

STATE	Total amount of State CMP funds obligated for each project (all years)	Anticipated project duration	Title of each approved project funded in whole or in part with State CMP funds	Brief description of the goals and objectives of the project	List entity (ies) that received funding and will carry out the project	List entity (ies) that will benefit from the project	Expected deliverables or metrics for the project	Project category	Results of the project
Connecticut	\$3,500.00	1 day training in 2017	Getting to the Root Cause of Resident Falls	Identify the underlying root cause for resident falls in skilled nursing facilities; provide insights to provide a better night of uninterrupted sleep for residents to hopefully lead to a lesser likelihood of falls; and, assist facilities in selecting appropriate interventions for residents to reduce falls. Working with several partners to ensure broad messaging to facilities to reduce falls and improve resident quality of life and care.	Barbara S. Cass, R.N., Section Chief Facility Licensing & Investigations - DPH; Conn. Association of Health Care Facilities, Leading Age- CT, CT Coalition for Culture Change & American College of Health Care Administrators	All CT Skilled Nursing Facilities	Increase resident knowledge of reasons why falls occur so they have a clearer understanding. Increase understanding among facilities and staff of reasons for falls and ways to be more proactive in preventing them.	Training	Results pending

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Maine	\$645,617.68	January 2016 - December 2017 (24 months)	Conference on End of Life Care and Ethical Decision Making	Funding was requested to cover the costs associated with the rental of conference space and the costs of the expert who will be presenting at the conference. All Maine nursing homes will participate. The expectation is that this presentation will enhance essential skills to provide nursing home residents with safe, quality care while balancing residents' rights and being sensitive to family concerns. The conference will focus on ethical decision making regarding end of life care & honoring individual's wishes while improving communication.	Dr. Michael Gillett, speaker. Maine Division of Licensure & Regulation for conference venue rental	All Maine nursing homes	Program presentation, participation of nursing home staff, survey results of participants	Training	Results pending

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Massachusetts	\$1,550,000	January 2016 – July 2018 (31 months)	Supportive Planning and Operations Team (SPOT) project	SPOT makes available technical assistance and training to support nursing home teams to develop and implement QAPI plans, conduct root cause analysis resulting in meaningful corrective actions, improve communication, and engage residents and families in QAPI. During the 2017 project year, the SPOT Initiative Team will provide technical assistance/training to all 60 participating nursing homes through virtual learning sessions, on-site visits, telephone outreach, and email support. The focus of the technical assistance/training is to strengthen QAPI in the nursing homes.	60 under- performing nursing homes, Supportive Planning and Operations Team (SPOT)	60 under- performing nursing homes	DPH will work with 60 under-performing nursing homes to develop and implement effective QAPI plans, conduct effective root cause analysis resulting in meaningful corrective actions, improve communication, and engage residents and families in QAPI through the use of: virtual learning sessions, on- site technical assistance visits, telephone outreach, and email support.	Direct Improvements to Quality of Care	In addition to continuing to engage the 40 nursing homes that participated in the first year of SPOT, DPH identified 20 additional nursing homes to engage in the Initiative. Between April 18 and May 16, 2017, the SPOT Team conducted unannounced, on- site visits to the 20 additional nursing homes during which members of the team assessed the status of the nursing homes' QAPI program in collaboration with nursing home teams. DHS will asses the status of QAPI in the 40 previously- participating nursing homes, the SPOT Team collected QAPI self-assessments completed by the nursing home teams. The SPOT Team began providing on-site technical assistance visits in July 2017 and visited 59 of the 60 nursing homes by the end of the calendar year. As compared to the beginning of this project year, participating nursing homes reported an increase in having a QAPI plan, an increase in all levels of staff receiving training in QAPI and an increase in communication of QAPI, specifically tools like performance improvement plans being communicated to staff, residents and their families.

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Massachusetts	\$500,000.00	March 2017- December 2017 (10 months)	Strengthening Resident and Family Councils and Engagement Initiative	The primary objective of this project is to work with skilled nursing home staff, residents, and family members to develop, enhance, and sustain resident and family councils in their facilities. The project recognizes the essential role that resident and family councils play in fostering meaningful engagement between nursing home residents, their families, and facility leadership in efforts to improve person-centered care and the quality of resident life.	Massachu- setts Coalition for the Prevention of Medical Errors	51 MA nursing homes	The project led participating nursing homes through several small tests of change activities aimed at improving resident engagement. In addition to monthly check-in calls, the project held two learning sessions and four webinars. Project activities were documented and were developed into an activity guide, which can be used as a template to begin, strengthen, and sustain resident and family engagement in nursing homes. The activity guide will be available on the Massachusetts Program Management Bureau of Health Care Safety & Quality Massachusetts, Department of Public Health website: http://www.mass.gov/eohhs/ gov/departments/dph/progr ams/hcq/health-care- facilities/long-term-care- facilities/nursing- homes/civil- monetary- penalty-use-plan.html	Resident or Family Council	Of the participating nursing homes, there were small changes to the meeting structure, which led to substantive improvements in the meeting quality: 61% changed how agendas are used, 50% changed how seating is arranged, 44% changed how minutes are shared, and 40% incorporated accommodations and adaptions. As a result of these structural changes and guided activities, 91% of participating nursing home reported an increase in informal or scheduled 1:1 resident conversations and 49% reported new conversations between leadership/staff and residents between meetings. Ten nursing homes launched a family council or meeting over the course of the project, and seven were in the process of starting one. While nine participating nursing homes already had family councils or meetings in place, they worked to improve their structure and objectives through this project.

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Vermont	\$190,479.00	July 1, 2016- June 30, 2017 (1 year)	Reducing the Inappropriate Use of Antipsychotic Medications in Vermont Nursing Homes Through Workforce Training & Support; Oral Health Education Program	Funding was requested to continue efforts to reduce the inappropriate use of antipsychotic medications in Vermont nursing homes, by promoting workforce training and support through: Oasis (a person-centered curriculum); <i>Music &amp; Memory</i> networking; Alzheimer's Disease & Dementia Care Training; and mentor training for direct care workers. Funding was also requested to provide training for direct care workers to improve nursing home residents' oral health care.	Vermont Health Care Association (VHCA)	All Vermont nursing homes	Through this project, VHCA will host an Oasis train-the- trainer session and at least eight Oasis and Music & Memory Networking Meetings; offer the Alzheimer's Disease & Dementia Care training in all of Vermont's 37 Medicare/Medicaid nursing homes; and develop a comprehensive Peer Mentor Training packet to be piloted in five nursing homes. VHCA will provide oral health training to all of Vermont's 37 Medicare/ Medicaid nursing homes, and will provide each nursing home with a copy of the DVD, "Mouth Care Without a Battle."	Training	Hosted an Oasis train-the- trainer education session where 45 individuals participated; Hosted 12 Oasis and <i>Music &amp; Memory</i> networking meetings; Offered 39 Alzheimer's Disease & Dementia Care Trainings with a total of 532 individuals attending the training; Preparation of a Comprehensive Peer Mentor training packet which was piloted in five nursing homes; Oral Health trainings were offered in 35 of Vermont's Medicare/Medicaid nursing homes with a total of 248 individuals participating in the trainings; Each of Vermont's 37 Medicare/Medicaid nursing homes was provided with the training DVD, "Mouth Care Without a Battle."

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New Jersey	\$32,000	May 1, 2017 – April 30, 2019 (24 months)	Nonviolent Crisis Prevention and Intervention Training	The goal of this project is to train nursing home staff on nonviolent crisis prevention techniques and de-escalation interventions. Objectives include: Train-the-Trainer education of 22 staff on de- escalation techniques (two days) and training and certification of two staff (four days). 400 total staff to be educated over two years.	State of NJ Department of Military & Veteran Affairs at NJ Veteran's Memorial Home at Paramus	N/A	Quarterly reports	Training	Thus far, 22 staff members have been trained on de- escalation techniques (two- day training), and two staff members have participated in the four-day training and certification.

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New Jersey	\$24,750	September 1, 2016 – June 30, 2017 (22 months)	New Jersey Hospital Association/ Northern & Southern Chapters of Association for Professionals in Infection Control and Epidemiology/ New Jersey Department of Health Partnership on Principles of Infection Prevention and Control	Pay tuition for up to 50 nursing home staff to attend the Northeastern Basic Course for Principles of Infection Prevention & Control between October 2016 and April 2017.	NJ Hospital Association	Participating nursing homes do not pay for tuition	Attendance records, certificates of completion and course evaluation results	Training	Results pending
New York	\$1 million	August 1, 2015 – July 31, 2017 (24 months)	Customer satisfaction survey and quality improvement	Administer professionally designed customer service satisfaction surveys to residents and family members in participant NH's to capture their satisfaction and particular experience with the care, services, and living environment. to provide actionable feedback to facility leadership.	Foundation for Quality Care; National Research Corporation	Nursing Homes in New York	Satisfaction surveys; individualized actionable feedback provided to each participating nursing home	Other	Results pending

State Civil Mone	y Penalty	/ Reinvestment Pro	jects Funded	in Calendar Year 2017
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Delaware	\$30,300.00	December 12, 2016 – May 1, 2017 (four and a half months)	Music and Memory	The goal is to reduce inappropriate use of antipsychotics, anti-anxiety, and anti-depressant medications. Also, to decrease depression and pain, and better support person-centered care.	Delaware Division of Long Term Care Residents Protection (DLTCRP)	Residents in certified nursing homes in Delaware, University of Delaware, AARP, and Alzheimer's Association	Reduction in the use of anti-psychotic, anti-anxiety and anti-depressant medications. Reduction in agitation and sun-downing. Enhance engagement and socialization, and foster a calmer social environment. Provide a way to give pleasure to persons with dementia. Increase cooperation and attention, reducing resistance to care specific to all activities of daily living.	Direct Improvements to Quality of Life	DLTCRP used annual and or quarterly Minimum Data Set (MDS) data, tracking the use of anti-psychotic, anti-anxiety and anti-depressant medication usage, as well as resistance to care and mood. DLTCRP used MDS data on 100 residents (identified with a diagnosis of dementia) and used annual and quarterly assessment data on each of those residents to gauge changes in each of those identified sections of the MDS. There was a reduction in the use of anti-psychotic, anti- anxiety and anti-depressant medications, as well as a reduction in agitation and sun- downing.
Delaware	\$9,973.00	October 2-3, 2017 (two days)	Minimum Data Set (MDS) 3.0 Workshop	The objective of this project is to provide training on the most recent updates of the MDS to certified nursing homes and surveyors.	Delaware Division of Long Term Care Residents Protection (DLTCRP)	Certified nursing homes in Delaware, as well as state surveyors	Each certified nursing facility will have the most up-to-date knowledge on the new MDS.	Training	DLTCRP ensured all certified nursing facilities had the most up-to-date knowledge on the new MDS. 40 out of 45 certified nursing homes attended. 95 nursing home staff and 16 surveyors were trained.
Delaware	\$77,274.00	November 1, 2016 - October 31, 2017 (one year)	Virtual Enriched Therapy	Through this project, the It's Never 2 Late technology system will be implemented at the Delaware Veterans Home to make improvements to resident quality of life. By using this technology, art, color, and music therapy, as well as other person-centered activities, will be provided. The goals include: decreased use of antipsychotic drugs; decreased depression; decreased behaviors that cause falls.	Delaware Division of Long Term Care Residents Protection (DLTCRP)	Residents of Delaware Veterans Home	The facility will monitor impact in order to show reductions in antipsychotic drug use, depression, behaviors, and falls.	Direct Improvements to Quality of Life	Direct improvements to resident quality of life at the Delaware Veterans Home was noted. The system showed reductions in anti- psychotic drug use, depression, behaviors, and falls.

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Delaware	\$33,121.00	June 6 - 8, 2017 (three days)	Dementia Training	This training will provide fundamental education on dementia and dementia care to enhance the quality of life of dementia residents. By educating care providers, the training will foster sensitivity and respect for the dementia resident, teach communication techniques, and provide sensitive approaches for assisting residents with activities of daily living.	Delaware Division of Long Term Care Residents Protection (DLTCRP)	Staff who work in Medicare/Medic aid certified nursing homes, including nurses, certified nursing assistants, and activity assistants	The training will provide: an understanding of dementia; identification of common causes of aggressive, repetitive and sun downing behaviors in adults; description of behavioral/care intervention that may be used to prevent or reduce difficult care situations; description of challenges related to caregiver stress and utilization of stress reduction techniques; learning alternative activity interventions that are success-oriented.	Training	DLTCRP ensured all Delaware staff who work in Medicare/Medicaid certified nursing homes had the most up- to-date knowledge on the clinical aspects of dementia care. A post-test was administered (by an accredited Certified Dementia Care Practitioner) to participants to gauge their knowledge. 300 nursing home staff attended this dementia training. Did not include ALL nursing home staff in Delaware. All certified nursing homes were represented.
Maryland	\$8,750.00	September 15, 2016 - January 31, 2019 (twenty eight months)	You Are the Eyes and Ears Conference	This project aims to improve care for residents of Maryland long-term care facilities by strengthening the capacity of geriatric nursing assistants (GNAs) to provide care and support. It also provides recognition and support for GNAs by awarding scholarships and professional achievement awards.	The Beacon Institute, Inc.	GNAs who work in Maryland skilled nursing facilities	The training will improve skills and enhance GNAs' professional knowledge.	Direct Improvements to Quality of Life	The training included 140 attendees and four speakers. Based on post conference surveys, 95% of attendees rated each session in the top 20% of the evaluation scale. The majority of attendees felt that the facility was conducive to learning, the content was relevant, the teaching methods were effective, and the handouts were effective.
Maryland	\$100,889.00	August 31, 2016 – January 31, 2019 (one year)	Staff Training on Dementia Care	The purpose of this project is to provide certified nursing home staff with tools and strategies for working with residents with dementia (through behavior and person-centered concepts). An expected outcome of the project is that residents will receive optimum dementia care from staff who are certified in Alzheimer's care.	The Beacon Institute, Inc. and the Maryland Office of Health Care Quality	12 nursing homes in Baltimore City and Charles County	The training will result in nursing home staff who are better trained in Alzheimer's care, resulting in both basic and advanced certification from the Alzheimer Association. The results from the training will be presented and shared publicly to encourage enrollment in the training program.	Training	No Cost Extension (NCE) was granted on December 18, 2017. The Grant is still on going after the committee granted a No Cost Extension (NCE) on December 18, 2018.

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Maryland	\$82,800	April 1, 2017 – December 31, 2017 (two months)	Improving Nursing Home Transitions	The project will train nursing home staff, residents, and caregivers to use a discharge toolkit. Nursing home staff will also be provided with training in current discharge practices.	The Beacon Institute, Inc.	Fifteen Maryland nursing homes	The training/toolkit includes the following staff resources: checklist of factors to assess residents' competency for self-care; home environment review checklist; recommendations for addressing needs; template of discharge plan of care; contact list for various issues; and recommended resources. The training/toolkit also includes the following resident resources: discharge plan of care (with directions of how to follow post-discharge); tips for staying healthy; medication lists and tips; resource list that is specific to residents' needs in the community. The following caregiver resources are also included: caregiver self-assessment of competency and needs; review protocol (before residents return home); identifying home risks; action list to deal with specific problems; communication tips.	Training	Results pending. The grant is still ongoing after the committee granted a NCE December 18, 2017, through July 30, 2018.

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Maryland	\$7,415	September 21, 2016 - February 15, 2017 (six months)	Western Maryland Geriatric Nursing Assistants (GNA) Conference 2016	This conference enables collaboration with local agencies, employers, and organizations to support high- quality certified nursing aide (CNA) and GNA care. It helps establish an annual and local professional development opportunity for regional CNAs and GNAs. As part of the conference, attendees and others also receive a pertinent resource guide.	Allegany College of Maryland (ACM)	50-100 CNAs and GNAs who work in Maryland skilled nursing facilities	The conference will provide attendees with a certificate of completion of job-related professional development, helping improve patient care through best practice training. A report will be developed on the conference's suitability as an ACM credit internship; internship outline and learning objectives will be developed.	Training	50 CNAs and GNAs enrolled, and conference attendees and others received a pertinent resource guide. Training was provided on various topics, including dealing with difficult behaviors in dementia patients and presence. Current resources from the Alzheimer's Association were also provided.
Maryland	\$109,850	June 23, 2016- July 18, 2017 (13 months)	Wound Care Training and Certification	This project will offer training to up to 50 individuals on: the physiology of the skin and underlying tissues, wound prevention, wound assessment, and wound healing.	Health Facilities Association of Maryland	50 health care staff members in Maryland skilled nursing facilities	The project aims to increase the number of skilled nursing facility staff who are trained in wound care, as well as to improve treatments for reducing risk and achieving quicker healing times for residents.	Training	51 people attended three trainings in October 2016, March of 2017 and June of 2017. The average pass rate between the three classes was 70%.

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Maryland	\$80,189	November 1, 2016 - January 31, 2017 (three months)	Advancing Quality Assurance and Performance Improvement (QAPI) in Maryland	This project aims to develop a corps of QAPI- certified professionals in Maryland. This program will provide training to 50 QAPI coordinators and will assist with coordinating, developing, and implementing QAPI plans in about 40 Maryland nursing homes.	The Beacon Institute, Inc.	50 QAP1 coordinators; 40 Maryland nursing homes	50 nursing home staff will complete the QAPI long- term care course (provided by the American Association of Nurse Assessment Coordination); 50 nursing home staff will pass the QAPI Certification exam and will become QAPI Certified Professionals (QCPs); 40 Maryland nursing homes will complete QAPI plans.	Training	Results pending No Cost Extension (NCE) was granted on April 10, 2017.
Pennsylvania	\$977,900.00	July 1, 2016- June 30, 2017 (one year)	Reduction in the Utilization of Restraints	Pennsylvania Restraint Reduction Initiation (PARRI- MAP-IT) program for healthy skin; to improve lives of residents through education, support, mentorship of long term care providers, residents and families, government agency representatives, and advocacy organizations; eliminating the use of physical restraints.	Kendal Outreach	No Data Available	Quarterly reports submitted to OLTL contained data and responses regarding consultations performed during each quarter. Yearly surveys sent to respondents asking if their interaction with PARRI had a positive impact on their individual care processes.	Direct Improvements to Quality of Life	PARRI staff engaged 132 facilities in 40 counties in the last quarter.

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Pennsylvania	\$50,000.00	July 1, 2016- June 30, 2017 (one year)	Improvement to Call Bell Access	The RistCall Patient Care Pilot program will install the RistCall wireless, wearable, call bell system.	Kane Regional	Kane Regional residents	CMS QAPI (quality assessment and process improvement) frame work with five elements will be considered to evaluate: patients' ability to call for help when away from bed (patient mobility & independent active life style), system ability to provide across the shift/ department communication (for leadership), system ability to capture anonymous feedback from patients and staff (feedback and data systems monitoring), system ability to provide detailed reports on response time, patient satisfaction and staff satisfaction (on performance improvement projects).	Direct Improvements to Quality of Care	RistCall equipment was installed in a 40-bed unit. The impact has been improvement in call bell response time, as well as improved resident satisfaction with the response from caregivers.

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Virginia	\$215,395	September 1, 2015 – August 31, 2017 (two years)	Micro Learning as a Tool for Delivering Person- Centered Care for Residents with Dementia in Virginia's Nursing Facilities	The project is expected to result in better quality care for nursing facility residents with dementia (through the provision of training to the staff who care for them). The learning gained through this training is sustainable, as nursing homes will continue to utilize approaches and practices in their homes. Staff are likely to be more responsive to ongoing training via this platform if: the initial delivery proves beneficial, and they recognize that the administrators are willing to try new approaches to make their jobs, as well as the care they provide, more effective.	Riverside Center for Excellence in Aging and Lifelong Health	Clinical and non-clinical staff in nine nursing homes	No Data Available	Training	The survey was completed by 244 participants, mostly women (93%) and nearly evenly split between Caucasian (49%) and African Americans (49%). The pass rate for the entire project period averaged 96%, with pass rates by nursing homes varying between 94% and 100%. Certificates of completion were issued quarterly to participants who had completed lessons in that quarter and achieved a 100% pass rate on all quizzes. An average of 283 certificates were issued each quarter, with a total of 1,131 certificates issued by the end of the project.

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Alabama	\$106,232.00	June 18, 2015 - June 18, 2018 (three years)	Long-Term Care Quality Improvement Initiative/The Society for Post-Acute and Long- Term Care Medicine (AMDA) Clinical Practice Guidelines (CPGs) and Region IV Website	Develop a regional website and provide AMDA's Clinical Practice Guidelines and other AMDA resources to certified nursing homes in five southeastern U.S. states (Alabama, Georgia, Kentucky, Mississippi, and South Carolina).	University of Louisville Research Foundation, Inc.	Long-term care residences and staff in the targeted states	AMDA's Clinical Practice Guidelines (CPGs) will be made available to clinicians and all members of the interdisciplinary team on 21 different long-term care topics. CPGs may be used for in-service education and directed plans of correction.	Training	Results pending
Alabama	\$1,500,000.00	August 2016- August 2019 (three years)	Music and Memory and Art Therapy Program	This project aims to develop and implement a Music and Memory program, as well as an art therapy program for 32 certified nursing homes in Alabama. These programs will: reduce symptoms of anxiety and depression; reduce agitation, improve communication; foster self- expression; enhance coping skills; and stimulate positive interactions with staff and family. A statewide conference on best practices in dementia care will be provided for 227 certified nursing homes.	Alzheimer's Education, Resources & Services, Inc.	Residents in 32 certified nursing homes in Alabama; 227 certified nursing homes that attend the statewide conference	The Music and Memory and Art Therapy Program will work with 15-20 dementia residents weekly on a music and art themed activity. Over the three year grant period, Dr. Daniel Potts and Angela Duncan will evaluate between 480 and 640 residents with dementia and will assist the residents' interdisciplinary care team with creating person- centered care plans to include art and music related interventions. Through the program, a statewide conference on best practices in dementia care will be provided for 227 certified nursing homes.	Direct Improvements to Quality of Care	Project not yet complete. Thus far, there have been remarkable changes in residents. Residents who were unable to participate in an art activity without hand over hand assistance can now complete projects with little to no assistance. Residents who were initially withdrawn and not willing to participate now eagerly participate and engage with staff and other residents.

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Alabama	\$204,552.00	October 6, 2014 –August 31, 2017 (10.5 months)	The Young Adult in Long Term Care (YALTC)	Develop a training curriculum and program (for clinical practitioners and staff) about the young adult in the long-term care setting.	American Medical Directors Association (AMDA) - The Society for Post- Acute and Long Term Care Medicine	Long-term residents, and clinical practitioners	YALTC training was guided by four key research questions, and data was collected at three periods during the course training. Each participant completed a pre-test (prior to the training) and post-test (immediately following training). A follow-up was conducted 60 days after the training.	Training	Overall, the YALTC program has a significant initial impact on knowledge about adult residents. There statistically significant difference between the percentage of correct responses from post-test follow-up, suggesting that YALTC training had a effect on participant knowledge.
Alabama	\$1,744,332.00	October 2017 – September 30, 2020 (three years)	Brushing Away Infections: Improving Mouth Care Program (IMCAP)	Program in seven Alabama nursing homes to educate Certified Nursing Assistants and licensed nurses on how to improve mouth care by utilizing evidence-based mouth care practices.	The University of Alabama Birmingham, School of Nursing	Residents and staff in seven certified nursing homes in Alabama	Provide didactic and one on one, real time clinical coaching to 90 percent of aides and nurses; implement a comprehensive IMCAP in each facility; teach staff how to reduce care- resistant behaviors during oral care; integrate mouth care best practices at each participating facility; improve the overall oral health of residents.	Direct Improvements to Quality of Care	Results pending
Alabama	\$88,089.90	August 26, 2016-August 26, 2018 (two years)	Reducing Avoidable Hospital- izations Across the Continuum of Care	This project will assist Region IV states in reducing avoidable hospitalizations and educating residents, family members, staff, and community partners about best practices to reduce avoidable hospitalizations.	Florida Atlantic University	Certified nursing homes in Alabama and community partners	Through this project, the following deliverables are expected: modification of Resident and Family Decision Guide; piloting the guide in seven of eight Region IV states; developing a video for nursing homes that explains the role of the Decision Guide in reducing avoidable hospitalizations; sending a complete package of Decision Guides and training materials, and providing the Decision Guide in different languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss best practices on how to reduce avoidable hospitalizations.	Direct Improvements to Quality of Care	Project not yet complete. Advisory committee is meeting monthly, and the Decision Guide is being updated.

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Florida	\$119,255.10	June 1, 2017 – May 31, 2019 (two years)	Reducing Avoidable Hospital- izations Across the Continuum of Care	This project will assist Region IV states in reducing avoidable hospitalizations and educating residents, family members, staff, and community partners about best practices to reduce avoidable hospitalizations.	Florida Atlantic University	Certified nursing homes in Florida and community partners	Through this project, the following deliverables are expected: modification of Resident and Family Decision Guide; piloting the guide in seven of eight Region IV states; developing a video for nursing homes that explains the role of the Decision Guide in reducing avoidable hospitalizations; sending a complete package of Decision Guides and training materials to every skilled nursing and nursing facility, and providing the Decision Guide in different languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss best practices on how to reduce avoidable hospitalizations.	Direct Improvements to Quality of Care	Results pending

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Georgia	\$115,094.90	November 22, 2017 – September 30, 2019 (22.5 months)	Reducing Avoidable Hospital- izations Across the Continuum of Care	This project will assist Region IV states in reducing avoidable hospitalizations and educating residents, family members, staff, and community partners about best practices to reduce avoidable hospitalizations.	Florida Atlantic University	Certified nursing homes in Georgia and community partners	Through this project, the following deliverables are expected: modification of Resident and Family Decision Guide; piloting the guide in seven of eight Region IV states; developing a video for nursing homes that explains the role of the Decision Guide in reducing avoidable hospitalizations; sending a complete package of Decision Guides and training materials to every skilled nursing and nursing facility, and providing the Decision Guide in different languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss best practices on how to reduce avoidable hospitalizations.	Direct Improvements to Quality of Care	Results pending

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Georgia	\$788,850.00	June 6, 2017 – March 31, 2019 (22 months)	Georgia Statewide Music and Memory Program	This program will develop and implement a Music and Memory program for 150 certified nursing homes in Georgia. The program will enhance the quality of life for residents with dementia through person- centered care plans, which include individualized music playlists and activities.	Georgia Health Care Association (GHCA)	150 certified nursing homes in Georgia	Expected deliverables include: enrollment of nursing homes with high antipsychotic utilization rates and nursing homes with a dedicated, dementia unit, provision of education and training on music therapy, including demonstrated usage of tactile music expression; development of personalized playlists for each participating resident; and incorporation of music and memory program into individualized resident care plans.	Direct Improvements to Quality of Care	141 nursing homes have enrolled in the program (through Q3 2018). 50 nursing homes have been Music and Memory certified as of the end of 2017. The project was presented at the GHCA Winter Convention, and webinars were held on January 16-17, 2017, February 13-14, 2017, and March 13-14, 2017.
Georgia	\$47,339.50	June 10, 2016 –April 14, 2017 (10 months)	Virtual Dementia Tour	To provide virtual dementia tours, education, and training for direct care staff, physicians, other clinicians, administrative and corporate personnel in 169 Georgia certified nursing homes	Second Wind Dreams	169 certified nursing homes in Georgia (residents, family members, direct care staff, the board of directors, and community partners)	Improvements in the delivery of care provided to residents with dementia.	Training	Results pending
Georgia	\$88,000.00	August 30, 2016 – June 14, 2017 (ten and a half months)	Eden Alternative and Culture Change at A.G. Rhodes Nursing Home	This program will implement culture change and person- directed care utilizing the Eden Alternative principles.	A.G. Rhodes Health and Rehabilita- tion	N/A	Certify staff in Eden Alternative principles	Training	Results pending

					Region 4				
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Georgia	\$176,032.00	June 16, 2016 –April 14, 2017 (10 months)	Changing the Culture of Death and Dying in the Nursing Home Setting	This project will conduct education and training on end- of-life care for nine, certified nursing homes in Georgia. Through the project, direct care staff will be interviewed on how to improve end of life care, and a list of best practices for long- term care facilities to assist residents with grief and advance care planning will be developed. Throughout this project, discussions about advance care planning and POLST (Physician's Orders for Life- Sustaining Treatment) will occur.	University of Georgia Research Foundation	Nine certified nursing homes in Georgia	This project will determine best practices in bereavement care for residents, family members and long-term care facility staff. The University of Georgia will discuss death and dying practices utilized at Carlyle Place with residents, family members, direct care staff, members of the interdisciplinary team, and corporate officials. A variety of interview techniques will be used to solicit information on how the nursing home manages a resident's death, and what practices are instituted in a nursing home to help residents, family members and staff grieve the loss of life.	Direct Improvements to Quality of Care	The project resulted in the development of two booklets for statewide dissemination to Georgia nursing homes on "Best Practices in Bereavement Care" (to be utilized by residents and staff).
Kentucky	\$299,727.20	March 15, 2017 – March 15, 2020 (three years)	Inspired Living Project	The Inspired Living Project will use It's Never Too Late adaptive computer technology as a non- pharmacological approach to: reduce falls/falls-related injuries, improve balance and gait, increase flexibility, and increase upper body, lower body and core strength, for approximately 1,350 participants. The target for this project are residents with a BIMS (Brief Interview for Mental Status) score of seven or less.	Trilogy Health Services	1,350 residents in nine Kentucky nursing homes	It's Never Too Late technology will keep residents engaged, resulting in reduced falls and increased socialization.	Direct Improvements to Quality of Life	Results pending

	•	•			Region 4				
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Kentucky	\$91,956.40	April 1, 2017 – June 30, 2018 (15 months)	Reducing Avoidable Hospitaliza- tions Across the Continuum of Care	This project will assist Region IV states in reducing avoidable hospitalizations and educating residents, family members, staff, and community partners about best practices to reduce avoidable hospitalizations.	Florida Atlantic University	Certified nursing homes in Kentucky and community partners	Through this project, the following deliverables are expected: modification of Resident and Family Decision Guide; piloting the guide in seven of eight Region IV states; developing a video for nursing homes that explains the role of the Decision Guide in reducing avoidable hospitalizations; sending a complete package of Decision Guides and training materials to every skilled nursing and nursing facility, and providing the Decision Guide in different languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss best practices on how to reduce avoidable hospitalizations.	Direct Improvements to Quality of Care	Results pending
Kentucky	\$744,202.00	April 15, 2017- April 15, 2020 (36 months)	Bingocize	This project will train 300 direct care staff to implement Bingocize in 20 Kentucky certified nursing homes.	Western Kentucky University Research Foundation, Inc.	This project is designed to benefit at least 1,000 residents in 20 certified nursing homes in Kentucky. This project also involves facilitating partnerships between seven universities and direct care staff in 20 certified nursing homes in Kentucky.	The Bingocize program involves activities and exercise to improve functional performance, leading to improvements in: activities of daily living, range of motion, and depression. The program is associated with reduced fall risk and increased resident engagement. Resident participation will be monitored and the impact of the program will be assessed.	Training	Results pending

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Kentucky	\$21,360.00	October 1, 2016 – October 31, 2017 (13 months)	It's a Wonderful Life Through Technology	To purchase "It's Never Too Late (iN2L)," an adaptive computer technology for: enhancing individual and group activities; improving behavior management; decreasing utilization of antipsychotic medications; and providing opportunities for lifelong learning and resident access to family and friends via the Internet.	Sayre Christian Village Healthcare Center	Sayre Christian Village Healthcare Center residents, family members, and staff	Project deliverables include: informing residents, family members and staff of iN2L; developing customized iN2L My Story digital biographies for 41 residents with dementia; utilizing iN2L technology for care plan meetings. As part of the project, all parties will also receive information on: how to protect themselves from identity theft and the loss of private protected health information, as well as on social media and social networking.	Direct Improvements to Quality of Life	Results pending
Kentucky	\$10,000.00	November 15, 2016 – November 15, 2018 (two years)	Virtual Dementia Tour (VDT)	To improve dementia care through the provision of virtual dementia tours, education, and training for direct care staff, residents and family members.	Kenton Housing, Inc.: Rosedale Green	Rosedale Green residents, family members, and staff	Implement VDT tours for residents, family members, staff and the community. Utilize the Dementia Aware Competency Evaluation (DACE) to monitor the facility's progress.	Training	Results pending
Kentucky	\$9,515.00	November 15, 2016 – November 15, 2018 (two years)	Virtual Dementia Tour (VDT)	To provide virtual dementia tours, education, and training for direct care staff, residents and family members	Golden Living Center- Green Hill	Golden Living Center-Green Hill residents, family members, and staff	Implement VDT tours for residents, family members, staff and the community. Utilize the DACE assessment to monitor the facility's progress.	Training	Results pending

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Kentucky	\$23,497.23	October 1, 2017 – October 31, 2018 (13 months)	Minimum Data Set (MDS) 3.0 Coding and Interpretation Basic Training; Advanced MDS Training	This will provide joint education and training to providers, MDS Coordinators and State Agency surveyors on the MDS 3.0. Note: MDS 3.0 Coding and Interpretation Basic Training is two days (November 6-7); Advanced MDS Training is one day (November 9).	Office of the Inspector General	MDS Coordinators, State Agency staff and other nursing home personnel	The training will give an overview of the MDS and will cover the following topics: how to assure accuracy, who must have an assessment completed, the resources needed to complete an assessment, and what forms are used and when. Information will also be provided on: the entry and discharge tracking assessment, a section by section review of item coding, a discussion of significant change assessments, the MDS Care Area Assessments, and MDS error correction.	Training	Through this project, 174 MDS coordinators were trained in the Basic MDS class, and 207 MDS coordinators were trained in the Advanced MDS class. The QIO (Quality Improvement Organization) was added to the agenda and discussed the quality measures and composite scores. The MDS deficiencies have decreased as a result of training.
Kentucky	\$49,051.00	March 15, 2017 – March 15, 2020 (three years)	Living Intently and Fully Engaged (LIFE) Project	Utilize It's Never Too Late (iN2L) technology to improve quality of life for 64 skilled nursing residents.	Wesley Manor Retirement Community, Inc.	Residents of the Wesley Manor nursing home	Through this project, personal activity content pages and digital biographies /life stories will be developed for 64 residents. The iN2L technology will be utilized to engage family members in resident care plan conferences via Skype.	Direct Improvements to Quality of Life	Results pending
Kentucky	\$46.109.14	March 1, 2017 –February 29, 2020 (36 months)	Giving Our Loved Ones Direction (GOLD) Project	Provide It's Never Too Late (iN2L), an adaptive computer technology, to residents.	Morganfield Nursing and Rehabilita- tion	Residents of the Morganfield nursing home	This technology is expected to enhance individual and group activities, enrich social connections, and increase person-centered activities and interactions.	Direct Improvements to Quality of Life	Results pending

			•		Region 4		•		
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Kentucky	\$57,570.84	March 15, 2017 –March 15, 2019 (two years)	We're Building on Love Project	Provide It's Never Too Late (iN2L), an adaptive computer technology, to residents.	Carmel Manor	Residents of the Carmel Manor nursing home	This technology is expected to enhance individual and group activities, enrich social connections, and increase person-centered activities and interactions.	Direct Improvements to Quality of Life	Results pending
Kentucky	\$46,485.24	March 15, 2017-March15, 2020 (three years)	Fulfilling Residents' Interests and Encouraging New Discoveries (FRIEND) Project	Utilize It's Never Too Late (iN2L) technology to improve quality of life for 126 skilled nursing residents.	Mountain Manor of Paintsville	Residents of the Mountain Manor of Paintsville nursing home	Through this project, personal activity content pages and digital biographies /life stories will be developed for 126 residents. The iN2L technology will be utilized to engage family members in resident care plan conferences via Skype.	Direct Improvements to Quality of Life	Results pending
Kentucky	\$2,006,299.00	November 1, 2017 – October 31, 2020 (36 months)	Emergency Preparedness for Certified Nursing Homes in Kentucky	Provide basic and advanced training on emergency preparedness, improving the quality of care and quality of life of residents through improved safety before, during, and after emergencies and catastrophic disasters.	University of Louisville (UOL) Foundation	All residents, staff, family members and community partners throughout Kentucky	Over a three-year period, UOL will provide yearly training to 285 staff, surveyors, Long-Term Care Ombudsman and QIO (Quality Improvement Organization) staff on the CMS Final Rule for Emergency Preparedness.	Training	Training conducted in February 2018 was well received. Administrators and Directors of Nursing gave significant positive feedback on how to enhance their facilities' emergency responses.
Kentucky	\$9,425.51	May 1, 2017 – May 31, 2018 (one year)	SuzyQ Food Service Equipment	Food service equipment will be utilized to enhance the dining program and offer residents more food choices. In addition, the facility seeks to decrease the number of residents with unintentional, significant weight loss.	Cambridge Place	Residents of Cambridge Place	As part of this project, staff will receive training on the Dining Practice standards and will assist residents with food choices. Direct care staff will accommodate resident allergies, intolerances and preferences. Staff will be trained on "No Bare Hand Contact," and quarterly reports will discuss targeted goals for decreasing significant weight loss. Meal observation audits will be conducted.	Direct Improvements to Quality of Care	Results pending

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Kentucky	\$73,405.00	August 1, 2017 - August 31, 2018 (13 months)	One-Stop Dementia Shop	This program will provide training to long-term care providers (on complying with CMS regulation revisions) and to Office of Inspector General long-term care surveyors (on the new CMS long-term care survey process on dementia management)	Kentucky Office of Inspector General (OIG), Division of Health Care, Training and Quality Assurance Branch	Kentucky long- term care providers, OIG long-term care surveyors, and direct care certified nursing aides (CNAs) who attend the training	The training will provide information on how the brain is affected by dementia, as well as the overall disease process. In addition, providers will learn three different techniques for increasing the domains of well- being, i.e. the positive approach, hand under hand technique, and the validation technique (in conjunction with a case study).	Training	Project was well attended, and the 468 participants were very satisfied.
Mississippi	\$142,535.00	September 30, 2015 – September 29, 2018 (three years)	University of Louisville: Clinical Practice Guidelines (CPGs)	This project is a regional quality improvement initiative to provide peer-reviewed training materials to certified nursing homes on 21 different topics.	University of Louisville	Residents, staff, clinicians, medical directors, administrators, governing body officials and consultants in six of the eight Region IV states	Expected deliverables include: conversion of clinical practice guidelines to training materials on the shared website; creation of videos (related to the materials) for staff, provision of CEUs.	Training	Project not yet complete. Thus far, a website has been established for clinicians to gain access to the CPGs.
Mississippi	\$18,525.00	May 1, 2017 – March 1, 2018 (ten months)	Three Multi- Sensory Rooms in Three Mississippi Certified Nursing Homes	This project will establish three multi-sensory rooms in three certified nursing homes in Mississippi.	Stonebrook Inc.	Residents at Oxford Health and Rehab Center, New Albany Health and Rehab Center, and Pontotoc Health and Rehab Center	The project aims to improve the quality of life for residents with dementia and Alzheimer's disease, as well as reduce: symptoms of depression, anxiety, stress, and the use of antipsychotic medications.	Direct Improvements to Quality of Life	Project not yet complete. Oxford Health & Rehab multi- sensory room is complete. The rooms at New Albany and Rehab and Pontotoc Health and Rehab are in progress.

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Mississippi	\$86,714.90	August 26, 2016 - August 25, 2018 (two years)	Reducing Avoidable Hospitaliza- tions Across the Continuum of Care	This project will assist Region IV states in reducing avoidable hospitalizations and educating residents, family members, staff, and community partners about best practices to reduce avoidable hospitalizations.	Florida Atlantic University	Certified nursing homes in Mississippi and community partners	Through this project, the following deliverables are expected: modification of Resident and Family Decision Guide; piloting the guide in seven of eight Region IV states; developing a video for nursing homes that explains the role of the decision guide in reducing avoidable hospitalizations; sending a complete package of Decision Guides and training materials to every skilled nursing and nursing facility, and providing the Decision Guide in different languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss best practices on how to reduce avoidable hospitalizations.	Direct Improvements to Quality of Care	Results pending

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Mississippi	\$22,460.00	July 13, 2016- January 13, 2018 (18 months)	Bedford Care Partners Project	This project seeks to develop a cadre of qualified staff to provide dementia education in eight nursing homes in central and south Mississippi.	HMP Management Corporation	Residents, family members, and staff of eight dually certified nursing homes in Mississippi	As part of this project, the following will occur: staff will attend the Positive Approach to Care Program (created by Teepa Snow) and obtain certification; following training, the certified staff will conduct educational events at the eight nursing homes, sharing best practices in the provision of dementia care.	Training	About 1,076 individuals were trained as Care Partners (exceeding the goal of 500). The Bedford Care Partners group was created; the first meeting was held on June 28, 2017, and the group committed to meeting quarterly. The project has provided resources to train and develop hundreds of staff and community members.
Mississippi	\$45,495.33	December 2016- December 2019 (three years)	Communica- tion, Assessment, Relationships Equals Excellence (CAREs) Program	The CAREs program seeks to utilize non-pharmacological approaches to reduce antipsychotic, anti-anxiety and hypnotic drug use, as well as reduce falls with major injuries in the 30-bed Medicare skilled nursing facility. Through this project, It's Never Too Late (iN2L), an adaptive computer technology, will be purchased to help meet these goals.	Pike Community Care Center: Camellia Estates	Camellia Estates residents and family members	No data available	Direct Improvements to Quality of Care	Results pending
Mississippi	\$87,779.00	December 14, 2016 - December 2019 (three years)	Diving Deeper on a Culture Change Journey	This project will implement culture change and person- directed care through the utilization of the Eden Alternative principle in four nursing homes (involving approximately 1,000 employees).	Mississippi Methodist Senior Services, Inc.	Four Mississippi nursing homes; approximately 1,000 employees	Eden Alternative educators will conduct a series of education and training programs for direct care staff. Each facility will implement a Music and Memory program, offer opportunities for gardening, and intergenerational activities (based on the Unity, Wonder, and Wisdom course).	Training	Project not yet complete Onsite project monitoring visit conducted August 3-4, 2017.

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Mississippi	\$84,500.00	November 1, 2017 - November 1, 2019 (two years)	Kemper County LTC, Inc. dba Mississippi Care Center of DeKalb	To purchase smart televisions, speakers, and new technology for resident rooms with an in- house channel to keep residents abreast of facility events.	Mississippi Care Center of DeKalb	All residents of the nursing home, family members, and staff	To improve the quality of life and peace of mind of the residents with the use of new technology. This will include an in-house channel to better inform residents of the facility's events, such as activities, daily events, birthdays, and information pertaining to the facility.	Direct Improvements to Quality of Life	Results pending
Mississippi	\$187,441.00	October 6, 2014 - August 31, 2017 (34 months)	The Younger Adult in Long- Term Care (YALTC)	Develop a training curriculum and program for clinical practitioners and staff on younger adults in the long-term care setting.	American Medical Director's Association: The Society for Post- Acute and Long Term Care Medicine	Long-term care residences, clinical practitioners, and staff of long-term care facilities	YALTC training was guided by four research questions. Data was collected at three periods during the course training: each participant completed a pre-test (prior to the training) and a post- test (immediately following training); a follow-up was conducted 60 days after the training.	Training	Completed training on August 31, 2017. There was a total of 13 YALTC conferences held across the state over the three-year period. AMDA also activated a web-based training. They have an Online Resource Center, and all participants have received a YALTC CNA DVD. Feedback from the training sessions has been positive.

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North Carolina	\$109,887.73	October 1, 2017 – September 30, 2019 (two years)	Reducing Avoidable Hospitaliza- tions Across the Continuum of Care	This project will assist Region IV states in reducing avoidable hospitalizations and educating residents, family members, staff, and community partners about best practices to reduce avoidable hospitalizations.	Florida Atlantic University	Certified nursing homes in North Carolina and community partners	Through this project, the following deliverables are expected: modification of Resident and Family Decision Guide; piloting the guide in seven of eight Region IV states; developing a video for nursing homes that explains the role of the decision guide in reducing avoidable hospitalizations; sending a complete package of Decision Guides and training materials to every skilled nursing and nursing facility, and providing the Decision Guide in different languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss best practices on how to reduce avoidable hospitalizations.	Direct Improvements to Quality of Care	Advisory committee is meeting monthly, and progress has been made with updating the Decision Guide.

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North Carolina	\$24,002.00	January 1, 2017 - December 31, 2017 (one year)	Untitled	This project will repurpose the staff dining room on the Center's main hall into a dining room for residents residing on the 2nd, 3rd, 4th and 5th floors.	Longleaf Neuro- Medical Treatment Center	Residents of Longleaf Neuro-Medical Treatment Center	As part of this project, all staff will receive training on the Dining Practice (by the Registered Dietitian and the Medical Director). Staff, residents and caregivers handling food shall receive training on hand washing, and the importance of "No Bare Hand Contact" of ready- to-eat food. Staff will also ensure that all food and beverages served in the dining room are maintained at proper temperatures, and that evening and morning meals will occur within a 14 hour timespan. The project aims to achieve overall increased lunch intake and reduced falls.	Direct Improvements to Quality of Care	The Verandah was only operational in the last quarter of the project. Residents' individual clinical outcomes were continuously monitored throughout the quarter. Although the facility did not meet its target goals for overall increased lunch intake and reduced falls, it did see improvements for several residents. Residents liked being able to select their meal, and resident satisfaction was high (even among residents who sporadically attended during the quarter).
North Carolina	\$20,787.47	October 15, 2016 – October 14, 2017 (one year)	Untitled	Through this project, a computer, printer, large screen TV, home theatre system, 40 iPads (and cases), and 60 headphones will be purchased. The equipment will be used to increase resident access to computer technology, social media, and music, as well as to enhance group activities.	Healthique Group, LLC: Winston- Salem Nursing and Rehabilitation	All residents of the Winston- Salem nursing home	The project is expected to increase resident socializ- ation and access to computer technology.	Direct Improvements to Quality of Life	All targeted goals set by the facility were met. The facility saw an increase in both resident participation in activities, as well as the length of time in which an activity occurred. With the addition of new technology, average group activity participation grew by at least 25% and resident satisfaction increased to 90%. In addition, new technology has been incorporated into activity care plans for residents receiving psychiatric services, and social engagement increased overall.

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North Carolina	\$32,310.00	October 1, 2016 –March 31, 2018 (18 months)	Healing Garden	This project aims to enhance an existing Healing Garden and create a more therapeutic outdoor environment for residents, family members, visitors, and staff.	Conover Nursing and Rehabilitation Center	Conover Nursing residents, family members, visitors, and staff	The Healing Garden will be utilized for resident activities and to increase socialization and relaxation for residents, family members, visitors, and staff.	Direct Improvements to Quality of Life	Results pending
North Carolina	\$9,425.51	May 1, 2017 - May 31, 2018 (13 months)	SuzyQ Food Cart Delivery System	This project aims to enhance resident dining, increase resident food choices, and decrease significant weight loss.	Cambridge Place	Cambridge Place nursing home residents	Deliverables include improved meal service and weight stability for all residents.	Direct Improvements to Quality of Care	Results pending
North Carolina	\$23,773.06	May 1, 2017 – April 30, 2018 (one year)	Technology Enrichment Grant	This project will provide a SMART television for all resident rooms; iPads for residents to have access to the Internet; and enhanced activities programming.	BT2 Inc.: Skyland Care Center	Skyland Care Center nursing home residents, particularly those residents with an interest in connecting with family and friends via the Internet	The program will provide residents with: improved technology and internet access; enhanced quality entertainment, games, puzzles, and email; and engagement for every user during their activities of daily living.	Direct Improvements to Quality of Life	Project not yet complete. Thus far, residents share that their environment is more homelike and the equipment has enhanced their quality of life.
North Carolina	\$20,217.00	August 1, 2017 -July 31, 2018 (one year)	It's Never Too Late (i2NL)	Provide iN2L, an adaptive computer technology, to residents	Capital Nursing and Rehabilitation Center	All residents of the nursing home	Provide enhanced computer technology and access for residents. Increase resident, family, and staff satisfaction by ten percent; increase resident participation in facility activities by ten percent	Direct Improvements to Quality of Life	Results pending

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North Carolina	\$23,116.00	August 1, 2017 -July 31, 2018 (one year)	It's Never Too Late (i2NL)	Provide iN2L, an adaptive computer technology, to residents	Woodhaven Nursing, Alzheimer's and Rehabilitation Center	All residents of the nursing home	Provide enhanced computer technology and access for residents. Increase resident, family, and staff satisfaction by ten percent; increase resident participation in facility activities by ten percent	Direct Improvements to Quality of Life	Results pending
North Carolina	\$25,495.00	September 1, 2017 - August 30, 2018 (one year)	Seniors Staying Connected (SSC) Project	Provide It's Never Too Late (iN2L), an adaptive computer technology, to residents	East Carolina Rehab and Wellness	All residents of the nursing home	The project aims to improve quality of life, increase participation in activities, and increase resident satisfaction. Quarterly reports will be developed, which will include results of resident activity participation within the facility, as well as the percentage of healthcare staff who document iN2L usage on care plans.	Direct Improvements to Quality of Life	Results pending
North Carolina	\$15,932.00	March 1, 2016 –February 28, 2017 (one year)	Meaningful Music Project	This project will use iPods and iPads that are filled with individualized playlists and music related applications. The playlists tailor the music to meet the needs of each resident living in the memory care neighborhood. This project aims to reduce anti- anxiety medications, reduce behaviors, and increase resident satisfaction through meaningful activities.	Hickory West Trinity Ridge	Residents of the nursing home who are living with dementia	Quarterly reports with results of anti-anxiety medications, incidence of behaviors, and satisfaction measures	Direct Improvements to Quality of Life	The project improved satisfaction and quality of life for residents living with dementia. Music was used as an essential tool in connecting with residents with dementia by helping to soothe anxiousness and agitation and engaging those residents who appear withdrawn or despondent. As a result, the facility experienced a reduction in the use of antipsychotic medications.

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North Carolina	\$109,887.50	August 14, 2017 –August 13, 2019 (two years)	Reducing Avoidable Hospitaliza- tions Across the Continuum of Care	This project will assist Region IV states in reducing avoidable hospitalizations and educating residents, family members, staff, and community partners about best practices to reduce avoidable hospitalizations	Florida Atlantic University	Certified nursing homes in North Carolina and community partners	Through this project, the following deliverables are expected: modify resident and family Decision Guide; pilot the guide in seven of eight Region IV states; develop a video for nursing homes that explains the purpose of the Decision Guide in reducing avoidable hospitalizations; send a complete package of decision guide.	Direct Improvements to Quality of Care	Results pending
South Carolina	\$85,600.60	January 1, 2017 – December 31, 2018 (two years)	Reducing Avoidable Hospitaliza- tions Across the Continuum of Care	To assist Region IV states in reducing avoidable hospitalizations and to educate residents, family members, staff and community partners on best practices in reducing avoidable hospitalizations.	Florida Atlantic University	South Carolina certified nursing homes and community partners	Through this project, the following deliverables are expected: modification of Resident and Family Decision Guide; piloting the guide in seven of eight Region IV states; developing a video for nursing homes that explains the role of the Decision Guide in reducing avoidable hospitalizations; sending a complete package of Decision Guides and training materials to every skilled nursing and nursing facility, and providing the Decision Guide in different languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss best practices on how to reduce avoidable hospitalizations.	Direct Improvements to Quality of Care	Results pending

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South Carolina	\$862,287.32	October 12, 2016-October 11, 2019 (three years)	Improving Individualized Care for Residents with Dementia	This project is focused on individualized dementia care and the elimination of off-label antipsychotic medication use in a minimum of 75 South Carolina nursing homes.	LeadingAge South Carolina	75 South Carolina nursing homes	Deliverables include: Six nursing home pilots; Hand- in-Hand training by Dr. Charla Long; statewide learning collaborative to disseminate best practices and lessons learned to all South Carolina nursing homes	Training	Results pending
South Carolina	\$4,720.00	October 3, 2016 -June 30, 2017 (nine months)	Untitled	To start up a Music and Memory program and also run a Life Enrichment program. Also, to purchase a cotton candy machine and snow cone cart for activities.	Anchor Rehabilitation and Healthcare Center of Aiken	All residents of the nursing home	Deliverables include: implement Music and Memory program; develop playlist, include pertinent goals in care plans; utilize equipment for activities; monitor the impact of the programs on quality of life	Direct Improvements to Quality of Life	Results pending
South Carolina	\$2,104.00	December 13, 2016 – December 12, 2017 (one year)	Oakhaven Nursing Center Aquarium	To purchase an aquarium and the supplies to maintain the aquarium	Oakhaven Nursing Center	All residents of the nursing home	Deliverables include: purchase aquarium, as well as the supplies and fish; notify residents that the aquarium has been implemented in a centralized area; begin activities related to the aquarium.	Direct Improvements to Quality of Life	Results pending

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South Carolina	\$2,556.00	December 7, 2016 – December 6, 2017 (one year)	Morrell Nursing and Rehabilitation Center Aquarium	To purchase an aquarium and the supplies to maintain the aquarium; to implement therapeutic drumming circles	Morrell Nursing & Rehabilitation Center	All residents of the nursing home	Deliverables include: purchase aquarium, as well as the supplies and fish; notify residents that the aquarium has been implemented in a centralized area; begin activities related to the aquarium. Modify the activities program to include therapeutic drumming circles. The drumming circles aim to increase social interaction, as well as to improve emotional expression. The circles also provide exercise that focuses on improving gross and fine motor skills, particularly for residents with dementia.	Direct Improvements to Quality of Life	Results pending
South Carolina	\$2,126.00	January 22, 2017-January 21, 2018 (one year)	Medford Nursing Center Aquarium	To purchase an aquarium and the supplies to maintain the aquarium	Medford Nursing Center	All residents of the nursing home	Deliverables include: purchase aquarium, as well as the supplies and fish; notify residents that the aquarium has been implemented in a centralized area; begin activities related to the aquarium.	Direct Improvements to Quality of Life	Results pending

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South Carolina	\$2,500.00	August 23, 2016 – August 22, 2017 (one year)	Richard C. Campbell Veterans Nursing Home: Music and Memory Program	To develop and implement a Music and Memory program	Richard M. Campbell Veterans Nursing Home	Fifty percent of the nursing home residents	Deliverables include: inform residents, family members, and staff about the Music and Memory program; develop a system for obtaining a list of each resident's preferred music choices; educate residents, family members, and staff on how to use the Music and Memory equipment; develop customized playlists for residents with dementia; incorporate information into each resident's plan of care.	Direct Improvements to Quality of Life	Results pending
South Carolina	\$6,823.04	October 26, 2017 (one day conference)	Spirit of Caring Conference	This conference is designed to promote sharing of best practices and innovative ideas that South Carolina nursing homes have implemented to improve quality of care and quality of life.	Lexington Medical Extended Care	All certified nursing homes in North Carolina	The South Carolina Spirit of Caring program recognizes facilities, employees, residents, family members and volunteers for their contributions. Attendees are provided a Spirit of Caring book with ideas for future quality improvement projects.	Training	The Spirit of Caring produced a book of best practices and projects that benefit residents.

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Indiana	\$600,000.00	August 1, 2016 – July 31, 2018 (two years)	Music in Long Term Care	Program to introduce music into long-term care facilities and the care planning of residents to reduce pharmacologic interventions; reduction in the dosage of prescribed medication administered per resident; reduction in the amount of negative behaviors; reduction in the amount of falls; increased level of resident engagement and quality of life.	Butler University (Project Coordinator)	Five to seven nursing homes will participate in the project. Approximately 200 nursing home residents will benefit through direct participation.	Develop protocols, guidelines, and timelines for project implementation; create data collection tools; identify five to seven facilities to participate; develop train-the-trainer program to be utilized by other groups; develop measurable outcomes and collect data to measure outcomes.	Direct Improvements to Quality of Life	Results pending; project results will be available in October 2018
Indiana	\$75,000.00	May 1, 2016 – October 31, 2017 (18 months)	Dementia Care in Southwest Indiana	Educate nursing home staff on dementia care strategies and techniques to improve quality of care and quality of life for residents; identify person- centered care approaches to decrease behavioral issues, falls, abuse, and anti-psychotic drug use; evaluate the <i>Positive</i> <i>Approach to Care</i> (PAC) model for potential statewide expansion.	University of Southern Indiana Center for Healthy Aging and Wellness; Teepa Snow, developer of <i>Positive</i> <i>Approach to</i> <i>Care</i>	12 nursing homes in Southwest Indiana and their residents.	Introduce the <i>Positive</i> <i>Approach to Care</i> model at eight nursing homes in southwest Indiana through the following activities: host a kickoff meeting, complete train-the-trainer workshops for 16 facility staff, provide eight hours of online video training, conduct two days of in- person training, conduct workshop on lesson plan development, conduct eight in-service classes at each facility for at least 30 staff, and provide three hours of telephone support. The project will also identify outcome and process measures, and collect data in order to create a QAPI plan.	Training	22 nursing home staff were certified as a PAC Certified Independent Trainer or as a PAC Certified Independent Coach. 783 nursing home staff were trained in the Positive Approach to Care Model.

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Indiana	\$600,000.00	December 1, 2015 – November 30, 2017 (two years)	Leadership Conference	Bi-annual leadership conferences to conduct training and promote CMS initiatives such as GPRA pressure ulcer initiative, care coordination, dementia care, and healthcare associated infections. Improve awareness of healthcare quality issues in long-term care, increase participation in healthcare quality improvement projects addressing significant healthcare quality issues, and improve quality of life and quality of care for nursing home residents related to the topics of the conferences.	Brookshire Manage- ment (Event Planner); Indiana Convention Center	All 554 Indiana nursing homes were invited to attend the conferences, as well as representa- tives from health care quality organizations, provider organizations, and long-term care ombudsman.	Conduct up to four conferences over a two- year period - hosting up to 1,300 attendees each. Specific to conference topics, the Indiana State Department of Health (ISDH) will track the following indicators: number of statewide deficiencies; Indiana's rank regarding the frequency of topic deficiency; number of facilities that participate in state projects related to conference topics; if possible, identify rates of topic deficiencies through MDS data and other sources. ISDH will also track the number of facilities that attend, number of statewide immediate jeopardy level deficiencies on surveys, percent of providers cited at immediate jeopardy level related to topic, number of statewide actual harm level deficiencies cited on survey, and percent of providers cited at actual harm related to topics.	Training	October 22, 2015: Health Care Quality Leadership Conference focused on investigative strategies for addressing abuse. 864 conference registrants. September 13, 2016: ISDH hosted a Leadership Conference on infection control and prevention. 804 conference registrants. March 8, 2017: ISDH hosted a Leadership Conference on dementia care. Conference featured Teepa Snow, developer of Positive Approach to Care. 1,010 conference registrants. Registrants at each conference included representatives from approximately 300 -350 nursing homes as well as representatives from health care quality organizations, provider organizations and long-term care ombudsman.

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Indiana	\$400,000.00	February 1, 2017 – January 31, 2019 (two years)	Indiana Nursing Home Advanced Education Project	The purpose of the project is to implement a program to improve the education of healthcare professionals working in long-term care facilities through course development focused on a lack of qualifications in important geriatric care areas, such as healthcare quality improvement, infection prevention, wound care, and Alzheimer's/ dementia care.	University of Indianapolis, Center for Aging and Community (Project Coordinator); Alzheimer's Association of Greater Indiana; Association of Professional s in Infection Control and Epidemiol- ogy; Indiana University School of Medicine's Department of Gerontology; Wound Care Education Institute	Courses will be available to all Indiana nursing homes, as well as to health care quality organizations and education programs	Indiana State Department of Health will offer four advanced certification level education courses to approximately 25-50 participants for each course, to include the training materials in the following areas: healthcare quality improvement, infection prevention, wound care, and Alzheimer's/ dementia care.	Training	Results will be available in March 2019
Indiana	\$600,000.00	December 1, 2016 – November 30, 2018 (two years)	Regional Collaborative Project Expansion	Develop regional collaborative groups that are locally-based to work on quality improvement efforts within the nursing homes in their communities. Each regional collaborative will be responsible for developing and implementing at least two quality improvement projects addressing a quality of care need as identified through a QAPI process utilizing QAPI principles.	University of Indianapolis Center for Aging and Community (Project Coordinator); nine long term care regional collaborative projects	Each of the nine regional collaborative projects includes 20-25 nursing homes. Projects are implemented to improve quality of care or quality of life for residents.	Support the established regional collaboratives and expand to establish two to three new collaborative groups that will: Develop at least two quality improvement projects to address quality of care issues determined through a needs assessment conducted in their region, develop a QAPI facility plan template that can be adapted by facilities, and develop at least three QAPI project plan templates that can be adopted by nursing homes.	Direct Improvements to Quality of Care	Results will be available in January 2019

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Indiana	\$500,000.00	April 15, 2016 – April 14, 2018 (two years)	Expressive Arts in Long Term Care	An effective expressive arts program results in increased engagement of residents. This project will result in an Expressive Arts Course and an Expressive Arts Train-the- Trainer Course. The project will focus on the use of arts through movement, drawing, painting, sculpting, writing, music, or acting as interventions or approaches to improve quality of life for residents.	University of Indianapolis Center for Aging and Community (Project Coordinator)	Participating Indiana nursing homes and their residents; and participating Indiana health care quality organizations and consumer organizations that serve long term care facilities and nursing home residents.	The Expressive Arts Course will be offered statewide six times. The Expressive Arts Train-the-Trainer Course will be offered twice at different locations in the state. A toolkit will be created to provide a resource for implementation within long-term care facilities.	Training	Results will be available in June 2018
Indiana	\$600,000.00	May 1, 2016 – April 30, 2018 (two years)	Polypharmacy Reduction in Long Term Care	The project is implementing a unique approach to polypharmacy reduction in 21 participating Indiana nursing homes. The project's goal is to reduce the use of unnecessary, non-beneficial, and harmful drugs, resulting in improved quality of life, improved quality of care, and reduced health care costs.	Purdue University School of Nursing (Project Coordinator)	Approximately 21 nursing homes will participate in the project, the program aims to benefit the residents of these nursing homes.	The average number of prescribed medications in nursing homes is 9-15 drugs per resident. The project will safely and effectively reduce the average number of medications per resident, including a reduction of antipsychotic drug use.	Direct Improvements to Quality of Care	Results will be available in July 2018

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Indiana	\$332,360.00	October 1, 2017 – September 30, 2020 (three years)	Conversations on Advanced Care Planning in Nursing Homes	The project will implement improvements to advance care planning in nursing homes focusing on person-directed culture, resident quality of life, and resident choice. The most important component of advance care planning is the initial conversation about one's health care wishes.	University of Southern Indiana (Project Coordinator); Respecting Choices	15 nursing homes will participate, benefiting participating residents and their families.	The Respecting Choices Last Steps Model will be implemented in 15 nursing homes. 25 individuals will be trained as facilitators per year, for a total of 75 facilitators. The project will create a model for implementing advance care planning in a nursing home. The project will study whether quality advance care planning reduces the number of unnecessary hospitalizations.	Direct Improvements to Quality of Life	Results will be available in October 2020
Indiana	\$113,700.00	Annual	Administrative Use of CMP Funds for the State of Indiana	N/A	N/A	N/A	N/A	Administrative	N/A
Michigan	\$300,000.00	July 1, 2016 – December 31, 2017 (one and a half years)	Holland Home Alzheimer's Simulation	Development of an Alzheimer's simulation and training program to drive culture change and training for nursing home staff to better care for patients with dementia-related issues.	Holland Home	Holland Home staff	Provide training to all current and incoming staff whose care roles bring them into regular contact with individuals with dementia. Training includes dementia simulation & Teepa Snow's Positive Approach to Care. Teepa Snow will design and develop a series of core training materials. Two staff members will be trained as facilitators for simulation and as trainers for sustainability.	Training	Since July 2016 more than 800 employees and 25 care givers have gone through this training. The overall results were not only a positive learning experience but helped staff to have a different outlook towards the consumers. There is a better understanding what each consumer has to go through on a daily basis and the many challenges they face.

	Region 5									
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Michigan	\$329,916.00	May 1, 2016 – April 30, 2019 (three years)	Western Michigan University Behavioral Consultation and Services	To provide behavioral consultation and services to persons with cognitive impairment at skilled nursing facilities in Michigan. To assist these individuals to age in place, reduce the use of medication to manage behavioral and psychological symptoms of dementia, improve staff knowledge and abilities, and develop modules that can be adopted by other skilled nursing facilities.	Center for Gerontology at Western Michigan University, Kalamazoo; Heritage Community of Kalamazoo; Harold & Grace Upjohn Care & Rehabilitation Center	N/A	Conduct intake assessments; conduct Functional Behavioral Assessment (one to four weeks), to include interviewing caregivers, direct observation, and manipulation of environmental variables to develop treatment plan; develop and evaluate function-based interventions (three to eight weeks); conduct training for staff and caregivers on interventions; create training modules.	Direct Improvements to Quality of Care	Results pending	
Minnesota	\$308,000.00	July 2016 – July 2019 (three years)	Music and Memory	Provide Minnesota nursing homes funding to implement their own music and memory type programming. To implement as many music and memory type programs in nursing facilities across the State of MN, through the issuance of mini grants.	Minnesota Department of Human Services (MDHS)	29 nursing facilities in the State of Minnesota have received monies to train facility staff and implement internal music and memory programs. For a full list please contact MDHS.	Many grant awards are anticipated, however since this is a voluntary program, the total number of nursing facilities that will be awarded grants to implement programs is not known at this time.	Direct Improvements to Quality of Life	To date, 29 nursing facilities have implemented programs. An additional 34 facilities have been awarded grants but have no yet implemented programs.	
Minnesota	\$90,075.00	June 2017 – June 2019 (two years)	Joint Provider and Surveyor Training for Revised Requirements of Participation	To provide nursing facility leaders the knowledge needed to implement the revised regulations through training held at statewide locations.	Minnesota Department of Health and Minnesota Department of Human Services, with work carried out through subject matter expert speakers and individuals /entities involved in the logistics of holding training sessions statewide	Nursing home facility staff who attend the training	Providers attending the training will have a better understanding of the revised requirements of participation.	Training	One all-day training session was repeated at four locations throughout the state in November 2017. 800 nursing home staff (representing approximately 250 nursing facilities), 17 ombudsman staff and 120 survey agency staff attended. Topics covered in the first round of training included; new survey process, facility-wide assessment, staff competency and training, quality assurance and program improvement (QAPI), behavioral health, and abuse reporting.	

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Ohio	\$507,720.00	April 1, 2016 - December 31, 2018 (33 months)	Wound Care Certification	The goal of this project is to provide wound care education and certification to direct care staff in order to improve the prevention and treatment of pressure injuries.	Ohio Health Care, Association (OHCA), Ohio Health Care Association Educational Foundation (EFOHCA), Wound Care Educational Institute (WCEI)	100 - 200 nursing home facilities throughout Ohio	5% - 15% improvement in the incidence of pressure injuries in long-stay residents, with a corresponding improvement in the CMS pressure injury quality measure; wound care certification for up to 200 nurses; 11 quarterly progress reports and a final report at the conclusion of the project	Training	Results pending
Ohio	\$1,005,662.00	June 2016 - June 2019 (three years)	Preferences of Everyday Living Inventory (PELI)	The goal of this project is to assist nursing facility staff in translating PELI data into daily care practices, with a focus on promoting the adoption of preference assessment through education and training, as well as promoting sustainability through quality improvement strategies.	Miami University and the Scripps Gerontology Center	This project has the potential to benefit all 960 nursing facilities in Ohio (if all choose to participate in the project).	Education and training materials for all ranges of nursing facility staff, including newsletters, webinars, and training videos with guides; Process for integrating preference data into quarterly care planning meetings; A variety of technological solutions for collecting, managing, and tracking data in order to help facilities sustain preference- based care over time; An online discussion board to allow facilities to post questions and successes in providing preference- based care; 12 quarterly progress reports, and a final report at the conclusion of the project.	Direct Improvements to Quality of Care	Results pending

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Ohio	\$717,852.00	July 1, 2016 - June 30, 2019 (three years)	Opening Minds Through Art (OMA)	The goal of this project is to provide OMA training for staff at approximately 102 Ohio nursing facilities. The OMA program provides opportunities for creative self-expression and social engagement for people with Alzheimer's disease and other neurocognitive disorders.	Miami University and the Scripps Gerontology Center; Approxima- tely 102 nursing facilities throughout Ohio that will receive seed money to launch OMA programs in their facilities.	Staff and residents at approximately 102 Ohio nursing facilities	Online video-based training modules; assessment of online training compared to in- person training; post-training consultation and support, including online support; certification as an OMA facility upon completion of one year of OMA programming; conferences in years two and three to share best practices among those implementing the program; satisfaction questionnaires given to conference attendees; 12 quarterly progress reports and a final report at the conclusion of the project.	Training	Results pending
Ohio	\$603,310.00	January 2017 - June 2019 (30 months)	Antipsychotic Use Reduction	The goal of this project is to reduce the use of antipsychotics for residents with dementia by providing training to nursing facility staff on non-medication behavior management skills.	Waugh Consulting, LLC	This project will benefit approximately 40 nursing facilities in Northwest Ohio.	Up to 80 interdisciplinary staff certified in the Reality Comprehension Clock Test (RCCT) cognitive assessment tool; decrease in the use of antipsychotic medications for residents with dementia and dementia-related conditions; improved performance on the CMS antipsychotics quality measure; ten quarterly progress reports and a final report at the conclusion of the project.	Training	Results pending

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Ohio	\$73,545.02	April 1, 2017 - May 31, 2019 (26 months)	Focused Nurse Education	The goal of this project is to reduce unnecessary hospitalizations and emergency room visits by increasing the ability of registered nurses (RNs), licensed practical nurses (LPNs) and state tested nursing assistants (STNAs) to communicate the conditions of the residents in their facilities accurately, effectively, and confidently.	LeadingAge Ohio, Optimized Care Network (OCN), The Ohio State University Office of Geriatrics and Interprofess- ional Aging Studies, The Ohio State University College of Nursing, Silver Screen Video Productions	Three Ohio nursing facilities in Montgomery, Logan, and Lorain counties: Bethany Village (Dayton), Green Hills Retirement Community (West Liberty), and Kendal at Oberlin (Oberlin)	This project is expected to reduce hospital readmission rates by a combined 20% and reduce preventable emergency room visits by a combined 10% for the following seven health conditions: congestive heart failure, pressure injuries, pneumonia, COPD, diabetes, stroke, UTIs. This project is also expected to develop geriatric-specific curriculum, video training modules, pre- and post- tests, certificate of completion, nine quarterly progress reports, and a final report at the conclusion of the project.	Training	Results pending
Ohio	\$2,000,242.50	April 1, 2017 - April 30, 2019 (25 months)	Person- Centered Staff Engagement	The goal of this project is to improve person-centered care in approximately 100 nursing facilities, focusing on strategies that emphasize the correlation of low staff turnover and high quality, person-centered care.	Office of the State Long-Term Care Ombudsman, 12 regional long-term care ombudsman programs, B&F Consulting, Scripps Gerontology Center	Approximately 100 nursing facilities throughout Ohio	Expectations include a 10% reduction in citations issued by The Ohio Department of Health, a 10% reduction in ombudsman-verified complaints, a 10% improvement in staff stability, four semi- annual progress reports, and a final report at the conclusion of the project.	Training	Results pending

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Ohio	\$727,008.00	April 15, 2017 - December 31, 2018 (26.5 months)	LifeBio	The goal of this project is to enhance person-centered care in participating nursing facilities by developing a Life Story Booklet and 1-page Life Story Summary for residents. These are to be shared with direct care staff and posted in or directly outside each resident's room.	Ohio Colleges of Medicine Government Resource Center, Benjamin Rose Institute on Aging, LifeBio Corporation, Universal Healthcare Action Network	Approximately 30 nursing facilities in Northeast Ohio	Approximately 830 LifeBio Story Booklets and Life Story Summaries, training materials for staff and volunteers, monthly webinars to provide technical assistance increased resident and family satisfaction with care, particularly regarding care preferences, a reduction in the use of antipsychotic medications, nine quarterly progress reports, and a final report at the conclusion of the project.	Direct Improvements to Quality of Care	Results pending
Ohio	\$128,240.00	July 1, 2017 - June 30, 2018 (one year)	CARES® Dementia Training	The goal of this project is to train direct care staff in the CARES Dementia Basics Online Training Program so they can provide more person- centered care to residents with dementia and dementia-related conditions.	Ohio Health Care Association, Ohio Health Care Association Educational Foundation, HealthCare Interactive, Inc.	150 nursing facilities throughout Ohio Enrollment offered first to facilities in the bottom 25% (as measured by the Ohio Department of Aging's 2015 Nursing Home Resident Satisfaction Survey)	The project will deliver 50 one-year subscriptions to the CAREs Dementia Basics Online Training Program. Facilities will have at least 25% of their staff complete the training. At least one staff member at each participating facility will earn the essentiALZ certification. Project aims to improve scores on the Ohio Department of Aging's Nursing Home Resident Satisfaction Survey and will develop four quarterly progress reports, and a final report at the conclusion of the project.	Training	Results pending

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Ohio	\$216,220.00	August 1, 2017 - June 30, 2019 (23 months)	Telehealth	The goal of this project is to demonstrate how increased, responsive access to care via telehealth technology enhances care coordination for medically complex nursing facility residents.	Leading Age Ohio, Optimized Care Network	Two rural Ohio nursing facilities: Green Hills Community (located in Logan County) and Ohio Eastern Star Home (located in Knox County)	Deliver on-site clinic (CareSpace) at Green Hills Community, introduce a telemedicine cart at Ohio Eastern Star Home, reduce emergency room visits by 10%, reduce hospital admission and readmissions by 10%, and produce eight quarterly progress reports, and a final report at the conclusion of the project.	Direct Improvements to Quality of Care	Results pending
Ohio	\$6,319.30	May 2017 - February 2018 (nine months)	Pine Kirk Relocation	Project goals are to: move the belongings of residents who were relocated in the aftermath of an emergency event that occurred at Pine Kirk nursing facility on May 12, 2017, and facilitate the move back to Pine Kirk in February 2018 for those residents who choose to do so.	Mathis Moving & Storage Company (Newark, OH)	Pine Kirk nursing facility residents (Kirkersville, OH)	Move resident belongings for 23 residents from Pine Kirk to receiving facilities, relocate residents who choose to do so from receiving facilities back to Pine Kirk via van or ambulance. Move these residents' belongings from receiving facilities back to Pine Kirk.	Resident Relocation	Results pending
Ohio	\$60,256.00	Annual	Administrative Use of CMP Funds for the State of Ohio	N/A	N/A	N/A	N/A	Administrative	N/A

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Wisconsin	\$100,000.00	June 2016 – May 2017 (one year)	TimeSlips Creative Storytelling, Inc.	Through the use of improvisational storytelling, the project aims to improve communication and social connectedness, reduce challenging behaviors, and potentially reduce anti- psychotic medications. The project also seeks to improve positive engagement between staff and residents.	TimeSlips Creative Storytelling, Inc.	50 Wisconsin nursing homes	Certify 50 nursing homes in improvisational storytelling to improve communication and social connectedness among people with dementia. Recruit and train facility staff and volunteers and certify lead facilitators in each nursing home in Creative Storytelling Engagement Training. Hold face-to-face and telephone coaching sessions to answer questions, provide demonstration of a variety of techniques and provide continuity and support for new staff and volunteers.	Direct Improvements to Quality of Life	The final project results can be accessed using the following link to the project report: <u>Final</u> <u>Report</u>
Wisconsin	\$67,373.00	December 2016 – March 2017 (four months)	Cycling Without Age	Implement a rickshaw cycling program at Lutheran Homes of Oshkosh to expand possibilities and experiences for people living in nursing homes, including persons living with severe physical limitations and dementia.	Lutheran Homes of Oshkosh Inc.	No data available	Implementation of the Cycling Without Age program in the nursing home, including the creation of video and informational handouts to share with volunteers and other nursing homes and purchase of a transport trailer to carry a rickshaw to other nursing homes to raise awareness of the program. Nursing staff will partner with the University of Wisconsin - Oshkosh to conduct research to determine the outcomes of the program and create capacity to support development of the program in other skilled nursing facilities in Wisconsin.	Direct Improvements to Quality of Life	The final project results can be accessed using the following link to the project report: <u>Final</u> <u>Report</u>

					Region 5				
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Wisconsin	\$7,000.00	January 2017 – December 2017 (one year)	Intergenerat- ional Program	Provide meaningful activities, educational opportunities, and innovative programming for grade school students, high school students, and nursing home residents to help build intergenerational relationships.	Good Samaritan Society-Lodi; School District of Lodi Other WI nursing homes that choose to implement the Intergenerat -ional program using the Project manual	No data available	The after school program will include programs and special events where students and residents will foster relationships using prepared activities. These activities will develop a social connection between students and residents; establish positive relationships, and respect for another generation. The program pays for transportation for students; supplies for activities; and the development of a program manual for use by other nursing homes to replicate the program. The project will be evaluated using satisfaction surveys developed for residents, students, family members and nursing home staff.	Direct Improve- ments to Quality of Life	Results pending
Wisconsin	\$59,250.00	August 2016 – August 2019 (three years)	Infection Prevention and Control Training for Health Care Professionals Working in Nursing Homes	Develop an educational program to address how antimicrobial stewardship, outbreak identification and control, and surveillance relate to infection control and prevention.	Department of Health Services, Wisconsin Healthcare- Associated Infections in Long-Term Care Coalition	Wisconsin nursing homes	Hold five regional workshops for 100 nursing home infection preventionists and one conference with 600 or more nursing home infection preventionists. At the completion of the training program, 80% (or higher) of nursing homes will have lowered communicable infection rates by at least 10% (versus the same period in the prior year). Compliance with hand hygiene will increase by 20- 30%. There will be a reduction in surface contamination by up to 30%.	Training	Results pending

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Wisconsin	\$58,300.00	February 2017 –January 2018 (11 months)	Noah's Landing Program	Establish a program to enhance quality of life by encouraging resident relationships with pets. Introduce dogs and cats into the facility and into nontraditional therapy to enhance the lives of nursing home residents.	Lutheran Homes of Oshkosh Inc.	No data available	Select and train three cats and three dogs suitable for life in a nursing home; build a dog run; teach staff, residents, and volunteers how to handle and care for the dogs and provide counsel as needed; develop a program video and manual with lessons learned and a toolkit for program replication in other nursing homes. The program manual will share the philosophy, planning tools, activity ideas, program guides of the program and lessons learned. Lutheran Homes of Oshkosh will partner with the University of Wisconsin Oshkosh - College of Nursing to conduct quantitative and qualitative research measuring outcomes of the program.	Direct Improvements to Quality of Life	Results pending
Wisconsin	\$25,000.00	November 2016 – October 2017 (one year)	Social Media and Brochure Project	Statewide campaign to educate nursing home staff of the potential for violations of resident rights and caregiver misconduct by using handheld devices. Reduce the number of misconduct incidents related to sharing photos or videos of residents on social media.	Department of Health Services	Wisconsin nursing homes	Each nursing home will receive: two videos for staff training, two laminated, international standard sized large posters (to post in break rooms), and brochures for employees to receive when they are hired and at ongoing training events.	Training	The final project results can be accessed using the following link to the project report: <u>Final</u> <u>Report</u>

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Wisconsin	\$5,000.00	February 2017 –February 2018 (one year)	Fitbits to Monitor Sleep/Wake Patterns	Use Fitbits to help nursing staff assess sleep patterns (with minimal disruption to residents); distinguish falls patterns; and monitor medication adjustment for residents.	Brewster Village	No data available	Partner with the University of Wisconsin - Oshkosh to analyze the data collected to understand how a resident's sleep patterns and routines affect their falls pattern, medication monitoring, and overall psychosocial well-being.	Direct Improvements to Quality of Care	The final project results can be accessed using the following link to the project report: <u>Final</u> <u>Report</u>
Wisconsin	\$192,200.00	April 2017 – March 2019 (two years)	Statewide Expansion of the Student Volunteer Program	This program connects high school and college student volunteers with a local nursing home certified by Music & Memory to assist in implementation and continuity of the Music & Memory program. Residents benefit from increased access to personalized music through the extra set of hands provided by students, enhanced socialization opportunities, and a variety in daily routine. Reduced reliance on anti- psychotic and anti-anxiety medication, reduced agitation, and improved quality of life is also anticipated.	Music & Memory, Inc.	All participating Wisconsin nursing homes certified by Music & Memory	The project will increase the number of volunteers in nursing homes and residents benefiting from intergenerational relationships. Residents will have greater access to their personalized music and the associated benefits. Improvements in quality of life and continued reduction in the use of antipsychotic medications is also anticipated.	Direct Improvements to Quality of Life	Results pending

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Wisconsin	\$29,300.00	August 2017 – August 2018 (one year)	Leadership & Systems Implementa- tion 101 Workshop Program	The Wisconsin Director of Nursing Council will provide seven day-long workshops for teams of Nursing Home Administrators and Directors of Nursing to focus on developing leadership skills, principles of systems implementation, and systems maintenance. The workshops will provide education and interactive guidance regarding these issues and include development of an action plan for process improvement in their nursing home.	Wisconsin Director of Nursing Council- Education Forum	Participating Wisconsin nursing homes	The Administrators and Directors of Nursing will effectively implement change in a system in their nursing homes that will enhance the quality of care and life for residents. These principles will be used to identify and implement change in other systems in the nursing home, as needed.	Training	Results pending
Wisconsin	\$46, 700.00	August 1, 2017 – March 31, 2019 (20 months)	Alzheimer's Poetry Project Program	Over a three-month period, 20 nursing homes will be trained in the methods and techniques of the Alzheimer's Poetry Project. This is a unique and innovative program that uses the power of the spoken word and builds on the long tradition of poetry as an oral art form.	Center for Community Stewardship	20 participating Wisconsin nursing homes	Improve the quality of life of nursing home residents with dementia and other psychosocial needs through increased socialization (decreasing isolation and boredom). By accessing resident creativity, staff sees residents as more fully human, engaging in performing and creating poetry.	Direct Improvements to Quality of Life	Results pending

					Region 5				
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Wisconsin	\$14,040.00	September 2017 – August 2018 (one year)	Pressure Redistribution System	Purchase a pressure mapping system to assess pressure distribution for residents to reduce the prevalence of pressure ulcers and create a better quality of life. The mapping will show exactly what cushions or mattress to use in order to properly redistribute the individual's pressure point(s).	Dove Healthcare - West	Other Wisconsin nursing homes who learn about the program from Dove Healthcare- West nursing home staff	Implementation of a pressure mapping system in the nursing home to assess and monitor residents at risk for developing pressure injuries. Facility staff will be trained in the technology and use of the mapping system. Individual staff will be assigned responsibility for conducting pressure mapping on an ongoing basis in the facility. The facility will analyze the data and report on the outcomes of utilizing the pressure mapping system (related to the speed of healing existing pressure injuries, the prevention of future injuries and the improvement in resident satisfaction and quality of life). Nursing home staff will share their findings with other nursing homes at regional Directors of Nursing meetings.	Direct Improvements to Quality of Care	Results pending

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Wisconsin	\$23,000.00	September 1, 2017 – June 30, 2019 (one year, nine months)	Stop, Starting It	The project will provide 10 workshops across the state, with participation of 30-40 caregivers at each training session. The training will assess attitudes, reframe perspectives, and practice interpersonal skills for working with people with dementia. The workshop will expose caregivers to new experiences and practices that will change attitudes and behaviors toward individuals with dementia, having a direct impact on their quality of life.	North Central Health Care	Participating Wisconsin nursing homes	Participants will learn how to promote an overall environment of positive language and behaviors when working with people with dementia. Facilities will use this information to review their hiring and training practices, assess current resident- centered care practices, and identify opportunities for decreasing medications. Pre- and post- test information will be collected at each presentation and will be used to evaluate the effectiveness of the training.	Training	Results pending
Wisconsin	\$44,820.00	October 1, 2017 - March 31, 2018 (six months)	Performance Improvement CMP Funds Project	The Wisconsin Center for Performance Excellence will hold five workshops across the state for staff from 105 nursing homes with a one or two star rating from CMS. The workshops are designed to improve their performance using the Eight Disciplines method. Participants will develop corrective action plans as part of the workshop and, four weeks later, will participate in a two-hour, interactive group webinar to facilitate their transition into individual action projects.	Wisconsin Center for Performance Excellence	Wisconsin nursing homes	Expected outcomes are measurable improvements to resident health and safety, as well as increased compliance with federal regulations. A corresponding outcome is a reduction in events that result in civil money penalties being assessed to nursing homes. Nursing homes will narrow the gap between their current performance and future potential with the expected outcome of improving resident health and safety.	Training	Results pending

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Wisconsin	\$7,500.00	December 2017 – May 2018 (six months)	Write Your Life	This program brings together residents, students, and community members to listen to residents tell their life stories and help them record their memories, creating a keepsake to share with their loved ones. The stories will be printed into a book and presented to each resident and their families. The founder of the Write Your Life Seminar will spend three afternoons working with residents to share her program of creative expression.	Park View Health Center	Park View Health Center Nursing Home Residents	As a result of this program, nursing home residents will improve their level of cognition, experience less depression, and improve their behavioral functioning. An additional benefit is the development of intergenerational relationships that are created as a result of this project.	Direct Improvements to Quality of Life	Results pending
Wisconsin	\$200,000.00	December 2017 – November 2019 (two years)	Nursing Home Lighting to Improve Resident Health and Lower Fall Rates	The Midwest Lighting Institute will conduct a pilot study in two Wisconsin nursing homes to determine if the installation of energy-efficient LED lighting will improve health by: helping residents maintain better daytime alertness and cognitive function, improving sleep and reducing their symptoms of depression, and improving safety by helping residents see better and move around more easily. The pilot is an opportunity to understand how the right spectrum of light may improve the lives of nursing home residents.	Midwest Lighting Institute, Inc.	Two Wisconsin nursing homes	Significant improvements in health as assessed by improved cognitive function; better sleep; reduced agitation; reduced symptoms of depression; and a significant reduction in the incidence of falls (reducing injury and consequential health burdens). Results from the pilot study will be presented to all nursing homes via three statewide seminars and webinars.	Direct Improvements to Quality of Life	Results pending

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Wisconsin	\$1,159,200.00	July 2017 – July 2019 (two years)	Caregiver Career Program	The program is designed to encourage individuals to enter caregiver careers. The program includes a comprehensive marketing and recruitment plan, highlighting the program and the rewarding aspects of working as a nurse aide. Nurse aide training and testing is provided by the program at no cost to the student, and a \$500 retention bonus is paid by participating nursing homes to nurse aides after six months on the job. Regular webinars will be provided for nursing homes offering best practices for staff recruitment and retention.	Wisconsin Department of Health Services	Wisconsin nursing homes	The project will increase the number of nurse aides in Wisconsin nursing homes by 3,000, highlight the rewarding aspects of working as a nurse aide caring for elders, and hold regular webinars for nursing home staff, featuring nationally recognized speakers who will share staff recruitment and retention best practices.	Direct Improvements to Quality of Care	Results pending

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Arkansas	\$360,000.00	July 2017-June 2018 (one year)	Quality Assurance and Performance Improvement (QAPI) Based Approach to Meaningful Life, Empowered Staff, and Real Home	Residents living in nursing home communities should have increased quality of life, not only at the nursing home, but within the provider community at-large. This project will advance improved quality of care through improved communication about individual plans of care. Residents will benefit from improved care transitions between providers and have a reduction in unnecessary medications and overall pharmacological interventions.	Progressive Eldercare Services- Green, Inc. DBA; The Green House Cottages of Belle Meade	Residents of the Green House Cottages of Belle Meade	Quality measures will be tracked regarding person-centered care and non- pharmacological interventions.	Direct Improvements to Quality of Care	Results pending
Louisiana	\$19,096.00	July 2017 - June 2018 (one year)	It's Never Too Late (iN2L)Techno- logy	The goal of this project is to improve resident activity programming through the use of iN2L, an interactive, touch screen computer system.	St. James Place (nursing home)	Residents of St. James Place	Project aims to increase in the number of residents who participate in individual and group activities.	Direct Improvements to Quality of Life	Increased resident participation in activities
Louisiana	\$19,500.00	July 2017 - June 2018 (one year)	It's Never Too Late (iN2L): Living Life to the Fullest	The goal of this project is to improve resident activity programming through the use of an interactive, touch screen computer system (iN2L).	Villa Feliciana Medical Center	Residents of Villa Feliciana nursing home	Project aims to increase in resident participation in group and individual activities.	Direct Improvements to Quality of Life	Increased resident participation in group and individual activities

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Louisiana	\$42,550.00	July 2017 - June 2018 (one year)	Scholarships for RN Preparation Program for Certification in Gerontological Nursing	Identify and support 30 RNs through an on-line gerontological nursing certification preparation course	Louisiana State Nurses Association	The project is being administered by the Louisiana State Nurses Association (LSNA). The budget allows for LSNA to purchase ANCC preparation courses offered by the University of Nebraska and to pay certification examination fees to the ANCC.	Scholarships for 30 RNs	Training	Results pending
Louisiana	\$101,733.00	July 2017 - June 2018 (one year)	Antipsychotic Reduction	The goal of this project is to reduce the reliance on antipsychotics by providing on- site training to nursing facilities with high percentages of residents who are prescribed antipsychotics.	SBAFA, Inc. (Shirley Barbara Freche Anthony, RN Consultant)	Louisiana nursing homes	Reduction in the use of antipsychotics in the facilities where on-site training is delivered	Training	Marked reduction in the use of antipsychotic medications in participating nursing homes
Louisiana	\$177,103.00	July 2017 - June 2018 (one year)	Recollection Toolkits and Specialized Dementia Training	The goal of this project is to improve care to residents with dementia through staff training and specialized activities.	Alzheimer's Services of the Capital Area	50 Louisiana nursing homes	On-site training in 50 nursing facilities and the dissemination of kits that are specially designed to assist in the delivery of activities to individuals living with Alzheimer's disease.	Training	To date, 223 staff members at 16 different nursing homes have received training.

Region 6									
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Louisiana	\$5,000.00	March 2017 (Conference held on March 29, 2017)	24th Annual Conference on Alzheimer's Disease and Dementia	This project underwrote the expenses of a national expert, who provided education and training to nursing home staff members about understanding and coping with Alzheimer's Disease.	Alzheimer's Services of the Capital Area	Conference attendees	Conference attendance and evaluation	Training	Conference attendees included 37 social service designees; two activity therapists; and seven administrators; 94% of all attendees rated the conference as "excellent"
Louisiana	\$19,492.00	July 2017 - June 2018 (one year)	Broadband Computer Club	The goal of this project is to improve resident quality of life through improved activity programming and social engagement through the use of an interactive, touch screen computer system - It's Never Too Late.	Broadway Elder Living and Rehab	Nursing home residents of Broadway Elder Living and Rehab	Increase in resident participation in activities; increased social connections via Skype	Direct Improvements to Quality of Life	Increased participation in social activities and positive feedback from residents and staff
Louisiana	\$19,492.00	July 2017 - June 2018 (one year)	Hashtag Residents on Computers	The goal of this project is to improve resident quality of life through improved activity programming and social engagement through the use of an interactive, touch screen computer system - It's Never Too Late.	Eastridge Nursing and Rehab	Residents of Eastridge Nursing Home	Increase in resident participation in activities; increased social connections via Skype	Direct Improvements to Quality of Life	Increased participation in social activities and positive feedback from residents and staff
Louisiana	\$19,492.00	July 2017 - June 2018 (one year)	Encore's Cajun Clickers	The goal of this project is to improve resident quality of life through improved activity programming and social engagement through the use of an interactive, touch screen computer system - It's Never Too Late.	Encore Healthcare and Rehab	Residents of Encore Healthcare	Increase in resident participation in activities; increased social connections via Skype	Direct Improvements to Quality of Life	Increased participation in social activities and positive feedback from residents and staff
Louisiana	\$19,000.00	July 2017 - June 2018 (one year)	Growing and Maintaining Haven Household Culture	The goal of this project is to enable staff to help grow and maintain the skills needed for the facility's households.	Haven Nursing Center	Haven nursing home staff	75-85 staff will participate in Household Basic Training; 12-15 staff will participate in Household Leadership Development.	Training	Results pending

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Louisiana	\$19,500.00	July 2017 - June 2018 (one year)	JoEllen Smith Spa Retreat	The goal of this project is to improve the bathing experience for residents by creating a spa- like bathing environment and providing staff training.	JoEllen Smith Living Center	Residents and staff of JoEllen Smith Living Center	Increased resident satisfaction	Direct Improvements to Quality of Care	Increased resident satisfaction
Louisiana	\$12,881.00	July 2017 - June 2018 (one year)	Living Design Bird Aviary	The goal of this project is to improve resident quality of life through the introduction of a bird aviary.	Legacy Port Allen	Residents of Legacy Port Allen nursing home	Installation and maintenance of a bird aviary; increased resident social engagement	Direct Improvements to Quality of Life	Aviary is under construction
Louisiana	\$17,540.00	July 2017 - June 2018 (one year)	Greener Memories	The goal of this project is to improve resident quality of life by providing an outdoor space that invites social engagement and activities.	Many Healthcare	Residents of Many Healthcare	Increased resident and family satisfaction	Direct Improvements to Quality of Life	Increased use of outdoor space
Louisiana	\$19,500.00	July 2017 - June 2018 (one year)	Joy in Bathing	The goal of this project is to improve the bathing experience for residents by creating a spa- like bathing environment and providing staff training.	Regency House	Residents of Regency House	Increased resident engagement in bathing	Direct Improvements to Quality of Care	Increased resident satisfaction

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Louisiana	\$18,881.00	July 2017 - June 2018 (one year)	Creating and Utilizing Innovative Therapies to Improve Our Residents' Activities of Daily Living (ADLs) and Functionality	The goal is to improve resident ADL function through the use of an interactive, touch screen computer system, It's Never Too Late.	St Luke's Nursing Facility	Residents of St. Luke's	Increase the number of residents engaged in rehabilitation; decrease the number of residents with ADL decline	Direct Improvements to Quality of Life	Increased duration of therapy sessions; positive feedback from residents
Louisiana	\$40,000.00	Dec 2017-May 2018 (18 months)	Louisiana Enhancing Aging through Dignity, Empowerment and Respect (LEADER) Summit	Provide training about best practices in nursing home culture change	LEADER	Conference attendees	Conference attendance and evaluation	Training	Results pending
New Mexico	\$27,500.00	June 2017 - September 2017 (three months)	Empowerment of the Frontline Caregiver Project	Award 10 scholarships to 10 certified nurse aides (CNAs) to attend the National Association of Health Care Assistants Conference in Washington D.C. (September 6-7, 2017). The ten recipients will also present at the 2018 Leadership Symposium. This training will help build leaders, motivate, and educate front line nursing care staff.	National Association of Health Care Assistants	10 Certified Nurse Aides	10 Certified Nurses Aides attended the National Association of Health Care Assistants Conference held on September 6-7, 2017. Each candidate submitted a short essay, outlining their commitment to quality and resident satisfaction, along with three letters of recommendation.	Training	Positive feedback received from the seven CNAs who attended the National Association of Health Care Assistants Conference in Washington, DC. The recipients participated in a panel discussion at the 2018 Leadership Symposium held in Santa Fe. They shared what they learned and how they have been able to implement the information learned at the conference into their day-to day activities at the facility.

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New Mexico	\$94,378.00	July 2017 - March 2018 (nine months)	Infection Control: Enhancing Quality of Care in Long- term Care Facilities in New Mexico	Provide Fundamentals in Long- term Care Infection Control training to currently designated infection preventionists in New Mexico long-term care facilities. The purpose of the project is to increase long-term care staff knowledge in infection control prevention, surveillance, and reporting, leading to improved patient safety, reduced performance deficiencies.	Infection Control Consultants of New Mexico	At least ten New Mexico nursing facilities, with 40 nursing home staff completing the training	Training of 40 nursing home facility nurses. Program planning and infection control surveillance. New Mexico Association for Professionals in Infection Control and Epidemiology training.	Training	Initial conference was well- received by all participants. The group will make future requests to continue with the progress.
Oklahoma	\$160,275.00	January 2017- December 2019 (two years)	Oklahoma State Department of Health (OSDH) Joint Provider Training	Provide joint education for surveyors and providers on regulations and best practices. Provide funding for two, full-day joint trainings each calendar year.	OSDH	Oklahoma nursing homes and OSDH Survey Team	Number of organizations and individuals attending	Training	2017 trainings were held. 9/26/17 (OKC) and 10/10/17 (TULSA) featured speakers from the Naomi Feld and Teepa Snow groups to improve dementia care. 276 individuals attended the Tulsa Training, which received an average satisfaction rating of 3.8 on a 4-point scale. 277 attended the OKC, which received an average satisfaction rating of 3.4 on a 4-point scale. A total of 239 facilities and 78 OSDH staff participated in the 2017 training sessions. Planning for the 2018 training begins in mid-February.

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Oklahoma	\$2,672,525.91	April 1, 2017 - March 31, 2020 (38 months)	Transform Long Term Care	This project will recruit and assist up to 60 facilities and provide intensive, on-site technical assistance that includes: mentoring full quality assurance and performance improvement (QAPI) implementation; assuring identification of appropriate measures for improvement, guiding the QAPI team in data collection and monitoring for improvement, and providing associated education, tools, and resources. As part of the project, will host two regional meetings in four locations (for a total of 24 meetings). Will also host, record, and post two webinar trainings per contract year. These virtual and regional events will facilitate the spread of best practices.	Oklahoma Foundation for Medical Quality (OFMQ)	Participating Oklahoma nursing homes	Among the participating nursing homes: over 50% of quality measures and process measures will show improvement from baseline by the end of the project. Over 50% of the facilities will have a fully functioning QAPI program within 12 months of recruitment Educational offerings will yield a 3.5 satisfaction score (or over). <i>Note</i> : "Improvement" is defined as either a positive relative improvement rate (RIR) or a positive absolute rate. "Positive" is defined as movement in the expected direction for the measure.	Direct Improvements to Quality of Life	Recruitment: Participation vacillates, with an average of 58 recruited homes. Currently preparing for a round of regional meetings. Staff are being trained as Laughter Yoga Leaders; this is one of the many skills that the contractor takes to QAPI site visits. These are real tools that build capacity among direct care staff and improve the quality of life among nursing home residents. Of the 53 homes having sufficient training to date, 52.8% of the participating nursing homes improved.
Oklahoma	\$164,445.00	April 2017 – February 2018 (15 months)	Nurses Improving Care for Healthsystem Elders (NICHE)	Phase III of the NICHE in Long Term Care Community project	Geriatric Collaborative Care Nursing Services (GCCNS)	Two participating nursing homes and their staff	Clinical education and bedside rounds, based on the NICHE training modules	Training	Phase Three concludes this pilot program. Although quality metrics have improved, the current format is unsustainable. GCCNS has been instructed to initiate a train- the-trainer approach. Additional results will be available in June 2018.

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Oklahoma	\$797,026.35	April,1 2017- March 31, 2020 (36 months)	Less Is More	This project is focused on the optimization of medication systems (reducing antipsychotics and unnecessary medications). The Eden Alternative, a global non-profit focused on providing innovative approaches to care, has developed an educational initiative, "Less Is More: Well- being Before the Med Cart" to address the optimization of medication systems. This project aims to recruit up to sixteen nursing homes, with each facility attending five Institute for Health Improvement Breakthrough Series Collaborative sessions. The project goal is to see a reduction (from baseline) in the use of medications on the Beers Criteria for Potentially Inappropriate Medication Use in Older Adults (BEERS Criteria) list by the end of the project.	Oklahoma Foundation for Medical Quality; Eden Alternative; Oklahoma University College of Pharmacy	Participating Oklahoma nursing homes	The project will hold five collaborative sessions and aim for the improvement of the following quality metrics: immunizations (pneumococcal and influenza) measure: increase immunization rates (from baseline) by project conclusion; number of medications (optimizing medications): reduce (from baseline) the average number of medications per resident by project conclusion (scheduled and as needed/PRN); anti- psychotic medication reduction: reduce (from baseline) the use of anti- psychotic medications by project conclusion; knowledge improvement: identify improvement from pre-session knowledge.	Training	18 nursing homes have been recruited (16 was the goal). The first two learning sessions have been held in three locations. The third is scheduled for April 2018. Pre- and post-test results for both sessions show relative improvement.

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Oklahoma	\$408,028.00	April 1, 2017 - March 31, 2019 (26 months)	Person Centered Oral Care	This project will recruit 40 nursing homes for education and will provide oral health screenings for ten residents in each home. The project's key objectives are to: establish a statewide Oklahoma Resident Oral Care Advisory Group (OROCAG) to address older adult oral health challenges, improve nursing home staff knowledge, engagement in and skills for advancing person- centered oral care for residents, improve nursing home residents' oral-related activities of daily living, improve nursing home resident weight stability, provide an oral health toolkit that facilities will utilize to improve resident oral health care, reduce the incidence of oral health-related hospitalizations, gather oral health surveillance data via the Basic Screening Survey (BSS), which will strengthen the Oklahoma state data repository gaging oral health burden, and develop a sustainability plan to continue training and expand the project statewide.	TMF Health Quality Institute	Participating Oklahoma nursing homes	OROCAG will develop a work plan for nursing home CNA program training and toolkit, as well as initiatives to gain support for nursing home oral health care statewide. Nursing home staff will have more knowledge and strategies/care plans for personalized resident oral care. More residents will perform independent daily oral care and experience improved eating/chewing ability. Fewer residents will lose weight as a result of inability to eat due to oral issues. Facilities will use the toolkit to improve at least one aspect of resident oral health. Residents will face fewer oral health-related hospitalizations. BSS assessments will be conducted on at least ten residents at each participating nursing home. OROCAG will develop a plan to expand the program to at least 50 nursing homes beyond the initial two- year project period.	Direct Improvements to Quality of Care	As of 12/31/17, 15 nursing homes have been recruited and 127 oral screens have been conducted during the first wave of the project. A total of 26 in-services have been conducted. Pre- and post-test results indicate an increase in knowledge, with a 32% knowledge gain for direct care staff. Residents report satisfaction, sharing stories about how they have taken care of their teeth their entire lives, but no longer have the means to do so. Residents state they appreciate the attention to oral health. An advisory group has been formed and meets regularly.

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Oklahoma	\$787,783.00	September 1, 2017 – June 30, 2019 (22 months)	Step Up for Dementia Care	This project will provide dementia-specific training to build daily care skills, knowledge, and empathy among direct care health professionals in 120 nursing homes. To achieve the project's goal of improving the quality of dementia care in Oklahoma nursing homes, the project will: use an evidence-based, dementia-specific training curriculum, "Walking Through Dementia," use an evidence- based training tool, "Bathing Without Battles," to provide dementia- specific skills training on bathing (which is a high-anxiety, high-risk activity among direct care health professionals), establish sustainable access to skills- and empathy-building trainings by providing "train-the-trainer" education and curricular materials to selected nursing facility staff; these staff would then be responsible for future dissemination of the knowledge, attitudes, and skills imparted by the curricula.	Oklahoma University College of Public Health, Oklahoma Foundation for Medical Quality	Participating Oklahoma nursing homes	The project intends to recruit 120 homes, foster improvement in knowledge and attitudes (as demonstrated by a pre-post training questionnaire), host a number of train-the-trainer sessions and measure the number of individuals attending trainings provided during the project period.	Training	Recruitment is on-going, with 30 homes participating and scheduling in-services. To date, training has been provided to 3 facilities. Facilities express a preference for a singular event, rather than an all-day station. The team remains flexible to meet each facilities' needs and the project continues to progress.

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Texas	\$8,481.73	April 5, 2017 – July 31, 2017 (three months)	Ice Cream Socials	Through this project, the facility will utilize one ice cream machine in its primary activity department and the other in the secondary activity location in the Alzheimer's neighborhood (a secured environment).	Cartmell Home for Aged, Inc.	Residents of Cartmell Home for Aged	Usage of ice cream machines for ice cream social activities; final report submission	Direct Improvements to Quality of Life	One machine was placed in the activity area in a secure neighborhood of ~ 35 residents. This neighborhood has a dedicated activity director who used the machine weekly for residents to enjoy ice cream treats. The second machine was placed in the primary activity department, which is the gathering location for the broader resident population (~135). In this location, ice cream treats are served on average of three times/week. The machines are definitely a benefit to the seniors living here, especially for those who need help in achieving and maintaining weight goals.
Texas	\$3,716.69	July 1, 2017- September 30, 2017	Memory Garden	This project will enable the creation of a garden activity program that includes a memory garden in the outdoor area of the memory care wing. This will enhance the lives of residents in the 32-bed memory care wing. The garden will incorporate vivid colors and aromatic smells, which will help stimulate residents' sensory brain function and serve as a catalyst in enriching cognitive function. The outdoor activity will also provide residents a fun and engaging area in which to benefit from being outdoors.	Shady Acres Health and Rehabilita- tion	Residents of Shady Acres	Purchase/acquire/deliver materials for project; begin site preparation work and mark ground for new structures. Open garden to residents; submit final report	Direct Improvements to Quality of Life	The project resulted in the development of a garden activity program, made possible by constructing four outdoor raised planters, which residents can access at their height. Through the project, we learned that assigning a single project manager who can see the project through to completion would have worked best. Additionally, hiring an outside party to construct all work is recommended.

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Texas	\$30,820.94	July 12, 2017 – June 30, 2018	It's Never Too Late (iN2L)	This project will implement iN2LTechnology. In doing so, the facility aims to improve quality of life and the provision of care for residents with behavioral and psychological symptoms. iN2L enables non- pharmacological care through engagement with technology, which will reduce the use of as needed (PRN) antipsychotics.	Renaissance Skilled Nursing Facility, L.L.C.	Residents of the Renaissance at Kessler Park	Order, install, and purchase licensing for iN2L technology; train staff/residents; implement schedule of iN2L usage; provide maintenance to equipment; provide refresher course training; submit final report	Direct Improvements to Quality of Life	Results pending
Texas	\$15,000.00	June 1, 2017- September 14, 2017 (three and a half months)	It's Never Too Late (iN2L) Program	This project will implement It's Never Too Late (iN2L) technology. This will increase activity levels, providing positive living for facility residents.	Green Oaks Skilled Nursing Facility, L.L.C.	Residents of Green Oaks Rehab and Nursing	Order, install, and purchase licensing for iN2L technology; train staff, residents, and families; provide final introductory training; submit final report	Direct Improvements to Quality of Life	Received positive feedback from residents. Usage ranged from 154 to over 305 hours in a single month. Residents who are restless or yelling out are able to focus on the jukebox or possibly a reminiscing game. iN2L has been used for: cognitive stimulation, Facebook, emailing friends/family, residents are able to use fine motor skills in several activities by painting on the screen and choosing screen options. In terms of lessons learned, the facility was able to reach out to residents with music when unable to reach them in other ways. Having access to programs of interest to residents helps capture their attention and stimulate their minds.

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Texas	\$172,414.00	July 1, 2017 – September 30, 2019 (27 months)	Our Home, Our Community, Our Voices Matter: A Nursing Facility Resident Advocacy Pilot in Rural West Central Texas	This project will fully fund a two- year self-advocacy and community organizing pilot program for nursing facility residents located in rural West Central Texas. This program will enhance the self-advocacy skills of nursing facility residents through education and deliberate practice, while also building coalitions of nursing facility self-advocates through community organizing strategy and education.	West Central Texas Council of Govern- ments	West Central Texas Area Agency on Aging Ombudsman Program; resident self- advocates	A self-advocacy coordinator will be hired and a curriculum developed; materials will be produced to assist with recruitment and publicity. At least 50 one-on-one interviews will be conducted with nursing home residents to discover their needs and wants. A Project Advisory Committee will be formed, and monthly community organizing meetings will be held to discuss community organizing and advocacy strategy. As needed, 30 follow-up meetings will be held with individual residents to assist them with self-advocacy activities. A legislative platform and agenda will be developed; residents may have an opportunity to present at a professional event. The coordinator will attend trainings, monitor relevant legislation, and provide quarterly reports. Interviews with other local advocacy groups will be held to determine opportunities for collaboration. At least two visits will be coordinated for residents to meet with legislators in local offices. To measure impact, pre- and post-project self- assessments and observations will be administered and collected. A plan for sustainability (including curriculum materials for resident and family councils), as well as a report with analysis and recommendations, will be	Direct Improvements to Quality of Life	Results pending

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Texas	\$7,163.55	July 1, 2017 – October 31, 2017	Residents Scream for Ice Cream at Carriage House Manor	Through this project, Carriage House Manor will install a soft serve ice cream machine to enrich the dining experience for residents who associate ice cream with their heritage and to help prevent resident weight loss.	Carriage House Manor	Residents of Carriage House Manor	Purchase and install soft serve ice cream machine; monitor the effects of the ice cream machine on resident weight maintenance and resident satisfaction.	Direct Improvements to Quality of Life	The ice cream machine was ordered and delivered to the facility. It has been a huge success with residents. Residents generally use an entire mix of soft-serve by the end of the day. The residents request it with meals and as midnight snacks. The facility offers it to residents who have little food preference to combat weight loss. Several socials have been hosted using soft serve for residents.
Texas	\$25,475.33	August 2, 2017 - July 31, 2020 (three years)	"What Matters to Me": A Person- Centered Care Video Training Series	This project will produce six person-centered care training videos to improve quality of life and quality of care. This will provide facilities with a training tool that models skills for improving communication between nursing home direct caregivers, facility management, and residents. In turn, resident quality of life and care will be enhanced through improved person-centered care practices. The training videos will be available through the Office of the Texas Long Term Care Ombudsman (OSLTCO) website, the National Long-term Care Ombudsman Resource Center website, and Texas nursing homes.	Health and Human Services Commission; OSLTCO	Nursing home facilities; long- term care ombudsmen	Expected deliverables include six short videos that demonstrate person- centered care; a trainer's guide (based on video content) for training purposes; pre- and post-test for nursing home use. The project will also include four regional train-the- trainer sessions for long- term care ombudsmen throughout Texas.	Training	Results pending

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Texas	\$550,651.60	November 15, 2017 – September 30, 2020 (34.5 months)	Music and Memory Initiative, Phase Four	This project aims to certify an additional 200 Texas nursing homes as Music and Memory certified facilities. The project is a two- phase initiative. Phase One will certify 100 nursing facilities, and Phase Two will certify an additional 100 nursing facilities. The rollout of this project will ensure that participants engage in the program in its entirety and that all webinars and training events are attended.	Health and Human Services Commission Quality Monitoring Program	200 Texas nursing homes	Select, reach out to, and confirm the first 100 facility nominees; conduct Music and Memory program launch and orientation for Phase One participants; conduct 12-part webinar series for Phase One participants; select, reach out to, and confirm the 100 facility nominees for Phase Two; conduct Music and Memory Program launch and orientation for Phase Two participants; conduct 12- part webinar series for Phase Two participants. Gather data from facility participants to measure program success; submit cumulative report to CMS.	Direct Improvements to Quality of Life	Results pending

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Texas	\$223,597.60	June 1, 2017 – March 15, 2019 (21.5 months)	Intellectual and Developmen- tal Disability (IDD) / Mental Illness (MI)Training Academy	This project will provide comprehensive education and training on caring for nursing facility residents with various intellectual and developmental disabilities, as well as those with mental illness. Eight regional face-to-face trainings will be held across the state. Upon completion of regional trainings, evaluations will be reviewed to identify any content areas that need to be revised. Once revisions are made, parts of the curriculum will be converted into a computer based training module, while the remainder will be taught by Quality Monitoring Program (QMP) staff (as requested by nursing home providers). Facilities will be able to access all tools and job aides created for this project (at no cost) on the Health and Human Services Commission Quality Monitoring Program website.	Health and Human Services Commission Quality Monitoring Program	Nursing home staff throughout Texas	This project has a number of expected deliverables, including: Kick-off and practice session; deployment of an outreach plan to publicize registration information and promote participation of nursing facility staff; conducting eight regional trainings; reviewing training evaluation scores and comments to determine and implement potential improvements/revisions to the curriculum; converting the modules into computer- based training format; launching computer-based training and QMP staff resources for facilities to use as a sustainable training resource.	Training	Results pending
Texas	\$6,250.00	July 2, 2017 – July 31, 2018 (13 months)	Virtual Dementia Tour (VDT)	This project will enable three staff members to attend the VDT-Certified Trainer Program and become certified to conduct VDT trainings within the facility. The VDT program will help raise awareness of the effects of dementia on a person's life and create an educational "safety net" within the Oaks Nursing Center community to better understand and help those who suffer from any type of dementia or cognitive decline.	Oaks Nursing Center	Staff at Oaks Nursing Center	Three staff to complete Second Wind Dreams' VDT facilitator training; arrange four educational setting/tours at other facilities to train staff company-wide; purchase VDT license for one year; implement VDT program ; host community event to learn about dementia "from the inside"; update facility's dementia care education policy and calendar to reflect integration of VDT	Training	Results pending

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Texas	\$366,962.24	October 1, 2017 – February 28, 2020 (29 months)	Train-the Trainer Program: Handfeeding Techniques for Nursing Facility Residents	This project aims to teach nursing facility staff the skills needed to reduce the risk of weight loss in all residents experiencing the type of functional decline that warrants feeding assistance with meals. As part of this project, four regional training sessions will be conducted. Each regional training will be comprised of ten facilities (20 staff per session). The trainings will combine information sharing, small group role plays, and hands-on skills training. Participating facilities will be required to participate in regional follow-up debriefing webinars within four to six weeks after they are trained. Participating facilities will also be required to conduct training sessions in their own facilities within two months of participating in the training session.	Health & Human Services Commission Quality Monitoring Program (QMP)	40 Texas nursing homes	Expected deliverables include: confirming participating nursing facilities, who will each identify two staff to attend training sessions with Dr Melissa Batchelor-Murphy and QMP Master Trainers; producing training materials (e.g., training manuals, classroom visual aids, training videos, role play kits); creating pre- and post- test for nursing home use; conducting Master Training Sessions and having Master Trainers co-facilitate sessions for the nursing facility staff trainers; conducting post-training webinars; revising training program/ materials as needed (prior to implementation in next region).	Training	Results pending

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Texas	\$17,660.99	November 1, 2017 – October 31, 2018 (one year)	Engaging Residents Through the Use of Digital Technology	This project will implement It's Never Too Late (IN2L) technology at the facility. IN2L will provide opportunities for social involvement, recreation, and cognitive training for residents with dementia. IN2L will enable the facility to improve quality of life and care for residents with behavioral and psychological symptoms (in a non-pharmacological manner, through engagement with technology). This will reduce the use of as needed (PRN) antipsychotics.	Winfield Rehab and Nursing	Residents of Winfield Rehab and Nursing	Project deliverables/ metrics include: purchase and installation of IN2L equipment; conducting on- site training, installation, and program rollout; conducting baseline Activity Engagement Outcome Survey; and entering baseline antipsychotic use data in the Medication Tracking Tool. The facility will make stakeholders aware of the project through outreach materials and a meeting to unveil the system to residents, families, volunteers, etc. They will: create My Page buttons and My Story digital biographies for residents; highlight IN2L activities; and publicize monthly training opportunities. Program impact will be continually monitored through the review of IN2L Outcome Survey and Usage Reports, as well as antipsychotic usage data. Best practices will be shared, and refresher trainings will be conducted. A final evaluation report will be submitted.	Direct Improvements to Quality of Life	Results pending

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Texas	\$12,099.00	November 1, 2017 – October 31, 2018 (one year)	It's Never Too Late (IN2L)	This project will implement It's Never Too Late (IN2L) technology. This will provide opportunities for social involvement, recreation and cognitive training for facility residents with dementia. IN2L will enable the facility to improve quality of life and care for residents with behavioral and psychological symptoms (in a non- pharmacological manner, through engagement with technology). This will reduce the use of as needed (PRN) antipsychotics.	Whitehall Rehab and Nursing	Residents of Whitehall Rehab and Nursing	Project deliverables/ metrics include: purchase and licensing of IN2L technology; completion of training and baseline survey(s); compilation of data on residents receiving antipsychotic medications	Direct Improvements to Quality of Life	Results pending			
Texas	\$25,974.59	November 1, 2017 – October 31, 2018	It's Never Too Late (IN2L)	This project will implement It's Never Too Late (IN2L) technology. This will provide opportunities for social involvement, recreation, and cognitive training for all facility residents. The project will assist with decreasing antipsychotic medication use and negative behavioral outbursts. It will improve quality of life for all residents and increase staff knowledge regarding resident needs and abilities.	McAllen Nursing Center and Rehab	Residents of McAllen Nursing Center	Project deliverables/ metrics include: purchase and licensing of IN2L technology; staff and resident training; implementation of a schedule for IN2L usage; and the provision of equipment maintenance.	Direct Improvements to Quality of Life	Results pending			
Texas	\$64,603.60	November 1, 2017 – October 31, 2018 (one year)	It's Never Too Late (IN2L)	This project will implement It's Never Too Late (IN2L) technology. This will provide opportunities for social involvement, recreation and cognitive training for facility residents with dementia. IN2L will enable the facility to improve quality of life and care for residents with behavioral and psychological symptoms (in a non-pharmacological manner, through engagement with technology). This will reduce the use of as needed (PRN) antipsychotics.	Advanced Healthcare Solutions	Advanced Health and Rehabilitation Center of Garland; Wedgewood Nursing and Rehab; Colonial Manor Nursing Center; Parkview Care Center	Project deliverables/ metrics include: purchase and licensing of IN2L technology; staff and resident training; implementation of a schedule for IN2L usage; and the provision of equipment maintenance.	Direct Improvements to Quality of Life	Results pending			

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Texas	\$12,099.00	November 1, 2017 – October 31, 2018	It's Never Too Late (IN2L)	This project will implement It's Never Too Late (IN2L) technology. This will provide opportunities for social involvement, recreation, and cognitive training. The project will serve all residents, including residents with behavioral and psychological symptoms; the project will assist with decreasing antipsychotic medications and negative behavioral outbursts that affect others. Overall, the program aims to decrease use of psychotropic medications, improve socialization and quality of life, enrich communication with family/friends/community, enhance resident independence, and increase cognitive stimulation.	Community Care Center of Crockett	Residents of Community Care Center of Crockett	Project deliverables/ metrics include: purchase and licensing of IN2L technology; training staff, caregivers, and volunteers; equipment utilization; and conducting surveys	Direct Improvements to Quality of Life	Results pending
Texas	\$17,660.99	November 1, 2017- October 31, 2018 (one year)	It's Never Too Late (IN2L)	This project will implement It's Never Too Late (IN2L) technology. This will provide opportunities for social involvement, recreation, and cognitive training. The project will: help decrease use of psychotropic medications, improve socialization and quality of life, enrich communication with family and community, enhance resident independence, increase cognitive stimulation, and initiate other programs within the facility.	Whispering Oaks Rehab and Nursing	Residents of Whispering Oaks	Project deliverables include: purchase, licensing, and installation of IN2L technology; training staff and volunteers; promoting program to families and volunteers; training of family members and additional volunteers (by staff and volunteers); providing usage tracking reports once a month	Direct Improvements to Quality of Life	Results pending

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Texas	\$17,660.99	November 1, 2017- December 31, 2019 (26 months)	It's Never Too Late (iN2L)	This project will implement It's Never Too Late (iN2L) technology. The program aims to improve quality of life, as well as how residents with behavioral and psychological symptoms are cared for in a non-pharmacological manner. The project will help decrease use of psychotropic medication, as well as improve socialization and quality of life. In addition, it will enrich communication with family and community, enhance resident independence, and increase cognitive stimulation.	Southeast Nursing & Rehabilita- tion Center	Residents of Southeast Nursing Center	Project deliverables/ metrics include: purchase and installation of iN2L equipment; conducting on- site training, installation, and program rollout; conducting baseline Activity Engagement Outcome Survey; and entering baseline antipsychotic use data in the Medication Tracking Tool. The facility will make stakeholders aware of the project through outreach materials and a meeting to unveil the system to residents, families, volunteers, etc. They will: create My Page buttons and My Story digital biographies for residents; highlight iN2L activities; and publicize monthly training opportunities. Program impact will be continually monitored through the review of iN2L Outcome Survey and Usage Reports, as well as antipsychotic usage data. Best practices will be shared, and refresher trainings will be conducted. A final evaluation report will be submitted.	Direct Improvements to Quality of Life	Results pending

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Texas	\$17,660.99	November 1, 2017 - October 31, 2020 (three years)	Dignity Through Technology at Palo Pinto Nursing Center	This project will implement It's Never Too Late (iN2L) technology. The program provides opportunities for social involvement, recreation, improved motor functioning, and cognitive linguistic stimulation. The project also helps facilitate communication with patients and their families, and decrease the need for antipsychotic medications for patients with behavioral and psychological symptoms. Additionally, the program aims to decrease the amount of assistance a patient needs to participate in activities of daily living, resulting in an improved sense of autonomy and personal confidence.	Palo Pinto Nursing Center	Residents of Palo Pinto Nursing Center	Project deliverables/ metrics include: purchase and installation of iN2L equipment; conducting on- site training, installation, and program rollout; conducting baseline Activity Engagement Outcome Survey; and entering baseline antipsychotic use data in the Medication Tracking Tool. The facility will make stakeholders aware of the project through outreach materials and a meeting to unveil the system to residents, families, volunteers, etc. They will: create My Page buttons and My Story digital biographies for residents; highlight iN2L activities; and publicize monthly training opportunities. Program impact will be continually monitored through the review of iN2L Outcome Survey and Usage Reports, as well as antipsychotic usage data. Best practices will be shared, and refresher trainings will be conducted. A final evaluation report will be submitted.	Direct Improvements to Quality of Life	Results pending

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Texas	\$20,800.00	November 15, 2017- November 30, 2018 (13.5 months)	Chair Tai Chi Resident Classes	This project will contract with a chair Tai Chi instructor in order to implement Chair Tai Chi classes, five days a week, two times a day, for 12 months. Participation in these classes will increase resident well-being, strength, and independence. It will also lower resident risk of falls, thus decreasing injuries from falls.	Methodist Retirement Community Towncreek	Methodist Retirement Community Creekside	Contract Chair Tai Chi instructor to conduct classes; implement classes. Baseline assessment will be conducted for each resident involved in the program. Further assessment will be conducted quarterly for each resident participating in the program.	Direct Improvements to Quality of Life	Results pending
Texas	\$17,620.20	December 1, 2017- November 30, 2020 (three years)	It's Never Too Late (iN2L)	This project will implement It's Never Too Late (iN2L) technology, improving quality of care of residents with symptoms of dementia, stroke, and psychological symptoms. By using technology (a non- pharmacological method), the use of antipsychotic medications may be reduced.	Mesquite Tree Nursing Center	Residents of Mesquite Tree Nursing Center	Project deliverables/ metrics include: purchase and installation of iN2L equipment, conducting on- site training, installation, and program rollout, conducting baseline Activity Engagement Outcome Survey; and entering baseline antipsychotic use data in the Medication Tracking Tool. The facility will make stakeholders aware of the project through outreach materials and a meeting to unveil the system to residents, families, volunteers, etc. They will: create My Page buttons and My Story digital biographies for residents; highlight iN2L activities; and publicize monthly training opportunities. Program impact will be continually monitored through the review of iN2L Outcome Survey and Usage Reports, as well as antipsychotic usage data. Best practices will be shared, and refresher trainings will be conducted. A final evaluation report will be submitted.	Direct Improvements to Quality of Life	Results pending

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Texas	\$11,012.70	November 15, 2017 - May 15, 2018 (six months)	Gazebo	The goal of the project is to increase the availability of meaningful outdoor activities for residents who use wheelchairs or Geri-chairs. This will be accomplished through installation of a gazebo for outdoor activities, encouraging residents to remain active. This will enhance resident quality of life and provide meaningful activities. This addition will allow residents who are in wheelchairs & Geri-chairs to be brought outside to enjoy fresh air and sunlight, and to socialize with others.	Silsbee Oaks Healthcare, LLP	Residents of Silsbee Oaks	Install gazebo with ceiling fan; install wheelchair ramp and handrails	Direct Improvements to Quality of Life	Results pending

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Texas	\$17,660.99	November 28, 2017 – October 31, 2020 (34 months)	Bettering Lives Through Technological Advance- ments at Seymour Rehab and Healthcare	This project will implement It's Never Too Late (iN2L) technology, providing opportunities for social involvement, recreation, improved motor functioning, and cognitive linguistic stimulation. The program will facilitate easy access to electronic and Internet-based communication and will help facilitate communication with residents and their families. The program will also decrease the need for antipsychotic medications for patients with behavioral and psychological symptoms and will decrease the amount of assistance a resident needs to participate in activities of daily living (resulting in an improved sense of autonomy and personal confidence).	Seymour Rehab and Healthcare	Residents of Seymour Rehab and Healthcare Center	Project deliverables/ metrics include: purchase and installation of iN2L equipment, conducting on- site training, installation, and program rollout; conducting baseline Activity Engagement Outcome Survey; and entering baseline antipsychotic use data in the Medication Tracking Tool. The facility will make stakeholders aware of the project through outreach materials and a meeting to unveil the system to residents, families, volunteers, etc. They will: create My Page buttons and My Story digital biographies for residents; highlight iN2L activities; and publicize monthly training opportunities. Program impact will be continually monitored through the review of iN2L Outcome Survey and Usage Reports, as well as antipsychotic usage data. Best practices will be shared, and refresher trainings will be conducted. A final evaluation report will be submitted.	Direct Improvements to Quality of Life	Results pending

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Texas	\$1,419.88	November 16, 2017 – May 30, 2018 (6.5 months)	Interactive Companion Pets	Through this program, twelve Interactive Companion Pet dolls (cats and dogs) will be purchased. These dolls provide comfort and added companionship to residents with limited communication ability and cognitive deficits. Residents will be monitored for agitation, anger, crying and other displays of sadness; the pets will be introduced at those times with the goal of reducing resident distress.	Methodist Retirement Community Cornerstone	No data available	Interviews with residents, families, and staff will be conducted to determine which residents would benefit from companion pets. Pets will be purchased and placed into use/distributed to identified residents. Resident use will be monitored and reactions to pet use will be documented. Outcomes will be reported to CMS and the state.	Direct Improvements to Quality of Life	Results pending
Texas	\$105,439.00	December 1, 2017- November 30, 2020 (three years)	It's Never Too Late to Connect	This project will implement It's Never Too Late (iN2L) technology, including utilization of six interactive units and bike simulator. The project provides engagement with friends, family, and community. It aims to improve quality of life, reduce usage of as needed (PRN) antipsychotic medications, and reduce the incidence of behavioral and psychological symptoms of dementia.	Cleveland Health Care Center	Residents of Cleveland Health Care Center	Expected deliverables for this project include: Purchase and licensing of iN2L technology; on-site training and program rollout; participation in content update webinar and best practices group call; conduct onsite refresher training. A baseline outcome survey will be conducted and baseline antipsychotic use data compiled. During the project, antipsychotic usage data will be collected, analyzed, and reported. Program impact will be monitored; quarterly and final evaluation reports will be submitted.	Direct Improvements to Quality of Life	Results pending

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Texas	\$69,629.00	December 1, 2017 – November 30, 2020	Resident Engagement and Calming Technology (REACT)	This project will implement It's Never Too Late (iN2L) technology, an interactive and adaptive computer system that will provide a person-centered experience. Through one-on- one and group recreational and leisure activities, iN2L helps enhance the quality of care and decrease the use of antipsychotic medications. The project also aims to provide connection to resident's family members and engage residents on many dimensions of the wellness protocol.	Methodist Retirement Community: Crestview	Residents of Crestview	Expected deliverables for this project include: Purchase and licensing of iN2L technology; iN2L training for the community's staff and volunteers; and staff promotion of and training for families and volunteers; pre- and post- program interviews/surveys will be conducted, as well as a first year interview and survey and an interval interview survey. An evaluation report will be submitted to CMS and the state	Direct Improvements to Quality of Life	Results pending
Texas	\$25,076.46	December 1, 2017 – July 31, 2018 (eight months)	Snoezelen Room & Family Transitions: Resident Quality of Care Improvements	This project will create a therapeutic environment and allow for additional seating for larger families who are visiting residents. The project aims to enhance the quality of behavioral care by offering residents an enhanced activity area. Key elements include visual, tactile, and movement oriented products. The family transitional space will include additional seating and space for larger families.	Monarch Pavilion Rehabilita- tion Suites	Residents of March Pavilion	As part of this project, therapeutic room items will be purchased and installed. These items (used to promote sensory stimulation and reduce anxiety) include: an activity table, silk plants, dresses, hats, and arm pads, as well as a bubble column.	Direct Improvements to Quality of Care	Results pending

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Texas	\$59,778.00	December 1, 2017- November 30, 2020 (three years)	Resident Engagement and Calming Technology (REACT)	This project will implement It's Never Too Late (iN2L) technology, an interactive and adaptive computer system that will provide a person-centered experience. Through one-on-one and group recreational and leisure activities, iN2L helps enhance the quality of care and decrease the use of antipsychotic medications. The project also aims to provide connection to resident's family members and engage residents on many dimensions of the wellness protocol.	Methodist Retirement Community: Pinecrest	Residents of Pinecrest	Expected deliverables for this project include: Purchase and licensing of iN2L technology; iN2L training for the community's staff and volunteers; and staff promotion of and training for families and volunteers; pre- and post-program interviews/surveys will be conducted, as well as a first year interview and survey and an interval interview survey. An evaluation report will be submitted to CMS and the state.	Direct Improvements to Quality of Life	Results pending

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lowa	\$160,610.88	December 1, 2016 – December 31, 2017 (one year)	Fall Prevention - Halcyon House (WesleyLife)	This project seeks to implement a fall prevention program. This will be done through use of: wider mattresses to prevent falls from bed, and an integrated exercise program with an emphasis on improving balance.	WesleyLife Halcyon House	No data available	Decrease the number of falls, as measured by the number of falls recorded on the fall log/incident report; improve functional use of ankles, hips, and knees, as measured by range of motion score on the Fullerton Advance Balance Scale; improve confidence in stability/avoiding falls, as measured by the Activities-Specific Balance Confidence Scale.	Direct Improvements to Quality of Care	Decrease in falls from bed 63% by the end of the contract term; residents are sleeping much better, longer and more soundly; and short-term stay residents saw an 18% increase in improved locomotion.

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lowa	\$78,995.96	December 1, 2016 – December 31, 2017 (one year)	Increase Resident Participation in Activities and Fall Prevention: Sunrise Terrace Nursing and Rehabilitation Center	This project aims to: engage residents in fun and meaningful activities; improve ADL scores; reduce falls; reduce antipsychotic medication usage; and improve resident independence and happiness. In order to achieve these goals, the project will use: a comprehensive Fall Prevention Education/Training Program; the interactive computer system, "It's Never Too Late"; and a visual motor and neuro- cognitive rehabilitation training device called "Dynavision D2" (to improve cognitive processing ability, balance, and functional mobility amongst residents). Through this project, the facility will also use "RehabStation" equipment to allow residents to receive strengthening, endurance, balance, ADL function, gait, and flexibility activities. The facility will also use "RehabHarness" equipment, which utilizes a ceiling rail system and a resident safety harness to provide support for balance and gait training.	Sunrise Terrace Nursing and Rehabilita- tion Center	No data available	Maintain or improve the number of residents who have behaviors and symptoms that affect others to less than or equal to the state average. Maintain or improve the number of residents who have a decline in activities of daily living (ADL) to less than or equal to the state average. Decrease the length of stay of those whose ability to move independently worsened to below the state average. Reduce falls within the facility to less than or equal to the state average. Reduce the use of antipsychotic medication to be less than or equal to the state average.	Direct Improvements to Quality of Care	Results include a decrease in the number of residents with behavior symptoms by 1.35% from baseline. The CASPER percentage of residents whose need for help with ADLs increased. (2017: 8.1%; Q2: 13.2%; Q3: 13.3%; Q4: No data available). Goal Not Met for Long-Stay, CASPER Results: (2017: Q1: 20.2%; Q2: 31.1%; Q3: 24.8%; Q4: No data available). Reduced use of antipsychotic medication by 1.59%. Providing the education upon hire to all new employees has kept everyone educated versus having one or two fall prevention in-services a year and only having part of the staff trained. The iN2L system has increased volunteerism among school students. It provides an easy way to engage and interact with residents. Residents enjoy the students' company and the volunteers feel comfortable using the technology to engage them and make their day more enjoyable.

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lowa	\$30,820.62	December 1,2016 – March 31, 2018 (16 months)	Increase Resident Participation in Activities and Social Engagement	This project will utilize person- based technologies to: improve resident quality of life by providing activities that address the needs and strengths of each individual, enrich their social relationships through opportunities to stay connected with family, friends and the community, and address the behavioral and psychological symptoms of dementia (BPSD) through a non-pharmacological method, thereby potentially reducing the use of as needed (PRN) antipsychotics. The facility will use the computer system, "It's Never Too Late" (iN2L), to offer ongoing activities led by frontline and administrative staff, as well as utilized by families and volunteers, to attain resident engagement and socialization outcomes of improved well- being. Three mobile units, four hours of onsite training, and the 12-month subscription service will be acquired.	Spurgeon Manor (48 total residents)	No data available	Over a 12-month period: Residents will increase their participation in group and/or one-on-one activities per person by up to four activities per person per month. 20 personalized, resident personal "pages," and digital biographies reflecting the residents' preferences and interests, will be created. We plan to reduce PRN antipsychotic use by 35% or more	Direct Improvements to Quality of Life	Individual accounts have been maintained for all nursing facility residents. Nursing facility has 0% PRN antipsychotics. The iN2L system has been one of our tools to help accomplish this. Group activity usage increased from 15 groups in the first quarter to 106 groups in the fourth quarter. iN2L has continued to be used daily at Spurgeon Manor. iN2L has greatly assisted in the social engagement among residents, which also helps maintain mental sharpness.

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Missouri	\$145,000.00	November 1, 2017 - October 31, 2018 (one year)	Enhanced Leadership Development Academy (ELDA)	The purpose of ELDA is to strengthen leadership capacity, improve nurse retention, and improve quality of care in long term care facilities. The ELDA training program is a professional development certificate program for registered nurses (RN), Missouri Nursing Home Administrators (NHA), and Social Service Designees (SSD) working in Missouri long term care facilities. ELDA uses a proven curriculum to improve leadership behaviors, combining face to face meetings and two webinars. Offered over seven months, ELDA features an innovative and evidence-based curriculum with a strong focus on application to practice and peer consultation.	University of Missouri- Columbia, Nursing Outreach and Education	Missouri nursing homes	Through this project period, the University of Missouri – Columbia will provide two complete sessions of the ELDA program. Each session is open to all nursing homes in Missouri. In the first year ELDA was implemented (November 1, 2016 – October 30, 2017), 64 participants went through the program. This project is expected to develop better prepared leaders, who see themselves as highly competent for the job demands, are more likely to be reinforced by the job, see it as a career, and are less likely to leave the facility. Ultimately, retention of this type of highly qualified leader leads to higher performing nursing homes and better care outcomes.	Training	Results pending

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Missouri	\$540,000.00	July 1, 2017- June 30, 2018 (one year)	The Quality Improvement Program for Missouri (QIPMO)	QIPMO is a cooperative service between the Department of Health and Senior Services (DHSS) and the University of Missouri Sinclair School of Nursing. The program provides long-term care nursing facility staff with technical assistance and support and is entirely separate from the state survey and enforcement process. The Sinclair School of Nursing utilizes nurses with expertise in geriatrics to work directly with long-term care facility staff to help them learn best clinical practices, improve care delivery, and improve outcomes for nursing home residents. A key focus of the program is helping staff effectively apply the Resident Assessment Instrument process to clinical care, as well as improving the quality of clinical care by monitoring processes and outcomes with quality measures/indicators derived from the Nursing Home Minimum Data Set (MDS). The Nursing Home Leadership Coaching service is designed to assist nursing home administrators and other key operational leaders effectively deal with the complex management issues they face in their daily business.	University of Missouri Sinclair School of Nursing	Long-term care nursing facilities and hospital-based skilled nursing units throughout the entire state of Missouri	This project will provide a Quality Improvement Program for Missouri long- term care nursing facilities and hospital-based skilled nursing units; provide MDS education and support to long-term care nursing facilities and hospital-based skilled nursing units. In the previous contract year, there were a total of 1,341 site visits made by either the nurse consultants or the leadership coaches. An additional 6,821 contacts (e.g., telephone, email) were made; provide education/training on Quality Improvement/Quality Assessment and Performance Improvement processes to long-term care nursing facilities and hospital- based skilled nursing units.	Training	Results pending

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Missouri	\$77,265.00	July 1, 2017- June 30, 2019 (two years)	Restorative Sleep Vitality Program (RSVP)	RSVP is designed to support residents' health and well-being by helping them have a more restful and refreshing sleep throughout the night. This program will implement an RSVP quality improvement project in at least 40 Missouri nursing homes and will recognize the importance of both the environmental factors, as well as the individual resident's preferences for promoting quality sleep.	Missouri Coalition Celebrating Care Continuum Change (MC 5)	Missouri nursing homes	The project team will obtain corporate level commitment from a minimum of 40 nursing homes to provide resources and support for implementation of an RSVP quality improvement project in each nursing home. Provide technical assistance and support to these nursing homes (to help them implement an RSVP program); utilize the quality improvement methodology of the Institute for Health Improvement Collaborative Model and Quality Assurance Performance Improvement tools; track five quality measures (pre- and post- project) in each home to determine depth of improvement: depression, behaviors, pain in long term residents, use of antipsychotics, and pressure ulcers.		Results pending

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Colorado	\$20,000.00	March 28, 2016 – March 28, 2017 (one year)	Eliminating Alarms and Falls, Cycle 7	Educate provider communities about the correlation between alarms and falls; introduce care teams to strategies for reducing the use of alarms.	Edu Catering	Nursing home staff and residents in participating facilities	Monthly reports communication materials with/for participants; program information, presentation and survey; summary report and presentation	Training	As a result of the project, a substantial reduction in alarms was seen in participating facilities.
Colorado	\$20,941.00	March 11, 2016 - March 11, 2018 (one year)	Create and Update Information Resources for the MOST (Medical Orders for Scope of Treatment)	This program aims to increase awareness and utilization of the MOST (Medical Orders for Scope of Treatment) program.	Colorado Advanced Directives Consortium	Nursing home residents	Monthly reports and invoices; communication with participants; program promotion, presentation, and survey; summary report and presentation	Training	Trainings have been delivered; currently awaiting project final report/curriculum
Colorado	\$11,860.00	February 11, 2016 – February 11, 2017 (one year)	Provide Comfort Matters Dementia Program Training to Providers	This project is focused on provider adoption of person- centered dementia care approaches.	Christian Living Communit- ies (currently doing business as The Suite at Someren Glen)	Christian Living Community residents and staff	Monthly reports and invoices; final presentation	Training	The training was well received by providers, who retained discussion points about strategies for interacting with individuals experiencing dementia symptoms.
Colorado	\$13,104.00	February 11, 2016 – February 11, 2018 (two years)	Eden Education Training	This project will provide the Eden Education Growth Program training on approaches to care.	Eben Ezer Lutheran Care Center		Monthly reports and invoices; final presentation	Training	Trainings delivered; awaiting project final report/ curriculum

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Colorado	\$9,872.00	February 23, 2016 – February 23, 2017 (one year)	Develop a Certified Nursing Assistant (CNA) Program	This project will expand the availability of CNAs, enabling more consistent assignments.	Spanish Peaks, Huerfano County Hospital District	Nursing home residents in Huerfano County	Monthly reports and invoices; communication with participants; program promotion, presentation, and survey; summary report and presentation	Training	Five full time (FTE) and five as needed (PRN) staff added to staffing pool
Colorado	\$28,257.00	February 12, 2016 – February 12, 2018 (two years)	Increase the time that food is available for residents, decrease the use of artificial supplements, and decrease weight loss.	This project will work towards the utilization of a habitation model of care. The project focuses on food and its ability to improve the well-being of those living with dementia. This project is designed to educate and enable care partners to provide "real food when and where elders want it" in order to: change the environment in which those living with dementia obtain their daily meals, and help decrease use of supplements and weight loss in those living with dementia. As part of this project, person- centered dementia training will also be provided for all staff.	Brookshire House (doing business as Conifer Care Communities LLC)	Nursing home residents at Brookshire and throughout Colorado	Monthly reports and invoices; communication with participants; program promotion, presentation, and survey; summary report and presentation.	Direct Improvements to Quality of Life	Accessibility to foods enhanced, use of supplements decreased. Final report pending
Colorado	\$54,000.00	March 16, 2016 – March 16, 2017 (one year)	Operate an intergenerat- ional summer camp in three nursing homes on the Front Range to improve the understanding of the aging process and the connection between youth and elders.	This project will build relationships across generations and increase interactions.	Focus Consultation	Residents in three nursing homes on the Front Range; other Colorado nursing homes (who will receive access to a manual to help them replicate this project)	Pre- and post- data results; Eden Alternative well- being results; facilitator's guide and intergenerational camp manual; end of camp event summary	Direct Improvements to Quality of Life	Residents and students provided very positive feedback. Many students expressed interest in volunteering and returning. Facilities are looking forward to the recurring event.

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Colorado	\$38,793.00	November 15, 2016 – November 15, 2018 (two years)	Person- Centered Dementia Care: Reducing Anxiety and Agitation to Improve Well- Being. Cycle 8	This project will provide training and consultation on reducing resident anxiety and agitation for staff and families at six skilled care communities in the Denver Metropolitan area.	Alzheimer's Association Colorado Chapter	Bear Creek Center; Bethany Rehab Center; Forest Street Compassionate Care Center; Garden Terrace; Health Center at Franklin Park; Julia Temple Health Care Center	Expected deliverables for staff and families include greater knowledge of: identifying triggers for behaviors; the process for assessing challenging behaviors and strategies to address common dementia- related behaviors. As a result of the training, staff and families will have more confidence in their skills and abilities.	Training	Results pending
Colorado	\$146,875.00	November 22, 2016 – June 30, 2019 (31 months)	Music and Memory Program	Through this project, items necessary for implementing the Music and Memory program will be purchased and deployed.	Colorado Health Care Association	Colorado nursing home residents	As part of grant reporting, receipts for iPods and iTunes, monthly status reports, and invoices will be provided.	Direct Improvements to Quality of Life	Initial certifications complete
Colorado	\$33,662.00	November 2016 – November 2017 (1 year)	Restorative Sleep Vitality Program	The project seeks to improve the lives of residents by utilizing approaches that will improve the quality of their sleep. Through this project, three variables will be introduced: reduction in noise, light, and inactivity during waking hours. These will be introduced in an attempt to mitigate the negative aspects that these variables have on the quality of residents' sleep. This project is designed to provide person-centered training for residents, families, and staff in order to reduce resident falls, pain, behaviors and pressure ulcers.	Vivage	Nursing home residents of three Colorado long-term care facilities	Data will be collected on the changes made through this project and will help identify what improves sleep, enabling new night-time practices to be extended throughout Visage's communities. Sleep patterns will be measured, and each of the three participating communities will measure indicators that they believe will be affected by this project (considering their unique populations). These indicators are: falls, pain, and pressure ulcers.	Direct Improvements to Quality of Care	There was documented reduction in sleep disturbances and reported improvements in well-being. The facility discovered and eliminated industrial level noise at night in some areas of the facility.

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Colorado	\$7,838.58	January 1, 2017 – November 3, 2018 (22 months)	CMS Dementia Care Focused Survey	Education to persons who serve residents living in Colorado nursing homes with dementia.	Edu- Catering	Colorado nursing home residents	Eleven workshops will be conducted throughout the state; communication with participants, monthly reports, and invoices will be delivered; and survey, summary report, and presentation will be provided.	Training	Results pending
Colorado	\$7,521.85	January 12, 2016 – January 12, 2017 (one year)	Promote Stronger Relationships Across Generations	This intergenerational program uses gardening as a means to build relationships and shared knowledge.	Green House Homes at Marisol	Residents of Green House Marisol	Monthly project progress reports (including information on any setbacks or lessons learned), as well as invoices for purchased supplies, will be submitted.	Direct Improvements to Quality of Life	Residents and children who participated provided positive feedback. Residents now have small garden areas for each home.
Colorado	\$1,000.00	November 1, 2017 – June 30, 2018 (eight months)	Meaningful Ways to Honor Death in Long-term Care Communities	This project seeks to develop best practices for honoring death in long-term care facilities.	Larimer County Area on Aging	Larimer County Facilities	Develop best practices for honoring death in long-term care facilities	Resident or Family Council	Results pending
Colorado	\$7,437.00	December 1, 2017 – June 30, 2018 (seven months)	It's Never Too Late (iN2L) - Alzheimer's Unit	This project will enable a rural facility to purchase iN2L system for their Alzheimer's unit. Through the program, the facility aims to reduce sun- downing. The facility will also compare usage of iN2L in the Alzheimer's unit with usage of the existing system in other areas.	Southeast Colorado Hospital District	Southeast Colorado Hospital District Alzheimer's unit residents	Expected deliverables include: report(s) on usage, engagement, and sleep regulation; data that compares Alzheimer's unit iN2L usage to non- Alzheimer's unit iN2L usage; quality of life improvements.	Direct Improvements to Quality of Life	Results pending
North Dakota	\$12,000	July 5, 2017 – November 30, 2017 (5 months)	Infection Control in Long Term Care Facilities	This two day presentation by Karen Hoffman and Evelyn Cook was specifically planned to address the requirement of the infection preventionist at each nursing facility. The content of the presentation was directed at infection prevention staff and covered all aspects of nursing home infection control.	Karen Hoffman and Evelyn Cook	All nursing home residents in North Dakota	Two day presentation was attended by 100 staff from the 80 nursing homes in North Dakota. We plan to monitor the infection control citations into the future to see if they are affected by the increased training opportunity.	Training	70 of North Dakota's 80 nursing homes had representation at this two day training that took place on October 26 and 27, 2017. All State Agency surveyors were at the presentation. Many questions were answered by the presenters and the post presentation evaluation were positive.

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South Dakota	\$8,586	September 27, 2017 – September 28, 2017 (2 days)	Project to improve person- centered care within LTC facilities in South Dakota.	South Dakota Healthcare Association (SDHCA) 66th Annual Fall Convention Educational Sessions on the New Requirements of Participation: The purpose of these sessions is to ensure that long term care centers understand the person-centered care regulations in the new Requirements of Participation (ROPs) that are scheduled to be implemented in the fall of 2017. The sessions will feature presentations by Carmen Bowman, a nationally recognized leader and expert in the long-term care regulatory environment and implementing change in long term care centers. The educational sessions will be in-person, face-to-face learning opportunities. The session objectives have been identified as follows: providers will be able to list the new CMS requirements in regards to person centered care, providers will be able to describe culture change best practices that enhance compliance with the ROPs, and providers will be able to assess their center's compliance with the new regulations.	South Dakota Health Care Association	All (109) Long Term Care Facilities in SD	The attendees will be tracked by scanning name badges at the sessions, ensuring that only those who were in attendance receive continuing education credit. After the Convention is complete, evaluations will be distributed to the attendees to gather feedback from the various disciplines and ensure the completion of the objectives for the sessions.	Person-Centered Care	The projected outcome is increased understanding in long term care providers about the CMS definition of person centered care, and the reinforcement of culture change in centers. The sessions will discuss the regulatory requirements, as well as what's new and what remains constant in the regulations and the culture change aspect of person centered care. In addition, long term care centers will be given educational materials around these topics to take back to their centers, giving them a resource to draw on as they implement changes.

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Utah	\$200,000.00	July 1, 2017 – June 30, 2018 (1 year)	Oral Health Project	Provide a one-year oral health program to ten certified long- term health care facilities. This will impact approximately 600 residents by giving them access to care that otherwise may have been out of reach or financially unreasonable.	Senior Charity Care Foundation	Approximately 600 Utah residents in ten certified long term care facilities across the Wasatch Front.	Facility residents will be assessed using the Association of State and Territorial Dental Directors (ASTDD) assessment tool two times during the duration of the project, once at the beginning and then again several months later to determine the effectiveness of the program. In addition to the assessment tool, satisfaction surveys will be provided to the facility administration, staff, residents, and families to help determine the quality of care provided. Data from the assessment and survey will be provided in quarterly progress reports.	Direct Improve- ments to Quality of Care	Results Pending

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Arizona	\$100,000	July 1, 2015 – June 30, 2017 (two years)	Music and Memory Program for Improving Dementia Care	This project will implement the Music and Memory program to decrease behavioral symptoms of dementia and advance better quality of life for residents.	13 Arizona nursing homes	Residents and staff of the participating long-term care facilities	A decrease in the use of some medications is expected.	Direct Improvements to Quality of Life	Results pending
Arizona	\$18,000	June 9, 2017 (one day)	Long-Term Care (LTC) Health Care- Acquired Infection Conference	Through this conference, current best practices for infection control will be identified, with an emphasis on <i>Clostridium difficile</i> infection.	Arizona Department of Health Services (ADHS) Bureau of Long-term Care Licensing; ADHS Healthcare Acquired Infection Program (LTC Subcommit- tee); APIC (Association for Profession- als in Infection Control and Epidemiology) Consulting	Arizona nursing home staff	APIC will present this conference, advancing better awareness of infection control. An expected measure is the reduction of infection control citations (which in turn leads to a healthier LTC resident population).	Training	Results pending

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California	\$1,445,573	July 1, 2015 – June 30, 2018 (three years)	Music and Memory Program for Improving Dementia Care	This project will help advance the campaign to improve dementia care in California's skilled nursing facilities by using the Music and Memory program, which uses personalized music for residents.	State of California; California Association of Health Facilities (CAHF)	At least 300 participating skilled nursing facilities will benefit from the project; this correlates to 4500 residents. Additionally, up to a total of 1200 facilities can benefit from available materials on the CAHF website.	Improve dementia care and quality of life for residents and identify quality assurance performance improvement (QAPI) practices that sustain the program's longevity at participating facilities. The UC Davis School of Nursing principal researcher will be measuring the residents' improvement throughout the course of the study only. The final report will be available to all participating facilities and posted to CAHF's website for the balance of the 1200 facilities. The study did not include resources or training on how to continue the program evaluation, though facilities can manage change and monitor progress through the resident care plan. Facilities were encouraged to use QAPI practices to maintain program quality and expand the program to interested families and residents.	Direct Improvements to Quality of Life	Results pending

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Hawaii	\$4,995.00	June 2016 – May 2017 (one year)	Translation of the Physician Orders for Life- Sustaining Treatment (POLST) Form	In an effort to broaden the understanding and use of the POLST form in Hawaii, this project will translate the POLST form into a variety of local languages.	Kokua Mau	All nursing facilities, home health agencies, and hospitals in Hawaii	POLST form translated into ten local Hawaiian languages	Consumer Information	Translations of the POLST form were made into the 10 most-needed languages (as determined by the State Office of Language Access). The translations are available on the Kokua Mau website: www. kokuamau.org/languages. The grantee has received positive feedback on the translations and plans to survey people about their use. Social workers, nurses, and doctors report that they like to have the translations available to help work through the documents with patients and families. The grantee has also received calls from family members who share positive feedback about working with the form.

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Nevada	\$821,323.00	May 1, 2016 – April 30, 2018 (two years)	Decrease Falls in Skilled Nursing Facilities (SNFs)	This project aims to decrease falls in selected Nevada SNFs by 25%. The Comprehensive Resident Safety and Prevention Program (CRiSP) program is comprised of four key pillars, which contain a collection of best practices to guide facilities in improving their organizational systems through education and quality improvement. These pillars are Culture Change (commit across the organization, develop team skills, adopt safety culture); Leadership (support the front lines, provide coaching and mentoring, establish vision and expectations); Safety (customize care plans, observe and monitor, conduct safety briefings); Measurement (collect data, monitor performance, integrate with QAPI)	HealthInsight	The project will engage 10-12 Nevada SNFs in the falls management program	Quarterly program progress updates will be provided.	Direct Improvements to Quality of Care	Results pending
Nevada	\$180,794.00	December 31, 2016 – December 31, 2018 (two years)	Music and Memory	Nevada's Music and Memory Initiative will certify Nevada's skilled nursing facilities (SNFs) as "Music and Memory" facilities.	Nevada Health Care Association Perry Foundation	Nevada SNFs	Improvements in unnecessary medication use [in facility Minimum Data Set (MDS) indicators] will be reported quarterly. Reports to the SNF community will also be made through annual conferences.	Direct Improvements to Quality of Care	Results pending
Nevada	\$418,246.00	August 1, 2016 July 31, 2018 (two years)	Antimicrobial Forecast Project	This project will create a consolidated, integrated, and comprehensive view of antimicrobial resistance patterns in the State of Nevada.	University of Nevada, Reno	Nursing homes in rural Nevada (all counties, except Washoe and Clark)	Quarterly program progress updates will be provided.	Direct Improvements to Quality of Care	Results pending

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Alaska	\$48,000.00	October 15, 2016 – January 30, 2017 (Conference held: January 9-10, 2017)	Long Term Care (LTC) Leadership Conference to Improve Resident Quality of Care	The intended outcome of this conference is for leadership to learn new, emerging information and best practices and bring this knowledge back to their facilities. This will enable them to implement changes in their facilities, leading to improved services (which will have a positive impact on residents).	State of Alaska's Health Facilities Licensing and Certification	18 long term care facilities in Alaska	Conference registration, materials, air fare, lodging for three nights, and transportation	Training	The 18 facilities participated, and the conference was successful. Information was shared from several state divisions, the Quality Improvement Organization (QIO) and the LTC association. The leadership of the LTC facilities actively participated and have shared that the event enabled them all to learn of upcoming changes and available resources all at one time.
Idaho	\$49,312.28	2016 - 2018 (two years)	Oneida County Long Term Care (LTC) Facility Technology Grant	This project focuses on the implementation of a variety of technologies for improving the quality of life for residents of the Oneida County LTC facility. Through this grant, technology will be used to deliver an assortment of activities, as well as provide each resident with personalized digital music and photos.	Oneida County LTC Facility	No data available	No data available	Direct Improvements to Quality of Life	Results pending
Idaho	\$48,044.18	2016 - 2018 (two years)	Idaho State Veterans Home Boise (ISVH-B) Long Term Care Technology Grant	Through this project, technology products will be purchased; these technologies will foster independence for residents with visual and/or auditory impairments by making information available in large, clear, glare-free print, and/or loud volume. The project's intended outcomes include increased cognitive function and decreased anxiety of residents. The project is part of ongoing efforts to foster independence, improve quality of life, and provide person-directed care for IS VH-B residents.	IS VH-B	No data available	Secure three SMARTboard® interactive white boards, accompanying portable stands, and dedicated computers as well as three sets of flight simulators with accompanying hardware. Additionally, ISVH-B will secure 25 iPads with carrying cases and screen protectors.	Direct Improvements to Quality of Life	Results pending

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Idaho	\$49,172.00	2016 - 2018 (two years)	Idaho State Veterans Home Lewiston (ISVH-L) Long Term Care Technology Grant	The objective of this project is to purchase technology products that enable improvements in the quality of life and care that residents receive daily.	ISVH-L	No data available	No data available	Direct Improvements to Quality of Life	Results pending
Idaho	\$49,415.63	2016 - 2018 (two years)	Idaho State Veterans Home Pocatello (ISVH-P) Long Term Care Technology Grant	Through this project, technology products will be purchased; these technologies will foster independence for residents with visual and/or auditory impairments by making information available in large, clear, glare-free print, and/or loud volume. The project's intended outcomes include increased cognitive function and decreased anxiety of residents. The project is part of ongoing efforts to foster independence, improve quality of life, and provide person-directed care for IS VH-P residents.	ISVH-P	No data available	Secure three SMARTboard® interactive white boards, accompanying portable stands, dedicated computers as well as three sets of flight simulators with accompanying hardware. Additionally, ISVH-B will secure 25 iPads with carrying cases and screen protectors.	Direct Improvements to Quality of Life	Results pending
Idaho	\$43,399.00	2016 - 2018 (two years)	It's Never Too Late (iN2L) Long-Term Care Technology Project	Through this project, Bingham Memorial will purchase and install iN2L software and therapy equipment, making computer activities accessible and enjoyable for residents. iN2L provides a variety of adaptive and engaging computer-based experiences for residents. iN2L systems are particularly well-suited for dementia engagement programming, as well as innovative therapy interventions.	Bingham Memorial Skilled Nursing & Rehabilitation Center	No data available	Implementation and usage of the iN2L software and therapy equipment.	Direct Improvements to Quality of Life	Results pending

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Idaho	\$4,790.13	2016 - 2018 (two years)	SMART Table Technology for Residents	This project will improve quality of care and life for residents through the use of technology. In particular, technology will be utilized (in lieu of medication or alternate placement) in order to address behavioral disturbances from residents (specifically those with dementia and depression). The SMART table will provide residents with a variety of options to interact with family members (including the ability to enlarge family pictures, watch home videos, etc.), play games, learn and review educational lessons, listen to audio books, and play trivia. This project aims to decrease: the amount and severity of behaviors noted, especially from the facility's dementia population, and depression symptoms expressed during the PHQ-9 depression assessment interview.	Kindred Nursing and Rehabilita- tion Mountain Valley	No data available	Through this project, a SMART table will be deployed at the facility. The PHQ-9 depression assessment will be administered to ascertain whether a decrease in depression symptoms occurs.	Direct Improvements to Quality of Life	Results pending

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Idaho	\$35,048.92	2016 - 2018 (two years)	It's Never Too Late Long- Term Care Technology Project	The purpose of this project is to provide person centered care and improve resident self- esteem and overall quality of life (including relieving feelings of hopelessness, loneliness, and boredom). Residents will use iN2L to stay engaged and connected through the use of wellness and engagement content and stay connected applications. This project also aims to reduce anti-psychotic medication use and the risks of debilitating side effects of anti-psychotic medication. It also seeks to address behavioral and psychological symptoms of dementia and traumatic brain injury, which include verbal and physical aggression, wandering, confusion and agitation.	Desert View Care Center of Buhl	No data available	iN2L adaptive technology	Direct Improvements to Quality of Life	Results pending
Idaho	\$40,000.00	May 4-5, 2017 (two days)	Resident Safety and Quality Improvement Conference	This project will provide scholarships for the following people to attend the Idaho Resident Safety and Quality Improvement Conference, "Thriving Through Change: A Rx for Resilience": up to four staff from skilled nursing facilities (SNFs) and & SNF/Nursing Facilities(NFs) (a direct care staff member, Administrator, Director of Nursing, and Quality Assurance/Quality Improvement Coordinator); the State Ombudsman; and long-term care (LTC) state agency survey staff	Idaho Board of Examiners for Nursing Home Administra- tors	Up to four staff from SNFs and SNF/NFs; the State Ombudsman; LTC state agency survey staff	Each scholarship will include conference registration, as well as hotel, travel, and meal costs.	Training	Results pending

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Idaho	\$46,898.00	October 27, 2017 (one day)	Pressure Ulcer Prevention Coalition (PUPC) Conference	This project will provide a scholarship for each skilled nursing facility to send two staff (a registered nurse and/or a licensed practical nurse) to attend the Idaho Pressure Ulcer Prevention Coalition's 11th Annual Consensus Meeting in Boise, Idaho. At the meeting, the staff will receive information and education, and will network with peers regarding how to reduce the number of avoidable, high-risk pressure injuries in residents residing in skilled nursing facilities/nursing facilities (with resulting improvement in care and quality outcome measures).	The Idaho Health Care Association and the Pressure Ulcer Prevention Coalition	No data available	Venue, catering, speakers, continuing education, advertising, event planning services	Training	Results pending

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Idaho	\$34,335.07	Summer 2017	Mini- technology	To enhance facility technology to improve quality of care and life for residents through the use of technology. To address behavioral disturbances from our residents, specifically those with dementia, depression, and behaviors, utilizing technology in lieu of medication or alternate placement. To decrease the amount and severity of behaviors noted, especially from our dementia population, as well as a decrease in depression symptoms expressed during the PHQ-9 depression assessment interview. The table enables residents a multitude of options to interact with family members (including the ability to enlarge family pictures, watch home videos, etc.), play games, learn and review educational lessons, listen to audio books, and play trivia.	Mountain Valley of Cascadia	No data available	Beams Professional Edition-Music therapy, Yamaha Acoustic Grand piano, Q-pads, smart TV, TV cart, Headphones, Xbox	Direct Improvements to Quality of Life	Results pending

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Oregon	\$200,128.00	Summer 2017	The Echo Project	The project aims to develop more knowledgeable and skilled front-line nursing home staff. Through training and education, front-line staff will be better equipped to deliver person- centered care in addressing nursing home residents' mental health concerns and behavioral issues.	The Oregon Health Authority (OHA) Health Systems Division will work closely with the Oregon Rural Practice- based Research Network (ORPRN) to create and deliver this program with the OHA project team	20-30 long-term care facilities in Oregon	The creation of an Oregon- relevant, 24 session curricula that can be utilized in the future by different nursing homes. The project will deliver 24 ECHO sessions (focused on geriatric mental health) to nursing home staff, as well as recordings of the didactic presentations (which can be viewed by nursing staff on their own schedules, or as part of all-staff meetings). Four reports on program administration and results of evaluations (due in months 4, 10, 14, and 18) will be submitted from ORPRN to the OHA Health Systems Division.	Training	Project launch event, facility recruitment, expert panel and curriculum development were initiated in Fall 2017. The program commences March 2018 - April 2019.
Oregon	\$149,580.00	10 -12 months in 2017	Portland State University (PSU) Resident VIEW	PSU's Institute on Aging is developing a tool to assess person-directed care (PDC) from the point of view of residents, called the Resident VIEW (Voicing Importance and Experience for Well-Being).	Portland State University	Nursing homes within a 100- mile radius of Portland (constituting four areas: Portland, Portland metropolitan area, I- 5/Willamette River corridor, and rural communities)	Tuition, travel, data analysis	Direct Improvements to Quality of Life	Results pending

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Washingto	n \$124,486.50	Fall 2017	Music and Memory Program	Music and Memory is a popular music therapy program that has been increasingly adopted in nursing homes to support individuals with dementia. It is an example of a non- pharmacologic treatment to address behavioral issues of residents with dementia. This program uses personalized playlists delivered on iPods or other digital devices, which are set up by caregivers who are trained in the program. The underlying premise of the Music and Memory program is that these musical favorites tap deep memories that are not yet lost to dementia. The awakening of these memories can facilitate residents to communicate, engage, and socialize.	Washington State Department of Social Health and Services; LeadingAge Washington	45 Washington nursing homes	Music and Memory program supplies/costs, iPod shuffles, headphones, speakers, USBs, laptop, external hard drive, travel expenses	Direct Improvements to Quality of Life	At the completion of the first quarter, all 45 nursing homes have taken the training and have been certified in Music and Memory. LeadingAge Washington is currently processing the requests for equipment from each nursing home.