevent those issues. Mr. Crisp asked to include ACLFs in the law such as Adult Care Homes and Traumatic Brain Injury facilities allowing CMP monies to go to funding for state training. Caroline Tippens mentioned that it would require a statutory change to add ACLFs to the law. **Mr. Griffin made a motion to accept; seconded by Mr. Breeden. The motion was approved.**

Victorian Square – ACLF – Survey conducted resulting in a \$2,000 CMP. **Mr. Breeden made a motion to accept; seconded by Dr. Brock. The motion was approved.**

REGULATIONS:

The following rule language was presented for approval by the Board for rulemaking hearing –

- Change of ACLF/RHA administrators' renewal date from June 30th to birthdate of administrator. This language had been approved by the ACLF Standing Committee. **Mr. Breeden made a motion to move language forward to rulemaking hearing; seconded by Ms. Williford. The motion was accepted.**

The following rule language was presented for approval by the Board as proposed new rule language – Proposed revision to the Nursing Home rules 1200-08-06-.06(h) and Assisted Care Living Facility rules 1200-08-25-.08(i) that governs influenza and pneumococcal disease to include shingles rule language. Representative to present this language was Jim Schmidt, President, Schmidt Government Solutions. Mr. Schimdt representing GSK stated the proposed language had been discussed with THCA and ACLF organizations/associations. The presented language would not be a requirement to give the vaccination by the facility, but to provide information on the shingles vaccination. Mr. Crisp stated he felt this would be another hurdle for the admissions process. He wanted to know how impactful it would be; how much more will be included with different disease processes; and is there an ease by which to provide the informatics form. Mr. Shulman understands the concern and feels review by a standing committee of the Board is in order. Mr. Breeden stated he is hesitant to have another rule for nursing home providers until a necessity is determined. He feels the standing committee to review is the best option. **Mr. Breeden made a motion to move this item to the ACLF Standing Committee for further review; seconded by Mr. Crisp. The motion was approved.**

REPORTS:

EMS -

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

- February 5, 2019 Trauma Care Advisory Council (TCAC) meeting minutes were presented.
- University of Tennessee Medical Center had the American College of Surgeons verification as a Level I trauma center extended until 2021.
- Regional One Medical Center’s trauma site visit for 2018 is past due because of the lack of a lead reviewer. Mr. Seesholtz requested an extension of the facility’s trauma designation. Hendersonville Medical Center’s trauma site visit of May 2019 is past due because of the lack of a lead reviewer. Mr. Seesholtz requested an extension of the facility’s trauma designation. Each of these facilities’ reviews will take place in August of 2019.

Mr. Breeden made a motion to accept above report and to extend the trauma center designation of Regional One Medical Center and Hendersonville Medical Center; seconded by Ms. Williford. The motion was approved.

A motion was made to adjourn the meeting.